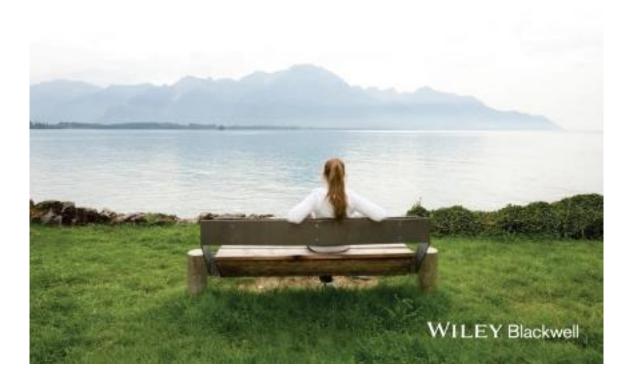
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The Handbook of SOLITUDE

Psychological Perspectives on Social Isolation, Social Withdrawal, and Being Alone

SECOND EDITION



In Coplan, R. J., Bowker, J. C., & Nelson, L. J. (Eds.). (2021). *The handbook of solitude: Psychological perspectives on social isolation, social withdrawal, and being alone* (2nd ed., pp. 58–74). Wiley-Blackwell.

The Origins of Beneficial Solitude: Psychoanalytic Perspectives Evangelia Galanaki University of Athens, Greece

Abstract

In this chapter several psychoanalytic views on the origins of beneficial solitude, its developmental course during the first years of life, and its implications for later development are discussed, evaluated, and organized around three dimensions: the solitary self, the ability to be alone, and the necessity of being alone, as well as the companionable nature of solitude. These views belong to different psychoanalytic models, such as the Freudian drive/structure and the object relations model. Conclusions are drawn and future directions are described, concerning the paradox of solitude, which is argued to be evident from the beginning of life.

Keywords: beneficial solitude, infancy, paradox, psychoanalysis

In the domain of psychoanalysis and in numerous psychoanalytic theories, solitude, as a state of being alone, has been described as a fundamental and potentially beneficial human experience and has been ascribed a variety of meanings (Buchholz, 1997; Modell, 1993; Storr, 1988; see also Coplan, Bowker, & Nelson, this volume). However, there have been few psychoanalytically-informed empirical studies on beneficial (or potentially beneficial) solitude as a personality enhancing and constructive experience of aloneness. In contrast, from the psychoanalytic standpoint, loneliness, as the *painful experience of being alone*, has been the topic of a few well-known studies, published some decades ago (e.g., Fromm-Reichmann, 1959; Klein, 1975), and more recently (e.g., Quinodoz, 1991/1993), by clinicians. Empirical investigations into the origins of beneficial solitude from various psychoanalytic perspectives, however, are appropriate and potentially useful, for the following three reasons: (i) psychoanalysis has placed much emphasis on the decisive role of early life experiences, therefore the origins of solitude are also of great importance; (ii) most psychoanalytic models focus on what is the essence of solitude, that is, on the complex relation between the inner/private and the outer/social realm of human experience; and (iii) psychoanalysis, as a psychotherapeutic method based on a two-person relationship and aiming at uncovering the unconscious layers of personality, is expected to alleviate loneliness and promote beneficial aloneness.

In the chapter, several psychoanalytic views on the origins of beneficial solitude, its developmental course during the first years of life and its implications for later development will be discussed and evaluated, organized around three dimensions: the solitary self, the ability to be alone and the necessity of being alone, as well as the companionable nature of solitude. Finally, conclusions will be drawn and future directions will be described, concerning the paradox of solitude, which I argue is evident from the beginning of life.

The Solitary Self

Autoerotism, primary narcissism and secondary narcissism

The concepts of autoerotism, primary narcissism and secondary narcissism are very important in the understanding of the origins, first manifestations and development of the solitary self. According to Sigmund Freud (1905/1953), in the beginning of life the sexual drive is supported by the self-preservative instinct (i.e., *anaclitic relationship*). This means that it is the vital function of nourishment, mainly from the mother (her breast or breast substitute), which satisfies the infant's instinctual drive and provides pleasure, with the mouth being the first *erotogenic zone*. Thus, when the sexual drive detaches itself from the need for nourishment, it is directed towards the infant's own body. This is the state of *autoerotism*, a typical manifestation of which is thumb sucking. By responding to the infant's need and reducing his/her excitation, the mother provides a compensation for the infant's typical sense of *helplessness*, thus creating an *original experience of* satisfaction (Freud, 1895/1966). This is the context within which the *wish* emerges, that is, the individual's impulse to cathect (i.e., invest) an animate or inanimate object with libido (i.e., psychic energy associated with the drives) and connect with it and with the satisfaction it provides. During the mother's absence, the infant seeks to repeat the remembered real experience. Relying on the memory image of the mother, the infant creates, with his/her own body and in a hallucinatory manner, a perceptually identical experience – a process called *hallucinatory wish fulfillment*. As a consequence, both the real and the hallucinatory satisfaction become the foundation and the prototype of the wish, which is what makes us human.

Gradually, the infant proceeds in unifying his/her body image and establishing the ego, cathected with libido. This means that the infant is in a state of *primary narcissism*, in which the self and the object are undifferentiated (Freud, 1914/1957b). Later, Freud (1916-1917/1963)

regarded primary narcissism as the first stage of life, prior to the emergence of the ego and not different from autoerotism, which came to be regarded as the sexual activity typical of the narcissistic stage.

In Freudian theory, development is conceived as a gradual differentiation of the subject from the object, as the process of cathecting objects (initially the mother) and as the reduction of omnipotence. Although primary narcissism declines by the end of infancy, the ego is still cathected with libido, and an energy balance between ego libido and object libido occurs (i.e., an increase in the one entails a decrease in the other). Moreover, the residues of primary narcissism are manifest throughout the life span in the individual's ego ideal (e.g., ideals, ambitions). However, a regression to primary narcissism is likely, even from the early years of life, and takes the form of the re-investment of the ego, which means that libido is withdrawn from objects, and the narcissistic identification with objects, which means relating with objects on the basis of ego libido. This state is called *secondary narcissism* and is observed, albeit with varying degrees and qualities, in both normal and pathological psychic organizations (Freud, 1914/1957b).

Autoerotism and primary narcissism seem to represent a state of *primary aloneness*, in Freudian theory. The infant is immersed in omnipotent self-sufficiency, in which satisfaction is achieved through an equally omnipotent other, who is not perceived as a separate being and is not yet internalized by the infant. This undifferentiated state may be regarded as an aloneness state because it is an objectless or pre-objectal period of life, during which, paradoxically, being one with the caregiver reduces the typical infant helplessness and ensures survival. However, Freudian texts reflect an ambivalence towards the infant's ability to perceive a separate other from the start. For example, in one of his earliest essays Freud (1895/1966) articulated the existence of another, a *fellow human-being*, early in infancy. He argued that the relation with this being, the mother, who is the first object of love and hate, and the only source of help, is the context within which "a humanbeing learns to cognize" (p. 331). If a *mirror relation* is what characterizes primary narcissism (in mythology Narcissus was in love with his own image or the image of his twin sister), then, as Laplanche and Pontalis (1967/1973) argued, it is not an objectless state. Put differently, it is an aloneness state in the sense that the infant experiences the mother as a "mirror" or "double" of his/her emerging ego. Furthermore, during moments when the infant is inevitably alone, he/she may not be overwhelmed by despair, but is able to sustain the investment on his/her own body and the outer world by resorting to *fantasy* as a means of wish fulfillment.

