



# The International Journal of Psychoanalysis

(ART)JJP

Isaacs, S. (1948) The Nature and Function of Phantasy. *Int. J. Psycho-Anal.*, 29:73-97

## The Nature and Function of Phantasy<sup>1</sup>

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### INTRODUCTION

A survey of contributions to psycho-analytic theory would show that the term 'phantasy' has been used in varying senses at different times and by different authors. Its current usages have widened considerably from its earliest meanings.

Much of this widening of the concept has so far been left implicit. The time is ripe to consider the meaning and definition of the term more explicitly.

When the meaning of a technical term does become extended in this way, whether deliberately or insensibly, it is usually for a good reason—because the facts and the theoretical formulations they necessitate require it.<sup>2</sup> *It is the relationships between the facts* which need to be looked at more closely and clarified in our thoughts. This paper is mostly concerned with the definition of 'phantasy'; that is to say, with describing the *series of facts* which the use of the term helps us to identify, to organize and to relate to other significant series of facts. Most of what follows will consist of this more

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<sup>1</sup>A chapter from a book in preparation jointly with Paula Heimann, Melanie Klein and Joan Riviere.

<sup>2</sup>In a contribution to the British Psycho-Analytic Society in 1943, Dr. Ernest Jones commented with regard to this extension of the meaning of 'phantasy': 'I am reminded of a similar situation years ago with the word "sexuality". The critics complained that Freud was changing the meaning of this word, and Freud himself once or twice seemed to assent to this way of putting it, but I always protested that he made no change in the meaning of the word itself: what he did was to extend the conception and, by giving it a fuller content, to make it more comprehensive. This process would seem to be inevitable in psycho-analytical work, since many conceptions, e.g. that of conscience, which were previously known only in their conscious sense, must be widened when we add to this their unconscious significance.'

careful study of the relationships between different mental processes.

As the work of psycho-analysis has gone on, in particular the analysis of young children, and our knowledge of early mental life has developed, the relationships which we have come to discern between the earliest mental processes and the later more specialized types of mental functioning commonly called 'phantasies' have led many of us to extend the connotation of the term 'phantasy' in the sense which is now to be developed. (A tendency to widen the significance of the term is already apparent in many of Freud's own writings, including a discussion of unconscious phantasy.)

It is to be shown that certain mental phenomena which have been generally described by various authors, not usually in reference to the term 'phantasy', do in fact imply the activity of unconscious phantasies. By correlating these phenomena with the unconscious phantasies with which they are bound up, their true relationships to other mental processes can be better understood, and their function and full importance in the mental life appreciated.

This paper is not primarily concerned to establish any particular content of phantasy. It will deal with the nature and function of phantasy as a whole, and its place in the mental life. Actual examples of phantasy will be used for illustrative purposes, but it is not suggested that these examples cover the field; nor are they chosen systematically. It is true that the very same evidence which establishes the existence of phantasies even at the earliest ages gives us some indication of their specific character; yet to accept the general evidence for the activity of phantasy from the

beginning of life and the place of phantasy in the mental life as a whole does not automatically imply accepting any particular phantasy content at any given age. The relation of content to age will be worked out to some extent elsewhere; this paper is intended to pave the way for that by general considerations.

To understand the nature and function of phantasy in the mental life involves the study of the earliest phases of mental development, i.e. during the first three years of life. Scepticism is sometimes expressed as to the possibility of understanding the psychic life at all in the earliest years—as distinct from observing the sequence and development of behaviour. In fact we are far from having to rely upon mere imagination or blind guesswork, even as regards the first year of life. When all the observable facts of behaviour are considered in the light of *analytic* knowledge gained from adults and from children of over two years, and are brought into relation with analytic principles, we arrive at many hypotheses carrying a high degree of probability and some certainties, regarding early mental processes.

Our views about phantasy in these earliest years are based almost wholly upon inference, but then this is true at any age. Unconscious phantasies are always inferred, not observed as such; indeed, the technique of psycho-analysis as a whole is largely based upon inferred knowledge. As has often been pointed out regarding the adult patient too, he does not tell us his unconscious phantasies directly, nor, for that matter, his preconscious resistances. We often observe quite directly emotions and attitudes of which the patient himself is unaware; these and many other observed data (such as those instanced later, on pp. 90, 91) make it possible and necessary for us to infer that such and such resistances or phantasies are operating. This is true of the young child as well as of the adult.

The data to be drawn upon here are of three main sorts, and the conclusions to be put forward are based upon a *convergence* of these lines of evidence.

- a. Considerations regarding the relationships between certain established facts and theories, many of which facts and theories, although quite familiar in psycho-analytic thought, have hitherto been dealt with in a relatively isolated way. When considered fully, these relationships require the postulates which will be put forward, and by means of these postulates become better integrated and more adequately understood.
- b. Clinical evidence gained by analysts from the actual analysis of adults and children of all ages.
- c. Observational data (non-analytic observations and experimental studies) of the infant and young child, by the various means at the disposal of the science of child development.

## I. METHODS OF STUDY

### A. Observational Methods

Before considering our main thesis, it may be useful to survey briefly certain fundamental principles of method which provide us with the material for conclusions as to the nature and function of phantasy, and which are exemplified

- 74 -

both in clinical (psycho-analytic) studies and in many of the most fruitful recent researches into the development of behaviour.

A variety of techniques for the study of particular aspects of child development has been evolved in recent years. It is a no table fact that observational researches into the development of personality and social relationships, and especially those which attempt to reach understanding of motives and of mental process generally tend to pay more and more regard to certain methodological principles, now to be discussed. These principles bring them into closer line with clinical studies and thus form a valuable link between observational methods and analytic technique. They are: (a) attention to details; (b) observation of context; (c) study of genetic continuity.

- a. All serious contributions to child psychology in recent years could be instanced as illustration of the growing appreciation of the need to attend to *the precise details* of the child's behaviour, whatever the field of enquiry may be, emotional, social, intellectual, locomotor or manipulative skills, perception and language. The researches of Gesell (1928-40), Shirley (1933), Bayley (1936) and many others into early mental development exemplify this principle. So do the experimental and observational studies of social development, or the

researches into infant behaviour by D. W. Winnicott (1941) and M. M. Middlemore (1941). Middlemore's research on the behaviour of infants in the feeding situation, for example, demonstrated how varied and complex even the earliest responses of infants turn out to be when noted and compared in close detail, and how intimately the child's experiences, for example, the way he is handled and suckled, influence succeeding phases of feeling and phantasy and his mental processes generally.

