



Interpretation as Freud's specific action, and Bion's container-contained

Chris Mawson

*The Institute of Psychoanalysis & The British Psychoanalytical Society,
Byron House, 112A Shirland Road, London, W9 2BT, UK
– cpsmawson@gmail.com*

(Accepted for publication 16 August 2016)

*This is a paper showing how a concept central to the work of Wilfred Bion, and one of Klein's important recommendations concerning the practice of analysis with adults and small children, can both be seen in the light of Freud's earliest formulation of the origin of anxiety and the mother's first responses to her infant in distress. In the paper I suggest that these clinically influential concepts of Klein and Bion show an underlying consistency and affinity with Freud's early ideas about the management of anxiety in the mother-infant relationship, described in two of his pre-psychoanalytic writings, *How Anxiety Originates* (1894b), and *The Project for a Scientific Psychology* (1950 [1895]). The specific mode of operation of psychoanalytic interpretation is clarified by the comparisons made, with no attempt to suggest that Klein or Bion based their concepts upon these particular early formulations of Freud's.*

Keywords: specific action, projective identification, container, container-contained, introjective identification, point of urgency, child analysis, anxiety, Bion, Klein, Freud

Part of the inheritance of all living things is pain and adversity. It is at least as easy to be cruel by a denial of this as a component of a man's life, as it is to be cruel by the denial of mutual help.

(Bion, 1948, 1992, p. 346)

Why is an external person necessary? Why can't the human being be like lumbricus [earthworm]? Why have a partner at all? ... Why can't one have a relationship with oneself directly without the intervention of a sort of mental or physical midwife? It seems as if we need to be able to 'bounce off' another person, to have something which could reflect back what we say before it becomes comprehensible.

(Bion, 1976, 2000, p. 280)

Introduction

In his exploration of the role of the mother in alleviating and understanding the suffering of her infant, Freud (1950 [1895], p. 297) wrote of the work of the *specific action* (*die Arbeit der spezifischen Aktion*). This paper clarifies that concept and brings it into conjunction with two sets of ideas relevant

to psychoanalytic interpretation: The first, the *point of urgency*, a technical recommendation made in 1932 by Melanie Klein, discussed by James Strachey in his 1934 paper on mutative interpretations, and the second, *container-contained* ($\varphi\sigma$), Wilfred Bion's extension of Klein's theory of projective identification.

I describe how these later concepts connect naturally with the early formulations of Freud's model in order to show the affinity that these three contributions have for one another when we think of them in relation to our psychoanalytic attention and interpretation. The purpose is not to suggest that Bion founded his clinical model of the $\varphi\sigma$ on Freud's idea of the specific action; neither is it to posit that Freud considered his early conception to possess clinical applicability.

It is a paper exploring a contemporary model of technique in relation to an early, little known idea of Freud's rather than a documenting of the history of psychoanalytic ideas.

In two of the papers he referred to as 'Drafts', sent to his friend Wilhelm Fliess – *How Anxiety Originates* (1894b) and the much more elaborate *Project for a Scientific Psychology* (1950 [1895]) – Freud considered the role in early development of endogenously arising distress, and the urgent requirement for *specificity* and *relevance* in the intervening action by the mother, who – faced with an infant suffering a potentially overwhelming accumulation of tension and stimulation, is required to make a response, and not merely to apply a procedure. In his early work Freud found a particular language for his ambitious 'neuronal' model, which he later abandoned, based on the concepts of mental energy and the paths of its discharge. Although Freud disavowed his *Project* I am drawing here on the substantial insights in that work into the significance of anxiety in the earliest transactions between mother and infant. The terms he uses – if we grasp what lies behind what look like anachronisms – are curiously suited to understanding the fundamentals of anxiety, and to enabling us to see the connections between his account of anxiety and the later theories of its detection and containment to be found in the work of Melanie Klein and Wilfred Bion.