In addition, the notion of secondary narcissism may be regarded both as expressing *defensive withdrawal* in front of pressure and *beneficial solitude* enhancing creativity (see Goossens, this volume). Evidence supporting this argument comes from Freud's own life experiences. When recollecting the early years of his career, Freud (1914/1957c) admitted that he suffered from loneliness, caused mainly by the difficulties he encountered in his psychoanalytic investigations and in the reception of his ideas by his contemporaries. Therefore, he seems to have experienced a mixture of involuntary and voluntary isolation, which was "not without its advantages and charms" (p. 22). He described this solitude as freedom from daily pressures and as a domain of discoveries, creativity and originality, which required effort and courage but yielded much *narcissistic gratification* – he felt as Robinson Crusoe in that "glorious heroic age" (p. 22). *Splendid isolation* (a term used to describe the British foreign policy) was the name Freud used for this beneficial solitude (in a letter to Jung; see Freud, Freud, & Grubrich-Simitis, 1976), which was a necessary prerequisite for scientific contribution. I argue that, when revealing his own experiences of aloneness, isolation and solitude, Freud is referring to secondary narcissism, as described above.

Further evidence supporting that *voluntary isolation* when faced with adversity is likely to be a regression to primary narcissism (i.e., secondary narcissism) comes from Freud's (1930/1961) famous essay on civilization. He argued that in order to avoid the suffering which stems from

human relations, we withdraw ourselves, and in the resulting state of peacefulness, we search for solutions – on our own. We may build a private world through, for example, working, creating in art and science, and enjoying art and beauty, or by surrendering ourselves to intoxicating substances. This withdrawal is a form of defensive self-protection, but it can also be a context of psychopathology. However, secondary narcissism should be balanced with what seems to be a *necessity*: object relations in a community (for this balance see Paulus, Kenworthy, & Marusich. this volume). Hallucinatory wish-fulfillment, as solitary connection with oneself and others in fantasy, is not enough. Freud (1914/1957b, p. 85) concluded in his essay on narcissism: "A strong egoism is a protection against falling ill, but in the last resort we must begin to love in order not to fall ill, and we are bound to fall ill if, in consequence of frustration, we are unable to love".

The stimulus barrier

As described above, in Freudian theory the initial state of the human being is that of autoerotism and primary narcissism. The stimulus barrier seems to be the mechanism that ensures the preservation of this way of being. Freud (1920/1955a) first described the stimulus barrier as an innate organization that functioned as "a protective shield against stimuli" (p. 27) in the neonate. This protection against noxious, overwhelming stimuli is regarded as a more important function for the vulnerable neonate than the reception of stimuli.

Freud (1920/1955a) has ascribed a biological-neurological character to this metaphor. He regarded it as a sensory and perceptual threshold for incoming stimuli, an external membrane, under which other, deeper layers exist. The stimulus barrier is the forerunner of an intermediary between the id and the external world, which later came to be called the *ego*. Therefore, the stimulus barrier is a threshold for internal stimuli too. Tension is reduced and homeostasis is maintained through this barrier.

However, this merging of biological and psychological concepts has led to some confusion about the stimulus barrier (Esman, 1983). Daniel Stern (1985/2000) was critical toward this concept because Freud had placed it in the framework of autoerotism and primary narcissism, a conceptualization that Stern disputed. Other writers from the psychoanalytic field have reformulated the concept. According to Esman (1983), the stimulus barrier is "an innate, selective, maturing screening mechanism" (p. 204), an active mechanism with a dual *self-regulatory function*: (i) to accept stimuli of certain kind and intensity and (ii) to ward off other stimuli, according to the degree to which these contribute to the adaptation of the organism. In this regard, the stimulus barrier seeks to preserve optimal stimulation (Esman, 1983; Gediman, 1971). This means that the infant both seeks and avoids stimuli. The avoidance of stimuli is facilitated through this innate, idiosyncratic organization and through the protection provided by the mother, who seems to function as a stimulus barrier herself (Benjamin, 1965; Khan, 1963). Search for stimuli promotes attachment and avoidance of stimuli is the forerunner of defenses and individuation (Shapiro & Stern, 1980) – one could also add here of the capacity to be alone. The stimulus barrier is regarded by many to be present throughout life and to evolve from a more passive mechanism into a *complex ego function* (Furst, 1978; Gediman, 1971). This means that throughout life the individual is well-equipped when he/she needs to minimize internal and external distractions and achieve a level of self-regulation, all of them necessary for being able, on his/her own, to deal with challenges and vicissitudes or engage in various forms of creative activities.

A breach in the stimulus barrier, caused by the penetration of stimuli, may be called *trauma*. However, trauma can be the result both of overwhelming excitation and of stimulation deprivation. Both situations can be acute or chronic, as well as cumulative. Stimulus infatuation and stimulus hunger are the two sides of the same coin: whereas the individual wishes to reduce the effect of a stimulus, he/she continually searches for new similar stimuli. What is usually avoided is the human relation in favor of other stimuli. Thus, the individual's inability to feel satisfied, *fed*, when on his/her own may stem not only from deprivation and from a strong stimulus barrier but also from chronic overload and a weak stimulus barrier (Gediman, 1971). *Withdrawal*, in the form of a *better-be-alone-than* tactic, emerges then as a defensive response, and in Freudian terms, may be regarded as an expression of secondary narcissism (discussed above). In light of the aforementioned text, the simultaneous desire and aversion toward stimulation (i.e., craving to escape solitude while struggling to protect it) becomes a less puzzling paradox.

Normal autism and symbiosis

Inspired by the Freudian views discussed above is the *separation-individuation theory*, which was formulated by Margaret Mahler (Mahler, Pine, & Bergman, 1975). In this theory, two concepts – normal autism and symbiosis – are relevant to the study of beneficial solitude. More specifically, according to this theory, immediately after birth the infant is a profoundly alone and helpless being. In the first two months of life – the *normal autistic phase* – the infant lives in an *autistic shell*, which does not lead to disorganization. Instead, the stimulus barrier, the omnipotence stemming from the satisfaction of biological needs, and the hallucinatory wish-fulfillment protect the infant from the awareness of isolation, which could be overwhelming for his/her immature ego. The controversial claim that this normal developmental phase could be called *autistic* initiated an intense scientific dialogue. In 1982, Mahler admitted that this is a phase of adaptation in extrauterine life, during which "the newborn has to achieve physiological homeostasis, that is, adequate inner regulation in synchrony with the vocal and gestural rhythms of the caregiver [...] each infant is an active partner in the early dialogue" (our emphasis; Bergman, 1999, p. 5). In a personal communication with Stern in 1983, Mahler also suggested that the autistic phase could have been named *awakening* (Stern, 1985/2000, p. 235), a term very similar to Stern's emerging

sense of self. Pine (1994), Mahler's collaborator, described a *relative autism*, which he considered as "primary attunement to internal physiological stimuli" (p. 10).

