# 'THE DUNGEON OF THYSELF':

The Claustrum as Pathological Container

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The author discusses the claustrum as an aspect of pathological containment within inner space and its relation to Bion's (1962a, b) container—contained concept. Having outlined the early psychoanalytic conceptual foundations of claustrophobia and the claustrum, the author charts the term from its introduction by Erikson in 1937 through its divergent developmental trajectories within the conceptual vocabulary of the classical, Independent and Kleinian schools up to Meltzer's (1992) contemporary reworking. The vicissitudes of the transmission of ideas within and between these groups is stressed, Esther Bick's work being particularly highlighted as an example of a nodal intellectual influence. The claustral space within the physical or internal object body, its internal structuralisation, and the impairments in quality of psychic life of the selves that seek to inhabit such spaces, entered through intrusive projective identification, are highlighted. Developmental and psychopathological claustrum manifestations are discussed, particularly fear, separation, problems mourning and claustrophobia. A reciprocal and hierarchical avatar relation between the claustrum and the container is proposed.

The concept of the container, particularly as developed by Bion (1959, 1962a, 1962b) has had a profound influence on psychoanalytic thinking over the last forty years. In his formulation Bion, using projective identification (Klein, 1946) as a model of primitive thinking, depicts the distressed infant being soothed by its loving and receptive mother, which experience and function it can subsequently internalise to develop its own capacity for thinking and tolerance of feelings. Commenting on this metaphor Bion writes:

From the above theory I shall abstract for use as a model the idea of a container into which an object is projected and the object that can be projected into the container; the latter I shall designate by the term contained. The unsatisfactory nature of both terms points to the need for further abstraction. (Bion, 1962b, p. 90; my italics).

In his subsequent work Bion pursued the continued abstraction of this idea, using a range of imported signifiers. Interpolating these into the container-contained  $( \bigcirc_{\mathcal{O}} )$ 

model it becomes one where in phantasy, bad feelings ( $\beta$  [beta] elements) are projected into the good breast container ( $\mathfrak{Q}$ ), contained (3) and detoxified there  $[T\alpha]$  by the receptive (reverie) mother's love and understanding ( $\alpha$  [alpha]-function) and reintrojected in their modified ( $\alpha$  [alpha] element) and hence useable form. For Bion the product of the container-contained relation is meaning, its relative 'benignity' depending on the nature of the dynamic link L(ove), H(ate) or K(nowledge) [libidinal, aggressive and epistemobetween philic drives container contained (Bion, 1963).

In contrast to the abstract symbolic generative notion of the container—contained is the anti-developmental concrete retreat that is the claustrum. Like the concept of the container it has attained increasing currency across diverse psychoanalytic traditions. In each, it has evolved its own distinctive—though overlapping and mutually influential—conceptual identities. The term's common ground centres on a notion of a

boundaried inner space, the prototype of which is that within the primary object, into or out of which the subject desires passage. Such phantasies have been regarded as fundamental in claustrophobic and claustrophilic psychopathology. The vicissitudes of the term as it has appeared, been lost and reappeared within the history of psychoanalysis has contributed to an often fragmentary awareness of this heritage. In addition, it is noteworthy that serious consideration of the relationship between the claustrum and the container has been largely absent. The present paper brings together the differing manifestations of the concept of the claustrum as employed within the Classical, Independent and Kleinian schools, tracing these in the psychoanalytic literature up to Meltzer's (1992) contemporary reworking. Then I shall propose a new and specific connection to the container, arguing that the claustrum is its Gothic avatar.

#### BACKGROUND

Etymologically 'claustrum' is a Latinate term, signifying a fence, barrier or, more particularly, the space it encloses. It remains in use today within neuro-anatomy. Cloister, a common derivative of the original term, describes the sequestered living space of a monastery. Thus, semantically the term carries overtones not only of a boundaried living area, but also of a certain metaphysical and moral status: sanctity for adherents or narrow-mindedness and delusion (a narcissistic state) for external critics. By analogy Chaucer and others until the sixteenth century used 'cloister' as a synonym for the womb, prefiguring concretely in part its contemporary Meltzerian signification. The notion of a 'cloister' in conjunction with 'phobia' formed the roots of the term 'claustrophobia' within the psychological nosology, coined in 1871 by Raggi (Lewin, 1935) and introduced into the English language literature by Benjamin Ball (1879).

# Early psychoanalytic ancestry of the claustrum

Thoughts that hypothetically reflected intra-uterine and birth experiences, together with wishes to return to or avoid these or analogous states, have been prevalent within psychoanalytic narratives, Freud regarding them as a species of primal phantasy (Laplanche & Pontalis, 1973). The nature of the phantasy (a correlate of wish or desire), or the degree of cathexis or anticathexis, that attached to this bodily or psychic space assumed for Freud the role of a mediator for psychic development and psychopathology. Internal conflict could thus become a phobia through its displacement on to the external environment.

Thus, in *The Interpretation of Dreams* (1900) Freud writes that phantasies of intrauterine life 'contain an explanation of the remarkable dread that many people have of being buried alive ... *Moreover, the act of birth is the first experience of anxiety, and thus the source and prototype of the affect of anxiety*' (Freud, 1900, p. 400). Jones took these ideas up emphasising that both the actual birth experience and its subsequent representation in dreams and phantasies constituted 'the basis of such phobias as those of being buried alive, of being shut in an enclosed space (claustrophobia), and many others' (1912, p. 256).

