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Notes on Symbol Formation¹

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The understanding and interpretation of unconscious symbolism is one of the main tools of the psychologist. Often he is faced with the task of understanding and recognizing the meaning not only of a particular symbol but also of the whole process of symbol formation. This applies particularly to work with patients who show a disturbance or inhibition in the formation or free use of symbols, as for instance, psychotic or schizoid patients.

To give a very elementary example from two patients. One—whom I will call A—was a schizophrenic in a mental hospital. He was once asked by his doctor why it was that since his illness he had stopped playing the violin. He replied with some violence: 'Why? do you expect me to masturbate in public?'

Another patient, B, dreamt one night that he and a young girl were playing a violin duet. He had associations to fiddling, masturbating, etc., from which it emerged clearly that the violin represented his genital and playing the violin represented a masturbation phantasy of a relation with the girl.

Here then are two patients who apparently use the same symbols in the same situation—a violin representing the male genital, and playing the violin representing masturbation. The way in which the symbols function, however, is very different. For A, the violin had become so completely equated with his genital that to touch it in public became impossible. For B, playing the violin in his waking life was an important sublimation. We might say that the main difference between them is that for A the symbolic meaning of the violin was conscious, for B unconscious. I do not think, however, that this was the most important difference between the two patients. In the case of B, the fact that the meaning of the dream became completely conscious had in no way prevented him from using his violin. In A, on the other hand, there were many symbols operating in his unconscious in the same way in which the violin was used on the conscious

Taking another example—this time from a schizophrenic patient in an analytical situation: One session, in the first weeks of his analysis, he came in blushing and giggling, and throughout the session would not talk to me. Subsequently we found out that previous to this hour he had been attending an occupational therapy class in which he was doing carpentry, making a stool. The reason for his silence, blushing, and giggling was that he could not bring himself to talk to me about the work he was doing. For him, the wooden stool on which he was working, the word 'stool' which he would have to use in connexion with it, and the stool he passed in the lavatory were so completely felt as one and the same thing that he was unable to talk to me about it. His subsequent analysis revealed that this equation of the three 'stools', the word, the chair, and the faeces, was at the time completely unconscious. All he was consciously aware of was that he was embarrassed and could not talk to me.

The main difference between the first and second patient quoted in their use of the violin as the symbol for the male genital was not that in the one case the symbol was conscious and in the other unconscious, but that in the first case it was felt to be the genital, and in the second to represent it.

According to Ernest Jones's (2) definition, the violin of A, the schizophrenic, would be considered a symbol. Similarly in the dream of B. But it would not be a symbol in B's waking life when it was used in sublimation.

In his paper written in 1916 (2), Jones differentiated unconscious symbolism from other forms of 'indirect representation', and made the following statements about true unconscious symbolism:

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- i. A symbol represents what has been repressed from consciousness, and the whole process of symbolization is carried on unconsciously.
- ii. All symbols represent ideas of 'the self and of immediate blood relations and of the phenomena of birth, life and death'.

- iii. A symbol has a constant meaning. Many symbols can be used to represent the same repressed idea, but a given symbol has a constant meaning which is universal.
- iv. Symbolism arises as the result of intrapsychic conflict between the 'repressing tendencies and the repressed'. Further: 'Only what is repressed is symbolized; only what is repressed needs to be symbolized'.

He further distinguishes between sublimation and symbolization. 'Symbols,' he says, 'arise when the affect investing the symbolized idea has not, as far as the symbol is concerned, proved capable of that modification in quality which is denoted by the term sublimation.'

Summarizing Jones's points, one might say that when a desire has to be given up because of conflict and repressed, it may express itself in a symbolical way, and the object of the desire which had to be given up can be replaced by a symbol.

Further analytical work, and particularly play analysis with young children, has fully confirmed some main points of Jones's formulation. The child's first interests and impulses are directed to his parents' bodies and his own, and it is those objects and impulses existing in the unconscious which give rise to all further interests by way of symbolization. Jones's statement, however, that symbols are formed where there is no sublimation soon gave rise to disagreement. In fact, Jones himself as well as Freud wrote many interesting papers analysing the content of works of art. In 1923, in her paper on infant analysis (3), Melanie Klein did not agree with this view on the relation between symbolization and sublimation. She tried to show that children's play—a sublimated activity—is a symbolic expression of anxieties and wishes.