Following the *autistic* period, separation-individuation theory suggests that the infant's experience is one involving *social symbiosis*. The infant emerges from the autistic shell and enters a *dual unity*, that is, an undifferentiated state with mother, with "the delusion of a common boundary" (Mahler et al., 1975, p. 45). Omnipotent symbiotic fusion protects the infant from the *awareness of separateness* (which is different from separation) and thus from the premature frightening realization of aloneness. In the light of infant research, Pine (1994, 2004) proposed that this phase is critical for the experience of *moments of merger* (e.g., undifferentiatedness, boundarylessness) that can emerge during nursing (for a discussion of oneness experiences, see succeeding text). It is then that merging becomes highly significant, not only for the infant but for the mother as well, and reaches a kind of resolution, different for each mother-infant dyad.

In a similar line of thought, Thomas Ogden (1994) introduced a primitive infantile state, which he named *autistic-contiguous position*. In the beginning of life, the relation to the object is a sensation experience, that is to say, the infant feels the object (mainly the breast) at the skin surface. Ogden adopted the concept *autistic shapes* and *autistic objects* introduced by Tustin (1990) for high-functioning autistic children, but, like Mahler, he did not refer to the psychopathological condition of autism. Rather, he described a realm of personal isolation, an experience of *being-in-sensation*, which serves as a sanctuary in the face of stress inherent in human relationships and is an essential part of aliveness (Ogden was inspired by Winnicott's theory, which is discussed in the next section). It is as if the infant suspends life in the world of objects by creating an autonomous and insulated realm of nonhuman, machine-like sensation shapes. Although self-generated, this position develops only if the mother has the capacity to allow her infant to exist for some moments without her and to wait.

Taken together, the psychoanalytic insights on the solitary self and its origins suggest that solitude plays an important role in protecting the infant from disorganization caused by excessive internal and external excitation, in a time when his/her ego functions, responsible for selfregulation, are not yet developed. In all these views, there is an implicit recognition that the infant's solitude is at first a state of primary narcissism and, after the emergence of specific object relations, evolves into secondary narcissism, as Freud conceptualized these states. However, although the infant is described as a rather isolated self-system, he/she is protected by the premature and traumatic awareness of aloneness through fantasy and experiences of merger with the caregiver. These two means of protection may be regarded as the prototypes of creativity and engagement with the world (both animate and inanimate), which are the content of beneficial solitude throughout life.

Essential aloneness, non-communicating self and going-on-being

More than Freudian theory, it is the work of D. W. Winnicott which constitutes a hallmark in the understanding of the roots and the developmental significance of solitude, and especially its beneficial aspects. This theory is still influencing contemporary thought and research on this issue, both inside and outside of the psychoanalytic field. Winnicott (1988) argued for the existence of *essential aloneness* in the beginning of life, during a pre-primitive stage of development. It constitutes a paradox because it is an *aloneness of predependence*; that is to say, the infant is not aware of his/her absolute dependence by the caregiver. This notion also implies primary narcissism, the illusion of omnipotence, and mother-infant undifferentiatedness. Aloneness is regarded as *a primary state*, not as *the* primary state, which means that other possible primary states are not excluded (Eigen, 2008), such as companionship and sharing. The *non-communicating self* makes its appearance during the first year of life. Then a change occurs in the perception of love objects, from the *subjective object* to the *objectively perceived object*, in other words, from merging with mother to separateness (Winnicott, 1965). With the use of symbols, the mode of communication changes from implicit and ambiguous to explicit and concrete. The infant leaves the area of omnipotence and enjoys communication. But at that time exactly, there exists an absolutely *private core*, which does not communicate and always remains isolated, because it *has to* remain isolated. Winnicott (1965) wrote: "Although healthy persons communicate and enjoy communicating, the other fact is equally true, that *each individual is an isolate, permanently non-communicating, permanently unknown, in fact, unfound*" (Winnicott's emphasis, p. 187).

It is the game of hide-and-seek, in which "it is joy to be hidden but disaster not to be found" (Winnicott, 1965, p. 186). This mode of communication is not nonverbal but it is forever silent, personal, an indication of *aliveness*. This view may be regarded to reflect the first signs of existential aloneness.

Winnicott (1965) also stated that health means (i) being able to use non-communication in the sense of silent or secret communication with the subjectively perceived objects and (ii) the ability to lose contact with the commonly shared reality with the aim of feeling real and of preserving and enhancing the *true self*. Indeed, the more this *incommunicado element* (Winnicott, 1965) is under the threat of being revealed and altered, the more primitive are the defenses we employ to deal with this threat, because the protection of the innermost being facilitates the establishment of the true self. In this regard, Winnicott may be viewed as a predecessor of researchers who investigate the beneficial aspects of solitude today (e.g., mindfulness; see Leavitt, Butzer, Clarke, & Dvorakova, this volume). Every human infant has a true self, expressed through *spontaneous gesture* and recognized by the *good enough mother*. Mother *mirrors* the infant, that is, responds with sensitivity and reliability to his/her needs, thus facilitating the development of the true self in the infant (Winnicott, 1971). The infant feels alive, a *psychosomatic entity*, with *continuity of being* (Winnicott, 1958, 1965). This fortunate state is reflected in the infant's capacity to be creative and use symbols (e.g., language, symbolic play, dreaming), which form the content of his/her time spent alone¹.

In the beginning of life, the *good enough* environment responds to the infant's needs, and therefore the infant experiences a state of undisturbed isolation, a state of *going-on-being*. The infant leaves this isolation to express his/her spontaneous gesture and explore the environment, without losing his/her sense of self. But if the environment *impinges* on the infant's existence (e.g., by intruding or demanding compliance or by inconsistent responding), the experience of being without having to react continually to external stimulation is broken. The infant returns to his/her isolated state, but this isolation is now comprised of primitive defenses. A *split* occurs between the true self, which needs to be protected from being violently altered by the environment, and a *false* or *compliant self*. The individual is incapable both of being with himself/herself due to the terror of isolation and of developing genuine object ties because the true self, not enriched by lived experience, must remain hidden (Winnicott, 1958).

¹ Inspired by Winnicott's notion of true self, Arnold Modell (1993) argued that the individual has a *private self*, present from the beginning of life. This private space is created as the free-floating libido (i.e., libido which has been withdrawn from animate objects) is invested on inanimate interests. These are our favorite activities, hobbies, inclinations and talents, which emerge from the early years of life, and may be regarded as "objects". Modell goes as far as to claim that the private self is a better term than Winnicott's true self, because the former represents the authenticity and genuineness of the self, in other words, the individual's unique essence, whereas the latter implies that there is a generalized criterion about the amount of "trueness" an individual must achieve.