Later, Freud (1916–17) added that separation from the mother is the determinant of anxiety including that experienced at birth, a view he then (Freud, 1926) accorded primacy; birth, separation and castration all being seen as danger situations involving involuntary separation from mother and hence evoking signal anxiety. Castration is here regarded as the loss of the capacity to become reunited with mother, via loss of the penis in boys and loss of love in girls, while intra-uterine phantasies are, Freud (1926) argues, incest phantasies of the sexually inhibited. Freud linked the latter view with Ferenczi, who previously had suggested that

claustrophobia could be regarded as a defence against the wish to return to the womb (Ferenczi, 1922).

Sexual drives, intercourse and the Oedipus complex may, given the above, all be regarded as involving claustrophilic-claustroseparation dynamics elements. What is wished for is freedom of, or the object's acquiescence to, both exclusive access and egress, with separation being related to the involuntary loss (castration) of this oedipal (linking) capacity by an intruding third. Development and inner freedom however rests on the oedipal capacity to sustain a triangular space, created through an acceptance of both the paternal third, a creative parental couple independent of the child, and the child's differentiated relationships to each parent (Britton, 1989). These ideas continued to exert an influence as Freud struggled towards a more symbolic inner world psychological perspective, as exemplified by his ideas on melancholia (1917), the 'fort-da' game (1920) and the superego as part of the second topography (1923).

Others took this development up and the resultant proliferation of psychoanalytic theory fostered its bifurcation into divergent though not wholly segregated schools. As a consequence, concepts, such as the claustrum and related accounts of claustrophobia, developed distinctive local identities. In Britain such developments centred on Melanie Klein, her followers and the Independents, and it is to them that I shall now turn before considering further developments that arose in America within ego-psychology.

### Britain, Kleinians and Independents

Psychoanalysis from its beginnings in Britain has had a distinctive free-thinking tradition, with prominence given to early development and object relations, the latter for some theorists being seen as existing from the earliest days postpartum and thus rendering primary narcissism obsolete. One result of this was an increasingly rich con-

ceptualisation of the inner world, one that differed significantly from that held within ego-psychology. Ernest Jones, Klein's mentor in the British Society, contributed to this development directly in his description of the young child's views on the actual mother's anatomy and the reproductive process. In the absence of knowledge, the young child's curiosity about the mother's insides and its processes leads to various phantasies, chief among which is the idea that 'the abdomen [is] merely a bag of undifferentiated contents into which food goes and out of which faeces [and babies] come' (Jones, 1918, p. 694). This, together with a lack of differentiation between the anus and the vagina, vields both the 'cloacal' theory of birth (Jones, 1918) and the undifferentiated value placed on different body products, such as faeces and babies. Both are initially highly esteemed. It is through learning from experience that structure and dimension develop, with distinct compartments and their contents, affectively hued, emerging from this primordial claustrum.

The external mother's mysterious body claustrum corresponded roughly to the classical position, constituted as it was through the operation of consciously articulable phantasy, which remitted gradually with the subject's increasing knowledge and adaptation to reality. In Britain, however, the inner world of unconscious phantasy, its objects constituted partly through internalisation of imagos, came to be seen as qualitatively different; continuously active, concrete, dynamic, primitive and without serious susceptibility to adaptation to external reality. Klein and Fairbairn largely independently contributed to this distinctive conceptualisation, an inner world both saw as beset with claustral anxieties and phantasies.

In *The Psychoanalysis of Children* (1932) Klein, drawing on Freud's (1926) ideas about early anxiety situations, argues that when phantasies of the hostile combined parental figure predominate a boy's infantile castration anxiety can involve terror of having the

penis not only castrated but also retained within the mother's body. There is no body to mourn. Klein contends that inhibitions in development can result, which may include:

... various forms of claustrophobia. It seems certain that claustrophobia goes back to the fear of being shut up inside the mother's dangerous body. In the particular dread of not being able to extricate the penis from the mother's body it would seem that this fear has been narrowed down to a fear on behalf of the penis (1932, p. 242).

Here Klein followed Freud's views on phobias as a phenomenon generated by phallic level castration anxieties, consequent to sadism, longing and exploratory curiosity (the epistemophilic instinct) directed towards the mother-and-her-insides, its primary object. Transposition on to external world objects and situations through progressive symbolic equations, Klein (1930) argues, occurs as the epistemophilic instinct's original object becomes overly saturated with inhibiting persecutory anxiety. The external world thus becomes an attenuated substitute source for epistemophilic conquest and gratification, motivated by degrees of primary claustrophobic anxiety (frustration) within the inner world. Conversely, claustrophilic tendencies, particularly when combined with marked anxiety about destructiveness, can stifle development, a thesis Klein illustrated with material from her patient, Dick. His extreme inhibition and autistic-like withdrawal manifested his psychically taking 'refuge in the phantasies of the dark, empty mother's body' (Klein, 1930, p. 227) after depositing its fearful contents along with his own destructiveness into the outside world.

