A SYSTEMATIC STUDY OF
PSYCHOANALYTIC PLAY INTERVIEWS
WITH 4-6 YEAR OLD CHILDREN:
A METHODOLOGICAL INVESTIGATION

STEVEN ROBERT MARANS

This thesis is submitted as part of the requirements for the
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Department of Psychology,
University College London.

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ABSTRACT

Child psychoanalytic work, and developmental theories rising from it, depend to a large measure on the observation of children's play. The activities of young children have been studied from a variety of perspectives in the course of the study of cognitive development, language, social cognition, and creativity. Despite the pivotal importance of play in psychoanalytic understanding of drives, wish fulfilment, and the achievement of mastery, there have thus far been no empirically based systematic studies of the child psychoanalytic play interview. Thus, little is known about common themes of play and modes of presentation. Even less is known about how analysts arrive at inferences about the latent content of play and how hypotheses concerning psychoanalytic inferences about the child's psychic functioning of developmental stages are arrived at.

The aim of this program of work was to fill this gap. Two series of studies are reported. The first concerned a set of naturalistic investigations aimed at developing and elaborating the psychoanalytic description of play in the context of a psychoanalytic play interview. The second series of studies aimed at perspectives of psychoanalytic generalizations identifies in the first series of investigations in order for it to be subject to rating by blind raters. These generalizations fall into six categories: 1. thematic content; 2. level of arousal; 3. emotional expressivity; 4. the child's attitude to the analyst; 5. the role assigned to the analyst by the child; the analysts' interaction with the child. Separate
studies tackle each of these domains. In each case, coding schemes were evolved to translate observable behavior into psychoanalytically inspired categorization. The face validity and inter-rater reliability using a time sampling and aggregation of each domain is reported. The findings indicated that in almost all domains a theoretically coherent coding system could be developed. The reliability studies yielded inter-rater agreements ranging from good to excellent although differences between domains emerged.
CHAPTER ONE
INTRODUCTION

Child Psychoanalysis: Treatment and Research

Psychoanalytic treatment has been used with children with a wide range of disturbances—from neurosis to delinquency to psychosis—over the last 60 years (Aichorn, 1935; A. Freud, 1926; Hug-Hellmuth, 1921; Klein, 1926). Thousands of children have been treated by well-trained clinicians, yet few systematic studies of the therapeutic process or of the content of analytic hours have ever been undertaken. The range and types of approaches used by therapists are well-described in clinical case reports and theoretical discussions, of which more than 300 have been published during the past decade alone. However, during this period fewer than 15 reports of rigorous psychoanalytic research of the process or content of those many hours have appeared in the literature.

The slow development of adequately rigorous methods for what occurs between the psychoanalyst and child patient has been a serious impediment to advancing research in the area of psychoanalytic work with children. Unlike contemporary studies in which there have been substantial efforts to develop systematic methods that focus on what occurs between the adult therapist and patient (Crits-Christoph et al., 1988; Gill and Hoffman, 1982; Horowitz, 1979; Luborsky, 1977; Luborsky, et al., 1985) child analytic research has continued to be dominated by the clinical reports of single cases or of small groups of children with related problems. These studies and those involving observations of children
who are not in treatment (Emde, 1980; Freud and Burlingham, 1945; Provence, 1962; Spitz, 1945), have been used to illuminate a general theory of child development and specific problems and mechanisms that may give rise to psychopathology. While there is considerable criticism of psychoanalysis for its lack of scientific rigor (Grunbaum, 1984; Kazdin, 1988; Popper, 1963), there has been broad public and professional acceptance of the findings of child psychoanalysis in areas of great practical concern. As described in Chapter Two, child analysts have contributed profoundly to the understanding of developmental phases, the impact of separation and institutional care, development of handicapped children, and legal and social policy concerning children and families. The principles and findings of child analysts are so broadly accepted—e.g., the child's need for continuity of attuned caregiving—that they are frequently not cited specifically and are taken as "givens" in nosographic and conceptual lexicons—e.g., the concept of separation anxiety in current classification schemes such as Diagnostic Statistics Manual of the American Psychiatric Association (1987). Thus, controlled examination of psychoanalytic methods of observation, what occurs between the analyst and child patient, and the underlying theoretical frames of reference are quite important in understanding the empirical basis for various principles which are widely accepted in clinical work, service delivery, and social policy (Edelson, 1984; Wallerstein, 1986).

The Classic Approach: The Single Case Report

The broad justification for the use of single cases, studied and reported in depth, is that they provide a detailed chronicle of the treatment process and
examine phenomena associated with specific theoretical questions. The organization of observations in case narratives is similar to that in natural history and seems especially suitable for capturing the complexity, variation, and individuality of a particular child's inner life. When well done, the case report allows the reader to experience the scene as it may have appeared to the explorer himself.

In addition to characterizing the unique features of a particular patient, the single case report generally also attempts to highlight and explicate variables that are likely to be seen in other cases. There are persistent, unsettled problems as to how this latter goal can be achieved. These revolve around knotty issues such as (a) reliability of the observations, (b) inability to replicate the findings by going back and looking again, and (c) what and how material should be presented (e.g., verbatim accounts of single hours versus broader characterizations of the treatment, reports of an entire analysis versus a focus on particular periods, descriptive phenomenology versus an emphasis on metapsychological terminology).

While single case reports will continue to stimulate interest within the psychoanalytic community, this methodology will justifiably be questioned in relation to generalizability of findings and the extent to which technical issues are of interest or use to those using other types of theoretical frames of references in research on or treatment of children and their development.

Towards an Integration of Case Reports

For several decades, academically-oriented child analysts have recognized the limitations of the narrative, single case report. This has led to discussion about how to (a) develop schemes for classifying and organizing data from individual
cases in child analysis in order to (b) integrate the findings from individual cases into a coherent body of knowledge about diagnosis, treatment, and outcome. The most ambitious program of this type is represented by the work of Anna Freud and her colleagues at the Anna Freud Centre, the Diagnostic Profile (A. Freud, 1965) and the Hampstead Index (Sandler, 1962). Both instruments have served as frameworks for the organization of clinical material based on the findings from hundreds of diagnostic evaluations and completed child analyses in the Anna Freud Centre. They are designed to reflect a metapsychological view of children's development in which drives, environmental factors, endowment, emerging mental structure, etc., are all seen as interrelated. While true to psychoanalytic process and theoretical constructs, both instruments, as they stand, are limited in their application to controlled studies of treatment process and outcome.

These limitations stem from the basic methodological issues rooted in the classical approach to process notes and the single case report: reliance on the clinician as observer and reporter, the absence of uniform means of recording raw clinical data, failure to test either the Profile or Index for reliability, the lack of development of means of reducing the data for the purposes of factoring and assessing specific effects. Development of methods in these areas would enable psychoanalytic investigators to make use of the instruments themselves and wealth of material they meticulously describe.

Controlled Studies of Psychoanalytic Treatment

The work of Heinecke and Ramsey-Klee (1986) provides a model of systematic study of psychoanalytic data as well as the outcome of child psycho-
therapy. In comparing child psychoanalytic treatment with non-intensive therapy, they (1) controlled for age, IQ, DSM-III diagnoses, deficit in academic functioning, length of treatment, and socioeconomic status; (2) manipulated independent variables (specifically, frequency of sessions); and (3) developed psychoanalytic measures of assessment and outcome by operationalizing and establishing reliability for Diagnostic Profile headings.

In looking at the impact of the two different modalities on subjects' reading levels, standard pre- and posttest measures (Stanford-Binet-R; WRAT; parts of the Rorschach, TAT and Michigan Picture Test and the Draw-a-Person test) were complemented by ratings based on the Hampstead Diagnostic Profile. Profile headings were operationalized using 46 clinical ratings scored on a ten-point scale. Profiles were constructed on each subject at the beginning and end of treatment and on follow-up. The Profiles and ratings were made by both the child's therapist and an independent diagnostic psychiatrist. (The median reliability of these ratings was 0.82 at the beginning, 0.87 at the end, and 0.93 at follow-up). Factor analysis of the Profile ratings revealed four domains: (1) effective adaptation and adequate self-esteem, (2) capacity for relationships, (3) frustration tolerance and the ability to work, and (4) flexible adaptation (flexible ego defensive functions).

In the first study in his series, Heinecke compared once weekly psychotherapy with four times weekly psychoanalysis and found that in the first year of treatment children seen once weekly showed a greater rate of improvement in reading. The two groups did not differ during the last phase of treatment, but at
two years posttreatment the children who had received psychoanalysis showed a greater improvement (Heinecke, 1969).

In a second study, Heinecke and Ramsey-Klee (1986) further manipulated the independent variable of treatment frequency by introducing a third comparison group which received once weekly psychotherapy for one year and then shifted to four times weekly sessions. Improvement in reading and personality variables showed the same types of interesting findings as observed earlier. In the first year of treatment the children seen in once weekly therapy showed significantly greater improvement in reading than those in more intensive treatment; in the end phase of treatment there were no significant differences across groups. However, one year after treatment the two groups in psychoanalysis showed significantly higher rates of improvement than the group remaining in once weekly psychotherapy. In addition, these two groups of children in analysis also were progressing at a greater rate in their development, particularly in the dimensions of relationships and flexible adaptation.

While Heinecke’s methodology (Heinecke and Ramsey-Klee, 1986) does not address the issue of identifying characteristics of the child-therapist interaction or the types of interventions that were most useful to specific patients, it is a major contribution to operationalizing and making use of psychoanalytic concepts for a more comprehensive examination of children as they present at various points in the clinical setting.
Psychobiology and the Single Case Method

A third approach to psychoanalytic research has been developed by Moran and Fonagy (1987), who have attempted to investigate the relationship between insight derived from psychoanalytic treatment and symptomatic improvement. They chose a clinical population of children with brittle diabetes who had not responded to behavioral and/or cognitive strategies aimed at establishing diabetic control.

In a first study (Moran, 1984), the weekly records of a three and a half year, five times a week psychoanalysis of a diabetic teenager with recurrent diabetic imbalance were examined. A selected set of analytic themes was operationalized and independently rated for each week of the psychoanalysis. A weekly index of the quality of diabetic balance was obtained for the same time period (but was not made available to the treating child analyst), and time series analysis was used to examine the relationship between psychoanalytic themes and glycosuria. Two themes within psychoanalytic sessions were found to predict short-term changes in diabetic control: oedipal conflicts, and diabetes as an expression of psychic conflict. Verbalization of conflict within sessions was strongly associated with improved diabetic control as manifested in records of blood glucose levels and in reduction of hospital admissions (2 to 5 hospitalizations/ year prior to analysis, one during the course of several years of treatment, and none in a four year follow-up period) (Moran and Fonagy, 1987a).

In a second project, Moran and Fonagy studied 19 children during hospitalization for brittle diabetes (hyper- or hypogly-cemia and at least two hospitalizations in the previous year). All subjects (mean age 12.8 years) were
medically managed in a similar fashion. Children in the treatment group (N = 11) received psychoanalytic psychotherapy conducted by experienced child analysts. Those in the comparison group (N = 8) received no psychotherapy. Measures of glycemic control, including glycosylated hemoglobin (HBA1), were compared on admission and discharge from hospital and at follow-up periods of 3 months and 1 year after termination of psychotherapy. HBA1 levels remained elevated and unchanged for the children in the control group; those who received psychotherapy showed a significant reduction at 3 months and 1 year.

In choosing a patient population with a chronic illness, Moran and Fonagy have developed models for using a biological measure as a dependent variable in the assessment of both treatment process and outcome. In their single case design, measures of clinical process continued to rely on process notes provided by the clinician. While these notes were sensitive to clinical issues, there was no way to go back to the original session to see if other observers would provide similar "process notes" or ratings on the basis of the raw data. The use of independent means of recording data from treatment sessions (e.g., audio- or videotaping), in combination with the development of a systematic format for describing sessions and further development of more descriptive ratings of the clinical data, might increase the accessibility of the methodology and its replication by other researchers.

The findings of these studies are provocative in indicating that relatively brief, analytically-oriented treatment can have profound effects on a serious childhood medical condition. Future work will be needed to make an integrated, psychobiological approach accessible to many other children. In addition, such
work will provide research opportunities for following the effects of psychotherapeutic intervention through the use of biological measures.

**Towards the Objectification of Psychoanalytic Data**

To date, the raw data of the actual psychoanalytic work—what actually takes place behind the closed door of the play-room—have not been accessible to systematic investigation. Researchers in child analysis have relied on the reports of clinicians or on distal, dependent measures (such as psychological test data). Second, the conduct of the treatments has been based on broad principles of therapeutic technique and the child's special needs, as determined by the clinician; there has been less effort at rigorous definition and assessment of the specific treatment interventions. Currently, child psychoanalytic investigators are trying to remedy these difficulties through attempts to develop reliable ratings of children's presentations in the clinical setting, to use indirect observation and recording of children's sessions with analysts, and to develop manualization or formalization of treatment techniques.

Grave concerns have been raised among psychoanalysts about the possibility that systematic research will distort the primary goals and process of child analytic treatment. Such distortion could arise in many ways. To the degree that research would require alterations in technique (e.g., specific types of interpretations, changes in frequency of sessions, or the like), the therapeutic priorities might be obscured. Similarly, a therapist might be inhibited or change his approach if he felt that he was being scrutinized or judged. From the child's point of view, observations might make him more self-conscious and resistant or give
the sense that the work was not for him but for his parents or others. Furthermore, the essence of child analysis lies in the ways in which the subtle and long-term process slowly alter the child’s presentation. Central to this process is the understanding of the child by the analyst which is then conveyed to the child through verbal and nonverbal means. The complexities of this process have been approached through the concepts of metapsychology and technique; these modes of understanding, according to critics, cannot be captured by scales or direct observations over short periods but require the synthetic activity of the analyst himself and can best be conveyed to others through the analyst’s narrative of the total case experience.

Systematic research on child psychoanalysis can be successful only to the degree that the research itself does not distort the underlying phenomena of greatest importance in the analytic process. Thus, investigators have to develop means to monitor the extent of the distorting effect of the studies while trying to bring psychoanalysis within the broader field of scientific inquiry concerning the process of what occurs between child and analyst as well as developing more detailed means of assessing the outcomes of treatment interventions.

**Play in Child Psychoanalysis**

Child psychoanalytic work, and developmental theories rising from it, depend to a large measure on the observations of children’s play. Play activities have been studied from a variety of perspectives in order to achieve greater understanding of the development of cognition, social interaction, language, and imagination in young children (Bretherton, 1984; Fein, 1981; Gould, 1978; Nelson
and Seidman, 1984; Piaget, 1968; Rubin and Pepler, 1982; Schwartzman, 1978, 1985; Sutton-Smith, 1979, 1985). All of these directions of inquiry have a common basis: the recognition that, for young children, play reflects a dominant mode both of communicating and working on tasks that are uppermost in their given phase of development. From a psychoanalytic perspective, play long has been viewed as a window into the inner life of the child, serving mastery, wish fulfilment, assimilation, and reduction of anxiety. Play activities are thought to represent fantasy configurations that are uppermost in the child's mind and accessible to expression. In psychoanalytic formulations, children's play serves the functions of mastery, wish-fulfilment, assimilation, and reduction of anxiety (Erikson, 1963, 1977; A. Freud, 1964; Freud, 1908, 1909; Klein, 1932, 1955; Neubauer, 1987; Solnit, 1987). As such, clinical observation of the actions and language during play provides crucial information about sources of anxiety and attendant defensive activities. The analyst focuses on the specific themes in play, while simultaneously attending to other domains such as accompanying affects and changes or disruptions in the play. It is out of the synthesis of the observations from many domains that hypotheses are generated about the child's developmental status and the dominant concerns and intrapsychic conflicts. The child psychoanalyst is guided in his observations of the child's play by a theory of development and of technique which distinguish it from other types of social and educational relations between children and adults and other methods of clinical investigation. When embedded in a broader therapeutic process and guided by a theory of therapeutic action, the child's play in analytic sessions also serves as a building block in effecting therapeutic change (A. Freud, 1927; Klein, 1932;
Thus, observations of play activities emerging in the consulting room have a central role in the diagnosis and psychotherapeutic treatment of young children.

Generally, investigators of play support the basic assumption that play activities of early childhood provide a central forum for the exploration of pretense or fantasy, properties of the surround and the assimilation/coordination of the two domains (Bretherton, 1983; Garvey, 1977; Hetherington et al., 1979; Piaget, 1962; Rubin, 1977; Sutton-Smith, 1985). However, in view of the central role of play in the diagnostic and therapeutic process, there have been surprisingly few systematic investigations of the specific play themes, modes of presentation, and the methods of observation that lead to clinical inferences and hypotheses.

Indeed, children's play activities have been investigated primarily in nonclinical settings, and most of the research of play has not focused on the use of observations of children's play for the purpose of clinical assessment. Rather, employing both naturalistic observations and experimental paradigms, these studies have emphasized the architecture and characteristic phenomena of play activities as they reflect and serve the development of cognition (Berlyne, 1966; Bruner, 1976; Piaget, 1962; Sutton-Smith, 1979), social adaptation (Fein, 1981; Hetherington et al., 1979; Roper and Hinde, 1978; Rubin et al., 1983; Schwartzman, 1978, 1985; Singer and Singer, 1976; Vygotsky, 1978), and language (Bates et al., 1977; Bretherton, 1984; Fein, 1981; Westby, 1982).

Studies of play that are informed by psychoanalytic constructs have focused primarily on characteristics of play as they serve mastery, wish-fulfilment, assimilation and reduction of anxiety (Erikson, 1963, 1977; A. Freud, 1964; Freud,
1908, 1909; Klein, 1932, 1955; Neubauer, 1987; Solnit, 1987). In addition, psychoanalytic observations of play have been used to construct theories about play as a reflection of psychosexual phases of development (Erikson, 1963; Moran, 1987; Peller, 1952). These contributions have been mainly descriptive in nature. Earlier psychoanalytically informed efforts to examine systematically young children’s play activities (Bach, 1945; Conn, 1939; Despert, 1940; Erickson, 1958; Erikson, 1940, 1941; Lerner and Murphy, 1941) were limited by methodological problems involving data collection and inter-observer reliability. Moreover, these studies utilized structured and semi-structured approaches which were not intended to replicate the play interview employed by psychoanalytically informed clinicians.

Since these earlier studies, the psychoanalytic method of observing and understanding the play sessions of young children has not received intensive investigation as an entity in its own right. Moreover, there is no information about the form and content of analytically oriented play sessions with "normal" children or those who do not come for diagnosis or treatment.

**A Program of Empirical Research**

Despite the pivotal importance of play in the psychoanalytic understanding of drives, wish fulfilment, and the achievement of mastery, there have thus far been no empirically based systematic studies of the child psychoanalytic play interview. Thus, little is known about common themes of play and modes of presentation. Even less is known about how analysts arrive at inferences about the latent content of play and how hypotheses concerning psychoanalytic inferences about the child’s psychic functioning of developmental states are arrived at.
The aim of this program of work was to fill this gap. Two series of studies are reported. The first concerned a set of naturalistic investigations aimed at developing and elaborating the psychoanalytic description of play in the context of a psychoanalytic play interview. The second series of studies aimed at perspectives of psychoanalytic generalizations identified in the first series of investigations in order for it to be subject to rating by blind raters.

The thesis is divided into four sections. The first section includes a review of the psychoanalytic ideas concerning development derived from the observation of children’s play and a review of psychoanalytic ideas regarding the role and characteristics of play in children as well as the methods employed in psychoanalytic play interviews. The first empirical section reports two major empirical investigations. The first study concerned the question of how expert child analysts arrive at generalizations concerning the drive development of the child, in particular libidinal themes. A methodology is evolved in which a panel of judges reviews videotaped play sessions, provides narrative psychoanalytic accounts, and attempts to arrive at a consensual formulation.

In the second study, the same methodology is used to explore how aggressive components of children’s play are represented in play sessions and identified by expert judges.

The third section of the thesis concerns a series of investigations aimed at operationalizing the common clinical generalizations concerning play identified by the first series of investigations. These generalizations fall into six categories: (1) thematic content, (2) level of arousal, (3) emotional expressivity, (4) the child’s attitude to the analyst, (5) the role assigned to the analyst by the child, (6) the
analyst's interaction with the child. Separate studies tackle each of these domains. In each case, coding schemes were evolved to translate observable behavior into psychoanalytically inspired categorization. The face validity and inter-rater reliability using a time sampling and aggregation of each domain is reported. The findings indicated that in almost all domains a theoretically coherent and reliable coding system could be developed. The reliability studies yielded inter-rater agreements ranging from good to excellent, although differences between domains emerged.

The final section of the thesis discusses the significance of this newly developed instrument in the light of psychoanalytic theories based on the observation of play in child analytic interviews. Some of the general problems in developing a psychoanalytically informed rating instrument are considered. The chapter discusses the advantages and limitation of the new instrument, potential applications for its use in clinical research and further psychometric investigations. This final chapter considers the significance of this work from the standpoint of the current status of psychoanalytic work with, and research with children.
CHAPTER TWO

CHILD PSYCHOANALYTIC THEORIES OF EARLY DEVELOPMENT

Introduction

The central concern of the theory of child psychoanalysis is the understanding of emotional life—the experiences of loving, hating, pain, pleasure, longing, guilt and concern—and its representation in the child’s mind. Psychoanalytic investigation focuses on how children develop into individuals with their own minds, feelings and desires and how they become engaged with their parents and others who become important to them. The emphases of child analysis are the internal and private experiences of children, from the first months of life through adolescence; the ways in which bodily and environmental processes influence inner life and the child’s perceptions of the outer world; the ways in which children represent their experiences and their selves; and the mutual interactions between reality and fantasy, inner and outer, adaptation to the shared world of reality and appreciation of personal desires and needs. The theory of child analysis involves cultural and personal history—familial and social influences which have their origin before the birth of the child and which are conveyed to the child through the particular social expectations and caregiving of parents and society as well as the enduring effects of experience and the continuities and discontinuities in the child’s outer and inner life.

Psychoanalytic theories of development begin with somatic experiences and processes, the infant’s bodily sensations and ability to attend to and regulate the
impact of internal and external stimulation. With maturation, these inherent functions become elaborated into increasingly sophisticated forms of organization of the child’s perceptions of himself and others. The physical requirements of the young infant and the parents’ emotional investment in the infant’s well-being are paradigmatic for the unfolding relationships which serve as the context in which neurologically-based systems unfold. At each phase of development, maturing biological demands and capacities assume meaning and find expression in the constructs, including the conscious and unconscious fantasies, that the child develops to make sense of himself and the world around him. The child’s functioning at any one point reflects the mutual interactions between many forces; in turn, the child’s history and current functioning set the stage for the emergence of capacities and vulnerabilities in subsequent phases of personal development (Erikson, 1959; A. Freud, 1936; Klein, 1958).

Throughout childhood, the processes of maturation and development reflect the interaction between biology and endowment—genetically transmitted characteristics, constitution, and the programming for physical change—as well as experience (in the family and broader social world) and the workings of the child’s mental apparatus, as such. The charting of the mutual influences between psyche and soma and their representation in mental life provide a framework for understanding both normal development and illness (A. Freud, 1965).

Data of Child Psychoanalytic Theory

Child psychoanalytic theories of development have grown out of clinical experiences and research with children in varied settings, including (1) the home,
well-baby clinics, school and group living arrangements (Bowlby, 1969, 1973; A. Freud and Burlingham, 1973; Mahler, 1975; Stern, 1985); (2) institutional settings (Spitz, 1945; Robertson, 1958; Provence, 1962); (3) medical or rehabilitative settings (Burlingham, 1975; Earle, 1979; Fraiberg, 1968; A. Freud, 1952; Furman et al., 1968; Moran, 1984; Schowalter and Lord, 1972); (4) the course of determining custody and placement disposition (Goldstein et al., 1973, 1979, 1986); and (5) child psychoanalytic treatment (Anthony, 1980; Bornstein, 1953; Frijling-Schreuder, 1969; A. Freud, 1945; Meers, 1970; Neubauer, 1987; Sandler et al., 1975).

Similar to Freud's earliest work, child psychoanalytic theories of development have evolved, primarily, out of a clinical perspective on infants and children with difficulties. Within the context of clinical care, psychoanalytic observations of children focus on the interplay of features of emotional presentation; cognition; modes of communication; physical activity; themes of play and discussion and patterns of interaction. However, whether in the "unstructured" hours of ongoing psychotherapy or in observations of children in other settings, child psychoanalytic investigators generally proceed by careful observation of the ways in which the child's interests, concerns and patterns of functioning unfold. They integrate the data with information from caregivers about current and past life experiences. The data are used to develop multiple hypotheses regarding (1) implications of the child's biological "equipment" and its impairment on the tasks of development, (2) areas of strength and preferred modalities for adaptation, (3) specific developmental tasks and various ways in which they are negotiated, (4) areas of vulnerability in the path of development, (5) implications of various life
events on the course of development, (6) the nature of unconscious conflict, and (7) defense activity and conflict resolution.

Psychoanalytic theories of development have evolved over the past decades in response to new observations and concepts. Using available observational and historical information, the psychoanalyst attempts to reconstruct a narrative history of the child’s life, a portrait of his inner experiences, relationships and modes of representing himself and others. There is no one uniform, systematized theory in which all major concepts are formally defined; rather, child psychoanalysis as theory consists of a range of related theoretical perspectives. While these share an orientation on inner, emotional experience and developments they differ, to a greater or lesser degree, in particular conceptual emphases. Relating these perspectives to a specific child or phenomenon may highlight theoretical divergences or, alternatively, may be seen to provide a sense of the complexity of development and emotional life.

Categories of Experience

Psychoanalytic concepts of early development have long been organized according to a hierarchy of dominant, bodily zones. The delineation of oral, anal, phallic narcissistic and oedipal phases was meant to map out processes of development from the infant’s earliest dependence on the mother to the adult’s relative independence and autonomy. The goal of these theoretical constructs was to provide a framework for organizing observations. However, the broadening scope of observations of the development of relationships, concepts about the self,
cognition and the like, highlighted a tension within the theory between the notion of continuity and discontinuity of experience. While there are nodal points that mark out different experiences in different periods of life--reflecting a degree of discontinuity--the concept of "stages" as defined by bodily zones is limited when we observe the overlapping of psychological experiences from one period of life to another or, rather, the underlying continuities. The goal of contemporary "phase theory" is to explicate major modes of psychological organization and changes from one epoch to another. In addition, the theory tries to describe and understand the personal and shared meanings of experiences and tasks which are salient in a given period of life as well those which continue to exert influence from earlier periods.

At each phase of development play reflects major modes of psychic organization and provides a window on the salient aspects of current developmental issues and levels of organization and ways in which previous modes exert themselves. The goal of this chapter is to explore ways in which psychoanalytic theories of development are closely linked to the developing structure and content of play.

0-18 Months ("Oral Phase")

Contemporary psychoanalytic theories focus on the ways in which biological processes in this earliest period of development come to have psychological meaning in the infant's rudimentary sense of the self as distinct from others. That is, how do the infant's bodily sensations contribute to the
emergence of an internal, psychological "self" that experiences the body and increasingly guides its actions.

During the first months of life, the mouth plays a central role in shaping the infant's earliest images of himself in the context of the world. In addition its role in eating and sustaining life, the baby uses his mouth—in activities of sucking, licking and biting—as a central organ of perceiving, regulating and altering sensations. In the absence of hunger, the infant mouths, fingers, toes, toys, pacifiers and mother's breast to soothe himself; at once, playing with and experiencing the various physical properties and decreasing his distress. Similarly, his crying when uncomfortable or making high-pitched squeals to attract mother's attention lead him to represent the communicative power of the mouth.

The experiences associated with orality—pleasure in the satisfaction of urges and discomfort when satisfaction is not immediately available—continue to be central to psychoanalytic conceptualizations about early development. In addition, the contributions of early infant research (Emde, 1980; Klaus and Kennel, 1976; Spitz, 1965; Stern, 1985) have focused on a broader range of inborn processes and their influence on the infant's earliest experience of the body and emergence of a "self." The study of variations in the sensorimotor system—including sight, audition, reflexes and muscle tone—and state regulation—sleep/wake cycles, quiet alert periods, withdrawal, gaze, responsivity to comforting—have emphasized the contribution of these "non-oral" intrinsic factors to early patterns of mediating endogenous/instinctual or external/environmental stimulation.
From the beginning of life, the infant’s relationship with his caregivers organizes the ways in which bodily requirements, inborn processes, constitutional and instinctual urges find expression. The mother’s investment in the infant’s bodily needs sensitizes her to the ways she can help diminish the potential for discomfort. Maternal involvement, intimate contact, and play with the infant’s body—feeding, cleaning, holding, cooing, etc.—reflect the mother’s earliest attachment (Bowlby, 1969; Freud, 1914; Greenacre, 1957; Klein, 1958; Mahler, 1975); she "reads" the infant’s cues according to the recognition of specific sources of pleasure and discomfort. In addition, the mother attributes emotional meaning to gross and subtle changes in the infant’s presentation. This guides her response and progressively conveys to the child a sense of meaningfulness of her actions and affection. Inborn hypersensitivities to various stimuli—touch, sound, gastrointestinal and the like—complicate the mother’s task of learning how to understand and establish reliable means of responding to her infant’s needs. The infant’s neurological maturation—e.g., decreasing the prominence of colic or ease of startling and becoming distressed by noise—and the mother’s increased experience often offset difficulties in the early mother-child relationship. It is important to note that the tremendous variation of inborn characteristics in state regulation may play as crucial a role in the infant’s early adaptation as do the contributions of possible conflicts the mother or father may have about various aspects of parenthood.

The mother’s efforts to maximize her infant’s comfort and relieve his distress take over where the infant is not yet able to soothe himself. By insuring that the baby is not overwhelmed by discomfort, the mother contributes to the
child's experience of effectance; his activities can make things happen that alter the child's own bodily sensations. Repetition of patterns of maternal care, in turn, influence and reinforce those behaviors of the infant which promote pleasure and satisfaction of needs. While diminishing physical tension—between need and gratification—and maximizing pleasure appear to be essential tasks during this period of development, experiences of frustration and discomfort are as significant in the baby's maturation and development. In fact, the sequence of discomfort followed by relief as mediated, in part, by the absence and appearance of the caregiver contributes to the infant's growing capacity to more clearly delineate between "me-not me." The discrepancy between the experience of need and satisfaction may include nuances of interaction—failure to elicit a smile, a cuddle, soothing or playful tone of voice, physical proximity as well as hunger or physical discomfort from a soiled diaper. Beginning with the buccal mucosa as a junction between inner and outer, sensations associated with repeated sequences of coordinated activity—sucking, biting, licking, swallowing, looking, listening, touching—foster the infant's capacity to locate and identify the origins of percepts and contribute to the delineation of body boundaries. While the infant's recognition of his mother's face is observable from the earliest weeks of life (Mayes, 1989), by the middle of the first year his response to her is no longer dominated by the satisfaction of his bodily needs. With the appreciation of physical separateness, the infant links the pleasure associated with her ministrations to the person of the mother in her own right. Her presence itself is a source of pleasure and satisfaction; her absence is a source of anxiety. He will look at mother to see if a situation is safe or dangerous and, by this process of
social referencing of the meaning of situations the baby will be socialized into the family. He will learn about the parent’s specific ways of responding (muted or exaggerated, calm or fearful), including how they deal with closeness and separation. The child’s protests at being handled by others, his distress on seeing people other than his mother (stranger anxiety), and his upset on separations from her stem from his feeling that "not here" is "gone forever." With the delineation of boundaries, the infant views his mother as a bridge between himself and the world. In her absence, he/she may appear panic-stricken and "disoriented as if he had lost his connection with his/her newfound world" and with emerging feelings of "self" (Fraiberg, 1959). From within the dyadic relationship, how the mother acts on leaving and how she feels on return will exacerbate or diminish the child’s worries.

Games of peek-a-boo represent a common first structured form of play that develops between the child and mother. Similar games of hiding and finding objects as well as repeated experiences of parents coming and going help the infant on his way to establishing object permanence (Piaget, 1952; 1954)--the ability to conceive that things continue to exist even when hidden, that "not here" is "maybe there." The ability to mentally "hold onto", or internally represent images of the parents in their absence contributes to the infant’s exploration of the world beyond the lap as the child begins to stand, cruise and then take his first steps. The toddler’s ability to move away from the parents under his own steam provides a vivid experience of physical separateness from them well beyond the earlier activities of averting gaze or arching away from mother’s body when held. In another game of gleefully darting away while needing to periodically check
back with the parents, or "refuel" (Mahler, 1975), the toddling infant's explorations contribute to his inner definition of "self"—that is, what can he do in relation to his body and in relation to the central figures in his life (A. Freud, 1965). Increased dexterity, language acquisition and rudimentary cause-effect thinking provide the tools for his research. Optimally, the young child's investment in these burgeoning capacities leads to his "love affair with the world" (Greenacre, 1957) in which the pleasure of mastery facilitates their elaboration. Alternatively, gross disruptions in the dyadic relationship—including prolonged separations between mother and child, mother's emotional unavailability due to severe depression, physical abuse—may lead to the earliest expressions of psychopathology such as failure to thrive, anaclitic depression, hypersensitivity to stimulation or extreme wariness in interactions with others.

The child's psychological differentiation and separation from the parents is accompanied by tension, sadness and anxiety as well; he may sometimes find "walking away" or, being walked away from, a painful experience. The young child often turns to a specific soft blanket or cuddly toy, especially invested with attributes of the mother, to hold and fondle in her absence. Unlike the real mother of separation, these transitional objects (Winnicott, 1965; 1971) can be controlled, played with, and literally held onto by the toddler when his mother is too far away. The capacity to evoke mental images of the self and parents, memories of satisfaction of needs and possible sequences of events are a crucial achievement in this phase and have broad implications for the young child's capacity to remember, and to anticipate interactions with the world. From suckling at the breast to first steps and from random smiling and cooing to words and conversa-
tion, the infant's developing organization of "self" as distinct from the body, is matched by an accompanying elaboration of mental schemas—conscious and unconscious fantasies—of his relationship to the central figures in his life. The increased specificity of feelings—both pleasurable and frustrating—associated to the parents during infancy form a foundation on which internal, mental structures and attachments to others will gain complexity in subsequent phases of development.

18-36 Months ("Anal Phase")

This phase of development obviously owes its designation to the role of elimination and toilet training in early childhood. The capacity to control defecation and urination and the demands of the parents to do so have been seen as paradigmatic for a range of tasks and struggles the child encounters with regard to his body, relationships, impulses and fantasies.

In addition to the toddler's continued exploration of the world around him, heightened anal sensations in this period of development also promote his appreciation for the separateness between him and caregivers. Central nervous system maturation underlies the increased awareness of rectal pressure and anal sensitivity; psychologically, the child's attention becomes focused on yet another area of the body where there is an interface between inner and outer. In defecation and urination, the child experiences a complex process involving bodily feelings, self-control, action and perception. He feels and sees how what is originally inside can become outside, along with a sense of what was previously hidden being public and shared. Defecating and urinating are no longer simple processes that occur in response to physical pressure; they assume meaning as
sources of pleasure that the toddler can control. Investigations of these phenomena are not limited to the experience of toileting alone but are promoted in the toddler's play involving hiding toys and the repeated filling and emptying containers of their contents.

The ability to label and identify parts of the body is concurrent with the ability to regulate pleasurable sensations-through holding and releasing feces and urine; these capacities permit the elaboration of an internal set of representations of the self. A distance is established between the body and the self that experiences the body. As the child represents him/herself as an object that can be perceived, he naturally begins to compare his body with that of others. This capacity to compare leads to the child's appreciation of anatomical differences between the sexes and between child and adult.

Recognition of separateness and specific differences in the body and abilities between the child and adult caregivers (and other children) is crucial in the child's development of "reality testing" and sense of self. In addition, this recognition is also a source of considerable conflict and anxiety. Under the sway of powerful sexual (or, libidinal) and aggressive desires the toddler seeks immediate satisfaction of urges that his developing capabilities alone cannot always deliver. In addition to the motivation provided by need satisfaction--seen throughout development--the child now experiences the satisfaction of his needs as related to his own degree of control and effectiveness. His awareness that he does not share the powers of his parents increases the intensity of his wish for effectiveness; awareness of dependency is often at odds with the wish for autonomy and omnipotent control. Parents are then frequently confronted with the
toddler who is inconsolable about his inability to accomplish a given task or satisfy a need. The child may loudly protest what he can’t do by him and angrily refuse all parental attempts of assistance. The young child crumpling to the floor in tears is a poignant illustration of the struggle between the competing aims of independence and dependence. In this phase, anxiety experienced on occasions of separation from parents is an additional marker of the child’s comparison of his competence with the parents and his continued need to rely on them for care, safety and affection. In earlier separations the infant was frightened and disoriented because he was unable to conceptualize the existence of the mother or father in their absence. In this later period of development however, the child may believe that by his voracious demands, anger and frustration and moves towards independent power he becomes the agent of their destruction. Until reunited with mother, the child imagines that she has gone away from him forever and feels completely alone, bereft and guilty.

In this period, words can now substitute for actions; remembering simple sequences of events can help the child anticipate the immediate future and increased coordination can broaden the range of pleasurable physical activities. These capacities promote the young child’s sense of effectiveness and offer potential diversion from the intensity of needs and impulses that were previously satisfied only by the parent’s immediate response. The child can now tell the mother that he is hungry instead of simply crying. And when she tells him to "wait a few minutes," he may be able to mobilize defenses against feeling hurt and sustain the wait through play--e.g., rolling cars on the floor, knowing that "a few minutes" means, not too long. Alternatively, he may again use language to
implore mother to hurry or crash the cars or other toys as a way of displacing/deflecting the anger he feels towards her for not responding to his needs quickly enough.

While the child is able to tolerate greater amounts of frustration—relative to earlier phases—parental demands to do more or wait just a bit longer introduce conflicts that further the cause of mediating between impulse and action. The child’s fear of losing the parent as the result of his destructive urges and the wish to please the parent and receive praise, are powerful contingencies that often fly in the face of aims of immediate gratification and absolute autonomy. The toddler’s alternation between compliance with, and obstinate defiance of parental rules—and the attendant tantrums—express struggles between passivity and activity and between love and hate. As parents expect more from the child, in the areas of toileting, self-feeding habits, waiting for help and attention for example, they are setting goals for which the child will reach. When they are achieved, the child is proud of himself and enjoys the admiration of his parents; when the demands are too difficult, the child may feel frustrated, humiliated or in danger of losing the parents’ love.

Development in language and symbolization, object permanence and cause/effect thinking set the stage for the child to elaborate his "representational world" (Sandler and Joffe, 1962). Within psychoanalytic theory "self" and "object" representations refer to the organization of the variety of composite images of himself and others the child has internally constructed on the basis of his experiences, urges, and feelings. These concepts are never articulated in consciousness as a sum total but, rather, are expressed as parts in the child’s
ever-changing fantasies, attitudes and behavior. At times the child may comply with the parents' requests in response to his inner view of them as wonderful and all-giving. Alternatively, his angry tirades against them may reflect his feeling that they are frustrating figures who are set on depriving him of pleasure. They may be seen as sources of safety and comfort or as obstacles in his path towards independence. Simultaneously, the child has rapid shifts in his feelings about himself; at one moment victorious and able, another moment frightened and helpless. Moreover, the child may oscillate between his views of himself and parents as all good or all bad—determined by his experience of his own and his parents' loving and destructively hostile urges.

While the child struggles with these varying attitudes towards himself and his parents—internally and externally—the flexibility of the representational world enhances greater self-reliance. Now the child's ability to recall loving images of the parents in their absence allows for longer periods of independent activity sustained by the confident expectation that needs will ultimately be satisfied (Mahler, 1975). This capacity may be typically demonstrated in the child's play in which he imitates parental roles in feeding and soothing "his" babies and cuddly toys. Second, internalized standards—both prohibitive and encouraging—serve as referents in determining consequences of action (i.e. trial action in thought). Finally, in the absence of real gratification of wishes, impulses and feelings can find expression/discharge in the manipulation of self-object interactions in fantasy and play. Here, conscious fantasizing involves day-dreams in which real experiences can be altered or replaced entirely by more gratifying, wish-fulfilling imaginative scenarios. These mental operations involved in fantasizing support the
child’s capacity to tolerate increasing frustration, whether from his own limitations or those imposed by the environment. The young child can now "hold onto" a variety of representations and "play" with them, or pretend. He can use imagination and play for escaping from unbearable disappointment in reality, altering current feeling states and planning courses of immediate and future action. In a broader context unconscious fantasies and their conscious derivatives give expression to the child’s deeply felt longings; conflicts aroused by forbidden urges; attempts at resolving conflicts and as preparation for or postponement of action. As such, fantasies may be a source of pleasure and anxiety. When unconscious fantasies give form to unacceptable impulses and wishes defensive operations will be employed to disguise them before they find expression in conscious thought. The use of displacement of hostile urges onto figures in play may serve a far safer harbor or vehicle for expression than the direct attacks on the original objects of those urges.

In this phase, fantasies and activities that serve to diminish anxiety when these aims and wishes are at odds with reality or internalized standards, expand and becomes more identifiable to the observer. The child’s growing disaffection with messiness and disorder, for example, are signal accomplishments in the anal phase and reflect an active repudiation of pleasurable activities that are in opposition to parental attitudes (reaction formation). For example, play with sand, water, and paints offer a much more acceptable outlet for the pleasure in messing than the toddler’s failure to use the toilet or direct play with feces and urine. By complying with these external demands the child avoids disapproval and reaps the satisfaction of adult approval. Initially having to yield control of his body to the
expectations of others, the child’s growing identification with parental demands and responses make them his own. While vulnerable to re-externalization, the conflict between competing aims is now internal, belonging to the child himself. Anxiety associated with the dangers of aggressivity and from the conflict between loving and hating may be dealt with via various imaginative mental processes for mobilizing fantasies which counteract other more frightening fantasies or which modulate anxieties in other ways. Again, playing at being a monster or, investing toy figures with destructive, "bad" wishes and actions in pretend activities allow the child to give expression to now conflicted aggressive urges without being their direct agent and without placing the parents in the direct line of fire. These defensive processes or mechanisms of defense (A. Freud, 1936) include the child’s disavowal of a particular feeling or aspect of reality (denial), his sense that the feeling belongs to some-one else (projection), or his shifting the target of his feelings from parents to himself, to others or to a toy (displacement). Hostile impulses that run counter to love the child feels towards parents, for example, are disowned. Being fearful of others’ hatred or frightened of monsters and noises in the night are preferable alternatives to the imagined destruction of loved figures on whom the child depends. These mental activities allow the child to express competing feelings of love and hate without needing to relegate them to completely separate images of himself or the parent. His real competence in communicating and acting on his needs independently and the continued experience of the parents' availability promote a psychological "rapprochement" (Mahler, 1975). The child can begin to tolerate an ambivalent attitude towards himself and his parents, between love and hatred and between total dependence
and self-reliance. In this phase, the child’s recognition of others as separate entities and ability to appreciate the specificity of his own feelings towards them, extends to a capacity to empathize with their feelings as well. These achievements are seen in his expressed concern for, and questions about, parental moods and in the designation of feelings to figures used in play.

In the first year of life, physical objects were mouthed and handled as the infant played with and explored their properties as well the bodily sensations aroused in the process. These activities, as described earlier, aided the infant’s delineation of body boundaries (Hoffer, 1949). In the latter part of the second and in the third year, the child uses toys and other play items for the extensive representation and elaboration of daily experiences and fantasies as well as for the purpose of engaging the caregivers in pleasurable interaction. Moving cars across the floor, carrying and feeding baby dolls, manipulating puppets and imitating parental activities are rehearsals, reworking of experiences and trying on new roles. They also are precursors to the development of imaginative/pretend play in which the child will employ complex narrative structures or story lines to elaborate these roles and fantasy scenarios. At age 3, there is a gradual move in the child’s view of other children as play things or things that get in the way of personal pursuits. Increasingly, children not only play side by side but turn to each other as companions and partners in shared activity which are more fun because they are social. Here, the capacity to generalize symbolic representation and empathize with the feelings of others serve as a common basis on which the fantasy configurations of each partner can be mutually enriched and enacted in play.

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The achievements in this phase of development expand the young child’s range of possible pleasures and the complexity of conflicts. Increased capacity for independent functioning is a source of pride in mastery, while the appreciation of separateness/reality highlights limitations and the vulnerability of being little and dependent. Ownership of the body and insistence of bodily urges (libidinal and aggressive drive pressures) are in conflict with the child’s sense of the contingent nature of his relationship with his parents. That is, the push to give expression to his own will is at odds with the desire to please of the objects of his love by submitting to their requirements. As external controls and rewards become internalized, so too do the capacities to retain and elaborate various representations of self and significant others. Whether serving configurations of fantasy or memories of reality, the capacity for representation offers the young child an inner frame of reference which can be a resource for increased frustration tolerance; substitute forms of gratification; trial action in thought; self-esteem and for the companionship of important people regardless of their presence or absence. As the central tasks of the anal phase of development merge into those of subsequent stages, the groundwork is laid for further elaboration of relationships and capacities both within and outside of the context of the child’s family.