Winnicott (1965) later became more explicit in distinguishing the modes of not-

communicating. Apart from simple not-communicating (a kind of resting), there exists a mode of active or reactive not-communicating. *Active not-communicating* is a form of voluntary, potentially beneficial aloneness, whereas *reactive not-communicating* is a pathological state, the result of environmental impingement. Therefore, it is one thing to be *isolated*, that is, acknowledging and preserving this core of self, and another thing to be *insulated*, that is, falsely living in a world devoid of real objects. And Winnicott (1965) beautifully portrays this private universe:

[...] we have to recognize that aspect of health: the non-communicating central self, for ever immune from the reality principle, and for ever silent. Here communication is not non-verbal; it is, like the music of the spheres, absolutely personal. It belongs to being alive. And in health, it is out of this that communication naturally arises. (p. 192)

Winnicott's views reflect a developmental and clinical conceptualization of the origins and first manifestations of aloneness and solitude as well as their vicissitudes. In this conceptualization, the mother plays a crucial role in the quality and destiny of her child's solitary experiences. Manifestations of voluntary, beneficial aloneness are evident from the first months of life. Aloneness is regarded as a fundamental way of being and is in a dialectical tension with connectedness, which means that both are needed for normal development and enrich each other. However, Winnicott goes as far as identifying a core of the infant's self (probably a facet of the unconscious) which is – and will always remain – absolutely "solo", idiosyncratic and isolated, and, thus, has to be respected by caregivers as such.

Schema-of-being-with-the-self

Another view on the solitary self in infancy is provided by the work of Daniel Stern (1985/2000, 1994, 1995), who, although inspired by psychoanalytic thinking, was one of the main

proponents of *intersubjectivity* – a theory highly relevant to the study of solitude. He introduced a layered model of development which was later revised (Stern, 1985/2000) to include three *preverbal senses of self* – emergent, core, and subjective (or intersubjective) – all emerging together and in interaction with each other (rather than occurring successively). Under the influence of infant research (e.g., Beebe & Stern, 1977; Trevarthen, 1979), Stern supports the view of the *initial dualism*, which means that intersubjectivity is present from the beginning of life or that the self is with a differentiated other from the start and gradually develops new forms of relatedness.

Of relevance to beneficial solitude is the *self-in-the-presence-of-the-other* (Stern, 1985/2000), which reminds us of Winnicott's notion of the capacity to be alone in the presence of the mother (discussed in the following section). It is a variation of the self-being-with-a-self-regulating-other and refers to the infant's experience of being alone, with his/her perceptions, feelings, thoughts, and actions, in the physical proximity of the caregiver. Even more relevant to the study of solitude is the *schema-of-being-with-the-self*. This concept is inspired by Winnicott's (1965) notion of going-on-being (see previous section) and Tustin's (1990) work with high-functioning autistic children. It represents the way of being with one's own, without other people around, "a state of mentally floating, alone" (Stern, 1995, p. 108), during which mental activities take place, but the individual does not pay attention to them. Stern (1995) wrote of a friend of his who had such an experience and who seemed to enjoy the beneficial aftereffect of solitary moments: "Such moments are experienced as free mental ambling, quite pleasurable, refreshing, and often productive, because when she breaks the moment and 'returns', she often does so with solutions to problems and questions that were pressing just before" (p. 108).

Stern (1995) further argued that when we are alone, "something is always happening" (p. 109), such as intentionally prolonging a peaceful moment in order to keep a state of equilibrium. This is a *feeling shape*. This *moment* of lived experience is "a-way-of-being-with-the-self" or,

better, "a-way-of-one-part-of-the-self's-being-with-another-part-of-the-self". It is as if the individual observes his/her complex mental operations from a distance, without interfering, without the need to complete a task and offer a product. The moment is *interpersonal* in two ways: (i) it is "a-negative-way-of-being-with-someone", because it reduces consciousness and intrusions and (ii) it is a way for a part of the self to be with another part of the self.

The schema-of-being-with-the-self has the same structure as the schema-of-being-with-another (Stern, 1995). Both schemas use the same kinds of constants, are built around feeling shapes, acquire a narrative form, and are characterized by interpersonal motives and functions. "These experiences structure subjective time, much as music can. Such structuring not only organizes but heightens the sense of existing" (Stern, 1995, p. 108).

Stern's (1985/2000) conception of intersubjectivity includes the acceptance (influenced by Winnicott) that some experiences are *non-shareable*, perhaps because they are never *attuned* with by the mother. Total psychic transparency leads to psychopathology, as much as the inability to share experiences leads to alienation and loneliness. From infancy, we live in between these two poles. Being-with-a-self-regulating-other means co-discovering a balance between self-disclosure and privacy. In ill health, the lack of attunement by the mother creates in the infant a feeling of uncanny aloneness. In Stern's view, loneliness is felt *only if sharing has taken place and then has been lost*. Finally, with the emergence of *language* during the end of the first year of life (sense of a verbal self and other), the infant is more likely than before to experience the inability to share some experiences not only with others but also with the self. Paradoxically, language creates a *split* between the lived and the represented experience, thus contributing to estrangement, while simultaneously enabling the infant to share his/her state of 'being-with' others in intimacy, isolation, loneliness, fear, awe, and love'' (Stern, 1985, p. 182). With the advent of symbolic function, the *domain of the private* is established between the false self and the true self; it contains

all experiences that are not shared, but are not disavowed, which means that they are accessible by language and changeable through experience.

In conclusion, it is remarkable that, although Stern formulated a theory for the interpersonal world of the infant and was a proponent of intersubjectivity, he also acknowledged the infant's need for aloneness and linked it with adult experiences of beneficial aloneness. Schema-of-being-with-the-self – a notion combining cognitive and psychoanalytic traditions – implies that from early on the individual is capable of a rather stable representation of a non-shareable self, complemented by the representation of a self-in-a-relationship. Of major importance for the understanding of the creative use of aloneness is Stern's view about the paradox of language. The emergence of language, early in life, marks the end of the possibility for a complete understanding, through all senses, of oneself by a significant other, because of the chasm it produces between the real and the symbolized experience. However, only with language can the individual fill and enjoy this empty space as well as share, as far as this is possible, his/her aloneness experiences with the other.

Idiom

Following Winnicott, Christopher Bollas (1989) posited that each human being has a true self, which may be called idiom, "an inherited set of dispositions" (p. 10), a "unique nucleus" (p. 212), which is present before object relating. The idiom meets culture and, through their dialectic, the psychic life of the individual develops. It is a form of knowledge which Bollas (1989) named the *unthought known*, in the sense of knowledge that exists from the beginning of life but has not been thought out.

It depends on the familial environment how much of this thought will be employed in a child's life. When the environment facilitates the expression of the idiom, it has a *transformational* effect on the infant who experiences a kind of pleasure, which Bollas (1989, p. 19) describes with

the Lacanian term *jouissance*, "the subject's inalienable right to ecstasy". In other words, parents set the foundation for what Bollas (1992) called *being as character*, and is conceptualized as the child's ability to let his/her idiom be expressed by getting absorbed in playing (the process of play), even if this expression is not without risks (i.e., "what will happen to me if I surrender myself in playing?").