Most advances in observational and experimental technique have been devised to facilitate the precise observation and recording of details of behaviour. We shall later refer to the great importance of this principle in psycho-analytic work and the way in which it helps us to discern the content of early phantasies.

- b. *The principle of noting and recording the context* of observed data is of the greatest importance, whether in the case of a particular instance or sort of social behaviour, particular examples of play, questions asked by the child in the development of speech—whatever the data may be. By 'context' is meant, not merely earlier and later examples of the same sort of behaviour, but the whole immediate setting of the behaviour being studied, in its social and emotional situation. With regard to phantasy, for example, we have to note *when* the child says this or that, plays this or that game, performs this or that ritual, masters (or loses) this or that skill, demands or refuses a particular gratification, shows signs of anxiety, distress, triumph, glee, affection, or other emotions; who is present—or absent—at the time; what is his general emotional attitude or immediate feeling towards these adults or playmates; what losses, strains, satisfactions have been recently experienced or are being now anticipated? And so on and so forth.

The importance of this principle of studying the psychological *context* of particular data in the mental life has become increasingly recognized amongst students of children's behaviour, whatever mental process or function of behaviour happens to be the subject of study. Many examples could be given: e.g. the study of temper tantrums, by Florence Goodenough, 3 of the innate bases of fear, by C. W. Valentine<sup>4</sup>(1930) ; of the development of speech in infancy, by M. M. Lewis<sup>5</sup>(1936) ; of the development of sympathy in young children, by L. B. Murphy<sup>6</sup>(1937).

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<sup>3</sup>Goodenough (1931) trained her observers to record not merely the frequency and time distribution of temper tantrums, but also the context of social and emotional situations and physiological conditions in which they occurred. In this way, she was able to elucidate, to a degree which had not been done before, the nature of the situations which give rise to temper tantrums in young children.

<sup>4</sup>Repeating Watson's work on the subject of innate fears, Valentine paid attention to the total situation in which the child was placed as well as to the precise nature of the stimuli applied. He concluded that the setting is always a highly important factor in determining the particular response of the child to a particular stimulus. It is a *whole situation* which affects the child, not a single stimulus. The presence or absence of the mother, for example, may make all the difference to the child's actual response.

<sup>5</sup>Lewis not only made a complete phonetic record of the development of speech in an infant from birth onwards, but also noted the social and emotional situations in which particular speech sounds and speech forms occurred, enabling us to infer some of the emotional sources of the drive to speech development.

<sup>6</sup>Lois Barclay Murphy has made a considerable contribution to problems of social development in a series of careful studies of the personalities of young children and their social relationships. She showed that it is useless to attempt either ratings of personality as a whole, or of particular traits such as sympathy, without having constant regard to the context of the behaviour studied. The social behaviour and personal characteristics of young children vary according to the specific social context. For example, one boy is excited and aggressive when another particular boy is present, but not so when that boy is absent. Murphy's work gives us many such glimpses of the feelings and motives which enter into the development of the child's traits of personality. She sums up her study of 'sympathetic behaviour' in young children playing in a group: 'the behaviour which constitutes this trait is dependent upon the functional relation of the child to each situation, and when shifts in status give a basis for a changed interpretation of the situation in which the child finds himself, changed behaviour occurs. A significant proportion of the variations in a child's behaviour which we have discussed are related to the child's security, as affected by competitive relations with other children, disapproval by adults, or guilt and self-accusation in relation to injury to another child,' thus emphasising that sympathetic behaviour (as one aspect of personality) cannot be understood apart from the variations in the context in which it is shown.

Murphy's work, in especial, has shown how indispensable is this principle in the study of social relationships, and how far more fruitful it proves than any purely quantitative or statistical treatment of types of behaviour or traits of personality, made without reference to context.

One of the outstanding examples of the way in which attention to precise details in their total context may reveal

the significance of a piece of behaviour in the inner psychic life of the child is Freud's observation of the play of a boy of eighteen months of age. This boy was a normal child, of average intellectual development, and generally well behaved. Freud writes: 'He did not disturb his parents at night; he scrupulously obeyed orders about not touching various objects and not going into certain rooms; and above all he never cried when his mother went out and left him for hours together, although the tie to his mother was a very close one: she had not only nourished him herself, but had cared for him and brought him up without any outside help. Occasionally, however, this well-behaved child evinced the troublesome habit of flinging into the corner of the room or under the bed all the little things he could lay his hands on, so that to gather up his toys was often no light task. He accompanied this by an expression of interest and gratification, emitting a loud long-drawn-out "o-o-o-oh" which in the judgement of the mother (one that coincided with my own) was not an interjection but meant "gone away" (*fort*). I saw at last that this was a game, and that the child used all his toys only to play "being gone" (*fortsein*) with them. One day I made an observation that confirmed my view. The child had a wooden reel with a piece of string wound round it ... he kept throwing it with considerable skill, held by the string, over the side of his little draped cot, so that the reel disappeared into it, then said his significant "o-o-o-oh" and drew the reel by the string out of the cot again, greeting its reappearance with a joyful "Da" (there). This was therefore the complete game, disappearance and return, the first act being the only one generally observed by the onlookers, and the one untiringly repeated by the child as a game for its own sake, although the greater pleasure unquestionably attached to the second act.

*The meaning of the game was then not far to seek. It was connected with the child's great cultural achievement—the forgoing of the satisfaction of an instinct—as the result of which he could let his mother go away without making any fuss. He compensated himself for this, as it were, by himself enacting the same disappearance and return with the objects within his reach (1922).*

Later on, Freud also noted a further detail in the boy's behaviour: 'One day when the mother had been out for some hours she was greeted on her return by the information "Baby o-o-o-oh" which at first remained unintelligible. It soon proved that during his long lonely hours he had found a method of bringing about his own disappearance. He had discovered his reflection in the long mirror which nearly reached to the ground and had then crouched down in front of it, so that the reflection was "gone".'

The observation of this detail of the sounds with which the boy greeted his mother's return called attention to the further link of the child's delight in making his own image appear and disappear in the mirror, with its confirmatory evidence of his triumph in controlling feelings of loss, by his play, as a consolation for his mother's absence.