In 'Notes on some schizoid mechanisms' Klein depicts projective identification primarily as an unconscious phantasy in which sadistic omnipotent intrusion into the object is occasioned by means of 'harmful excrements, expelled in hatred [together with] split-off parts of the ego ... [intended] not only to injure but also to control and to take possession of the object' (1946, p. 8). One

result of this is a loss of differentiation between self and object, identity confusion. Klein then specifically related projective identification to claustrophobia. 'Unconscious phantasies' she writes, 'of forcing the whole self into the inside of the object (to obtain control and possession) led, through the fear of retaliation, to a variety of persecutory anxieties such as claustrophobia ...' (1946, p. 12). This use of projective identification here loosened the biological specificity of the debate (excrements are after all gender neutral) and thus created a unified phantasy to underlie claustrophobia in both sexes.

In 1955 Klein returned to a consideration of claustrophobia, firstly recapitulating her earlier ideas in 'The psycho-analytic play technique' (Klein, 1955a). Then in 'On identification' (1955b) Klein, whilst discussing Julian Green's novel *If I Were You*, develops her argument significantly. She suggests that:

... projective identification may result in the fear that the lost part of the self will never be recovered because it is buried in the object. In the story Fabian feels—after both his transformation into Poujars and into Fruges—that he is entombed and will never escape again. This implies that he will die inside his objects. There is another point I wish to mention here: besides the fear of being imprisoned inside the mother, I have found that another contributory factor to claustrophobia is the fear relating to the inside of one's own body and the dangers threatening there. To quote Milton's lines, 'Thou art become (O worst imprisonment) the dungeon of thyself' (1955b, p. 166).

The twin danger sources described, of entrapment in one's object or one's own body, are connected by Klein in her final paper 'On the sense of loneliness', wherein she writes that claustrophobia 'derives from two main sources: projective identification into the mother leading to an anxiety of imprisonment inside her; and reintrojection resulting in a feeling that inside oneself one is hemmed in by resentful internal objects' (1963, p. 308).

Post-Kleinian developments have been

profoundly influenced by the work of Bion, his interrelated views on the containercontained relation as detailed earlier and his distinction between pathological (intrusive, evacuatory) and normal (communicative) modes of projective identification (Bion, 1959, 1962a, 1962b) being particularly relevant here. Considering claustrophobia specifically, Bion (1965) linked it with agoraphobia and suggested that the differences between these states are apparent rather than real. The invariant was 'space', representing 'emotions which are felt to be indistinguishable from the place where the thing was' (1965, p. 124). Space, or its absence, is thus experienced as identical with the bad object, the no-breast present. The experience is, for the claustrophobic, productive of phobic symptoms through projective identification into the environment, rather than being productive of thought, due to an intolerance of frustration (Bion, 1962a). Mourning and consequently symbolisation are impaired. Mason (1981), arguing that claustrophobia can be a defence against psychosis, took this up insightfully in his discussion of the primitive suffocating superego, the outward projection of which renders its receiving claustrum claustrophobic.

Among the British Independents, apart from some early case histories of claustrophobic patients (e.g. Rivers, 1917; Miller, 1930), Fairbairn's work in this area has had a profound influence. His conclusions, couched in terms of object relations, tally in important respects with the independent work of the Kleinians, Fairbairn (1941) placed the origins of claustrophobia within the stage of 'transitional' or 'quasiindependence', between infantile and mature dependence. Struggling between developmental urges towards separation from primitive relating through primary identification with the object and the regressive pull of such identification, Fairbairn saw the self as oscillating between fears of engulfment or confinement and isolation, or between claustrophobia and agoraphobia. As oral incorporation shadows identification in characterising infantile dependence, the inner world becomes populated by claustral objects, variously phobic and philic in aspect. The claustrophobic self, according to Fairbairn, remains more or less vulnerable to the idea that it will be trapped with its primary object, thus subject—object differentiation can be complicated as 'the object in which the individual is incorporated is incorporated in the individual' (1941, pp. 42–43). In this manner, as the object is incorporated the claustrum is internalised.

Claustrophobia theory subsequently attained a certain valency within British psychoanalysis, it being employed as a phenomenon around which development and psychopathology, particularly schizoid and borderline conditions, could be conceptualised. Central to these developments were Guntrip (1961, 1968), who explicated Fairbairn's work, and later Rev (1994), who linked Guntrip's work with that of Klein in developing his seminal ideas on claustroagoraphobia and claustro-agoraphobiaphilia. The idea of the claustrum itself, however, was something that neither clinician took up, their emphasis being on dynamic processes rather than internal geography.

### American developments: Erikson and Lewin

Whilst the concepts of claustrophobia, the inner world and object relations were initially European developments, the closely related notion of the claustrum first emerged within American ego-psychology. Erikson introduced the term into the psychoanalytic nomenclature in his paper 'Configurations in play-clinical notes' (Homburger, 1937). Erikson discusses the spatial existence of children's play as a characteristic that differentiates it from language and proceeds to articulate associated ideas about inner space. After a passing reference to an 8-year-old boy, E, who viewed 'the female body as a claustrum' (1937, p. 152) Erikson discusses the idea in more depth, writing:

The phallic phase, last of the ambivalent stages, leads the child into a maze of 'claustrum' fantasies, in which some children—for a longer or shorter time—get hopelessly lost. They want to touch, enter and know the secrets of all interiors but are frightened of dark rooms and dream of jails and tombs. As they flee the claustrum they would like to hide in mother's arms; fleeing their own disturbing impulses toward the mother's body they escape into wilful acts of displaced violence, only to be restricted and 'jailed' again. The mother's body into which the baby wanted to retreat in order to find food, rest, sleep, and protection from the dangerous world, becomes in the phallic phase the dangerous world, the very object and symbol of aggressive conquest (Homburger, 1937, pp. 171–172).