Freud's concept of the work of the specific action

Freud considered the *work of the specific action*¹ to constitute an urgent requirement in the earliest interactions between mother and baby, close to the origins of communication and thought by virtue of what he termed the 'secondary functions' – mental functions – mobilized by it. The idea was first introduced in 1892 in a draft (G) concerned with the relation of melancholia in women to anxiety and discharge of tension. It appeared two years later in another draft letter to his friend Fliess under a slightly different name, *specific reaction*. The following passage shows Freud's interest in

¹(*die Arbeit der spezifischen Aktion*). The idea had first appeared as 'specific reaction' in Draft E, *How Anxiety Originates* (1894b, p. 192) and in Part III of Freud's first paper on anxiety neurosis (1895), as 'specific or adequate action' in relation to sexuality and anxiety neurosis.

how anxiety arising from endopsychic sources accumulates and cannot be relieved by the individual without external help:

why does this transformation into anxiety occur when there is an accumulation? At this point we ought to enter into the normal mechanism for dealing with accumulated tension. What we are concerned with here is the second case—the case of endogenous excitation. Things are simpler in the case of exogenous excitation. The source of excitation is outside and sends into the psyche an accretion of excitation which is dealt with according to its quantity. For that purpose any reaction suffices which diminishes the psychical excitation by the same quantum.

But it is otherwise with endogenous tension, the source of which lies in one's own body (hunger, thirst, the sexual instinct). In this case only *specific* reactions are of use—reactions which prevent the further occurrence of the excitation in the end-organs concerned, whether those reactions are attainable with a large or small expenditure [of energy]. Here we may picture the endogenous tension as growing either continuously or discontinuously, but in any case as only being noticed when it has reached a certain *threshold*. It is only above this threshold that it is turned to account *psychically*, that it enters into relation with certain groups of ideas, which thereupon set about producing the specific remedies If the specific reaction fails to ensue, the psychopsychical tension (the sexual affect) increases immeasurably.

(Freud, 1894b, p. 192)

As a footnote to Freud's *Project for a Scientific Psychology* (1895), Strachey noted that the concept was mentioned in Part III of Freud's first paper on anxiety neurosis, *On the Grounds for Detaching a Particular Syndrome from Neurasthenia under the Description "Anxiety Neurosis"* (1894a). Here Freud writes:

. . . there comes into being the psychical state of libidinal tension which brings with it an urge to remove that tension. A psychical unloading of this kind is only possible by means of what I shall call *specific* or *adequate* actionAnything other than the adequate action would be fruitless, for once the somatic sexual excitation has reached threshold value it is turned continuously into psychical excitation, and something must positively take place . . .

(Freud, 1894a, p. 108)

Freud's consistent concern in these passages is the problem of painful psycho-physical tension accumulating from endogenous sources within the psychical apparatus and seeking discharge. In his 1895 *Project* Freud described his view that it is from this base, in the mother-infant relationship, that communication and mental functioning begin.

The performance of the *specific action* consists, writes Freud (1950 [1895], p. 318), of "extraneous help from an experienced person" – the mother – to meet endogenously arising distress in the helpless infant. I will quote Freud's description of this need for external intervention after first stating how he saw the role of indications of *pain* as an instigator in the unfolding process between the infant and the intervening mother.

The role of pain in the specific action

Freud regarded the mainspring of the psychical mechanism of the specific action as residing in the fact that there is no protective screen in place to buffer the infant mind from excessive stimuli arising from within (1950 [1895], p. 316), and this fact places ultimate reliance on the mental resources of an external carer, mother, to protect the infant's proto-mental functions from being overwhelmed by its own internal instinctual tensions. He began from the fundamental proposition that pain is the most imperative and urgent process occurring in the individual human being.

We infer that pain consists in *the irruption of large $Q\dot{\eta}$ into ψ* .² The two trends are in that case a single one. Pain sets the ϕ as well as the ψ system in motion, there is no obstacle to its conduction, it is the most imperative of all processes.

(Freud, 1950[1895], p. 307)

His second axiom in regard to pain was that the nervous system has “the most decided inclination to a flight from pain” (ibid, p. 307); thirdly, that endogenously arising tension and distress cannot be evaded through means of action because it wells up from *within*; fourthly, he posited that it accumulates and rapidly becomes unbearable³. to the infant, who is helpless in the face of it; fifthly, that however much this is ineffective, the helpless infant seeks to use muscularity to discharge the accretions; and sixthly, that an intervention is required from outside.

It will be seen how, on this model, it follows (from 4 and 5 above) that the attempts of the infant to discharge its accumulating tension are *visible* and *audible*, and therefore they possess the potential to function as *signals* for the external witness of the whole situation, and that secondly, the human caretaker may attribute psychological elements to the signals of endogenously arising somatic tension and distress.