We might consider it as a question of terminology, and accept Jones's view that we should call symbols only those substitutes which replace the object without any change of affect. On the other hand, there are very great advantages in extending the definition to cover symbols used in sublimation. In the first place the wider definition corresponds better to common linguistic usage. Jones's concept excludes most of that which is called 'symbol' in other sciences and in everyday language. Secondly, and I shall elaborate this point later, there seems to be a continuous development from the primitive symbols as described by Jones to the symbols used in self-expression, communication, discovery, creation, etc. Thirdly, it is difficult to establish a connexion between the early primitive desires and processes in the mind and the later development of the individual, unless the wider concept of symbolism is admitted. In the analytical view, the child's interest in the external world is determined by a series of displacements of affect and interests from the earliest to ever new objects. And, indeed, how could such a displacement be achieved otherwise than by way of symbolization?

In 1930, Melanie Klein (3) raised the problem of inhibition in symbol formation. She described an autistic little boy of four, Dick, who could not talk or play; he showed no affection or anxiety, and took no interest in his surroundings apart from door-handles, stations, and trains, which seemed to fascinate him. His analysis revealed that the child was terrified of his aggression towards his mother's body, and of her body which he felt had turned bad because of his attacks on it; because of the strength of his anxieties he had erected powerful defences against his phantasies about her. There resulted a paralysis of his phantasy life and of symbol formation. He had not endowed the world around him with any symbolic meaning and therefore took no interest in it. Melanie Klein came to the conclusion that if symbolization does not occur, the whole development of the ego is arrested.

If we accept this view it follows that the processes of symbolization require a new and more careful study. To begin with, I find it helpful, following C. Morris (4), to consider symbolizing as a three -term relation, i.e. a relation between the thing symbolized, the thing functioning as a symbol, and a person for whom the one represents the other. In psychological terms, symbolism would be a relation between the ego, the object, and the symbol.

Symbol formation is an activity of the ego attempting to deal with the anxieties stirred by its relation to the object. That is primarily the fear of bad objects and the fear of the loss or inaccessibility of good objects. Disturbances in the ego's relation to objects are reflected in

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disturbances of symbol formation. In particular, disturbances in differentiation between ego and object lead to disturbances in differentiation between the symbol and the object symbolized and therefore to concrete thinking characteristic of psychoses.

Symbol formation starts very early, probably as early as object relations, but changes its character and functions with the changes in the character of the ego and object relations. Not only the actual content of the symbol, but the very way in which symbols are formed and used seem to me to reflect very precisely the ego's state of development and its way of dealing with its objects. If symbolism is seen as a three-term relation, problems of symbol formation must always be examined in the context of the ego's relation with its objects.

I shall try to describe briefly some basic attitudes of the ego to the objects, and the way in which I think they influence the processes of symbol formation and the functioning of symbolism. My description is based here on Melanie Klein's (3) concept of the paranoid schizoid position and of the depressive position. According to her, the oral stage of development

falls into two phases, the earlier being the point of fixation of the schizophrenic group of illnesses, the later that of the manic-depressive. In my description, which will of necessity be very schematic, I shall select only those points which are directly relevant to the problem of symbol formation.

The chief characteristics of the infant's first object relations are the following. The object is seen as split into an ideally good and a wholly bad one. The aim of the ego is total union with the ideal object and total annihilation of the bad one, as well as of the bad parts of the self. Omnipotent thinking is paramount and reality sense intermittent and precarious. The concept of absence hardly exists. Whenever the state of union with the ideal object is not fulfilled, what is experienced is not absence; the ego feels assailed by the counterpart of the good object—the bad object, or objects. It is the time of the hallucinatory wish-fulfilment, described by Freud, when the thought creates objects which are then felt to be available. According to Melanie Klein, it is also the time of the bad hallucinosis when, if the ideal conditions are not fulfilled, the bad object is equally hallucinated and felt as real.

A leading defence mechanism in this phase is projective identification. In projective identification, the subject in phantasy projects large parts of himself into the object, and the object becomes identified with the parts of the self that it is felt to contain. Similarly, internal objects are projected outside and identified with parts of the external world which come to represent them. These first projections and identifications are the beginning of the process of symbol formation.

The early symbols, however, are not felt by the ego to be symbols or substitutes, but to be the original object itself. They are so different from symbols formed later that I think they deserve a name of their own. In my paper of 1950 (7) I suggested the term 'equation'. This word, however, differentiates them too much from the word 'symbol' and I would like to alter it here to 'symbolic equation'.

The symbolic equation between the original object and the symbol in the internal and the external world is, I think, the basis of the schizophrenic's concrete thinking where substitutes for the original objects, or parts of the self, can be used quite freely, but, as in the two examples of schizophrenic patients which I quoted, they are hardly different from the original object: they are felt and treated as though they were identical with it. This non-differentiation between the thing symbolized and the symbol is part of a disturbance in the relation between the ego and the object. Parts of the ego and internal objects are projected into an object and identified with it. The differentiation between the self and the object is obscured. Then, since a part of the ego is confused with the object, the symbol—which is a creation and a function of the ego—becomes, in turn, confused with the object which is symbolized.