Freud also brought to bear upon the boy's play with the wooden reel other and more remote facts which many observers would not have thought had any relation to it, such as the child's general relationship to his mother, his affection and obedience, his capacity to refrain from disturbing her and to allow her to absent herself for hours together without grumbling or protest. Freud thus came to understand much of the significance of the child's play in his social and emotional life, concluding that

- 76 -

in the boy's delight in throwing away material objects and then retrieving them, he enjoyed the phantasied satisfaction of controlling his mother's comings and goings. On this basis he could tolerate her leaving him in actuality, and remain loving and obedient.

The principle of observing context, like that of attention to detail, is an essential element in the technique of psycho-analysis, whether with adults or children.

c. *The principle of Genetic Continuity.*

The third fundamental principle, of value both in observational and in analytic studies, is that of *genetic continuity* (1936).

Experience has already proved that throughout every aspect of mental (no less than of physical) development, whether in posture, locomotor and manipulative skill, in perception, imagination, language, or early logic, any given phase develops by degrees out of preceding phases in a way which can be ascertained both in general

outline and in specific detail. This established general truth serves as a guide and pointer in further observations. All studies of developmental status (such as those of Gesell and Shirley) rest upon this principle.

It does not mean that development proceeds at an even pace throughout. There are definite crises in growth, and there are integrations which from their nature bring radical changes in experience and further achievement, e.g. learning to walk is such a crisis; but dramatic though it be in the changes it introduces into the child's world, actual walking is but the end-phase of a long series of developing co-ordinations. Learning to talk is another such crisis; but again, one prepared for and foreshadowed in every detail before it is achieved. So true is this that the definition of ability to talk is purely a matter of convention<sup>8</sup>(1933). Commonly it is taken to mean the use of two words, an arbitrary standard useful for purposes of comparison, but not intended to blur the continuous course of development. Speech development *begins*, as has often been shown, with the sounds made by the infant when hungry or feeding in the first few weeks of life; and on the other hand, the changes occurring *after* the mastery of the first words are as continuous and as varied and complex as those occurring before this moment.

One aspect of speech development having a special bearing upon our present problems is the fact that *comprehension of words long antedates their use*. The actual length of time during which the child shows that he understands much that is said to him, or spoken in his presence, yet has not come to the point of using any words himself, varies much from child to child. In some highly intelligent children, the interval between comprehension and use of words may be as much as one year. This time lag of use behind comprehension is found generally throughout childhood. Many other intellectual processes, also, are expressed in action long before they can be put into words.

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<sup>7</sup>Referred to by Joan Riviere in her paper 'On the Genesis of Psychological Conflict in Earliest Infancy'.

<sup>8</sup>Hazlitt, in her chapter on 'Retention, Continuity, Recognition and Memory' says: 'The favourite game of "peep-bo" which the child may enjoy in an appropriate form from about the third month gives proof of the continuity and retentiveness of the mind of the very young child. If impressions died away immediately and the child's conscious life were made up of a number of totally disconnected moments this game could have no charm for him. But we have ample evidence that at one moment he is conscious of the change in experience, and we can see him looking for what has just been present and is now gone.'

Hazlitt's whole treatment of these problems takes the line that explicit memory grows out of early recognition—i.e. 'any process of perceiving which gives rise to a feeling of familiarity.' She goes on: 'In speaking of the month-old child's sucking reaction to the sound of the human voice it has not been assumed that the child recognizes the voices, that there is a conscious experience corresponding to the idea "voices again". There may or may not be such conscious experience. ... As the weeks go by, however, numberless instances of recognition occur in which the child's expression and general behaviour form a picture so like that which accompanies conscious experience of recognition at the later stages that it is difficult to resist the inference that the child is recognizing in the true sense of the word. Records tell of children from eight weeks onwards appearing to be distressed by strange, and reassured by familiar faces.'

Hazlitt also takes the view that even judgment is present, e.g. in the child's adaptive responses, in the third and fourth months. Hazlitt has no doubt that the very earliest responses of the infant show the rudimentary qualities from which memory, imagination, thinking, etc., develop. She says: 'Another argument for the view here taken that judgment is present from a very early time is that the expression of surprise at stimuli which are not surprising through their intensity, but from being changed in some way from their usual appearance, is quite common by six months and shows itself every now and then much earlier than this.'

Another important field in which this law of genetic continuity operates is that of logical relations. Experimental studies of Hazlitt and others have shown that the child can understand and act upon certain logical relations (such as identity, exception, generalization, etc.) long before he can express these relations in words, and he can understand them in simple concrete terms before he can appreciate them in a more abstract form. E.g. he can act upon the words 'all ... but not ...' when he cannot yet understand the word 'except'; again, he can comprehend and act upon 'except' before he can use the word himself.

Examples of rudimentary thought emerging in action and in speech from the second year of life are given in the studies of speech development by M. M. Lewis (1937). The experimental studies of the development of logical thinking, by Hazlitt (1933) and others, show the same principle at work in later years.

This general fact of genetic continuity, and its particular exemplifications in speech development, have a specific bearing upon one important question: are phantasies active in the child at the time when the relevant impulses first dominate his behaviour and his experience, or do these become so only in retrospect, when later on he can put his experience into words? The evidence clearly suggests that phantasies are active along with the impulses

from which they arise. (This question is bound up with the problem of *regression*, which will be discussed elsewhere.)

Genetic continuity thus characterizes every aspect of development at all ages. There is no reason to doubt that it holds true of phantasy as well as of overt behaviour and of logical thinking. Is it not, indeed, one of the major achievements of psycho-analysis to have shown that the development of the instinctual life, for instance, had a continuity never understood before Freud's work? The essence of Freud's theory of sexuality lies in just this fact of detailed continuity of development.

Probably no psycho-analyst would question the abstract principle, but it is not always appreciated that it is far more than this. The established principle of genetic continuity *is a concrete instrument of knowledge*. It enjoins upon us to accept no particular facts of behaviour or mental processes as *sui generis*, ready-made, or suddenly emerging, but to regard them as items in a developing series. We seek to trace them backwards through earlier and more rudimentary stages to their most germinal forms; similarly, we are required to regard the facts as manifestations of a process of growth, which has to be followed forward to later and more developed forms. Not only is it necessary to study the acorn in order to understand the oak, but also to know about the oak in order to understand the acorn (1911).

