

PLAYING AND THERAPEUTIC ACTION IN CHILD ANALYSIS

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Child psychoanalysts are called upon to help with children whose development has often gone markedly off course. In the forty years since Anna Freud (1957) began seeing children at the Hampstead clinic, psychoanalytic forms of treatment have been used with children exhibiting many types of impairments in their early development. These have included children with disorders of conduct and the regulation of aggression; those markedly inhibited by their anxious concerns about separation and object-loss; and those for whom the social world remains essentially an enigma. While we are only beginning to address systematically what aspects of child analytic technique are beneficial for what types of developmental disturbance, the richness and depth of the experience accumulated by child analysts across the world has brought about a number of important shifts in technique and theory (Sandler et al., 1980).

Unlike analysis with adults, child analysis necessarily takes place in the face of rapidly occurring maturational shifts and tensions that bring issues of biology and endowment more immediately within the analytic frame of reference (Mayes & Cohen, 1993a). Such developmental urgency often requires the analyst to be actively involved in the child's reality-based outer as well as imaginary inner world. At the very least, the child analyst serves not only as an observer and interpreter of the material the child presents within the hour, but often is called upon actually to participate in the child's play, to keep the child physically safe during moments of intense anger and frustration, and to interact directly with the child's family. The immediacy of action and

impulses pushing for expression in children has required child analysts to consider in depth issues of permitted gratification or frustration of wishes, and to place these technical interventions in a developmental frame. Actually gratifying a 3-year-old's wish for physical closeness may be essential for the analytic process, while the same might not be true for a latency age child. Contributions from other fields similarly concerned with understanding the emergence of various psychic functions in early childhood have also aided in the gradual defining and remodelling of child-analytic technique. For instance, how to structure and phrase interpretations at developmentally appropriate levels is informed by on-going research in related fields about young children's capacities to understand affects, beliefs, and related notions of mental functions in themselves and others (e.g. Mayes & Cohen, 1992, 1993b).

Indeed, the technical acts broadly encompassed by the term interpretation take on a different cast in work with pre-adolescent children precisely because of their varying capacities to express and understand verbally the wishes and conflicts of their own and others' inner worlds. Child analysts are by necessity quite cognisant of the multiple, nonverbal modalities that are readily available for conveying affects, thoughts, and fantasies. An essential, daily, child analytic task is to find (and understand) the substitutes for verbal communication that will adequately convey to both child and analyst the essential nature of the child's developmentally stagnating conflicts. The familiar modes of verbal clarification and interpretation fundamental to analytic work

with adults are often of limited value for many youngsters entering analysis and may only gradually, and to a limited extent, become the central medium of the therapeutic work. For some children, playing carries much of the therapeutic work aimed at facilitating the child's return to developmentally appropriate and adaptive psychic functioning. The creation of the therapeutic space in which playing may unfold and the utilisation of play in the service of treatment are tasks unique to the child analyst.

Several analysts have discussed the role of play as an aide to interpretation, for through play the child is able to externalise and displace apparently disruptive, confusing, conflict-laden wishes (e.g. Neubauer, 1987; Ritvo, 1978). The capacity for fantasy play draws upon a number of mental actions, including the ability to appreciate the subjective nature of the mental world; that is, to appreciate that 'just pretending' provides a world where the child is able to try out relationships, identifications, and solutions. In the provision of a subjective space for trial action and thought, the medium of play facilitates the emergence of unconscious material. Using the content of the play, the analyst may, in turn, phrase interpretations that are at least one step removed from speaking directly to and about the child. For some children, interpreting in this manner within the play is less anxiety-provoking and threatening. However, there arise inevitable tensions between allowing play to emerge as a therapeutic process in its own right and the usual psychoanalytic emphasis on clarification, verbalisation and, above all, interpretation within and about the transference. For example, Anna Freud and others have often cautioned that the child's fantasy play may serve equally well the roles of defence and resistance (Sandler et al., 1980), and that at some point the analyst must, in effect, step outside the play and bring the material back to the child's own self, wishes and conflicts.