36-48 Months ("Genital-narcissistic" Phase)

A transitional phase of development has been posited between the anal and Oedipal periods. This phase is characterized by an increasing crystallization of gender and concurrent preoccupation with the appearance, anatomical differences,
and sensations arising from the phallus and testicles, in boys, and vagina and clitoris, in girls.

The child's assumption of a specific gender identity—the core sense of being a boy or a girl—obviously has its roots in the first year or two of life. Early genderization during infancy is the result of multiple, interacting forces, including differential treatment of girls and boys by parents and others; the anatomically distinctive sensations arising from the genitals in the course of parental handling, elimination and self-stimulation (including penile erection, clitoral stimulation, the sensations accompanying defecation and urination, etc.); and other biological factors, including genetic and endocrine influences on brain and behavior. By age three, children generally are quite clear that they are either a girl or a boy and are aware of the types of play activities, dress and the like expected of children of their sex. Attempts to alter assigned sexuality after this time, for example for children with anomalous genitalia, usually are not successful. As a psychologically organizing, internal construct, however, gender may not be sharply dichotomous—for either boy or girl—during the first years of life or even much later. Indeed, psychoanalysts have long appreciated that there is a spectrum of gender-related experiences throughout the course of development which may be considered normative bisexuality—the desire for some of the attributes and opportunities of the opposite sex. For the first time, assignment of roles in play are gender specific and the imitation and "dressing up" often exaggerate gender features as children experiment both with their bi-sexuality and consolidate their own gender identities.
Consistent with the psychoanalytic theory of psychosexual stages as developed in relation to the oral and anal phases, "phallic narcissism" (Burgner and Edgcumbe, 1975) has been used to designate the central zone of sexual sensations during this phase of development. However, the emphasis on the phallus does not recognize the girl's prideful and pleasurable experiences of her genitals nor the anatomical distinctions which are felt by both girls and boys. A more suitable designation for this psychosexual phase, which arises around age three, might thus be "genderized, genital narcissism"--a period in which children become progressively more aware of the pleasurable sensations in their genitals as well as tensions arising from the genital zone, take pleasure in displaying and being appreciated for their genitality, and experience themselves as having a core gender identity which is, when all goes well, consistent with their anatomical identity. During this phase, both boys and girls may show off their genitals (enjoying how far they can urinate or lifting their skirts) and engage in more focused and sometimes more persistent masturbation (occasionally leading to genital irritation and a cycle of concern by both the parents and the child). While the genitals may be a leading edge of narcissistic investment, during this phase children feel a generalized pride in their bodies and what they can do in rough and tumble play, learning new skills on the jungle gym, displaying their fine and gross motor skills and coordination, and gaining parental attention through exhibitionism (such as dressing up in mother's clothes, clowning or performing new feats of skill).

As with each phase, there are dilemmas faced by children during this period which are directly related to the developmental achievements. A child
whose self-esteem is closely related to the beauty, power and pleasures of the body may feel hurt, rejected and enraged by not being noticed or mirrored by his or her parents or from failure in learning or performing some tasks for which the child may still be too immature or small. While the anal phase was characterized by struggles concerning control, the phase of genital (bodily) narcissism may be burdened by struggles with siblings with whom the child may be rivalrous and with parents concerning issues of competence. The child may be unmindful of or angered by the recognition of his or her personal limitations. The parents' imposition of rules or even their offers of help may be felt by the child as demeaning and sensitive parents may try to disguise their assistance or attribute the achievements to the child to foster the narcissistic delight in mastery.

There is a gradual transition rather than a sharp boundary between the psychological issues of genderized, genital narcissism—of prideful exhibitionism, delight, pleasure and sense of achievement as a girl or as a boy—and the issues of the Oedipal phase. In some ways, this boundary is crossed as boys become more worried about the loss of their prized genitalia and girls express more concern about the adequacy of theirs, along with a range of increasingly complex feelings about the roles of the male and female parent.

4-6 Years ("Oedipal" Phase Development)

Within contemporary psychoanalytic theory "Oedipal phase" refers to a range of concerns about loving, sexual/rivalrous, aggressive attitudes towards the same and different-sex parent which are correlated intrapsychically to the consolidation of mental structures. The achievements of this phase are a conse-
quence of the advance of multiple forces—cognitive, affective, social, bodily—and provide a template for perceptions about the self and intimate relations with others for future development. If the child was an "explorer" in earlier periods of development, the Oedipal child is best described as a "scientist"; curious, developing hypotheses and experimenting in thought and play about (1) his relations with parents (2) their relationship with each other and (3) how his mind works.

**Preconditions**

During the first years of life, the child moves through several phases of development which have been characterized in relation to the "leading" bodily zone—oral, anal, genital. Within psychoanalytic theory of development, the various tasks, concerns and processes of these phases lead to a phase of mental integration involving economic factors (biologically-driven urges); the direction of love and hate and the relationship between unconscious and conscious thoughts and feelings in the context of the realities of daily life. The preconditions for the child’s successful move into the Oedipal phase and its optimal negotiation include overlapping, mutually influencing "pre-Oedipal" achievements in areas such as:

1. **social relations**—good primary attachments to parents, representations of mother and father as separate and good, sense of self as the locus of initiatives which are successful, and the capacity for empathizing with the feelings of others;

2. **cognition**—the ability to represent abstractions and to call on these in assuming various social roles, taking the perspective of others, tolerating mixed feelings about self and others, appreciating the rights and responsibilities of oneself.
and others, and sensing that oneself and others can act and feel differently at different times;

(3) **moral**---a developing sense of right and wrong, good and bad; recognizing the link between actions and their consequences in relation to parents (approval and pleasure vs. disapproval and anger) and to the self (well-being and pride vs. shame and guilt);

(4) **physical**---the capacity for fine and gross motor coordination for pleasurable and planful activities such as running, jumping, climbing as well as self-care (toiletting oneself, brushing teeth, hand washing) and imitating adult behavior in play (cooking, driving the car, caring for a baby, building);

(5) **emotional**---the development of a wide range of feelings (including excitement, happiness, sadness, remorse, fear, disappointment, pride, anger, envy, love and hate) that can be distinguished, expressed and communicated to others;

(6) **mental**---the capacity for remembering personal history; realizing that dreams and imagination come from within oneself; perceiving complex social situations involving causality and time sequences; and developing narrative structures which organize inner and external experiences;

(7) **biological**---an hypothesized biological state which is analogous to the maturation of psychosexual zones (oral, anal and genital) and to biological changes seen in puberty, but which are now represented primarily in relation to emotions--intensified affective and sexualized longings (love) and raw expression of rivalry and aggression (hate). These are directed to the same/ opposite sex parents during the Oedipal phase and later are ex-pressed in adolescence towards peers.
When the preconditions are in place, the 4-6 year old child moves naturally into the Oedipal phase as evidenced by new integrations of self and others. During this period the child recognizes that he is the child of his parents and they have a relationship to each other which is not solely related to their roles as parents. Appreciating their strong feelings for one another, the child wishes to remain with them as he was in his previous fantasies—the center of their lives. He knows that he can recapture this position, if only for a while, through being very good, attractive and clever or by being very naughty, destructive and demanding. In addition, he understands that he cannot be the only person for his mother/father. Ultimately, the Oedipal phase child recognizes the complexity of mother and father as full people. While previously he saw them as either all good or all bad depending on his state of frustration/satisfaction, increasingly, as a result of his cognitive abilities, he feels the need to understand them as autonomous individuals—separate and in relation to himself, to each other, and to others both in and outside of the family.

**Triadic Relations and the Primal Scene**

The classical Oedipal phase within psychoanalysis in its boldest expression related to one aspect of the Greek myth: the murder of the father by the son and sexual union between son and mother. This mythic beginning for the theory of the Oedipal phase had the virtue of drama and suggestiveness but the vice of over simplifying the phenomenology. The child in the Oedipal myth didn’t know whom he was murdering and the remorse came later. The struggles of the Oedipal phase are painful just because of the child’s knowledge and continued love for
both parents. He is confronted with his amorous longings and rivalrous wishes and the desire to work out possible compromises—how to be powerful and central, to feel proud of his achievements and, at the same time, to have the continuing secure presence of both parents.

Crucial to the challenges of this phase is the fact that the girl’s wish to exclusively possess her father and the boy, his mother cannot and will not find immediate gratification in reality. In order to sustain his quest, the oedipal child must be capable of suspending disbelief—to deny that he is small and cannot enjoy the privileges and pleasures of the grownups (Freud, 1920). However, the child is burdened in his quest by anxieties and real deficiencies which must be denied, lessened, or worked through if his invincibility is to be maintained (Peller, 1954). Boys and girls must find ways to explain why they do not win the "exclusive" position in opposite-sex parent’s life in spite of attempts to woo them (by impressing them with physical and intellectual competence as well as charm) and their admiring responses.

Oedipal children are confronted by their exclusion from the parents’ special relationship even though each parent may acknowledge how big, strong, attractive or smart the young suitor might be. A hallmark of this phase is the child’s capacity for triadic relations: the representation of the parents’ relationship with each other and with him as their child. The child’s theories about the parents’ relationships with each other in his absence (primal scene fantasies) are based on his observations of their affective ties as well as on projection of the child’s own intense libidinal and aggressive urges. Primal scene fantasies are a source of excitement and danger—in the child’s view of sexual intercourse as violent—and
of narcissistic hurt as well—representing the ultimate adult activity from which the child is excluded.

The powerful wish to get rid of the same-sex parent and assume his role in an exclusive, intimate relationship with the opposite-sex "partner" is also fraught with tension as the child struggles between love and hate felt towards the rival. The experience of hurt, tension and uncertainty during this phase lead to the achievement of internalized conflict. The child now has the capacity for neurosis—i.e., an internal struggle between opposing forces (wishes vs. personal values; desires vs. parental attitudes and opposing desires). The infantile neurosis is theoretically the paradigmatic form for age-appropriate mental disorders engaged by Oedipal phase structures. It is expressed by the appearance of regressive behaviors and fears—obsessive-compulsive symptoms, enuresis, encopresis, thumb-sucking, phobias, separation difficulties, nightmares, frequent battles with parents—which are common in this period of development and serve the child's attempts to take charge by withdrawing from or displacing the conflicts aroused by the intensity of his/her Oedipal longings.

Play and Mastery

Oedipal children must turn from a passive role in which they might fall prey to dangers and disappointments to an active one in which they can feel as though they are the masters of their own fate (Freud, 1917). In this task they increasingly turn to fantasy and its expression in play. The child's internal conflicts and their representation in fantasy, symptoms and imaginative play constitute his research about the self and others. His expanding experience in a
broader social context (chiefly through the introduction of nursery and school programs) foster increased psychological independence. Organized and regular group experiences offer a broader context in which the conflicts and tasks of the oedipal phase of development may be worked through.

Relationships with children and adults outside of the family capitalize on, and promote the youngster's greater frustration tolerance; reliance on increased intellectual and physical capacities; and confidence in the ability to function—with pleasure—in the absence of parents. In addition, the world beyond the family affords the child with a broader range of stimulation and opportunities for using new skills such as reading, writing and problem solving in the classroom setting.

While giving rise to considerable anxiety, the Oedipal child's experiments in thought and pretend play serve to integrate representations of the self and others. The conflict between loving and hating leads the child to further consolidate and integrate the images of the "good" and "bad" parents into representations of them as whole, autonomous people who have relationships beyond the dyadic parent-child configuration. In muting the intensity of Oedipal longings the child strives to live up to the ideal of being like the rival parent (ego ideal) and to identify with their rules and values (superego). These achievements of internalization allow the child to desist in overt rivalry with the same-sex parent—to feel that he hasn't lost out in his struggles but has in fact taken on the role of the parent internally—and serve as reparative structures for anxiety, frustration and hurt narcissism that accompanied the more raw competition. The child's feelings of wounded pride and anxiety serve as "signal affects" and alert the child to how he is feeling in response to specific thoughts and actions—in the
past, present and future—and lead to his capacity to observe himself and establish theories of how his mind works.

The "theories" the child develops organize internal experience of affects, bodily urges, memories, parental rules and praise and personal ideals and provide structure and cohesion for the child's perceptions of self and others. They are tested and elaborated in fantasy, play and daily life and draw on the many new roles the child assumes in relationship to his parents, as a friend to peers, as a sibling, as a student in the classroom and the like. The child's theories of how his mind works—what makes him worried and how does he enhance good feelings about himself through fantasy, imaginative play and direct action—lead to decreased egocentricity and increased self observation. His ability to manipulate ideas and feelings in preparation for action and his capacity to take the perspective of parental representations allow the child to postpone gratification, to balance urges with ideals which are now his own. His achievements in delaying immediate satisfaction and identifying with principles of justice/morality are expressed in the child's social play with companions where he is able to see the world from the view of the other—not grabbing toys, taking turns, playing by implicit rules, developing narratives out of shared fantasies—and accepting the fact that he is not alone in having important needs. His new capacities are also apparent in the child's recognition of the difference between play and work and in his sense that industriousness/perseverance brings its own rewards and personal satisfaction. While parents' approval and praise (and the admiration of other adults and peers) remain important to the oedipal child, his ability to refer internal theories about himself—sources of pleasure, memories, ideals, positive and negative
consequences of thoughts and actions—allows the child to give up a singular reliance on external sources of reward/response for the regulation of self-esteem.

The "Oedipal child," is attempting to modulate strongly felt aggressive and sexual feelings, centering in general about the parents and the regulation of anxiety associated with attendant conflicts. Increasingly complex mental processes allow the child to represent himself in a variety of fantasy configurations in which he can be both the actor and director. In his play, the four to six year old is able to suspend reality in the service of trying on different roles and solutions to problems; he derives pleasure from the relatively uninhibited expression of safely displaced instinctual impulses and trial attempts at their mastery. The rich descriptive capacities for expression--through linguistic and activity modes--facilitate the elaboration of fantasy constructions and their articulation in play. The child's gift for play and his fluid, wide-ranging use of various representations of himself, of others, and of impulses provide a window into those processes which the child employs for mediating his inner world while making sense of the world outside.

7-10 Years ("Latency" Phase)

The term "latency" refers to a decrease in the prominence of pre-oedipal and oedipal strivings both in terms of intensity and direction. While they do not go completely underground, the degree of preoccupation with sexual impulses and interests that are explicitly connected with the assumption of parental roles is significantly diminished. In fact, it would seem that in the sexual curiosity, excitement and joking that can be observed among latency-age children, notions about parents as sexual objects/beings must be denied or avoided. Activities and
attitudes seen as infantile—dependency on parents, fearfulness and the like—also need to be avoided at all costs. In the face of conflicts established in the pre-oedipal and oedipal phases, infantile and incestuous longings are repressed and a widening array of adaptive defenses—including intellectualization, humor, identification, obsessional interests and sublimation—are utilized to support the diversion and alteration of the original impulses (Bornstein, 1951; A. Freud, 1949).

The continued consolidation of intellectual, sensorimotor and social skills and opportunities, afford the latency child with a variety of pathways for the sublimated expression of urges that dominated earlier phases of development. For example, friendships and group affiliation can serve as an alternative to the exclusive, close tie to the parents while further facilitating the child’s exploration of the world outside of the family. The intense interest and curiosity about the origins of babies, the intimate life of parents and the mysteries of sexual differences can now be employed for, and shaped by the challenges of learning that occur in both school and extracurricular activities. At this phase of development there is a significant change in the way these strivings are represented in play. For example, where competitive strivings central in the oedipal phase of development once found expression primarily through imaginative play, they now find increasing expression in games with rules and in relationships with peers. Exhibitionistic impulses find a broader range of vehicles and audiences in the performance of intellectual tasks and mastery of athletic and creative pursuits. In addition, the demands and rewards associated with a relatively stable conscience (or superego) are increasingly exercised in the latency-age child’s interests and activities. While not without breeches as seen in cheating and insensitivity to
peers and family members, the "rules of the game", empathy with the feelings of others and a clear sense of right and wrong are hallmarks of the child's establishment in latency. Similarly, descriptively obsessional interests in orderliness, collecting (as in hobbies) and in details of functional relationships and properties of physical phenomena serve reaction formations that derive from both benign and prohibitive aims of the superego. These elaborations of defensive and adaptive functions are only possible with, and equally reflective of the development of more sophisticated cognitive processes involving the introduction of operational thought and in motoric maturation which opens a pathway of expression in games of physical skill.

Optimally, the latency-age child achieves greater autonomy with respect to aspects of daily living such as hygiene, dressing, looking after possessions, and the like. The ability to engage in operational thinking and problem solving, in conjunction with the capacity for increased frustration tolerance, broaden the range of potential achievements and attendant satisfaction. These accomplishments enrich the child's interaction with peers who are viewed as partners and "best friends" as well as new objects of identification, admiration and competition.

The central threat to the latency-age child is the reemergence or breakthrough of the original sexual and aggressive fantasies of the oedipal phase particularly when associated with the impulse to masturbate. Sleeping difficulties; nightmares; worries about burglars, bodily injury and death; and the ease of regression to earlier modes of relating to parents--struggles over food, self-care, household responsibilities and the like--may be some of the behavioral phenomena that accompany the child's attempts to defend against, and give expression to the
residual or persistent intensity of oedipal conflicts in the early period of latency. The elaboration of cognitive and motoric capacities, peer group involvement, academic and extra-curricular interests facilitate the late-latency child’s sublimation of previous trends in action and fantasy and promote greater distance from the original objects of oedipal longings. Alternately, these achievements are subject to neurotic interference; school failure is not necessarily an outcome of learning disabilities, isolation from the peer group, and the inability to play are not alone determined by athletic skills, looks or abundance of toys.

As described in this chapter, each developmental phase reflects the leading edge of capacities achieved in the areas of instinctual maturation, regulation and representation; object relationships; conscious and unconscious fantasying; defense mechanisms; perceptual and cognitive integration of personal experiences; maturation of the sensori-motor system, and an increasing definition of self. In each phase of development, play reflects the ways in which these capacities are organized and presented, whether in the infant’s play with his body or mothers; the toddler’s games of peek-a-boo or filling and emptying; the three year old’s exhibitions of bodily prowess; the Oedipal child’s engagement in elaborate, imaginative dramas; or the latency child’s involvement in organized sports and board games. Where this chapter aimed at exploring and describing the development of unfolding capacities that underly the play activities of young children, Chapter Three will focus on psychoanalytic views of the changing nature of the structure, function, and content of play.
CHAPTER THREE

PSYCHOANALYTIC VIEWS OF CHILDREN'S PLAY

Even though it is difficult to develop a unified definition of it, "we all think we know what we mean when we speak of or hear about play, [and that] in fact play is better described by its functions than by a formal definition" (Solnit, 1987, p. 205). The intent of this chapter is to present central psychoanalytic propositions regarding developmental characteristics and functions of coordinated activities that child analysts recognize and designate as "play." With these ideas in mind, three broad questions will be addressed about play as considered in child psychoanalysis and the evolution of various conceptualizations relevant to each question will be traced: (1) Why do children play? (2) What are the various characteristics seen in children's play? (3) What happens to play in later childhood and adulthood, i.e., are there direct derivatives of the very young child's play activity or is work truly the heir to play in later life? Each of these questions has to do with the narrative function of play activities--that is, the ways in which play scenarios and activities form coherent representations of what is uppermost in the child's mind and most available in his repertoire of modes of expression. While focusing on the play activities of children, the fate of their modes of expression over time will be discussed in relation to the creativity of adults as well. Several caveats are important about the intent of this chapter. First, while every child analytic case report informs our understanding of play behavior, the present chapter reviews selected works which focus on play conceptually. Second,
while the broad questions are relevant to play that occurs between child and analyst, the focus will not be on a systematic review of the broader clinical literature in which play activities are described in the course of specific therapeutic work and not used to elaborate our conceptualizations about the phenomena of play itself.

Functions of Play

During the earliest phases of the development of psychoanalytic theory, Freud used the phenomena of children's play to illustrate and identify the origins of various features of psychic functioning in adult life. Many of Freud's descriptions and formulations about play phenomena—e.g., the nature of the child's orientation to reality; the genesis and use of fantasy; the tendency to achieve active mastery over experiences of passivity; the compulsion to repeat as a means of reworking trauma; and superego formation—remain central to child psychoanalytic theory about the function of play. The direct observation of the play of children in psychoanalyses has further informed analytic theories not only about the function of play but also about the importance of early childhood experiences in psychic development. These direct observations have changed our emphasis on the relative importance of certain functions of play.

Freud (1905) first referred to children’s play when he suggested that play appeared as the child was learning to use words and organize thoughts. Pleasure for the young child is derived from the repetition or rediscovery of the familiar. Play is not bound by "the meaning of words or the coherence of sentences" (1905, p. 128). Indeed, for Freud, this pleasure in the meaningless or absurd was both
a characteristic and a function of play. Children's play comes to an end with the institution of the as yet unnamed "critical faculty" that rejects pleasure in the form of the meaningless or the absurd. Stated another way, children's play reflects the broader range of tolerance for the drives that can occur as long as the superego is not yet fully in place. However, Freud did not allow the "critical faculty" absolute censorship over such playfulness in adults. As heirs to play, jokes fulfill the adult requirement for order and "reasonableness," recreating the pleasure of play in their use of thoughts and words which while they seem absurd are always in the service of conveying specific meaning, often emphasizing incongruity and paradox.

Central to Freud's conceptualization of play in older children was that it served as an acceptable mode for discharge and satisfaction of instinctual drives and for mastery of experiences that made "a great impression" (1920, p. 17) upon the child. In contrast to his description of the play of young children, he pointed out that the older child at play did not disavow reality but rather suspended it in the service of reworking unpleasurable experiences. Such reworking was achieved through play by the child's reversing his original role of frightened, passive victim into an active masterful one. Similarly, Freud suggested that play served a reparative function as seen in traumatic experiences. This function of children's play was an example of a natural inclination toward a "revolt against passivity and a preference for the active role" in the service of practicing and assuming greater self-sufficiency (1931, p. 236).

Moreover, Freud emphasized that the compulsion to repeat was another driving force behind children's play recapturing feelings associated with pleasurable experiences. The reexperience of pleasure and attempts at mastery of
an unpleasant situation are not mutually exclusive (1920). For example, Freud's observation that the child's play is dominated by the wish to be grown up and to be able to do what the adults do speaks both to the child's oedipal longings and reverses the specific role of victim to father's expected retaliation. The child's mastery through a reversal of roles yields pleasure as he passes on the "disagreeable experience and . . . revenges himself on a substitute" (1920, p. 17).

Theorists after Freud continued to view play as having a discharge or modulating function for the child. Melanie Klein (1929) emphasized that play served the function of discharge for infantile masturbation fantasies. According to Klein, these fantasies give expression to the infant's sadistic wishes toward the mother which are projected and then provoke retaliation from the persecutory object. Play affords a relatively safe activity in which the infant may displace these wishes and avoid the anxiety associated with expected annihilation. While Klein shared Freud's views about the role of the repetition compulsion and the child's use of play as a central means of achieving mastery of internal conflicts, other aspects of her ideas on play were her own contributions. Her developmental time table, assumptions about the specific content of infantile fantasies, and the relative inattention paid to daily experiences as material for play represented a significant departure from the views of many of her contemporaries and of later contributors.

In keeping with the increased focus on the developing ego, Waelder (1932) elaborated on Freud's notions of the repetition compulsion as a way of facilitating the assimilative function of play in the child's attempts to master the environment. Through play, the child could turn passive into active, thereby gradually reworking
originally painful or overpowering events through a sense of mastery of them. "Play may now be characterized as a method of constantly working over and, as it were, assimilating piecemeal an experience which was too large to be assimilated instantly at one swoop. The pain in an experience must be over-come before the experience can be repeated and enjoyed in play" (pp. 217-218).

Asserting that the pleasure principle alone could not explain the nature of children's play, Waelder highlighted the distinction between "functional and gratification pleasure." Drawing on the ideas of Karl Buhler, he pointed out that in addition to the pleasure sought in the gratification of wishes, children's play may be motivated by the pleasure "derived from pure performance" (p. 211).

However, the thrust of Waelder's contribution was to examine the relationship between the strength of the developing ego, the child's vulnerability to trauma, and the use of play as a means of abreacting and assimilating overwhelming stimulation. He proposed that "difficult experiences of the past function as preparations for future tolerance" (p. 217) and that with age, both vulnerability to trauma and the flexibility of response diminish. The child's relative inexperience in the world make him more vulnerable to "excessive stimulation" but, at the same time, less rigid in his responses. In this sense, play serves a psychic metabolic function and provides a means of breaking down and repeating overwhelming experiences until mastered and assimilated. The intent of play is "not so much the preparation for future activities in adult life as it is the assimilation of the mass of excitations from the outer world" (p. 218) which in turn strengthens the ego's capacity to tolerate and endure difficulties. The
plasticity of the immature ego both necessitates and facilitates the abreactive
gen function of play that only occurs in children.

Anna Freud (1965) proposed that the child's earliest play with his and
mother's body promoted the child's capacity for differentiation between self and
others and between fantasy and reality. Later play with toys, solitary role play and
group play give expression to displaced and sublimated drive energies and pave
the way for pleasure in task completion, problem solving, and the ability to work.
While Anna Freud never devoted a monograph to the specific topic of play, her
writings focused on the child's developing capacities for defense activities and ego
adaptation that form the constituent properties of play (1965, 1980). She viewed
play activities as one source of information about the child's developmental status
and as a window onto the child's attempts to gain mastery over conflicts generated
from within and those resulting from the demands of external reality (A. Freud,
1965, 1973). From Anna Freud's perspective, the importance of play lay in its
role of moving the child toward an increased capacity for autonomy and
self-confidence, socialization, and work.

Erikson outlined his studies of children's play according to libidinal zones
and phase specific conflicts. In 1937, Erikson focused on the developmental trend
toward displacement of bodily experiences and associated aims and conflicts to the
"manifestation of an experience in one section of their own body to another" most
children "find objects in the toy world for their extra-bodily displacements . . .
externalizing the entire dynamic relationship between the zone and its object" (p.
161). The goal or central function of play is that it affords the child the
"opportunity to experiment with organ-modes in extrabodily arrangements which
are physiologically safe, socially permissible, physically workable and psychologically satisfying" (p. 185).

In later papers, Erikson outlined the function of play as preparatory for adult roles and for the expectations of society. Play allows the child to try on adult functions and to alter these roles as he becomes more aware of "society's version of reality" (1972, p. 127). Through play, the child elaborates his own identity based on the roles available for his observation and the external demands of his social world. Because of the vicissitudes of development, these external factors seem different to the child at different periods of development and thus the roles are constantly being revised. "No wonder . . . that man's play takes place on the border of dangerous alternatives and is always beset both with burdening conflicts and with liberating choices" (1972, p. 127).

Like Erikson, Peller's conceptualizations reflect the influence of Anna Freud, Hartmann, Kris, and Loewenstein, and the shift in emphasis within psychoanalysis from drive theory to ego psychology. Peller (1954) viewed play as deriving from the ego's attempts to deal with the anxiety associated with "blows or deprivations exerted by reality as well as with pressures originating in the id or the superego" (p. 179). However, her work also went well beyond earlier ideas that play is primarily instigated by the repetition compulsion and attempts to rework trauma. According to Peller, play is a centrally organizing activity that illustrates the interdependence of libidinal—if not aggressive—urges and ego development. Play is a fantasy accompanied by action and is possible when the level of anxiety to be mastered is not overwhelming. The activity of play is gratifying in its own right but compatible with reality and superego requirements.
Play, according to Peller, reflects the child's attempts "to compensate for anxieties and deficiencies, to obtain pleasure at a minimum risk of danger and/or irreversible consequences" (p. 180). Instinctual drives are not directly discharged in play but are able to enter into it with increasing degrees of sublimation as the child develops.

For Peller, the primary function of play is to deny, decrease, or work through the anxieties that are specific to each phase of development. Compensatory fantasies are the backbone of all play, whether they occur in response to the limitations of the toddler's body, control of the preoedipal mother, exclusion from adult relationships or the dangers of the superego. In addition, Peller pointed to the nonconflictual spheres of functioning that are utilized and facilitated in children's play, e.g., bodily competence, information processing, and cognitive structures (Hartmann, 1939; Piaget, 1945). Peller described different functions and features of play according to the developmental phase in which it appeared. She referred to four basic types of play characterized as: (1) play originating in relation to one's own body, (2) play rooted in the relationship to the preoedipal mother, (3) play instigated by conflicts at the oedipal level, and (4) postoedipal play or games with rules.

In his broad views of human functioning, Alexander (1958) posited three dynamic processes which govern life: the principles of stability, economy, and surplus energy. According to Alexander, play is "the exercise of surplus libidinal energy not required for the grim task of survival" (p. 178). While agreeing with earlier psychoanalytic theories that play serves the function of repeating, abstracting, and mastering trauma, he argued that playing is an aim in itself.
"Erotic play for the sake of pleasure is the first phase, and the utilization of the functions acquired during erotic play is the second" (p. 182). While play may incidentally serve the resolution of conflicts and provide opportunities for ego mastery and development, "the solution of the problem is not imperative" (p. 186). In emphasizing this erotic or nonutilitarian discharge of surplus energies as the primary motivation for children's play, Alexander does not take into account the symbolic nature of play or its specific features as they relate to the development of the child's inner sense of self and others. In focusing on his own version of the instinctual sources and economy of play, Alexander departs from the mainstream of psychoanalytic theory which emphasized the functions and characteristics of play in terms of the developing ego.

Greenacre (1959) elaborated on the function of play as it serves the development of reality testing in young children. She suggested that children's repetition of themes in play represented their attempt to verify the difference between fantasy and reality until familiarity with that difference had been adequately established for each of these significant themes. Play was seen as a central activity employed for testing reality. Greenacre agreed with Freud's observation that imitating adult roles and functions was a prominent feature of children's play and highlighted the maturational sources of new capacities and their expression in the child's wish to be "grown up." Greenacre disagreed with Waelder's formulation that the relief from trauma derived from the fusion of fantasy and reality that occurred in play. In the first instance, she suggested that mastery of trauma was never complete and that part of the excitement and fun of play derived from the persisting affects and tensions associated with the original
traumatic experiences. Second, she argued that the greatest relief from the effects of trauma was afforded by a combination of the child's ability to separate fantasy and reality through play and, through that separation, to deal with the traumatic situation successfully. Greenacre also pointed out that in the establishment of secondary thought processes—particularly the introduction of a sense of time—the child was able to project memories forward as events to anticipate the future, a capacity that broadened the functional repertoire of play. The possibility of now "anticipating" what was once unexpected and overwhelming and directing and controlling the remembered scenarios in play yielded a greater potential for mastery.

Unlike previous psychoanalytic contributions which emphasized the mastery of the drives and traumatic experiences of the past, Winnicott (1968) focused on playing as it reflects and facilitates the development of the self in relationship to others. As an extension of transitional phenomena, Winnicott viewed play as a "basic form of living" (p. 597) that serves the child's development of an autonomous sense of self in relationship to others. He argued that the excitement of play was not primarily associated with displaced drive expression but rather the child's pleasure in the "precariousness that belongs to the interplay" between personal psychic reality and the experience of control of actual objects (1972, p. 598). The interplay derives from the infant's earliest experiences of magical control of the responsive mother and facilitates his trust in her availability and love and in his own magical potential. The internalization of these features establishes a template for later play—both alone and with others—in which the child can create, or re-create, a world that hovers between psychic and objective reality.
Winnicott does not explicitly address the function that play serves in problem solving, negotiating tasks of development, or the resolution of conflicts. He refers to the special role of the body, observing, "The pleasurable element in playing carries with it the implication that the instinctual arousal is not excessive" (p. 598); he adds that when direct bodily excitement is too great, play will be disrupted. For Winnicott, however, instinctual discharge does not figure so prominently as a source of pleasure and motivation for play. Instead, play is a reflection of the child's capacity to occupy a space between psychic and external reality in which the child moves between, and uses elements from, both domains.

A 1985 symposium held in Jerusalem and a special section in the 1987 Psychoanalytic Study of the Child reflected renewed interest in exploring the functions and various characteristics of children's play. All of the contributors subscribed to the central functions of play originally described by Freud: (1) mastery of instinctual impulses, (2) wish fulfilment through displacement of impulses, and (3) mastery and assimilation of traumatic experiences. Neubauer (1987) emphasized that in addition to being guided by the pleasure principle, play permits the child to experiment with his place in the real world. While imagination is "trying on" in the mind (p. 3), to anticipate new solutions and elaborate possibilities for action, play involves the enactment of these fantasies. Others highlighted the developmental precursors and coordination of ego achievements that promote the child's ability to maintain a balance between fantasy, reality, and direct action through play (Moran, 1987; Ostow, 1987). Solnit (1987) summarized many of the views on play by pointing out that in its "capacity for combining thinking and acting" play will "not only reflect where the child and
adolescent are developmentally but may also bring up for its reviewing, familiarizing, assimilating, integrating, development-promoting functions what has happened and the anticipation of and preparation for what is about to happen" (p. 218-219).

**Functions of Play Elaborated**

The various function of play serve the child’s attempts to establish a sense of self in a constant interaction between the inner world of fantasy and the external world of real experience. Mastery of instinctual life, adaptation to current and internalized demands and expectations of others, the resolution of conflicts, and practicing and extending motoric, linguistic, and cognitive skills acquired in the course of maturation are viewed as some of the essential functions of play as it promotes growth and assists the child’s preparation for future roles and challenges of each new developmental phase. It would seem that play, above all other forms of activity and expression in childhood, facilitates the appearance, organization, and consolidation of a number of fundamental developmental tasks in early childhood. Play provides a window on the elaboration of other mental structures. Play is central in early development because it simultaneously advances development and reflects the particular capacities available to the child at any given time in his development. The types of play--autoerotic or dramatic, solo, parallel, or interactional--always reflect the developmental status of and interplay between the capacities for: (1) balance of id, ego, and superego requirements; (2) reality testing and fantasying; (3) object relationships; (4) language, symbolization, and communication; and (5) mechanisms of defense and
adaptation. That play reflects developments in each of these areas makes this childhood activity a central focus of clinical and theoretical investigation.

**Status of Id, Ego, and Superego**

To discuss the characteristics of play vis-a-vis emerging mental structures necessarily involves a consideration of what constitutes play. This is particularly true in considering play as a reflection of id, ego, and superego differentiation. While it can be said that play, in part, serves as a transition from action to thought as trial action, a discussion of what constitutes play proper and when it begins has many facets and no single answer. Typologies (Erikson, 1937; Peller, 1954; Plaut, 1979) which distinguish the phenomena of play according to different stages of development reflect the fact that the term play does not signify one set of unified characteristics and functions that persist throughout the course of life. However, the prevailing psychoanalytic interest has been on a particular kind of play that involves pretending. Pretend or imaginative play is usually initiated in the second year of life by the coordination of ego achievements, including the acquisition of language, the capacity to distinguish internal and external reality, the achievement of object constancy, nascent internalization of parental demands and expectations, and the defenses of displacement, externalization, turning passive into active, and identification. It is no coincidence that psychoanalytic writings have focused on the characteristics of play that begin to emerge during a period of development in which secondary thought processes gain ascendancy and ego-id and ego-superego conflicts obtain greater structuralization. In addition, with the advent of verbal play, the child can clearly mark out for himself and the observer what is play and
what is not. Pretend or imaginative play serves as a domain in which fantasies and conflicts can move from the internal to the external realm, at once owned and disowned on a stage set in suspended reality.

Anna Freud (1936, 1965) viewed children's play activities as promoting and reflecting the changing status of the ego's capacity to mediate between the demands of the drives, superego, and external world. Elaborating the developmental line "From the Body to Toy and from Play to Work," she took as a starting point the infant's primary narcissism and the pleasures of playing with his own and his mother's body. Such early autoerotic play promotes differentiation of ego boundaries. The pleasures and properties associated with the child's and mother's body are invested in the first extrabodily plaything or transitional object (Winnicott, 1953). The developing ego capacity for symbolization expands the soothing transitional function of the cuddly toy, a bridge between self and mother, to the role of safe substitute for the child's ambivalent feelings toward the mother. The move to play material which does not "possess object status but . . . serves ego activities and the fantasies underlying them" (A. Freud, 1965, p. 80) is accompanied by the child's use of adaptive and defensive ego functions such as imitation and identification, displacement, condensation, sublimation, and turning passive into active. Along with the functional pleasure involved in mastery of bodily skills, task completion, and problem solving, the coordination of these ego capacities is facilitated by play activities reflecting phase-specific interests and conflicts.

Implicit in these formulations of the development of play are two notions: (1) the subject of the child's play is determined by the status of drive organization
and object relationships, and (2) the modalities of play are determined by corresponding development of ego functions—memory, reality testing, symbolization, language, and motor skills. The form and complexity of play reflect the stability and integration of these capacities; the content represents the challenges and conflicts that arise from each phase of development. Accordingly, those who view the infant as endowed with the ego capacity for fantasy, conflicts, and some rudimentary reality testing (Klein, 1923, 1927; Searl, 1933; Winnicott, 1968, 1971) freely designate the infant's earliest manipulations of his and his mother's body as "play." For others (Erikson, 1937, 1972; A. Freud, 1965; Peller, 1954), these infantile activities yield functional pleasure while serving the beginning ego orientation to the world. Peller (1954) points out, "Earliest play merges almost imperceptibly with non-play" and might be best characterized as a prestage of play that will later serve the child's attempts, and ego capacity, to achieve a "compromise between the demands of the drives and the dictates of reality" (p. 185).

Suspension of Reality—Reality Testing and Fantasying

As previously outlined, from Freud's earliest descriptions, play has been viewed by psychoanalysts as a bridge between fantasy and reality. He pointed out, "The opposite of play is not what is serious but what is real." He added that the child "likes to link his imagined objects and situations to the tangible and visible things of the real world. This linking is all that differentiates the child's play from 'phantasying'" (Freud, 1908, p. 144).
Later, Freud (1924) compared the use of symbolization in children's play so that of the adult neurotic as a "substitute for reality" (p. 187) to be distinguished from the loss of reality that occurs in psychosis. Implicit in these descriptions is the characteristic that others will variously refer to as unreality or withdrawal from reality (Klein, 1929), a leave of absence from reality (Waelder, 1932), pretending (Peller, 1954), or suspending reality (Solnit, 1987). The critical difference between fantasy and play is that in play the suspension of reality sets the stage for and is most often accompanied by action (Alexander, 1958; Neubauer, 1987; Peller, 1954; Solnit, 1987; Waelder, 1932; Winnicott, 1971). In addition, the suspension of reality presupposes (1) that the child is able to distinguish between reality and play, and (2) that the activities of play have no consequences in reality (Alexander, 1958; Erikson, 1977; Freud, 1908; Neubauer, 1987; Plaut, 1979; Solnit, 1987).

With the capacity to suspend reality, play reflects a significant way station between fantasy and direction action—if fantasy is thought of as preparation for action, then play is fantasy in trial action in which the child can simultaneously concretize the expression of a wish by proxy and control the action according to any contingencies that may heighten or diminish the yield of pleasure. Essential to the child's degree of directorial control of the narrative action is the confidence that however closely the action approximates real events or however intense it becomes, the action of the characters in play is not and does not need to be "real." With the suspension of reality the child is able to enact a preferred, active role in the recreation of an experience of passivity or enact derivatives of instinctual wishes that would otherwise be repudiated by the superego and or invite
potentially dangerous consequences from the real world. If drive and superego pressure is too strong for ego regulatory responses and the child is unable to "trust the strength of his ego" (A. Freud, 1965) to mediate successfully between internal and external demands, then the suspension of reality cannot be sustained and the play will be disrupted (Freud, 1908; Neubauer, 1987; Plaut, 1979; Waelder, 1982). In the case of the psychotic or obsessional child, limitations of the ego or the severity of the superego will preclude the child's capacity to enter into imaginative play.

Object Relationships--Parental Attitudes toward Play

One of the most direct statements about play and object relationships is contained in Winnicott's notion that playing reflects a recapitulation of the child's earliest experiences of omnipotence in his relationship with the mother. Because play establishes and draws on the infantile, magical control, it serves as a template for the development of a sense of self and in organizing a sense of me/not me.

Part of the child's early playfulness in the realm of self-differentiation involves the capacity to distinguish between me/not me while retaining through play the potential for assuming either role. If parents are unable to support this domain of pretend and creativity or if their own conflicts actively discourage or disrupt the child's pleasure in playful activities and imaginative play, then a significant avenue for expanding object relationships may be closed to the child.

Indeed, another aspect of play and object relationships is how parents' activities support and elaborate their child's play. Child analysts have been particularly interested in the role and influence of parents in the child's ability to
utilize play in the service of intrapsychic adaptation (Kennedy et al., 1985; Plaut, 1979; Winnicott, 1971). In a study at the Anna Freud Centre, parental attitudes were examined in a group of 10 5-year-old children for whom play was associated with anxiety, disapproval, and shame rather than pleasure and mastery. Each of the children and their families were followed from birth through the course of well-baby clinic visits. Observations were made of the mother-infant interactions in the home and in a mother-toddler group and of the child in nursery school and in subsequent child analyses, and of the parent in guidance session.

In some cases, the absence of pleasurable interaction was apparent from early on in the parent-child relationship. In a second category, parents with serious concerns about their own fantasies and an intolerance for id derivatives tended to control their child's play by emphasizing reality in exaggerated ways. Alternatively, parents in a third group were unable to support or sustain the child's reality testing either through overemphasizing their own distorted, fantastic, and frightening versions of reality or by conveying to the child their own anxious responses to reality. The demanding, hypercritical, or sadistically teasing attitudes of other parents led to the child's defensive avoidance of and vigilance toward anything in the realm of pretend. In each case parental attitudes were seen to interfere with the child's capacity to use play and fantasy to help mitigate anxiety and to leaven the demands of the external world as well as soften internal expectations (Moran, 1987).

Similarly, Plaut (1979) emphasized the significance of the parents' ability to play with their children. He suggested that the "parent who was not able to play, freely and pleasurably, in earlier stages of his own life will have difficulty
enjoying play with his or her children" (p. 227). As a result of this inability fully to participate in the child’s life, the child will feel that he is not valued in his own right but only in the ways that he is learning to become an adult.

Relation of Play to Other Areas of Functioning in Children and Adults

That so many theorists and clinicians have speculated about the relations between adults’ play or work and the imaginative play of young children may reflect in part a wish that the child’s capacity to play would live on in the adult. They apparently expect play to serve some preparatory and facilitative purpose in other domains. Surely all that imaginative effort will in the end be evidently functional and positively productive. At least two major themes characterize the work of the last century on the relation between imaginative play and other areas of functioning: (1) the relation between characteristics of children’s play and adaptive functioning (problem-solving skills and social competency), and (2) the relation between children’s play and creativity in adults. That such themes predominate in views of the concurrent and predictive relations of play to other functional areas also reflects the view that play along with other forms of imaginative activity is secondary to other forms of thought characterized by science, logic, and philosophy and that play serves primarily as the imitative testing ground for more rational, ordered thought and work (Sutton-Smith, 1984).

Play and Social Adaptation

It is an implicit assumption of child analysis that through the use of play, certainly the play between child and analyst, children learn more adaptive
approaches to situations in their day-to-day lives. By imitation and practice, children in effect try on solutions and adaptations to potentially conflictual situations. Analytic views of play as an adaptive function are confirmed and supported by other theories of play which also have addressed the relations between imaginative activity and adaptive capacities (Fein, 1981). Sutton-Smith (1984) and Bruner (1972) both stress the importance of fantasy play for generating interest in the novel, more flexible approaches to unexpected or ambiguous solutions, and overall a greater range of adaptive behaviors. According to their views, because children use the safe confines of play to test a variety of situations and solutions, they develop a series of strategies and associations that they apply to situations in their external lives. Such theories do not address the concomitant effects of practice within play or inner conflict resolution that allows the child a broader adaptive repertoire rather than the behavior learned in play. However, they do emphasize that play serves an adaptive and organizing function that is evident in other areas not directly involved in imaginative play.