Where such symbolic equations are formed in relation to bad objects, an attempt is made to deal with them as with the original object, that is by total annihilation and scotomization. In Melanie Klein's paper quoted above (3), it seemed as though Dick had formed no symbolic relations to the external world. The paper was written very early on in Dick's analysis, and I wonder, on the basis of my own experience with schizophrenics, whether it did not, perhaps, subsequently transpire that Dick had formed numerous symbolic equations in the external world. If so, then these would have carried the full anxiety experienced in relation to the original persecutory or guilt-producing object: his mother's body, so that he had had to deal with them by annihilation, that is by total withdrawal of interest. Some of the symbols which

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he had formed as his analysis progressed, and he started to show an interest in certain objects in the consulting room, seemed to have had the characteristics of such symbolic equations. For instance, when he saw some pencil shavings he said: 'Poor Mrs. Klein'. To him the shavings were Mrs. Klein cut into bits.

This was the case in the analysis of my patient Edward (7). At one stage in the analysis a certain degree of symbol formation on a symbolic equation basis had occurred, so that some anxiety was displaced from the person of his analyst, felt as a bad internal object, on to substitutes in the external world. Thereupon the numerous persecutors in the external world were dealt with by scotomization. That phase of his analysis, which lasted several months, was characterized by an extreme narrowing of his interests in the external world. At that point also his vocabulary became very poor. He forbade himself and me the use of many words which he felt had the power to produce hallucinations and therefore had to be abolished. This is strikingly similar to the behaviour of a Paraguayan tribe, the Abipones, who cannot tolerate anything that reminds them of the dead. When a member of the tribe dies, all words having any affinity with the names of the deceased are immediately dropped from the vocabulary. In consequence, their language is most difficult to learn, as it is full of blocks and neologisms replacing forbidden words.

The development of the ego and the changes in the ego's relation to its objects are gradual, and so is the change from the early symbols, which I called symbolic equations, to the fully formed symbols in the depressive position. It is therefore only for the sake of clarity that I shall make here a very sharp differentiation between the ego's relations in the paranoidschizoid position and in the depressive position respectively, and an equally sharp differentiation between the symbolic equations and the symbols which are formed during and after the depressive position.

When the depressive position has been reached, the main characteristic of object relation is that the object is felt as a whole object. In connexion with this there is a greater degree of awareness and differentiation of the separateness between the ego and the object. At the same time, since the object is recognized as a whole, ambivalence is more fully experienced. The ego in this phase is struggling with its ambivalence and its relation to the object is characterized by guilt, fear of loss or actual experience of loss and mourning, and a striving to re-create the object. At the same time, processes of introjection become more pronounced than those of projection, in keeping with the striving to retain the object inside as well as to repair, restore and re-create it.

In favourable circumstances of normal development, after repeated experiences of loss, recovery, and re-creation, a good object is securely established in the ego. Three changes in relation to the object, as the ego develops and integrates, affect fundamentally the ego's reality sense. With an increased awareness of ambivalence, the lessening of the intensity of projection, and the growing differentiation between the self and the object, there is a growing sense of reality both internal and external. The internal world becomes differentiated from the external world. Omnipotent thinking, characteristic of the earlier phase, gradually gives way to more realistic thinking. Simultaneously, and as part of the same process, there is a certain modification of the primary instinctual aims. Earlier on, the aim was to possess the object totally if felt as good, or to annihilate it totally if felt as bad. With the recognition that the good and the bad objects are one, both these instinctual aims are gradually modified. The ego is increasingly concerned with saving the object from its aggression and possessiveness. And this implies a certain degree of inhibition of the direct instinctual aims, both aggressive and libidinal.

This situation is a powerful stimulus for the creation of symbols, and symbols acquire new functions which change their character. The symbol is needed to displace aggression from the original object, and in that way to lessen the guilt and the fear of loss. The symbol is here not an equivalent of the original object, since the aim of the displacement is to save the object, and the guilt experienced in relation to it is far less than that due to an attack on the original object. The symbols are also created in the internal world as a means of restoring, re-creating, recapturing and owning again the original object. But in keeping with the increased reality sense, they are now felt as created by the ego and therefore never completely equated with the original object.