## **B. The Method of Psycho-Analysis**

These three ways of obtaining evidence of mental process from observation of behaviour: that of noting the context, observing details and approaching any particular data as a part of a developmental process, are essential aspects of the work of psycho-analysis, and most fully exemplified there. They are indeed its breath of life. They serve to elucidate the nature and function of phantasy, as well as of other mental phenomena.

The observation of detail and of context are so intimately bound up in analytic work that they may be briefly dealt with together. With adult patients, as well as children, the analyst not only listens to all the details of the actual content of the patient's remarks and associations, including what is not said as well as what is, but notes also where emphasis is put, and whether it seems appropriate. Repetition of what has already been told or remarked, in its immediate affective and associative context; changes occurring in the patient's account of events in his earlier life, and in the picture he presents of people in his environment, as the work goes on; changes in his ways of referring to circumstances and to people (including the names he gives them), from time to time, all serve to indicate the character and activity of the phantasies operating in his mind. So do idiosyncrasies of speech, or phrases and forms of description, metaphors and verbal style generally. Further data are the patient's selection of facts from a total incident, and his denials (e.g. of things he has previously said, of states of mind which would be appropriate to the content of what he is saying, of real objects seen or incidents occurring in the analytic room, of facts in his own life which can certainly be inferred from the other known content of his life or family history, of facts known by the patient about the analyst or of happenings in public affairs, such as war and bombs). The analyst notes the patient's manner and behaviour as he enters and leaves the room, as he greets the analyst or parts from him, and while he is on the couch; including every detail of gesture or tone of voice, pace of speaking, and variations in this, idiosyncratic routine or particular changes in mode of expression, changes of mood, every sign of affect or denial of affect, in their particular nature and intensity and their precise associative context. These, and many other such kinds of detail, taken as a context to the patient's dreams and associations, help to reveal his unconscious phantasies (among other mental facts). The particular situation in the internal life of the patient at the moment gradually becomes clear, and the relation of his immediate problem to earlier situations

- 78 -

and to actual experiences in his history is gradually made plain.

The third principle, that of genetic continuity, is inherent in the whole approach and the moment-by-moment work of psycho-analysis.

Freud's discovery of the successive phases of libidinal development in the child, and the continuity of the various manifestations of the sexual wishes from infancy to maturity, has not only been fully confirmed with every patient analysed, but, as in the case of every sound generalization of observed facts, has proved to be a reliable instrument for further understanding of new data.

Observations in the analytic field of the development of phantasy and of the continuous and developing interplay between psychic reality and knowledge of the external world, are fully in accordance with the data and generalizations regarding development arrived at in other fields, such as bodily skills, perceptions, speech and logical thinking. As with the external facts of behaviour, so with the development of phantasy, we have to regard each manifestation at any given time and in any given situation as a member of a developing series whose rudimentary beginnings can be traced backwards and whose further, more mature, forms can be followed forward. Awareness of the way in which the content and form of phantasy at any given time are bound up with the successive phases of instinctual development, and of the growth of the ego, is always operating in the analyst's mind. To make this plain (in concrete detail) to the patient is an inherent part of the work.

It was by attending to the details and the context of the patient's speech and manner, as well as of his dreams and associations, that Freud laid bare both the fundamental instinctual drives in the mental life, and the varied processes—the so-called '*mental mechanisms*'—by which impulses and feelings are controlled and expressed, internal equilibrium is maintained and adaptation to the external world achieved. These '*mechanisms*' are very varied in type and many of them have received close attention. In the view of the present writers, all these various mechanisms are intimately related to particular sorts of phantasy, and at a later point, the character of this relationship will be gone into.

Freud's discoveries were made almost entirely from the analysis of adults, together with certain observations of children. Melanie Klein, in her direct analytic work with children of two years and onwards, developed the full resources of analytic technique by using the children's play with material objects, their games and their bodily activities towards the analyst, as well of course as their mien and manner and signs of feeling and their talk about what they were doing and feeling, or what had been happening in their external lives. The make-believe and manipulative play of young children exemplify those various mental processes (and therefore, as we shall see, the phantasies) first noted by Freud in the dream life of adults and in their neurotic symptoms. In the child's relationship to the analyst, as with the adult's, the phantasies arising in the earliest situations of life are repeated and acted out in the clearest and most dramatic manner, with a wealth of vivid detail.

### *Transference Situation*

It is especially in the patient's emotional relation to the analyst that the study of context, of details and of continuity of development proves fruitful for the understanding of phantasy. As is well known, Freud early discovered that patients repeat towards their analyst situations of feeling and impulse, and mental processes generally, which have been experienced earlier in their relationships to people in their external lives and personal histories. This transference on to the analyst of early wishes, aggressive impulses, fears and other emotions, is confirmed by every analyst.

The personality, the attitudes and intentions, even the external characteristics and the sex of the analyst, *as seen and felt in the patient's mind*, change from day to day (even from moment to moment) according to changes in the inner life of the patient (whether these are brought about by the analyst's comments or by outside happenings). That is to say, *the patient's relation to his analyst is almost entirely one of unconscious phantasy*. Not only is the phenomenon of 'transference' as a whole evidence of the existence and activity of phantasy in every patient, whether child or adult, ill or healthy; its detailed changes also enable us to decipher the particular character of the phantasies at work in particular situations, and their influence upon other mental processes. The 'transference' has turned out to be the chief instrument of learning what is going on in the patient's mind, as well as of discovering or reconstructing his early history; the unfolding of his

transference phantasies, and the tracing of their relation to early experiences and present-day situations, form the chief agency of the 'cure'.

Repetition of early situations and 'acting out' in the transference carry us back far beyond the earliest conscious memories; the patient (whether child or adult) often shows us, with the most vivid and dramatic detail, feelings, impulses and attitudes appropriate not only to the situations of childhood but also to those of the earliest months of infancy. In his phantasies towards the analyst, the patient *is* back in his earliest days, and to follow these phantasies in

their context and understand them in detail is to gain solid knowledge of what actually went on in his mind as an infant.

### *Mental Life under Two Years of Age*

For the understanding of phantasy and other mental processes in children from the end of the second year onwards, we thus have not only all the evidence of observed behaviour in ordinary life, but also the full resources of the analytic method used directly.