Several studies outside of the field of child psychoanalysis support the socially and adaptively organizing functions of play. Studies of children’s behavior in free-play settings indicate that children who participate more in dramatic play in which reality can be suspended also tend to be involved more actively in social contact with adults and peers (Marshall and Doshi, 1965; Singer, 1979) and to be more oriented overall to social interaction with others (Jennings, 1975). There is also evidence to support the notion that dramatic play is related to the children’s capacity for flexibility in social and nonsocial situations and their ability to adapt to alternative solutions in a number of settings. For example,
children who play imaginatively with objects, that is, using objects in the service of creating imagined scenarios, do better then asked to solve problems involving these objects (Moore et al., 1974). It has also been suggested that the capacity to use pretend or dramatic play enhances impulse control (Saltz et al., 1977) and serves an arousal-maintaining and modulating function (Fein, 1981)—that is, children who are able to engage in pretend play show a greater capacity for regulating states of anxiety and tension, a finding that complements and supports analytic views of the function of play.

**Play and Creativity**

From a phenomenological standpoint, it seems quite reasonable to consider play a creative activity and to posit the longitudinal connection with the artistic (and perhaps scientific) creativity of adults. At the very least, both play and artistic creativity involve imagination, originality, and invention. Freud (1908) proposed that "every child at play behaves like a creative writer, in that he creates a world of his own, or rather, rearranges the things of his world in a new way which pleases him" (pp. 143-144).

In addition, like the creative artist, children are intent about their play, invest a great deal of emotional involvement in the process, and use their play in part to present a carefully constructed demarcation between the fantasied and real world. Freud (1908) also emphasized that play, like creative writing, can serve to present situations, which, if real, would cause little pleasure but through the imaginative activity of play can be both exciting and enjoyable. Thus, the child plays out separation and loss just as the poet writes of unfulfilled love.
Freud (1908) carried the relation between play and creativity deeper than these phenomenological similarities when he suggested that adults exchange the pleasure they once obtained through play for the pleasure obtained through daydreams. As with children, adults dream out their unfulfilled wishes and experiment in their fantasy life with a variety of solutions that often harken back to earlier times when such wishes seemed satisfied. In play and daydreams, the individual experiences the gratification of the wish that all will turn out well, the pleasure of limitless capacities, and the comfort of having control over the amount of psychic stimulation. The creative writer converts inner fantasies into works of art and, as Freud suggests, artists use their creativity as the adult substitute for the imaginative play of children. The motivation of play, to daydream, and to do creative work is gratification and wish fulfilment.

Other theorists since Freud have also proposed a relation between children's play and later creative activity in adulthood. Greenacre (1959) made two critical distinctions. First, she suggested that play in the service of creative imagination functioned differently from play in the service of the neurosis or in the service of the conflict. Second, she distinguished creativity from productivity and defined creativity as "the capacity for or activity of making something new, original or inventive" (p. 62). It is the quality of originality and not the product that defines the creative act and imaginative play.

For Greenacre (1959), the link between early imaginative play and later artistic creativity is based on the child's and the adult's tendency to repeat experience. She suggests that throughout life, one course of repetitive activity is the need to establish or reestablish a sense of reality or familiarity in the perceived
or remembered experience. Through play or creative activity, the individual gradually establishes an experience as familiar and then feels the pleasure and relief of familiarity. Such repetition is different from the repetition of a previously traumatic experience in an effort gradually to master such an experience. At the very least, repetition of traumatic experiences in the classic sense of the repetition compulsion limits the individual's freedom to experience reality through a variety of internal mental viewpoints inasmuch as the traumatic experience exerts an unconscious, constricting influence on perception. This, in part, could be the basis of the distinction between imaginative play and play in the service of conflict.

The artist, just as the child at play, uses his artistic efforts to test the relation between the inner world of unconscious and preconscious fantasies and the outer world of reality experience. The more creative work brings these two worlds into a relationship of connectedness and synthesis, the more it is experienced as satisfying and stimulating to the artist and aesthetic to observers. Such a notion of creativity and play as uniting inner and outer worlds is similar to Winnicott's concept of the transitional space. He proposes that play gradually communicates a relationship between inner psychic reality and external experience, and that the very "precariousness" of play is due to it always reflecting the boundary "between the subjective and that which is objectively perceived" (1966, p. 597).

Greenacre (1975) also emphasizes that while creative power is sometimes enhanced by a loosening of individual conflicts, artists rarely use their work to resolve conflictual situations. Indeed, there is a particularly restless quality characteristic of creative adults that brings them to the novel and unfamiliar
similar to the energetic explorations of playing children. Creative work brings the individual to the edge of unfamiliar stimulation and then to the comforting solace of connectedness and familiarity. It is this rhythmic ebb and flow that modulates anxiety in the service of imaginative play and adult creativity. As Greenacre noted, many creative artists do not wish to be relieved of their anxiety for they fear that with such relief they will lose their creative urge. Several theorists have considered modulation of status of discomfort or level of stimulation as the essential motivation for and purpose of play and creative work (Berlyne, 1960; Fein, 1981; Shultz, 1979). While such theories do not take into account the possible inner fantasy configurations that lead to discomfort or heightened arousal, they do underscore the affective regulatory functions of play. Moreover, the rhythmic fluctuation in status of arousal has been proposed as a feature shared by adult work activity and children’s play (Csikszentmihalyi and Bennett, 1971).

Theoretical considerations from both psychoanalytic and developmental psychology perspectives suggest that artistic creativity and daydreaming serve similar psychic functions for adults as imaginative play serves for children. Several investigators have studied the concurrent validity of a functional relationship between play and creativity. For example, Dansky (1980) divided a group of children into players and nonplayers according to the amount of time the children were engaged in imaginative play during a free-play period. The nonplayer group was involved in imaginative play less than 5 percent of the observation time, while the player group showed imaginative play at least 28 percent of the time. In a more structures, one-on-one play setting, children using more imaginative play were more likely to use objects in unusual or non-literal
ways and were able, when asked, to suggest more alternative uses for a given set of play objects. Similarly, Hutt and Bhavnani (1976) presented children with a novel toy and divided the group into those who did not explore the toy, those who explored but did not play with it, and those who explored and then used the toy in an imaginative play sequence. When the children were compared on a test of divergent thinking or problem-solving strategies, those using the toy imaginatively scored higher.

Predictive relations between imaginative play and later creativity in childhood have been suggested by several analytic writers. Greenacre (1957) believes that the basic characteristics of creative talent involve a sensitivity to sensory stimulation and a greater than usual awareness of relations between various stimuli coupled with a "predisposition to . . . empathy" (p. 53) and sufficient sensorimotor equipment to allow for symbolization. These capacities, though subject to great individual variability, are aspects of imaginative play as well, and Greenacre posits that such characteristics were especially heightened in the childhood experiences of creative artists. Finally, such relations may not be limited to creative activity for, as mentioned earlier, Freud suggested a functional relation between the relief provided adults by jokes and the child's use of play. Jokes allow thoughts and fantasies to "escape" the censoring activities of the superego and provide an avenue for the release of instinctual tension and the expression of instinctual derivatives. In this form, humor and jokes are a direct heir of the child's play.
Discussion

Psychoanalytic theories of play emerged from Freud’s earliest formulations about children’s activities as they demonstrated origins of central characteristics in the psychic life of adulthood. While Freud used his observations of children’s play in the service of building a theory concerning adult mental functioning, the work of Klein, Waelder, A. Freud, Erikson, and others focused on aspects of play as a part of attempts at understanding the development of children in their own right.

The simultaneous growth and mutual influences of child analysis as a subspecialty of psychoanalysis and of interest in ego development were reflected in the increased focus on examining specific functions and characteristics of play activities. Conceptualizations about the reasons children play and about the characteristics of those activities began to emphasize ideas about shifting internal and external demands in the child’s life and the increasing array of functions available for adapting to them. These ideas added to previous ones held about the role of trauma and repetition compulsion in play. Greater attention paid to phase-specific characteristics in the child’s ego development and object relations helped to sharpen views about differentiating types of play and functions served according to periods of development.

As child analysis and ego psychological theories evolved, types of play were described according to various developmentally determined criteria. These include: different sites and props employed in play activities; the various ways of using and representing others in play; autoerotic, solitary, or group dramatic play,
games with rules; the use of differing amounts of narrative and action, and the like. Play may be viewed as both reflecting and advancing the child's growing capacities and negotiations of shifting developmental tasks. Differing types and characteristics of play could be seen as one view of the child's developmental status. In addition, children's play may be seen as representing the earliest form of verbal narrative and expression of unconscious fantasies and wishes. The thematic content of the narrative provides a view of those fantasies which are most active for the child at that moment of play. The process of developing the narrative, that is, the shifts in play and the interaction between the different narratives, reveals the interplay between wish and conflict and the workings of defense. Further, creating a play narrative may actively facilitate the emergence and maturation of psychic structures such as more elaborate and adaptive defenses and more mature affective regulatory capacities. In each of these ways, children's play narratives provide a means for understanding the changes in mental functioning and structure.

In summary, a critical review of the psychoanalytic literature reveals evolving perspectives on children's play that reflect the dominant trends in, as well as departure from, the mainstream of analytic theory. Where Freud was initially concerned about what children's play could tell us about adult psychic functions, subsequent contributors first emphasized the equivalence of children's play and adult activities (e.g., free association) and then focused on the importance of children's play as a set of phenomena worthy of consideration in their own right. Elaboration of notions about play has moved in both directions of the
developmental spectrum—from the playful activities of infancy to the role of play and playfulness in adulthood and in the creative process.

Central to all of the ideas reviewed in this chapter is the notion that play reflects the child's developing capacities to represent interests, concerns, and conflicts around two driving forces conceptualized in terms of libido and aggression. Running through all of the psychoanalytic theories of play is the notion that play "expresses" an underlying set of features associated with libido and aggression. These features include the specific wishes that are derivative of the drives themselves; the nature and organization of object relations; defensive maneuvers; and ego capacities (sensori-motor integration, memory, language, reality testing). In the succeeding two chapters, how child analysts arrive at formulations about the interaction of these factors through close scrutiny of children's play will be studied. In the studies reported, numerous analysts observed the same sequence of interactions between children and analysts in analytically oriented play interviews. These sessions were videotaped, observed by the panel of child analysts, and concerns about the meanings of the play emerged. The interest and focus of the following chapters will be on the nature of the consensus as well as how it was achieved.
CHAPTER FOUR

THE HOUR OF THE OEDIPAL CHILD:
GENERAL CHARACTERISTICS AND LIBIDINAL ASPECTS

Introduction

The aim of this chapter is to examine the process whereby child analysts arrive at generalizations concerning the meaning of play within the context of a child analytic setting. As an initial step in exploring this process, the concern is to discover the relationship between overt behavior and psychoanalytic generalizations about underlying dynamic themes and modes of expression. To achieve this aim the material under scrutiny has to be observations equally accessible to all through standardized processes of recording that have heretofore been limited to the analyst's process notes of what occurred in any given hour with a child in the privacy of the consulting room. In the next two studies, videotaped recordings of children's play in analytically oriented interviews will be considered by a group of child analysts and the results of these deliberations summarized. What emerges out of such deliberations is a consistent set of observations of themes and modes the child employs for representing them. In a further series of studies, an attempt will be made to operationalize the categories of observations that emerged.

Child analytic sessions provide a setting in which the child and relatively neutral adult may examine the themes of play, forms of expression, and patterns of interaction that emerge over time. The goal of the analyst is to understand the
child’s internal life, to relate this to his behavior inside and outside of the analytic situation, and, if needed, to try to alter inner or outer functioning through helping the child understand his experiences, feelings, thoughts, and the life he is leading. The analyst offers verbalization, clarification, and interpretation in the context of a relationship that includes elements of transference, displacement, and therapeutic alliance. In its classic application, the interview proceeds with minimal preparation of the child about its purposes or form. The analyst engages as an observer and participant in the discussion and play which the child leads. The analyst may offer comments of various types within and about the unfolding action and discussion and may shape the process through his speech and action in play. The child’s responses to the analyst provide information for understanding, just as do the analyst’s feelings and responses to the child.

Because of the multiplicity and wealth of data that emerge in child analytic sessions, it becomes difficult to assess rigorously those specific markers in the child’s play which inform the analyst’s assumptions about the significance of material presented by the child. Implicitly and often preconsciously, the analyst combines his observations of the child’s verbal productions, themes of the play, physical activities, and fluctuations in affects in order to confirm or disconfirm hypotheses about significant aspects of the child’s inner world.

In general, observations deriving from play sessions have been studied within the context of the extensive and long-term process of analytic treatment. The analytically oriented play session with the child can, however, be approached from a perspective other than therapeutic. As a model or laboratory setting for the study of functioning of the minds of children, play sessions relatively independent
of any clinical intent may provide information about mental processes which are of great interest to analysts and others concerned with development. To pursue this goal, a series of studies on the child psychoanalytic method of observing young children were initiated.

The first goal of this study was to use the format of discussions of play interviews for the purpose of identifying common generalizations concerning play. For heuristic purposes, these are separated into two sections. Reported in the present chapter are those generalizations deriving from libidinal components of the child’s play while the second chapter in this section identifies generalizations based on aggressive elements in the mind of the developing child that were based on an independent set of recorded observations.

Methods

Design

In the studies described in this and the following, 20 children were engaged in play sessions by psychoanalysts who were completely unfamiliar with any aspects of the children’s lives or histories. The child was engaged for three 45-minute sessions, a sufficient number of encounters to provide a rich base of information and chance to observe changes within the relationship, but too few to foster a relationship which would be felt as a serious loss by the child at the end of the final session. In spite of the limitations in nature and number of sessions, the children revealed themselves to a remarkable degree.

Interviews were videotaped and then transcribed. Tapes and transcriptions of the sessions of 10 children (6 boys and 4 girls) were reviewed by a panel of 5
experienced child analysts who met on a weekly basis for a period of 10 months. From the review and discussions of the panel, multiple points of observation emerged. These included: themes and their variations; the modes of representing these themes through play, discussion, and actions; forms of verbal and non-verbal communication; alterations in language use in different modes; relations with the analyst and use of the analyst; points of transition; and associations and disruptions in play. These discussions were recorded in minutes of each meeting; the summaries of these discussions are reported in this and the following chapter.

Sample

The children in this study were recruited from a University nursery school serving University-affiliated families. The study was presented to families as a study about individual differences in children's use of play. Twenty families agreed to participate. Of the 20 families seen, all but one came from intact families; parents' employment with the University ranged from teaching, research, management, and clerical positions. In addition, only one set of parents communicated serious concerns about their child's functioning and later requested a referral for a clinical evaluation. Sixty interviews with 20 individual children were done in six months. The age of the children in the sample ranged from four to six years. There were 11 boys and 9 girls.

Five child psychoanalysts conducted the interviews with the children. Each of the analysts conducted three play sessions with four children. Of these child analysts, two of them were women and three were men. The interviewers can be described as follows. (All the information below is in the "ethnographic present,"
that is to say it applies to the concerned individuals at the time of the study.) Dr. A is 50 years old, trained in adult and child psychiatry, and received his child and adult psychoanalytic training at the Western New England Institute for Psychoanalysis (WNEIP). He has practiced child psychoanalysis for nearly 20 years. Dr. B trained in educational psychology before receiving her training in child and adult psychoanalysis at the same institute. She has been practising child psychoanalysis for approximately 15 years. Dr. C studied physical anthropology before undergoing her training in adult and child psychoanalysis at WNEIP. She has been practicing for approximately 15 years. Dr. D trained in child and adult psychiatry before training in child and adult psychoanalysis at the WNEIP. He has practiced child psychoanalysis for over 20 years. The author was the fifth interviewer. He trained in clinical social work before undergoing training in child and adolescent psychoanalysis at the Anna Freud Centre, London. He has been practicing child psychoanalysis for approximately 12 years.

The panel that reviewed the videotapes was comprised of the five analysts described above as well as a communications specialist who received her training in speech pathology at the Institute of Neurology, University of London. She specializes in early language development and has practiced for 15 years.

Materials

Without specific information about the child, it was hoped that the analyst would be free, or at least less constrained than usual, to follow the child’s story wherever it might lead. The setting and play materials—a dollhouse and furniture, family doll figures, a truck and two cars, building blocks, a kitchen set, two toy
cowboy guns, and paper and markers—remained constant throughout the sessions
with all of the children. The child was allowed to present himself in any way he
chose—to portray through play and discussion those themes which emerged as
uppermost or dominant in the child’s mind. As stated earlier, each child was
engaged for three 45-minute sessions; all interviews were videotaped and
transcribed.

Procedures

Children in this age range were chosen for these studies because of the
unique coordination of factors that occurs in this phase of development and that
might generate particularly robust data. Children were asked to come for three
play sessions that were at most a week apart and in general done during a three
week period. The child saw the same child analyst for the three play sessions
each of which was between forty and fifty minutes. The interviewing clinicians
and panel of observers were blind to any information about the child, his/her
family or functioning within the nursery school setting. All sessions were
videotaped from behind a one-way mirror that separated the playroom from the
observation booth.

A separate interview with parents of each child focused on their general
impressions of their child’s development, interests and current status and was
conducted by a clinician who was not involved in interviewing the children or
observing the video-tapes.

The limited number of sessions employed in the research described here
does not yield the detailed unconscious material that would emerge in the course
of psychoanalysis. However, it would appear that, operating under the pressure of powerful urges and fantasies, the oedipal phase child seems impelled to play, talk, and act in a fashion that reveals manifestations of unconscious configurations and the organizing influences of cognitive processes. His play displays the processes of balancing between sexual and aggressive concerns and the mobilization of various ego functions to modulate their expression—the factors that make this phase of development a crucial staging post for the organization of representational and regulatory capacities.

The approach to the interviews focused attention on the child's story: what the child thinks and what is currently most compelling to him about his inner world. This approach was chosen deliberately so that the interviewer was not burdened by the question, "Is the child's story confirmed by other informants?" (i.e., parents and teachers). Instead, the focus was intended to be the child's inner world: What is "true" for him? What does he think? How does he experience his inner world at a particular point in time?

The weekly meetings of the panel that reviewed the videotapes typically lasted for two and a half hours. The meetings would begin by observing the opening segment of a randomly selected tape of one of the 10 children used in the sample. After viewing the tape for 10 to 15 minutes, panelists were asked to describe what they had observed. In the first instance, discussants were asked about themes that emerged in the given sequence. These themes included the child's concerns about bodily damage; interests in power, size, and capacity; forming partnerships with the analyst; patterns of interaction between the child and the analyst; modes of communication; and emotional presentation. Once
consensus about observations had been arrived at by the group, panelists were asked to specify which aspects of their observations determined their formulations. When there was disagreement about the formulations, panelists were asked to justify their alternate formulations with examples from the taped sequence. This process of viewing and discussing was repeated until a tape was completely viewed. At that time, broad descriptions and formulations about the entire play session were discussed until a general consensus was reached and/or alternative hypotheses and formulations were exhausted. This procedure was employed in the panel's review of all of the videotapes for the 10 children in the sample used for this phase of the study. As the panel continued to view videotapes, comparisons were made between tapes of different children.

The results of this study will be presented as they emerged around libidinal and aggressive themes. The current chapter focuses on general characteristics of play and the libidinal themes that emerge. While these themes emerged across the tapes that were reviewed by the panel, for the purpose of exposition the findings related to one of the ten children of the sample will be used to illustrate findings that emerged from discussions of the panelist group as a whole.

Results

In order to illustrate the methodology employed in studying the hours and mind of the Oedipal child in this phase of the research program, this chapter will focus on one hour of one five year old boy, Sam. This description will be used to illustrate and summarize findings of the panel of child analysts who examined the videotapes of ten (six boys and four girls) of the 20 children involved in the
study. This chapter will emphasize general characteristics of play observed in research hours with a particular focus on the presentation in play of Oedipal love and curiosity, primal scene fantasies, modes of communication these themes in the interaction with the analyst. Similarly, in Chapter Five, play sessions of three children will be used to focus on and illustrate aspects of aggressivity that were observed by the panel of child analysts who observed the video-tapes.

An Overview of Sam’s Hours

Sam’s first statement in his first hour with the analyst concerned crashing, and during that hour and the next he returned repeatedly to cars crashing and to accidents, as well as to concerns with bodily injury, exciting scenes in which he was involved in crashes with his mother while his father was in other cities, magical fixing, a hungry baby, and his wish for help from the analyst. Alternations between fantasies of omnipotence and fears of injury occurred throughout the first two hours. In his final session, Sam developed these fantasies in two particularly elaborate play themes. The description of this third hour will demonstrate how these themes, "The Automobile Accident" and "The Baby Sister," apparently unrelated at the level of manifest content, were expressions of a conflictual, latent configuration about Sam and his mother and father. In reconstructing this latent theme, the panel focused on an examination of play themes and actions. In addition, with access to transcriptions of the videotaped sessions, observers were able to specify more precisely the initial moments of the children’s sessions when derivatives of latent themes were revealed through
variations and changes in the use of language as illustrated in the analysis of Sam's play.

The theme of the automobile accident involved both enactments of crashes in imaginative play and narratives about crashes. Of the latter, Sam described what appeared to have been at least one real experience in which he and his mother were in an automobile accident. Similarly, the baby sister theme contained representations in play of caring for a baby, comparative size and strength, and a narrative account of a "real" baby sister named Charlotte. These two themes were joined by Sam’s enactment of kissing, hugging, and crashing between parent dolls, between siblings, and various combinations of adults and children.

The facts about Sam’s experiences were not known to the analyst until after the completion of the sessions. It was then revealed by the parents in a separate interview that Sam had in fact been involved in an auto accident with mother; second, that Sam was an only child and that Charlotte was a newly created fantasy of the session; and third, that Sam’s parents, for deeply felt religious and cultural reasons, did not believe in displays of physical affection between them in Sam’s presence.

The Communicative Field and the Third Hour

By the age of 5 years, the child’s developing cognitive and linguistic skills permit increasing use of verbalization. The child expresses complex ideas and thoughts, engages in successful interactions with other people, and uses language as one means of developing imaginary or fantasy play. The child of 5 moves from the preoperational stage toward concrete operational thought. The processes
emerging at this stage, such as reversibility, hierarchical organization, and perception of part-whole relationships (Piaget, 1945) are mirrored in the child's understanding and use of more sophisticated language. The child now is able to be more flexible and can use language out of the context in which it originally occurs. Reporting past events, projecting into the future, and "pretend" play all extend beyond the here and now. At this stage dialogues may have multiple meanings (Westby, 1982), and the child demonstrates an increasing capacity to consider the listener's perspective. The 5-year-old's maturational level has reached a point at which different aspects involved in communicating are coordinated smoothly. Vocabulary, syntax, intonation, stress, and nonverbal cues all contribute to the successful interchanges by which the child discovers more about himself, others, and the world in which he lives.

At the same time the child's sophisticated language can be misleading. While the child is developing an understanding of cause and effect (Westby, 1982) and conservation (Trosberg, 1982), he may not have a complete grasp of the logical relationships implied. This discrepancy was demonstrated verbally by Sam in his confusion as to what happened when he was involved in a car crash "because my Dad was in Boston" and by occasional mixing of temporal and quantitative concepts ("She drinks zillion pounds you know for half an hour").

Sam's sessions revealed several recurring themes characterized by play activities which were closely mirrored by language and affect, the three forming a complex but coordinated pattern. The most prominent themes concerned crashing, comparative measures of size across many dimensions and objects, and the care of a baby. The first theme had a historical context since Sam had been
involved in a crash with his mother; however, he dealt quite differently with discussing the real crash and with the "playing out" or pretend crashing. His mood, behavior, and language were subdued when he discussed the crash incident; he was motorically quiet and showed little movement in the room. The analyst engaged Sam in a dialogue in which he asked questions and then offered statements about how Sam might have reacted to or felt about the crash. In contrast, the "play" crashes—play episodes in which Sam acted out crashing between vehicles and people—were enacted with excited motor activity, the use of a variety of props, and language punctuated by lapses into crashing noises. During these games Sam provided a narrative about what was happening. The analyst, in turn, adopted a more passive role, acknowledging his continued attention through use of repetitions of Sam's statements or murmurs, "mmhmm," but rarely making spontaneous statements or inquiries. Together, Sam and the analyst developed a tacit awareness of the complementary style needed to foster their interactions.

The theme of size and comparative size was mentioned frequently across numerous different play episodes. The use of action, words, and affect combined to convey a variety of textures. For moments, Sam became a strong "He-man" character, standing tall and using a deep voice to issue commands and challenges as he moved around the room. At other times, he referred directly to his own personal strength, emphasizing these claims with powerful exclamations, e.g., "Wow, hey, I want to show you something else, watch. Okay?" His preoccupation with themes of size was apparent as he contrasted the size of toys within this small setting with his nursery where everything was bigger.
Size was also central to the language during the third theme. The baby
sister theme appeared to be prompted by Sam's discovery of a baby bottle during
an exploration of toys within the room, but the elaboration and commitment to the
theme suggested that it performed multiple functions for Sam. As Sam acted out
the maternal care of a baby--preparing a meal and feeding the infant--baby
Charlotte became a focus for Sam's statements about his understanding of growth
and the fact that "the more she ate, the bigger she would become." Later he
extended this idea and announced that "the baby was the strongest person," using
a fantasy to resolve his conflict about the issues of being small and helpless. The
rich detail of the play--including the provision without hesitancy of the baby's
name--raised no doubt about the "reality" of Charlotte or Sam's observations and
involvement in her care. During these episodes Sam's play was highly organized.
Although he stopped the play for moments to comment or pursue a previous
theme, he returned to the point in the baby play at which he had stopped and
easily resumed his caregiving.

In the course of the hour Sam departed from the major themes for brief
digressions. He commented on his new shoes, mentioned his funny book, and
wanted to know whether the analyst knew where he lived. These topics were
precipitated by an aspect of reality or an association, e.g., "That's funny. I have
a funny book." Comments such as these neither led to an extended interchange
nor disrupted the major theme in progress, with one exception which was different
in both content and form from anything in Sam's three hours. Sam initiated the
episode by stating, "Let's pretend," but as he continued it became unclear as to
whether he was pretending or reporting. This was unusual for Sam who generally
was explicit when he was pretending. He played out and described some hide-and-seek activity. His language included more complex structures than at any other point in the hour, and he used his longest utterance. Yet, he also became slightly dysfluent (as he did at times when he was in the process of organizing himself for a new game) and made errors in the use of pronouns (using both "they" and "our" in reference to the same characters).

The confusions in this episode (as in the use of pronouns in the baby play) stood in contrast with Sam’s capacity for sharply defining self vs. nonself and denoting "the real me" from a role taken in pretend play. This capacity was illustrated best in play episodes when Sam shifted his role, from being the active character to being a "puppeteer" speaking and acting through a doll or playing an assumed role. He marked out these transitions in roles by verbal or nonverbal means, such as "I’m He-man" or introducing a doll by name, through a formal greeting, or by saying, "Now she’s the baby again." Sam’s style of interaction, voice quality, and manner all changed at these points, revealing his internalized and integrated representation both of himself and of others. This capacity for role-play and for trying on different perspectives--from active crasher to wounded animal, from mothering caregiver to hungry baby--created a rich world of people and events in the analytic interview room.

The analyst and Sam used sophisticated means to maintain their interactions. Sam’s skill at controlling a conversational exchange was seen in his attempts to initiate a new topic. He often used "Hey" as a starter, alerting the adult and attracting his attention. Sometimes he would be less direct but more sophisticated in these efforts, e.g., "I’ve got an idea," and "Let’s pretend." He was
aware of the need to keep the listener informed and was careful to set the scene through props and verbal explanations. In addition, he frequently checked back with the analyst to make sure that he was following the game or to be reassured about his approval or agreement. This was done by and large through his use of tag-questions, e.g., "Okay?" When playing with the baby Sam became engrossed and his speech was more like a monologue than a conversation. Even then, he maintained a commentary that both accompanied his play and allowed the adult to be included in the activity.

The analyst, in turn, was equally responsive. He wanted to remain involved and to facilitate Sam's play without leading the way. At times when there was less of a call to respond, as with the monologue, the analyst made use of murmured acknowledgments as "turns" indicating his attention and continued involvement. When these were insufficient for Sam or when he clearly wanted an answer, Sam actively drew his partner back into the conversation. He looked at the adult and made direct and indirect attempts via questions, comments, invitations, and calls until he succeeded in getting a response, e.g., "Hey, where did you get this from? From a shop? Hmmm. Hey. Hey, who put this in here? Hey, let's pretend this is a closet to hide in. Okay?" Here Sam appeared to be aware of pragmatic rules which guide conversation such as (1) not asking a question unless you believe the listener knows the answer, or (2) if the listener does not answer right away, assuming that it may be because he has not heard or understood the question.

The analyst made use of partial and complete repetitions of Sam's utterances many times during the hour, a conversational strategy that avoided
directing and fostered the continuation of Sam's ideas. Analysis of the context in which the repetition occurred and the examination of intonational and nonverbal cues revealed that these repetitions served a variety of functions. The analyst used them to acknowledge the previous utterance, offer approval, provide and request clarification, emphasize a point, conspire in a game, or just initiate a conversational turn. Sam rarely interrupted the analyst's comments. When he did, the interrupted comment was always in some way interpretative or explanatory. This was most evident when the analyst commented empathically on Sam's position as a little boy in potential danger. Sam adamantly interrupted and at times indirectly contradicted such assertions. Comments that maintained or complemented Sam's fantasy of himself as powerful and strong were accepted and listened to with some interest.

Errors and linguistic regressions were clues, at times, to both dynamic concerns and the linguistic level of maturity. Sam's errors in grammatical forms, semantic relations, or fluency tended to occur when he was changing from one play episode to another and in the process of organizing his ideas. He also made errors when the material was loaded in its thematic content, such as when he was trying to describe the sequence of events in the crash. Sam's mistakes in his choice of pronouns in the hide-and-seek episode recurred in conjunction with the baby. These variations in reference to the baby were probably related to the confusion as to who the baby was and whose baby it was, "facts" which varied at different points in the play.

Sound effects entered into the play during the crashing games, with Sam at times beginning with speech and then lapsing into vocalizations. This reversion
to a less sophisticated communicative form occurred when the issues being played out were most exciting. At these points, language was inadequate to convey the ideas and feelings or express the excitement, consistent with Katan’s (1961) observation that the verbalization of perceptions precedes the verbalization of feelings.

Through his mastery of a whole repertoire of linguistic and communicative skills, Sam was able to sustain imaginative play, comment upon such play, describe his experiences in the real world, invent people and events, establish a relationship with the analyst, comment upon the relationship, respond to explicit and implied queries, and elicit information and responses from the analyst. Moments when his skills broke down—into dysfluency, confusions, or hesitancy—provided further information about affective and cognitive factors. Speech, gesture, and emotion were integrated into recurrent themes, as he played out his inner life by discussion, acting himself and taking on the roles of real and imagined others.

**Psychoanalytic Observations and Assessment**

Sam began the third session by directly engaging the analyst with a question and then with the statement that he wanted to make a "giant slide" or "bridge." He returned to this play theme at other points in the session. This opening play occupied three minutes; his bridge was big and exciting, something cars could go very fast on and crash. Although the car crashing was exciting, it led to thoughts of damage. Sam warded off the attendant anxiety about damage with thoughts of rapid, almost magical fixing. When the analyst drew his attention
to how dangerous the crashes were, Sam responded with an immediate change of subject which contained a direct denial and reversal of affect, "You know that I have a funny story book?" However, the defensive thought of the funny book did not ward off the underlying anxiety, and Sam turned quickly to the memory of his own accident. He tried to contain his anxiety by returning to the play of powerful racing cars, but again this fantasy involved thoughts of his own crashing. For the first time (5 minutes into the session), Sam explicitly identified himself as the excited crasher, and this was immediately followed by the thought of death--he crashed his car into a cow and it died. There was a marked change in affect at this point as Sam first became quiet and somber and then initiated a new episode with "Hey, I got an idea."

Sam began by substituting a "good little car" for the excited, crashing, powerful race cars. However, the good little car quickly became a crasher too; at the point that it slammed into a baby stroller, Sam began to recall his own accident. The introduction of the stroller represented the first linking of the crashing theme to the baby theme, foreshadowed in Sam's initial session by his statement that during his accident he was riding in "the baby seat." In this first account in session three, Sam did not explicitly identify it as "his" accident: "the little boy" was injured and bloody and the car was thrown away. This narrative led to Sam's somber and detailed recounting of his accident. He first stated that his Dad was away in Boston, apparently as a causal explanation "Because my Dad was in Boston." With the analyst's help, Sam was able to acknowledge that he "and my Mom too" were very frightened and screamed. This was followed by the introduction of the theme of big and little: his car was so small and the truck
seemed very big, although it was only a "middle size" truck. When the analyst suggested that he and his mother were both hurt, Sam appeared to try to contain his anxiety by minimizing the injuries: the cuts and scrapes received were only "little," "teeny-tiny." However, perhaps because of his association between little and helpless, this minimization appeared not to be effective in containing his anxiety and Sam again became the big, excited crasher. The underlying thought seemed to be: "No, the injury wasn't big, it was little. And I am not little and injured; I am the big crasher."

At this point (10 minutes into the hour), Sam shared with the analyst a funny, apparently incoherent, brief fantasy of one and then two people hiding in a closet. His underlying conflicts, represented in this brief fantasy, were marked on the surface both by the linguistic deterioration (infantile sounds) and pronominal reversals (confusions of "he" and "they," "their" and "our") described earlier in the review of the communicative properties of the session. In this sequence, Sam offered that somebody was hiding in the closet and then "walking down the stairs with our hands and they're playing hide-and-seek." In the midst of laughter and baby sounds, Sam explained of one of the characters, "He says to the boy, 'We'll close the door again and he can still find him.'" As Sam's excitement (and perhaps anxiety) increased, he again elicited the analyst's involvement with the comments: "Isn't that funny?" and "Hey, hey, that's strange." Immediately following this play, Sam reintroduced the theme of the breaking bridge, crashing cars, and bodily injury.

Although Sam's fantasy about the closet was brief and fleeting, careful analysis suggested that the dynamically central aspects had to do with two people
hiding and doing strange things, a boy being shut out, excited crashing feelings, and fear of injury. This sketch of an almost incoherent fantasy ushered in the issues that occupied Sam for the rest of the third session and represented his first developed statement to the analyst concerning his fantasies about the activities of his parents and his wish to be involved in their strange and exciting activities from which he felt excluded.

Sam’s fantasy of people hiding in the closet, his wish to intrude, and his anxiety and fear of injury were promptly followed (12 minutes into the session) by a compensatory fantasy of being powerfully strong and the breaker of knives. Sam became He-man, whose magic sword makes him the most powerful figure in the universe; he entered this fantasy by assuming the vocal mannerisms of the famous cartoon character. In addition, the intensity of Sam’s wish for omnipotence was expressed by his insistent statement, "This is real."

The analyst interrupted the flow of play with his interpretation of Sam’s underlying fear about being hurt in the real car accident with his mother. Sam explicitly rejected this, saying that he had been afraid because he was "sick." However, when the analyst adjusted his interpretation to address primarily Sam’s wish that he would have prevented the accident had he been He-man, Sam readily concurred. He began to search his memory for a psychologically acceptable causal explanation for the accident. His affect changed at this point, and he became somber and sad. The explanation Sam proposed was that the car was old and he was sick. When Sam returned to his play (14 minutes into the session) he seemed to find relief in turning from the passive role of victim to the active role of the
mighty "ball kicker" and "ball squasher." He became visibly excited and much more physically active.

As he thought of kicking "high and hard," he reintroduced the theme of "big and little." His activity and excitement centered on determining what was the biggest and the tallest. He was explicit that he was the big crasher knocking down the little ones. However, this denial was apparently not sufficient to reduce Sam’s anxiety.

It was at this point of anxiety about danger that the fantasy of the baby made its full-blown appearance (20 minutes into the session)--first through detailed play involving the preparation of a baby bottle and then with the introduction of the hungry baby. Sam hinted at his identification with the baby by making an explicit connection between the baby, Sam’s nursery school, and the theme of big (and little). Sam’s imaginative play described a magic formula enabling the baby to be transformed into a big powerful housebreaker. He then explicitly equated himself with the baby. When the analyst interpreted the wish, Sam confirmed it both verbally and in action--the baby was the big crasher who could not be hurt. As if to emphasize that the baby was powerful and invulnerable, he again used his He-man voice in speaking for the baby.

This sequence was followed by long, quiet play in which Sam fed the baby (24 minutes into the session). Sam then connected the need for the (magic) food with being sick with a headache, and this was followed by thoughts of nighttime and sleep, a fantasy in which he explicitly engaged the analyst. Sam used his deeper voice to express his wish that the analyst sleep with him, a device which
probably allowed him to sustain his fantasy of invulnerability and thereby contain any anxiety generated by such directly expressed longing for the analyst.

As this play continued with Sam's making statements suggesting an equation of himself and the baby, the analyst asked, "Do you have any babies in your family?" (30 minutes into the session). This seemed to be an attempt on the part of the analyst to discover where Sam located himself in this play (was he the baby or the mother?). It is this question that precipitated the introduction of the baby sister fantasy. At first Sam said, "I have one baby"—an ambiguous statement that could be understood to mean he was the one baby, but when the analyst attempted to clarify this, Sam suggested that he and his mother had a baby, Charlotte, and that this was why his mother was no longer with him (as if to say, "I am not a baby; I am big enough to have a baby with my mother"). Sam presented the story of his baby sister with great conviction and convincing detail. Sam repeatedly elicited the analyst's involvement in his imaginative play of nurturing the baby sister Charlotte by his statement, "Let's pretend." Again, it was only after the conclusion of this final session that the analyst learned Sam was an only child.

When the analyst introduced the topic of the conclusion of the sessions (35 minutes into the hour), Sam's affect shifted--he became depressed and momentarily confused. This provided a transitional moment into the last play theme involving the exciting activities of his mother and father. In this explicit fantasy, Sam orchestrated the parent dolls taking a walk. They kiss and fall down, and then the father becomes bloody. When the analyst queried who could help, Sam replied, "I'll show ya," and then reintroduced the fantasy solution of
becoming magically powerful through eating. He readily accepted the analyst’s interpretation that Sam wished that he could be big enough so he could take care of everyone and protect them from dangerous car accidents.

Sam then elaborated the theme of kissing, by introducing a brother and sister who kiss, are crashed into, and then run over by a car. He denied the anxiety generated by this fantasy and supplied a compensatory fantasy with references to the He-man theme (the most powerful in the world). He equated the brother and sister with father and mother, suggesting the child taking daddy’s place.

This led to excited thoughts of crashing and injuring mother, followed immediately by the small baby theme and its accompanying compensatory fantasy that the baby is the strongest person.

Throughout this final session Sam struggled with the affects of excitement, anxiety, and depression which seemed to be generated by his fantasies about what his mother and father did in his absence, his wish to engage in similar activities with his mother in his father’s absence, and his fear that he would be injured or killed as the result of such dangerous activity. Sam tried to resolve his conflicts through the use of a small number of devices: fantasies of omnipotence most dramatically expressed through the He-man persona, denial, joking, requests to the analyst for help and protection, regression (I’ll be a well-nurtured baby again), and magic. None of these solutions worked for very long, perhaps because of the organizing influence of the actual traumatic experience of the car accident when his father really was absent and Sam and his mother were hurt.
The Hours of An Oedipal Child

Analysis of the sessions of this 5-year-old boy reveals the successful orchestration of multiple forces within a play interview. Unburdened by any specific information about Sam's current life or past experiences, the analyst followed emerging themes and feelings on the basis of immediately available data and analytic theory about mental functioning. He also took Sam's historical reporting within the context of what was dynamically most salient within the hours. The one or two auto accidents were felt by the analyst to reflect at least one real and serious accident in which Sam was involved. The fact that there was a baby in the family was also accepted as reflecting reality, since it was described by name, cared for realistically, and given as the reason for mother not accompanying Sam to sessions. However, equally clearly, the analyst recognized that the accident was experienced by Sam in relation to his fantasies concerning the power of his aggressive impulses and his need to defend himself from the consequences of these wishes; similarly, the baby was seen as reflecting aspects of Sam's own wish to be cared for and his sense of being a fantasied father of his mother's baby, with the dangers and pleasures this would entail.

The success of Sam's third hour lies in the emergence of these complex, converging fantasies revealed to the analyst through the play activities of the child and through the truly free associations. The analyst was allowed to follow Sam in his struggle to bring together profoundly contradictory aspects of his inner world: his longing for continued and exclusive nurturance and love from his mother, and his wish to grow into a man like his daddy.
Sam was able to experience the contradictions in these wishes because of his new capacity to imagine his parents' relationship without him and his ability to place himself affectively via his imagination in each role of the triad. The analyst not only untangled the complex web of Sam's associations, thereby revealing the underlying, central affectively laden fantasies, but he was able to appreciate and affectively experience these fantasies himself.

Finally, as the analyst could communicate to Sam his affective appreciation of Sam's wish to be the powerful and exciting victor of his mother's heart without incurring injury, damage, or death (loss) for anyone, Sam appeared to realize he had been understood. Sam's deepening relationship with the analyst was conveyed in his open statements toward the end of the hour of his wish for the analyst's loving care in helping Sam to find an internal organization that would permit Sam some measure of confidence and safety in his journey out of, and beyond, the triangle.

During the third session, Sam became able to elaborate with increasing complexity what appeared to be his central and most conflicted fantasy about himself, his mother, and his father. He wished to be the big "crasher" who was both powerful enough to protect his mother and big enough to engage in exciting, bloody crashings and breakings with her as he imagined his father did. However, he was frightened that such excitement would leave him vulnerable to danger and that he would be broken instead of being the destroyer.

Throughout the hour, Sam attempted various solutions to this internal dilemma: through fantasies of magical invulnerability, longing for his father's (or the analyst's) protection, and through intellectually solving the scientific question
of big and little. One fascinating attempt at resolution occurred during Sam's longest uninterrupted play sequence, involving "baby sister Charlotte." In this episode, Sam developed the fantasy in which he was both his mother's baby and a maker of babies *with* her.

**Discussion**

Interviews with children such as Sam have provided rich data about the communicative capacities of 4- to 6-year-old Oedipal-phase children, and particularly their ability to use language for diverse purposes—reporting past experiences, predicting and projecting about future events, exploring beyond the reality with which they are familiar, making jokes to experiment with possibilities, and creating various types of imaginative play. One can see in such sessions elaborate conversational skills and abilities to take the listener's perspective. At this stage, the child is able to use many levels simultaneously, selecting vocabulary, structures, and appropriate paralinguistic markers, such as intonation, stress, and eye contact, in order successfully to engage with others and follow his own ideas (Chomsky, 1969; Bates, 1976; Bloom and Lahey, 1978; de Villiers and de Villiers, 1978; Olson, 1980).

One might hypothesize that these communicative capacities are necessary preconditions for social development beyond a certain point, or for entry into the oedipal phase. It is useful to relate these linguistic capacities to some of the critical elements of the oedipal configuration, for example, the child's interest in
comparative power and his suspension of disbelief, and what these entail in relation to aggressive and sexual urges and coping with reality.

The comparisons to, and assumption of, attributes of the same sex parent are highly invested by the oedipal child, who is convinced that his or her fantasies of displacing the rival can and will be realized if only the object of the longings recognizes the superior worth. How the child defines this worth will differ among children and between the sexes and may be represented in terms of physical power, intellect, abilities at manipulating, seductiveness, cooking skills, friendliness, physical charm, among others. That the conquest of the beloved object's exclusive affection is also predicated on the elimination of the rival proves fertile ground for the child's aggressive fantasies and fears of retaliation.

Above all else, the oedipal child is under the pressure of instinctual drives which cannot and will not find immediate gratification in reality. In order to sustain his or her quest, the oedipal child must be capable of suspending disbelief--to deny that he or she is small and cannot enjoy the privileges and pleasures of the grownups (Freud, 1920). However, the child is harassed in his quest by anxieties and real deficiencies which must be denied, lessened, or worked through if his invincibility is to be maintained (Peller, 1954). The little girl must find ways to explain why she does not win an exclusive position in father's life in spite of her attempts to woo him (by baking "special treats" just for daddy, wearing mother's lipstick, sitting on his lap) and his admiring responses. The boy at some level needs to confront his exclusion from the parents' special relationship, even though his mother acknowledges how big, strong, and smart he is. As discussed in Chapter Two, Oedipal children must turn from a passive role in
which they might fall prey to dangers and disappointments to an active one in which they are the master of their fate (Freud, 1917). In this task they turn to fantasy and its expression in play.

While the child of this age has an increased capacity for reality testing, his continued facility for magical thinking allows greater access to wishes that do not fall prey to immediate reality-bound repudiation. He is thus protected from the recognition of ultimate frustration. His increased capacity for symbolic representation opens the door to more elaborate forms of binding anxiety and discharging instinctual tension via mentation. The child’s advances in cognitive and motor skills both yield functional pleasure and support his central task of minimizing anxieties and compensating for apparent inadequacies when comparing himself to the adults with whom he competes (Peller, 1954).