Continuing, Erikson differentiates the male and female developmental trajectories within this phase, highlighting boys' predominant externalising and intrusive mode 'while to the girl, her own body's claustrum offers a vague promise and new dangers' (p. 172). Erikson's introduction of the term, however, failed to catch on at the time and it would lie dormant for fifteen years before re-emerging in the psychoanalytic literature, this time in the work of Bertram Lewin.

Lewin in a series of influential works (1933, 1935, 1950, 1952, 1953) investigated ideas of inner space and particularly claustrophobic and dream phenomena (for an introduction to his work see Arlow, 1973a, 1973b). He drew widely on the existing literature and appreciatively quotes Klein (1932) (Lewin, 1935). Like Erikson, he emphasises phallic level (castration) anxieties as characterising claustrophobia. In his early work Lewin (1933, 1935) privileges oral incorporation as a passive means by which a return to a safe anxiety-relieving 'intracorporal' status can be achieved in phantasy, displacing the father and rival siblings in the process. Lewin stresses the defensive nature of the phantasy, in which the self is either equated with the penis or the foetus, anxiety only arising with the prospect of eviction by the intruding paternal penis or the act of birth. The basis of the claustrum phantasy, Lewin (1950) later argues, originates in the infantile 'oral triad', which consists of wishes to devour, be devoured and to sleep, which wishes arise in the nursing situation (rather than being vestigial memories of actual pre-natal states). Being moved from the breast to the lap stimulated wishes in the infant to be within the mother, wherein the infant could continue to feed or sleep uninterrupted. In phantasy this is achieved either by being swallowed or actively 'gnawing' into the mother.

Although Lewin continued to accept Freud's thesis that phobias were primarily determined by oedipal and phallic stage dynamics, he latterly proposed that pregenital (particularly oral) components were also discernibly influential (Lewin, 1952). At this point Lewin begins to employ 'claustrum' as a term and, although not citing Erikson, it appears likely, since they had an overlapping publishing history in the Psychoanalytic Quarterly, that he was influenced by his colleague's earlier work. Using Freud's (1916-17) idea that phobic facades are equivalent to a dream's manifest content, Lewin argues that just as a dream symbol may represent differing latent thoughts the claustrum (while it invariably signifies the maternal intracorporal situation) may carry differing ideational and affective loads. The locus of fear may be inside or outside the claustrum, while dialectally the locus of desire (or safety) occupies the reciprocal position. Illustrating this, Lewin writes that:

The intraclaustral situation may be a place of wakefulness and starvation; but if the claustrum is affectively toned by the associated idea of a quiet uterus, a good breast, or peaceful sleep, it is a haven and a place that can be used in the construction of defense mechanisms, so that it becomes a natural refuge. The claustrum in this case is not the projection of a danger; the danger is projected elsewhere, and to the claustrum is projected the warding-off function, i.e., a part of the ego's defensive function (1952, p. 307).

Thus, in the phobic organisation Lewin's claustrum can have multiple functions, often determined by pre-oedipal dynamics,

especially the wish to sleep at the breast (as one element of the oral triad). He suggests that the relative capacity to sleep within a state of secure object dependency can be seen as a marker of an individual's state of mind vis-à-vis the claustrum. Lewin couches this as an 'empirical rule' writing:

Contentment in or acceptance of the claustrum as a place of safety implies the ability to find solace or gratification in sleep as a satisfactory substitute for the protective and preoedipal mother. This may be and often is connected with a corresponding denial of dissatisfaction with her. On the other hand, anxiety over being within the claustrum implies that this fantasy of rest is not attainable because of a disturbance in the relation to the mother, and sleep cannot serve as an equivalent of good mother or good breast (1952, p. 311).

The latter idea was subsequently extended by Lewin (1953) as part of a revision of his concept of the dream screen. In the neurotic character, Lewin suggests, anxieties about fusion with the breast transform it into a claustrum, the phobic's dream screen. Emphasising the breast's oral aspects, Lewin notes that it 'is the first projected "eating up" organ which the baby knows, when it envelops him and puts him to sleep' (Lewin, 1953, p. 194).