In the case of endogenously arising pain, no amount of urgent action, evacuation or discharge can succeed at removing it because it continues to be produced at source. Freud wrote of the infant's resort to muscular movement in the earliest discharge and expression of the emotions, together with screaming and what he called vascular innervation, in the face of the resulting urgency to discharge the painful state:

... an *urgency* which is released along the motor pathway. Experience shows that here the first path to be taken is that leading to *internal change* (expression of the emotions, screaming, vascular innervation). But, as was explained at the beginning, no such discharge can produce an unburdening result, since the endogenous stimulus continues to be received and the ψ tension is restored. The removal of the stimulus is only made possible here by an intervention which for the time being gets rid

²[Strachey's footnote: This theory of pain was introduced again by Freud in *Beyond the Pleasure Principle* (1920g), *Standard Ed.*, 18, 29-30 and in *Inhibitions, Symptoms and Anxiety* (1926d), *ibid.*, *Standard Ed.*, 170-2.]

³“If the specific reaction fails to ensue, the psychophysical tension ... increases immeasurably; it becomes disturbing, but there is still no ground for its transformation” (Freud 1894b, p. 80)

of the release . . . in the interior of the body; and this intervention calls for an alteration in the external world (supply of nourishment, proximity of the sexual object) which, as a *specific action*, can only be brought about in definite ways.

(1950 [1895], p. 317)

The second part of this passage is important for the development of Object Relations theory,⁴ as it states that the management of pain for the infant depends on the intervention of an outside helper, and that the adequacy of timely and relevant intervention is decisive for mental growth. In Freud's model of anxiety in the *Project*, the external object is absolutely indispensable in providing the specific unburdening action, because the attempts at discharge are ineffective in themselves, but provide a signal to the external helper of the need for intervention:

At first, the human organism is incapable of bringing about the specific action. It takes place by *extraneous help*, when the attention of an experienced person is drawn to the child's state by discharge along the path of internal change. In this way this path of discharge acquires a secondary function of the highest importance, that of *communication*, and the initial helplessness of human beings is the *primal source* of all *moral motives*.⁵

When the helpful person has performed the work of the specific action in the external world for the helpless one, the latter is in a position, by means of reflex contrivances, immediately to carry out in the interior of his body the activity necessary for removing the endogenous stimulus. The total event then constitutes an *experience of satisfaction*, which has the most radical results on the development of the individual's functions.

Regarding the sources of endogenous suffering described by Freud, hunger, or a feeling of dying, are prototypic examples, but it should be noted that dreams and phantasies are capable of constituting endopsychic sources of intense anxiety leading to efforts of the psyche to expel them – to disburden the psyche, as Freud (1911, p. 221) was to describe it⁶ – by screaming and associated bodily reactions. The nervous system, Freud stated, has the most decided tendency to flee pain, but it cannot flee what wells up from inside.

When Freud writes that “the attention of an experienced person is drawn to the child's state by discharge along the path of internal change”, he seems to be suggesting a directing function emerging in the mother-infant couple, a ‘fit’ between them in which the mother's *attention* produces an emergent function encompassing the two of them, that of communication. As Freud states: “In this way this path of discharge acquires a secondary function of the highest importance, that of *communication* . . . ”.

⁴And see Freud (1930, p. 67), in relation to a sense of inner and outer.

⁵John Churcher has suggested a wider translation of the term to include the domain of the Social. The term *moral motives* is perhaps best viewed in the dramaturgical context of Aristotle's Poetics (VI: 16): “Character is that which reveals moral purpose, showing what kind of things a man chooses or avoids”.

⁶“A new function was now allotted to motor discharge, which, under the dominance of the pleasure principle, had served as a means of unburdening the mental apparatus of accretions of stimuli, and which had carried out this task by sending innervations into the interior of the body (leading to expressive movements and the play of features and to manifestations of affect). Motor discharge was now employed in the appropriate alteration of reality; it was converted into *action*.” (Freud, 1911, p. 221)

Giovanna Di Ceglie (2013) has written about the importance of the mother's *orientation* to her infant as a component – the initial phase – of Bion's model of container-contained, which I will be discussing later. I regard it as consistent with what I have highlighted in Freud's account of the work of the specific action as *the attention of an experienced person being drawn to the child's state*.

Di Ceglie is emphasizing the need for the mother to place her attention properly in order to fit, and to begin actively to introject, the infant's projections of parts of themselves in distress.

Freud had stated that the helpless infant requires the attention of the *experienced person*, the mother. A little later he writes:

Let us suppose that the object which furnishes the perception resembles the subject – a *fellow human-being*. If so, the theoretical interest [taken in it] is also explained by the fact that an object *like this* was simultaneously the [subject's] first satisfying object and further his first hostile object, as well as his sole helping power. For this reason it is in relation to a fellow human-being that a human-being learns to cognize.