Perhaps one of the most impressive features in the play of the Oedipal children in this study was the fluid movement through a range of themes whose expression was determined by the urgency of what was uppermost in the child’s mind—exciting, pleasurable, or fearful. In this regard, the child’s push toward mastery seems to combine with his curiosity to arrive at solutions in play in which theories may be tested and explored. Do babies come from eating special, magical foods? Do Mommy and Daddy hurt each other when they are in their bed together without me?

The Oedipal child’s play reflects a plasticity of representations employed in the service of creating and maintaining the illusion of wish fulfillment and invincible mastery. The guiding motif of the child’s creativity is contained in the oedipal wish and in his attempts to ward off its attending dangers and
disappointing confrontation with reality. The child in this phase of development is able to juggle the inconsistencies he perceives both *within* his fantasies and *between* his fantasies and reality. There is equal flexibility as the constituent themes of the oedipal phase seek expression in fantasy and play. At one moment aggressive competition with the rival may be uppermost as the child assumes the role of the strongest, most attractive, and competent member of the family. The same role may simultaneously give expression to the child's exhibitionistic impulses or wish to protect and care for the object of his longings. The play may easily shift from themes of power and strength to scenarios involving the production and feeding of babies. Repeated crashing of toy cars may at one moment express the child's concerns about aggression and bodily intactness. With additional features and elaboration, the same play may articulate the child's primal scene fantasies. In this latter context, the child's curiosity about the contents and activities behind closed dollhouse doors or in closets and bedrooms may at once give vent both to his sexual excitement and to his disappointment on being excluded from parental activities. Equally, increased interest in theories regarding the origin of babies, sexually exciting sensations focused on the genitals, anatomical differences, and comparisons of physical attributes between sexes and between adult and child versions will be expressed in the Oedipal child's fantasies and imaginative play. Reality events in the child's life--accidents and injuries, as well as surprises and pleasures--are dexterously integrated into his fantasies as they stimulate, organize, and accentuate the specific themes with which he struggles. These issues have been studied intensively by child psychoanalysts, e.g., Bornstein (1949), A. Freud (1951), Fraiberg (1966).
If, in the expression of these specific themes the play itself is unable to maintain an adequate distance from painful, objective reality or anxiety aroused by the fantasy, the child still has a variety of defensive maneuvers at his disposal. He may employ humor or silliness in observing the character he has developed in the play. The role may be elaborated in order to add dimensions that would compensate for the intruding sense of vulnerability. Alternatively, the specific role and theme in the play may be abandoned altogether as the child shifts to ones more congenial to the maintenance of pleasure and the prospect of mastery. This shift might in some instances herald regression to dominant modes of gratification found in earlier phases of development, e.g., the child might assume the voice and behavior of a baby or provocatively mess or destroy play materials. However, the child might equally turn to an intensification and insistent involvement in the fantasy by pulling further away from referents in reality, even creating in his play fantasied objects such as the baby sister of whom he is the father and who also is he. Equally, the intensification of involvement with a particular fantasy may narrow the range of play while the child tries to overcome anxiety in the repetition of a singular theme. In these varied ways, the child's play may manifest his search for internal harmony as he moves forward developmentally to higher forms of integration (A. Freud, 1974, 1979a, 1979b).

The clinical generalizations to emerge from the discussions with the panelists fell under the following categories: (1) Thematic content; (2) Affective presentation; (3) Activity level; (4) The relationship with/or attitude toward the analyst; (5) The interaction between the child and analyst during the sessions. In the libidinal domain of themes, categories of observations were developed
concerning the body (e.g., anatomical differences, concerns about damage, power, and bodily functions), relationships (e.g., imitation of adults, loss, partnerships), morality (e.g., rules, punishment), aggressivity (e.g., fighting, destruction), sexuality (birth and babies, curiosity, primal scene), and setting the scene (e.g., preparing props of play, identifying characters, references to time and pretend).

Limitations

The child's and the analyst's latent or manifest responses to being observed and recorded need to be considered in evaluating information derived from recorded research sessions. Children were informed that there were observers behind the one-way mirror. Only a few seemed concerned--and then mostly transiently--about the one-way mirror or who was watching. The analysts grew comfortable with the setup, in large part because of the trust developed among the research group. Yet, subtle effects of the method no doubt can be found in the behavior of both children and analysts. From a methodological point of view, such effects need to be balanced against the benefits of videotaping as compared with the traditional use of narrative process notes. The availability of videotaped sessions provides the possibility of meticulous and repeated scrutiny of play sequences and transcriptions of material. During the course of reviewing the videotapes, the interviewers themselves were always impressed by the richness of what the children and they actually did, the exquisite structure of hours, and the content and phenomena that had eluded their recollection (and often their awareness during the sessions themselves). Videotaping preserved the observable data for independent review by the panel of analysts; approaching the material
from different perspectives, collaborators often provided new insights into the meaning of specific episodes and the organization of sessions. In these ways, the videotaping and review of sessions enriched the appreciation of the child psychoanalytic approach by the principal investigator and collaborators.

For methodological clarity, it is important to underline how research interviews or discussions with children are not the same as psychoanalytic sessions with children in therapy, however similar they may be in global appearance, setting and guiding interests. In the research sessions, the range of information which is needed for diagnostic assessment, usually as provided by parents and others, is absent; nor are these research discussions guided by the basic therapeutic concern of psychoanalytic sessions. Most obviously, a session during the second and third years of a child analysis exists within the process of the special analytic relationship, which both reflects and shapes the form of the material. To equate a research interview, then, with a psychoanalytic session would be unfair to the function and goals of either. However, what may be learned from one may be applicable to the other, specifically with regard to making more explicit those levels of observation that are employed by the analyst during an evaluation or during the course of a lengthy treatment.

In this phase of the research program, the summary of findings was based on the prominence of themes and approached on a qualitative basis. There was no quantitative analysis of the panel’s observations. While this strategy has inherent limits regarding the demonstration of the panel’s observations, the
qualitative approach used in this study set the stage for the development of quantitative methods for recording observations of play interviews which will be described in Section Three.
CHAPTER FIVE
AGRESSIVITY IN OEDIPAL PLAY

Introduction

While the libidinal, or loving aspects of the Oedipal phase of development serve a significant source of concerns, interests and conflicts that are represented in the four to six year old child’s play, the representation and central role of aggressive elements in the mind of the developing child require equal consideration (A. Freud, 1972).

It is important to note that in the term "aggressivity" will be used in this chapter to denote hostile or destructive aggressive actions which refer to persons or things being attacked, hurt, damaged, or destroyed. In the child psychoanalytic "playroom" aggressivity is represented in language, narrative structures, and play transformations. These surface presentations are markers for, but not isomorphic with, mechanisms which include inner representations and fantasies. It is not the intent of this chapter to attempt to link these observed behaviors to notions about underlying drives or to tackle the larger theoretical issues concerning aggression that destroys versus aggression that binds or contributes to structure building. Instead, the chapter addresses what can be understood about the child’s inner world through an examination of these surface presentations, both direct and transformed, of destructive aggression? Are there common elements, themes, and dilemmas as well as characteristic modes of presentation for the "normal" Oedipal boy? If so, what is the range of individual variation?
Methods

Design

The same design employed in the study described in Chapter Four was used in the study of aggressivity reported in this chapter.

Sample

The same sample described in Chapter Four was used in conducting the study presented in this chapter.

Materials

Using the same group of ten children whose videotapes were examined for general characteristics and libidinal aspects of play, this chapter will explore the specific characteristics of aggressive elements of play that were observed by the panel of child analysts as described in Chapter Four. In this chapter, the second research sessions of three 5-year-old boys will be presented. The second sessions of the series of three were chosen for closer examination because of the relative familiarity of the child with the analyst in the absence of an impending dissolution of this new relationship. Following the descriptions of individual sessions, central characteristics of each of the boys and comparisons of the findings will be discussed.

Procedures

The procedures employed in the panel's discussions about general characteristics and libidinal themes observed in the videotapes of play sessions was
also employed in this study. The difference in this study was that the panel focused its discussions on the children’s presentation of aggressivity in play.

Overview of Research Hours

Bobby

Bobby held onto his father’s hand, maintaining physical and verbal contact with him for the first four minutes of his second play session; during this time Bobby spoke in a low voice to his father about various play materials. He then looked at the analyst for the first time and announced, “I still remember what we were playing last week.” In a whisper, Bobby told his father that he and the analyst had played about robbers. (They had, in fact, built a "bank" out of cardboard blocks and had protected some play money given to Bobby by his father by shooting at imaginary robbers.) As the father got ready to leave, Bobby picked up a toy eggbeater and warned the analyst of the dangers of "someone’s shirt getting caught in it." Bobby did not return his father’s "goodbye" but, instead, continued his commentary on the eggbeater. Suddenly Bobby reminded the analyst, "We weren’t finished with the game" from last week. Instead of returning to the theme of robbers, however, Bobby found a second eggbeater, compared the sizes of the two and suggested that the analyst could use the larger one. Moments later Bobby again reminded the analyst of the shooting game of the previous session, but turned instead to a four minute play sequence of cooking a meal; he maintained a running commentary on the relative sizes of various pots and pans, making sure these were equally divided between the analyst and himself.
This cooking sequence came to an abrupt end when Bobby, searching for more cookware, looked over at the building blocks and announced, "Oh, here's the shooting place."

For the next five minutes, Bobby was busy rebuilding the "bank." In contrast to the cooking sequence, Bobby wasn't satisfied unless the analyst was actively involved in his preparations. As he built the protective wall, he asked the analyst "Aren't you going to help me?" and described all of the preparations for the shooting play in terms of "we"—what he and the analyst needed to do together. Bobby was pleased to find the gun he had used the previous week but then warned the analyst about its potential dangers. As he put his gun into his back pocket, he explained, "We'd better not put guns in our pockets because you might shoot and go right through the pants." Although Bobby assigned the analyst and himself positions behind the protective wall, he seemed uncertain about how to actually enter into the shooting action of the game. After several moments of aimless movement as he talked about the play, Bobby abandoned the story line. The carefully built fortress was turned into a house in which Bobby and the analyst were to cook a meal together.

Bobby was the cook in this five minute sequence and again his activity centered around insuring an equal distribution of domestic props. In the middle of this cooking play, Bobby discovered a second gun and exclaimed excitedly, "Now we both have guns!" He invited the analyst to return with him to the story about shooting the robbers. Bobby explained that he'd better put away the eating utensils quickly because "We're being robbed." At this point Bobby once again invited the analyst's active participation, and they both hunkered down on the floor.
behind the protective wall. Bobby explained that the robbers wanted their money and that the analyst better start shooting or he would get shot.

The shooting game, lasting 13 minutes, constituted the longest play sequence in this session. The theme of big and little seen in the earlier cooking sequences was now expressed in the context of power and safety. Bobby explained to the analyst that they could not use their fingers because "fingers don't shoot anything." However, with gun in hand, Bobby quickly "ran out of bullets." In an apparent effort to maintain parity with the analyst, he suggested, "I think you ran out of bullets, too." A remedy was found when Bobby discovered that he not only had extra bullets but they were also special "blowing up bullets"; he shot one of the robbers who then blew up. Throughout the shooting, Bobby continued to run out of ammunition, each time discovering increasingly greater supplies, the destructive potential of which grew exponentially. When the analyst commented on how powerful his gun was, Bobby suggested they take a brief break from the shooting, reporting that most of the robbers got killed but adding, "I think my arm got shot." Again, insuring that the adult remain an equal, he proposed that both he and the analyst had sustained the same kind of wound. When the analyst pointed out how dangerous the robbers were, Bobby agreed, referring to his diminished supply of ammunition. Throughout the shooting sequence, Bobby compensated for danger and vulnerability by introducing increasingly powerful armaments. Soon he not only owned a much larger gun than the analyst but in the face of diminishing supplies of ammunition he discovered an inexhaustible and potent source. Moving to another part of the room, Bobby spied a lion and decided that the lion's sharp bones and sharp teeth would be even better, more
destructive than the bullets. He not only easily defeated the dangerous lion but
became a "robber," himself, in order to steal its teeth with which to load his gun.
With the bigger gun and more powerful ammunition, Bobby's fantasies about his
destructive power and any possible dangers grew more elaborate. He now
explained that his gun shot 10,000 bullets, teeth, missiles, and special dynamite
caps, adding as an aside to the analyst, "We have different guns." He turned his
attention from shooting robbers to killing poisonous snakes. He warned the
analyst that "You need to shoot them when they're not looking and to shoot them
ten times," because, he added with much gravity, "I think they have five hearts."
Bobby then combined the two sources of danger that he needed to overcome and
now shot at bad guys who had poisonous snakes as pets.

Finally the scene was set and all dangerous contingencies appeared to be
covered adequately. Bobby could move from narrative preparation into the action
of the fight. He lay on the floor with the analyst next to him and fired his gun
furiously from behind the wall. After 42 seconds of shooting, Bobby stopped and
announced, "That's enough shooting for today." For a moment just prior to his
return to cooking play, Bobby became a robber himself, stealing a doctor's kit in
which to keep his money and guns.

Bobby now returned to "the kitchen" preparing food for guests who were
to join him and the analyst for dinner. In this final play sequence using the last
nine minutes of the session, Bobby again became the sole player, although he
kept the analyst informed of his progress preparing for his guests. While search-
ing for more plates, he spied a small piece of plasticine on the shelf and told the
analyst, "There's only one thing; there's some kind of doo-doo in there, look for
yourself." He immediately announced that the guests weren't coming after all: "They changed their mind." Explaining that there would have been too many guests anyway, Bobby now set the table for two and, with the meal ready, instructed the analyst to serve himself. He and the analyst sat at the table and pretended to eat until the analyst announced the end of the session: "That will be our last drink because then we'll have to stop for the morning."

Bobby disengaged from the play at once and went into action cleaning up the room, warning the analyst: "We have to remember we have to put everything back where it was." Although Bobby asked for the analyst's help in dismantling "the shooting place," he insisted that he could move the table back by himself. After completing this task, he surveyed the room, announced that everything was in order, and then was ready to leave.

**Psychoanalytic Perspectives:** Bobby utilized two very different modes in representing the aggressive fantasies of his inner world; these two modes or domains were distinguished by play themes, his relationship to the analyst, his use of language and affect. The two modes were also quite different in the degree to which aggression was presented directly. The "cooking" play appeared to be "non-aggressive;" Bobby's main concern in this play was cooking for the analyst; the analyst was clearly a grown-up and Bobby was clearly a child. The world presented in this play was neat and orderly, with the emphasis on the equal distribution of supplies. Bobby's fantasy seemed to be of a harmonious dyad in which concern with good, bad, and dangerous intrusions was unknown. Although the story narrative emphasized the harmonious dyad, Bobby's affect was subdued and he made little eye contact with the analyst; we thought the constricted affect
...and limited eye contact hinted that the cooking play and the "shooting" play might be linked at a latent level. The effect of the cooking play was to keep the analyst carefully controlled in space and in his relationship to Bobby. It was as if this play functioned as a denial in fantasy of the aggression given more direct expression in the shooting play. Bobby's sense of the potential danger of more direct aggressive expression was suggested by his initial inability to fully enter into the shooting story and his retreat to the second cooking sequence. However, aggressive concerns were fleetingly represented in this apparently non-aggressive narrative: the discovery of the eggbeater stimulated the thought that "someone's shirt" could get caught in it. Bobby followed a pattern of introducing a potential danger and then developing an immediate solution (e.g., the egg beater could be oiled; dangerous poisonous snakes could be tricked and killed, etc.). Dysfluencies were most notable when he was unable to find immediate solutions to dangers. Frequent references in play to comparative size indicated Bobby's acute awareness of real physical differences; the focus on big and little was accompanied by Bobby's insistence on equal distribution of props. Indeed it was when Bobby was unable to insure parity in this play mode that he turned both times to the shooting story. His fantasies regarding the power and relative safety associated with whether something was big or little only gradually emerged in the context of the "shooting game."

Bobby introduced this second narrative both linguistically and through the activity of demarcating the story space by constructing a wall. In this mode Bobby emphasized the friendly, cooperative dyad together against aggressive intrusion and attack. His and the analyst's aggression was justified as the
reasonable response of good men to outside badness. Bobby’s frequent references to comparative sizes and quantities, and the need for equal distribution of armaments may have served his need for reassurance that the analyst would remain an ally. Bobby’s desire for order, balance, and equivalence was marked linguistically as he gave instructions to the analyst about their play (e.g., "this is mine, this is yours;" "the big one you could use, the little one I could use;" "we gotta make it exactly the same kind, the same thing"). Only when the safety of this alliance was firmly established could he allow the aggressive themes of the shooting game to flourish and for his wish for superior power to emerge. Although Bobby at first emphasized the equality between himself and the analyst, as the play continued he began to more directly express the wish to be more powerful than the analyst; Bobby’s power resided in his dangerous weaponry which was sharp, piercing, explosive. In the manifest story narrative goodness and badness were absolute and clearly differentiated: the robbers were trying to steal Bobby’s money and so he was good to fight them off. The latent image in the story, however, was of Bobby as robber—the money he brought to the play session was really his father’s and Bobby "stole" both the doctor’s kit and the lion’s teeth; one might speculate that Bobby wished to "steal" the power and potency of the big men but was afraid of their dangerous retaliation should they discover these secret wishes. The specificity of Bobby’s fears was presented in the shooting play: he would be wounded, his body pierced, he would be killed.

Bobby’s discomfort in recognizing his own badness was given its most vivid presentation when he imagined he had encountered a piece of "doody" during the cooking play: he became visibly anxious and then was only able to
continue the play by excluding the imagined invited guests. However, it was
during the shooting play when aggression and danger were clearly and elaborately
represented as coming from outside the dyad that Bobby was most directly
engaged with the analyst, conveying pleasure in their companionship.

Bobby's care in keeping the danger "outside" allowed him to express the
exciting aspects of aggression through the actual shooting play as well as through
the elaboration of his fantasies about his and the bad guys' power. He was careful
that the shooting was justified and sufficient but not carried to excess. In this way
he was able to experience his own excitement without running into danger.
Taking care to insure safety and order was also apparent throughout the session
in Bobby's pattern of using words to identify the problem or dangerous situation
and then finding an immediate solution (e.g. oiling the egg-beater would prevent
someone getting caught in it; poisonous snakes could be taken care of by shooting
them five times "from behind"). When he was unable to find reliable solutions to
threatening situations he became dysfluent or he simply brought those sequences
to an abrupt end.

Although Bobby's story gives representation to thoughts of magical repair
of the body (his wound disappears), there was remarkable stability and wholeness
to his body and that of the analyst. Bobby was able to acquire power not through
changes in his body but by the addition of technology and skill and through his
alliance with the powerful male analyst.

Bobby utilized multiple transformations of the properties and functions of
objects, rather than characters, in the service of maintaining a balance between
his wish for aggressive prowess and his wish for safety. Bobby was able to rely
on his imaginative transformations to maintain a feeling of safety for himself in a particular role.

Bobby’s concepts of good and bad were highly stable but required more justification than Eddy’s or Jim’s for his more elaborate aggressive presentations during the shooting game and so, the attacking robbers were presented as increasingly more ferocious and dangerous. As he finally let loose with a volley of gun fire, Bobby appeared to reach the bounds of his clear delineation between his identification with the "good guys" and his repudiation of the "bad robbers" and he stopped shooting abruptly, announcing, "That’s enough shooting for today."

Bobby expressed his wish to be the most powerful only after he had forged a companionable, equitable alliance with the adult. He consistently located badness outside the dyad and justified his aggressivity as a defense against the bad guys. He stressed reliance on technological power as a way of warding off bodily damage and he emphasized the integrity and wholeness of the body.

Eddy

Eddy’s interest in bodies’ and bodily transformations was a central theme. His concerns about his own body and its integrity were presented in the context of his recognition of, and confusion about, anatomical differences between the sexes, experiences of toileting, and theories about birth and babies. From the beginning of the second session, Eddy invited the analyst into his play on his terms only--instructing the analyst what to do and responding only to those queries which added to the elaboration of his story. From squiggle drawings in which he repeatedly listed body parts (with particular attention to noses) Eddy drew a lion,
explaining, "Lions roar and eat people." In an apparent reference to toy "transformers," Eddy distinguished between "robot" lions and "real" lions. In the process of drawing, he noticed a broken toy giraffe and suggested that a lion had broken its neck. Eddy wanted to repair the giraffe and earnestly offered that "mommy could fix it with her new tape." While turning his attention to building a tall robot with blocks, he instructed the analyst to draw a robot. In this sequence Eddy illustrated an apparently crucial concern of his: who would be the powerful attacker and who would be the victim vulnerable to bodily damage. As he piled the blocks higher, he alternated easily between his description of the robot eating the lion, the lion eating the robot, and the robot becoming the lion. He glanced at the analyst’s drawing and arrived at a compromise, "You draw a lion robot."

As he put the final block on his creation, the structure swayed and Eddy was momentarily frightened; hands protecting his face, body shaking and arching away, he inched clear of the possible danger of the robot tumbling down. The robot did not fall, and having regained his composure, Eddy admired his creation. With some bravado, he commanded the analyst to "put my name on this robot [drawing]."

Eddy elaborated on this theme of transformations, bodily damage and anatomical differences in the next sequence as he explored the contents of the doll house. Spotting a small toilet among the furniture, he interspersed comments about pieces of furniture he described as "broken" with questions about the toy toilet and statements about "poos." He returned to attacking the robot with an airplane while commenting that robots "poo and pee." Suddenly, almost as an aside to the game, Eddy asked, "How do girls pee?" When the analyst did not
respond to his question, Eddy introduced "two ladies doing poo and a boy doing poo." The boy was then put into a drawer as Eddy returned to those pieces of doll house furniture which were "broken."

Eddy’s discomfort with the perils of being small and vulnerable, as opposed to big and powerful, were elaborated further as he introduced a baby into the play. The baby climbed into the big robot but then the robot began to think about broken "arms, legs and feet." Eddy dismantled the robot and asserted firmly "I'm not the robot." In fixing the "broken parts," Eddy constructed a new robot that was not only taller but had guns to "shoot bad guys." When the analyst persisted in questioning Eddy as to the identity of the bad guys, his queries were first ignored and then the gun-toting robot was entirely abandoned. Quite suddenly, Eddy announced that his father had bought him a transformer.

Eddy then identified himself with the tallest robot of all his constructions. He instructed the analyst to build big mother and father robots but expressed dissatisfaction with a space left between the blocks. Insisting this opening was a "bad" robot, Eddy picked up a jet and pushed it into the offending space. He backed away as the "bad robot" tumbled down and quickly returned to verbalizing size differences in the dollhouse furniture.

However Eddy’s retreat from attacking and crashing was short-lived. Perhaps finally confident about his safety with the analyst, Eddy engaged him physically for the first time. After assigning hand puppets, Eddy’s duck bit the analyst’s doctor puppet and then with much laughter, Eddy reversed the roles. The "doctor" was easily transformed into a daddy who hit a boy puppet who, in turn, beat up the daddy. A pig and mother puppet repeated the same sequence of
reversals as the analyst continued to carry out Eddy's enthusiastic instructions. The "fighting" became increasingly exciting as a boy hit a girl puppet; the original duck bit the pig's nose; and the boy returned to repeatedly bang against the girl puppet while Eddy jubilantly announced, "Little boy is now big!" As if to insist on his power regardless of size, Eddy introduced a baby puppet who not only smashed the daddy but then wildly jumped onto the mommy puppet and hit her. With glee, he stated that the mommy was scared. Throughout this sequence Eddy did not allow any of the analyst's questions about the puppet's motivation to interrupt the pleasurable exchange of hitting, biting and jumping.

Just prior to the end of this second session, Eddy shifted away from the puppets to pumping gas, first into cars and then into the dollhouse. As the analyst signalled the end of the session, Eddy again built a "high up" robot. Just before leaving the room he presented a complete identification with invincible power as he pointed to the robot and said, "Now I'm inside."

**Psychoanalytic Perspectives:** The theme of the body, its integrity and power, was central to Eddy's narrative. In his play the body was in nearly continual danger of injury but Eddy consistently warded off potential vulnerabilities by constructing figures that were both bigger than life and capable of reparative or compensatory transformations. Relying on the elaborate displacements of robots, drawings and puppets, Eddy was free to represent the dangerous as well as the exciting aspects of aggressive actions. The latter was best illustrated in his story of the hitting mother and father and the boy/baby who wanted to be powerful enough to intrude on this exciting activity. Although Eddy gave specific representation in play to his wish to be powerful, the fear of the powerful
retaliatory attacker was also apparent; both occurred continuously in his play as if realization of the wish inevitably entailed a dangerous consequence. In his multiple references to bodily transformations, crashing, breaking, and anatomical differences, Eddy made clear that for him the danger of aggressive action lay in the bodily damage he would sustain. In addition to simply ending play sequences in which aggressive acts might lead to injury, Eddy also relied on turning passive into active. In one episode for example, he built a robot that became invulnerable to the lion's attack by becoming powerful enough to devour the lion. However, perhaps in response to his identification with the now endangered lion, Eddy executed another play transformation by combining the two characters. He introduced a "lion robot" who did not wish to eat anyone. When a fight between characters was enacted, Eddy often assumed the role of the healing doctor or fixer who could repair any damaged incurred. It was during the play sequence of the gun-toting robot fighting off "bad guys" that Eddy made his only reference to his father. This reference in which Eddy linked his father and the transformers suggested the latent conflict for Eddy involved his wish to usurp his father's power and his fear he might be punished as "the bad guy."

In his play, Eddy was able to represent the various themes associated with aggressive urges in the context of exercising tremendous control over the attributes of his constructions and their transformations as well as over the activities of the analyst. Throughout the session Eddy responded to the analyst's clarifying questions either by ignoring them entirely or by contradicting any of the analyst's observations of the action (e.g. Analyst: "What is the mouse doing?" Eddy: "Talk." Analyst: "What is the mouse saying?" Eddy: "No talk, just eating").
Sometimes this response suggested that Eddy felt the analyst was trying to control him by his questions. At other times, Eddy’s reversal of "the facts" of the play seemed to reflect his ease in transforming the roles and properties of the characters within the story. In addition, by making use of the analyst as a functional prop and directing his activities in the play, Eddy could turn to him as a safe ally. By neutralizing the potentially dangerous powers of this adult, Eddy achieved some freedom in presenting the locus of aggressivity as continually shifting, thereby becoming able to explore the more destructive aspects of aggression.

Although Eddy’s play was dominated by his wish for power, his fear of retaliation and damage to his body, and his pleasure in the excitement associated with aggressivity, he was able to sustain his play and his affectionate relationship to the analyst by placing the danger and badness outside himself.

Although Eddy was anxious at moments during his play, his imaginative play was both coherent and sustained, although his preoccupation with changes in the shape, form and function of bodies seemed to stimulate some of the rapid shifts in his story line. For Eddy bodily form and function was a direct translation of power, aggressivity and/or vulnerability. Transformations, for Eddy, were presented for the purpose of expressing his own wishes for increased power and rapid bodily changes were used to reestablish safety in the face of potential retribution for aggressive acts. However, each of his presentations of the body in play retained both specificity and stability, lasting the length of time necessary to serve an expressive function. In addition, transformations allowed Eddy the opportunity to represent and master the anxiety associated with his questions about anatomical differences between boys and girls, children and adults. Here, Eddy’s
use of highly organized means of representing his wishes for, and concerns about destructive power, can be contrasted with Jim's more erratic, polymorphous and primitive presentations of similar wishes and fears.

Eddy appeared very clear in his notions about good and bad. He seemed to struggle with his aggressive wishes and his expectation of swift retaliation. While relying entirely on robots, lions and puppets to express the wish to attack, Eddy always branded them as "bad" and required that they be punished. His adherence to displacement and to a pattern of harsh response towards the aggressors in play seemed to reflect the conditions under which he felt the presentation of aggression was "acceptable"; exciting urges for aggressive action could be portrayed as long as they were repudiated with equal vigor. In turn, Eddy was able give expression to aggressive wishes both directly and through harsh punishments while maintaining a firm sense of right and wrong, good and bad.

Eddy directly ascribed the wish to be powerful to characters in his narratives; less obviously he actively limited the analyst to the role of passive onlooker. Eddy was less consistent than Bobby in locating the badness outside himself, although he was consistent in the severity of his judgement that punishment must always follow acts of badness. Eddy used transformations of the body to express his wish to be big and powerful, the destroyer, not the destroyed, as well as to ward off his fear that permanent injury would be the consequence of these wishes. In addition, bodily transformations provided a vehicle for representing his awareness of anatomical differences and his associated anxiety. Although one could describe his rapid shifts in play between "broken, damaged,
little, vulnerable" and "whole, repaired, big, powerful" as unstable, Eddy’s use of these shifts formed a consistent pattern that could be summarized as: "It’s okay to be the powerful attacker as long as you’re punished for it and as long as any damage that results from either attack or punishment can be repaired instantly."

Jim entered the session carrying a transformer toy that could change from a robot to a plane. He said the toy was damaged and demonstrated its transformations, pointing out that the plane’s wing was broken and stating emphatically that he preferred the toy as an intact robot. As he flew the plane around the room he repeatedly asked the analyst which transformation he liked best simultaneously pointing out its deficiencies. He remained preoccupied with the transformations and with the analyst’s opinion about which figure was the "best" for the first 5 minutes of the session, ignoring his mother’s presence and subsequent departure from the room. After many crash landings of the plane, Jim made clear his identification with its power and vulnerability as he crash landed himself on the floor. This was followed by an aside as to where he should put his jacket and where "the guy" (referring at once to the transformer and himself) should sit. When the analyst suggested the chair as a place for the jacket and for sitting, Jim sat on the table instead, grinning at the analyst as if waiting for a response. After a few moments, he got up, and flung his jacket onto the table.

This "naughtiness" was followed by multiple plane crashes and Jim’s rediscovery of the egg-beater used in the previous session to attack the analyst. In this next episode Jim seemed to struggle with his urge to engage in exciting
attacks on the analyst and his fear of subsequent retaliation. At first Jim explained that he was keeping the egg beater away from "the bad guy" robot so that he wouldn't crash. However when the analyst queried whether the robot ever got hurt, Jim anxiously grinned and again went at the analyst's face with the egg-beater. When the analyst backed away and put his hand up to stop the attack, Jim talked about "that guy" who wanted to be bad. His confusion and defensive reversals of attacker and victim were dramatically represented as Jim used the robot to attack the analyst's face and announced, "I'll stop ya!" He explained that the robot wanted to attack the analyst because the analyst wanted to attack him. And why did the analyst wish to attack? "Because he was attacking you." He alternated between describing the analyst as the "biggest bad guy" and imprisoning the evil robot to "keep him out of mischief."

Jim abruptly moved to another part of the room, grabbed some puppets and again attacked the analyst. With increasing intensity he bounced each of the puppets on the analyst's shoulder because "it's fun." However, he then punished the attacking boy puppet by putting him in "the trapper" and dousing him with hot and cold water. Announcing the end of the boy's punishment, Jim moved further away from the analyst and anxiously clutched at his genitals. Continuing his frenzied movements about the room, Jim went to a stack of cardboard building blocks. As he attempted to lift the entire stack, the blocks fell on top of him; with much dramatic vocalization and excitement, Jim threw himself to the floor. Again, Jim made a direct attack and tried to dump blocks on the analyst's head. In an apparent effort to ward off retaliation from the analyst, Jim referred to the "robot/bad guy" as needing to hide from the analyst. Following three episodes of
hiding the attacking robot, Jim excitedly built a "secret" hideout with the blocks, lay down in the middle of it in plain view of the analyst, and invited the analyst to look for him. When the analyst finally "found" him, Jim was confused about whether he had really hidden himself. His repeated question, "Did you really not see me?" suggested his difficulty at this moment in determining the difference between pretend and "real."

Jim's precarious balance between being the powerful attacker or the victim vulnerable to injury was again demonstrated as he crashed his body onto the secret hideout and then immediately up-ended the nearby table while commenting on this feat of strength to the analyst. He then lifted a folding chair on top of his head announcing, "I can even lift this up!" When the analyst commented on his wish to show him how strong he was, Jim's frenzied activity subsided briefly. He sat in the folding chair and clutched at his genitals just before suggesting that he put the chair on top of the analyst's head. After moving towards the adult with the folded chair, Jim let the chair fall on top of his tumbling body excitedly asking, "What fell on me!?!" This was repeated two more times until he returned the chair to its place up against the wall. His involvement in both the excitement of crashing and the fear of damage was apparent as he carefully leaned the folding chair against a rubber door stop so "it won't hurt the wall." Jim continued to play with the possibility of danger and injury with repeated attacks on the analyst's body. While briefly using the evil robot as an agent, Jim then went for a cardboard block and with a smile lifted it high over his head before dropping it on the analyst's. As Jim grabbed the block, the analyst leaned towards Jim with an irritated, puzzled expression. Jim stared back briefly before getting another
block for a second attack. When the analyst said, "I don't really like having blocks dropped on my head," Jim moved away and again took up the "evil" transformer flying it towards the adult's head while intently watching the analyst's face for a reaction. On the second fly-by, he again crashed himself to the floor grabbing a toy giraffe which he used as a baseball bat. As he swung the "bat" Jim expressed his wish for competency and power and his feelings of inadequacy and vulnerability by first stating that he always hit the baseball and then that he could never hit it. Jim articulated his explanation for his lack of success by having the toy animal say that he was missing his body and feet--"they were chopped off." Here, the associations between Jim's aggressive wishes, his fear of retaliation in the form of bodily injury, and his worries about being incompetent and vulnerable were especially clear. Apparently in compensation for its bodily deficits, the toy giraffe bashed blocks onto the "bad boy" robot, squashing him under the blocks to "keep him from being bad." To the robot's angry question about why he was being squashed, the animal replied, "To keep you out of mischief!"

Jim again took hold of the "broken" giraffe and began kicking wildly at the blocks. He boisterously proclaimed that he was a good kicker in spite of various body parts being "chopped off." After bending the animals legs and assuring himself that these could not be chopped off, he threw it into the dungeon for kicking and being bad. The psychological distance Jim achieved in these fleeting displacements was very limited and in this instance he followed the bad giraffe by throwing himself between the analyst's arms and legs announcing, "I'm in pungeon!" Giggling and anxious, Jim rolled out of the "pungeon" and writhed on the floor. The analyst commented that all of the exciting mischief made for
worries about being bad and punished. He wondered if the giraffe had had its head chopped off for being bad. Jim responded with an enthusiastic "Yeah!" and immediately displayed his strength by again upending the table. Jim then maneuvered close to the analyst, fingering the buttons on the analyst's jacket. When the end of the session was announced, Jim abandoned this more subdued and affectionate bid for contact and engaged in a frenzied clean-up of the room. As he left the room, Jim made a last comment about the need to repair the damaged giraffe and then left the room without his jacket.

**Psychoanalytic Perspectives:** This session contained eight consecutive play sequences which present in play Jim's notion that he is bad because of his wish to be powerful and destructive and his fear that the expression of the wish inevitably brings retaliatory injury and punishment. He identified himself with the robot plane which didn't work right and with the broken toy giraffe, identifications that suggest he experienced his aggressive urges as profoundly dangerous and destructive. He was not able to preserve the integrity of his body but was continually threatened from within and without by his aggressivity. He vividly presented the frighteningly destructive and annihilating aspects of aggressivity in which the whole body and the whole person can be destroyed or irreparably damaged. No reparation appeared possible, only punishment in kind.

Jim's play suggested his wish to have the analyst recognize him as the best and most powerful and his associated fear that the analyst would damage him because of his wishes. Jim seemed unable to sustain a consistent location for the source of his aggressivity; whether it was in him and was his justifiable response to the analyst's dangerousness, or whether it was the analyst who was the source
were possibilities that continuously shifted. Jim was not able to sustain any trusting alliance with the analyst, instead using him as an object for his own projections. His reliance on projection, a defense employed probably in the service of managing the anxiety aroused by his aggression, interfered with his ability to ally himself with the analyst and probably contributed to his inability to locate and sustain a source for the aggressive actions and intentions. In using the analyst to represent his own aggressive fantasies, Jim experienced himself as continually in danger of destruction and/or punishment. Shifts between characters, attributes and roles were both dramatic and frenzied; though strongly demarcated, none held up for long or seemed to bind his anxiety sufficiently. Frequent switching of roles and attributions of various characters dominated Jim’s narrative and were most often apparent in the context of themes of aggressivity, "good and bad" and punishment. These changes were especially confusing because Jim used pronouns inconsistently when he assigned roles to various characters in the play.

Jim’s rapidly shifting pronominal use and unclear referents increased the analyst’s difficulty in following his narrative accompanying the play. For example, in the play sequence involving a giraffe he stated, in succession: I’m gonna kick her if I had a head . . . see he’s a bad kicker and she’s a bad hitter (referring to the giraffe) . . . . But they (legs) were chopped off I gather, I gather . . . . So he gets to bend his leg because she’s not supposed to be chopped off, right?"

While Jim seemed to have specific ideas of his own, he showed little interest or awareness in the other listener’s perspective (the analyst), failing to provide enough information to enable the adult to follow his script of the play.
The constant projection onto the analyst of the locus of aggression placed Jim in a psychologically intolerable position to which he responded by repeatedly relocating the aggression in himself. Perhaps some of the shifts could be understood as a wish to protect simultaneously himself and the analyst, by presenting himself as alone in the playroom, both the attacker and the object of attack, both powerful and impotent, both invulnerable and damaged. Jim rarely used language to talk about the aggressive acts he portrayed instead relying heavily on accompanying noises to dramatize them.

Anxiety was Jim’s dominant affect, at moments giving way to reveal his excitement and pleasure in his fantasies of being the aggressive destroyer.

Jim made the most numerous and frequent references to the changing and fragmenting parts of toys, fantasy figures and his own body. This apparent ease of transformation in his play constructions increased the level of anxiety associated with aggressivity. Bodily damage and loss of body parts were the expected consequences of his own attacking behavior. The anxiety accompanying aggressive actions was additionally intensified by his seeming inability to clearly differentiate between himself and others as either the source or intended victim of his wish to attack. While attempting to reassure himself by relying on his notion of the body as transformable (in the ease of its repair) Jim’s anxiety seemed, instead, to be heightened. This is presented in Jim’s many scenes of dismemberment and destruction.

In this respect, Jim represented a level of "moral uncertainty" that threatened the stability of his ego organization: he was unable to delineate
between his own goodness or badness and anyone else's. In turn his presentations in play were equally unstable and confused.

In contrast to Bobby and Eddy, Jim's solutions were characterized by inconsistency and instability. The attacker became the attacked; the source of badness shifted rapidly from inside the self to outside; and bodies and objects were threatened continually with complete destruction. Jim's one stable pattern was that he always experienced power as catastrophically destructive and that its expression must be met with swift and equally catastrophic punishment.

Results

While specific presentations of aggressive components were dependent on the individual child, a number of shared characteristics were apparent. Themes of bodily damage, transformations of the body and issues of "good" and "bad"; the use of the analyst; sites of displacement; and specific language patterns emerged as modes of representing aggressivity. Most striking was the boys attitudes towards their own aggressivity. Each boy relied on a moral construct that operated on the basis of external consequences. There was nothing inherently "bad" or "immoral" about their destructive urges as long as they did not suffer the retaliation of the objects of their aggressivity. Each boy's pleasure in attacking and destroying was only matched by the wariness about what danger they might incur as a result. The implications of these observations will be discussed in the context of oedipal phase aggressivity and characteristics of the developing superego.
The three boys, Bobby, Eddy and Jim, were all five years old, but demonstrated in their play three very different approaches to the presentation of aggressivity.

Bobby told a very coherent story in which his aggression was presented as a highly controlled and justified response to dangers coming from the outside. Bobby’s story emphasized the harmonious male dyad in which the partners were equal and good; he used himself and the analyst to play the central characters.

Eddy played a series of rapidly shifting stories in which the body and bodily transformations were central themes; in his play the body was in nearly continual danger but danger was warded off through the construction of larger than life characters. Eddy’s operative assumption seemed to be that it was all right to be aggressive as long as you were punished for it. Eddy controlled the analyst, either keeping him outside the play as audience or using him to carry out Eddy’s commands.

Jim’s play was the most fragmented and unsustained of the three. His play contained eight consecutive sequences in which the theme was his wish to be powerfully destructive and his fear that the expression of the wish inevitably brought retaliatory injury and punishment. Jim seemed to feel continually threatened from within and without by his aggressive urges. While directly threatening and attacking the analyst during his play, he viewed the analyst as a powerfully dangerous punisher of his aggressive wishes.
Morality

These boys appeared to struggle with central dilemmas concerning destructive aggression; these reflect both the wish to be powerful and invulnerable and the fear that to be powerful and invulnerable may put one in jeopardy. For each boy the capacity to suspend disbelief, to try on a variety of possibilities through the transformations of play, and the availability of reality as an escape created a psychological domain in which different aspects of aggression could be explored. For these boys play became the central vehicle through which to represent the dilemmas generated by aggressive wishes and to try on solutions. Play made it possible for each boy to represent his various views about the expression and regulation of aggression in a continual dialogue within the self.

The language skills of each of the three boys seemed to reflect their capacity for, and ways of relating to the analyst in the research settings. Of the two (three) boys, for example, Bobby was most intent in keeping the analyst involved in his play. His statements were usually intelligible and numerous revisions or clarification of utterances suggested his intent to keep the analyst informed at all times. Eddy's speech was also clear but he used shorter, directive statements; had fewer revisions or clarifying comments; contradicted and ignored the analysts' comments reflecting his different style of involvement with, and use of the analyst as a "prop" and object of control of in the play. Jim's frequent unintelligible and chaotic language matched his equally fragmented play. Unlike Bobby, dysfluencies in Jim's speech do not facilitate his subsequent language formulations or appear to be related to an intent to maximize clarity of communication with the analyst.
While all three boys were concerned with destruction and bodily damage, Bobby and Eddy were better able to employ language in changing the story-line and attributes of character in order to forestall potential dangers. Language did not adequately serve Jim in similar efforts; direct action of attaching and being attacked was for more prominent in his session.

These three boys struggled with three dilemmas concerning their aggressive wishes. Each boy employed notions about the "flexibility" of the body. Not only could one body part be substituted for another as needed, but body parts could be damaged and instantly fixed. However, the "benefits" of such body flexibility at times seemed to be outweighed by a substantial "risk"--if the body was so easily transformed perhaps it could be too easily damaged.

The second dilemma had to do with morality or "goodness versus badness" especially the question of where "badness" should be located. If badness was kept too firmly outside the child, the child might then feel in danger of attack from the "bad guys" but if the child located the badness inside himself, the environment might then be seen as potentially retaliatory.

Finally each boy struggled with his wish for power and his fear of retaliation for actions intended to win or demonstrate powerfulness. The questions of who has power and what is power to be used for? were given manifest representation in each boys play. The dilemma here seemed to be that if the child presented himself as having all the power then he feared the adult's retaliation but if the child attributed all the power to the adult then the child felt too vulnerable.
The Body

The boys in this study presented a view of their bodies as being easily transformable. The belief that body parts could be readily lost and/or changeable served not only as a powerful source of the child's fears about castration and damage, but also fuelled magical solutions concerning easy reparation of bodily injuries. There was substantial variation between the children in the degree to which their play employed a notion of bodily transformations for its restitutive or reparative advantages, as opposed to its stimulation of fear of damage.

The boy's presentation of things as "good" or "bad" were equally variable both with regard to the location and to the intensity of moral judgement. The relative stability of these concepts allowed for a greater degree of flexibility in the representation and assignment of aggressive actions in play. When the notion of who was good and bad became more blurred and inconsistent, aggressive urges seemed to be experienced as more frightening. Without the clear delineation of good versus bad, the child may be unable to maintain a necessary distinction between the source of aggression and the dangerous consequences of its expression.

These boys demonstrated characteristic and stable patterns in their attempts at resolving these three dilemmas as well as characteristic relationships between the three dilemmas. All three boys seemed to equate power with notions of destructive and attacking activities and all judged such destructive attacks as dangerous to the integrity of the body. It was not just that they wished to be the best, the most potent and the most skilled, but it was as if they experienced their power through the destruction of the other. It appeared that it was the wish to attack the body of the other that made them so concerned with the integrity of
their own body. All three boys presented their attacks as justifiable self defense. And all three suggested via their affect that exercising the capacity to attack and destroy was pleasurable in its own right, even if morally "bad."

Discussion

Aggressivity was richly presented in the play of these three Oedipal aged boys. Indeed, it was probably the most consistent and boldly choreographed story line. If one had only the script and surface descriptions, one might imagine that these boys were aggressive bullies and tyrants in their daily lives. Yet all were children whose teachers and families considered to be "within normal limits;" during their sessions as well as in their school and home lives, they displayed the capacity for concern and empathy.