The apparent tension between creating a space that facilitates the child's efforts to play and the overall analytic goal of verbal interpretation to make explicit unconscious wishes and conflicts raises at least two questions. Firstly, the issue of timing: how and when

does the child analyst decide to make explicit the child's externalisation of his own self in the story and action of the play? Constructing an interpretation that suggests to the child that he often feels or behaves like the characters represented in his fantasy play requests that he accept at another level of awareness the content of his play narrative. The second and related question concerns the therapeutic action of play itself; that is, that the very process of enactment through fantasy play in the space of the analysis is, in and of itself, developmentally restorative. In this context, the role of the analyst is to facilitate and support the child's efforts toward fantasy play; interpretations are, in effect, contained within and elaborate upon the story represented in the fantasy.

In the two case examples that follow, we describe two children for whom the process of enactment within the fantasy play itself was apparently therapeutic, as evidenced by their improved adaptive capacities outside the analysis and their increased ability within the analysis to move freely between their fantasy play and references to themselves and their own difficulties. Two caveats are in order before presenting the illustrative clinical material. Firstly, when speaking of play as a therapeutic process, we are referring to imaginary or fantasy play. Children use a number of different modes of playing within any therapeutic relationship, such as persistently and intently playing board games, demonstrating their physical, athletic abilities, or carefully arranging the play space in preparation for a sometimes only very brief imaginary scene. These modes of playing are also communicative to the analyst about the child and may have restorative functions, but are more often the child's prelude (or impediment) either to a more elaborate fantasy or a more direct expression of their conflicts and worries. The second caveat is that we do not wish to create an artificial dichotomy between interpreting within the child's fantasy or, as it were, from outside. As the clinical examples will illustrate, these are not two mutually, exclusive therapeutic approaches, but rather they serve as both complementary and alternative techniques for any given hour with any particular child. The apparent dichotomy highlighted for the

purposes of this discussion allows clarification of both a metapsychological issue and a point of technique. Metapsychologically, the question is: how can fantasy play be psychologically and developmentally restorative? The technical task is to decide for which child and at what moment is it more appropriate to rely upon the therapeutic impact of the fantasy action itself.

CLINICAL ILLUSTRATIONS

Clare

Clare was a verbally precocious, petite girl, who entered analysis at the age of 38 months because of a combination of withholding stools and constipation, and increasing difficulties at moments of separation from her parents. New persons or situations predictably sent Clare hiding behind her mother and clinging tightly to her mother's legs. If urged to join the group or try the new activity, she would adamantly scream 'no', cover her face, and cling ever tighter, or else dissolve into tearful, panicked fright. She often woke her parents at night when she experienced abdominal cramping due to her constipation, but also seemed to need, beyond their physical care, the reassurance that they were quickly available and ever present. Her clinging need to hold on and stay close seemed to pervade nearly every aspect of her daily life, and she became more and more frequently and easily upset by changes in her routine. Though Clare was able to attend a nursery-school programme at least two of the four mornings a week, she would tearfully and anxiously protest her mother's leaving her behind. Clare's parents were perplexed and worried for they had always been with her. Clare's mother stayed at home and her father was often able to be with his daughter at different times during the day. They watched in distress as their verbal, bright daughter seemed increasingly tormented and sad.

In her pre-analytic, diagnostic sessions, Clare, though reticent and wary, quickly took verbal control and carried on a lengthy discourse about the various materials and toys in the room. She carefully rearranged and

ordered the toys that were on a table and declared adamantly that she preferred to do puzzles and other similarly structured tasks. She did not want to pretend or play with toys and despite the analyst's attempts to interest her in drawings with stories, she insisted that the pictures were just pictures—there were no stories involved. However, during a later diagnostic session she volunteered that she thought her blanket, which she carried everywhere, was very sick and might need to see a doctor for a long time, 'perhaps at least two or three weeks'. She asked the analyst to tell her a story about a toy figure sitting on the table, whom she also thought might be quite sick. When the analyst said that the toy did seem to have quite a few worries and was at times very unhappy, Clare stared intently at the analyst and then soberly asked for more information about what the toy might be worried about and whether the doctor would be able to help with these worries.

Such clarification and work within an albeit highly-structured and ordered play characterised the first weeks to months of Clare's analysis. During this time, Clare did not allow the analyst to speak directly about her or to suggest that she too might have worries or that the 'mad, angry' faces she often drew bore any relation to her own inner world. For weeks into the analysis she would begin her sessions by urgently announcing the 'plan' for what she would do—the puzzles to be worked, the number of drawings of shapes to be completed, the types of duplo-block structures she would make—all without associated fantasy, but rather 'just shapes'. The analyst interpreted this as a need for predictability—for the safety of knowing exactly what would happen—just as she wanted to know just where her parents were, and worried about being left alone or about letting loose scary feelings, but Clare remained stolidly wedded to her strategic plans. Gradually, it became clearer that her determined planning also served to mediate how close she could, or would, allow herself to be with the analyst. While intently drawing yet another picture of various geometric shapes, she said, 'I love to draw because only I know what the drawing will do—you don't know, I do'.