The idiom reflects the fundamental and primary aloneness of the individual; "solitude is the container of self" (Bollas, 1989, p. 20). Bollas (1989) defined this inevitable and authentic aloneness as follows:

"In our true self we are essentially alone. Though we negotiate our ego with the other and though we people our internal world with selves and others, and though we are spoken to and for by the Other that is speech (Lacan's theory of the Symbolic) the absolute core of one's being is a wordless, imageless solitude. We cannot reach this true self through insight or introspection. Only by living from this authorizing idiom do we know something of that person sample that we are. (p. 21)"

By creatively combining the ideas of Winnicott and Lacan, Bollas describes aloneness as a (genetic) predisposition and fundamental condition, out of which the individual's character emerges. Aloneness is regarded, therefore, as a unique nucleus of self, called idiom, which will always remain in a solitary state, that is, unthought, unknown, unspoken, and non-shareable. This means that the human being, although "individual", will always remain internally "divided" between the unconscious and the conscious aspects of self. However, from the beginning of life this solitary nucleus is destined to encounter the outer world and be in a dialectical tension with it. It is only when family acknowledges and respects the child's uniqueness, allowing it to be "lived" in everyday interactions, that the child becomes able to develop his/her psychic life, based on mutual enrichment between the idiom and the environment.

The Capacity to Be Alone

Fort-da

The wooden reel or *fort-da* game, which is the famous developmental observation made by Freud (1920/1955a) on his 18-month-old grandson, clearly demonstrates the child's ability to deal with solitude caused by the inevitable brief separation from his mother. In the game, the child repeatedly held the reel by the string which was tied around it and threw it in such a way that it disappeared into his cot; then, he pulled the reel again until it reappeared. This act was accompanied by the utterance *o-o-o-o* (from the German word *fort*, which means *gone*) upon disappearance, and *da* (which means *there*) upon reappearance. The same child also used to look at a mirror, then fall on the floor and utter the words *Baby o-o-o-o*, which means that he could make his image *gone*. In an earlier version of this game, he had the habit of throwing several small objects away, a game accompanied again by *o-o-o-o* (here only disappearance was enacted).

Freud's (1920/1955a) interpretation of the game was that the child, "during this long period of solitude" (p. 15), was able to renunciate the instinctual satisfaction caused by the mother's presence, an ability that constitutes a major cultural achievement for the human being. In addition, by constructively repeating and working through disappearance and reappearance, the child transformed his passive experience of separation and solitude into an active one; he became master of the situation through binding. Thus, the distressing experience of separation from the mother can be a great source of gratification and pleasure if it is expressed in the symbolic level (i.e., words, playing), already from the second year of life. Indeed, Freud (1920/1955a) notices that this game may have been beneficial for the little boy, "a successful piece of self-discipline", as he wrote in an earlier study (Freud, 1900/1953), because when his mother died, about four years later, the boy did not show signs of grief. It seems that the game had prepared him for this irreparable loss.

Negative hallucination

Based on several Freudian views, among which are the importance of absence, hallucinatory wish fulfillment (discussed in previous sections), and the notion of the negative, André Green (1986) used the term *negative hallucination* to describe a normal developmental phenomenon taking place in the early mother-child relationship. The inevitable separation from the mother leaves the infant physically alone. The relationship with her will be preserved only if the increase of tension or excitation caused by her absence is negativized by the infant. This means that the empty and silent space between the mother and the child will be occupied by the negative hallucination of the mother, which consists of primitive (i.e., hallucinatory or satisfying in fantasy) representations of the mother, and is defined by Green (1999, p. 276) as "a representation of the absence of representation". The mother's negative presence is transformed into a *framing structure* for the ego, enabling the child to wait and to tolerate absence as well as the related depressive affect. The framing structure "holds" the mind (in the Winnicottian sense) and constitutes the matrix of future (erotic and aggressive) investments.

Reflecting on Green's views, I argue that this desirable outcome seems to have three developmental antecedents: (i) separation from the mother is not too prolonged, in order to avoid her effacement or fading away in the mind of the infant; (ii) the mother is available, reliable, and warm, in order to facilitate the emergence of the primitive representations and to ensure that the infant experiences holding and containment; and (iii) the mother is not an all-present and intrusive figure, but is able to withdraw discretely leaving the infant alone for a reasonable amount of time, so that her perception be replaced by her representation. Negative hallucination is the child's own creation, which means that his/her psychic space is expanded and gradually populated by representations. Such a rich internal life seems to be the necessary prerequisite for high-quality aloneness experiences. However, this is not an easy task; the infant has to make much effort to address the issue of the mother's absence and to deal with his/her aloneness, in other words, to engage in the *work of the negative* (Green, 1999), and in this work the mother plays a decisive role.

In general, the notion of the negative sheds a different light on the understanding of the origins of beneficial solitude because it shifts our attention from the mother's presence (as attachment theory postulates; see Mikulincer, Shaver, & Inbal Gal, this volume) to the mother's absence. This absence, which entails the infant's aloneness, is a crucial early experience; absence is regarded as negative presence, full of creative fantasies which enhance the inner world of the infant and stir his/her representational activity, therefore expanding his/her capacity to tolerate and enjoy solitude as well as to be patient until the mother returns. This occurs with one condition: the mother needs to alternate between presence and absence with a pace analogous to the infant's ability to deal with aloneness. Otherwise, her image in the mind of the infant is effaced and the infant's aloneness becomes emptiness, a psychic hole that persists in later years and is likely to become the root of severe (mainly narcissistic and borderline) psychopathology.

Oceanic feeling and oneness experience

The sublime aloneness experience, which is deeply rooted in what takes place in infancy, is perhaps the oceanic feeling and, in general, the oneness experience. The concept of the oceanic feeling (or feeling of the eternal) was introduced by Romain Rolland and discussed by Freud (1930/1961) in relation to primary narcissism during infancy. He defined it as "a sensation of 'eternity', a feeling as of something limitless, unbounded" (p. 64) and as "a feeling of indissoluble bond, of being one with the external world as a whole" (p. 65). By definition, this feeling occurs in solitude as in the contact with God, nature or art but it may also take place in the most intimate connection with another human being, such as in love, where the sense of loneliness is expected to be eliminated. It may even take the form of an *ecstatic* or *mystic experience*. In attempting to

formulate a *genetic* explanation of this experience, as he called it, Freud (1930/1961) regarded the oceanic feeling as the result of the regression to the state of primary narcissism, where there is no differentiation of the inner from the outer, or a restoration of limitless narcissism, a view later adopted by Mahler (Mahler et al., 1975) in her description of merger experiences (as noted previously).

More recently, Storr (1988) argued that the individual's ability to feel united with another presupposes a high degree of ego organization and integration. It is a vital and highly subjective experience, with permanent positive effects on the individual. Sometimes, such an experience may completely alter one's life. The Freudian view that the oceanic feeling is regressive (i.e., the illusion of return to an infantile condition, to the bliss of a lost paradise) is dismissed. Storr (1988) considered creative activity, scientific discovery, childbirth, some forms of exercise, silence, and solitude itself as additional triggers for this experience.