When we turn to children under two years, we bring certain proved instruments of understanding to the study of their responses to stimuli, their spontaneous activities, their signs of affect, their play with people and with material objects, and all the varied aspects of their behaviour. First, we have those principles of observation already outlined—the value of observing context, of noting precise details, and of regarding the data observed at any one moment as being members of a series which can be traced backward to their rudimentary beginnings and forward to their more mature forms. Secondly, we have the insight gained from direct analytic experience into the mental processes so clearly expressed in similar types of behaviour (continuous with these earlier forms) in children of more than two years; above all, the evidence yielded by the repetition of situations, emotions, attitudes and phantasies in the 'transference' during analyses of older children and of adults.

Using these various instruments, it becomes possible to formulate certain hypotheses about the earliest phases of phantasy and of learning, of mental development generally, which can be credited with a considerable degree of probability. There are gaps in our understanding, and from the nature of the case, these may take time to remove. Nor are our inferences as certain as those regarding later development. But there is much which is definitely clear, and much more that only awaits further detailed observations, or more patient correlating of the observable facts, to yield a high degree of understanding.

## II. THE NATURE AND FUNCTION OF PHANTASY

To turn now to our main thesis:—

As has been said, it is on the basis of the convergence of these various lines of evidence that the present-day significance of the concept of phantasy is to be discussed. A consideration of all these sorts of fact and theory calls for a revision of the usages of the term.

### *Common Usages of the term 'Phantasy'*

Among psycho-analytic writers, the term has sometimes referred (in line with everyday language) only to *conscious* 'fantasies', of the nature of day-dreams. But Freud's discoveries soon led him to recognize the existence of *unconscious* phantasies. This reference of the word is indispensable. The English translators of Freud adopted a special spelling of the word 'phantasy', with the *ph*, in order to differentiate the psycho-analytical significance of the term, i.e. predominantly or entirely unconscious phantasies, from the popular word 'fantasy', meaning conscious day-dreams, fictions, and so on. The psycho-analytical term 'phantasy' essentially connotes *unconscious* mental content, which may or may not become conscious.

This meaning of the word has assumed a growing significance, particularly in consequence of the work of Melanie Klein on the early stages of development.

Again, the word 'phantasy' has often been used to mark a contrast to 'reality', the latter word being taken as identical with 'external' or 'material' or 'objective' facts. But when external reality is thus called 'objective' reality, this makes an implicit assumption which denies to psychical reality its *own objectivity as a mental fact*. Some analysts tend to contrast 'phantasy' with 'reality' in such a way as to undervalue the dynamic importance of phantasy. A related usage, very common in patients, is to think of 'phantasy' as something 'merely' or 'only' imagined, as something unreal, in contrast with what is actual, what *happens* to one. This kind of attitude tends towards a depreciation of psychical reality and of the significance of mental processes *as such*.



for the understanding of the human mind. When and under what conditions 'psychical reality' is in harmony with external reality is one special part of the total problem of understanding mental life as a whole: a very important part indeed; but, still, 'only' one part. (This will be touched upon at various later points, for example p. 90 *et seq.*)

Freud's discovery of *dynamic psychical reality* initiated a new epoch of psychological understanding.

He showed that the inner world of the mind has a continuous living reality of its own, with its own dynamic laws and characteristics, different from those of the external world. In order to understand the dream and the dreamer, his psychological history, his neurotic symptoms or his normal interests and character, we have to give up that prejudice in favour of external reality, and of our conscious orientations to it, that under-valuation of internal reality, which is the attitude of the ego in Western civilized life to-day.<sup>9</sup>

A further point, of importance in our general thesis, is that unconscious phantasy is fully active in the normal, no less than in the neurotic mind. It seems sometimes to be assumed that only in the 'neurotic' is psychical reality (i.e. unconscious phantasy) of paramount importance, and that with 'normal' people its significance is reduced to vanishing point. This view is not in accordance with the facts, as they are seen in the behaviour of ordinary people in daily life, or as observed through the medium of psycho-analytic work, notably in the transference. The difference between normal and abnormal lies in the way in which the unconscious phantasies are dealt with, the particular mental processes by means of which they are worked over and modified; and the degree of direct or indirect gratification in the real world and adaptation to it, which these favoured mechanisms allow.

### ***Phantasy as the Primary Content of Unconscious Mental Processes***

Thus far, we have been upon familiar ground. If, however, we bring recent clinical data into closer relation with certain formulations of Freud's, we take a definite step forward in understanding the function of phantasy.

A study of the conclusions arising from the analysis of young children leads to the view that phantasies are the primary content of unconscious mental processes. Freud did not formulate his views on this point in terms of phantasy, but it can be seen that such a formulation is in essential alignment with his contributions.

Freud has said that '... everything conscious has a preliminary unconscious stage. ...'<sup>10</sup>(1932). All mental processes originate in the unconscious and only under certain conditions become conscious. They arise either directly from instinctual needs or in response to external stimuli acting upon instinctual impulses. 'We suppose that it (the id) is somewhere in direct contact with somatic processes and takes over from them instinctual needs and gives them *mental expression*.'<sup>11</sup>(1933). (My italics.) 'We must say that the Ucs is continued into its so-called derivatives, is accessible to the influence of life, perpetually acts upon the Pcs, and even is, on its part, capable of influence by the latter system.'<sup>12</sup>(1915B).

Now in the view of the present writers, this 'mental expression' of instinct *is* unconscious phantasy. Phantasy is (in the first instance) the mental corollary, the psychic representative, of instinct. There is no impulse, no instinctual urge or response which is not experienced as unconscious phantasy.

In the beginning of his researches, Freud was concerned particularly with libidinal desires, and his 'mental expression of instinctual needs' would refer primarily to libidinal aims. His later studies, however, and those of many other workers, have required us to include destructive impulses as well.

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<sup>9</sup>E.g.: 'There is a most surprising characteristic of unconscious (repressed) processes to which every investigator accustoms himself only by exercising great self-control; it results from their entire disregard of the reality-test; thought-reality is placed on an equality with external actuality, wishes with fulfilment and occurrence. ... One must, however, never allow oneself to be misled into applying to the repressed creations of the mind the standards of reality; this might result in undervaluing the importance of phantasies in symptomformation on the ground that they are not actualities; or in deriving a neurotic sense of guilt from another source because there is no proof of actual committal of any crime.' (Freud: 'Formulations Regarding the Two Principles in Mental Functioning') (1911). 'An abandonment of the over-estimation of the property of consciousness is the indispensable preliminary to any genuine insight into the course of psychic events. ...' (Freud: *The Interpretation of Dreams*, p. 562) (1932).