(1950 [1895], p. 331)

Freud here suggests that this experienced other, may be perceived, however dimly, as sharing a common basic humanity. In other words, the indispensable helpful object – who understands and reduces suffering, and which simultaneously is the infant's first satisfying object, his first hostile object, and his sole helping power – attracts interest as a similar kind of being. The total context suggests that the term *experienced* relates not only to knowledge of child-rearing, but to the fact that the mother brings her experience of being a fellow human being into her engagement with her baby, and makes use of what we would now recognize, following Klein, as a capacity for introjective identification.

It is this requirement that marks the difference in the mother's intervention between mothering as a set of *procedures* and mothering as Freud's work of the specific action. The term used by Freud in describing the importance of the mother's identification with the infant as a fellow human being is *ein Nebenmensch*.⁷

So, to reiterate, the performance of the specific action, according to Freud, consists of extraneous help from an experienced person whose attention is drawn to the urgency of the infant's painful physical and emotional state, and whose intervention is made specific and relevant by virtue of her being a fellow human being, capable and willing to experience inside herself something of the suffering of her infant.

He saw that the worsening internal anxiety situation could only be alleviated by help from an outside source, referring to this as an *intervention*, one which *for the time being* is effective in halting the mounting distress arising from internal sources.

⁷Freud (1950 [1895], p. 331). I am indebted to Professor Rosine Perelberg for drawing my attention to this important term, translated by Strachey as "a fellow human being".

The action which can bring this about for the infant has to be relevant to the actual, real source of the pain, and it has to be delivered specifically in relation to the causes. It has to be an action, otherwise it would not intervene effectively. This was why Freud called it the specific or adequate action.

This special combination of the mother's attention and psychic work permitted what Freud termed a 'pathway' to the endogenous suffering, in a way that we would now recognize as a communicative link to an object, or a conduit.

To explicate the possible role of the work of the specific action in the formation of internal objects would require a paper of its own. For now, the following description may serve as a bridge to the next section, which considers a technical recommendation of Melanie Klein's in regard to indications of anxiety in children in the setting of child analysis.

- 1) Through the work of the specific, relevant action, a longer lasting reduction of anxiety is effected and so the urgency which had produced the suffering is, at least for a while, brought to an end.
- 2) A correlation, a constant conjunction, is formed as a result of reliable repetitions of the experience, resulting in the perception and introjection of an object which becomes established in the psyche of the infant.
- 3) A link is formed, facilitated, between the availability of the object and the indications which are oriented to and responded to, in the outer world; these indications become signals.

Nowadays we would say that these images of the objects are, in psychic reality, what we call internal objects. The experience of unmoderated and unmediated pain, and the non-realization of sought-for help with it, leads on the other hand to a repulsion, a disinclination to maintaining a link and an investment with a hostile stored image, which constitutes a hostile object.

The favourable situation, with its diminution of anxiety and the attention of the needed, experienced external helper, is an instance of what Freud called a primary wishful activation. It predisposes towards a primary attraction to the mother; but unmoderated psychic pain leads to a resort to violent and primitive defences, which are aimed at fending off an archaic bad object associated with pain, frustration, dissatisfaction and the anticipation of worse to come.

In other words, the work of the specific action may be implicated in the formation of an internal object and subsequently, through repeated cycles, a mind that orients the individual towards a care-giving and containing mother through mutual understanding – referred to by Freud as *Übereinstimmung*. Repeated failures of the specific action would be expected, on this model, to reinforce a negative pattern of relating internally and externally.

Melanie Klein: The point of urgency

Klein, writing in 1932 on the psychoanalysis of children, wrote:

One of the greatest, if not *the* greatest psychological task which the child has to achieve, and which takes up the larger part of its mental energy, is the mastering of anxiety We must never lose sight of the presence of this apprehension in small children and also, to some degree, in older ones . . . [the analyst] should ensure *the continuance of analytic work and establish the analytic situation* by relating it to himself, at the same time referring it back, by means of interpretation, to its original objects and situations, and *in this way resolve a certain quantity of anxiety*. His interpretation should intervene at some *point of urgency* in the unconscious material and *so open a way to the child's unconscious mind*.

(Klein, 1932, p. 51; my emphasis)

It is clear that early on in her work Klein emphasized that the child analyst has to be receptive to the *point of urgency* of current anxiety, and to give an interpretation that addresses this in a specific and relevant way. It will be seen that this requirement, as well as the statement of the imperative nature of mental pain, is in line with the account of the role of the external helper in Freud's *Project*.