When caught up in their presentations of aggressivity, each boy was capable, within a range, of suspending disbelief and generating, for himself and the analyst, a "pretended reality" in which attack and destruction were enacted with a sense of conviction. For Bobby and Eddy, the use of displacements and of checks-and-balances on aggressive presentations seemed to be more available than for Jim, who was more immediately threatening/threatened and less able to move between pretending and doing.

The dominance and vividness of the play-lines of aggressivity seemed heightened because they were presented in relative isolation from other themes associated with the Oedipal phase. It was as if, having embarked on telling the story of the inner experience of aggressivity in all its variations, the other com-
plementary Oedipal themes became overshadowed or lost. We believe this presentation of aggressivity in isolation—and in bold relief—is a major characteristic of the Oedipal-aged boy. Indeed, it is found at the beginning of Sophocles’ dramatization of the Oedipus myth when the young Oedipus attacks and kills his father at the crossroads for failing to yield to him. Oedipus’ destructive, unbalanced rage occurs in the drama as an offstage event. For the Oedipal aged boys we have studied such presentations occupied center stage.

The dominance, vividness, conviction and isolation of aggressive presentations were marked out as being within play by the conventions of play and by the relationship between the child and the analyst.

Children entered into the aggressive presentations by indicating both verbally and behaviorally that they knew it was play and by recognizing the presence of the analyst (e.g., "let’s use . . . " or "let’s pretend . . . "). In a complementary fashion, they terminated the presentations of aggressivity by clear verbal or behavioral markers of transition. Jim moved closest to actually attacking the analyst; however, he used the conventions of play to permit real attacks which exceeded the bounds of pretend. While these bounds could be recalled for him, and he could pretend to be playing, he was more like those children who enter treatment because of their disruptive behavior and who bring actual attacking behavior, rather than imagined attacks, into the treatment situation.

For the Oedipal-aged boys of this study, the murder and shooting in the play was strongly experienced while simultaneously being highly contained. The most powerful container of the aggressive presentations was the recognition by the child that he was playing in the presence of, and quite often with, another person
whose feelings he monitored and whom he brought along in the unfolding drama. We believe that such containment by internalized objects is a hallmark of the achievement of Oedipal-phase regulation of aggressive presentations in the inner life of children.

Aggressivity defines one of the story-lines within the full configuration of the Oedipal Complex. Chapter Four describes general characteristics of play seen in the four- to six-year-old sample, particularly the child's presentations in play of aspects of Oedipal love and curiosity and primal scene fantasies. There are deep, underlying structures of experience relating to size, bodily integrity, goodness and evil, danger and safety, love and hate, life and death, which appear to find their expression in the various story-lines of the Oedipal drama. These additional dimensions of the Oedipus complex include the variety of ways in which children relate to their parents as individuals and as a couple, their attempts to create an increasingly useful and accurate picture of adult relationships and their place among them, their worries and desires, their picture of their own bodies and the bodies of others.

The over-arching developmental task of the Oedipal phase is to bring together these multiple story-lines in a preliminary integration and structuralization which can be characterized as a theory of mind. The play of the Oedipal child involves hypothesis testing about how the mind works: how, why and whom do we love and hate? how do we regulate the expression of these primary affects? what does it mean to hate someone you also love? does hate destroy? This early Oedipal theory of mind is reworked again and again in the course of a lifetime. From the perspective of this study, we can see how the child's play itself creates
such integrations thereby moving development forward. The play of the Oedipal child can be seen as thought experiments in which derivatives of unconscious fantasies are given representation along with the accompanying powerful affects. By representing in play the wish for power, the wish to destroy, fears of retaliation, fantasies about the body and gender and by trying on different combinations or relations between these affects and fantasies, the Oedipal child begins to understand how his mind works and how the minds of others work.

This study suggests that the observation of bashing, attacking, killing, hurting and other destructive activities presented in the play of Oedipal phase children should not be understood simply as a response to frustration or as a gauge of the child’s capacity to control impulses. Rather, these presentations and activities reflect the child’s attempt to present in play his dilemma negotiating the valence between loving and destructive feelings in the context of object relationships, mastery of the environment and development of a self. A crucial dilemma of the Oedipal phase is created by the child’s newly acquired capacity to recognize himself as an active agent of aggressive wishes. That is, his urges to dominate, hurt and vanquish are directed at those figures he loves most intensely. It is the child’s response to these urges that generates conflict and his attempts at resolution.

The Oedipal child struggles to find a balance between aggressive urges and the moral imperatives he creates in order to protect those he loves. In addition, he must negotiate the balance between the pleasure associated with power and the potentially dangerous consequences associated with possible retaliation. The child’s use in play of language, displacement, the analyst and the setting for
representing aggressivity offers a view of the degree of comfort, security and self-reliance he has achieved in these negotiations.

Similar to the study of general and libidinal characteristics described in Chapter Four, out of the panelists' discussions of aggressivity they observed in the videotaped play sessions, a set of categories emerged. These categories included themes of: power, size and capacities; death; punishment; moral judgement; being in control; destruction; hurting others; as well as general characteristics described in the preceding chapter (e.g., emotional presentation, child's attitude to the analyst, and child-analyst interaction). The next task was to operationalize the components of the categories that emerged in the studies of general characteristics and specific aspects of libidinal and aggressive features seen in the play of the four to six year old sample group. The development of these quantitative methods will be described in the following section, Section Three.
CHAPTER SIX

THEMATIC CONTENT

Introduction

As a result of the detailed description of the phenomenology of the videotaped play sessions scrutinized and discussed by the panel of five experienced child psychoanalysts, a set of distinct categories of observations became clear. These categories of observations of the child in the play session were: (1) themes of play, or thematic content; (2) emotional presentation; (3) activity level; (4) the relationship with or, attitude toward the analyst; and, (5) the interaction between the child and the analyst during the session.

As described in Chapters Four and Five, the close analysis and detailed description of individual play sessions revealed general characteristics and modes of representing specific libidinal and aggressive content in the play of four- to six-year-old children in the context of analytically-oriented play sessions. With the emergence of specific categories of psychoanalytic observations, the next task in this program of study was to operationalize the constituent phenomena in each of these categories and to develop a means of systematically rating observations of videotaped play sessions. The second task was to determine whether, once developed, the coding schemes could achieve significant levels of inter-observer reliability.

The final version of the rating instrument described in this section derived from the five categories described above and is comprised of six domains: (1)
Conceptually, there are several levels for assessing observations of children's play activities. These are: (1) tracking specific behaviors (e.g., examining the frequency with which an item is used by the child), (2) defining categories of varying complexity (e.g., household scenes or work settings), or (3) marking the appearance of specific themes which are defined by a combination of discrete behaviors, narrative content, and accompanying affects. This third rating approach most closely approximates the clinical process which makes inferences about the concerns that are uppermost in the child's mind at the time of the play interview.

A technique for marking and tracking the appearance of specific themes that appeared in research play sessions with four- to six-year-old children is
described in Chapter Five. In the present Chapter, the steps involved in developing the rating technique for thematic content of the play sessions are described, and the results of interobserver agreement among four observers using this technique with videotaped play sessions are reported. Conceptually, this technique is an illustration of an observational method guided by psychoanalytic formulations and fulfilling certain methodological standards for interrater agreement.

Methods

Design

The technique for studying the thematic content of a child’s play was developed in three stages. The first stage involved defining the thematic categories to be rated, and the second was understanding how best methodologically to apply these descriptive categories to a play session of approximately 50 minutes. In the third stage, interobserver reliability among four raters viewing the same play sessions was systematically assessed. The process involving each of these issues, and the play material used to test the technique will be described in the following section.

The approach to the thematic content of play focused on the general themes represented by specific play sequences, rather than specific items used such as "gun play" or "house play." For example, play with guns might be used by the child to express a fear of bodily harm, destruction, or, more specifically, robbing and stealing. In these examples, gun play is related to aggressivity, relationships with others, or issues of bodily integrity. Conceptually, this approach focuses on
how multiple activities within play sequences represent the child’s inner life, rather than on the specific content or items the child may choose as props for giving expression to these general themes.

As a caveat, by choosing not to describe the specific content or items used in the child’s play, a level of inference was introduced in the classification strategy—the same type of inferential thinking presumably used by clinicians in their use of play diagnosisically and therapeutically. In other words, in this approach to ratings, the coding judgements are based on inferences about how a specific play behavior reflects a general theme. In order to make such judgements, there needs to be agreement about how, for example, a theme of concern about the body might be manifest in play activities. On the other hand, the thematic categories chosen require only low level inferences and do not address the potential underlying fantasy content of a particular play sequence. As such, the approach chosen addresses only thematic content and not the defensive functions represented by the style or content of the play.

The process of defining the thematic categories was begun by generating a list of themes that had been observed by the panel of child analysts as described in Chapters Four and Five in the play sessions of all the children participating in the study. Over a period of 18 months tapes were reviewed on a weekly basis. Initially these discussions focused on summarizing general observations and inferences about characteristics and themes over the course of a given session. In generating the specific list of themes, the task was to identify the specific play behaviors that led to these summary judgements. In an attempt to cover a range of themes that may not have appeared in observations of this particular cohort of
children, additional themes and constituent behaviors that derived from theoretical and clinical concepts were listed. While themes of need satisfaction, loss of the object/abandonment and separation were not prominent in the sessions of the current group of children, they were included in the list with possible use of the thematic rating scale for comparative studies involving younger children and those presenting for clinical assessment in mind.

Working with this list of 30 generally stated thematic categories (such as "rejection" or "destruction"), descriptive definitions were written for the categories, giving specific examples of how such a category might be manifest in play. In this schema, for example, the category of "rejection" is defined as: "Child expresses in words or actions one figure turning away from another or stating dislike of another." By using the phrase "in words or actions" and by providing behavioral examples, the intent of the descriptors was to give raters instructions that allowed them to stay as close as possible to the observable material (e.g., observed language and behavior as opposed to inference). After reviewing several videotaped play sessions with this thematic list, categories and accompanying descriptors were added and revised. The final version used for this study includes 30 themes. The titles of each of these themes are listed in Table One. As can be seen from the table, themes #24-30 are more descriptive than inferential and as a group describe more general thematic statements used by children to set the scene for the play--i.e., identifying the characters, assigning properties, or stressing that the sequence is "only pretend."
Table One

1. **Anatomical differences:** Child expresses in words or actions statements or gestures referring to differences in bodies or bodily functions of boys versus girls. This can include comparisons of various attributes, e.g., length of hair, abilities, and interests (girls’ things versus boys’ things).

2. **Bodily damage:** Child refers in words or actions to the body being injured or lost, or to bodily functions being compromised; or references to the body which include function, interchangeability, or location or body parts with specific references to safety.

3. **Power, size, and capacities:** Child refers in words or actions to his own power, size, superior capacities and/or those of another person or thing. This may include comparisons between two or more persons or items with or without expressed preference for one over the other.

4. **Bodily functions:** Child refers in words or actions to sleeping, eating, toileting, etc. References to specific parts of the body through touching, manipulation, or examination is included here (e.g., masturbation, fingers in mouth, looking at body in mirror).

5. **Illness:** Child refers in words or actions to self, others, or things being sick and/or requiring medical care and/or parental attention for the malady.

6. **Loss of object:** Child explicitly refers in words or actions to being left alone or to being left by figure (for whom there is no promise of return) on whom second figure relies for food, shelter, and affection. (This is not to be confused with leave-taking that occurs in daily life.)

7. **Comings and goings:** Child refers to comings and goings of figures and objects during the course of daily life.

8. **Imitation of adult roles:** Child refers in words or actions to aspects of daily life such as cooking, going to work, parenting.

9. **Exclusive attachments:** In words and/or actions, child actively excludes one character from the interactions of two or more other characters. (Here, the intent of "leaving out" needs to be explicit—e.g., "we’re doing this, but you’re not," etc.)

10. **Rejection:** Child expresses in words or actions one figure turning away from another or stating dislike of the other.
11. **Partnerships**: Child refers in words or actions to the formation of a "team", sharing of items and/or endeavors with the analyst, or between two characters in the play. These words or activities may or may not include expressions of concern for the well-being of the other.

12. **Reconciliation**: Child refers in words or actions to a cessation and reversal of a previous antagonistic relationship between two or more figures (e.g., combatants become friends; quarrelling pair stops fight and begin doing favors for each other).

13. **Death**: Child refers in words/actions to death, dying, being dead, going to heaven, etc. of self, others, props, or characters in the narrative. (This may be co-rated with loss and abandonment.)

14. **Punishment**: Retaliation for, or repudiation of, in words or actions the activities or communications or others and or self.

15. **Moral judgement**: Child explicitly identifies in words; things, persons, actions, or language that are either "good" or "bad," "right" or "wrong," "evil," "fair" or "unfair," etc.

16. **Being in control**: Child defines in words or actions figure who is in authority, dominates, or determines the rules, actions, etc., of others (e.g., who's boss?).

17. **Messing and breaking**: Child refers in words or actions to making a mess, e.g. writing on furniture, walls, scattering and/or breaking play materials, etc.

18. **Cleaning and fixing**: Child refers in words or actions to bringing order or cleaning up, and/or repairing broken items, e.g. picking up play materials, talking about house cleaning, making things work, etc.

19. **Fighting and attacking**: Child refers in words or actions to two or more figures exchanging opposing views or physically violent actions, e.g., kicking, hitting, pushing, killing, and/or inflicting pain.

20. **Destruction**: Child refers in words or actions to tearing down, blowing up, bashing, crashing, etc., property or any inanimate objects.

21. **Robbing and stealing**: Child refers in words or actions to items being stolen by self or others or, refers to intent of self or others to steal. (This includes references to self or others as robbers, burglars, thieves, etc.)

22. **Birth and babies**: Child refers in works or actions with a doll or other prop to babies and their origin, caring for babies, making babies, demands of babies, or babies behaviors (e.g., crying).
23. **Secrets and intimacy**: Child refers in words or actions to intimate contact between two children, two adult figures, or a child and adult that include kissing, hugging, bashing, repetitive hitting, or hidden, "secret" activities.

24. **Setting the stage**: Child describes in words or actions, placement of items or characters in preparation for, or as accompaniment to, action or play. (This may include construction, building, arranging of furniture, naming of props for play.)

25. **References to time**: Child explicitly refers to time: e.g., today, situations in context of time (e.g., yesterday, dates, clock, times of day, etc.).

26. **References to self**: Child interrupts imaginary play, constructions, attentions to activities and items within the room to comment on life events outside the room.

27. **Distinguishes fantasy/reality**: Child uses words: "this is pretend" or "this is real" in describing activities, things or narrative.

28. **Ownership and Possessions**: Child explicitly identifies an item as belonging to himself or to another (e.g., "this is mine," "that is yours," etc.).

30. **Characters in play**: Child refers to one or more of the following: a) mother, b) father, c) brother, d) sister, e) other family members, f) monsters and ghosts, g) superheroes, h) magical figures, i) powerful robots, j) animals, k) helping professions, l) criminal elements.
Sample

The same sample as described in Chapter Four pertains to this phase of the project. Four raters participated in the development and assessment phase for the coding thematic categories. The professional background of the raters was varied and included two child analysts, one pediatrician, and one speech and language specialist. The latter two raters were informed by psychoanalytic theory and had experience working therapeutically with young children. The two child analysts also participated in the play interviews with two of the five children. During the development phase of the coding system, raters met together to view play sessions and arrived at a consensus about how the thematic categories were to be used.

Materials

From the overall sample of twenty children seen for three consecutive sessions, the second hours for ten children were selected for the development of the thematic rating scale. The second interview was chosen based on the assumption that the analyst was now a familiar person and that the session would not be affected by the child’s anticipating saying goodbye to the analyst as in the third session. It is important to underscore that the tapes selected for this phase of the study were not the same ones reviewed by the panelists in the earlier phase.

Procedures

In the next phase of developing the thematic rating instrument, issues of how to use the list of categories within a play session were addressed. These issues involved two questions: (1) Should themes be rated every time they
occurred? If so, what defined a new occurrence compared to a continuation? (2)

Should the play session be divided into time frames and themes coded within a particular time frame? If so, how long should a time frame be? A shorter time frame might maximize interobserver agreement since less thematic material would occur between rating sessions while a longer time frame would likely lead to fewer themes being rated and more global judgements.

Given that the interest in the depth and range of play, that is, how many themes a child represents and how often a child shifts from theme to theme, a time based coding approach was chosen; each occurrence of a theme would be rated. Within any one time period, a theme was rated only once but if the same theme continued across a time period, it was rated again in the second time period. A time period was defined as one minute. All raters were instructed to watch a minute of tape and then rate the thematic content of that minute. All raters were supplied with a transcript of the session to assist their rating of sections of the tape when the speech was difficult to understand. However, raters were instructed to rate the themes primarily from the videotape and not from the transcript. For the instance in which multiple themes might occur during one coding period, raters were instructed to rate what seemed predominant and to avoid interpretive inferences. The raters completed their ratings independently of one another.

Interobserver agreement was assessed in two stages. In the first stage, after an instruction period with all raters, five play sessions were rated and observer agreement measured for the occurrence of the thematic categories. Tapes used for these training sessions were different from those used to assess interrater reliability. On the basis of the measure of agreement for each thematic category
(intraclass r—see below), thematic categories were divided into those with good or excellent agreement and to those with fair or poor. For the latter categories, the operational definitions were revised and raters were instructed again in the revised version. Interobserver agreement was measured a second time with the revised definitions using the same raters and a different group of videotaped play sessions. For this report on the coding technique and the interobserver reliability, interviews from ten children (6 boys and 4 girls) were used in the two stages of studying observer agreement. Five interviews were coded in each stage. All ten interviews were the second of the three play sessions done with all children participating in the study.

The data for thematic content were summarized in five minute blocks by counting the number of times a specific theme was noted in five minutes. The number of times in a five minute segment each rater listed a thematic category was compared between pairs of raters using the intraclass r (Bartko, 1966). Six combinations of raters were possible from the four raters. Intraclass R values were calculated for each of the six rater pairs for the total frequency of individual thematic categories in the five interviews. Thus, the intraclass r is based on an n of five in each phase of the study. The interobserver reliability for each thematic category was expressed as the mean intraclass r for the six rater pairs.

Results

The results of the study will be presented in three parts. First, data describing the frequency of occurrence of the thematic categories in the first group of five play sessions rated will be presented. Second, data on the interobserver agreement for the first group of five sessions will be presented, and third will be
the results of interobserver agreement after further refinement of the thematic categories and instruction of the raters.

Occurrence of Thematic Categories

The number of times a category was rated in any one play session was expressed as the proportion of total themes rated for the fifty minute session. The mean proportion for each thematic category was calculated from the means of the four raters for each the individual sessions. In Table Two are shown the mean and range for the thematic categories from the five sessions. Of the 30 thematic categories rated, several occurred in only one interview. These included references to illness, anatomical differences, death, and punishment. Table Two shows sixteen thematic categories occurring in at least two interviews and in at least two five-minute segments in those interviews. The total number of themes expressed by the five children ranged from a minimum of 91 in the session to a maximum of 146.

What is notable from the ranges shown in the table is that all five children mentioned several themes. Power, size, and capacities, listing and labeling, and setting the stage were frequently mentioned themes. While the frequency of these themes varied for the individual child, the categories were expressed by all. Conversely, themes that might be considered typically "oedipal" in nature (e.g., bodily damage, birth and babies, punishment) were less frequently observed in the play of the children in this sample. However, two points need emphasis. The first is that in examining the range of thematic occurrence for individual children, it is clear that the rating scale is sensitive to the so-called oedipal themes described.
above. Second, the oedipal period is represented in fantasy in markedly different ways by individual children and the wide range of use of the different themes in play may likely reflect an important distinction between unconscious fantasy and conscious presentation.

Finally, the five children spent much of their time in activities that might be described as "setting the scene," that is, listing and labeling, establishing the characters of the play, talking about themselves. Although the mean frequencies do not convey the sequencing of thematic categories during the session, the "scene setting" categories seemed to prepare the way for narratives of fantasy play or framed the fantasy segments of their play. The range of occurrence of thematic categories shown in Table Three illustrates the great individual variability among the five children in the predominant thematic category of their play.
Table Two

Thematic Categories for Five Play Interviews

n=10

<table>
<thead>
<tr>
<th>Theme</th>
<th>Mean Proportion</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Power, size, and capacities</td>
<td>.10</td>
<td>.04-.19</td>
</tr>
<tr>
<td>Listing and labeling</td>
<td>.09</td>
<td>.04-.23</td>
</tr>
<tr>
<td>Setting the stage</td>
<td>.08</td>
<td>.04-.11</td>
</tr>
<tr>
<td>Bodily functions</td>
<td>.05</td>
<td>.002-.08</td>
</tr>
<tr>
<td>Character in play (father)</td>
<td>.05</td>
<td>.0-.12</td>
</tr>
<tr>
<td>Destruction</td>
<td>.05</td>
<td>.0-.08</td>
</tr>
<tr>
<td>Fighting and attacking</td>
<td>.04</td>
<td>.007-.06</td>
</tr>
<tr>
<td>Imitation of caregiving roles</td>
<td>.04</td>
<td>.003-.10</td>
</tr>
<tr>
<td>Character in play (mother)</td>
<td>.04</td>
<td>.0-.11</td>
</tr>
<tr>
<td>Birth and babies</td>
<td>.04</td>
<td>.0-.08</td>
</tr>
<tr>
<td>Reconciliation</td>
<td>.04</td>
<td>.004-.10</td>
</tr>
<tr>
<td>References to self</td>
<td>.03</td>
<td>.0-.06</td>
</tr>
<tr>
<td>Cleaning and fixing</td>
<td>.02</td>
<td>.004-.05</td>
</tr>
<tr>
<td>Bodily damage</td>
<td>.02</td>
<td>.002-.04</td>
</tr>
<tr>
<td>References to time</td>
<td>.02</td>
<td>.0-.06</td>
</tr>
<tr>
<td>Loss of object</td>
<td>.01</td>
<td>.0-.03</td>
</tr>
</tbody>
</table>

1Only those themes occurring in at least two five-minute segments in two interviews are shown.

2Proportion of total themes occurring in session. Mean is the average proportion for the five sessions.
Interobserver Agreement--First Stage

In Table Three is shown the mean intra-class $r$ for agreement between the six rater pairs for the first group of five sessions (three boys and two girls). Again in this table only those sixteen thematic categories occurring in at least two interviews and in at least two five-minute segments in those interviews are shown.
### Table Three

**Ratings Between Pairs of Raters**

**First Stage**

n=6

<table>
<thead>
<tr>
<th>Theme</th>
<th>Mean Correlation Coefficient</th>
<th>Range</th>
</tr>
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<tbody>
<tr>
<td>Character in play (father)</td>
<td>.97 ***</td>
<td>.93-.99</td>
</tr>
<tr>
<td>Character in play (mother)</td>
<td>.94 ***</td>
<td>.87-.99</td>
</tr>
<tr>
<td>Birth and babies</td>
<td>.91 ***</td>
<td>.79-.98</td>
</tr>
<tr>
<td>Cleaning and fixing</td>
<td>.91 ***</td>
<td>.88-.96</td>
</tr>
<tr>
<td>Imitation of caregiving roles</td>
<td>.85 ***</td>
<td>.82-.91</td>
</tr>
<tr>
<td>Destruction</td>
<td>.78 ***</td>
<td>.49-.97</td>
</tr>
<tr>
<td>Reconciliation</td>
<td>.77 ***</td>
<td>.61-.96</td>
</tr>
<tr>
<td>Scene setting</td>
<td>.77 ***</td>
<td>.54-.96</td>
</tr>
<tr>
<td>References to self</td>
<td>.76 ***</td>
<td>.54-.97</td>
</tr>
<tr>
<td>Loss of object</td>
<td>.64 **</td>
<td>.30-.92</td>
</tr>
<tr>
<td>Power, size, and capacities</td>
<td>.61 **</td>
<td>.36-.83</td>
</tr>
<tr>
<td>Bodily functions</td>
<td>.60 **</td>
<td>.42-.81</td>
</tr>
<tr>
<td>Bodily damage</td>
<td>.51 *</td>
<td>.28-.77</td>
</tr>
<tr>
<td>Exploration of properties</td>
<td>.37</td>
<td>.0-.74</td>
</tr>
<tr>
<td>References to time</td>
<td>.38</td>
<td>.11-.78</td>
</tr>
<tr>
<td>Fighting and attacking</td>
<td>.25</td>
<td>.0-.50</td>
</tr>
</tbody>
</table>

*Only those themes occurring in at least two five-minute segments in two interviews are shown.*

***=Excellent agreement; **=good; *=fair
As can be seen from Table Three, interrater correlation coefficients ranged from no agreement to 0.97. Using criteria suggested by Cicchetti and Sparrow (1981), an intraclass r above 0.75 indicates excellent agreement, 0.60 to 0.74 good agreement, 0.40 to 0.59 fair agreement, and less than 0.40 poor. For the sixteen thematic categories listed, nine showed excellent agreement, three good, one fair and the remaining three poor. Raters tended to agree (mean r=0.65) about the total number of different themes represented by the child for the total interview.

It is important to note that there did not appear to be any difference in the agreement coefficients in the ratings of those tapes in which one of the coders also interviewed the child. Coder pairs did not agree better or worse when one member of the pair was also the interviewer. On the other hand, when the agreement coefficients between pairs were ranked, there was a notable trend. The developer of the instrument and the rater with the greatest amount of prior experience in rating videotapes of children’s behavior tended to have the highest intraclass r values for most of the thematic categories. This trend suggested that some disagreements and r values in the fair range could be improved by more careful training of raters and clarification of operational definitions. This finding in combination with the categories that had fair to poor interobserver agreement led to the second stage of studying agreement among raters.

The three categories showing intraclass r less than 0.50 were exploration of properties, references to time, and fighting and attacking. Raters seemed more likely to rely on inference when coding these categories, and thus it was felt that the descriptors needed to be clarified. Similarly, bodily damage had an intraclass
\( r \) value in the poor range (0.51) and the descriptor for that category was also clarified. Conversely, the categories with intraclass \( r \) values greater than 0.70 were those in which the descriptions were more clearly linked to directly observable behavioral phenomena.

**Interobserver Agreement--Second stage**

Operational definitions of five themes which had fair to poor reliability in ratings of the first cohort were revised. Raters met as a group for additional discussion about the revisions in the thematic categories. In general, more specific behavioral examples were included to guide raters in their choice and where one category might be confused with another, specific contrasts were included. For example, the difference between the themes "fighting and attacking" and "destruction," was clarified by specifying that the former involved animate and the latter, inanimate objects. Similarly, in the original version, "power, size, and capacities" included the term ‘competition’ which prompted raters to rely more on inference. After these revisions and the repeat instruction sessions, the same four raters completed ratings for five more children (three boys and two girls).
Table Four
Ratings Between Pairs of Raters¹

Second Stage

n=6

<table>
<thead>
<tr>
<th>Theme</th>
<th>Mean Correlation Coefficient</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fighting and attacking</td>
<td>.96 ***</td>
<td>.94-.98</td>
</tr>
<tr>
<td>Destruction</td>
<td>.92 ***</td>
<td>.85-.99</td>
</tr>
<tr>
<td>References to time</td>
<td>.85 ***</td>
<td>.44-.97</td>
</tr>
<tr>
<td>Power, size, and capacities</td>
<td>.83 ***</td>
<td>.67-.93</td>
</tr>
<tr>
<td>References to self</td>
<td>.68 **</td>
<td>.39-.91</td>
</tr>
<tr>
<td>Exploration of properties</td>
<td>.63 **</td>
<td>.13-.90</td>
</tr>
<tr>
<td>Bodily damage</td>
<td>.43 *</td>
<td>.14-.79</td>
</tr>
<tr>
<td>Scene setting</td>
<td>.33</td>
<td>.18-.53</td>
</tr>
<tr>
<td>Birth and babies²</td>
<td>.29</td>
<td>.10-.64</td>
</tr>
<tr>
<td>Bodily functions²</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Loss of object²</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Imitation of caregiving roles²</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Reconciliation²</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Cleaning and fixing²</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Character in play (mother)²</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Character in play (father)²</td>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>

¹Only those themes occurring in at least two five-minute segments in two interviews are shown.

²These categories occurred infrequently in the second group of tapes.

***=Excellent agreement; **=good; *=fair
Table Four shows the mean intraclass $r$ values from the ratings for the second group of sessions for the same themes shown above in Table Three. Seven of the sixteen themes did not occur or were infrequent in the second group of sessions. Each of the three themes with poor reliability in the first ratings (fighting, destruction, and references to time) improved in rating of the second group of sessions. Of the remaining six themes, one remained in the same fair range, one showed a change to excellent from good reliability, and two remained in the excellent range. For those categories showing improved or similar levels of interobserver reliability in the second coding phase, the range of intraclass $r$ values for observer pairs tended to be narrower than during the first reliability phase which also indicated improved agreement among raters.

Finally, two categories, birth and babies and scene setting, showed markedly decreased levels of interobserver reliability in the second coding phase. For both of these categories, additions had been made to the operational definitions in the revisions between the first and second phase had been made, and raters agreed after coding a second group of sessions that these revisions made the category more difficult to use. For example, for birth and babies, the notion of "secrets" was added and seemed to make the category too general. Similarly, combining scene setting and listing properties resulted in too inclusive a category. In both cases, the revisions were made to cover thematic areas that seemed inadequately described in the first version of the instrument. With findings of decreased interrater reliabilities, the original descriptions for these two categories
was selected for the final rating instrument. Except for these latter themes, the final rating instrument reflected the revisions of categories that proved reliable in the second study phase.

Discussion

Taken as a whole, the study was highly successful in demonstrating that thematic categories could be developed and rated reliably by independent categories. Three findings bear discussion. First, analytically informed clinicians can reliably agree about the predominant themes presented by a child during play interviews. Second, with revision and additional instruction, agreement among observers using this technique generally improves. Third, the five children in this sample clearly alternated between using themes related to scene setting and those relating to dramatization of the fantasy. Similarly, despite individual variability among the five children, a few thematic categories were used consistently by all children (e.g., comparison of sizes and destruction). Even in initial presentations, children in this age group commonly express similar themes such as power, size, and capacities, fighting and attacking and destruction.

Traditionally, conceptualizations of the oedipal period have emphasized the vicissitudes of libidinal themes in the child's play. The findings from this albeit small sample suggest, however, that aggressive strivings are equally, if not more, predominant in the fantasy life of children of this age. This finding is consistent with the qualitative findings described in Chapter Five. Similarly, the predominance of themes such as scene setting suggest that play of the oedipal period reveals much about emerging ego functions described in Chapters Two and
Four such as reality testing, ordering the surround, defensive constellations (e.g., displacement, identification, reaction formations).

Clearly, this third finding requires further study with a larger sample of play interviews and more comparisons across groups of children but underscores the empirical usefulness of this approach to children's play. The individual variation and infrequent occurrence of certain thematic categories previously cited as the hallmark of the oedipal phase may be an artifact of the small sample size and limited number of sessions with each child. Alternatively, the present technique may reveal the more varied nature of what constitutes oedipal configurations for any individual child. This would suggest that neither sample size nor the number of sessions is singularly responsible for the limitations in occurrence in these specific themes. A study of sessions from ongoing analytic treatments of young children would clarify these distinctions. Additionally, further studies with a larger sample of children and more sessions would clarify how inclusive the current thematic rating scale is of the material that predominates in the play of children in this age group. However, it should be noted that in the current version, 16 of the 30 categories covered 72% of the themes present in the children's play. Another way of expanding the inclusiveness of the instrument would be to use a systematic psycholinguistic assessment of the narrative that is similar to the qualitative approach to communications that was discussed in Chapter Four.

The first and second findings about agreement among observers using this technique raises several points. Positively, the results indicate that even with the complexity and variability of a play interview, raters who share a psychoanalytic
perspective can agree about what general themes the child is conveying in play. Negatively, the nature of the operational definitions of the thematic categories sometimes allowed for more inferential judgements and less agreement among observers. The assumption that behavior gives representation to fantasy may be reflected in a tendency for raters to move from the specific behavioral markers to more abstract levels of inference. This problem was anticipated in designing this approach to the thematic content of play, and found to be minimized by instructing raters to focus only on what was predominant and explicitly apparent in the child’s presentation. The variability in agreement coefficients underscores that even with such instructions certain thematic categories lend themselves to more inference than others. Also, as highlighted by the fluctuations in agreement found for two categories in the second group of ratings, it is possible for the descriptive definitions of thematic categories to become too inclusive.

In addition to the problem of inferential judgements, the approach to studying play described in this study highlights another other area for discussion. First, play is not simply thematic content. As stated earlier, play reflects a complex interaction between several different domains—affect, movement, and interaction with an adult. Clearly, any instrument examining how clinicians make judgements about children’s play also needs to examine these other domains of play.
CHAPTER SEVEN
THE CHILD'S EMOTIONAL PRESENTATION

Introduction

Observations of emotional presentation during a clinical interview serve a fundamental basis for psychoanalytic inferences about the child's experience of himself—his thoughts, fantasies, and relationship to others. As the themes of play that emerge in any given hour may represent internal fantasy configurations and a current synthesis of the child's perceptions, interests and concerns, the accompanying display of emotions suggests various roles these themes play in the inner life of the developing child. That is, what does the child feel about the themes that are represented in his play; how are these feelings expressed; and, how does the psychoanalytic observer derive hypotheses about the emotional weight and meaning of these play themes? Observing the themes of play alone does not inform the observer as to whether these themes reflect sources of pleasure or are anxious attempts to master internal and external conflicts. In the psychoanalytic setting, inferences about the emotional meaning or importance of themes that develop in play sessions are derived from the observer's synthesis of multiple data points and patterns of behavior that emerge over time. These observations include: (1) frequency of given play themes; (2) accompanying levels and types of activity; (3) affects assigned to various characters in the play narrative; (4) interruptions and shifts in the play; (5) attitudes to the analyst and setting (presented verbally and non-verbally); (6) reports from parents and teachers about behaviors and

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attitudes observed outside of the consulting room; and (7) explicit statements made by the child about his feelings. As described in Chapter One, in the psychoanalytic literature, case reports and clinical vignettes have been the sole means of illustrating and conveying the ways in which multiple points of observations are synthesized and lead to both specific inferences and generalized theoretical constructs about the relationship between thematic content and emotional meaning in the developing mind of the young child.

It can be argued that the isolation and systematic rating of affect is artificial at best precisely because the analyst relies on a multiplicity and synthesis of observations to make judgements about a child’s affect in any given session or series of sessions that make . As a result, there have been no previous attempts to examine the constituent markers of the child’s emotional presentation in the psychoanalytic interview in any systematic way. As part of the broader aim of developing a system of rating multiple aspects of the 4-6 year old child’s presentation in psychoanalytic play interviews, the task of developing a rating scale for emotions or "affects" had two goals: (1) can "emotional presentation" be operationalized in a way that is consistent with psychoanalytic modes/points of observation, and (2) can clinicians agree on what they observe.

**Methods**

**Design**

The coding scheme for assessing the child’s emotional presentation was developed in several stages that will be described in this chapter. Each version of the rating instrument was tested with a group of seven raters (including the author)
The same sample population described in Chapter Four was used in the studies described in this chapter.

Materials

Before describing the steps taken to develop a coding approach to the child's emotional presentation during play in a clinical setting, it is appropriate to mention the general strategies taken to assess children's affect in fields outside child analysis. Approaches to affect have ranged from the detailed and specific coding of facial expression to the implicit assumption that such expressions reflect internal experiences of differing affects to more global coding scales grouping affects into positive, negative, and neutral categories. Regardless of the level of
detail or unit of observation, these approaches are grounded in manifest behavior with the implicit assumption that these manifest expressions reflect the child’s differing experiencing with internal affective states.

While counting changes in facial expression offers a systematic and reliable measure of one important dimension of affect, the unit of measurement and detailed examination of one aspect of presentation does not capture either the process or attention to the broader range of observation typically employed by psychoanalytic clinicians.

**Early Rating Schemes.** Before arriving at the final rating scheme described below, four other attempts were made to develop a reliable instrument for rating affective/emotional presentation. Each of these were piloted on several videotapes of analytic play interviews with the 4-6 year old cohort. The first effort involved a simple, five-point scale that asked raters to determine at minute to minute intervals the degree to which the child appeared to experience pleasure or unpleasure:

0----1----2----3----4

unpleasure pleasure

In discussions with the raters, several problems emerged with this scheme. The most immediate difficulty was the absence of any specific, behavioral criteria for making judgements. While this left the raters with a wide range of latitude reflecting the subjective nature of the synthesis of observations, the expectation
that such judgements could be made at one minute intervals ran counter to that very process. Suggesting that raters make an initial judgement after the first minute and subsequently, after the first 5 minutes and then only make a rating decision when there was a change was equally unsuccessful in producing agreement. Perhaps most important in the discussions that followed individual and group viewing and rating of videotapes was the sense among all raters that the scale was an artificial gauge of their assessments of the emotional presentations of the children observed. As a result of these problems, this scale was abandoned.

In a second attempt to develop an instrument for rating affects, raters were asked to generate lists of words that described or indicated aspects of emotional presentation. An original list of 150 words was divided into five categories under the heading, Basic Emotions. Repetitive and obscure descriptions were eliminated, and the list was paired down to a total of 48 words and appear in Table One.

<table>
<thead>
<tr>
<th>Table One</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Anxious</td>
</tr>
<tr>
<td>fidgety</td>
</tr>
<tr>
<td>frightened</td>
</tr>
<tr>
<td>horrified</td>
</tr>
<tr>
<td>nervous</td>
</tr>
<tr>
<td>scared</td>
</tr>
<tr>
<td>worries</td>
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<td></td>
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<td></td>
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<td></td>
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<tr>
<td></td>
</tr>
</tbody>
</table>

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In practice, using the coding conventions described above (making judgements from minute to minute; first minute and subsequent changes; and first 5 minutes and subsequent changes), inter-rater agreement was poor.

The discussion of disagreements about one particular sequence of video-tape illustrates the problems that raters experienced when attempting to categorically rate affective presentation with this scale. In the second session with 5-year-old Ed, as described in Chapter 5, he was observed approaching the analyst with a puppet that he described as a bad guy. He told the analyst that this puppet was a "bad guy" and proceeded to repeatedly bounce the puppet first on the analyst’s shoulder and then on his head. The analyst questioned Ed about what was becoming a vigorous attack on his body and the boy replied with a broad smile that the puppet liked making mischief and "getting into trouble." Ed laughed as the original light bouncing became hit-ting until the analyst told him to stop, that he did not like being hit and wondered if Ed was trying to see if the analyst would get angry. At this point in the session, Ed quickly backed away from the analyst, continued to smile as he again suggested that the puppet liked being a bad guy and needed to be put in jail. With a smile still on his face, Ed threw the puppet into a closet and announced that he was now in jail.
the room, Ed continued to focus on the analyst's face. He was still smiling but was now halfway across the room from the analyst and stood behind a play sink as he clutched at his genitals. Among the four raters who had watched this 5 minute sequence of tape, there were four different ratings of Basic Emotions. The ratings were: anxious, happy, unhappy and angry. In the discussion that followed, each rater was able to justify their judgements along very different lines. The rating of "anxious" was defended in terms of the sequence of increased motor activity that accompanied the increased rapidity and force of the assault on the analyst, followed by the move across the room and clutching of genitals. The rater who chose "happy" as the most salient Basic Emotion acknowledged that Ed might have been anxious but focused on the persistent smile and increased activity level as evidence of his excitement and pleasure. The choice of "angry" was easily justified by the rater on the basis of the central elements of attacking, provocation, teasing and the like. The last judgement of "unhappy" was the most abstract of the inferences drawn. This rater argued that all of the behavioral markers already described indicated a basic uncertainty about himself and saw in his anxious smile a defense against central feelings of being "distraught, frustrated, and miserable."

While each of the raters cited different focal points of observation, all agreed that unlike the rating of Thematic Content, the Basic Emotions scale was still too ill-defined and that the headings were not exclusive enough to allow for clear-cut judgements. In the absence of more detailed behavioral descriptors and criteria raters felt compelled to make decisions that were based on broad inferences that relied on a range of observations including: (1) facial expressions,
activity level/states of arousal, (3) attitudes towards the analyst, (4) interaction with the analyst, and (5) the thematic content of the play itself. The fact that the Basic Emotions headings included descriptors of states of arousal seemed to be especially confounding in raters' attempts to make judgements about emotional presentation per se. For example, if "animated" was one of the descriptors for the heading, "Happy" and the child was both animated and "attacking," the rater found it more difficult to decide whether to make a judgement of "Happy" or "Angry."

In the next version of the instrument, all descriptors of states of arousal were removed from the headings of Basic Emotions and placed in a separate list under the heading, "States." Raters were then asked to rate both for Basic Emotions and scaled ratings for "State." The descriptors were chosen and then discussed by a group of 5 raters on an a priori basis that attempted to reflect ways of describing observations that might occur in a clinical setting and thus serve to inform judgements about general characteristic about the child's presentation. The ratings ranged from "withdrawn" on one end of the scale to "agitated" at the other, with "calm" and "animated" as median behavioral states. The scale is shown in Table Two.

<table>
<thead>
<tr>
<th>1--Withdrawn</th>
<th>2--Constricted</th>
<th>3--Subdued</th>
<th>4--Calm</th>
</tr>
</thead>
<tbody>
<tr>
<td>5--Animated</td>
<td>6--Restless</td>
<td>7--Disorganized</td>
<td>8--Agitated</td>
</tr>
</tbody>
</table>

As before, raters were asked to enter a first rating of both "Basic Emotions" and "States" after the first minute, and subsequently whenever it was
felt that a change in either had occurred. Raters were told that after the first minute they could enter ratings from each domain independently. That is, if they felt that there was a change in "Basic Emotions" but not in "States," they could rate in the area of change only.

Even with a distinction being made between Basic Emotions and States, raters were not able to agree on judgements made when sample tapes were scored and discussed. More important however was that individual raters continued to describe their decisions as forced. In spite of the separation of Basic Emotions and States, raters continued to find difficulties with the basic emotions similar to those described for the earlier system. With regard to the latter heading, States, raters had trouble clearly or firmly distinguishing between descriptors. Specifically there were problems distinguishing between: withdrawn and constricted, subdued and calm, animated and restless, and disorganized and agitated. In addition, even within a one minute sequence, raters found it difficult to make an exclusive rating on the basis of behavior alone. For example, a rater might choose to describe a child as "withdrawn" because he kept his back to the analyst and neither engaged the analyst in the play nor directly addressed any comments to the analyst. But at the same time raters would observe that the child was actively engaged in play activity in an "animated" fashion. In a similar vein, the child might appear to the observer as "constricted" in his/her physical activity and infer from the child's inability focus on any given activity within a sequence as evidence that the child was "disorganized." In the absence of more explicit behavioral markers that would identify specific criteria for judgements, raters felt that the descriptors for State like those for Basic Emotions supposedly called for judgements based on what
could be explicitly observed, but in fact, required inferences based on a synthesis of: (1) themes of play, (2) activity level, (3) attitude toward the analyst, and (4) interaction with and use of the analyst. That all of these identified factors might receive varying degrees of attention by raters at different moments during a given session increased the difficulty of achieving inter-rater agreement about the specific timing of changes in either Basic Emotions or States even where essential agreement in these domains was apparent.

**Basic Emotions and Basic Dimensions of State.** In an attempt to refine the rating scales for "emotional presentation," two central modifications were made. For the category of Basic Emotions, additional contrasting descriptors were added in the hope that these would help raters further clarify judgements. Following discussions with the raters, the next version of the instrument development listed the Basic Emotions as shown in Table Three.

**Table Three**

A. Anxious, fearful (vs. calm)

B. Happy (vs. dysphoric)

C. Unhappy (vs. happy)

D. Angry (vs. pacific)

E. Sober (vs. surprised)

In addition, Basic Dimensions of State were discussed and broken down into more specific categories of descriptors. This set of categories replaced the 8-
point scale for **States** with terms that captured behavioral aspects of the child's presentation that could be observed and described with a minimal amount of inference and abstraction being employed on the part of the raters. These **Basic Dimensions of State** were developed under three headings as shown in Table Four.