<sup>10</sup>*The Interpretation of Dreams*, p. 562.

<sup>11</sup>*New Introductory Lectures*, p. 98.

The first mental processes, the psychic representatives of bodily impulses and feelings, i.e. of libidinal and destructive instincts, are to be regarded as the earliest beginning of phantasies. In the mental development of the infant, however, phantasy soon becomes also a means of defence against anxieties, a means of inhibiting and controlling instinctual urges and an expression of reparative wishes as well. The relation between phantasy and wish-fulfilment has always been emphasized; but our experience has shown, too, that most phantasies (like symptoms) also serve various other purposes as well as wish-fulfilment; e.g. denial, reassurance, omnipotent control, reparation, etc. It is, of course, true that, in a wider sense, all these mental processes which aim at diminishing instinctual tension, anxiety and guilt also serve the aim of wish-fulfilment; but it is useful to discriminate the specific modes of these different processes and their particular aims.

All impulses, all feelings, all modes of defence are experienced in phantasies which give them *mental* life and show their direction and purpose.

A phantasy represents the particular content of the urges or feelings (for example, wishes, fears, anxieties, triumphs, love or sorrow) dominating the mind at the moment. In early life, there is indeed a wealth of unconscious phantasies which take specific form in conjunction with the cathexis of particular bodily zones. Moreover, they rise and fall in complicated patterns according to the rise and fall and modulation of the primary instinct-impulses which they express. The world of phantasy shows the same protean and kaleidoscopic changes as the contents of a dream. These changes occur partly in response to external stimulation and partly as a result of the interplay between the primary instinctual urges themselves.

It may be useful at this point to give some examples of specific phantasies, without, however, discussing the particular age or time relations between these actual examples.

In attempting to give such examples of specific phantasies we are naturally obliged to put them into words; we cannot describe or discuss them without doing so. This is clearly not their original character and inevitably introduces a foreign element, one belonging to later phases of development, and to the preconscious mind. (Later on we shall discuss more fully the relation between phantasies and their verbal expression.)

On the basis of those principles of observation and interpretation, which have already been described and are well established by psycho-analytic work, we are able to conclude that when the child shows his desire for his mother's breast, he *experiences* this desire as a specific phantasy—'I want to suck the nipple'. If desire is very intense (perhaps on account of anxiety), he is likely to feel: 'I want to eat her all up.' Perhaps to avert the repetition of loss of her, or for his pleasure, he may feel: 'I want to keep her inside me.' If he is feeling fond, he may have the phantasy: 'I want to stroke her face, to pat and cuddle her.' At other times, when he is frustrated or provoked, his impulses may be of an aggressive character; he will experience these as, e.g.: 'I want to bite the breast; I want to tear her to bits.' Or if, e.g. urinary impulses are dominant, he may feel: 'I want to drown and burn her.' If anxiety is stirred by such aggressive wishes, he may phantasy: 'I myself shall be cut or bitten up by mother'; and when his anxiety refers to his internal object, the breast which has been eaten up and kept inside, he may want to eject her and feel: 'I want to throw her out of me.' When he feels loss and grief, he experiences, as Freud described: 'My mother has gone for ever.' He may feel: 'I want to bring her back, I must have her *now*', and then try to overcome his sense of loss and grief and helplessness by the phantasies expressed in auto-erotic satisfactions, such as thumb-sucking and genital play: 'If I suck my thumb, I feel she *is* back here with me, belonging to me and giving me pleasure.' If, after having in his phantasy attacked his mother and hurt and damaged her, libidinal wishes come up again, he may feel he wants to restore his mother and will then phantasy: 'I want to put the bits together again', 'I want to make her better', 'I want to feed her as she has fed me'; and so on and so forth.

Not merely do these phantasies appear and disappear according to changes in the instinctual urges stirred up by outer circumstances, they also exist together, side by side in the mind, even though they be contradictory; just as in a dream, mutually exclusive wishes may exist and be expressed together.

Not only so: these early mental processes have an omnipotent character. Under the pressure of instinct-tension, the child in his earliest days not only feels: 'I want to', but implicitly phantasies: 'I *am* doing' this and

that to his mother: 'I have her inside me', when he wants to. The wish and impulse, whether it be love or hate, libidinal or destructive, tends to be felt as actually fulfilling itself, whether with an external or an internal object. This is partly because of the overwhelmingness of his desires and feelings. In these earliest days, his own wishes and impulses fill the whole world at the time when they are felt. It is only slowly that he learns to distinguish between the wish and the deed, between external facts and his feelings about them. The degree of differentiation partly depends upon the stage of development reached at the time, and partly upon the momentary intensity of the desire or emotion.

This omnipotent character of early wishes and feelings links with Freud's views about hallucinatory satisfaction in the infant.

### **Hallucination and Primary Introjection**

Freud had been led (by his study of unconscious processes in the minds of adults) to assume that, in the beginning of mental life, '... whatever was thought of (desired) was simply imagined in a hallucinatory form, as still happens with our dream-thoughts every night'. This he calls the child's 'attempt at satisfaction by hallucination' (1911).

What, therefore, does the infant hallucinate? We may assume, since it is the oral impulse which is at work, first, the nipple, then the breast, and later, his mother as a whole person; and he hallucinates the nipple or the breast in order to enjoy it. As we can see from his behaviour (sucking movements, sucking his own lip or a little later his fingers, and so on), hallucination does not stop at the mere picture, but carries him on to what he is, in detail, going to do with the desired object which he imagines (phantasies) he has obtained. It seems probable that hallucination works best at times of less intense instinctual tension, perhaps when the infant half-awakes and first begins to be hungry, but still lies quiet. As tension increases, hunger and the wish to suck the breast becoming stronger, hallucination is liable to break down. The pain of frustration then stirs up a still stronger desire, viz. the wish to take the whole breast into himself and keep it there, as a source of satisfaction; and this in its turn will for a time omnipotently fulfil itself in belief, in hallucination. Thus we must assume that the incorporation of the breast is bound up with the earliest forms of the phantasy life. This hallucination of the internal satisfying breast may, however, break down altogether if frustration continues and hunger is not satisfied, instinct-tension proving too strong to be denied. Rage and violently aggressive feelings and phantasies will then dominate the mind, and necessitate some adaptation.