As the first weeks moved into months, Clare gradually relaxed her self-imposed restriction on her own symbolic and fantasy life. She increasingly used her structured activities as a safe haven when the implicit freedom to play imaginatively apparently became too stressful. Her first move into explicit symbolic expression occurred when she picked up a container of modelling clay and began almost absent-mindedly rolling round balls. Suddenly, she looked up, held up a ball of clay, and said 'my poops' and proceeded to speak in detail about the somatic symptom that had in part brought her into analysis. In the middle of her discussion, she dropped the clay and ran to a toy phone to call her mother who was waiting just outside the playroom door. As her primary somatic symptom was slowly resolved in the weeks that followed, Clare began to play imaginatively and filled the hours with play about broken things that urgently needed fixing. She created settings in which characters held on to special secrets which they smilingly refused ever to let out. During this period, Clare again allowed the analyst to interpret only within the context of her created stories and to attribute wishes and conflicts to the characters in the play but never to her. Any violation of this critical distinction sent her urgently back to her familiar ordering and structure-building.

As Clare's fantasy play deepened, so for a time did her difficulties with separations. Every situation seemed to her laden with the possibility of loss—it was as if when she surrendered some of her need for sameness and structure, the worries she had about being close or being separate were ever upon her. She had difficulties beginning and ending sessions. Often, even as she was standing on one foot poised on the threshold of the playroom door, with a worried look she would throw her beloved blanket in first, both as an apparent trial separation and as a sacrifice to the dangers lurking in the playroom, as affects and wishes were freed. Toward the end of her first 15 months of analysis, Clare was earnestly playing with characters caught in the painfully inevitable dilemma of growing up and the agonies of renouncing babyish ways for the mixed blessings of being older, which carried with it so many unknowns. She joyfully created

games about all-powerful, magical beings who were able to give people new bodies and to make the old young again. The limitlessness of the roles she created alternated with a sober maturity as she solemnly told some of the characters in her stories that hard as they might wish to be a baby again, it was not possible. Her characters never enthusiastically, or with any sense of adventure or achievement, left their familiar surroundings for long. They always returned; sometimes with a foreboding dread that there would be many changes in the people or places they had left behind. It seemed that, even as she became more freely playful at home and at school, for Clare, just beyond what she could not see or hear, there were always inner dragons which she confronted directly through her emerging capacity for fantasy.

Through her fantasy play, Clare created for herself a stage on which she represented in only thinly-disguised verse the issues that had stalled her development. The displacement on to the stage was apparently crucial for her. The work of the analysis was to interpret gradually what made it difficult or frightening for Clare to play and how, when she was scared of what might happen in her stories, she returned to the safety of controlled routines which at the same time made it difficult for her to move forward. Clare slowly developed a greater ease in shifting in and out of the pretend and the context of the play, and in then allowing the themes of her stories to be brought home to her. One day, as she listened to a book she was quite fond of that told a story about the ever-present changes in the seasons and a little girl's struggle to understand these changes, she agreed that the little girl was like her, but younger, because the girl couldn't yet swim. Gradually, with an explicitly expressed mixture of sadness and pride, Clare went on to longer days at school, surrendered her crib, left her blanket at home (except when she came to her analysis), and moved out into the world of her peers. Her teachers described her as a leader and as a cheerfully imaginative child, and her parents felt she was more and more relaxed and free. Transitions, an ever-present worry for Clare, became times when she was able more readily to use the world of

fantasy in the service of mastery. But occasionally the transitional moment was too much, and she would return to the comfort and predictability of her routines.

Jep

Jep was the most active boy in his Montessori nursery school. His teacher notified his parents that in all her years she had never seen a boy who seemed so hyped up, so full of energy and ideas that he could not concentrate on the small tasks at hand. He would start a clever plan, but then would quickly lose interest and move on to something else. Of greatest interest to him was the activity of another child; he would start by helping but within minutes would create chaos. A physician had prescribed and tried a course of stimulant medications, which had made Jep irritable and unhappy. A therapist had attempted and terminated a course of therapy, which Jep had 'resisted'; he simply would not listen to anything she said and he seemed set on showing her that nobody could be his boss.

