

45(1):18-24,2004

GUEST EDITORIAL

Importance of Object Relations Theories for Development of Capacity for Mature Love

Liljana Milivojević, Slađana Štrkalj Ivezić¹

Institute for Mental Health, Belgrade, Serbia & Montenegro; and ¹Vrapče Psychiatric Hospital, Zagreb University School of Medicine, Zagreb, Croatia

We discuss Klein's, Winnicott's, and Mahler's object relational theories relevant for creating and maintaining the mature love relationship. The concept of love refers to the basic human relationship. The capacity for adult love involves the attainment of the relation towards the object as whole, satisfying the emotional needs of the self, including simultaneous tolerance of the specific needs of the object. It also involves the optimum resolution of anxiety related to schizo-paranoid and depressive positions and phases of separation and individuation. Primitive defense mechanisms, such as splitting, are replaced by more mature defense mechanisms, and primitive idealization is replaced by more mature idealization. The fusion with the object is reversible and helps in creating the experience of closeness with the partner, while the possibility of separation provides the possibility of recognizing and respecting the differences. Obstacles in the development of object relationships from pre-object to object phase, from symbiotic to separation and individuation phase can impair the capacity to love.

Key words: emotions; love; object attachment; personality development; self concept

In a broader psychological sense, the concept of love is the basic link established and maintained between two human beings that find each other important. The first steps in love are learned in early childhood through the process of communication between the child and child's emotionally significant objects, ie, persons involved in the child's care. Normal psychological development, and therefore the development of the capacity to love, may be impaired by internal factors originating from the child itself or the inadequacy of care originating from the external emotionally significant object for the child. Recollection of poor early care was found associated with poor relating, lower age at marriage, poor-quality marriage, and divorce from first marriage (1).

By reviewing and discussing Klein's, Winnicott's, and Mahler's theories of psychological development, ie, the theory of object relations, we present the psychological mechanisms in early childhood that contribute to the development of capacity for mature love in adulthood, and describe the development of capacity to love from early childhood and transit from infantile to mature love in adulthood, ie, from pre-object to object love.

Biological birth of a child does not coincide with its psychological birth (2). For the development of the psychological structure, the interaction with the external emotionally significant object is necessary. The process of transformation through which external relations, object representations, and forms of behavior regulation become internal psychological structures and part of the inner world is called the process of internalization (3). In most cases, it occurs through introjections and identification. The ego creates the representation of an object (ie, external person) out of a network of images created on the basis of object perception (3). Representation of an object does not have to correspond to its real psychological and physical characteristics. Self-representations are created through interaction with the object, through a complex process of projection and introjections. Self-representations (4,5) are affective, cognitive structures that reflect the self-perception in real interactions with emotionally significant objects and in fantasized interactions with inner representations of emotionally significant objects, ie, object representations. The self represents the integration of contradictory, entirely good and entirely bad, images of self-representation.

The use of the terms object and self in object relations theory somewhat differs from that in psychoanalytic theories based on Freud's teachings. In psychoanalytic terminology (6), the object is usually a person, part of a person, or a symbol representing the whole or part of a person to which the subject relates to achieve instinctual satisfaction. In object relations theory, priority is given to the individual's need for a person rather than the need for satisfaction of instincts. The term self in psychoanalytic usage refers to the individual as an agent, aware of his or her own identity. We agree with Arlow (7) that any considerations of object relations theory and love require a clear understanding of how the term object relations is used. Thus, the concept of the object used in this paper includes the external real object, as well as an object as mental representation, which can differ from the real object.

To be able to follow up the development of the capacity for love through the development of the relations to objects, we present the development of love through the relationship established with the first emotionally significant object, the mother, and discuss the application of these theories in better understanding of intimate relationships and adult love. The capacity for mature love is the result of a development from pre-object to object relations and is strongly intertwined with the development of individuation as well as with the development from primitive to normal idealization. Developmentally, the evolution of the object cannot be separated from the vicissitudes of the drives. The process of development of instincts according to Freud's theory, which accompanies the development of object relations, also contributes to the capacity for successful love relationships, but will not be dealt with in this paper.

Selected Developmental Theories of Object Relations

Melanie Klein's Object Relations Theory

The newborn baby is not capable of independent survival. The close relation it has had with the mother during intrauterine life needs to be replaced by a new external relation strong enough for the newborn to survive (8). That external relation is established with the breast: in addition to being a source of food and fulfilling physical needs of the child, the breast becomes invested with child's mental needs. The newborn expects from its mother not only food, but also love and understanding. According to Melanie Klein (9-11), the immature child's ego experiences anxiety from the moment of birth. Such anxiety is driven by an inborn polarity of two instincts, ie, love (libido) and death (destructiveness) instinct, as well as external influences (e.g., the trauma of birth vs warmth, food, and love provided by the mother).