**Table Four**

<table>
<thead>
<tr>
<th>A. Arousal</th>
<th>C. Intensity of emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sleepy, inattentive</td>
<td>Very muted</td>
</tr>
<tr>
<td>Attentive</td>
<td>Subdued, mildly displayed</td>
</tr>
<tr>
<td>Alert</td>
<td>Visible display of emotions</td>
</tr>
<tr>
<td>Vigilant</td>
<td>Strongly asserted</td>
</tr>
<tr>
<td>Hypervigilant</td>
<td>Explosive, powerful</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Gross Mobility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sessile, paucity of movements</td>
</tr>
<tr>
<td>Quietly active</td>
</tr>
<tr>
<td>Animated</td>
</tr>
<tr>
<td>Very mobile</td>
</tr>
<tr>
<td>Always in motion</td>
</tr>
</tbody>
</table>

The first two groupings of descriptors was based on an attempt to provide more detail and focus for observations that had previously been condensed in the 8-point scale of "States." The third grouping was intended to account for the variation that occur within the child's presentation of Basic Emotions and was developed in response to raters' difficulties making judgements in that domain. It was hoped that these qualitative descriptors would allow raters greater freedom in making definitive choices between (A) anxious, (B) happy, (C) unhappy, (D) angry, and (E) sober if they knew that there was an opportunity to include the degree of the presentation of any of these categories of emotional presentation.
After reviewing a number of tapes, it was apparent that in terms of observation and phenomenological description, arousal, activity level, and emotional intensity were interrelated and that a scaled typology based on the combination of categories could be developed. In addition to capturing and organizing observable phenomena, such a typology would decrease the number of discrete dimensions to be rated and, thus stay closer to the clustering and synthesis of observations in these domains that typically occurs in the clinical experience. Under the heading, Global Categorizations of Basic Dimensions of State, the following typology shown in Table Five was piloted—along with the revised Basic Emotions-- in individual and group ratings of two tapes.

Table Five

**Level I**
Sleepy, inattentive
Sessile, paucity of movements
Muted display of emotions

**Level II**
Basically attentive
Some movement, quietly active
Subdued, mildly displayed emotions

**Level III**
Alert, attentive
Animated
Visible display of emotions

**Level IV**
Aroused
Quite active
Strongly asserted emotions

**Level V**
Hypervigilant
Hyperactive, always in motion
Explosive display of emotions
This version of the instrument was piloted with a panel of 7 raters who viewed three videotaped play interviews. At each five minute interval, the videotape was stopped and the segment was discussed in terms of the new rating scheme in conjunction with the revised ratings for Basic Emotions. The level of inter-rater agreement for judgements of this dimension was poor. Raters continued to have difficulty agreeing on the descriptions of Basic Emotions, and again noted that decisions about whether the child appeared anxious happy, unhappy angry, or sober were not adequately anchored to specific enough behavioral descriptors. In addition, raters continued to feel that there was not enough data, that their exposure to the child's presentation was too limited to allow them to make judgements about the underlying, internal status of "affect." In contrast to their discomfort about determining the internal status of affect, they were at ease, and in agreement with regard to the more behaviorally-based ratings of levels of Emotional Expressivity.

In addition to the findings about Basic Emotions, the pilot ratings and discussions that followed revealed uniform agreement that while the clustering of descriptors for levels of Arousal and Gross Mobility captured observed phenomena, descriptors of intensity of emotional display did not necessarily fit. For example, a child could display "strongly asserted emotions" in emphatic words and facial expression while not appearing "aroused" or "quite active." Equally, a child who appeared "hypervigilant" may be especially careful about his activities and remain "quietly active" and "subdued." In other words, the descriptors of "Intensity of Emotions" were orthogonal to the categories of levels of arousal and gross mobility. A child might, for example, play avidly, but quietly in the
presence of the analyst and while manipulating doll-house figures may exhibit a "muted display" of emotions. Applying this rating scale to the sample videotaped interviews quickly reminded the observers that muted display of emotions does not necessarily only accompany sleepy inattention and paucity of movements, just as the "strongly asserted" emotion of sadness--complete with tears--may be present alongside of basic attentiveness and "some movement." As a result, raters might be able to make a judgement about the level of arousal and gross mobility, but their inability to "fit" the level of emotional expressivity with the assessments in these two areas preclude confident and reliable ratings within and between individual raters.

Basic Dimensions of State and Emotional Expressivity. In order to address the problem of the confounded relation between emotional intensity and levels of arousal or gross mobility, Levels of Emotional Expressivity was split off from the Basic Dimensions of State--now comprised of levels of Arousal and Gross Mobility--to form a separate rating category. Thus, the final version of the rating scales for the child’s emotional presentation was divided into two separate domains as shown in Table Six.
### Table Six

#### A. Global Categorizations of Basic Dimensions of State

<table>
<thead>
<tr>
<th>Level I</th>
<th>Sleepy, inattentive</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sessile, paucity of movements</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level II</th>
<th>Basically attentive</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Some movement, quietly active</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level III</th>
<th>Alert, attentive</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Animated</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level IV</th>
<th>Aroused</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Quite active</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level V</th>
<th>Hypervigilant</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hyperactive, always in motion</td>
</tr>
</tbody>
</table>

#### B. Levels of Emotional Expressivity

<table>
<thead>
<tr>
<th>Level I</th>
<th>Muted display of emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level II</th>
<th>Subdued, mildly displayed emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level III</th>
<th>Visible display of emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level IV</th>
<th>Strongly asserted emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level V</th>
<th>Explosive display of emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In piloting this version of the instrument, raters who viewed two videotaped play sessions in a group setting--again, stopping the tape at five minute intervals for discussion--found the division between these dimensions much more
appropriate for describing the play and the child’s presentation. In addition, during these group discussions, agreement between raters improved markedly. With the development of this final version of the rating schemes for children’s emotional presentation in the psychoanalytic play interviews, a formal study of inter-rater reliability was begun.

For this study, videotapes of interviews from twelve children who had not yet been viewed by raters in the pilot studies were used. The age of the children ranged from four to six years of age; in this group there were seven boys and five girls. All 12 interviews were the second of the three research play sessions.

**Procedures**

Because the focus was on how the child’s emotional presentation varied from moment to moment across the session, raters were instructed to code each of the two domains every minute. Practically, each rater was allowed to indicate on the coding sheet only when they noted a change in the rating for any one of the two dimensions. Thus, functionally, each rater was coding for change after they had established a baseline in the beginning one to two minutes of the session. In contrast to the previous work on the thematic content of play, raters were not supplied with a transcript of the session but were asked to work solely from the videotaped record. The decision to use only the videotaped record was made because the judgements required for these dimensions were based more on non-verbal communicative cues (e.g., facial expression, tone of voice, bodily activity) than on spoken language per se.
Seven raters participated in the coding of the videotaped play sessions. Two raters were child analysts, three were developmental psychologists in their second year of post-doctoral training, and two were master's level clinical social workers. Each of the five non-analysts had some exposure to psychoanalytic conceptualizations of play; the two social workers were experienced child therapists, and the three psychologists had a range of psychotherapeutic experience with children. The raters coded each tape independently of one another. The twelve tapes were rated by a minimum of three raters and a maximum of five. Raters for each tape were mixed by discipline in order to compare variations in agreement according to the level of experience/understanding of psychoanalytic conceptualizations of play.

In order to describe the mean ratings from each of the categories for the twelve children, ratings of one rater per child were selected at random. The proportion of time a particular category was used is expressed in Table Seven as the mean proportion for the twelve children. The results of the multiple observer ratings for the twelve tapes are presented as the mean intra-class \( r \) for all available combinations of rater pairs. The number of times a particular category was rated was counted across five minute blocks and raters were compared on these five minute summary scores. The choice to examine inter-rater agreement across five, rather than one minute intervals was made because of the relatively frequent problem of rater differences one minute apart. In other words, one rater might code a change in the child's gross mobility or level of arousal late in the seventh minute while another placed the same change early in the eighth minute. When inter-observer agreement is calculated on a minute by minute basis, these two
raters would appear to disagree although functionally they might only differ by a matter of seconds when they choose to mark a category shift. While the same issue applies to summaries over the five minute block (that is, between late in the fifth or early in the sixth minute), summarizing data tends to minimize these types of insignificant disagreements. Inter-observer agreement was expressed in all cases using the intra-class $r$ (Bartko, 1966). Besides indicating the level of disagreement between raters, the intra-class $r$ takes into account chance agreement. Using the criteria suggested by Cicchetti and Sparrow (1981), an intra-class $r$ above 0.75 indicates excellent agreement; 0.60 to 0.74 good agreement; 0.40 to 0.59 fair agreement; and less than 0.40 poor agreement.

Results

The mean proportions of occurrence for the different categories are shown in Table Seven. For levels of arousal the predominant rating for the twelve children was between quiet and alert attention. For levels of emotional expressivity, the predominant rating for the twelve children was between subdued and visible display.
Table Seven

Mean Proportion for Functional Areas

n=12

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>S.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Global Categories</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Level I</td>
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<td></td>
</tr>
<tr>
<td>2. Level II</td>
<td>.48</td>
<td>.36</td>
</tr>
<tr>
<td>3. Level III</td>
<td>.54</td>
<td>.33</td>
</tr>
<tr>
<td>4. Level IV</td>
<td>.06</td>
<td>.15</td>
</tr>
<tr>
<td>5. Level V</td>
<td>.08</td>
<td>.29</td>
</tr>
<tr>
<td><strong>Emotional Expressivity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Muted display</td>
<td>.06</td>
<td>.21</td>
</tr>
<tr>
<td>2. Subdued display</td>
<td>.36</td>
<td>.31</td>
</tr>
<tr>
<td>3. Visible display</td>
<td>.47</td>
<td>.33</td>
</tr>
<tr>
<td>4. Strong display</td>
<td>.11</td>
<td>.29</td>
</tr>
<tr>
<td>5. Explosive display</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

In terms of the agreement between observers, the mean intra-class $r$ for the two domains is shown in Table Eight. There were no significant differences among raters according to discipline though the intra-class $r$ was higher when the rater pair was both child analysts.
Table Eight

Mean Intra-class r Values for Rater Pairs

n=21

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Mean Intra-class r</th>
<th>S.D.</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global Categories</td>
<td>.81</td>
<td>.14</td>
<td>.96-.46</td>
</tr>
<tr>
<td>Emotional</td>
<td>.80</td>
<td>.13</td>
<td>.97-.39</td>
</tr>
<tr>
<td>Expressivity</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Discussion

Raters from different disciplines were able to reach acceptable levels of reliability for both the scales defining levels of state and levels of emotional expressivity. While for both scales, the intra-class r values were generally in the excellent range (above 0.75) for the different rater pairs, the range did include values less than 0.50, indicating poorer levels of agreement. As in the earlier versions of the instrument, raters who tended to be more inferential in their judgments more often marked subtle changes in state, a factor that contributed to some variability in the intra-class r. Additional training in the use of these two scales will likely minimize the problems with inference or with the tendency to score brief changes in either state of expressivity.

Two caveats are in order. First, the limited range of both state and affective variability shown by the children in this sample means that the ends of the scales have not been adequately tested for rater agreement except in the fact that raters agreed on the absence of, for example, explosive displays of affect. Additional testing using a mixed sample of children with a range of psychiatric
disorders will provide more rigorous tests of observer reliability for the aspects of
the scale that are intended to reflect greater disturbance in the child's presentation.
The second caveat is that the rating of these scales is likely not completely
independent of the thematic rating despite instructions to the contrary to the raters.
For example, it is quite likely that raters hearing a child talking about attacking
and destroying would tend to rate his emotional expressivity more toward strong
than subdued regardless of the child's manifest behavior. This raises a
methodological and conceptual issue. Conceptually, each of these scales is meant
to assess dimensions of the child's presentation which analysts use as data in
formulating their evaluations of the child's central conflicts and psychic
functioning. The interrelatedness of these dimensions means that such data may
be gathered in a hierarchical manner which may vary from analyst to analyst—a
question which may be investigated with a larger group of children and a more
varied group of analysts. This leads to the methodological point. In order to force
raters to rate the dimensions of state and emotional expressivity without being
influenced by the themes, it may be necessary in future studies to define more
specifically what are the manifest behaviors for each level.
CHAPTER EIGHT
THE CHILD’S ATTITUDE TO THE ANALYST

Introduction

As discussed in the previous chapter, a child’s emotional presentation could be described in terms of levels of arousal, activity levels, and levels of emotional expressivity. However, the observed phenomena in these domains do not occur in a vacuum, but rather in the context of an interaction with, or in the presence of the analyst. The way the child experiences the interaction with the analyst or the child’s comfort in the room with the analyst may be a key determinant in the play that occurs in a given hour. In addition, the child’s attitude toward the analyst at the very least suggests the child’s feelings about being with an adult other than the parent. The attitude may also reflect aspects of the child’s expectations of the current situation in the consulting room itself. At the most, the attitude the child presents in this particular setting reflects a generalized set of expectations and modes of relating that have referents outside of the consulting room, in the daily life of the child—from the present or the past. An important aim in developing a rating scheme for assessing the child’s attitudes toward the analyst in research play interviews was to approximate the modes of observation the analyst employs in considering the child’s attitude as it is presented in the analytic encounter. Toward this aim, it was important to review how these observations contribute to the overall assessment of the child’s inner life.
The Child's Attitudes in the Clinical Setting

A central focus of the child analyst's observations is the ways in which the child relates to the analyst from the first introduction in the waiting area, to the myriad shifts in attitude toward the analyst presented in the consulting room throughout the course of the psychoanalytic treatment. The attention paid to the child's attitude to the analyst reflects the belief that these various reactions and ways of relating to the analyst re-veal a great deal about the child's attitudes to the most important people in his or her daily life, and, may suggest observable surface markers for a range of internal configurations involving the child's fantasies about those people. As described in Chapter 2, the internal representations of self and others reflect the organization of the variety of composite images of himself and others that the child has constructed on the basis of his experiences, urges, and feelings. While these concepts are never fully articulated in consciousness as a sum total, they are ex-pressed in the child's ever-changing conscious fantasies, attitudes and behavior. In other words, the way the child relates to others (his attitude) will reflect an internal frame of reference that draws on (1) his experience of interacting with similar figures and his awareness of an expectable set of social conventions; (2) the status of specific urges; (3) the relative balance between the pleasure/satisfaction gained from their expression vs. the potential negative consequences in the form of shame, guilt, anxiety, or actual danger that might result from a clash with internal (superego) or external (current reality) demands/rules/expectations; and, (4) the developmental status of a sense of self--an appreciation for personal abilities that are now experienced as autonomous in relation to the parents. This "sense of self," as discussed in Chapter 2, refers to
the child's developing capacity to balance urges with personal ideals, the capacity to hold onto internal images of the parents, the capacity to take the perspective of another, cognitive and physical capacities that the child recognizes as sources of mastery and competence, and the like.

Transference

The term that has been used to describe or characterize the child's attitude to the analyst is transference. This derives from analytic treatment with adults and refers to the ways in which the patient's perceptions of and relationships with significant figures from childhood are expressed in current perceptions, thoughts, fantasies, feelings, attitudes and behavior in current relationships. In the clinical situation, transference refers specifically to the ways in which these experiences from the past are organized around, and expressed within the relationship with the analyst (Sandler et al., 1980). A major difference in considering this phenomena in work with children lies in the fact that, unlike adults, children continue to live with and rely on parents. Much of what the child brings to the treatment situation not only reflects a transference of aspects of relationships from the past, but significant aspects of current experiences, fantasies, perceptions, feelings and attitudes from current relationships—particularly those with parents and other family members (Sandler et al., 1980).

In an attempt to clarify the phenomena of transference, particularly as it is observed in the analysis of children, Anna Freud and her colleagues developed a typology of transferences of: (1) habitual modes of relating, (2) current relationships, (3) past experiences, and (4) transference neurosis (Sandler et al.,
The first type refers to fixed ways of relating to others that, while deriving from earlier relationships, have now been applied to the world at large, or to whole categories of people with whom the child has contact. The second category refers to the transfer, or displacement of current preoccupations with real situations in the child’s life or with aspects of current developmental challenges. The emphasis here is on the distinction between a revival of past experiences versus the displacement of current ones that can be observed in the child’s relationship with the analyst. The third category involves the child’s attitudes, fantasies, and memories from the past, were previously repressed and that are now manifested in the current relationship with the analyst as a result of the analytic work. In the last category, there is a "very special intensification of the transference involving an externalization of a major pathogenic internal conflict onto the therapist, so the conflict is felt by the patient to be between himself and the therapist" (Sandler et al., 1980, p.92). In child analysis, it is much less common to see as much evidence of the transference neurosis as occurs in the analysis of adults. When it emerges, there is a significant shift in the patient’s attention, interests and preoccupations to a focus on the interaction with the therapist (Sandler et al., 1980).

The notion that the child’s attitudes to the analyst tell us something about the internal frame of reference or, internal configurations of experience, urges, feelings and fantasies, would seem to suggest that the encounter with the new person—that is, the analyst—is only a reflection of the child’s life outside the consulting room. This notion would assume that the analyst’s presentation and modes of relating to the child have no, or only minimal bearing on the ways in
which the child presents himself in this particular setting. The opposite view would suggest that the analyst's demeanour and the particular circumstances of the encounter have everything to do with the child's presentation and therefore skew the nature and significance of the child's attitude to the analyst as a window into the inner world of the child. These two views reflect the extremes in considering the extent to which the child's manifest attitudes toward the analyst are a pure reflection of the child's inner life or of the child's day to day experiences outside of the consulting room. That is, the child's attitude in isolation from other aspects of the fuller presentation of themes and emotional presentation may, in fact, tell the analyst very little about the child's central interests, fantasies, concerns, and modes of regulating and communicating them. In addition, even when considering the child's attitude in the broader context, initial impressions may not be born out as the fuller picture of the child emerges over the course of an analytic treatment. The case presentation of Emma that appears in the Appendix is a good illustration of the potential for rapid shift in a child's presentation from friendly, positive engagement to attitudes of hostility, disappointment and fear. However, in considering the child's attitude to the analyst as one of the constituent aspects of analytic data, it is important to explore the nature of the setting and the ways in which the child's attitude can be viewed within the context of a setting and observational approach which, manifestly involves two people in the room.

The Interview Setting

In the clinical situation, the child analyst has the initial task of introducing himself and the consulting room to the child as a safe, comfortable setting in
which they will play and talk. This first meeting with the child is usually preceded by meetings with the parents in which the child's presenting difficulties, developmental and family history are discussed. These meetings with the parents are either conducted by the child analyst himself or by a colleague who will collect the background information and then engage in discussions with the analyst. The background information provides a context for observations of the child over the course of two or three initial/evaluative play sessions. In these meetings, it is suggested that parents tell their young children in simple terms that they will be meeting with someone who plays and talks with children. In addition, parents might tell the child that the person with whom they will be playing is someone who helps children with worries. While the details involved in the parents' introduction to the child's initial evaluation sessions may vary, parents of younger children—under five years old—are counselled to keep the explanation brief and to follow the child's lead through questions and statements in determining how elaborate the explanation about the consultation should be.

Often, in the initial meeting, the 4-6 year old child will feel most comfortable if the parent who has brought the child accompanies the child and analyst to the consulting room. The young child frequently makes verbal and nonverbal requests--by holding onto the parents' hand, climbing onto the parent's lap, or leaning up against the parent's body--that the parent remain in the consulting room for some period of time until he feels comfortable being "alone" with the analyst. The analyst's initial communications made in his verbal introduction of himself and his intentions--i.e., "we are going to a room where we can play and talk"; in his regard for the child's wishes about the timing of
separating from the parent; and in his friendly, but low-keyed invitation to the
child to explore the contents of the playroom and to use the toys and drawing
materials as the child likes, are meant to convey and demonstrate that the setting--
both person and place--are, in fact, safe and free of real, external demands or
threats that might prove overwhelming to the child.

Unlike other approaches to clinical interviews with children (Lewis, 1991;
Costello, 1991) psychoanalytic technique eschews structured questions that aim at
eliciting "mental status" on the basis of verbal responses and verbal information
regarding attitudes and interests. Instead, it is felt that the child is most likely to
reveal his interests, attitudes and capacities in a situation that can become most
familiar and that this sense of the familiar can best be established by the child
himself. The analyst is in the best position to observe what the child brings to the
sessions if the analyst's suggestions and demands--in the form of questions,
proposed activities, directing of play narratives, and the like are kept to a bare
minimum. This does not suggest that the analyst must remain inactive, silent, or
vacant in his presentation, but rather that the analyst conveys his friendly interest
and respect for the child by attending to what the child himself introduces in the
session.

Just as the parents of the young patient have introduced the child to the
idea of seeing the analyst, the child analyst may also say to the child that he be
there to help the child with his worries. At the beginning of the analysis, some
analysts prefer to say more and describe in greater detail the schedule as well as
the nature of the analytic work together while others say very little, preferring to
learn more from the child’s beginning ideas about the treatment first. In the
course of the analysis and in the context of a developing relationship between the patient and analyst, the analyst may make observations about the unfolding stories that emerge in the play activities and what they reveal about the child's conflicts, defenses and consequent behaviors and modes of relating. For some analysts, the child's play not only affords a window into the inner-life, but also is the material that bears interpreting for the purpose of increasing the child's conscious awareness of and insight into the relationship between unconscious conflict, defenses and manifest behavior and symptoms (Klein, 1927; Kennedy, 1979; Kennedy and Yorke, 1982;). For other analysts (Winnicott, 1968; Neubauer, 1987), the child's capacity to play in the presence of another and to develop multiple narratives that give expression to underlying conflicts, interests, and concerns is therapeutic in and of itself. Particularly for young children, this conceptualization emphasizes the action of play as serving the function of mastery through repetition and elaboration of central themes in the child's life as well as practicing and expanding the modes of representing them. In this model, the goal of interpretive work is not to create or enhance the child's insight per se, but rather to decrease the anxiety and defensive operations that disrupt or interfere with the expansion and unfolding of the play itself. The child's manifest attitudes toward the analyst comprise one central marker of the transference and an essential ingredient in considering the child's ability or inability to play in the presence of the analyst. This is especially the case at the beginning of a treatment when the child's expectations of what will occur in the sessions with the analyst are not determined by specific past experiences of contact with the analyst himself, but rather by expectations that derive from habitual modes of relating, current
relationships and past experiences with others. While the child's attitudes to the analyst are believed to provide crucial information about inner fantasy configurations, conflicts and defenses, until now there has been no effort to develop a means of systematically examining those attitudes as they emerge in play sessions.

The Child's Attitude in the Research Setting

As stated in Chapter 1, there may be several differences between play interviews the analyst conducts for the purposes of a clinical evaluation and those conducted for the purpose of research with children who present with no apparent need for clinical evaluation. This central difference may have implications for both the child and the interviewing analyst. The child may certainly feel more comfortable attending sessions with the analyst when he is told that the person with whom he will be playing is "interested in how children play" than the child who is not only having significant difficulties but also told that it is these difficulties or worries that are the reason for initiating contact with the analyst. From the analyst's perspective, conducting an interview for the purposes of clinical evaluation holds a different burden--e.g. making recommendations to parents regarding possible interventions, including treatment--than that on the analyst whose primary task of observing is generally free of clinical responsibility. Similarly, unlike the analyst conducting research sessions, the analyst conducting play interviews for clinical assessment of a child very often has a wealth of background information that serves as a preconscious or conscious filter through which the material that emerges in the play is seen and understood.
In spite of the differences associated with the purposes of play interviews with 4-6 year-old children, the guidelines and setting were, with some exceptions—e.g., research interviews were all videotaped and clinical interviews are not uniformly videotaped—the same. The choice of toys, handling of the child's separation from the accompanying parent, and instructions to the analysts about conducting the research interviews, as described in Chapter 4, were meant to replicate the setting and interviewing approach taken by child analysts who are seeing 4-6 year-old children for diagnostic assessments. Whether or not the differences associated with research and clinical interviews actually impact on the techniques employed by the analyst in initial interviews and whether or not there are significant differences between the initial presentations of young children who are seen for research or clinical purposes raise important empirical questions that are beyond the scope of the present work. However, in order to begin to address these questions in a systematic way, a reliable instrument for assessing this component of a child's attitudes to the analyst and the analyst's observations of them needed to be developed.

Methods

Design

The same design described in Chapter Seven was employed in this study.

Sample

The same sample described in Chapter Seven was used in conducting the current study.
Materials

On the basis of clinical experience and review of videotaped interviews with the research cohort, eight categories were developed with the intent of capturing the range of central features that are commonly seen in children's interactions with child analysts in the context of play interviews. An attempt was made to capture the spectrum of children's attitudes toward the analyst as seen in both research and clinical hours. With each heading, a contrasting heading was chosen in this attempt. For example, the attitude of friendliness was contrasted with wariness; withdrawn with provocative; seductive (e.g., libidinal and erotized) with enraged (or, aggressive and hostile); and detached with domineering. These various categories were operationalized using language that described observable behavior and where there was some potential for overlapping of categories (e.g., enraged vs. provocative vs. domineering), distinguishing features for each of the categories was spelled out. As such, these categories were first developed in the form of specific headings and then described in ways that allowed raters to make mutually exclusive decisions. While offering contrasting descriptions, these categories were not set out for raters in the form of a continuous scale per se, but rather as separate categorical ratings. The instructions to the raters and the categories and accompanying descriptors are presented in Table One.
Table One

The emotional valence of the child’s attitude toward the analyst will be rated after the first minute and then subsequently whenever the rater believes there has been a change. Only one of the following may be chosen for each coding segment and should reflect predominant attitude at any moment where an apparent change has occurred.

(1) **Friendly**—the child engages the analyst in a pleasant, amicable fashion, indicating in words and actions that he is well disposed toward this adult.

(2) **Wary**—the child appears uncomfortable and cautious with the analyst, e.g., often keeping the analyst in view while engaged in an activity or, unable to sustain interaction with the analyst.

(3) **Withdrawn**—the child is unable to engage with the analyst at all, may need to keep physical distance from him/her; may be immobile and unable to play.

(4) **Provocative**—the child teases or attacks the analyst as if to invoke an angry retaliation. These words or actions are often accompanied by the child’s excitement and pleasure to be distinguished from characteristics of the child being enraged.

(5) **Seductive**—the child engages in activities that demand or seek a response or praise, admiration or affection from the analyst. These activities may or may not be accompanied by the child’s excitement or obvious sexual references.

(6) **Enraged**—the child expresses in words or actions negative, aggressive feelings toward the analyst with no implied or explicit response sought. To be distinguished from attacks which seem to be provocative in nature.

(7) **Detached**—the child plays or involves himself in activities while showing no interest or overt concern about the presence or level of involvement of the analyst in those activities.

(8) **Domineering**—the child attempts to subjugate analyst with insistent demands and orders; here, bossing will be the child’s attempt to control the analyst’s behavior and the activities that occur between them, rather than an effort to provoke a response other than compliance from the analyst.
Procedures

Ratings for Child's Attitude Toward Analyst were coded by the same seven raters on the same 12 videotaped play sessions described in Chapter Seven. As described earlier, raters were instructed to code for this domain in the same period of time in which they were also coding observations in the domains of Global Categories of State, Levels of Emotional Expressivity, Child's Interaction with Analyst, and Analyst's Interaction with Child (the latter two domains to be described in the following chapter).

The data was assessed using the same techniques described in Chapter 7. In order to describe the mean ratings for each category of Child's Attitude Toward Analyst for the 12 children, ratings of one rater per child were selected at random. The proportion of time a particular category was used is expressed in Table Two as the mean proportion for the 12 children. The results of the multiple observer ratings for the 12 tapes are presented as the mean intraclass r for all available combinations of rater pairs.

Results

The mean proportions of occurrence for the different categories in the domain of Child's Attitude Toward Analyst are shown in Table One. The predominant rating for the 12 children was "friendly".
Table Two

Mean Proportions for Functional Areas

\[ n=12 \]

<table>
<thead>
<tr>
<th>Attitude Toward Analyst</th>
<th>Mean</th>
<th>S.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Friendly</td>
<td>.70</td>
<td>.32</td>
</tr>
<tr>
<td>2. Wary</td>
<td>.06</td>
<td>.14</td>
</tr>
<tr>
<td>3. Withdrawn</td>
<td>.09</td>
<td>.28</td>
</tr>
<tr>
<td>4. Provocative</td>
<td>.08</td>
<td>.23</td>
</tr>
<tr>
<td>5. Seductive</td>
<td>.01</td>
<td>.03</td>
</tr>
<tr>
<td>6. Enraged</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>7. Detached</td>
<td>.13</td>
<td>.26</td>
</tr>
<tr>
<td>8. Domineering</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

The mean intraclass \( r \), indicating agreement between observers, for the domain of Child's Attitude Toward Analyst is shown in Table Three.

Table Three

Mean Intraclass \( r \) values for Rater Pairs

\[ n=21 \]

<table>
<thead>
<tr>
<th>Child's Attitude Toward Analyst</th>
<th>Mean Intraclass ( r )</th>
<th>S.D.</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>.77</td>
<td>.18</td>
<td>.95-.23</td>
</tr>
</tbody>
</table>
Discussion

As with the other scales comprising the overall instrument, raters from different disciplines were able to agree on the child’s attitude toward the analyst. There was, however, an overall lower mean than was found for previous scales. Part of the variability contributing to a lower overall agreement relates to the predominance of one category, "friendly," in the overall ratings. Because one category accounted for most of the ratings during a session, small differences in the number of other categories rated tend to affect the intraclass $r$ more. Also, as with the basic dimensions of state and emotional expressivity, the infrequent occurrence of some of the categories means that the full range of the scale has not been adequately tested and will require the application to a broader range of children.

Because there were no, or only minimal ratings in the categories of: enraged; seductive; or, domineering, these three categories could not be validated. The question remains as to whether the narrow distribution of ratings is an artifact of the choice of the categories themselves or to do with other factors. These might include the limitations of the sample population, that is, the choice of well-functioning nursery school children may have limited the range of attitudes to the analyst interviewer. In addition, the limited number of sessions with the analyst may not afford the opportunity to observe a fuller range of possible attitudes the interviewer that might be revealed/expressed in more numerous contacts over a longer period of time as would occur in the context of a clinical analysis. This question might be addressed by comparing the ratings of initial interviews with
children who are entering psychoanalytic treatment with ratings of sessions that occur at various later phases of the treatment. Given familiarity with both the research sample and clinical experience with children in the same age range, it seems likely that the less frequently rated categories in the research sample would achieve equally good levels of interobserver reliability if tested with a broader sample population. Specifically, a clinically referred population that included conduct disordered, inhibited, and impulse-ridden children would offer a better opportunity to test these remaining categories. For this group as well, it would be important to compare the ratings of initial sessions with those that occur later in treatment. This additional data would allow for the examination of the phenomena surrounding the child’s first approach to the analyst shed light on the common and dissimilar defensive characteristics employed by children of differing diagnostic categories in the opening phase of treatment.
CHAPTER NINE
INTERACTION BETWEEN CHILD AND ANALYST

Introduction

The scheme for rating the child’s interaction with the analyst was developed in order to complete the stated intent of capturing the salient domains of the child’s presentation in play sessions as seen through the eyes of the analyst observer. Where the ratings described in Chapters Six through Eight attempt to capture thematic content, emotional presentation, and general attitudes toward the analyst, the rating scheme described in this chapter addresses the questions: (1) How does the child actually use the analyst during the course of a play session; (2) What role(s) does the analyst assume with the child; and, (3) Can independent raters agree on their observations.

While the ratings of Arousal, Mobility and Expressivity and Child’s Attitude reflect observers’ impressions of the child’s general emotional presentation in the presence of the analyst, observations of what occurs between the child and analyst reveals dimensions of the ways in which the relationship is enacted in the context of the play session. In conjunction with the thematic content of the child’s play narratives, the analyst will develop inferences about the internal status of affects and object relationships on the basis of a combination of observations of the surface markers associated with emotions and attitudes and the behavioral modes of interacting. In fact, the examination of characteristics in each of these domains may reveal consistencies and inconsistencies in the child’s
presentation that are more indicative of the current nature of the child's inner life than observations of characteristics of any one dimension on its own.

Design

The same design employed in Chapters Seven and Eight was employed in the current study.

Sample

The same sample described in Chapter Seven was used to carry out the study presented in the current chapter.

Materials

The initial approach taken to developing the rating scheme for child-analyst interaction was to attend to the behavioral details of the child's relationship to the analyst. This first area of focus centered on: (1) the child's actual physical proximity to the analyst as one gauge of the child's comfort and or response to being in the room with the analyst and changes over the course of the interview and, (2) the child's gaze and bodily orientation to the analyst as markers of non-verbal attempts to engage with or avoid direct engagement with the analyst and changes over time. With these goals in mind, two scales were generated and are presented in Table One.
Table One

1. **Proximity to Analyst**

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-3</td>
<td>very close</td>
</tr>
<tr>
<td></td>
<td>(touching or almost touching)</td>
</tr>
<tr>
<td>1</td>
<td>close</td>
</tr>
<tr>
<td></td>
<td>(within arms reach)</td>
</tr>
<tr>
<td>2</td>
<td>distant</td>
</tr>
<tr>
<td></td>
<td>(1/3 of room or more away)</td>
</tr>
<tr>
<td>3</td>
<td>very distant</td>
</tr>
<tr>
<td></td>
<td>(2/3 or more away of room away)</td>
</tr>
</tbody>
</table>

2. **Orientations to Analyst**

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>gaze (with or without body) directed toward analyst</td>
</tr>
<tr>
<td>2</td>
<td>body directed toward analyst</td>
</tr>
<tr>
<td>3</td>
<td>gaze and body directed away from analyst</td>
</tr>
<tr>
<td>4</td>
<td>unable to determine</td>
</tr>
</tbody>
</table>

In this scheme, the close look at physical characteristics of the child’s interaction was followed by an attempt to characterize the ways in which the child seeks a direct response from the analyst by employing verbal or non-verbal means in the context of a given play narrative or other activity during the course of the interview. Similarly, general categories were developed to assess the analyst’s degree of involvement with the child as well as examining the specific ways of engaging with the child when verbal modes were employed. The following ratings were generated for assessing observations in these areas and are shown in Table Two.
Table Two

Degree to which child asks for a response from analyst

0= presumably not (e.g. child plays quietly, either turned toward or away from analyst)
1= uses non-verbal means of seeking a response (e.g. extends a toy, looks at analyst, directs analyst's attention with gestures)
2= uses verbal means of seeking a response (e.g. asks analyst question, directs analyst's attention with words)
3= uses both verbal and non-verbal means of seeking a response

Analyst's Interaction with Child

1. Levels
0= presumably not involved (e.g. absently looks away)
1= attentive/listening/making some comments to child
2= seeking a response (e.g. asks child questions, starts a game)

2. Types
If #1 is greater than 0, is the interaction predominantly
(a) verbal, (b) non-verbal, or (c) both verbal and non-verbal

3. Verbal involvement
If #2 is rated for verbal or both, characterize the types of verbal intervention employed by the analyst (more than one rating can be made per coding unit)

1= Initiating: asking questions, introducing topics through question or comment
2= Extending: adding new information to current topic (e.g. "and then what happened")
3= Maintaining: allowing for continuation of current topic by social responses, imitation, or repetition of what child has just said (e.g. "uh-huh", "yes", "I see")
4= Analytic gambits: (a) verbalizations of observations that have not yet been articulated by child (e.g. "you're very excited today"); (b) reflection on an assumed emotional state (e.g., "that must have been scary"); (c) interpretation or statement that makes a connection between events or feelings and material presented in the play

As with the initial versions of rating schemes developed for coding Arousal, Mobility and Expressivity and Child's Attitude Toward Analyst, this version of the ratings for Child-Analyst Interaction was informally tested in
discussions with the group of seven raters described in Chapters Seven and Eight. Three videotaped sessions that had been used for discussions with the panel of child analysts were presented to the group of raters. Each of the tapes were reviewed in five minute segments. Raters were asked to independently score for each of the dimensions described above on a minute by minute basis. Ratings were then compared and discussed.

Over the course of several meetings, several characteristics of the rating schemes became apparent. The level of agreement on ratings of child’s proximity to the analyst was very good at either ends of the scale. That is, when the child was either very close to the analyst or very far away, observers were able to agree on what they were observing. However, finer degrees of proximity were impossible to judge with any degree of inter-observer reliability. Raters attributed their difficulty in judging the less extreme distances between child and analyst to the limitations of camera angles and frequent changes in distance when the child was in motion within a given minute within the room. Similarly, raters said that they were usually unable to get a clear view on the videotape of the child’s gaze and that frequent, minor shifts of body position made clear determinations about whether the child’s body was fully directed away from or toward the analyst extremely difficult. As a result, the level of rater agreement about the child’s orientation to the analyst was very poor.

Raters also found that the scheme for coding specific characteristics of the child-analyst interaction did not articulate their observations. Inter-observer agreement about the child’s means of seeking a response from the analyst was poor and raters pointed out that the term "seeking or asking for a response from
the analyst" implied a latent wish or intent on the child’s part that they could not confirm with the data available from single play sessions. In addition, as the tapes were reviewed, it became clear that in any given minute, one might observe all of the listed verbal and non-verbal modes of interacting with the analyst. Raters were unable to make judgements of predominant modes and described coding in this domain as "guess-work."

The ratings for levels of the analyst's interaction with the child met with similarly disappointing results. While the agreement among raters for the analyst’s attentiveness or asking questions was good, the absence of any ratings of the analyst not being involved with the child, suggested that some form of involvement on the analyst’s part could be taken as a given. Similarly, the level of agreement about the analyst maintaining the child’s verbalizations through brief social responses was good, but not excellent. In the tapes viewed, there were few "analytic gambits" and the level of agreement about observations when they seemed to occur was poor. Raters described feeling the need to stretch their notions about the characteristics of the analysts' comments in order to make some judgements in this rating category out of concern that if the category existed and they didn’t record something then, they must be missing something.

In general, the group of raters felt that the coding scheme described above was far too segmented and detailed and that this level of observation was not consistent with their experience of making observations in a clinical setting. In addition, concern was expressed about the number of domains that would constitute the final version of the rating instrument as a whole. It was argued that the more domains there were to be rated, the greater the risk of raters flagging in
their efforts. Rater fatigue might occur if the coding simply took too long to complete and if the coding process and the material to be coded departed too far from familiar modes of clinical observation. An alternative rating scheme was developed in which these problems were addressed by reducing the number of characteristics to be coded. Using two additional videotaped play sessions raters were again asked to code and discuss the following categorical ratings presented in Table Three.

**Table Three**

**Child Interaction with Analyst**

1. engaged (with words, action, gaze, or any combination of same)
2. non-engaged (child is turned away from the analyst and silent)

**Analyst Interaction with Child**

1. analyst is quiet
2. analyst asks direct question(s)
3. analyst makes non-analytic statement
4. analyst makes analytic comment (e.g. verbalization of emotions, reflection, interpretation)
5. analyst employs sounds whose intent is to maintain communication or signal a verbal response to child
6. analyst directs non-verbal communication toward the child (e.g. head-nodding, hand motions, etc.)

The response to this rating scheme were similar to the previous version. While raters found this version less time consuming, concerns about the extent to which it captured salient aspects of the child's use of the analyst and the analyst's involvement with the child in the context of a play session remained. In the attempt to examine the details of the child-analyst interaction, it became clear that these versions of the rating instrument had moved away from the intended focus.
of describing the interaction that emerges during the course of the child’s play in the presence of the analyst.

Final Version

With the previous versions of the instrument in mind, further review of videotaped sessions by the investigator led to the development of a very different approach to the rating of child-analyst interaction. In this version, the categories are defined in broader terms of the roles that are generally assigned the analyst by the child and the roles assumed by the analyst during the course of the play interview. These more general categories included the child’s invitation to the analyst to assume a specific role within the play narrative; to serve as an audience for the child’s activities; the child turning to the analyst as a source of information (e.g., asking the analyst specific questions about topics involved in the play scenario); the child asks for permission to engage in certain activities or use different materials in the room; experiences the analyst as an interference to the unfolding play (e.g., ignores or rejects the analyst’s comments, questions, or suggestions); or, engages the analyst primarily as a figure outside of any specific play scenario (e.g. asking questions about the analyst, directing the analyst’s attention to characteristics of the child himself or of the room or of aspects of daily life). Similarly, the approach to the categories describing the roles assumed by the analyst attempted to capture the convergence and divergence between the analyst’s presentation and the role assigned by the child as well as acting as an assessment of the role assumed by the analyst that seemed independent of explicit directions from the child. These categories derived from varied presentations that
had been observed in the videotapes of the research hours as well from experience of roles commonly assumed by the analyst in the context of on-going treatment settings. The following version was used in informal group review and discussion of two more videotaped play sessions and is shown in Table Four.

Table Four

Child-Analyst Interaction

A. **Child engages analyst as:**

1= a participant in the play (e.g. assigning the analyst the role of a particular character, as helper in setting the scene, etc.,)
2= an audience or observer
3= a source of knowledge
4= a source of limits (e.g. checking with the analyst about what activities are acceptable or allowed)
5= an interference to the flow of the play/narrative (e.g. does the child interrupt or ignore the comments or actions of the analyst)
6= a prop with the play (e.g. does the child use the body of the analyst as a site for attacks, climbing, tickling, etc.,)
7= focus of activities outside of any narrative content (does the child use the analyst for assistance in reaching for play items, constructing, drawing, etc.,)
8= other ______________________________

B. **Analyst assumes the role of:**

1= quiet observer
2= observer who asks questions or makes statements about the child’s activities
3= participant in a role or activity initiated by the child
4= participant in a role or activity initiated by the analyst
5= other ______________________________

The raters found this version of the rating instrument far more appropriate to the task of coding observations of **Child- Analyst Interaction** during the
informal review of the videotaped play sessions. In these group coding sessions, raters were asked to make judgements in both domains after the first minute and then when any changes occurred. The videotape was stopped at five minute intervals and ratings were compared and discussed. The levels of agreement among raters was very good. Unlike the previous versions, there was little if any confusion about the descriptors or about their applicability to the phenomena observed in the play sessions. In addition, compared to other versions of the instrument, raters reported a greater ease in making decisions both about initial judgements and subsequent changes that occurred over the course of the videotaped session. The amount of time required to complete the ratings was also reduced from previous versions. This version of the coding scheme for Child-Analyst Interaction was included in the final set of instruments that was tested for inter-observer reliability using 12 videotaped play sessions as described in Chapters Seven and Eight.

Procedures

Ratings for the two domains included in Child-Analyst Interaction were coded by the same seven raters on the same 12 videotaped play sessions described in Chapters Seven and Eight. As described, raters were instructed to code for these domains in the same time period in which they coded Global Categories of State, Levels of Emotional Expressivity, and Child’s Attitude Toward Analyst. The same techniques for assessing the data were employed for all of the coding domains. That is, the mean ratings for each category of Child-Analyst Interaction for the 12 children were described by selecting ratings of one rater per
child were selected at random. The proportion of time a particular category was used is expressed in Table Five as the mean proportion for the 12 children. The results of the multiple observer ratings for the 12 tapes are presented as the mean intraclass r for all available combinations of rater pairs.

Results

The mean proportions of occurrence for the different categories in the domains of Child-Analyst Interaction are shown in Table Five. Of the ratings for categories of roles the child assigned to the analyst, "audience" and "participant in play" were predominant. The predominant rating for categories of roles assumed by the analyst, "observer who asks questions" was predominant. It is not surprising that in interviews conducted by child analysts that the roles of "quiet observer" and "participant in role assigned by child" together constituted the second largest proportion of observations while roles initiated by the analyst were minimal.
Table Five
Mean Proportions for Functional Areas

n=12

<table>
<thead>
<tr>
<th>Child Engages Analyst As:</th>
<th>Mean</th>
<th>S.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Participant in play</td>
<td>.23</td>
<td>.24</td>
</tr>
<tr>
<td>2. Audience</td>
<td>.44</td>
<td>.24</td>
</tr>
<tr>
<td>3. Source of knowledge</td>
<td>.05</td>
<td>.09</td>
</tr>
<tr>
<td>4. Source of limits</td>
<td>.01</td>
<td>.02</td>
</tr>
<tr>
<td>5. Interference</td>
<td>.06</td>
<td>.08</td>
</tr>
<tr>
<td>6. Prop within play</td>
<td>.01</td>
<td>.03</td>
</tr>
<tr>
<td>7. Focus of activities outside play</td>
<td>.04</td>
<td>.05</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Analyst Assumes Role Of:</th>
<th>Mean</th>
<th>S.D.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Quiet observer</td>
<td>.21</td>
<td>.25</td>
</tr>
<tr>
<td>2. Observer, asking questions</td>
<td>.53</td>
<td>.29</td>
</tr>
<tr>
<td>3. Participant in role assigned by child</td>
<td>.25</td>
<td>.18</td>
</tr>
<tr>
<td>4. Participant in role initiated by analyst</td>
<td>.08</td>
<td>.16</td>
</tr>
</tbody>
</table>
The mean intraclass $r$, indicating agreement between observers, for the domains of Child-Analyst Interaction is shown in Table Six.