Jep's father was a creative novelist and intellectual consultant, a winner of international prizes who made large sums of money on individual projects and then drank up the profits in months of intoxication. His mother was a beautiful, level-headed, and gifted actress who had worked her way up from a lower middle-class, janitor's family into social prominence. If you were entertaining the Shah of Iran, she would be the woman you would seat him next to at dinner, or, more likely, she would be asked to host the dinner and make the toast. Jep's younger brother was a sweet child who was interested in nature and drawing.

Jep entered analysis at the age of 5 as a beautiful, sparkling, whirling dervish. Within minutes, the office was covered with play materials as he engaged in non-stop organising and disorganising and discoursed on whatever popped into his mind. Over the course of months, the bouts of play became longer and the tension between activity and passivity became enacted in relation to the analyst. At times, he would stand on top of the desk or

the bookcase and threaten to jump. Occasionally, he would jump, hurt himself, sprawl on the floor, and then deny that he had felt any pain. At other times, he would seem depleted and dazed and would come close and sit on the analyst's lap or near his feet.

Dramatic themes were elaborated within the play and became routines into which Jep and the analyst could move quickly. These included a routine in which Jep was the editor and the analyst was a worker on a newspaper; one in which he was superman and the analyst was a friend who sometimes needed to be helped; and in another, both were hunters in the forest behind Jep's house and there were wild dogs. Much wild play had to do with small figures who were wrestling, examining each other's bodies, vomiting, and yelling. The small object play could quickly become transformed into Jep taking on one of the roles in the room and throwing, pretending to feel sick, or the like.

A good deal of the analytic work over the course of two years was involved in trying to slow down the rush of ideas and transitions through interpretation, within the play, of the worries that were being expressed about loss of control, fears of being hurt, bewilderment about the behaviour of adults, and fear of strong sexual feelings, which poured out in play, masturbation and diffuse overactivity and arousal. With time, Jep was able to move out-side the play and describe more of what he had seen during his father's drinking binges—the slapping, throwing of pots and pans, passing out. His father would hug him and say sweet things about his beauty and importance: 'You are the most wonderful thing I have ever created'. A few minutes later, his father might throw him out of the study for messing something up or just slump into his chair and fall asleep snoring, leaving Jep standing nearby. He would hear his mother scream at his father for what he was doing to the family, and then see his mother burst into tears, or leave the house threatening never to return. He was also able to describe fleetingly the excitement of undressing with an older boy and playing with each other.

How could a 6- or 7-year-old communicate and then attempt to understand the rapid shifts

between being the child saviour of the family and then being ignored, as the adults collapsed, battled or escaped? Except through his play, Jep could not find words to convey the sexual and aggressive excitement in which he lived, into which he was pulled, and out of which he created a thrilling mode of stimulating himself to the point of exhaustion. His own self-representation was not as a child, but as the confidant, consoler and reassurance of his parents, as well as an erotic and narcissistic plaything.

Within the analytic work with Jep, the first tasks were to survive his attacks on objects, his provocations, his limitless activity, his oppositionality, and his adamant refusal to listen. Later, he brought to sessions his self-destructiveness and his need to be comforted, both expressed in direct action. Through engagement in the play themes, calm acceptance of the activity, and a readiness to be used in the variety of ways which were demanded by Jep, the analyst was slowly able to articulate, in play and in words, some of the tremendous tensions from outside and inside to which this fragile child's mental apparatus was exposed. Treatment was prematurely brought to a close by the violent death of his father, which was followed soon afterwards by the death of his sister from cancer.