Support for this view provides the encounter of psychoanalysis and infant research: merging is possible only if an intact, *bounded sense of self* is first established (Lachmann & Beebe, 1989); merger- or fusion-like experiences reflect a capacity achieved only after the formation of a sense of self and other. The origins of both oneness experiences and the stable sense of self can be traced in early mother-infant matching, attunement, and repair of disruptions in attunement. Similarly, in more recent psychoanalytic thought (Chirban, 2000), it has been argued that only a well-integrated and cohesive self can loosen its boundaries and feel high levels of intimacy with another. These *progressive*, rather than regressive, oneness experiences start with an energetic readiness, which is followed by immersion in the unity, and lead to a self-transformation. They are characterized by timelessness and lack of self-consciousness, and a move forward, instead of a longing for past merger experiences. The distinction between *experiencing oneness* and *searching for* or *fantasizing*

oneness is a crucial one, in that only in the former is the individual really engaged *in the moment* and able to experience all the beneficial outcomes.

In conclusion, all the above views seem to agree that, throughout life, oneness experiences, in which loneliness is diminished and aloneness is felt as heightening the sense of existence, stem from the well-attuned, euphoric moments of meeting between the infant and the mother in the first few months of life (the prototype perhaps being the union of intrauterine life). During childhood, this limitless and timeless elation is usually experienced by the child when he/she is left alone and unbothered, so that he/she becomes immersed in play.

The capacity to be alone and the necessity of being alone

In a previous section I discussed the implications for the solitary self of Winnicott's ideas on essential aloneness, non-communicating self and going-on-being. However, the greatest contribution of his theory to the understanding of aloneness is the brilliant conception of the capacity to be alone (Winnicott, 1965). This conception is at the heart of his developmental and clinical theorization and at the center of psychoanalytic insight on solitude. The capacity to be alone arises from a *paradox*: "This experience is that of being alone, as an infant and small child, in the presence of mother" (p. 30). The mother identifies with her infant during the first months of life, a state called *ego-relatedness* or *object-relating*. Gradually, the infant introjects this supportive mother and becomes able to tolerate and enjoy solitude. Therefore, if all goes well, no one is ever truly alone, as there is always someone there; and only in this *sophisticated aloneness* can the child unfold his/her true self.

This facet of Winnicott's conception can be regarded as the *necessity of being alone*, although he did not explicitly make the distinction between capacity and necessity (Schacht, 2001). The necessity of being alone is described in statements such as the following (Winnicott, 1965): "It is only when alone (that is to say, in the presence of someone) that the infant can discover his own personal life" (p. 34). The capacity to be alone is a major manifestation of emotional maturity and is not acquired by all individuals, whereas the necessity of being alone is universal.

Winnicott (1965) offered a comprehensive description of what we could call "solitude in the first years of life": "The infant is able to become unintegrated, to flounder, to be in a state in which there is no orientation, to be able to exist for a time without being either a reactor to an external impingement or an active person with a direction of interest or movement" (p. 34). He also made the developmental claim that many individuals become able to enjoy solitude before the end of childhood and that some children "may even value solitude as a most precious possession" (Winnicott, 1965, p. 30). When discussing the non-communicating self, he explicitly relates the ability for aloneness with the capacity to concentrate on a task, a major developmental aim during childhood (Winnicott, 1965).

The state *I am alone* passes through three developmental phases. The first one is the *I*, the phase of the integration or unit of the individual; "*I* includes 'everything else is not me" (Winnicott, 1965, p. 61). Next, comes *I am*, which signifies that the infant exists, is alive, although still vulnerable or even paranoid; he/she has a contact with reality (the not-me) and is able to share with the use of the mechanisms of introjection and projection, which facilitate mutual enrichment. *Sharing* means, among other things, that his/her existence is *recognized by others*. And finally, comes *I am alone*, which stems from the infant's awareness that a reliable mother exists for him/her. In this light, *loneliness* can be understood as arising in the *I am* phase (a close parallel to Klein's [1975] depressive position). The infant, even under favorable circumstances, may experience failures in sharing, the main failure being that he/she is not seen or recognized to exist or is not understood by the mother. Therefore, loneliness is lessened by the acknowledgment of his/her existence, by sharing itself.

A precondition for the development of the capacity to be alone is the transition from *object relating* to *object use*. Winnicott (1971) regards this transition as perhaps the most difficult developmental task, in as much as he viewed the capacity to be alone as a major manifestation of emotional maturity. It requires that the subject places the object outside the subject's omnipotent control. In other words, it presupposes the recognition of the object's existence as a separate entity, as having a life of its own in the world of objects. For this procedure to be completed successfully, the object must survive from its destruction (i.e., expression of aggression) by the subject.

The infant's capacity to be alone – a capacity that develops throughout life – depends largely on *the mother's capacity to be alone*. Primary maternal preoccupation, in the sense of the mother's complete devotion to her newborn baby, gradually subsides. Some failures of mother's adaptation to her infant's needs are inevitable, and this gradual *disillusionment* may be beneficial if it occurs according to the infant's developing ability to cope with frustration. The mother's past aloneness experiences, her own memories of time alone and of being cared for, contribute to this solitude *à deux (shared aloneness)*, which is described by Winnicott (1965) as follows: "Egorelatedness refers to a relationship between two people, one of whom at any rate is alone; perhaps both are alone, yet the presence of each is important to the other" (p. 31).

Thus, a very useful distinction between *withdrawal* and *benign aloneness* can now be made. Withdrawal is a defense against persecution fear or anxiety and against a potential danger of losing identification with that from which one withdraws. Benign aloneness reflects the tolerance of ambivalence and the ability to share solitude, that is, the ability to be alone in the presence of another person who is also alone and perceived to be alone (see Rubin, this volume for the origins of social withdrawal in childhood).

Linking and the capacity for thought

A clear connection between the mother's absence and the ensuing infant aloneness, on the one hand, and the capacity for thinking, that is, a very creative outcome, on the other, may be drawn from the work of W. R. Bion, who formulated a theory of thinking. Bion (1967) introduced the concept of *linking* one object with the other, self with objects, and the good and the bad in one and the same object. Linking means the process of connecting among people, emotions and thoughts. It leads the infant to establish *correlation*, which is the basis of true communication and of thinking. The capacity for linking develops early in life in a healthy mother-infant relationship. In such a relationship the mother can *contain* the anxiety and the aggression that the infant projects onto her, and through her *reverie*, to return them to the infant in a modified, "detoxified" form, so that the infant can tolerate them and attribute meaning to them. Such a process transforms the raw (mainly physical and perceptual) elements, the so-called *beta elements*, into *alpha elements*, which are storable and available in thinking, phantasy, memory, dreams, and in psychic life in general, and become *food for thought* (Bion, 1977).