Schizo-paranoid Position

The development of the feeling of love towards the object (the first object is the mother) undergoes different developmental phases, from the relation to the breast as a partial object to the relation to the mother as a whole object. The immature child's ego experiences the relation to the breast as a relation to two objects: a good and a bad breast. The good breast feeds the child, takes care of it, and loves it, and in fantasy turns into an idealized object. The bad breast, on the other hand, is a source of frustration and in fantasy turns into a persecutory object. The gratification that, according to the child belief, comes from the good breast fulfils the child's need for comfort, love, and care, and also protects it from the terrifying persecution by the bad breast. The bad breast not only fails to provide gratification, but also threatens with destruction. In this phase of development, which Klein called the "schizo-paranoid position" and which is part of the normal psychological development, the child wants to contain as well as identify with the ideal object as the one that gives life, love, and protection, and to keep away from bad objects and parts of itself that contain the death instinct (destructiveness). Therefore, the child has the need to separate love from hate, since its self-preservation depends on its trust in the good mother. By splitting these two aspects, love and hate, and by connecting to the good part, the child succeeds in maintaining his belief in the good object and his capacity to love it, which is the essential condition for survival.

The dominant defense mechanism in this phase of development is splitting. Splitting is linked to the child's growing idealization of the object that satisfies the needs and the desire to be protected from the persecuting, frustrating object. Although the process of splitting changes its form and content during life, it is never completely abandoned. Further development towards the depressive position, when the object starts to be experienced as a whole, facilitates the development of mature idealization.

Depressive Position

According to Klein's theory (8), the baby further learns that satisfaction (food, warmth, and love) and frustration come from the same breast, or from the same mother. The child then recognizes the mother as a whole object and learns that good (food and care) and bad experiences (deprivation of food and care) come from a single, whole person – the mother. The child also realizes that it loves and hates the same person. At this point, the child starts to fear that its own destructiveness will ruin the good object, ie, the mother that it loves and completely depends on. In the depressive phase, the newborn may remember in a more integral way and contain love for the good object even when it hates it. Grief and longing are characteristic depressive experiences arising from the feeling that the good object was destroyed by the child's own destructiveness. This is the most intensive experience in depressive position. The child is exposed to depressive despair since it remembers that it loved and still loves the mother, but feels that it had devoured and destroyed her, which is why she is no longer available. The child has a feeling of complete destruction, and experiences its inner world shattered in parts due to the identification with the object. It undergoes the acute feeling of loss, guilt, longing, and helplessness. This experience mobilizes the newborn's desire to repair the destroyed object, to annul the effects of the aggression by its own care and love. Therefore, the depressive conflict is a continual struggle between the newborn's destructiveness and love. Reparation impulses leading to gradual solution of depressive anxiety (fear of losing the object) further leads to re-gaining good objects in both the internal and external worlds, which in turn leads to the replacement of primitive idealization by mature idealization.

The psychological development is inseparably linked to the growing feeling of external reality, and the child begins to see the difference between the inner and external world. It gradually discovers the limitations of its love, but also of its hatred, and finds more and more concrete ways of influencing external reality. While working through the depressive position, the newborn acquires the capacity for love and respect for other people as separate individuals. The new capacity to feel concern for his objects helps the child to learn gradually to control its impulses. During normal development, the splitting process decreases with the increasing integration of the ego. The increased capacity of the newborn to understand external reality and, to some extent, unite the conflicting impulses also leads to increased synthesis of good and bad aspects of the object. This implies that people may be loved and maturely idealized in spite of their imperfections. This means that the child has successfully merged good and bad objects, and when they are well balanced, the good aspects win over the bad ones.

Depressive position is a crucial step in the newborn's development and its processing is followed by a radical change in his understanding of reality. When the ego becomes more integrated, the process of projection reduced, and the newborn starts to perceive its dependence on the external objects and the ambivalence concerning its own objectives and instincts, the child discovers its own psychological reality.

In summary, according to Klein, the first relation towards the mother is filled with love, but other feelings, such as discomfort, frustration, pain, and hatred also emerge. Consequently, the child creates ambivalent relation to the mother: on the one hand, there is the capacity for love, and on the other, there is the feeling of persecution. Out of a highly intensive psychological relationship between the child and the mother, two parallel processes take place - the introjection of the good and bad aspects of the mother and the projection through which the child communicates with both the mother and the environment and attributes them various feelings, primarily the feelings of love and hate. The mother in her good aspect is the first good object that becomes part of the newborn's inner world. If the object, the mother, has been introjected as good and reliable, it becomes a basis for further identification. Whether this good object will become a part of the child's self, leading to positive feelings for one self (self-worth), will depend to a certain extent on the strength of persecutory anxiety. At the same time, the role of the mother is of crucial importance – her care, warmth of her love, understanding of the baby's needs, and tolerance of the baby's negative feelings, all of these contribute to the success of this process. The personality of the child develops on the basis of a good identification with the mother and later on with the father as well. As a result, the child's inner world begins to contain predominantly good objects and feelings, and the good objects are felt as responding to the child's love. All this contributes to establishment of a stable personality and maintenance of good feelings towards others. If the newborn has succeeded in establishing a good inner object during the depressive position, the depressive anxiety will lead to further enrichment of inner world and creativity. The schizo-paranoid and the depressive positions are constellations of emotions and reactions to them (12). Essentially, this part of psychological development refers to the development of the capacity to tolerate feelings, primarily the basic conflict between love and hatred, and associated feelings.