Let us consider further what Freud has to say about this situation.

He goes on: 'In so far as it is auto-erotic, the ego has no need of the outside world, but ... it cannot but for a time perceive instinctual stimuli as painful. Under the sway of the pleasure principle, there now takes place a further development. The objects presenting themselves, in so far as they are sources of pleasure, are absorbed by the ego into itself, "introjected" (according to an expression coined by Ferenczi): while, on the other hand, the ego thrusts forth upon the external world whatever within itself gives rise to pain (v. *infra*: the mechanism of projection)' (1915A).

Although in describing primary introjection, Freud does not use the phrase 'unconscious phantasy', it is clear that his concept accords with our assumption of the activity of unconscious phantasy in the earliest phase of life.

### **Difficulties in Early Development Arising from Phantasy**

Many of the familiar difficulties of the young infant (e.g. in feeding and excreting, or his phobias of strangers and anxiety of being left alone, etc.) can best be integrated with well-established analytic views, and their significance more fully understood, if they are seen as manifestations of early phantasy.

Freud commented on some of these difficulties. E.g. he referred to '... the situation of the infant when he is presented with a stranger instead of his mother'; and after speaking of the child's anxiety, added: '... the expression of his face and his reaction of crying indicate that he is feeling pain as well. ... As soon as he misses his mother he behaves as if he were never going to see her again.' Freud also referred to 'the infant's misunderstanding of the facts.

Now, by 'pain', Freud obviously does not here mean bodily, but *mental* pain; and mental pain has a content, a

meaning, and implies phantasy. On the view presented here, 'he behaves as if he were never going to see her again' means his phantasy is that his mother has been destroyed (by his own hate or greed)

- 85 -

and altogether lost. His awareness of her absence is profoundly coloured by his feelings towards her—his longing and intolerance of frustration, his hate and consequent anxieties. His 'misunderstanding of the situation' is that same 'subjective interpretation' of his perception of her absence which, as J. Riviere points out, is a characteristic of phantasy.

On another occasion, when speaking of oral frustrations, Freud says: 'It looks far more as if the desire of the child for its first form of nourishment is altogether insatiable, and as if it never got over the pain of losing the mother's breast. ... It is probable, too, that the fears of poisoning are connected with weaning. Poison is the nourishment that makes one ill. Perhaps, moreover, the child traces his early illnesses back to this frustration' (1933).

How would it be possible for the child to 'trace back his early illnesses to this frustration' unless at the time of the frustration he experienced it *in his mind*, retained it and later on remembered it unconsciously? At the time when he experiences the frustration, there is not merely a bodily happening but also a mental process, i.e. a phantasy—the phantasy of having a bad mother who inflicts pain and loss upon him. Freud says 'the fear of poisoning is probably connected with weaning'. He does not discuss this connection further; but it implies the existence of phantasies about a poisoning breast, such as Melanie Klein's work has shown (1932).

Again, when Freud speaks of the feelings the little girl has about her mother, he refers to the child's 'dread of being killed by the mother'.<sup>13</sup>

Now to speak of a 'dread of being killed by the mother' is obviously a way of describing the child's phantasy of a murderous mother. In our analytic work, we find that the phantasy of the 'murderous' mother supervenes upon that of the mother who is attacked with murderous intent by the child. Sometimes the phantasy of the vengeful mother may come to conscious expression in words later on, as in the small boy reported by Dr. Ernest Jones, who said of his mother's nipple when he saw her feeding a younger child: 'That's what you bit me with.' As we can confirm by analysis of the transference in every patient, what has happened here is that the child has projected his own oral aggressive wishes on to the object of those wishes, his mother's breast. In his phantasy which accompanies this projection, she (the mother or her breast) is now going to bite him to bits as he wanted to do to her.

### **Phantasies and Words**

We must now consider very briefly the relation between phantasies and words.

The primary phantasies, the representatives of the earliest impulses of desire and aggressiveness, are expressed in and dealt with by mental processes far removed from words and conscious relational thinking, and determined by the logic of emotion. At a later period, they may under certain conditions (sometimes in children's spontaneous play, sometimes only in analysis) become capable of being expressed in words.

There is a wealth of evidence to show that phantasies are active in the mind long before language has developed, and that even in the adult they continue to operate alongside and independently of words. Meanings, like feelings, are far older than speech, alike in racial and in childhood experience.

In childhood and in adult life, we live and feel, we phantasy and act far beyond our verbal meanings. E.g. some of our dreams show us what worlds of drama we can live through in visual terms alone. We know from dancing, acting, drawing, painting and sculpture and the whole world of art, what a wealth of implicit meaning can reside even in a shape, a colour, a line, a movement, a mass, a composition of form or colour, or of melody and harmony in music. In social life, too, we know from our own ready and intuitive response to other people's facial expression, tones of voice, gestures, etc.,<sup>14</sup> how much we appreciate directly without words, how much meaning is implicit in what we perceive, sometimes with never a word uttered, or even in spite of words uttered. These things, perceived and imagined and felt about, are the stuff of experience. Words are a means of *referring* to experience,

<sup>13</sup>These occasional references by Freud to phantasies in young children, quoted above, are examples of the way in which the intuitive insight of his genius, perforce scientifically unsupported and unexplained at the time, is being confirmed and made intelligible both by the work of certain of his followers, notably M. Klein, and by observations of behaviour.

<sup>14</sup>'When the lady drank to the gentleman only with her eyes, and he pledged with his, was there no conversation because there was neither noun nor verb?'—Samuel Butler.

- 84 -

actual or phantasied, but are not identical with it, not a substitute for it. Words may evoke feelings and images and actions, and point to situations; they do so by virtue of being signs of experience, not of being themselves the main material of experience.

Freud made quite clear, in more than one passage, his own view that words belong to the conscious mind only and not to the realm of unconscious feelings and phantasies. He spoke, e.g. of the fact that it is real objects and persons which we invest with love and interest, not their names<sup>15</sup>(1915B).

And of visual memory he wrote: '... it approximates more closely to unconscious processes than does thinking in words, and it is unquestionably older than the latter, both ontogenetically and phylogenetically.'