Lewin's use of the claustrum was quickly and widely taken up in American psychoanalysis. The concept was usefully applied to, among other areas, addictions (Wurmser, 1980), depression (Gehl, 1964; Asch, 1966), indecision (Gehl, 1973), psychosomatic conditions (Jessner et al., 1955) and sibling phantasies (Arlow, 1960, 1972). I shall here, for reasons of space, limit discussion to the contributions by Gehl (1964, 1973). He (Gehl, 1964) suggests the claustrum functions as a receptacle into which conflict can be projected and thus isolated (paralleling the transitional object acting as a container for more positive feelings), with depression following on the breakdown of this strategy. Claustral isolation, however, entails being subject to 'oral, anal, and phallic attacks; to

be eaten, separated, poisoned, suffocated, buried alive, and castrated' (1964, p. 318; see also Ostow, 1955). Gehl emphasises that with claustrophobic states physical mobility lessens the phobic anxiety. Later Gehl (1973) took up this idea from a slightly different vertex, discussing how indecision (a sort of mental 'mobility') can preserve the self from commitment and thus claustral confinement. Gehl's emphasis on the phase- and zonespecific nature of phantasy, resulting in the claustrum having similar oral, anal and phallic components (relative fixation at one or other of these determining the predominant phantasy), reflected increasing American interest in primitive states of mind. Together with the phase-specific claustrum phantasies, this arguably moves closer to the Kleinian thinking of Bick and Meltzer, to which I shall now turn.

## Esther Bick's neglected contribution

Whilst the notion of the claustrum can be seen to have its *conceptual* origins in the work of Freud, Klein and Fairbairn, and the *term* itself emanated from Erikson followed by Lewin, Esther Bick appears to have been the proximate, and perhaps least appreciated, link to the concept's contemporary use by Meltzer. Taking the term apparently from Lewin (1952) Bick incorporated it within her 1953 British Psychoanalytical Society Membership paper (Bick, 2001) and began to give it a distinctive Kleinian hue. Given its importance in the conceptual development of the claustrum and its hitherto neglected status I shall describe it here in some detail.

Bick's patient, a 37-year-old woman, who presented with pervasive disabling phobic states (including claustrophobia) and intrusive suicidal thoughts, was five years into her second analysis, conducted four times a week and then extended, after two years, to five times a week. The patient's marriage was unconsummated due to her marked fear that intercourse would result in her 'small' insides being 'shattered'.

In the second year of the analysis, during the Christmas break, the patient became acutely anxious, feeling unable to breathe or drink. Bick argued that these symptoms derived from difficulties co-ordinating breathing with feeding at the breast, which became experienced as a claustrum, associated with the maternal claustrum. Introjection of the breast resulted in incorporation of not only its nourishing but also its suffocating qualities. Containment was thus linked with confinement. The patient attempted to manage the latter through projection, as Bick describes:

The breast which suffocated my patient from within was the internal breast claustrum containing the substances of the object she felt she sucked out, the air and the milk. The [suffocating] breast claustrum she projected [for example] into ... [a] garment when she pulled it over her head, because she felt there was no air or bad air in it ... [or into] running water in washing her hair because she felt there was too much water or bad water. The water stood for milk (2001, p. 13).

Bick then went on to detail other claustra and their projective relationship to specific 'hooks' in the environment:

The inside of the body, the womb claustrum which contained the parental genitals in intercourse she projected into theatres, cinemas, etc. The uterus as a claustrum was described by Jones and Ferenczi. The head claustrum with the mad thoughts in it she projected into books and any reading matter. The fears, symptoms and inhibitions were related to the organs and substances with which she felt she attacked her mother's breast and body (2001, p. 18).

Bick makes it clear that for her patient the claustrum is a 'lavatory' container specifically for evacuation of unwanted part objects previously taken from mother, which now are unsustainable, have degenerated into detritus, or are otherwise persecutory. Using dream material Bick shows that 'the cavities are to [the patient] lavatories filled with the cut out and introjected bits of her mother's breast and body and the parental genitals in intercourse. In projection they became her claus-

tra' (2001, p. 14). In her summary Bick indicates a tripartite claustral structure. Thus she argues that her patient's (oral and anal) aggressive and appropriating relation to the primary object, the mother-and-her-bodilycontents, makes it 'into a body containing three cavities: the breast, the womb [and] the head claustra. These were emptied of the good contents and filled with bad ones. Through introjective and projective processes they became her internal and external claustra' (Bick, 2001, p. 19). This early work by Bick regrettably attracted little direct attention until recently (Willoughby, 2001), although, as I shall suggest below, it did find a contemporary re-emergence and development in the writings of Bick's supervisee and colleague Donald Meltzer.

Before turning to his work, however, it is pertinent to here briefly consider Bick's (1968, 1986) later work. She had argued in her 1953 paper (Bick, 2001) that catastrophic anxieties evoked by thoughts of sexual intercourse—during which there is a convergence of both internal and external dangers entailing destruction of both self and object—were countered by 'a defence of immobility, of suspension'. This, I suggest, contributed to her thinking about the psychic functions of skin and second-skin phenomena (Bick, 1968). Bick (1968), now using Bion's (1962b) concept of the container (and without again mentioning the term claustrum), argued that a sense of self-cohesion in the primary unintegrated state is acquired through introjection of and then identification with an external containing object, concretely experienced as skin. This containing skin is initially an amalgam of that of both self and mother, passively experienced, which, when incorporated, 'gives rise to the fantasy of internal and external spaces' (Bick, 1968, p. 484) and hence facilitates development, through the normal cycles of projection, containment and introjection. Failure to adequately introject a containing skin object encourages, under pressure from catastrophic anxieties about fragmentation,

active self-containment through muscular second-skin formations (Bick, 1968), including adhesive identity (Bick, 1986; Meltzer, 1974, 1986). This, Bick argued, can lead to pseudo-independence and pseudo-maturity, brittle self-containment replacing appropriate dependency and 'identification with a containing object' (Bick, 1968). This brings the discussion now to Meltzer's work.