DISCUSSION

For both Clare and Jep, the ability to engage in the process of imaginative play represented a critical therapeutic point in the analysis. Both had been affectively and adaptively unable to find a means to represent for themselves, as much as for others, the content of their distress. Jep relied on the distractive whirl of his activity, while Clare took refuge in her insistence on sameness and structure. For each, the medium of imaginary play facilitated the therapeutic work, and in their play both found the words for their deepest dilemmas. In each instance, the primary goal of the analytic work, at least in the beginning and middle phase of the analysis, was to create a place in which each child could begin to play imaginatively. Interpretive work centred around those issues

that made it difficult or overwhelming for either child to enter the imaginary world, and only later was it possible to translate interpretively the content of the imaginary world back to the child. Clare and Jep differed dramatically in their use of play. For Clare, the imaginary world was a place where she could more expansively and clearly communicate her troubles, while for Jep the play space was the place where he could safely represent the fears, excitement and dangers that were as much a part of his external as his inner world. Therapeutically, for Clare, play was liberating, while for Jep it served as an important protective haven where the horrors of his world could be more safely examined. Both children also seemed to improve in their day-to-day lives as their ability to play imaginatively within the analysis emerged. How play serves such an apparently restorative function is a crucial issue for understanding the role of imaginary play in the therapeutic work of child analysis.

From the vast domain of observation and experience of children in treatment and in other settings, child psychoanalysts have acquired multiple senses of the mental processes which underlie children's play. The psychoanalytic theory of play is not a formal, deductive set of hypotheses, but an orientation to the complex geography of the child's inner world. Within the inner life of the child, play is a mental process which takes its stand along with, intermingles with, builds upon and integrates with many other mental processes in the developing child's mind—thinking, imagining, pretending, planning, wondering, doubting, remembering, guessing, hoping, experimenting, revising and working through. The child at play makes use of these varied mental processes. In turn, the emergence of more sophisticated mental capacities that allow the child to appreciate the distinction between his subjective mental world and that which is directly perceivable make possible increasingly elaborate, sophisticated fantasy play (Mayes & Cohen, 1992). While playing, the child integrates his past experiences and his current feelings and desires. Using the capacity to play, he or she explores the inner and outer world, investigates hypotheses and possibilities, and moves ahead in personal development. In the

repetitions of play, the child masters what he has experienced; through the creativity of play, through internal playfulness and external play, the child reviews, advances and conquers past and new territories. Further, through the act of imagination and fantasy within the play, the child is able to explore relationships with important others and to have others be as he needs them to be at that moment (Mayes & Cohen, 1992).

There are many meanings of play for children and for psychoanalysts who work with them (Erikson, 1987; Moran, 1987; Neubauer, 1987). Among these meanings are play as a representation and expression of the child's experiences and affects, and as a window into the child's self-representations and conflicts. Play as a communicative medium by which the child conveys his understanding of experiences is one basis for using play as a guide to interpretation and clarification. The intrinsic capacity for playing to serve developmental needs has been emphasised by Neubauer (1987, 1993) and Solnit (1987, 1993), and it is in this capacity that play serves as more than a guide to interpretation but is a part of the process of therapeutic change itself. The therapeutic, restorative functions of play within the analytic setting have been discussed by child psychoanalysts in a number of ways, beginning as early as 1927 with Anna Freud's lectures on child analysis. Sketching the outlines of a partial theory of therapeutic action, she spoke about children's play in analytic sessions as one of the important facets affecting change. Much later, as she explored the relation between capacities for play and later for work (1965), she drew attention to the advances in impulse control and ego maturation which play apparently helps to consolidate; each again representing an area of change also related to the presumed therapeutic action of analysis. But, as Downey (1987) points out, between the 1927 lectures on child analysis and the later discussions of the indications for child analysis (1945), the role of children's play within the analytic setting was defined and redefined many times and there was, for a time, a tension between playing and verbally interpreting. In part, the use of play by the analyst was caught up in the heated contro-

versy between Anna Freud and Melanie Klein (1932), in which each faulted the other for relying too much or too little on playing versus verbalisation of the child's conflicts.

During the same period, Waelder (1932) defined multiple functions of play, including mastery, wish-fulfillment, and the assimilation of experiences and delineated play as an internalising, healing, structure-building process in its own right that supported the emergence of children's gradual self-awareness. Through these synthetic functions, playing has the potential power to help move development forward by allowing the child to review his current situation, explore new possibilities, experiment with new solutions, and find new integrations. Play provides children with the earliest version of a self-reflective capacity. In much of Winnicott's work, too, there is the sense that playing, as such, may facilitate development, both in and out of therapy (Winnicott, 1971). Within the treatment setting, facilitating the play, particularly for Winnicott the spontaneous fantasy play in which both child and analyst are mutually involved, provides the significant contribution to therapeutic change: '[During the play] the significant moment is that at which *the child surprises himself or herself*. It is not the moment of my clever interpretation that is significant' (1971, p. 51).