According to Bion's (1967) theory of thinking, thoughts are *preconceptions*. From the first experiences of satisfaction, which are provided to the infant by an actual breast (or breast substitute), the preconception meets a realization and becomes a *concept*. However, the mother is not omnipresent and omnipotent. Therefore, the frequent absence of the breast, which is experienced as a *no-breast* or an *"absent" breast inside*, produces a frustration in the infant; this frustration meets the concept and becomes a *thought*. When the infant can withstand frustration and his/her envy for the mother's capacity for reverie is not too great, an *apparatus for thinking thoughts* (Bion, 1967) develops, in other words, a way of thinking that is based on the links between thoughts,. The absence of the breast and the related frustration constitute for the infant a problem to be solved, which is at the root of thinking and *learning from experience*. Through introjecting a

model of containment from the start, the developing person has the chance to feel coherent and contained when he/she is alone. Furthermore, the capacity for thinking implies that one's existence is *re-cognized* by another, a state that apparently reduces loneliness.

Bion's views about the absent breast as well as the no-breast inside the infant are relative to the notion of the negative as conceived by Green (discussed in a previous section). They also place great emphasis on the mother's absent presence as a fundamental experience of existence. A significant contribution of Bion's theory to the understanding of mental health, and aloneness in particular, is that, when the linking process is facilitated by the infant's genetic predisposition and the mother's capacity for containment and reverie, the absence (the negative) becomes a fertile ground for thinking and learning. In other words, the mother's absence and the resulting aloneness produce thoughts that exert pressure to be linked and develop into creative thinking – from the beginning of life.

Companions in Solitude

Transitional objects and transitional phenomena

Winnicott's insights into the origins of aloneness and solitude (as discussed above) are accompanied by insights into the capacity to use aloneness in a beneficial manner. He proposed a third, *intermediate area of experiencing*, located between the internal/psychic and the external/shared reality and enriched by both of them. This area is closely linked with the capacity to be alone (Winnicott, 1958, 1971). It is a *potential space* between the subject and the objects, which are beyond the subject's omnipotent control. It is "a resting place for the individual engaged in the perpetual human task of keeping inner and outer reality separate yet interrelated" (Winnicott, 1971,

p. 2).

In this area, transitional objects and transitional phenomena appear in the beginning of life, followed by the use of symbols and playing and finally by culture. The transitional object may be the thumb, a pacifier, a blanket, a teddy bear, a doll or, later, a hard object (e.g., a toy car), which is steadily available to the child. The transitional phenomena are rather intangible states, such as the infant's (musical) vocalizations, rhythmic movements, and other habits and rituals, which usually appear at the time before sleep. Parents acknowledge the use of the transitional object (e.g., they encourage their children to take it with them), which means that they allow for the experience of illusion. Transitional objects and transitional phenomena are considered healthy and universal. They constitute a significant part of time alone during infancy and toddlerhood, as well as a way of coping with the pain of loneliness even in childhood, as Winnicott (1958) claimed: "Patterns set in infancy may persist into childhood, so that the original soft object continues to be absolutely necessary at bed-time or at time of loneliness or when a depressed mood threatens" (p. 232).

Transitional objects and transitional phenomena are the first manifestations of *playing*, *shared playing*, and *creativity*. With advancing age, they lose their meaning and become diffused in the whole cultural experience. While playing, in the presence of the mother and in time alone, children *do things* in time and space and experience a sense of control over the external world (see Coplan, Ooi, & Hipson, this volume). Playing means joining as well as separating. The child experiences a connection of the inner with the outer, but at the same time he/she achieves a *near-withdrawal state* (Winnicott, 1971), characterized by preoccupation and the sense of being lost without losing the identification with the mother object. The child is able to forget himself/herself in a formless, unintegrated state, because the mother has been able to leave him/her alone and because she is available "when remembered after being forgotten" (Winnicott, 1971, p. 48).

The person and *cultural experience* form a unit. Creative playing, in the first years of life, is the precursor of the capacity to draw from cultural heritage and to contribute to it. Interests in the inanimate world may be regarded as a type of object relations having an important self-regulating function (Eagle, 1981). Winnicott (1971) aptly describes the potential space as "an infinite area of separation" (p. 108), which can be filled by playing, so that pain, in other words separation itself, can be dealt with effectively. In this line of thought, *separation anxiety* reflects a denial of separation, the incapacity to be alone. Winnicott (1958) described the case of an 8-year-old boy who compulsively used a string to join things together in an attempt to deny his fear of separation from his mother, after having experienced her depression and some real separations from her. However, if the familial environment facilitates life in this area of potentially limitless opportunities for creativity, separation gradually becomes a *form of union* of the individual with the past, the present, and the future of his/her culture.

Representations of interactions that have been generalized and the evoked companion

As described in the section on the solitary self, Stern (1985/2000) introduced a theory for the interpersonal world of the infant. In this theory he characterized ages 2-6 months as the most social period of life. During this time, the infant experiences a sense of *core self* and *core relatedness*, and organizes his/her experience of *being-with-an-other*. This being-with-a-self-regulating-other is the source of the *representations of interactions that have been generalized (RIGs)*, which are mental representations of generalized episodes of lived encounter with other people. Episodic memory plays a central role here. Every time such a representation is activated, the infant has in mind an *evoked companion*, which may be regarded as a protection against loneliness. Evoked companions can be activated all throughout life. Stern (1985/2000) wrote: "[...] because of memory we are rarely alone, even (perhaps especially) during the first half-year of life. The infant engages with real external partners some of the time and with evoked companions almost all the time. Development requires a constant, usually silent, dialogue between the two" (p. 118).

In this sense, solitude is often populated. The infant is alone for a while, playing with a toy which the mother has previously animated or personified. This toy has become a self-regulating *person-thing*, a real companion in aloneness. The self is solitary and simultaneously social, as the infant's experience is "an I-experience with an other" (Stern, 1985/2000, p. 115), and not a *we* or merger experience, whether the other is a real other or an evoked companion.²

Imaginary companions, fantasies and daydreaming

Escape into fantasies and daydreaming is a basic premise of classic psychoanalytic theory. They stem from unsatisfied wishes and their fabric is wish fulfillment and correction of reality (Freud, 1908/1959a). Life in fantasy is expected to be the infant's and child's way of being when alone and to serve important developmental functions. More specifically, a very frequent fantasy for toddlers and preschool-aged children is the *imaginary companion*. This companion is an invisible person or animal created by the child who talks and plays with it for a considerable period of time, as if this companion were real. It can also be a real personified object (e.g., a doll). Among the various psychoanalytic interpretations of the developmental functions of this creation is the one that stresses its importance in the child's struggle against loneliness (Bender & Vogel, 1941; Benson & Pryor, 1973; Nagera, 1969). Neglect and rejection of the child, shift of the mother's attention to something else, as, for example, happens when a sibling is born, and lack of real playmates before the child starts school, are some common sources of loneliness and motives for the creation of an imaginary companion. A deficit in the child's life, a more or less serious narcissistic trauma, is compensated by this fantasy. Following is the narrative of a 10-year-old boy, an only child, who

² The RIGs and the evoked companions as well as the *silent* dialogue between the real and the evoked companions are highly consistent with Stern's concept of the schema-of-being-with-the-self (discussed in the section on the solitary self and introduced 10 years later, in 1995), although Stern did not make an explicit connection between them.

had experienced the death of a sibling, abandonment by his father, and neglect by his mother (Bender & Vogel, 1941):

I was playing and one day it seemed I had a brother and a sister – John and Mary. They come when I am very lonely, not when I am playing with the boys. They are very much like me. My brother is 9 and my sister is 10. They are very pretty. They play with me and only talk about games and where I was. They would ask why I have been bad all the time. They say if I will be bad all the time and never good they won't come again. They are a great comfort to me when I am all alone. (p. 59)

The imaginary companion is usually endowed with good qualities: he/she is kind, smart, strong, loveable, neat, obedient, and thus accepted by parents (Nagera, 1969). Through this creation, the child feels accepted and loved by parents during a period when infantile omnipotence subsides, the gradual loss of idealized parental images takes place, and mourning reactions appear. The imaginary companion can be viewed as a *narcissistic guardian* (Bach, 1971; Benson & Pryor, 1973), as a *transitional self* (Klein, 1985) for all children, independently of the course of their development, and as a means of alleviating common loneliness and benefiting from inevitable solitude.