Perhaps the most convincing evidence of the activity of phantasy without words is that of hysterical *conversion symptoms*.<sup>16</sup> In these familiar neurotic symptoms, ill people revert to a primitive pre-verbal language, and make use of sensations, postures, gestures and visceral processes to express emotions and unconscious wishes or beliefs, i.e. phantasies. The psychogenic character of such bodily symptoms, first discovered by Freud and followed up by Ferenczi, has been confirmed by every analyst; their elucidation is a commonplace in the work with many types of patient. Each detail of the symptoms turns out to have a specific meaning, i.e. to express a specific phantasy; and the various shifts of form and intensity and bodily part affected reflect changes in phantasy, occurring in response to outer events or to inner pressures.

We are not, however, left to depend upon even such convincing general considerations from adults and older children, but can occasionally gather quite direct evidence from a young child that a particular phantasy may dominate his mind long before its content can be put into words.

As an example: a little girl of one year and eight months, with poor speech development, saw a shoe of her mother's from which the sole had come loose and was flapping about. The child was horrified, and screamed with terror. For about a week she would shrink away and scream if she saw her mother wearing any shoes at all, and for some time could only tolerate her mother's wearing a pair of brightly coloured house shoes. The particular offending pair was not worn for several months. The child gradually forgot about the terror, and let her mother wear any sort of shoes. At two years and eleven months, however (fifteen months later), she suddenly said to her mother in a frightened voice, 'Where are Mummy's broken shoes?' Her mother hastily said, fearing another screaming attack, that she had sent them away, and the child then commented: 'They might have eaten me right up.'

The flapping shoe was thus *seen* by the child as a threatening mouth, and responded to as such, at one year and eight months, even though the phantasy could not be put into words. Here, then, we have the clearest possible evidence that a phantasy can be felt, and felt as real, long before it can be expressed in words.

### **Phantasies and Sensory Experience**

Words, then, are a late development in our means of expressing the inner world of our phantasy. By the time a child can use words—even primitive words such as 'Baby o-o-oh'—he has already gone through a long and complicated history of psychic experience.

The first phantasied wish-fulfilment, the first 'hallucination', is bound up with *sensation*. Some pleasurable sensation (organ-pleasure) there must be, very early, if the baby is to survive. E.g. if, for one reason or another, the first sucking impulse does not lead to pleasurable satisfaction, acute anxiety is aroused in the infant. The sucking impulse itself may then tend to be inhibited or to be less well co-ordinated than it should. In extreme cases, there may be complete inhibition of feeding; in less marked instances, 'pining' and poor development. If, on the other hand, through a natural unity of rhythm between mother and child, or the skilful handling of any difficulties that may arise,

the infant is soon able to receive pleasurable satisfaction at the breast, good co-ordination of sucking and a positive attitude to the suckling process is set up which goes on

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<sup>15</sup>The system Ucs contains the thing-cathexes of the object, the first and true object-cathexes; the system Pcs originates in a hyper-cathexis of this concrete idea by a linking up of it with the verbal ideas of the words corresponding to it. It is such hyper-cathexes, we may suppose, that bring about higher organization in the mind and make it possible for the primary process to be succeeded by the secondary process which dominates Pcs.' ('The Unconscious', *Collected Papers*, IV, pp. 133-4, 1915 B).

<sup>16</sup>Dr. Sylvia Payne pointed out this connection in a discussion on this subject at the B.Ps-An.Soc. January 27, 1943.

- 85 -

automatically thereafter, and fosters life and health (1941). Changes of contact and temperature, the inrush of sound and light stimulation, etc., are manifestly felt as painful. The inner stimuli of hunger and desire for contact with the mother's body are painful, too. But sensations of warmth, the desired contact, satisfaction in sucking, freedom from outer stimulus, etc., soon bring actual experience of pleasurable sensation. At first, the whole weight of wish and phantasy is borne by sensation and affect. The hungry or longing or distressed infant feels actual sensations in his mouth or his limbs or his viscera, which *mean to him* that certain things are being done to him or that he is doing such and such as he wishes, or fears. He *feels as if* he were doing so and so—e.g. reaching or sucking or biting the breast which is actually out of reach, or as if he were being forcibly and painfully deprived of the breast, or as if *it* were biting *him*. And all this at first, probably without visual or other plastic images.

Interesting material bearing upon this point is offered by Middlemore, from the analysis of a girl of two years nine months, who was treated for severe feeding difficulties. In her play, both at home and during her analysis, she was continually biting. 'Among other things she pretended to be a biting dog, a crocodile, a lion, a pair of scissors that could cut up cups, a mincing machine and a machine for grinding cement.' Her unconscious phantasies and conscious imaginative play were thus of an intensely destructive nature. In actuality, she had from birth refused to suck the breast, and her mother had had to give up the attempt to breast-feed her because of the infant's complete lack of interest and response. When she came to analysis, she was eating very little and never without persuasion. She had thus had no experience of actually 'attacking' the breast, not even in sucking, let alone in biting as the animals did whose fierce attacks she played out. Middlemore suggests that the bodily sensations, i.e. the pangs of hunger, which disturbed the infant were the source of these fierce phantasies of biting and being bitten<sup>17</sup>(1941).

The earliest phantasies, then, spring from bodily impulses and are interwoven with bodily sensations and affects. They express primarily an internal and subjective reality, yet from the beginning they are bound up with an actual, however limited and narrow, experience of objective reality.

The first bodily experiences begin to build up the first memories, and external realities are progressively woven into the texture of phantasy. Before long, the child's phantasies are able to draw upon plastic images as well as sensations—visual, auditory, kinæsthetic, touch, taste, smell images, etc. And these plastic images and dramatic representations of phantasy are progressively elaborated along with articulated perceptions of the external world.

Phantasies do not, however, take *origin* in articulated knowledge of the external world; their source is internal, in the instinctual impulses.

E.g. the inhibitions of feeding sometimes appearing in quite young infants, and very commonly in children after weaning and in the second year, turn out (in later analysis) to arise from the anxieties connected with the primary oral wishes of intense greedy love and hate: the dread of destroying (by tearing to bits and devouring) the very object of love, the breast that is so much valued and desired.

It has sometimes been suggested that unconscious phantasies such as that of 'tearing to bits' would not arise in the child's mind before he had gained the conscious knowledge that tearing a person to bits would mean killing them. Such a view does not meet the case. It overlooks the fact that such knowledge is *inherent* in bodily impulses as a vehicle of instinct, in the excitation of the organ, i.e. in this case, the mouth.

The phantasy that his passionate impulses