Later (1946, pp. 102, 104) Klein was to describe how an early projective process propelled the distress into the mother, whom – she wrote – came to *contain* it.

For Klein, the purpose of interpretation in the analysis of children and adults was not to alleviate anxiety as an end in itself, but to *establish contact with the unconscious, to diminish the anxiety that has been stirred up, and thereby to prepare the way for analytic work by deepening the transference relationship*.

To do this work it was necessary to alleviate what she termed '*a certain quantity*' of the anxiety that has been stirred up, not through reassurance but through understanding. The primary aim of interpreting at the point of urgency was not amelioration, but to address excessive anxiety in order to prepare the way for analytic work by deepening the transference relationship. Klein recommended timely interpretation that reached the heart of the matter:

It follows from what has been said that not only a timely interpretation but a deep-going one is essential. If we have an eye to the full urgency of the material presented, we find ourselves obliged to trace not only the representational content but also the anxiety and sense of guilt associated with it right down to that layer of the mind which is being activated.

(Klein, 1932, p. 52)

Klein cautioned against interpreting at a level which may be 'correct', but which neglected the most urgent anxiety of the child:

But if we model ourselves on the principles of adult analysis and proceed first of all to get into contact with the superficial strata of the mind – those which are nearest to the ego and to reality – *we shall fail in our object of establishing the analytical situation and reducing anxiety in the child*.

(Klein, *ibid.*, p. 52)

Klein warned also against being over-attracted by readily available symbolic content, and choosing interpretations based on metaphor over addressing anxiety and phantasy directly.

Wilfred Bion: The container-contained relationship and transformation of anxiety

In order once again to bring Freud's concept of the specific action together with the clinical situation, and with the function of interpretation, I now turn to Bion's account of the events which earlier I described in the terms given by Freud.

In 1961, in a paper called 'The Conception of Man',⁸ Bion stated his intention to make an expanded use of Melanie Klein's concept of projective identification, which (following Freud) he believed constituted *an essential normal factor* in the origins of communication and for the healthy mental growth of the infant (Bion, 1961). Earlier, in 1958 and 1959, in his papers 'On Hallucination' and 'Attacks on Linking', Bion had begun thinking about a new idea to help him to formulate the problems of schizophrenic thought (Bion, 1958, 1959). It led him to an original theory of normal thinking which he called the model of the *container and the contained*. The mother in her earliest attempts to take into herself the meaning of the anxieties of her infant, performs the task of being a container for the anxieties discharged powerfully into her. This is the nub of what today we refer to as container-contained, or – as a short-hand term – containment.

Its earliest form is in the anxiety situations occurring daily in the mother-infant relationship, *and the analytic situation arouses its basic features and constitutes a later model of it*. The phenomena of transference and associated countertransference depend upon this fact.

Bion developed his idea from the close clinical observations of patients in psychotic states that he made in the late 1950s, observations which supported Klein's contention that the projective process, the identificatory process that she had observed, was a phantasy with actual consequences, and one which operated on the idea of getting *into* the object and altering it, and not merely projecting onto its surface and thereby altering attributions.

In 'Attacks on Linking' (1959), in a section called 'Denial of normal degrees of projective identification', Bion made a crucial clinical observation about the impact on a patient of the failure adequately to take in the patient's urgent communications. Bion realized that he had been giving 'routine interpretations'. That honest reflection enabled Bion to trace the fate of those interpretations, and to consider, in that case and in others, the consequences in analysis, and earlier, in infancy, of the denial by the analyst, and by the first parental objects of perception, of *normal and necessary degrees of projective identification*. Bion wrote:

When the patient strove to rid himself of fears of death which were felt to be too powerful for his personality to contain, he split off his fears and put them into me,

⁸Which he pursued further in his book *Learning from Experience* (Bion, 1962a).

the idea apparently being that if they were allowed to repose there long enough they would undergo modification by my psyche and could then be safely reintroduced.

(Bion, 1959, p. 312)

Bion went on to explain that he felt that his patient was striving to get through to him the feeling that his urgent communications of psychic pain had met with an obstruction in his analyst's mind, which consequently was *felt* to have evacuated the part of the patient in distress. Instead of modifying the impact, the pains had instead been intensified, amounting to a nameless sense of dread. Consequently, wrote Bion, the patient was forced to *escalate* the forcefulness of his projections into his analyst. This was not to be confused with a destructive attack, however much it might resemble one. The correct view depended upon his realization that he had himself become, for his patient, an obstructing and refusing figure, merged in the fraught present moment with a corresponding one from the revived past.