Freud (1) postulates that a modification of instinctual aims is the basic pre-condition of sublimation. In my view the formation of symbols in the depressive position necessitates

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some inhibition of direct instinctual aims in relation to the original object and therefore the symbols become available for sublimation. The symbols, created internally, can then be reprojected into the external world, endowing it with symbolic meaning.

The capacity to experience loss and the wish to re-create the object within oneself gives the individual the unconscious freedom in the use of symbols. And as the symbol is acknowledged as a creation of the subject, unlike the symbolic equation, it can be freely used by the subject.

When a substitute in the external world is used as a symbol it may be used more freely than the original object, since it is not fully identified with it. Insofar, however, as it is distinguished from the original object it is also recognized as an object in itself. Its own properties are recognized, respected, and used, because no confusion with the original object blurs the characteristics of the new object used as a symbol.

In an analysis we can sometimes follow very clearly the changes in the symbolic relations in the patient's attitude to his faeces. On the schizoid level the patient expects his faeces to be the ideal breast; if he cannot maintain this idealization his faeces become persecutory, they are ejected as a bitten-up, destroyed and persecuting breast. If the patient tries to symbolize his faeces in the external world the symbols in the external world are felt to be faeces—persecutors. No sublimation of anal activities can occur under these conditions.

On the depressive level, the feeling is that the introjected breast has been destroyed by the ego and can be re-created by the ego. The faeces may then be felt as something created by the ego out of the object and can be valued as a symbol of the breast and at the same time as a good product of the ego's own creativity.

When this symbolic relation to faeces and other body products has been established a projection can occur on to substances in the external world such as paint, plasticine, clay, etc., which can then be used for sublimation.

When this stage of development has been achieved, it is of course not irreversible. If the anxieties are too strong, a regression to a paranoid-schizoid position can occur at any stage of the individual's development and projective identification may be resorted to as a defence against anxiety. Then symbols which have been developed and have been functioning as symbols in sublimation, revert to concrete symbolic equations. This is mainly due to the fact that in massive projective identification the ego becomes again confused with the object, the symbol becomes confused with the thing symbolized and therefore turns into an equation.

In the example of the schizophrenic patient A quoted at the beginning of this paper, there was a breakdown of an already established sublimation. Prior to his schizophrenic breakdown, the violin had been functioning as a symbol and used for purposes of sublimation. It had only become concretely equated to the penis at the time of his illness. Words which had certainly developed at the time when the ego is relatively mature, become equated with the objects that they should represent, and become experienced as concrete objects when projective identification occurs with the resulting confusion between the symbols created by the ego: the word, or even the thought, and the object that they were to symbolize.

I should like at this point to summarize what I mean by the terms 'symbolic equation' and 'symbol' respectively, and the conditions under which they arise. In the symbolic equation, the symbol-substitute is felt to be the original object. The substitute's own properties are not recognized or admitted. The symbolic equation is used to deny the absence of the ideal object, or to control a persecuting one. It belongs to the earliest stages of development.

The symbol proper, available for sublimation and furthering the development of the ego, is felt to represent the object; its own characteristics are recognized, respected, and used. It arises when depressive feelings predominate over the paranoid-schizoid ones, when separation from the object, ambivalence, guilt, and loss can be experienced and tolerated. The symbol is used not to deny but to overcome loss. When the mechanism of projective identification is used as a defence against depressive anxieties, symbols already formed and functioning as symbols may revert to symbolic equations.

Symbol formation governs the capacity to communicate, since all communication is made by means of symbols. When schizoid disturbances in object relations occur, the capacity to communicate is similarly disturbed: first because the differentiation between the subject and the object is blurred, secondly because the means of communication are lacking since symbols are felt in a concrete fashion and are therefore unavailable for purposes of communication. One of the everrecurring difficulties in the analysis of psychotic patients is this difficulty of

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communication. Words, for instance, whether the analyst's or the patient's, are felt to be objects or actions, and cannot be easily used for purposes of communication.

Symbols are needed not only in communication with the external world, but also in internal communication. Indeed, it could be asked what is meant when we speak of people being well in touch with their unconscious. It is not that they have consciously primitive phantasies, like those which become evident in their analyses, but merely that they have some awareness of their own impulses and feelings. However, I think that we mean more than this; we mean that they have actual communication with their unconscious phantasies. And this, like any other form of communication, can only be done with the help of symbols. So that in people who are 'well in touch with themselves' there is a constant free symbolformation, whereby they can be consciously aware and in control of symbolic expressions of the underlying primitive phantasies. The difficulty of dealing with schizophrenic and schizoid patients lies not only in that they cannot communicate with us, but even more in that they cannot communicate with themselves. Any part of their ego may be split off from any other part with no communication available between them.