In therapy, as in life, it is sometimes *not* necessary, or even useful, for the psychoanalyst to interpret (in words) the child's play for this facilitation to proceed (Cohen & Cohen, 1993). The mobilisation of the child's capacities for play, perhaps through the use of transference, may enable the child to do what is needed for his development to continue. For some children, such as Clare, additional verbalisation outside, or during the play, may impede their embracing fully the necessity of playing and, paradoxically, slow their coming to use fantasy in the service of intrapsychic adaptation. The technical issue is when and how the analyst chooses to interpret the content of the play back to the child such that the child's playfulness is sustained even while he and the analyst step briefly outside the fantasy.

When the analyst chooses to interpret the content of the play *vis-à-vis* the story it conveys about the child's own wishes and worries, it

is important to underscore the ways in which play does far more than merely repeat or symbolise the child's actual external experiences, or even his or her reactions to those experiences. In interpreting or understanding what a child is expressing in play, therefore, one cannot simply read the surface presentation of themes, affects or episodes. In their play, choirboys become gangsters; an oppositional, defiant 5-year-old takes on the role of a nursing mother; hurt and abandoned children are surrounded by a loving family; those who are well cared for attack dangerous enemies. Jep became a truck driver to try to keep his feelings in line and Clare used the playroom as her place to roam freely within her own story, as enacted by characters she had created. Children at play do not simply act out what they have seen or felt or even simply what they wish for—they imagine and try on, as Clare did in her repeated stories about regaining a lost infancy. Thus, any particular type of play—aggressive or loving, exhibitionistic or bashful, sexually provocative or sexually timid—must be read with caution as to its implications about what the child has seen, done or felt. More specifically, the play must be read, by the analyst, within the theory of transference, in which the preconscious moves towards consciousness and undergoes the transformations that we conceptualise as sublimation and displacement. The analyst's reading, however, is not a script that demands verbal interpretation, since sometimes little need be said about what the child is saying about himself. In many instances, more need be said about what does and does not make it possible for a child to play with a sense of pleasure and freedom, rather than what the play itself may or may not convey.

From the first years of life until the very end, a major part of mental life is devoted to trying to understand the life we are living. From childhood onwards, the mental processes which form the psychological substrate for play, as well as actual play which involves action and movement, is a special form of such self-understanding. The capacity for play provides both the child and adult with a powerful instrument for figuring out and com-

ing to grips with mysteries and hardships (Cohen et. al., 1987). The play of children who have been traumatised, just as the play of children with severe emotional disorders, may lose its vitality and openness and be unable to serve this process of self-reflective understanding. The play of children such as Jep, who are over-stimulated and exposed to forces beyond their control or comprehension, may break through the structures in which play must be contained in order to distinguish it from the real world and real consequences.

Both Clare and Jep had difficulty finding the means to engage in pretending—one to engage at all and the other to contain the rush of overwhelming feelings within the pretend. As a result, both were stalled in their development. For Jep, life was too creative, spontaneous, exciting and unpredictable; there was no shortage of thrills, dangers or strong emotions in his life. He was the centre of parental concern, a beautiful, adored, brilliant, magazine-cover child. His thrills were too much for a small child to contain, and his thoughts and feelings spilled over. In analysis, he found ways of creating some narrative structures through the close, patient engagement of an analyst who neither needed nor rejected him, who did not seduce or adore him, or forget that he was a child who could be hurt. His self-representation was fragmented and he was overwhelmed by his thrilling ideas and the dangers which he created for himself and for others who got in his path. In analysis, he was gradually able to give voice to a more childish need for protection and comfort but resisted this mode by self-stimulation. The attractions of thrilling overstimulation remained powerful influences on his activity within and outside of analysis.

For Clare, gaining access to a capacity for imagination and for play provided her with a communicative medium that far exceeded even her precocious verbal skills. She was able to express for herself through play that which was, at least for a time, beyond words. Caught in the universal and inevitable dilemma of being carried along toward independence and separation by the forces of maturation, Clare used every means at her disposal to resist those thrusts. The earliest marks of her character

were organised around her stolid routines, which kept her on what seemed stable but developmentally unmoving ground. The stability was, however, an illusion, for with it came unsettling tensions and unhappiness. Like Jep, through the transferential relationship Clare could hesitantly let go of her anchors to reveal to herself as well as to the analyst the wishes and fears that were holding her back. The play became not just a safely displaced way to represent her developmental instabilities—the very spontaneity of the fantasy itself stood in stark and healing contrast to the restraints that she easily imposed on her actions and thoughts.