Bion considered that the *total transference situation* was a reliving of the patient's infancy, in which he had experienced mother as an object who responded somewhat procedurally, orienting herself administratively to her baby but not sufficiently as a suffering fellow human. From his self-reflection he felt the reproductive remembering being activated in the transference involved impatience and irritation in the object, who now was himself, and that it had, quite unconsciously, produced in himself an obstruction to his patient's communications of pain – an obstruction perceived correctly by the patient. He, in the analysis, and the mother in the patient's infancy, had failed to take in and to suffer (allow) the baby's screams as meaning more than a demand for the presence, or the *attention*, of the external helper. In other words, the specific action would not adequately be performed solely by being present and by attending; that would, in Bion's later terminology, represent only a *commensal*⁹ rather than a *symbiotic*¹⁰ containment. This would be a necessary but not sufficient condition for what Freud meant by the term the specific action. As Bion put it:

From the infant's point of view she should have taken into her, and thus experienced, the fear that the child was dying. It was this fear that the child could not contain. He strove to split it off together with the part of the personality in which it lay and project it into the mother An understanding mother is able to experience the feeling of dread, that this baby was striving to deal with by projective identification, and yet retain a balanced outlook. This patient had had to deal with a mother who could not tolerate experiencing such feelings and reacted either by

⁹'Commensal' is *potential* containment: i.e. alongside, but not inter-penetrating and inter-acting to produce *transformation* of contents of a container and the *growth* of the container itself. Neither does it produce undue constriction of contents, or negative growth, or damage.

¹⁰A *symbiotic* link exists when container and contained interact to their mutual benefit, enabling growth. It contrasts with parasitic containment, which involves mutually destructive transactions between ♀ and ♂.

denying them ingress, or alternatively by becoming a prey to the anxiety which resulted from introjection of the infant's feelings.

(Bion, 1959, p. 313).

In applying his $\varphi\sigma$ model to a theory of thinking,¹¹ Bion stated explicitly the link between the containment of anxiety in the early situation with the primary object, and interpretation in the clinical situation. In a passage which showed clearly the clinical model which formed the basis of his technique, Bion referred to the mother's containing intervention as being in itself *therapeutic*. He wrote that projective identification, as a *realistic* activity,

... shows itself as behaviour reasonably calculated to arouse in the mother feelings of which the infant wishes to be rid; if the infant feels it is dying it can arouse fears in the mother that it is dying. *A well-balanced mother can accept these and respond therapeutically: that is to say in a manner that makes the infant feel it is receiving its frightened personality back again but in a form that it can tolerate – the fears are manageable by the infant personality.* If the mother cannot tolerate these projections, the infant is reduced to continued projective identification carried out with increasing force and frequency. The increased force seems to denude the projection of its penumbra of meaning.

(Bion, 1962b, p. 308)

To reiterate: cycles of pain in the patient resulting in attempts to rid the psyche of 'accretions of painful stimuli', through the use of a normal projective process, first of all into the person of the analyst as a container for it, an evolving container-contained relationship is formed in the analytic relationship and eventually becomes established in the inner world of the patient through cycles of projective and introjective identification.

Interpretation as the specific action of psychoanalysis

The patient's principal action in severe distress is discharge intended to "rid the psyche of accretions of stimuli" (Freud, 1911, p. 221), carried out with muscularity and making use of an early projective process identified by Melanie Klein (1946) in her paper on splitting. The counterpart of the ego-function of *action* in the analyst, if it is not to be similarly based on discharge *by* the analyst, is an intervention from outside called an interpretation. In my view, as developed in this paper, *for the action of interpretation to function as Freud's specific action, it needs to be at what Klein called the point of urgency in the situation between patient and analyst, and foster an evolving cycle of container-contained relationships within the analysis, of a symbiotic variety.*

One consequence of the work of the specific action of psychoanalysis is the increased likelihood that in situations of confusion and pain the patient will turn to the analyst for alleviation of suffering by making use of normal

¹¹ *A Theory of Thinking*: In *Second Thoughts* (1967) and published as 'The psychoanalytic study of thinking', *Int J Psychoanal* 43 (1962):306–10.

degrees of projective identification with the anticipation that it will be regarded by the analyst as communication and not merely evacuation of unwanted contents. The basis for this process is, I would suggest, similar to Freud's emphasis that it is attention to the path of discharge that becomes the emergent function of communication.