### Table Six

Mean Intraclass $r$ Values for Rater Pairs

$n=21$

<table>
<thead>
<tr>
<th></th>
<th>Mean Intraclass $r$</th>
<th>S.D.</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child-Analyst Interaction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child engages analyst as:</td>
<td>.49</td>
<td>.25</td>
<td>.87-.11</td>
</tr>
<tr>
<td>Analyst assumes role of:</td>
<td>.78</td>
<td>.17</td>
<td>.90-.29</td>
</tr>
</tbody>
</table>

**Discussion**

While raters from different disciplines were able to reach an acceptable level of reliability for coding the ways in which the analyst engaged with the child, the level of reliability for the ways in which the child engaged the analyst was significantly lower. In fact, of all of the rating scales, this particular domain had the lowest level of inter-observer agreement. Before turning attention to this discrepancy, it is important to examine the domain of "analyst assumes role of:" first.

While the intraclass $r$ values were generally in the excellent range (above 0.75), among the different rater pairs, the range did include values well below 0.50 indicating poorer levels of agreement. Here, there are several ways of
understanding the variability. First, the raters with the greatest amount of clinical experience with children tended to have higher levels of agreement. Second, in follow-up discussions with the raters, the greatest confusion reported by the less experienced clinicians had to do with the difference between observations of the analyst who observed and asked questions and the analyst who assumed a role assigned by the child. Several raters commented that at times, if for example the analyst asked questions about characters in the play while holding a doll figure that had been assigned to them, they coded for "participant in role assigned by child" rather than "observer who asks questions." This confusion did not exist for more experienced clinicians who understood the former role as determined by the child’s explicit instructions to the analyst about the actions and characteristics of dialogue between the play figures. In addition, the raters suggested that in the training sessions for this final version of the Child-Analyst Interaction instrument, they had been able to take advantage of the discussions that followed the five minute rating segments for clarifying coding in subsequent tape segments. They were less confident and more confused in this particular area at times, when they were coding on their own. Both the results of the study of inter-observer reliability and the follow-up discussion with the raters suggested that further clarification of these difference in the training sessions and in the written coding instructions would reduce the range of reliability between rater pairs.

With regard to the much poorer level of reliability achieved for "child engages analyst as:" several points need to be addressed. While the general level of inter-observer agreement was relatively low, the rater pairs who had excellent levels of agreement (e.g. 0.87) also had the greatest amount of clinical experience
with young children. In the follow-up discussions with the raters it was clear that there was significant confusion between "participant in the play" and "audience." Several of the raters reported that at times it was unclear that the child was "engaging" the analyst as an audience or observer and that they were reluctant to code for this simply because the analyst was less involved in the play itself in the play at any given moment. Alternatively, they described periods in the rated sessions in which the child had assigned the analyst a very limited role in the play narrative that would then be followed by sporadic, minimal or, no further instructions. Between the child’s specific instructions for action or dialogue, raters at times would tend to code the analyst’s role as "audience, observer." It would seem that the raters’ confusion about the level of involvement in a specific role within the child’s play is not so dissimilar to the clinical experience with young children. In this particular domain, the clinical experience of the rater may indeed have implications for the ability to "read" how deeply or consistently the child is involving the analyst in the narrative of imaginative play. Further discussion in the training sessions for raters of the specific ways in which the child assigns a role of a particular character in the play to the analyst or as a helper in setting the scene as well as clarifying the distinction between active participation in the play versus being an onlooker or left out of the play will be required in order to improve the level of inter-observer reliability in this domain.

There are several additional factors that bear discussion. It is striking that most of the children engaged the analyst as an audience. This observation can be considered in two ways: (1) the child’s relative unfamiliarity with the analyst is reflected in the reliance on the self for assigning roles and the action of the play;
the analyst’s assumption of a figure who primarily observes sets the stage for the child’s capacity for suspension of reality as described in Chapter Three. That is, the child is able to use the analyst as a constant presence, as an anchor in reality that supports and even allows the child to suspend reality and develop and engage in play scenarios whose source are the conscious derivatives of unconscious fantasies, wishes and concerns. Similarly, the analysts’ predominant role was that of quiet observer or observer who asked some clarifying questions. In this regard, the "role" was not specifically assigned by the child but chosen by the analysts. This quiet, observing stance is consistent with psychoanalytic notions about the potential use to the child of being the quiet presence of reality and thus supporting the child’s capacity for, and comfort in suspending reality, as well the assumption that the less the analyst contributes of his own ideas about the content or nature of activities that occur in the interview, the more one will learn about the contributions of the child’s inner life and capacities for representing it.

While this study does not allow for conclusions to be drawn about the specific correlation between the predominant observer role, role of the analyst and the predominant audience role preferred by the child, it does suggest future approaches to addressing the nature of the relationship between the role assigned by the child and the role typically chosen by the interviewing analyst. With regard to the question of familiarity, the use of the measures developed at different phases of a child analytic treatment would allow for a tracking of any changes that might or might not occur in the context of a deepening of the relationship between child and analyst. In another study, analysts might be instructed to vary then extent and type of engagement with the child (e.g., asking more questions, introducing topics
for discussion and play) at certain points in a session or the series of research sessions in order to examine more closely the question of the relationship between degree and type of analyst’s engagement and the child's production of imaginative play scenarios as well as increasing or decreasing his specific involvement of the analyst in roles assigned both in and out of the play narrative.
CHAPTER TEN

SUMMARY AND CONCLUSIONS

Child psychoanalytic theories of development and of therapy are based in large part on the information derived from observations within the context of clinical interviews with individual children brought for treatment. Since the very first years of history of child psychoanalysis, these interviews have had a relatively similar format, regardless of differences among analysts in personal or theoretical orientation. A vast body of descriptive and prescriptive information, mostly in the context of case histories, exists about the nature of these interviews.

The child psychoanalytic interview constitutes the basic method for the psychoanalyst's exploration of children's cognitive abilities (language, reality testing, motor skills); emotional state; mode or quality of social relating; internal representations of themselves, others and important experiences; and salient concerns (anxieties, worries, interests, desires, etc.). Analysts use the unfolding of children's plays, shifts between one type or content of play and another, the ways children direct themselves towards or use the analyst, and other observations to derive an impression of children's functioning in various domains. Also, these types of observations form the empirical basis for theories, e.g. concerning the nature of children's regulation of aggression, self-esteem, and level of instinctual organization.

Given the centrality of the child analytically informed interview, there has been a surprising paucity of empirical and systematic research on this methodology.
for studying children. There have been few attempts to systematically examine the constituent aspects of observations within the child analytic framework. The attempts -- described in Chapters One, Two, and Three -- that have been made have suffered from the absence of reliable measures of data that could be recorded with a minimum of filtering by the primary observer. That is, no matter how careful and detailed the process notes of any given analytic session, the recording of what occurs between child and analyst is subject to revision and victim to the limitations of individual memory on the part of the recording clinician. The notes on sessions provided by the interviewer may usefully convey important information about the child's behavior and the analyst's feelings and observations; but such narrative reports, written after sessions are completed, are only proxies for the "raw data" of the interviews. The actual "raw data" --- what actually occurs during child analytic interviews --- has not been available for review by others. The goal of this thesis was to develop methods to allow for obtaining and exploring the raw data of child analytic interviews.

This thesis consisted of two series of studies concerning the organization of play of four to six year old children as seen from the perspective of child psychoanalysis. The primary empirical data of these studies consisted of play interviews, conducted by child psychoanalysts, which were videotaped for inter-observer assessment. Twenty children were studied in three 45 minute sessions by psychoanalysts who had no prior information concerning the child's family, personal functioning or history.

In the first series of studies, the videotapes of play sessions were judged by a panel of five, experienced child psychoanalysts; the analysts discussed the
tapes and arrived at consensual judgments concerning (a) the major characteristics of the child’s behavior (language, activity levels, imagination, interaction between child and analyst, etc.); (b) representations of libidinal themes and (c) representations of aggressive themes. This series of studies identified features of play sessions that could be operationalized and reliably scored.

In the second series of studies, the videotaped interviews were scored, using instruments which assessed functioning in the following domains: thematic content, emotional presentation, attitude towards the analyst, and interactions with the analyst.

Taken together, the two series of studies provided specific information about the organization of young children’s play, as seen in analytically oriented interviews, as well as methodology that can be extended in further research in this area.

Major methodological findings included the following:

(1) Experienced child psychoanalysts were able to conduct play interviews that provided the "texture" and types of information which they associated with child analytically informed diagnostic sessions, in the context of a research protocol characterized by: (a) videotaping of sessions; (b) an analytic interviewer who is "blind" to information about the child; and (c) limitation in number of sessions. The child psychoanalysts who performed the interviews believed that the research interviews were similar to those they normally conduct with children brought for clinical assessment because of emotional difficulties, i.e. the interviews
satisfied their criteria of being "analytically informed." The panel of judges concurred with the interviewers' impressions that these interviews represented examples of analytically informed interviews.

(2) The videotapes of the play interviews provided a record of what occurred between children and analysts in a way that can be scrutinized closely and repeatedly.

(3) Experienced child analysts were able to arrive at consensus about general dimensions or characteristics of play interviews and categories for describing representations of libidinal and aggressive themes.

(4) The clinically derived characteristics and themes, based on the judgments of the panel of analysts, were transformable into specific, operationally defined categories of observations.

(5) Instruments were developed for coding the occurrence of observable phenomena in the domains explicated by the panel; these instruments achieved good to excellent levels of inter-observer agreement (as assessed by good to excellent intraclass r values).

Using the methods developed in these studies, important findings emerged concerning the organization of young children's play in analytically informed interviews.
(1) As in clinically oriented interviews, the research interviews provided the children with the opportunity for presenting and elaborating varied themes of play, modes of communicating and interacting with the analyst.

(2) There were considerable, inter-child differences in the children's style of relating to the analytic interviewer and playing with the consistently available materials; that is, children shaped the content and process of the interviews.

(3) There were changes in mode of relating and nature of themes and representations across the three interviews, with the emergence of relationship between child and analyst.

(4) Interviewers were able to engage the children in affectively rich and anxiety filled topics and the children tended to relate to the unfamiliar interviewers increasing in a manner that can be characterized and formally assessed as "friendly."

(5) Imaginative play narratives unfolded in the course of interviews which revealed the children's representations of the social world, history, and internal experiences related to affiliative and hostile urges.

(6) Assessment of children's play interviews revealed individual differences in representations of highly charged themes (such as destructive attacks and other
forms of hostile aggression) as well as phase-related common concerns (e.g. power, size, and relative capacities).

(7) Across the twenty children, there were consistent demonstrations of the ability to demarcate reality and fantasy through explicit and verbal cues ("let’s pretend") and non-verbal or implicit markers (scene setting, directions to the analyst).

(8) The structure of the children’s play, as revealed by the objective ratings of specific presentations (themes, relationships) within sessions, was consistent with aspects of psychoanalytic theory of the Oedipal phase which emphasizes the importance of curiosity about the child’s own body and about his role in familial and other inter-personal relationships; concerns about physical integrity and danger; moral judgments and moral affects (guilt and shame); and the child’s recognition and representation of his own aggressive, loving and mixed feelings; and concern about and pleasure in being effective and competent.

The methodology derived from the studies in this thesis can be extended to various critical areas of developmental and therapeutic research, including:

(1) Studies on normal development of children’s play and the internal mental processes which underlie and shape playing (memory, language, imagination, reality testing, social relationships, self esteem).
(2) The impact of particular types of experiences as revealed in the structure and content of children's play, including normative experiences (such as the birth of a sibling, brief separations from parents) and more dramatic experiences (such as medical illness, surgery, parental discord and divorce, exposure to violence, and abuse).

(3) The ways in which various mental, behavioral and developmental disorders are revealed in psychoanalytically informed interviews (e.g. alterations in activity level and representations of aggression in the play of children with attentional and disruptive disorders; restriction of range of themes in the play of obsessive children; portrayals of danger and use of the interviewer in the play of overanxious children), and the impact of different therapeutic modalities on these features (e.g. changes brought about during administration of psychoactive medication).

(4) Examination of child interviews during the course of psychotherapy and psychoanalysis as an approach to understanding the process of therapy and the nature of therapeutic change (e.g. the progression and pattern of change in various theme areas or the ways in which the child relates to the analyst).

The studies in this thesis suffered from several types of limitations.

Children and families in the current study were limited in various ways: the children's age range was restricted; the children were from a university-
affiliated preschool program and thus from a restricted range of families (academic, intact, middle or higher social class, committed enough to their children to provide excellent and expensive care, etc.); and the children were essentially physically and emotionally healthy.

Further, the range of variables explored by these studies was also limited: no formal cognitive, language, adaptive or social measures were obtained for the children (e.g. IQ testing was not done); although parents were clinically interviewed, no systematic measures were obtained on family functioning or on children’s history and current behavior; and teachers were questioned in general about the children’s functioning and adaptation in nursery school but there were no systematic observations in the nursery school of children’s behavior nor were formal and reliable assessments obtained from the teachers.

In the future, it would be of considerable interest to address some of the population and methodological limitations. It would be very useful to use the methods of this thesis with a more diverse population of normal children drawn from a broader range of family and socio-economic backgrounds and ethnic groups, as well as with children (and parents) suffering from emotional and behavioral disorders. An expanded population would also test the generalizability of the methods and findings and, at the same time, allow for the assessment of behaviors that were of low frequency in the normal population. Future studies should employ other methods of assessment of children (cognitive testing, projective tests, etc.) and families (structured interviews, family observations, self-
report questionnaires) in conjunction with play interviews conducted by analysts who are blind to this additional information; such an approach would allow for investigation of confluence and divergence among different research and clinical methodologies. Finally, future studies might use the play interviews as "dependent variables" in an experimental paradigm in which independent variables (e.g. children's exposure to particular types of experiences, such as a frightening episode of television or a visit to the hospital) could be controlled or manipulated in degree; such studies would allow for more systematic assessment of the ways in which emotionally important events are reflected in the structure and content of children's play interviews.

For more than half a century, the psychoanalytically informed interview has provided the paradigm for psychotherapeutic interventions with children and for studying and qualitatively describing children's emotional development. The current studies point the way towards methodologies that will allow the psychoanalytic interview to be used as a valid and reliable psychological research method for studying children's development.
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APPENDIX I

FROM ENACTMENT TO PLAY TO DISCUSSION:
THE ANALYSIS OF A YOUNG GIRL
APPENDIX I

From Enactment to Play to Discussion:

The Analysis of a Young Girl

As described in Chapter Two, with an increasing capacity to test and
suspend reality, children in the oedipal phase of development are able to use
imaginative play as a means of creating an illusion of wish fulfillment and
invincible mastery. The push toward mastery combines with curiosity to arrive
at solutions in play in which theories about themselves in relation to others may
be tested and explored.

The suspension of reality that is essential for imaginative play presupposes
the child’s ability to tolerate substitutions for more direct and immediate
gratification of wishes and to rely instead on symbolic representations of impulses,
affects and fantasies. While recognizing that reality may not yield to his wishes
and aspirations, in the suspension of reality he does not need completely to
relinquish his exploration either. In the domain of play--between fantasy and
enactment--wishes and their consequences, conflicts and their solutions can be
manipulated or tried in multiple forms and configurations. When the child is able
to direct scenarios involving the displacements of his wishes and fears, he is no
longer simply the passive victim of the attendant dangers and disappointing
confrontation with reality. The experience of mastery in this transitional
phenomenon of play allows the child to titrate fantasy and real life--wishes can be
modified while reality limitations and age-appropriate capabilities can be better tolerated and appreciated.

Our assumption that imaginative play reflects and serves adaptation to inner fantasy and external reality is based in part on observations of young children in psychoanalytic treatment. The play activities, narratives, associated affects and uses of the analyst are the data we employ in our attempts to understand the child’s experiences and to facilitate new solutions to his or her conflicts. While this process is by no means a simple one, our task is even more complicated when the young patient steadfastly refuses to yield to a reality in which instinctual wishes will not be gratified immediately and is unable to play. When this occurs, there are few if any acceptable substitutes for or modification of the aims of instinctual urges. In this situation, the suspension of reality appears to be an inadequate substitute for the realization of intensely felt longings. Rather than pretending about wishes and consequences, conflicts and solutions, the child enacts them with the determination that the real objects of these longings will submit to his or her requirements. Unlike the young child who presents his or her multiple narratives in play, with the child who can’t play, the task of the analytic work is first to understand why not and then to facilitate a move from the child’s direct enactments to the use of pretend or imaginative play and from pretend to self-observation and perhaps discussion.

This material from the analysis of a five year old girl is presented to illustrate the role of play in the psychoanalytic treatment of a child as well as psychoanalytic methods of observing and formulating in a clinical context. This material also serves as an illustration of the psychoanalytic case report method that
has been used traditionally as the basis for the explication of theory and clinical phenomena.

The case material used in this chapter is drawn from the four times per week analysis of Emma, who began her three and one-half year treatment at the age of five. The analysis was conducted by the author who kept daily notes and wrote weekly summaries during the course of the analysis. Those notes and summaries serve as the basis for the following report and discussion.
CASE PRESENTATION

Background

At the time of referral Emma R. was 4 years, 8 months old. Mrs. R. complained that Emma was becoming "uncontrollably angry" and that every day began with a battle over the clothes she would wear and the food she would eat. She criticized almost everything her mother did and alternated between shouting that she hated mother and that mother hated her. She could not bear to see her sister Sara, who was 7 years older, talking with her mother and insisted bitterly that Sara was the favorite and had the best of everything. Emma's provocative behavior extended to peeling wallpaper and paint in the house, stealing, and swearing. In addition, while achieving bowel control at 2 years, Emma was not dry during the day until 3 1/2 and was still in diapers at night when referred for treatment. She was afraid to go to the bathroom on her own and frequently stained her underpants. Emma was also fearful of walking unaccompanied from room to room in the house, had difficulty getting to sleep, and had frequent nightmares. According to her mother, when Emma was not battling, she demanded close physical attention and was at peace only when curled up in her mother's lap, sucking her thumb. The mother was desperate, feeling that there was little she could do to please her daughter.

Emma's parents separated when she was 4 years old. Mrs. R. had been desperate to have this second child "before it was too late" and gave birth to Emma when she was 40 years old. Mrs. R. described the wish for this second child both as an attempt to save her failing marriage and as a "selfish act," independent of the status of the marriage. At the time she became pregnant, Mrs.
R. claims her husband was drinking heavily and that they argued frequently. According to her account, when she announced the pregnancy, Mr. R. encouraged her to terminate it. Subsequently, Mrs. R. felt she received no emotional support from her husband. She became depressed and withdrawn during Emma's second year and relied on a series of au pair girls to take over much of her care. Despite his earlier attitudes to the pregnancy and early infancy, both parents reported that around the time of Mrs. R.'s depression, the father became very involved with Emma.

As the marriage deteriorated, Mr. R.'s devotion to Emma increased. The mother described father and Emma as "inseparable." The father was indulgent with Emma, but his handling was inconsistent. Mrs. R. claimed that Emma rarely had heard the word "no" in her first 4 years. Discipline, she said, was the exclusive domain of her husband, as she had hoped this would reduce the ever-increasing marital battles. Mr. R.'s reprimands, however, invariably dealt with Emma's messiness, and at these times he could be harsh, sometimes shaking her violently. For example, it was common at mealtimes for Emma to sit on her father's lap and eat off of his plate. However, when she would spill something onto him, Mr. R. would become enraged, shout at her, and put her down roughly.

In addition, Mr. R. became particularly distressed when the family dog urinated or defecated indoors. On such occasions he shouted and kicked the dog while Emma cowered, in tears. The mother claims that these outbursts became more frequent as his drinking increased. While acknowledging his tendency toward fastidiousness, Mr. R. reported that tension in the home resulted from his withdrawal from the marriage and denied a drinking problem.
Following the separation, Mr. R. saw his children almost every week during the acrimonious separation and divorce. They frequently spent time with his steady girlfriend whom he subsequently married.

Emma’s relationship with Sara was fraught with jealousy and insecurity. The rivalry went both ways. Sara resented the fact that Emma was their father’s favorite and complained of being left out and ignored during their visits. The father readily acknowledged his preference for Emma, describing her as the "perfect companion" whom he loved to "cuddle and pamper." Sara taunted and denigrated Emma, viciously parading her own closeness with their mother, and teasing her with her superior sexual knowledge. While the mother accepted that Emma’s feeling of being left out was justified, she persisted in demonstrating to Emma that her older sister was preferred.

At the start of the treatment, Mrs. R.’s attempts to set limits with Emma took the form of polite, restrained appeals to this 5 year old’s sense of decency and propriety. Emma’s responses to these appeals were anything but proper. At mealtimes, a request from the mother to sit at the table was often met with an angry "No!" and a piece of food being hurled at her. Mrs. R. tried to mollify her younger daughter by acceding to her demands. In one instance, Emma came down to breakfast and complained that she wanted butter on her toast. The mother sensed her battling mood and immediately buttered the toast. Emma threw the toast down and yelled that there was not enough butter. She then told her mother that there was not enough cereal in her bowl. When Mrs. R. put in a little more, Emma bitterly complained that there was now too much.
Treatment

When Emma and I met in the waiting room on the day of our first session she peered at me from behind her mother's skirt. Her thick, long, dark hair framed bright brown eyes, a pert nose, and an impish smile. Her small but sturdy-looking body was dressed neatly in a school uniform. She shyly insisted on her mother's presence in the room on the first day and remained in her lap for most of the hour. She responded to questions about school and favorite playthings by nestling further into mother's bosom and demanded, "You tell him, Mommy." Mrs. R. told me about Emma's favorite doll at home and in a quiet exasperated voice tried to coax her daughter to speak for herself. With every angry refusal, Emma gave me a sidelong glance, sucked her thumb, and pushed against her mother's body as she maneuvered for maximum contact. I introduced two animal puppets and began a discussion between them about how hard it is to talk with someone you do not know and how much nicer it feels to make sure that the mommy stays close. Emma looked up at her mother and smiled. However, she refused to take either of the offered puppets and again turned away. I began drawing and Emma joined me at the table and after many kisses and hugs allowed her mother to leave the room.

As Emma drew a picture of her sister, mother and herself she calmly told me about how she had seen her dog Sally run over by a truck; about a cat that had just died, and about her grandfather who had died as well. She pointed out that the mother figure in her drawing was missing hands: "They were chopped off." She quickly left the table and pulled open the door of a closet which housed a water tank. Emma exclaimed that the room might be flooded and then raced to
the window, told me with considerable anxiety that it was dark outside and that she hates nighttime because that is "when the witches try to kill me." I commented that she might be trying to figure out whether or not she was safe in the room when her mother was not with her. Emma began jumping and said, "I can jump very high. How high can you jump. I can jump higher than you." When I announced that we would be stopping, Emma grabbed a small girl doll figure and tore its clothes off complaining that the underpants would not come off. I told her that we would be able to play more the following day and Emma raced out of the room.

Enactment. The next day she confidently climbed the stairs up to our room, leading the way, and announced with a smile, "I don't need Mommy to come any more 'cause now I know you." Emma immediately returned to drawing "nighttime" by covering a sheet of paper with black crayon and told me again about the witches that wanted to kill her. Rather than elaborate on this idea, she grabbed a pencil, sprang to her feet, giggled and drew a "bottom" on the wall. She crossed it out and then erased it saying that someone might beat her up if they saw it. I commented that she might be afraid that I would be angry and Emma agreed. I added that it seemed as though she was having worries about being people becoming angry with her and about being safe. Instead of drawing on the walls, I suggested that we could talk and play about her thoughts and feelings. With nonchalance Emma informed me that she had come to see me for her worries and that her worry is that she hates herself. "Everybody hates me...
because I'm bad." For a moment she was subdued and nodded to my comment about how awful this must feel.

Her frenetic activity returned quickly, however, as she crumpled the drawing of nighttime and kicked it along the floor. Gleefully Emma described how she enjoyed getting her mother angry by calling her a fat pig so that her mother would chase her. "I like saying fuckee, fuckit, and stuff it up your nose. Sometimes I punch her boosies [breasts]--that what Sally calls them." I replied that I thought she was trying to figure out whether I too would get mad and have scary chasing games with her as well. At the end of this hour, Emma told me that I need not clean up and that I should rest. As she put the paper and crayons away, Emma turned to me and dreamily said, "You smell like my daddy."

In the waiting room Emma's angry attacks on mother were prominent. She often delayed coming to the playroom with tirades against Mrs. R. for not providing after school treats, for not holding her coat properly (placing it on a chair instead of keeping it in her lap) or failing to agree to buy a special gift on the way home from the clinic. These scenes often ended with a haggard, resigned expression on the mother's face and a softly spoken agreement to "discuss it later."

In the consulting room, Emma's frenetic pace continued as she alternated between drawing pictures of ghosts and witches, describing nightmares about monsters that attacked her, and demanding to take playroom materials home with her. In addition, she attempted to engage me in exciting activities and quickly became enraged and frightened when I continued to suggest that words take the place of actions.
In a typical early session, Emma giggled when she told me her secret of "pooping on the back steps [of her house]...Mommy thinks it's a dog... you won't tell, will you?" Before I could respond, Emma raced to the other side of the room and began peeling paint from the wall while looking at me with defiance and pleasure. I reminded her of the rule about peeling paint, etc., adding that she seemed to need to find out if her worry about my getting angry with her would come true. This oft repeated response to her provocations again had little effect on her actions. Emma ran across the room and poked me gently and repeatedly in the chest. As I moved away, she protested, "But I can touch you, I can!"

Words and attempts to introduce pretend play with puppets or family doll figures were no substitute for the exciting physical contact Emma sought in "real" action. Every intervention was met with an escalation in her provocative behavior and angry demands that I "shutup" until finally Emma’s fury turned to fear as she ran out of the room in search of her mother. The ghosts, witches and monsters that had filled her drawings had now filled the room and she again refused to return to her sessions without her mother.

For over a week, Emma used her mother as a safe haven that enabled her to continue to make provocative bids for intimate contact from me and to express her rage and frustration when these were not reciprocated. In one hour Emma again tried to make physical contact with me. When she approached with a felt pen poised for marking me, I stopped her and she burst into tears, yelling, "That's all you say is No, No, No. You're horrid, everybody hates me!" She climbed into her mother’s lap and sucked her thumb. While glaring at me, she asked if her mother would go with her to the waiting room to return a glass. Mrs. R.
suggested that she wait and with that Emma flew out of her mother’s arms onto
the floor where she wept. I commented on how awful she felt and added that
even when she was very angry with me, I still wanted to be her friend and help
her with her worries. Emma looked up at her mother and quietly said, "I want to
be his friend." She insisted that we play a "happy game" to get rid of the bad
feelings and taught me how to play her version of hide-and-seek. This game was
to be Emma’s first play sequence of the treatment. As I was to learn, for Emma,
what was play was never fully pretend but rather a mode of substituting an
unwanted aspect of reality with a slightly recrafted version. In each of the games
of hide and seek Emma instructed me to become upset about not finding her and
to become ecstatic when she finally announced where she was hiding. With this
response, Emma beamed, delighted with this momentary proof that I liked her; I
could again become the "good" man who smelled and looked like a daddy.

The reality this particular game sought to reshape had to do with the
comings and goings of Emma’s father which were experienced by her as
manifestations of his indifference and rejection. Hide-and-seek could not undo for
very long the sadness and rage Emma felt about her father. In the transference,
her buoyant response to the game was easily marred by the real interruptions of
what Emma called, "coming together as friends again." Following one of our
early hide-and-seek games, I reminded Emma that the following day was a day
that we did not meet. She exploded and yelled, "You’re a daddy! Your stupid
girlfriend. I’m not going to be your girlfriend and neither is Mommy!"

In spite of the ease with which she became enraged by the father-therapist
who defied her wishes, Emma’s longing for proofs of his love were powerful
enough for her to persevere in treatment. In addition to frequent comments about her anger with me and worries about ghosts seeking revenge, Emma's powerful wish for an exclusive intimate relationship with the father in the transference prompted her to dismiss mother from the treatment room once and for all. The game of hide-and-seek was Emma's way repairing the damage attendant to her rage when I would not allow exciting bodily contact and an alternative, but equally real form of gratification; proof that her longings and love were reciprocated. In the hours that followed, peaceful moments occurred when we played the game of hide and seek, when she sought my praise for drawings or as she leaned up against me while reporting something of her day in school. In one such session, when I agreed to remove a splinter from Emma's finger, she asked me to guess what it was thinking. I variously guessed, "It's angry, it's sad, it's scared." She quickly corrected me. "It loves you." Emma looked away smiling and said, "You're my daddy." Just as there was little pretend in the play about her loving feelings, Emma's aggression was as directly felt and expressed. When I announced the end of this particular session, Emma staggered around the room banging into me and with a scowl, tore pieces of foam padding from under the rug and threw them in my face.

The brief play scenarios portraying separations could not contain the wishes or yield the gratification that Emma demanded in reality. Her separations from father were a major source of pain and anxiety because they raised for her a crucial question that expressed the vulnerability of her self-esteem: how could she feel sufficiently valued and value herself when her objects found it so easy to turn from her? Her father's hellos and good-byes were out of her control, just as her
mother's withdrawal had been, and Emma was enraged by her helplessness and sadness. The transference of these feelings onto me was swift, and she saw the interruptions in our contact as rejections. She returned from any separation, whether Wednesdays, weekends, or holidays, in a foul mood.

In a session following a vacation during the latter part of the first year of treatment, Emma entered the room with a scowl on her face and imperiously commanded me to get things from her locker. When I wondered about a possible connection between her anger and our time apart, Emma told me to shut up. She continued her tirade by telling me how much she hated me and wished she could get a gun so that she could kill me and everyone else that I saw. After threatening to kick and punch me, Emma stood by the window glaring at me until she wrote me a note which she crumpled and threw at me. It said, "I hate you...I like you." I joined her at the window where we watched the birds outside. Emma said that she wished that a bird would land and that if we made sure it got enough food it would stay forever and eat. "Does this bird have a name?" I asked. "Yes. Happy Bird."

Emma continued to leave the treatment room in a mess but also began to elaborate on her concerns about separations in play; in this particular area words could begin to accompany and, in time, replace enactments. She initiated a series of games about sleeping that typically followed weekend breaks. Emma instructed me to be a "grumpy daddy" who repeatedly woke her with my snoring. In turn, she scolded me and finally threatened to punch me if I woke her again. "I'll show you. You kept me up all the other night!" In a rare moment, Emma allowed a comment 'outside of the game' about how awful it feels when we do not meet.
"Yes, I'll show you how it feels. See if you like it!" As Emma was able to express her frustration in the words, 'I'm getting even,' she could also occasionally talk directly about her unhappiness about difficult weekends and her wish for 'affinity' (her word for infinity) days together. In fact, it was only in the context of turning passive into active and seeking revenge within the play that the longings and hurt feelings could emerge so clearly. After one holiday Emma became the therapist, and I was the child. I was kicked out of our room for "a very long time" and was instructed to feel very sad. But then I looked into the room and discovered that over the holiday the therapist was feeding other children. "And then you cried and got really angry," Emma exclaimed. Later in the same session, Emma became a wolf who wanted to eat me up, keep me inside and take me home with her.

While Emma could briefly take on a fantasy role, her play did not afford her any distance from the intensity of her need for real excitement and gratification involving her body and physical contact with me. In fact, the limited number of characters she began to introduce served the function of enactment. In turn, these scenarios were short-lived; Emma would quickly discard the assumed role but not the action. She was unable to relinquish the excitement of a more direct expression of her fantasies and was infuriated when I limited her activities. Emma's immersion in her fantasies however, also made her feel vulnerable to the retaliation she expected from me as the object (in the transference) of both her excited, loving wishes and her enraged, aggressive ones. Emma could experience little if there was any distance between reality and fantasy or between her longings and fears. In time, it became more apparent that her sexually provocative behavior
simultaneously served as an enactment of wishes and as a defense against their
dangerous consequences.

Emma began initiating her sessions by sitting in a chair opposite me,
momentarily lifting her skirt, and giggling, or pointing out the latest bruises and
scrapes on her legs. She often responded to sympathetic comments about her
having some concerns about her body by dancing a jig or drawing pictures of
"beautiful women." With either activity, Emma repeatedly asked if I liked what
she had done. Anything short of a direct exclamation of my admiration was met
with an angry, "Just tell me!" or a sullen, "Never mind." In one such session
however, Emma became Godzilla, the giant who kills monsters. She tore paper
into small pieces and threw them on the floor and then suddenly turned toward me
and spat. I was stunned, angry, and attempted to control my voice as I told her
that spitting was not acceptable. I quickly added that I thought she was again
trying to make me angry. I had in mind continuing by saying that she needed to
see what would happen, but Emma interrupted and yelled, "I want you to get mad
at me and hurt me because you are awful!" She quickly emptied the contents of
the trash can and climbed in to protect herself from being bitten by the angry
snakes that now surrounded me. She sat in the trash can breathing heavily,
looking both frightened and furious. I reminded her that I wanted to be her friend
even when she was angry and said that she had been so worried that her scary
thoughts about being hurt would come true that she had to find out. As I began
to clean up the room, Emma got out of the trash can and on one of the rare
occasions in this first year of treatment began to help.
In the next hour, Emma again began Godzilla’s rampage in the room. I said that she was again showing me her anger, but that sometimes it was hard for her to remember that they were her angry feelings and not mine. Without a word, she abandoned Godzilla, and the exciting wish behind the fear of attack became clearer. She built a house out of chairs, pretended to go to sleep and then awoke with a start, saying that she had had a bad dream. "I dreamed that I married you and kissed you on the lips." As she lay by the heating vent, Emma quickly changed her story, and now it was the heating vent that kissed her. "It put its tongue in my mouth and sent fire through my body which came out of my bottom." When I suggested that this was both an exciting and scary dream, Emma leapt to her feet and reached her hand inside the back of her skirt and rubbed her anus. She extended her finger toward my face and with a smile insisted that I smell it. When I declined Emma pleaded, "Please, it smells very, very nice." As she began to cry, she added, "And it's so important." I told her that I could see how important it was to her and that it was as if she wanted to know whether I could really like her. In comparison to the intensity of her feelings, this response seemed to miss the poignancy of the moment. In retrospect, it seemed that Emma was at once trying to seduce me with the essence of how she felt about herself and perhaps trying to recapture a kind of intimacy that she knew from an earlier time in her life when the parents' care of her body and the exciting physical contact with father were experienced as expressions of their love.

As treatment proceeded, the openness of Emma’s wishes for physical intimacy and sexual excitement became a gauge of her feelings of worthlessness and reflected her attempts to undo the accompanying expectation of being unloved
and rejected. A history of inappropriate limit setting in the home and overstimulation in the form of exposure to parental nudity, father's seductive handling and open-door policy with his girlfriend seemed to have set the stage for this form of compensation. While work with the parents during the first 18 months of treatment significantly decreased their contributions to her overstimulation, the urgency of Emma's attempts to engage me in sexually exciting contact did not. She frequently invited me to look at her underpants, openly masturbated, and talked excitedly about "boosies," "hairy bottoms," and "men's things." Emma responded to my comments about her wish to have exciting times with me in order to feel that I liked her with disappointment and rage. However, a pattern began to emerge. When she stopped yelling at me to shut up and removed her hands from her ears, Emma frequently turned to brief play scenarios in which the characters' excited sexual activities were followed by frightening themes of bodily damage. For several months a game involving turtles made out of plasticine was typical. In this game Emma expressed her fantasy of sadistic intercourse as she placed the boy on top of the girl. Amidst excited laughter, she quickly began bashing the two together; careful that only the girl turtle "lost its body." Emma's laughter turned into nervous giggles as tail, legs and then eyes went flying in pieces across the room. The boy turtle remained intact. Instead of commenting on the link between her excited exhibitionistic, masturbatory behavior and longings for closeness, I began pointing out how frightened she became when she grew too excited. Highlighting this dilemma, in addition to the frustration that I would not respond to her seductive behavior, heightened Emma's conflicts about the direct expression and enactment of sexual impulses. While enactment did not disappear
entirely, by the end of the second year of treatment, sessions became dominated by elaborate, imaginative play.

Playing. In a move from direct action and immediate gratification, Emma could now introduce sustained and elaborate play scenarios. While she was capable of using displacement to express wishes and fears, Emma's control of the script and of our respective roles was absolute. Where she had previously pinned her self worth on the direct enactment of sexual and aggressive urges, Emma now immersed herself in the wish fulfillment and reversal of fortunes only possible in play. Her angry demands that I "shut up and get back in the game" reflected both her wish to control me in reality and her fear that anything I might introduce would contaminate the suspension of reality in which she now sought gratification and refuge from disappointment.

Concerns about her "castrated state" illustrated Emma's worries about the consequences of her exciting sexual wishes for intimacy and served as an explanation for her feelings of inadequacy and failure in procuring the object's love. Having a penis was a symbol of strength and control that would protect her from attack and damage. In one game Emma became a puppy who closely guarded a pencil which she referred to as her "special thing." I was instructed to make repeated attempts to steal this special thing as she slept, but each time the puppy awoke, growled, and frightened me away. Emma finally thwarted my attempts by placing the pencil between her legs, telling me she was hiding the special thing inside.
As Emma equated the penis with strength, we frequently played at being big, strong horses. Emma was not sure whether she wanted to be a girl or boy horse, but knew that she wanted to be the stronger of the two. I commented on the sexual differences, adding that sometimes girl horses feel awful that they don’t have what boys have and feel sad and angry. Emma asked me to repeat this and then gave an emphatic whinny, and nod of her head. Just after this, the Emma horse had a fall in which her leg was cut and bled. Emma quickly gave up her role of injured horse and instead became Popeye, the strongest man in the world.

At this time Mrs. R. reported that Emma was stealing pens and pencils, both at school and at home. Emma believed that somebody had stolen the one body part that would make her safe and whole and was determined to steal it back. Eventually she became able to express her feelings about her own body more directly. In one session, as she tried to hold water in her hands, Emma explained that it was escaping through gaps. I asked about these gaps, and Emma replied, "You know, where something’s missing, like here." She pointed to her genitals. In other sessions I was instructed to steal pencils. However, I always was caught and sent to prison. Emma’s explanation for the stealing was simple: in a whispered aside in the game, she said, "You don’t have one, and you want it so badly!" When she understood the link between her wish to repair the "gap" and the games of stealing pencils, thefts outside the session stopped.

Emma’s fear of being attacked and damaged continued as a central theme in her play, but she was no longer the helpless victim—I was. As the younger brother, I was fed and protected from snakes, lions, and tigers that wanted to eat us. Emma carried a big gun and was fearless as we made forays into the
dangerous woods. In this game I learned that if only I were bigger and had a gun like her, I needn’t be afraid.

Emma’s conviction that she would be safer and preferred if only she possessed a penis became an essential aspect of the transference as she learned that her father was going to remarry. Her wish for an exclusive intimate relationship with him was intensified, as were her fears of the consequences. In addition, concerns that she might also lose mother’s affection to another set the stage for defensive regression. These dilemmas were most apparent when Emma was to attend a party following our session. Here, while the enactment was not as dramatic, the intensity of her wishes and anxiety could not be contained in fantasy play alone. When she entered the room, Emma announced that she was going to change into her party dress. After removing her school clothes, she looked down at her underpants and smiled at me anxiously. With her dress on, Emma launched into a tirade about how silly boys are. She asked me to admire her dress but before I could say a word, angrily stated, "You don’t know about girls; you think they’re not as good as boys." Just as suddenly, Emma announced that the dress made her look like a prince. I suggested that she had become excited when she had taken off her other clothes and then worried that being a girl was more dangerous than being a boy. "Boys and princes have arrows that they shoot and they have snakes," she replied. She made thrusting motions with her arms to show me what arrows do. "Older girls know how to get away from the arrows which go inside and hurt." If she could not be a safe prince, Emma preferred to be a baby, avoiding danger because "They lie close to the ground and their mothers protect them."
The sexual fantasies and associated fears about her father became increasingly clear in Emma’s developing story about a puppy. She invented a game in which I was the owner who took the puppy (Emma) on walks in the park. As I talked to strangers in the park, the puppy pulled at the leash and threatened to run away. Emma asked me to repeat my comments about the puppy feeling left out and unlovable. Over the course of this game, the stranger with whom I talked became more specific. "Who is it?" I asked. "A man." "Is he safe?" "Yes, I mean no!" she replied. "He’s going to kidnap me and use his knife. He’ll put it in my, um, stomach!" The puppy then scurried off, and I was to lock all the doors to keep the man out. This evolved into a story about a servant girl who felt left out as she listened at the door of the king and queen’s bedroom. The servant girl heard screaming and then announced that the queen had died after being stabbed and that now she and the king would live happily ever after.

While Emma did not make an explicit connection between the themes in her imaginative play and her longings for her father, she did begin to monitor her own levels of excitement in an attempt to forestall anxiety. In a departure from stories about kings and queens, she ran around the bases inducing me to tag her out. Suddenly she stopped and said, "I’m getting too excited. I’d better stop before I get worried." At home, she no longer engaged her mother in battles; she had stopped having daytime fears and nightmares; and her bed-wetting had ceased. The school reported Emma’s greater ability to concentrate; they were pleased with her progress.

While her father’s remarriage exacerbated her feeling rejected and unlovable, Emma was able to distance herself from these feelings. She sadly
acknowledged that she could never marry her father because "I'm too young and anyway, I'm his daughter." She spoke in philosophical terms about her parents' divorce, recognizing that it had not occurred because of her but that "Sometimes people can't get along with each other and they divorce." Although she spoke with relative neutrality about her longings for her father, her wish to "grow up quickly" in order to marry me was intense.

In her third year of treatment Emma's oedipal fantasies in the transference began to flourish, as did their elaboration in sustained play. We started to take many trips together to exotic foreign countries. During one of these trips, Emma explained that babies come from eating special food and that girls could only have them once they became 17 years old. Predictably, Emma became the 17 year old who prepared special meals on our vacations. In other games, I was the king who began to admire the servant's prettier dress and her ability to jump higher than the queen. In the end, the queen died or "just went away somewhere." The king and servant girl lived happily ever after.

Emma began to woo me outside of games as well and wanted to show me all of the big girl things that she could do. She dreamily talked about how nice it would be to get bigger so that we could be the same age. At the same time, Emma repeatedly asked if I was married and complained that I never took her anywhere nice. On several occasions she exclaimed bitterly that I had not attended a school event with her because "You were with your stupid girlfriend." She could begin to accept comments about how difficult it was waiting to grow up, but continued to associate the frustration of current wishes with her intrinsic belief that she was inadequate and unloveable. In a characteristic attempt to fend
off or reverse these feelings, Emma introduced a school game in which she was, again, 17 years old, the best at everything, and the teacher's favorite. The younger, stupid student was ignored by the teacher and was very upset when the older student announced that she was getting married the following day. As the older student, Emma teased the younger one about being too young to marry and about "not knowing what love is anyway." Emma instructed me as the younger child to become sad because, "God made it so that you won't grow up and won't marry because you were bad! You'll be left by your mommy and daddy all alone." The older girl had never been bad and God rewarded her with "marriage, sex, and a baby 9 months later." When this game was over, Emma was suddenly furious and stormed out of the room, exclaiming, "And you know why I'm angry with you!"

Outside of these games Emma asked many questions about other children I might see and worried that I might prefer them to her. She was steadfast in her conviction that there was nothing worthwhile about a girl her age when compared to the 17 year old who could marry and have babies.

In spite of Emma's sensible views about her father's remarriage, it seemed that the only proof of being valued and loved would be found in a real proposal of marriage. The profound hurt Emma experienced when this proof was not forthcoming from me was, for a long while, expressed in her frequent irritability and domineering in the sessions. During this phase of the treatment, Emma's intense criticism of me served to reverse her feeling that in refusing her wishes, I was criticizing her. In Emma's mind, I would not marry her because she was not "good enough," old enough, clean enough. In a further effort to compensate for
this belief, she began to insist that I had neither a wife nor a girlfriend. In play Emma alone continued to be chosen as "the best and favorite." Outside of these games, she was highly critical of any of her real achievements, alternating between condemning her art, school work, or athletic feats, and deciding that it was I who thought they were "no good." The mother noted that Emma rarely showed her anything that she made or had accomplished.