The capacity to communicate with oneself by using symbols is, I think, the basis of verbal thinking—which is the capacity to communicate with oneself by means of words. Not all internal communication is verbal thinking, but all verbal thinking is an internal communication by means of symbols—words.

An important aspect of internal communication is the integration of earlier desires, anxieties, and phantasies into the later stages of development by symbolization. For instance, in the fully developed genital function, all the earlier aimsanal, urethral, oral—may by symbolically expressed and fulfilled, a point beautifully described in Ferenczi's *Thalassa*.

And this takes me to the last point of my paper. I think that one of the important tasks performed by the ego in the depressive position is that of dealing not with depressive anxieties alone, but also with unresolved earlier conflicts. A new achievement belonging to the depressive position; the capacity to symbolize and in that way to lessen anxiety and resolve conflict, is used in order to deal with the earlier unresolved conflicts by symbolizing them. Anxieties, which could not be dealt with earlier on, because of the extreme concreteness of the experience with the object and the object-substitutes in symbolic equations, can gradually be dealt with by the more integrated ego by symbolization, and in that way they can be integrated. In the depressive position and later, symbols are formed not only of the whole destroyed and re-created object characteristic of the depressive position, but also of the split object—extremely good and extremely bad—and not only of the whole object but also of part-objects. Some of the paranoid and ideal object relations and anxieties may be symbolized as part of the integrative process in the depressive position.

The fairy tale is an example in point. It deals basically with the witch and the fairy godmother, Prince Charming, the ogre, etc., and has in it a great deal of schizophrenic content. It is, however, a highly integrated product, an artistic creation which very fully symbolizes the child's early anxieties and wishes. I should like to illustrate the function of the fairy tale by some material from the analysis of an adolescent schizophrenic. This girl had been hallucinated and openly schizophrenic since the age of four. She had, however, a great many depressive features and there were in her life phases of relatively greater integration. In these phases, when she felt less persecuted, and, as she told me, could experience some longing for her parents, she used to write fairy tales. In the bad phases, the bad figures of her fairy tales came to life and persecuted her. One day, after many weeks of silence, when she was obviously hallucinated in a very persecutory way she suddenly turned round to me and asked with great fear 'What are the Lancashire witches?' I had never heard of the Lancashire witches, she had never mentioned them before, but I knew that she herself came from Lancashire. After some interpretations she told me that when she was about 11 (she had at that time actually a whole year free of hallucinations), she had written a fairy tale about Lancashire witches. The phase of her analysis following this session has been very revealing. It turned out that the Lancashire witches represented both herself and her mother. The anxiety situation went right back to early childhood, when she saw herself and her mother as devouring one another or devouring father. When a greater degree of integration was achieved and she established a more realistic relation to her parents, the earlier situation was dealt with by symbol formation: by writing the fairy tale about the Lancashire witches. In the

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subsequent deterioration of her health, the early persecutory situation recurred with concrete intensity but in a new form. The fairy tale come to life: the Lancashire witches—the fairy-tale figures which she had created, had become a concrete external reality. In the consulting room it was quite clear how this concretization of the fairy tale depended on projective identification. She turned to me and asked me about the Lancashire witches. She expected me to know who they were. In fact, she thought that I was a Lancashire witch. She had unconsciously phantasied that she had put into me the part of herself which had invented the Lancashire witches, and she had lost contact with this part. She lost all sense of reality in this projection and all memory that she had created this symbol, the 'Lancashire witches'. Her symbol became confused with me, an actual external object, and so became for her a concrete external reality—I had turned into a Lancashire witch.

The way in which the maturing ego, in the process of working through the depressive position, deals with the early object relations, is of paramount importance. Some integration and whole object relations can be achieved in the depressive position, accompanied by the splitting off of earlier ego experiences. In this situation, something like a pocket of schizophrenia exists isolated in the ego and is a constant threat to stability. At worst, a mental breakdown occurs and earlier anxieties and split-off symbolic equations invade the ego. At best, a relatively mature but restricted ego can develop and function.

However, if the ego in the depressive position is strong enough and capable of dealing with anxieties, much more of the earlier situations can be integrated into the ego and dealt with by way of symbolization, enriching the ego with the whole wealth of the earlier experiences.

The word 'symbol' comes from the Greek term for throwing together, bringing together, integrating. The process of symbol formation is, I think, a continuous process of bringing together and integrating the internal with the external, the subject with the object, and the earlier experiences with the later ones.

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² No reference is made in this paper to these two contributions, as the three papers were written and read almost concurrently.

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