The psychoanalytic counterpart of the process is, following Bion's contribution, greatly helped if the analyst can contain their own reactions when impacted by the projections of the patient and learn to differentiate the normal, albeit forcible and intense, use of the mechanism, from destructively motivated attacks on their containing capacity.

I have attempted to demonstrate that the main concepts discussed in the paper possess affinity to one another and may possibly reflect the same underlying central abstraction – from (i) early pre-psychoanalytic Freud (1895), (ii) Klein in her work with children (1932), and Bion's final container-contained model (Bion, 1970), – and that together they offer a view of the chief significance of our psychoanalytic counterpart of action, interpretation, which taps the same underlying central abstraction that exists in the provision of emotional care in the mother-infant couple.

A timely, apposite, interpretation at the point of urgency in the analytic situation constitutes the specific or relevant action of the analyst as described by Freud, because it serves the function of the symbiotic form of the container-contained function as described by Bion, with verbalization of the patient's urgent anxiety and associated transference phantasies, at the moment prior to the interpretation, and also in the moments after the interpretation; it promotes thinking on the model of transforming raw sensuous experience (beta) into meaningful, linkable elements in what Bion called alpha-function. An interpretation along such lines increases the probability of being, in Strachey's (1934) terms, mutative. In other words, suited to promoting psychic change.

The work of the specific action in the analytical situation is arduous for the analyst, as Strachey (1934), and, more recently, Feldman (2009) emphasized. To await and to intuit the point of urgency with accuracy, and to engage in the psychoanalytic thinking in the form that suits it to be a prelude to a requisite interpretation rather than a substitute for it, as Bion puts it, is a tough requirement.

Translations of summary

L'interprétation en tant qu'action spécifique de Freud et les notions de contenant-contenu de Bion. L'auteur de cet article montre comment l'un des concepts majeurs de l'œuvre de Wilfred Bion et l'une des recommandations importantes de Klein au sujet de la pratique de l'analyse avec les adultes et les jeunes enfants, peuvent être considérés tous deux à la lumière de la toute première formulation de Freud relative à l'origine de l'angoisse et aux premières réponses de la mère à la détresse du nourrisson. L'auteur suggère que ces concepts cliniques influents de Klein et de Bion témoignent d'une concordance et d'une affinité sous-jacentes avec les premières hypothèses de Freud relatives au traitement de l'angoisse dans la relation mère-nourrisson, qu'il a décrites dans ses écrits pré-analytiques - « Comment naît l'angoisse » (1894) et *Esquisse d'une psychologie scientifique* (1895). Le procédé spécifique propre à l'interprétation psychanalytique est éclairé par ces comparaisons, sans que l'auteur prétende pour autant que Klein comme Bion aient fondés leurs concepts sur ces premières formulations particulières de Freud.

Deutung als Freuds „besondere Aktion“ und Bions Container-Contained. Dieser Beitrag zeigt, dass ein für Wilfred Bions Werk zentrales Konzept - und eine von Kleins wichtigen Empfehlungen bezüglich der Praxis der Analyse erwachsener Patienten und kleiner Kinder - im Licht von Freuds frühester Formulierung der Angstentwicklung sowie der ersten Reaktionen der Mutter auf den Distress ihres Babys betrachtet werden kann. Diese für die Praxis einflussreichen Konzepte Kleins und Bions weisen eine grundlegende Übereinstimmung und Verwandtschaft mit Freuds frühen Überlegungen zur Angstbewältigung in der Mutter-Baby-Beziehung auf, die er in zwei Schriften aus seiner voranalytischen Zeit formuliert hat, nämlich im „Manuskript E: Wie die Angst entsteht“ (1894; aus den *Briefen an Wilhelm Fliess*) und im „Entwurf einer Psychologie“ (1950c [1895]). Die spezifische Wirkungsweise der psychoanalytischen Deutung wird anhand eines Vergleichs bestimmt; der Autor versucht nicht zu suggerieren, dass Klein oder Bion ihren Konzepten diese spezifischen frühen Formulierungen Freuds zugrunde legten.