## Meltzerian developments

Meltzer, when still a candidate, had begun to employ the notion of a 'compartmentalised life-space' (Meltzer, 1955), an idea he subsequently developed with Bick at the Tavistock Clinic (Meltzer & Bick, 1960) into the idea of a geography of object relationships. Thus they write:

The geography of the life-space of the child and the unconscious is really in four layers. There is (1) the outside world, (2) the inside of his objects in the outside world, (3) the inside world, and (4) the inside of his objects in the inside world. In order to understand the child's material thoroughly, we must distinguish whether the object relationship we are seeing is going on inside an object or outside it, and whether that field of action is in the inner or outer world (Meltzer & Bick, 1960, pp. 39–40).

Later, Meltzer (1976) would add a fifth layer to this geography: the 'no-where' of ther delusional system. Using these layers Meltzer and Bick proceed to describe how intellectual inhibition and claustrophobic anxieties can present consequent to object relating via total projective identification (see, for example, Meltzer & Bick, 1960, pp. 49, 73 and 74).

In his subsequent writings Meltzer progressively built on these foundations, elaborating the nature of life-spaces, particularly inside the internal object, as predominantly occurring during borderline psychotic states. Key in this development is his 1965 Amsterdam Congress paper (Meltzer, 1966) in which Meltzer describes how pseudo maturity can originate from infantile projective

identification into the idealised phantasy world of the maternal rectum, a secret intrusion facilitated by anal masturbation, mobilised as a defence against the experience of separation, dependency and difference. Following this Meltzer emphasises sorting out geographical confusions as part of the psychoanalytical process (Meltzer, 1967a) and delineates the geography of the internal maternal object, a topography necessitated by primitive needs to separate good and bad: excreta and milk. An initial 'toilet-breast' (Meltzer, 1967a) container is succeeded by 'three delimited spaces, top, front-bottom and back-bottom, corresponding to breast, genital and rectum' (Meltzer, 1967b, p. 68). This tripartite distinction becomes an inestablished phenomenological creasingly feature within Meltzer's work over the ensuing thirty years, a particularly vivid description appearing in his OECD report wherein he writes that:

Because the most common object of such intrusion is the internal mother, and because her body tends to be divided into three great regions, three realms of emotionality of near theological significance can be seen to emerge distinct from one another: (1) a heaven of bliss inside the breasts; (2) a garden of sexuality and reproduction in her genitals; and (3) a most attractive hell of perversity and sado-masochism in her rectum (Meltzer & Harris, 1976, p. 408).

Despite these attractions, exiting the claustrum is possible given a favourable cost-benefit balance between intra- and extra-claustral life and 'at least one person interested enough to seek him out in his claustrum' (Meltzer & Harris, 1976, p. 408).

In introducing the term 'claustrum' into his own writings, apparently initially in his essay on Pinter's *The Birthday Party* (Meltzer, 1971), Meltzer depicts it as a refuge for infantile parts of the personality from mental pain and individuation. Entry therein, via intrusive projective identification, is the negative of birth, and leaves the self sequestered from life and help and potentially prone to recruitment and corruption by

delusional and destructive forces; dynamics reminiscent of the rather more structured pathological organisations, elegantly conceptualised elsewhere by Rosenfeld (1971) and Steiner (1993) amongst others.

Meltzer's source of the term claustrum was, I suggest, Esther Bick, who was deeply influential on his thinking, although he does not recall her use of this term (Meltzer, personal communication, 14 September 2000). Their close collaboration and the structural similarities between their uses of the concept suggest a probable line of (unconscious) intellectual influence that facilitated Meltzer's serious development of the concept. An auxiliary link in this intellectual history is Martha Harris, who was closely associated with both Bick and Meltzer. Harris describes one of her patients as having a 'fear of the analysis as a claustrum. the dreaded interior of the mother's body' (c. 1960, p. 86). Harris probably derived this idea from her senior colleague's previous paper, while her own is likely to have been read by Meltzer.

During the 1970s Meltzer and various colleagues working with autistic children highlighted the importance of dimensionality in mental functioning, *depth* being a prerequisite for whole objects, containment and effective projective identification (Meltzer et al., 1975). Without a three-dimensional object-container or where this is impaired, mindlessness (as in Meltzer's account of autism) or at least shallowness is pervasive. What relating there is utilises mechanisms such as adhesive identification; a defensive clinging on to the outer surfaces of objects (Meltzer, 1974; Bick, 1986).