In addition to the imaginary companion, three types of conscious fantasies and daydreams have been explicitly associated with loneliness and solitude: family romance, animal fantasies and the fantasy of having a twin. All of them are regarded as common themes of the pre-latency and latency period (i.e., early, middle, and late childhood) and as arising from the child's disappointment during the oedipal phase.

More specifically, family romance (Freud, 1909/1959b) is the child's conscious belief that he/she is an adopted child or a step-child, and that his/her real parents are nobler, stronger, and lovelier than those with whom he/she lives. It was Dorothy Burlingham (1945) who regarded family romance as motivated also by the wish to overcome loneliness emerging from the child's disillusionment with parents and from his/her unconscious death wishes for them.

Animal fantasies usually reflect a denial of painful reality, as Anna Freud (1937) argued. The child creates an intimate connection with an imaginary animal companion, with the aim again to feel less lonely. The companions do not need words to understand each other. These animals provide the child with unconditional love, faith, and devotion (Burlingham, 1945).

In the fantasy of having a twin, the imaginary twin substitutes the lost love object, that is, parents, and "is meant to fulfill many of the daydreamer's longings, above all to keep him from solitude and loneliness" (Burlingham, 1945, p. 208). A narcissistic trauma is at the root of this fantasy. By creating the twin, the child feels invincible, twice as big, strong, and smart, so that the sense of omnipotence is partly restored. Narcissism is hidden behind object love, loneliness is alleviated, and the capacity for beneficial aloneness through a rich fantasy life is enhanced.

Conclusions: Beneficial solitude as a paradox

Various psychoanalytic views on solitude, and especially on its beneficial function as well as their implications for the understanding of the origins of solitude were presented and discussed. These views belong to different models, such as the Freudian drive/structure and the object relations model. In most of them, the infant is portrayed as a helpless, essentially alone, yet undifferentiated being. The main function of this lack of differentiation between the infant and the object world is to protect the former from the awareness of aloneness or of the absolute dependence from the caregiver, thus to help create a sense or illusion of omnipotence. The developing individual gradually moves from a more or less profound narcissistic state, from a more or less impenetrable aloneness and encasement, to the internalization of good objects or good relationships, so that he/she is able not to feel lonely when alone but instead to thrive in solitude. Some writers recognize (although with notable variations) the existence of a private, more or less isolated, core of the self and the necessity or inevitability of detachment and aloneness experiences beginning in early infancy. Lack of respect for infants' solitude is an equally traumatic experience as relational deprivation in this age period. The right to dwell in splendid isolation and the perils of solitude deprivation are also acknowledged.

A distinction is made between active/voluntary and reactive/defensive aloneness. However, solitude as a defensive stance is a not so clearly depicted issue and warrants further insight. There are differences among theorists as to the infant's degree of activity or passivity exhibited in his/her solitary life. Solitude may be, on the one hand, a retreat in front of the pain inherent in human relations. On the other hand, it is also deemed to provide a fertile ground for the cultivation of authenticity, creativity and genuine relationships, although few psychoanalytic authors paid attention to this matter, as well as to the simple restorative function of solitude. Polarities or conflicts between opposites (e.g., pleasure-seeking vs. object-seeking motives, separateness vs. union, dependency vs. autonomy, personal uniqueness vs. similarity/conformity, privacy vs. sharing), form the core of several psychoanalytic interpretations of solitude and are treated from different viewpoints. Infancy is the sensitive period for the development of various types of symbolic function which, among other things, form the content of solitude and are, in combination with the rich fantasy (even hallucinatory) life of the infant, the main routes to the reduction of loneliness. Experiences – either illusory and regressive or active and progressive – of unity as presymbolic experiences and as a way of transcending loneliness are also built during early infancy in the relationship with the caregiver.

Solitude is a *multifaceted paradox*, much as the self is (Modell, 1993), a paradox which is evident from birth or even before it. I argue that some facets of this paradox, as emerging from the psychoanalytic views discussed previously, are the following:

- The newborn and infant is an essentially alone but merged-with-an-other being.
- There is an initial narcissistic (solipsistic) state coupled with social symbiosis.
- From infancy, we need solitary moments for tension reduction and object ties for excitation.
- We are alone in the presence of the other, initially the mother (in the most fortunate cases), we are lonely in the presence of the other (in the rather unfortunate cases), and we fear being alone with the other (in the most unfortunate cases).
- Experiencing real loneliness (and not the terror of aloneness) and enjoying solitude are achievements made possible only through bonding and genuine sharing.
- The mutual recognition and sharing of aloneness in the mother-infant dyad leads to a healthy relationship.
- A part of the self communicates with other parts of the self.
- A variety of companions inhabit alone space and time.
- Separateness, absence, and loss are the preconditions for symbolic connectedness.
- The protection of a private core self is an outcome and prerequisite of genuine relations.
- One can be with the other only through the capacity to be an integrated self.

To the question of whether the initial human condition is one of aloneness *or* connectedness, of monadic or dyadic existence, recent, research-informed psychoanalytic views (e.g., Mitchell, 1997; Ogden, 1994) reply that it is *both*. A contemporary psychoanalytic suggestion (Eagle, 2011) for an integration of drive-reduction and object relations theory provides additional support to the fact that solitude is a need for achieving self-regulation and inner pleasure *and* a catastrophe when it opposes our inborn readiness for relatedness.

In order to understand the paradoxical nature of solitude and be able to benefit from aloneness experiences, it may be useful to take into account the notion of *negative capability*, introduced by poet John Keats in 1817 and applied in the psychoanalytic field by Bion (1970, 1992). Negative capability means that "man is capable of being in uncertainties, Mysteries, doubts without any irritable reaching after fact and reason" (Keats, 2002, p. 60). In other words, it is an attitude of openness and receptivity, which broadens psychic space. The individual is capable of keeping opposites in mind, thus enduring absence of connection, which is associated with the pain of loneliness, and fluidity, which is associated with the creative facets of solitude. *Un*sociability and social *dis*interest express this facet of the *negative*, that is, dwelling in aloneness without anxiety, but with the capacity to be patient, wait, and surrender oneself to this unsaturated state of open possibilities. It would appear that accepting the paradox of solitude and its dialectical tension – a paradox which can never be completely resolved – is a difficult yet major developmental and epistemological achievement.

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