**Play and talk.** In spite of her intensified feelings of frustration, Emma did not return to provocative enactment as a means of counterattacking or preempting expected retaliation. Instead, she could better tolerate the underlying affects which she expressed within the transference and her elaborate, imaginative play. Following a game involving the "best and favorite student," Emma again complained that it was not fair that I never took her anywhere nice. Her pain broke through in tears when I pointed out that her need to be the only "best" person in my life was the result of never feeling sure that anyone could love her at all. She sat quietly during the remaining minutes of the hour demanding that I stop looking at her. However, in the following session, Emma initiated a new game about a time machine. In our multiple travels into the past, Emma set the stage in which a 2 year old girl repeatedly was ignored by her parents until she became messy. They would then yell at her, deprive her of toys as punishment or simply kick her out of the family, and then the game abruptly ended as we returned to "now." In other games, the girl was now 8 years old (Emma's age at the time) and got angry every time she was excluded from the activities of others. With a knowing look, Emma reminded me of the time machine but insisted that
as a toddler, the girl had been left out because she was messy and bad. That is, Emma's view was that the girl got what she deserved. While at first discounting my sympathetic questions about the little and big girl's feelings, Emma began to make specific links between the game and her memories. In asides, she talked about her father's volatile response to her dogs and herself. She described how frightening it was to see him so angry when she or the dogs were "messy" and added with conviction, "It wasn't fair!" When creating the role of the inattentive mother in the game, she commented on the similarities to her own mother. In one session, as the 2-year-old was again ignored, Emma suddenly departed from the play. "You know, I think my mommy used to get very unhappy about daddy and divorce and all that stuff." Returning to the game, she portrayed the toddler as confused and worried when the mother was unavailable. In subsequent time machine games over a 3 month period, the baby could be depicted in more sympathetic terms; she was sad and felt helpless, but was not necessarily bad and unlovable. Referring directly to herself, Emma pointed out that as a 2-year-old she could only assume that her mother's lack of attention and her father's anger were because something was deficient in her.

When Emma no longer took full responsibility for her father's departure from home, she was able to put her sadness and disappointment into words. She described feeling "very sad and angry" in her memory of father packing his bags and leaving. She said that she would always wish that her parents had not divorced but could enjoy time spent with both of them. The parents' relationship also grew more cordial and Emma's sense of this helped to diminish the intense loyalty conflict she had felt in the past as well.
As Emma relaxed her critical view of herself from the past, she began to silence the "mean voice inside" that operated in the present. No longer needing to disavow painful feelings as "babyish" or automatically externalize self-criticism, Emma turned to me almost as a scientific colleague with whom she would check out new discoveries. While her imaginative play did not suddenly disappear in the last months of her treatment, Emma spent more time with daily reports of "real" events. She was particularly interested in analyzing difficult or upsetting interactions with others, always checking her tendency toward self-criticism and resulting hypersensitivity. Her capacity for self-observation could be used to appraise situations which would have been very painful previously. She recognized, for example, that her sister’s teasing, her mother’s periodic inattention, or her father’s spasmodic irritability were not always the result of her behavior or a reflection of her work but were often due to "their own bad moods." She reported her sister Sara trying to frighten her with taunts about ghosts and witches. Emma replied, "You’re just trying to worry me because you’re worried! Well, we’re different people and I’m going to my room to read a book." When she had finished telling me the story Emma beamed and said, "I really had her number, didn’t I."

Emma began to use this newfound insight in a variety of situations. When she became frustrated in her school work, drawings, or games, she would nod her head, smile, and say, "I was needing to be perfect just then," or "I got so worried about being best, I couldn’t practice." While she still did not like her older sister being allowed to stay up later, Emma no longer experienced this rule as mother’s rejection of her. In a game, Emma, as the maternal figure, firmly but gently
handled the young child's demands to stay up late: "You know that when you don't get enough sleep, you feel cranky and unhappy all the next day."

From a girl whose early sessions had been filled with provocative, overexcited, and obstinate behavior, Emma now preferred telling me riddles she had learned at school, practicing her italic writing, and occasionally describing incidents that made her angry. She now was established firmly in latency and, to use her words, wanted to "get on with it." While separation once had spelled rejection and confirmed feelings of inadequacy, Emma now requested more time to spend with friends after school. She hesitated in asking to cut back the number of sessions, fearing that I would ask "all those questions about feelings and stuff." Emma, now a latency girl, was relieved to discover that I, too, recognized that "too many questions" were inappropriate. She was ready, indeed, to "get on with it."

DISCUSSION

Over the course of treatment it became clear that the special attention Emma received from her father was not enough to sustain good feelings about herself. A history of confusing parental responses made it impossible for Emma to rely on a consistent internal source of positive regard. In the first instance, her mother's depression and emotional withdrawal during Emma's second year made it difficult for Emma to feel adequately valued by her. Although the father stepped in at this point as an alternative source of affection and care, his inconsistent handling presented Emma with an equally confusing model for
self-evaluation. His mercurial shifts in mood left Emma feeling valued and loved only when he overindulged her. When he became harsh and violent over messy play or eating, Emma felt bad and unlovable. The mother was unavailable to modulate these extremes, and, in the end, Emma never was quite sure that she was worthwhile or worthy of love. In the absence of consistent, appropriate parental demands and praise for the delay of gratification, Emma sought proof of love from her objects in their immediate gratification of wishes.

As a result, there was an open and insistent quality in her expression of wishes from each developmental phase. For a long while, to relinquish these wishes and their enactment was to give up hope of securing the proof of love she required so desperately. It was not until the third year of treatment that Emma could begin to recognize that her harsh criticism of herself interfered with her ability to take pride in her real achievements and to enjoy the pleasure of the praise that was available to her from external sources. It was only when fantasies could find representation in play that Emma could begin to recognize the fact that the objects' refusal to accede to every wish did not mean that she was worthless and unloved. The transitions that Emma achieved from enactment to play and from play to talk were especially evident in a comment she made toward the end of her analysis. She reflected on how much she used to wish that she could marry her father and me and said, "I know I'll have a husband someday... but it's very hard to wait!"

During the analysis, Emma's ego capacities and their development were reflected in the move from: (1) enactment or immediate gratification of impulses on her own body and in interactions with others; (2) to the development of a
narrative in which the same impulses were given expression via other-than-self
characters; and (3) to verbalization of self observations both within the play and
in discussions with the analyst. In her imaginative play the site of the discharge
was no longer on her own body but on the bodies and activities of the characters
in the story. The suspension of reality was required, as was an increased capacity
to tolerate frustration, in order for Emma to elaborate and sustain narratives and
central themes in play or in direct discussions. Over the course of her treatment
Emma’s inability to play could give way to her reliance on play as a replacement
for reality, and finally to her ability to use play to express and work on the things
she wanted and feared the most.
APPENDIX II

COMPLETE SET OF RATING INSTRUMENTS
APPENDIX II

1. **Thematic Content**

1. **Anatomical differences:** Child expresses in words or actions statements or gestures referring to differences in bodies or bodily functions of boys versus girls. This can include comparisons of various attributes, e.g., length of hair, abilities, and interests (girls' things versus boys' things).

2. **Bodily damage:** Child refers in words or actions to the body being injured or lost, or to bodily functions being, compromised; or references to the body which include function, interchangeability, or location or body parts with specific references to safety.

3. **Power, size, and capacities:** Child refers in words or actions to his own power, size, superior capacities and/or those of another person or thing. This may include comparisons between two or more persons or items with or without expressed preference for one over the other.

4. **Bodily functions:** Child refers in words or actions to sleeping, eating, toileting, etc. References to specific parts of the body through touching, manipulation, or examination is included here (e.g., masturbation, fingers in mouth, looking at body in mirror).

5. **Illness:** Child refers in words or actions to self, others, or things being sick and/or requiring medical care and/or parental attention for the malady.

6. **Loss of object:** Child explicitly refers in words or actions to being left alone or to being left by figure (for whom there is no promise of return) on whom second figure relies for food, shelter, and affection. (This is not to be confused with leave-taking that occurs in daily life.)

7. **Comings and goings:** Child refers to comings and goings of figures and objects during the course of daily life.

8. **Imitation of adult roles:** Child refers in words or actions to aspects of daily life such as cooking, going to work, parenting.

9. **Exclusive attachments:** In words and/or actions, child actively excludes one character from the interactions of two or more other characters. (Here, the intent of "leaving out" needs to be explicit—e.g., "we're doing this, but you're not," etc.)

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10. **Rejection**: Child expresses in words or actions one figure turning away from another or stating dislike of the other.

11. **Partnerships**: Child refers in words or actions to the formation of a "team", sharing of items and/or endeavors with the analyst, or between two characters in the play. These words or activities may or may not include expressions of concern for the well-being of the other.

12. **Reconciliation**: Child refers in words or actions to a cessation and reversal of a previous antagonistic relationship between two or more figures (e.g., combatants become friends; quarreling pair stops fight and begin doing favors for each other).

13. **Death**: Child refers in words/actions to death, dying, being dead, going to heaven, etc. of self, others, props, or characters in the narrative. (This may be co-rated with loss and abandonment.)

14. **Punishment**: Retaliation for, or repudiation of, in words or actions the activities or communications of others and or self.

15. **Moral judgement**: Child explicitly identifies in words; things, persons, actions, or language that are either "good" or "bad," "right" or "wrong," "evil," "fair" or "unfair," etc.

16. **Being in control**: Child defines in words or actions figure who is in authority, dominates, or determines the rules, actions, etc., of others (e.g., who's boss?).

17. **Messing and breaking**: Child refers in words or actions to making a mess, e.g. writing on furniture, walls, scattering and/or breaking play materials, etc.

18. **Cleaning and fixing**: Child refers in words or actions to bringing order or cleaning up, and/or repairing broken items, e.g. picking up play materials, talking about house cleaning, making things work, etc.

19. **Fighting and attacking**: Child refers in words or actions to two or more figures exchanging opposing views or physically violent actions, e.g., kicking, hitting, pushing, killing, and/or inflicting pain.

20. **Destruction**: Child refers in words or actions to tearing down, blowing up, bashing, crashing, etc., property or any inanimate objects.
21. **Robbing and stealing:** Child refers in words or actions to items being stolen by self or others or, refers to intent of self or others to steal. (This includes references to self or others as robbers, burglars, thieves, etc.)

22. **Birth and babies:** Child refers in words or actions with a doll or other prop to babies and their origin, caring for babies, making babies, demands of babies, or babies behaviors (e.g., crying).

23. **Secrets and intimacy:** Child refers in words or actions to intimate contact between two children, two adult figures, or a child and adult that include kissing, hugging, bashing, repetitive hitting, or hidden, "secret" activities.

24. **Setting the stage:** Child describes in words or actions, placement of items or characters in preparation for, or as accompaniment to, action or play. (This may include construction, building, arranging of furniture, naming of props for play.)

25. **References to time:** Child explicitly refers to time: e.g., today, situations in context of time (e.g., yesterday, dates, clock, times of day, etc.).

26. **References to self:** Child interrupts imaginary play, constructions, attentions to activities and items within the room to comment on life events outside the room.

27. **Distinguishes fantasy/reality:** Child uses words: "this is pretend" or "this is real" in describing activities, things or narrative.

28. **Ownership and Possessions:** Child explicitly identifies an item as belonging to himself or to another (e.g., "this is mine," "that is yours," etc.).

29. **Characters in play:** Child refers to one or more of the following: a) mother, b) father, c) brother, d) sister, e) other family members, f) monsters and ghosts, g) superheroes, h) magical figures, i) powerful robots, j) animals, k) helping professions, l) criminal elements
2. Emotional Presentation
Rate for items in sections I-IV after the first minute of viewing the tape and subsequently, when there are identifiable changes in the child's presentation. Changes in ratings in one or more domain does not require a change in rating of the other domains. Wherever a rating seems indicated, choose only one item which best reflects the predominant characteristics of the child's presentation.

Categories of Basic Dimensions of State

A. Levels of arousal and gross mobility

Level I
Sleepy, inattentive
Sessile, paucity of movements

Level II
Basically attentive
Some movement, quietly active

Level III
Alert, attentive
Animated

Level IV
Aroused
Quite active

Level V
Hypervigilant
Hyperactive, always in motion

B. Levels of emotional expressivity

Level I
Muted display of emotions

Level II
Subdued, mildly displayed emotions

Level III
Visible display of emotions

Level IV
Strongly asserted emotions

Level V
Explosive display of emotions
3. **Emotional Valence of the Child’s Attitude toward the Analyst**

1) **Friendly**--the child engages with the analyst in a pleasant, amicable fashion indicating in words and actions that he is well disposed toward this adult.

2) **Wary**--the child appears uncomfortable and cautious with the analyst, e.g., often keeping analyst in view while engaged in an activity or, unable to sustain interaction with the analyst, retreating to more watchful attitude following some engagement.

3) **Withdrawn**--the child is unable to engage with the analyst at all, may need to keep physical distance from him/her; may be immobile and unable to play.

4) **Provocative**--the child teases or attacks the analyst as if to invite an intervention or other response (e.g., limits, controls, anger, retaliation, etc.). These words or actions are often accompanied by the child’s excitement and pleasure. To be distinguished from characteristics of the child being enraged.

5) **Seductive**--the child engages in activities that demand or seek a response of praise, admiration or affection from the analyst. These activities may or may not be accompanied by the child’s excitement or obvious sexual references.

6) **Enraged**--the child expresses in words or actions negative, aggressive feelings toward the analyst with no implied or explicit response sought. To be distinguished from attacks which seem to be provocative in nature.

7) **Detached**--the child plays or involves himself in activities while showing no interest or overt concern about the presence, absence, or level of involvement of the analyst in those activities.

8) **Domineering**--the child attempts to subjugate analyst with insistent demands and orders; here, bossing will be the child’s attempt to control the analyst’s behavior and the activities that occur between them, rather than an effort to provoke a response other than compliance from the analyst.
4. Child-analyst Interaction

A. Child engages analyst as:

(1) a participant in the play (e.g., assigning the analyst the role of a particular character, as a helper in setting the scene, etc.)
(2) an audience or observer
(3) a source of knowledge
(4) a source of limits (e.g., checking with the analyst about what activities are acceptable or allowed)
(5) an interference to the flow of the play/narrative (i.e., does the child interrupt or ignore the comments or actions of the analyst?)
(6) a prop within the play (e.g., does the child use the body of the analyst as a site for attacks, climbing, tickling)
(7) focus of activities outside of any narrative content (does the child use the analyst for assistance in reaching for items, constructing, drawing, etc.)
(8) Other

B. Analyst assumes the role of:

(1) quiet observer
(2) observer who asks questions or makes statements about the child's activities
(3) participant in a role or activity initiated by the child
(4) participant in a role or activity initiated by analyst
(5) Other
APPENDIX III

CODING SHEET
### APPENDIX III

**Coding Sheet Studies of Play Interviews**

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APPENDIX IV

VIDEO CONSENT FORM

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SAMPLE TRANSCRIPT
Appendix Four

Invitation to Participate and Videotape Consent Form

**Invitation to Participate and Description of Project**

Studies of Play and Communication in Children

We invite you and your child to participate in a study of play and communication in normal children, aged four to six. The purpose of the study is to learn more about the ways in which children use play and accompanying language to organize, modulate and master their thoughts, feelings and actions. The hope is that understanding these processes better in normal children will help us identify deficits in these functions in children who have developmental difficulties. In addition, it is hoped that we will learn more about the ways in which clinicians observe material presented by children in their play and accompanying language without the initial benefit of additional information about the children from parents and teachers.

If you agree to participate, your child will attend three 45 minute play sessions with a trained child clinician at the Child Study Center. The child will be encouraged to play with materials provided by the clinician and to talk with the clinician about his/her play. These sessions will be recorded on videotape for later analysis. You will be asked to sign a separate consent form regarding the use of videotaped material. You may observe any or all of these interviews if you wish. In addition, you will be asked to attend one or two forty-five minute interviews with a clinician who is not seeing your child for the purpose of learning more about your impressions of his/her development. Also, the child's teacher will be interviewed briefly.

It should be emphasized that these interviews are not diagnostic in nature and will in no way be used to evaluate your child. Each clinician, however, will be available to discuss any questions you may have about your child's behavior during the play sessions. Of course, there will be no charge for any sessions associated with this project.

If your child participates in these studies, there are no risks involved.

We will share the results of all studies with you. The data from this study will be utilized for publication and teaching purposes only. No names or other identifying information will be used in any possible publications. If you choose not to participate in this study, or withdraw from it, your decision will remain confidential and will not affect the treatment of your child here or elsewhere. Although we hope the results of this study will be of help in understanding, diagnosing and treating developmental disorders, there will be no direct benefit to your child as a result of his/her participation.
Videotape Consent Form for Studies of Play and Communication

Yale Child Study Center

I, ____________________________ (parent’s or guardian’s name) ____________________________ (residence)

and ____________________________ (parent’s or guardian’s name) ____________________________ (residence)

Parent(s) of ____________________________ (child’s name), understand that

videotape recording(s) of my child’s play interviews and of my interview

with ____________________________ (staff member’s name(s)) will be made.

I understand that these recordings are being made for research purposes only and that I may view them. This, and the nature of the taping procedure have been explained to me. I understand that the recordings are confidential material and may be used only by members of the research team for illustration of their study findings. I understand that I may have the recording(s) erased and/or withdraw consent for any use of them by so requesting in writing.

Signed ____________________________ ____________________________

Authorized Clinician ____________________________ ____________________________

Date ____________________________
Sample Transcript

Videotape Session # 3
"Sam" Date: 6/17/85

ADULT UTTERANCE

8:25

1. Hmm..what do you think?

2. Ah.. okay.

3. Ah..hmm.

4. Is that there?

5. A..hmm.

6. (5 syllables)... no, I'm gonna make that bridge.

7. Let me see if this car fits.

8. Nope.

9. It crashed.

10. I got an idea!

11. You can keep this right over here.

12. If you go like this, the bridge comes down and (5 syllables) here and there's much more bridge.

CHILD UTTERANCE

1. Doesn't.. does it open?

2. No.

3. Let me see something else in that. (goes to toy chest)

4. Hey, I want to do a giant slide.

5. See.. whoa.

NOTES

6. (5 syllables)... no, I'm gonna make that bridge.

7. Let me see if this car fits.

8. Nope.

9. It crashed.

10. I got an idea!
9. Ah..okay.

10. It crashed?

8:27

11. Yes.

12. Uh huh, show me.

13. Yes.

14. That's what happened in the crash?

15. That truck is crashed too?

13. (noise)

14. First (needed) another car.

15. Where's a little car?

16. Hey, I could get you this.  
    (gets materials)

17. I don't need the slide.

18. I'm gonna get on the steering wheel.

19. Oops, it's crashed.

20. It's just a little space here, you see?

21. I'll show you.

22. Ya see this?

23. There's a little dent here.

24. And that truck is also crashed.

25. (shush noise) Goes like..  
    (makes crash).
16. That looks like a bad crash.

17. The wheel is punctured.

18. Okay.

19. It's fixed very fast. (drives on vehicle)

20. Aa..hmm.

21. The cow almost crashed into it too.

26. Look, like this..watch. (car noises)

27. They went (6 syllables) crash.

28. It was!

29. It crashed again.. the wheel is punctured.

30. I know.. so let's get it fixed.

31. You have to get into this garage.

32. It's fixed.

33. Yeah.

34. Hey, I've got an idea.

35. I'll keep this here.

36. You see what I did?

37. Okay, you'd tell if I'm right.

38. Boy, almost crashed into it.
22. Oh.

23. Almost crashed.

24. It's pretty dangerous.

25. You can see all the crashes.

26. You have a funny story book?

(child has a cow on top of the tractor)

39. Went like.. (demonstrates how it almost crashed)

40. Like that.

41. It almost crashed.

42. Yeah, almost.

43. Yeah, it is.

44. How do you know?

45. Do you know that I have a funny story book?

(laughs.. giggles)

46. Yes, you know what?

47. Once when we went shopping, we coming down by mistake then we go.. (acts out a crash and makes a noise)

(uhhm)

48. Yeah, really.

49. Really (nodding).

50. I have a car like that too.
27. And how does your car go?

51. It goes crashing like that.
52. I have two cars like that.

28. They crash?

53. Yeah, umm, isn't it funny?

29. Why is it funny?

54. Because they are funny cars.

30. Hmm.

55. Racing cars.

31. Racing cars.

56. I have a race track.

32. You have a race track, too?

57. Uh huh.

33. Goes fast?

58. What?

34. Goes pretty fast?

59. (nods) What if I crash into there.

60. Let's pretend I'm on a plane ride closing up my eyes and I crash into there once, Okay?

(nods)

61. (crashes) Whoa!

62. The cow is dead.

35. The cow is dead. (somber tone)

63. Yup. (sighs)
36. Mmm.

37. Hmm.

38. Hmm.

64. Hey, I got an idea.

65. Oh, here is a good little car.

66. (crashes tractor into house) and there's a stroller... boink.

67. Wow, it crashed.

39. It crashed.

68. And the little boy was bumping his head like that.

40. And the little boy bumped his head.

69. The blood is coming out.

41. The blood is coming out.

42. That little boy is a brave...

70. No, and this car is going into the junk.

43. Into the junk, hmm.

71. This is a crash of the car.

44. Crash of the car, hmm.

72. You know our Subaru, the white one, the two door.

45. Two door Subaru.

73. That had to go in the trash, too.
46. What happened?
47. Your Subaru had a serious accident.
48. But not your side.
49. You were in the car?
50. And your mommy.
51. Your dad was in Baltimore?
52. That was very scary when your Subaru was in an accident.
53. Uh-hum.

74. It had a serious accident.
75. That's why it had to go in the trash.
76. And all the side...side glass, it was all broken, the driver's side glass.
77. But not my side's glass, no.
78. No.
79. Yes, I was.
80. And that's all.
81. Because my dad was in Baltimore.
82. So that's why the car had to go in the trash.
83. 'Cause the tow truck all damaged.
54. The tow truck came and it was all damaged.

55. You were very afraid when that happened.

56. And your mom too.

57. She screamed?

58. The truck hit it.

59. The middle size...

60. You thought it was a very big truck.

61. But it smashed up the car that you were in.

62. Hmm, yah.

63. It was very, very scary.

64. You thought... you hurt, your mommy hurt...

84. Right.

85. And my mom too.

86. She screamed.

87. Yeah, the middle size truck hit it.

88. The m-middle size...

89. It was so small, but I thought it was bigger than little size.

90. Yeah.

91. But I was up front seat, you know?

92. It was.
93. But my mommy just got a little splinter over here. (points to chin)

65. Was there bleeding?

94. Yeah, but a little bleeding, only a little.

66. Only a little.. hmm.

95. Yeah.. teeny.. tiny.

67. Just teeny.. tiny.

96. Look at the wheel go like this.

68. Hmm.

97. (giggles).. Can you make a crash?

69. Big crash.

98. (noises) Big crash.

99. Hey, how come there are two of these?.. how come there are two of these?.. Huh?

70. Well, what do you think you could do with two of those?

100. Put the dolls in it.

71. Hmm.. uh huh.

101. Hey, where did you get this?.. huh?.. from a shop?

102. Hey.. hey, who put this in here?
103. Let's pretend that this is a closet to hide in, okay?

72. Hoo... a closet to hide in... hoo.

104. Yeah, so somebody played hide and seek in the... in the house and they're coming down the stairs and walking with our hands and they're playing hide and seek.

105. Hide and seek then and he says to the boy, "We'll close the door again and he can still find him... (laughs)

106. Isn't that funny?

73. Hmm.

107. Oh, what is this bridge for?

74. Oh.

8:35

108. Hey.. hey look.. hey, that's strange. (more infantile sounds)


110. It broke all into pieces.

75. It broke into pieces, the bridge?
Session # 3

111. Yeah.
112. Hmm.. I can lift it.(truck)
113. Whoo..I can lift it, wow, even like this.
114. Can you lift it?
115. Just try.
116. But you try..try it.. try it!
117. Look, just try lift it.
118. But I could, see.
119. Hmm.. I could even break a knife with my hand.
120. For real.

76. Hmm.
77. You're strong.
78. I don't know.
79. You would have to be very strong to lift it.
80. Should I lift it?
81. Or should I pretend I can't lift it?
82. I don't know if I can, it is very heavy to lift a car.

8:36
83. You are very strong.
84. You can break a knife with your hand.. hmm.
85. For real?
86. You are powerful, um-mm.
87. You're the he man?
88. Oh.
89. You sure can..
90. If you are, if you are
   a he man you don't have
to be afraid of cars getting
into accidents... uh, you can
be real powerful.
91. That's why you were...?
92. You were sick and that's
   why you were afraid?
   (nods yes)
93. When that car was hit?
94. Ah..huh, but I think if
   you were the he man, you would
   have kept it from having the
   accident.
95. No, because they come all
   si-so that's why I was
   afraid.
96. That's why you were...
97. Sick.
98. Yeah. I would have saved
   the car.
95. You would have saved the car. uh huh. yeah.
128. You know where did we buy the car?
129. We bought it an old Subaru.
96. An old Subaru?
(nods head)
97. Uh-huh.
130. That's where we buy that car.
98. That's where you bought the car?
99. But the day of the accident you were sick?
(nods head)
100. Oh.
131. Because I had a lots of cold and even cough.
101. And even cough.
132. I had to get many cough drops.
102. Many cough drops.. yes, you were sick.
133. Yeah.
103. Hmm.
134. You want me to go over this ... yeah?
104. Hmm.
135. Okay, wait, let me put the ball away.
Watch how I go over it, okay?
(car noises as child drives over ball.)

Woo.. did you see that?

The ball.

(car noises) Woo..!
(laughs).. (car noises).

(car noises)
Watch this.
I can kick it really hard, up to the ceiling.

Oh, that's a .. that's a strong kick.

Can really show you something? watch this.

Wow. . hey, I want to show you something else, watch, okay?

Whoa.

Look, it has to go up to the ceiling, then we could go very high. Watch.
112. Uh huh.
113. Uh huh.
114. Whoa. •
115. That was a high throw.
116. Hmm... hmm.
117. Hmm... hmm.
118. Yeah.
119. And drawers.

147. No, not like that.
148. I should go like... buoying like that.
149. I am going to try to do it.
150. Whoa, now I am going to go real hard. (excited laughter)
151. Watch this.
152. Uh huh (throws ball up to ceiling). Woo...
153. Whoa.. see that high?
154. Boink... boink.. I know what's this.
155. Windows.
156. It's all in pieces.
158. And drawers.
159. I know what this is.. (sofa)
120. Oh, yes.
121. Hm...hmm.
122. Ah.. ha, that's a big sofa.
123. The big one knocked over the little one.
124. Higher.
125. Hm..hmm. (nodding head)
126. Hm..hmm.
127. What did you do?
128. Hmm.
129. Choo.

160. And we have another sofa.
161. That's bigger than that, you see.
162. And this is bigger than this, but this is taller than that.
163. Yeah, but this is higher than that.
164. It's all in pieces.
165. I'll keep it right here.
166. Whoa.. see what I did?
167. Look.
168. (Put(3 syllables)this).
169. What is this for?
170. Huh... what is this for?

130. Hmm.. whatever you want to use it for.

171. For a joke?

131. For a joke... hmm.. that will be good.

172. Ah, I know what this is.

132. Hmm.

173. Like a building (2 syllables) ... Like a building, right?

133. A building ..hmm.

174. To make some bubbles, right?

134. It makes bowl?

175. Hmm huh.. no.. bubbles, right?

135. Oh, is that what it does, makes bubbles?

176. Hmm.. bubbles, right?

136. You do?

177. Yeah, because we have it in our nursery.

137. Here you are.

178. But it is bigger.

138. Oh, you see the bowl
turns?

179. Let's put the (2 syllables) ... let's put the (6 syllables).

139. Turned.

180. Hey, we need a person, oh there is one over there, how could I get it?
137. Here you are.
138. He's going to make a slide.
139. Fast thinking.
140. Yeah.
141. Ah.
142. Turned.
143. It's exciting to come down a slide fast like that.
144. Wow.
145. Crash up, what happened?
146. And she broke.
147. She broke her head.
181. Whoo.. hey, I am going to make a slide.
182. He's going to make a slide.
183. ( makes car sounds )
184. Yeah, watch how she goes now, okay.
185. But now we don't need the (paper).
186. Oh, it just went under.
187. They went like ..woo ( car sounds - crashing noises ) like that.
188. It turned.
189. Oh!
190. And she broke the..
147. She broke her head.

148. Hmm.

149. She's all dead.

150. The whole body is dead.

151. Hmm... another crash up.

152. Oh, smashed her again.

153. Oh, she's smashed, she says, "I've been smashed all up, my body has been hurt".

154. Oh, she says, "My head is being smashed".

155. Oh, she says, "I've been pushed around".

156. "Oh, I'm scared", she says, "I'm hurt".

157. Hmm... we need an airplane?... Hmm.

192. Into a half.

193. She's all dead.

194. The whole body.

195. Yep... and then I'm gonna put that (3 syllables).

196. (nods) I am going to put it up here.

197. (growls) Oh, yeah?

198. (deeper voice) That's okay.

199. Hey, huh, we need an airplane.
158. Okay.

159. Hmm.

160. Hm..hmm.

161. Could be.

162. Hm..hmm.

163. Ah.. hah..um um.

164. Yeah.

200. Can I go in purse?

(looks in purse)

201. Yep, I got it.

202. Hey, does it open?

203. Oh yeh!

204. Hey, a baby bottle.

205. Of blue little milk.

206. It does.. have milk.

207. What is this white thing?

208. What is it.. formula?

209. Okay.. then we need a baby.

210. There's the biggest bottle now.

211. (after shaking the bottle) There is the formula.

212. Okay.. I've got a good idea.

213. This is the baby's food, okay?

214. This is for the baby and this is for the baby.
164. Yeah.
165. The baby (4 syllables).
166. And that's for the baby.
167. Yeah.
168. Hm..hmm.
169. Ah hah.
170. This baby is getting so much.
171. We need a baby?
172. Ah.. hmm.. that's a big one.
173. Oh well, do we have a baby over there?
174. Oh, hi, baby.
175. Oh, you've grown up so.
176. Hm, hms.
177. You're giving the baby the things that when they stand, they're the same size.
178. She'll grow up big.
179. Oh, yeah, we need a baby.
180. We fast.
181. Oh, hi, baby.
182. How are you?
183. Ah, you've grown up, do.
184. The baby stopped crying.
185. Yeah.
186. And this is for the baby and this is for the baby.
187. Yeah, and that's for the baby.
188. Okay?
189. Yeah.
190. That one.
191. And even this, or this.
192. Or this.
193. And this is for the baby and this is for the baby.
194. Okay?
195. Yeah.
196. We need a baby.
197. We need a baby.
198. Okay.
199. We have these big things in the nursery, this the same size.
200. Just the same size.
201. Hey, we need a baby.
202. Yeah, how do you know? (darker voice)
203. Ah hah
204. Okay, we need a baby.
174. Hmm.

175. The baby stopped crying.

176. Hm..hmm.

177. You're giving the baby the
formula?

178. She'll grow up big.

8:47

179. Hmm.

180. So fast?

181. Oh, hi, baby.

182. Fine.. how are you?

183. Ah, you've grown up so
big so fast.

227. Oh here's the baby.

228. She stopped crying.

229. Yep.

230. She is going to drink that
formula.

231. So she will grow up big
everyday.

232. That's enough. (wish
sound)

233. I told you she would grow
up big.

234. Yeah.. Hi. (deeper voice)

235. How are you? ( deepens
voice)

236. Fine

237. Yeah, how do you know?
(deeper voice)
184. Hmm.. I saw you got good stuff to eat and you got big.

238. Oh.

185. Hmm.. if you are big and strong..

239. Oh yeah, I could break this house into pieces. (deeper voice)

186. You can break that house into pieces?

240. Yeah.
241. Yeah, yeah.

187. Oh.

242. Yeah, yeah.

188. Oh.. yeah.

243. (making noise a baby smashes into objects).

189. Oh.. if you are that big and strong, you don't have to worry about getting hurt.

244. Oh, yeah.

190. You can protect yourself.

245. (makes crashing sound)

191. Hmm.

246. That doesn't hurt my head. (deeper voice)
192. Doesn't hurt your head?

247. No.. bye-bye. (deeper voice)

193. Goodbye.

248. Boink.. didn't even hurt.

194. Now she's a baby again..

249. Now she's a baby again.

hmm.

195. Now she feels like a baby again and she needs to be taken care of.

250. (sigh) Oh, baby.

196. She has to drink her formula.

251. Hey, she has to drink her formula.

197. Hm..hmm.

252. There one is a.. there a little hole in it.

(pointing to nipple on baby bottle)

198. Hmm.

253. How?

199. Oh, you are going to feed her? .. Hmm.

254. I have to go and feed her now.
200. Hm..hmm.

201. Oh, yes, good.

202. She's spitting it out?

203. Hmm..

204. She's done..hm..hmm.

205. She had a few....

8:50

206. More formula.. hm..hmm.

207. She's so hungry.

208. She gets a headache?

209. Does she always get enough
to eat?

255. Yep.

256. And this will be the
baby's plate.

257. She's spitting it out..
blahk.

258. Yep, spitting out her
food.

259. That's what she's done.

260. (8 syllables).

261. She has to drink her
formula.

262. (Sometimes) she's
always hungry.

263. That she gets a headache.

264. Yeah, and then that means
she gets so hungry.
210. If she's hungry?

211. How come she gets so hungry?

265. Yep.

266. Yep.

267. I don't know.

268. Maybe she plays alot outside.

212. She plays alot outside..hmm?

269. But now she has to come inside.

270. When it's dark outside.

213. Hmm.

271. And the afterwards.

8:51

214. It's dark and she has to come in.

272. Hey, this could be the baby's (1 syllable), right?

273. Look, this could be baby's pillow.

215. Hm..hmm.

274. Let's pretend that this will be the bed, okay?

216. Hm..hmm.

275. Yeah..

217. Okay.

276. There will be chairs right up there.
218. Ah..hah.

219. Okay.

220. Hmm.

221. Yes.

222. Hmm.. the baby needs alot of food.

8:52

223. 30 pounds.

224. She drinks 30 lbs. of bottle?

225. She's drinking it.

226. Hmm.
227. Oh.

228. I have to?

229. I have to sleep with you?

230. Oh..

231. Hmm, sure, how do we do that?

232. Maybe tomorrow?

233. Hmm.

234. Goodbye.

235. Hm.. hmm.

236. For half an hour?

237. She drinks how many pounds?

289. Hey, you have to sleep with me. (deeper voice)

290. With me.. you.

291. You. (deeper voice)

292. Yeah. (deeper voice)

293. I don't know.. maybe tomorrow. (deeper voice)

294. Yeah. (deeper voice)

295. Goodbye. (deep voice)

296. I am going to feed her another bottle.

297. She drinks zillion pounds you know for half an hour. (nods his head)
238. 30 pounds for half an hour.
239. She... she drinks a... a lot.
240. Hm...hmm.
241. Lots of thirsty.
    um hm.
242. Baby's do? Hm...hmm.
243. Even small childrens?
244. Like you?
245. You get lots of thirsty too?
246. When you go outside and play, who takes care of you when you get lots of thirsty?
247. No.
298. Umm, umm... 30 pounds.
299. Yes, she drinks a lot.
300. Because she's always lots of thirsty.
301. Because in summer they get lots of thirsty when they go outside to play.
302. Even small childrens.
303. Like me.
304. Yeah.
305. Hm...hmm.
306. Do you know where I live?
307. From across big garden.

248. From across big garden.. hm..hmm.

308. Ah.. hah.

309. Now.. it's lunch time.

249. It's lunch time.

310. We'll have to give some food of her.

250. Some food?.. hmm.

311. Yep, I'll put it in the oven.

251. Put it in the oven.

312. It will get hotter and hotter.

252. H..

313. Even the bottle because the formula is cold.

253. Hmm..hmm.

314. Hey, where is the bottle?

315. Here it is.

8:55

316. There.

254. Hm..hmm.

317. It will get hotter and hotter.

255. Hotter..hmm.

318. But I'm used to.. I'm used to take hot things to eat.

256. You are used to taking hot things to eat?
319. Yeah. If I get burnt, it doesn't matter, I won't get any hurt.

257. You won't, if you get burnt?

320. No.

258. Oh.

321. So never mind.

259. Oh..

322. I just eat hot food.

260. Well, if you get burnt..

323. Okay, the baby's food is ready.

261. The baby's food is ready.

324. Yep, you know what it is?

262. What is it?

325. Tuna fish.

263. Oh, tuna fish.

326. Yep.

264. Hmm.. do you.. do you like tuna fish?

265. Hmm..

266. Do you have any babies in your family?

327. Yeah.

267. Oh.

328. I have one baby.

268. You have one baby?

329. You know what its.. you know what her name is?
269. No.

270. Collami?

271. Oh.

8:56

272. How big is Collami?

273. Just 3 months?

274. Oh, just that's all? Hmm.

275. Your mommy takes care of Collami?

276. Hm..hmm..hmm.

277. That's why your mom doesn't come here?

278. Oh, your mommy stays with the baby?

279. Hmm.

280. The baby's very fast?

281. Your own baby.

282. Hm.. baby's eat a lot.
283. You have to take care of them.

284. She's done?

285. Ah.. hah.

286. Good..hmm.

287. Hm..hmm.

288. Hm..

289. Ah..hah.

290. Hmm.

291. Yeah.. you take very good care of the baby.

8:57

340. Yeah, they eat really fast.. hmm.

341. She's done.

342. Where is the trash can?

343. Oh, I've got it.

344. Let's pretend like this will be the trash can.

345. But th..has..he has to drink this.

346. It's cold so I'd better do it little hotter.

347. There.. okay, now its hot, so I better cool it off.

348. Okay.

8:58

349. Okay.
350. Ah...hah... let's pretend like..<br><br>292. You feed her a lot.<br><br>351. Let's pretend like..<br>like.. like we're going for shopping, okay?<br><br>293. Okay.<br><br>352. Can't shut it. (purse)<br><br>294. Hm..hmm.<br><br>353. Can you put this on?<br><br>295. Oh...<br><br>8:59<br><br>296. You know, Vedant, that this is our last day that we are going to be meeting for play?<br>354. What?<br><br>297. This is the last time we are going to be meeting for playing.<br>355. Hmm.<br><br>298. Did you know that?<br>356. Yeah.<br><br>299. Hmm..<br>357. What did you ask me?<br>358. Why did you ask me?<br><br>300. What did I ask you?<br>359. Why?<br><br>301. Why did I ask you?<br><br>302. I wanted to remind you that this was our last time.
303. Hm.hmm.

304. Well, if you bring it here, I'll show you.

305. Hmm..hmm.

306. Why do you think I asked you?

307. Would you like me to teach you?

308. Now you know how to.. okay.

309. Now you did it yourself.

310. Did it yourself.. hmm.

311. Hm..hmm.

312. Ah..hah.

313. Ah..hah.

360. Oh.

361. Hey, how do you close this? (purse).. Ha.

362. Okay.

363. Hey, how did you do it?

364. No, I know how to now.

365. I show ya.

366. Yeah.

367. Okay, let's go for a walk.

368. (1 syllable) Hey, I've got an idea, this could be the ..this could be the mother.

369. And this could be the father.
314. Good idea.

315. Yes.

316. Yes.

317. It's easy?

318. To open and close that bag, it's a hard bag to open and close.

319. Oh, no.

370. Right?

371. (1 syllable.) We're gonna go for a walk.

372. (7 syllables).

373. He's gonna hold the bag.

374. Say, how can he hold it?

375. No, some other girl hold the bag... because she knows how to.

376. You see, she says yes, I know.

377. Hey, she knows how to open the bag and even close the bag...

378. (deeper voice) It's easy.

379. Yeah.

380. I know, but I couldn't hold this.

381. Woo... (or watch)
Session # 3

320. Hmm.. let's see the mother
can do it.

321. She fell down..hm.

322. Hm..hmm.

323. The mother's got blood,
can't do it.

324. Who can do it for her?

325. The baby do it with mother?

326. No, the daddy can't do
it, the mother can't do it.

327. Ah..ho.

328. Hmm..

329. The daddy got blood.

330. Oh, and even there.

382. She fell down.

383. I can't even carry it.

384. You see these blood?

385. I think the daddy.

386. Nope.. maybe the baby
can try.

387. Yeah, let's try.

388. They're going to kiss..
    uh..oh.

389. They fell down.

390. Down, he got blood right
    over here.

391. And even here.

9:03

392. Hew.. boom..
331. Ah, who can help that family?
332. Ah, who can help that family?
333. Who can help the mother and the father?
334. Hmm.
335. Oh.
336. Hm..hmm.
337. Hmm..
338. Ah..hah.. Father is going into the ambulance. 393. I'll show ya.
394. (makes sound of siren)
395. (siren sound)
396. (makes banging noise) (2 syllables)
397. Now, he's going to go into the ambulance. (siren noise)
398. Now the mom's gonna going into the ambulance too.
399. (siren noises)
400. (siren noises)
401. Now she is gonna grow big.
402. Okay, now the formula is hot (1 syllable).

403. Hey, where is the formula?

404. Ha, I know, in the purse, so I better get it hot.

342. Hmm.

9:05

405. Did you see my new shoes?

343. Those are new shoes?

406. Okay.

344. Hm..hmm.

407. These make me run very fast.

345. Oh, they must be fast shoes.

408. Hm..mm.. hey, does this open?

346. Uh..hmm.

409. No?

347. No.

410. Oh.

348. So I think that you feel that if the baby gets big enough, he can take care of everything.

411. Right.

349. He can take care of the mommy, keep her from having an accident, take care of the daddy.
412. Right.

350. If he is powerful enough, he can do all those things.

413. And this will be the... now... and this will be the sister, okay?

351. Now she'll be the...

414. She'll take care of the baby.

352. The sister will take care of the baby... hm.

415. Yeah, so I better put this up.

353. Hmm... hmm.

416. And this will be the brother.

354. Hmm...

417. And this will take care of the baby too.

355. Hm.

9:06

418. Wait... whoa!

419. Hey, do we have a cover for this?

356. Hmm.

420. Not... ah... ah... we should have a cover for it.

357. Ah hah.

421. (3 syllables) it's hot.
358. Hm..hmm.

359. Then we're going to talk about bigger and smaller, hmm.. hmm.

360. Which is bigger?

361. Umm, which is bigger?
362. Hmm.. well, it's.. it's a big boy.

(shakes his head)

363. Nope.

364. The sister is bigger?

365. Ah..

366. Ah.. the sister is bigger.

367. Hmm.hmm.

368. No.

369. Then we're going to talk about bigger and smaller, hmm. hmm.

370. Okay, now which is bigger?

371. Guess, let's see what it is.

372. Umm, which is bigger?

373. Hmm.. well, it's.. it's a big boy.

(shaeks his head)

374. Nope.

375. It's not bigger than the sister.

376. Right!

377. You see?

378. Ah.. the sister is bigger.

379. See?

380. You can't even lift her up.
369. Oh.

370. Hm..hmm.

371. They're kissing.

372. What happened?

373. Oh.

374. Oh.

375. Oh no..something dangerous happened.

376. Ran over the sister? (nods his head)

377. And the brother?

378. Ah..umm.. that was dangerous, what happened was dangerous.

379. They're not dead.

9:08

431. Watch.. she could .. woop..

432. You see?

433. They're kissing now.

434. Yep.. woop..

435. (crashing sound).

436. (crashing sound)

437. (crashing sound)

438. A car ran over them.

440. And they're not dead.

441. No, because there is the strongest one in the whole world.
380. Whose that?  
442. What?  
381. Whose the strongest one  
in the whole world?  
(gestures something out of  
the picture)  
382. Ah..hmm.  
443. (makes sound)  
383. Good, hmm.  
444. And they could help mother  
and father.  
384. Good, good.  
445. (makes sounds)  
385. Ah..hah.  
446. Now she is gonna be taller.  
386. Ah..hah.  
447. Nah, I got an idea.  
9:09  
448. The brother could go with  
the daddy.  
387. The brother could go with  
the daddy.. oh, that's  
a good idea.  
449. Whoa!  
388. Ah.. if the brother could  
go..  
450. The sister could go in the  
mother.
389. The sister can go with the mother.

390. And then the brother would be as strong and big as daddy and the sister would be as strong and big as mother.

391. Hmm..

392. Yep.

393. He looks just like daddy.

394. Hmm.

395. Yeah.

396. And she looks just like mommy.. well,

397. Hmm.. what do you think?

9:10

398. Well, now, let me see.

399. What do you, what do you think is bigger?
400. Hmm.. I would say maybe mommy is taller.

401. Ah..hah..hm..hmm..yep.

402. Ah..hah.

403. Yep.

404. She broke her head again?

405. And oh, daddy.

406. And baby.

407. What, there'e all knocked over?

408. Well, I think that little boys and babies grow up to be big and strong.

409. And that they have enough food to grow up big and strong.

410. Yes, it's time to go.

411. (laughs)

412. She didn't like this (floor). (makes noise)

413. She broke her head.

414. Yep. (crashing sound)

415. And baby.

416. And brother (3 syllables).

417. Right, then the baby wants her (2 syllables) formula.

418. I know.

419. Is it time to go?
Session # 3

411. Would you like to go now?

470. Yes.

412. Okay, well, it was very nice
    playing with you.

471. Okay.

413. Goodbye, now.

472. Goodbye.

9:11

473. When (or what) does the
    kid tomorrow have?