The publication of *The Claustrum* in 1992 represented a state-of-the-nation account of Meltzer's work on the phenomena. Donald Meltzer himself said that this book was 'the crowning achievement of my professional life' (1996). Meltzer recapitulates that his primary focus is on the claustrum and the essentially infantile parts of the personality that have *intrusively* penetrated it, whether

by stealth, violence or trickery. Thus he omits discussion of object penetration occurring through passive induction; conceptualisations of the object's interior achieved through non-intrusive imagination; and knowledge attained through object relations based on consensual mutuality entailing respect for the object's essential privacy. The intrusiveness entails both the identificatory and projective (and hence claustrophobic) aspects of claustral life and renders it inimical to development. Externally perceived by the infantile self as desirable habitations, claustra become, when intrusively entered, prisons of one sort or another. The external perception when compared to the internal experirealisation appears a profound misrecognition (Money-Kyrle, 1968), which continues narcissistically in the self's depressive failure to own its original intrusiveness. This failure of insight (Bion, 1961, p. 149) then characterises intra-claustral life, as does a profound sense of hopelessness about development, real relationships based on sincerity, love and mutuality, and anything other than better accommodation to one's claustrum within the treatment context. Comfort, erotic pleasure and survival dominate the head-breast, genital and rectum claustra value systems respectively, with compensatory satisfactions gleaned from a 'fragile grandiosity' (derived from the identificatory elements of projective identification) and narcissistic arrogance in the achievements of fraud and dissimulation. All three claustra are internally experienced as inherently stratified, hierarchical and political; dominated by a culture predicated on immutable notions of status, conservatism, convention and political correctness; and are alienating of both self and others within the McCarthyite hegemony. Becoming a member of 'the party' offers would-be acolytes an illusion of security through lieutenancy, such participation strengthening the secretiveness that conceals not only the ambition but also the profound cynicism and contempt entailed in claustral states of mind.

Despite hierarchical arrangement claustral compartments retain connections that permit inter-claustral movement. This in turn offers a degree of relative respite, echoing Gehl (1964), from painful intraclaustral states and the primary anxiety of ejection via anal expulsion: a nameless dread of evacuation into a delusional 'no-where' replete with bizarre objects. This fate appears a possibility for all claustral dwellers, irrespective of what compartment they inhabit, for, as Meltzer makes clear, 'there is a perilously slippery chute from head to rectum as voluptuousness leads to eroticism and on to sado-masochism' (1992, p. 91). Claustral inhabitation thus inevitably gravitates towards the lowest compartment: the maternal rectum in which existence is dominated by a primitive survivalist mentality.

# CLAUSTRUM AND CONTAINER: TWO SIDES OF A COIN

In now turning to consider the relationship between the claustrum and the container I want to here return to the feature I initially highlighted, namely the concrete ↔ abstract dimension. The 'link' here deliberately reflects Bion's (1963) own PS ↔ D and container 

→ contained formulation and relates more specifically to his description of innate preconceptions. The container, as a preconception (row D on Bion's grid), may grow 'either in the direction of naivety or of sophistication' (Bion, 1963, p. 96) towards the more concrete (row C on the grid) or the more abstract (say, grid row G). Such growth, dependent on the environmental realisations actually encountered and the nature of the dynamic links L, H and K between the innate preconception and its realisation, may lead, I suggest, for a given individual to a conception of either a claustrum (grid row C) or a container (grid row E or higher).

Considered from the vertex of symbolisation this optimally entails primitive inchoate feelings being taken in by the mother, bound

by being named and thus contained and then reinternalised by the infant (Segal, 1978). This experience aids secure internalisation of a benign meaning generating breast container, strengthens the capacity for abstract or symbolic thought and increases tolerance of frustration (Bion, 1962a). With this achievement a third position and triangular space can develop (Britton, 1989, 1998). This involves perception of the link between the parental couple and leads to gratitude, reparation and a working through of the intertwined dynamics of the depressive position and the Oedipus complex (Segal, 1978, 1997: Britton. 1989). Where the containment-symbolisation process falters however, feelings of deprivation together with intolerance of frustration may precipitate frantic or hostile intrusive identification into an insecurely established primary object. If this is met with a rejecting or nonmetabolising response by the object increasing intrusive identification results in concreteness (Segal, 1978). The claustrum thus results from a primary object perceived as frustrating and hostile although necessary for survival in relation with a primitive self dominated by its own fear and intrusive aggression.

On this basis I suggest that the container and the claustrum are both intimately related, at a conceptual level and as instantiated within any given subject. Together they conceptually represent realisations of Bion's Platonist-Kantian preconception-of-thecontainer, two sides of a coin (plus and minus K), one inclined towards the depressive position, the other towards the paranoidschizoid position. More abstract symbolism and primitive concreteness typify the respective positions and predispose the container and claustrum to either secure dependency leading to increased inner freedom or phobic insecurity (separation anxiety). This process is exacerbated by the dominance of minus K in the claustrum (unlike in the container). which strips experience of meaning, a dismantling to which the object contributes.

With its sinister yet alluring nature, I propose that the claustrum is the container's Gothic avatar, a negative incarnation of a transcendent form, Bion's *preconception* of the container.

#### Conclusion

Contemporary psychoanalysis encompasses a diversity of schools, each with its own burgeoning body of theory and terminology, raising risks of communicative fragmen-Within this however, phenomena, such as the body, its contents and processes (whether as physical entities, or as objects of the imagination or of unconscious phantasy), constitute enduring common ground. As the concept of the claustrum, a satisfying \(\to\) castrating entity, developed from this, the focus ranged from the concrete physical body to the immaterial psychological object body. Similarly, its integral link with psychopathology has been wide ranging, from ego-psychology's predominant concentration on phallic and phobic states in the normal-neurotic character to its deployment among some Kleinians as a tool to conceptualise borderline psychosis. Claustrophobia, however, has remained a common feature of the claustrum across this theoretical, clinical and political diversity, a feature significantly consolidated by the evolving differentiation of the claustrum as the 'shadow' of the container. From very different perspectives Gehl (1964) and Segal (1997) both emphasise this primitive fear-driven need for a 'dungeon' into which incorrigible badness and split-off hostility may be projected, isolating it from the corrigible reciprocal within the good container breast.