SUMMARY

From its inception, child psychoanalysis has used fantasy play as a window to both the content and process of children's inner worlds. Because of the link to action and primary process, young children's imaginary play is rich in symbolic expressions that facilitate analytic interpretive interventions addressing the conflicts impeding development. There are inevitable tensions between allowing play to emerge as a therapeutic process in its own right and the usual psychoanalytic emphasis on clarification, verbalisation and, above all, interpretation within and about the transference. For many children, the very act of playing carries much of the therapeutic work aimed toward facilitating their return to developmentally appropriate and adaptive psychic functioning. The mobilisation of capacities for play in the analysis allows children to do what is needed for their development to continue and makes use of the developmentally restorative functions of play in the service of therapeutic action.

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TRANSLATIONS OF SUMMARY

Depuis le début, la psychanalyse de l'enfant a utilisé le jeu du fantasme comme une fenêtre ouvrant à la fois sur le contenu et le processus du monde interne des enfants. Du fait du lien à l'action et au processus primaire, le jeu imaginaire des jeunes enfants est riche d'expressions symboliques qui facilitent les interventions interprétatives analytiques s'adressant aux conflits menaçants le développement. Les tensions sont inévitables entre permettre au jeu d'émerger comme un processus thérapeutique de plein droit, et l'accent psychanalytique habituel mis sur la clarification, la verbalisation, et par dessus tout, l'interprétation au sein et au sujet du transfert. Pour de nombreux enfants, l'acte même du jeu comporte beaucoup de travail thérapeutique visant à faciliter leur retour à un fonctionnement développemental approprié ainsi qu'à un fonctionnement psychique ajusté. La mobilisation des capacités pour le jeu dans l'analyse permet aux enfants de faire ce qui est nécessaire pour que se poursuive leur développement et de faire usage des fonctions développementalement reconstituantes du jeu au service de l'action thérapeutique.

In der Psychoanalyse von Kindern wurde die Phantasie von Anfang an als Zugang sowohl zum Inhalt, als auch zum Prozeß der Innenwelt von Kindern betrachtet. Aufgrund der Verknüpfung mit Aktion und primärem Prozeß ist das Phantasiespiel junger Kinder reich an symbolischen Ausdrücken, die analytische interpretative Interventionen in Konflikten, die die Entwicklung hemmen, fördern. Es bestehen unvermeidliche Spannungen zwischen der Zulassung der Entwicklung des Spiels als eigenständiger therapeutischer Prozeß und der gewöhnlichen psychoanalytischen Betonung von Klärung, Verbalisierung und, vor allem, Interpretation im Rahmen von und über die Übertragung. Für viele Kinder beruht ein großer Teil der auf eine Rückkehr zum entwicklungsmäßig passenden und adaptiven psychischen Funktionen gerichteten therapeutischen Arbeit auf dem Spiel an sich. Die Mobilisierung von spielerischen Kapazitäten in der Analyse ermöglicht Kindern, das zu tun, was für ihre weitere Entwicklung erforderlich ist, und stellt die Funktionen des Spiels, die die Entwicklung wiederherstellen, in den Dienst der therapeutischen Aktion.

El psicoanálisis infantil ha usado desde su inicio el juego imaginativo como ventana tanto hacia el contenido como hacia el proceso de los mundos internos de los niños. Por su vinculación con la acción y los procesos primarios, el juego imaginativo de los niños jóvenes es rico en expresiones simbólicas que facilitan la intervención interpretativa analítica de los conflictos que se interponen al desarrollo. Resulta inevitable la tensión entre permitir que el juego surja como proceso terapéutico en sí, y el énfasis psicoanalítico normal en la aclaración, verbalización y sobre todo interpretación dentro de la transferencia y respecto a ésta. Para muchos niños el acto de jugar en sí realiza una gran parte del trabajo terapéutico que tiene por objeto facilitar su retorno a un funcionamiento psíquico adaptador y apropiado evolutivamente. La movilización de la capacidad de juego en el análisis permite a los niños cumplir lo que la continuación de su desarrollo requiere, y pone las funciones evolutivamente restauradoras del juego al servicio de la acción terapéutica.

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