L'interpretazione psicoanalitica come “azione specifica” freudiana e come relazione contenitore-contenuto di Bion. Lo scopo di questo lavoro è di mostrare come uno dei concetti cardine dell'opera di Bion e una delle principali raccomandazioni della Klein rispetto alla pratica analitica con adulti e bambini piccoli possano essere entrambi osservati alla luce della prima formulazione di Freud sull'origine dell'angoscia e sulle prime risposte della madre agli stati di agitazione del figlio. L'ipotesi di base è che questi concetti di Klein e Bion, che hanno avuto una forte influenza sul modo di pensare e operare in ambito clinico, abbiano una coerenza e un'affinità di fondo con le idee del primo Freud sulla gestione dell'angoscia all'interno della relazione madre-bambino: idee espresse in due scritti pre-psicoanalitici intitolati *Come si origina l'angoscia* (1894) e *Progetto per una psicologia scientifica* (1895). La specifica modalità operativa dell'interpretazione psicoanalitica viene chiarita nell'articolo attraverso una serie di paragoni e senza peraltro suggerire che la Klein o Bion abbiano sviluppato i loro concetti basandosi su queste formulazioni del primo Freud.

La interpretación como acción específica de Freud y el continente-contenido de Bion. El presente trabajo muestra cómo un concepto central en la obra de Wilfred Bion y una de las más importantes recomendaciones de Melanie Klein relativas a la práctica del análisis de adultos y niños pequeños pueden ser vistos a la luz de la temprana formulación de Freud sobre el origen de la angustia y las primeras respuestas de la madre al sufrimiento psíquico de su bebé. Se sugiere que a estos conceptos clínicamente influyentes de Klein y de Bion subyace una coherencia y una afinidad con las primeras ideas de Freud acerca del manejo de la angustia en la relación madre-bebé, descritas en dos de sus textos prepsicoanalíticos, *Cómo se origina la angustia* (1894) y *Proyecto para una psicología científica* (1895). Mediante comparaciones se aclara la manera específica en la que opera la interpretación psicoanalítica, sin la intención de sugerir que Klein o Bion basaron sus conceptos en estas formulaciones tempranas de Freud.

References

- Bion WR (1948). Psychiatry at a time of crisis. *Br J Med Psychol* **21**(Part 2): 81–9; Reprinted Bion, W. R. (1992) in *Cogitations* (London: Karnac, pp. 337–52). And In: Mawson, C. (editor, 2014), *The Complete Works of W. R. Bion, Volume IV* (p. 53). London: Karnac Books.
- Bion WR (1958). On hallucination. *Int J Psychoanal* **39**:341–9. Published in *Second thoughts*. London: Karnac Books.
- Bion WR (1959). Attacks on linking. *Int J Psychoanal* **40**:308–15. Published in *Second thoughts* (1967). London: Karnac Books.
- Bion WR (1961). The conception of man. In: Mawson C, editor. *The complete works of W. R. Bion*. London: Karnac, 2014.
- Bion WR (1962a). *Learning from experience*. London: Karnac.
- Bion WR (1962b). The psycho-analytic study of thinking. *Int J Psycho-Anal* **43**:306–10.
- Bion WR (1970). *Attention and interpretation: A scientific approach to insight in psychoanalysis and groups*. London: Karnac.
- Bion WR (1976). Four Discussions (No:3); First published in 1978 by Clunie Press, Strath Tay. Reprinted in 2000 as Part Two, in *Clinical Seminars and Other Works*, edited by Francesca Bion (London: Karnac Books). Also in: Mawson, C. (editor, 2014), *The Complete Works of W. R. Bion, Volume X* (p. 91). London: Karnac Books.
- Di Ceglie GR (2013). Orientation, containment and the emergence of symbolic thinking. *Int J Psychoanal* **94**:1077–91.
- Feldman M (2009) *Doubt, conviction and the analytic process: Selected papers of Michael Feldman*, Joseph B, editor. London: Routledge.

- Freud S (1894a). On the grounds for detaching a particular syndrome from neurasthenia under the description 'Anxiety Neurosis'. *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume III (1893-1899): Early Psycho-Analytic Publications*:85–115.
- Freud S (1894b). *Draft E. How anxiety originates*, from *Extracts from the Fliess papers*. Pre-psycho-analytic publications and unpublished drafts, SE I 1886–99:189–95.
- Freud S (1911). *Formulations on the two principles of mental functioning*. SE 12(1911–13).
- Freud S (1950 [1895]). *Project for a scientific psychology*. SE 1:281–391.
- Klein M (1932). The psycho-analysis of children. *Int Psycho-Analytical Library*, 22:1–379. London: The Hogarth Press.
- Klein M (1946). Notes on some schizoid mechanisms. *Int J Psycho-Anal* 27:99–110.
- Strachey J (1934). The nature of the therapeutic action of psycho-analysis. *Int J Psychoanal* 15:127–59.