These two phantasy structures I believe are inter-linked, just as Laplanche and Pontalis argue that despite differences unconscious and conscious 'modes of phantasy seem ... to join up, or at least to be linked internally to each other—they appear, as it were, to symbolise each other' (1973, p. 316). Ex-

tending this, I suggest the ego-psychology and Kleinian views of the claustrum's structure approach each other. Thus the symmetry between the oral, anal and phallic stages of the former (Ostow, 1955; Gehl, 1964) and the latter's head-breast, rectum and genital compartmentalisation (Meltzer, 1992; Bick, 2001) offers an opportunity for a creative hermeneutic endeavour. More importantly, it is with the development of such a transitional working space within the clinical context, combined with an appreciation of the ways in which this may be delimited, that will aid our psychoanalytic understanding and offer assistance to those trapped within the claustrum in moving towards mourning and a life without fear.

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#### TRANSLATIONS OF SUMMARY

L'auteur traite le claustrum comme un aspect de la capacité de contenir pathologique au sein de l'espace interne et son rapport avec le concept de contenantcontenu de Bion (1962a, 1962b). L'auteur, après avoir souligné les premières fondations conceptuelles psychanalytiques de la claustrophobie et du claustrum, retrace le terme depuis son introduction par Erikson en 1937 et à travers ses trajectoires développementales divergentes au sein du vocabulaire conceptuel des écoles kleiniennes, Indépendantes et classiques, jusqu'au développement contemporain de Meltzer (1992). Les vicissitudes de la transmission des idées au sein de ces groupes, ainsi qu'entre ceux ci sont décrites, le travail de Esther Bick étant particulièrement mis en évidence pour exemplifier une influence intellectuelle nodale. L'auteur traite de l'espace claustrale au sein du corps de l'objet interne ou physique, sa structuralisation interne, et les détériorations de la qualité de la vie psychique du self qui cherche à habiter de tels espaces, au moyen d'identification projective importune. Il examine les manifestations développementales et psychopathologiques du claustrum, plus particulièrement la peur, la séparation, les problèmes du deuil et la claustrophobie. L'auteur propose enfin un rapport réciproque et hiérarchique de l'avatar entre le claustrum et le contenant.

Der Autor diskutiert das Klaustrum als einen Aspekt pathologischen Containments innerhalb des inneren Raums und seine Beziehung zu Bions (1962a, 1962b) Container-Contained-Konzept. Er stellt zunächst die frühen psychoanalytischen konzeptuellen Grundlagen von Klaustrophobie und Klaustrum dar und verfolgt sodann den Begriff von seiner Einführung durch Erikson 1937 durch seine unterschiedlichen Entwicklungslinien innerhalb des konzeptuellen Vokabulars der klassischen, unabhängigen und Kleinianischen Schule bis hin zu Meltzers (1992) heutiger Neubearbeitung. Die Schicksale der Weitergabe von Ideen innerhalb und zwischen diesen Gruppen wird betont, wobei Esther Bicks Werk als Beispiel eines Knotenpunkts intellektuellen Einflusses besonders hervorgehoben wird. Der Raum des Klaustrums innerhalb des körperlichen und inneren Objektkörpers, seine innere Strukturalisierung und die Verschlechterungen in der Qualität seelischen Lebens des Selbst, das solch einen Raum durch projektive Identifikation betritt und zu bewohnen versucht, werden dargestellt. Manifestationen des Klaustrums in Entwicklung und Psychopathologie werden diskutiert, insbesondere Furcht, Trennung, Probleme im Trauern und Klaustrophobie. Es wird eine reziproke und hierarchische Beziehung zwischen dem Klaustrum und den Container vorgeschlagen.

El autor discute el claustrum en tanto que aspecto de la contención patológica dentro del espacio interior, y su relación con el concepto de lo que contiene y lo contenido, de Bion (1962a,b). Después de delinear los fundamentos conceptuales del principio del psicoanálisis sobre la claustrofobia y el claustrum, el autor hace un seguimiento del término, partiendo de su introducción por Erikson en 1937, observando sus divergentes trayectorias de desarrollo dentro del vocabulario conceptual de las escuelas clásica, Independiente y kleiniana, y llegando a la re-elaboración contemporánea de Meltzer (1992). Se hace énfasis en las vicisitudes de la transmisión de ideas dentro de y entre estos grupos, con atención particular al trabajo de Esther Bick, como ejemplo de una influencia intelectual nodal. El espacio claustral dentro del cuerpo objetal físico o interno, su estructuralización interna, y el menoscabo en la calidad de vida psíquica de los seres que buscan habitar tales espacios, a los que se ingresa mediante la identificación intrusa proyectiva, reciben especial atención. Las manifestaciones de claustrum en el desarrollo y la sicopatología, se discuten, en particular el miedo, la separación, el duelo sobre problemas y la claustrofobia. Se propone una relación de avatar reciproca y jerárquica entre el claustrum y el contenedor.

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