Attainment (6) of the capacity for depressive anxiety is considered a necessary quality for a person to be able to establish or maintain a mature object relation, since it is the source of generosity, altruistic feelings, reparative wishes, and the capacity to tolerate the object's ultimate separateness. It is not a final achievement, in which the schizo-paranoid mode is left behind, but rather a dialectic (or synchronic) relation between different levels of integration that continue throughout life. Increasing maturity gives growing capacity to function at the depressive position.

Envy and Gratitude

Envy is one of the most primitive and fundamental emotions and has to be differentiated from greed and jealousy (8,9). The newborn experiences early envy predominantly in relation to the breast that feeds it (8). It is probably the earliest external manifestation of the death instinct, since the newborn attacks what it feels to be the source of life. Klein (8-11) holds that early envy functions from the very birth and influences the earliest experiences of the child. The baby's frustration leads to the fantasy that milk and love have been intentionally withheld, or that the mother is keeping them for herself. These doubts form the basis for envy. If envy is strong, good feelings cannot be assimilated, the feeling of gratitude cannot arise, and the capacity to fully enjoy what has been granted is not possible. During entire life, the capacity for joy and gratitude enables the person to have various interests and enjoys in various pleasures. Unsatisfactory solution to the problems in this stage of psychological development may represent an obstacle to enjoy in love in adulthood.

Jealousy is based on love and its aim is the possession of the loved object and elimination of rivals. It develops after an object is recognized as separate within a triangular relation whose prototype is oedipal relation (the father, mother, and child). On the other hand, envy is a twofold relationship where subject envies the possession or quality of the object. The aim of envy is to be equally good as the object, and when it is not possible, to destroy the goodness of the object and eliminate the source of envious feelings.

Greed aims at possessing all the qualities that can be taken from the object, regardless of consequences and even if it requires the destruction of the object. It is accompanied by the desire to empty the mother's breast and use up all the sources of pleasure. This is followed by fear of punishment, whereby greed is intensified by the child's anxiety of being deprived and not being good enough to be loved. The newborn, very greedy when it comes to love and attention, shows to what extent it feels insecure about its capacity to love, and all those anxieties strengthen greed and hinder enjoying in love.

Winnicott's Object Relations Theory

The basis of mental health originates from the early mother-child relationship. To be able to develop, an individual needs a certain emotional atmosphere represented by the concept of good-enough mother and good-enough environment. According to David W. Winnicott (13,14), there is no other possibility for the child but to have a good-enough mother to progress from the principle of pleasure to the principle of reality, and from object relations aimed exclusively at satisfying its needs to mature object relations that include the constancy of the object. A goodenough mother (who may not necessarily be the child's biological mother) is a person that actively adapts to the child's needs. She gradually reduces her activity around the child depending on the child's capacities to meet the requirements of adaptation and to tolerate frustrations. The success in the care for the child, including both biological and psychological components, depends more on the mother's commitment to the child and less on her knowledge and intellectual abilities. In the beginning, through nearly total adaptation the mother allows the child the possibility to have the illusion that her breasts are part of the child. In other words, the newborn recreates the breast time and time again from its capacity to love. At the earliest stage, love and understanding are expressed through the mother's taking care of the baby and lead to certain unconscious oneness based on the unconsciousness of both the mother and the child. At the end of the symbiotic phase, with the aim to tolerate the separateness from the mother and overcome the separation anxiety, a healthy child uses the transitional object as the illusion of mother. This enables the symbolization of object at times of its absence. The child uses various objects, such as the thumb, blanket, or a toy, as transitional objects that symbolically represent the link between the child and the mother. Thus, symbolization is established and the child is ready to see the difference between the inner and the external object. The transitional object helps the process of accepting the similarities and differences.

The concept of transitional object at the mature level may account for emotional links to articles belonging to emotionally important persons.

Object Relations Theory of Margaret Mahler

Margaret Mahler (2) believes that the psychological development undergoes three phases: a non-object phase (autism), a pre-object phase (symbiosis), and an object phase (separation and individuation). In the autistic phase, the child has no idea of the existence of the object; during symbiosis a vague idea of the existence of the object is present; and during separation and individuation there is clear distinction between the self and the object. In symbiosis, the mother treats the child and organizes her activities concerning the child in accordance with her unconscious needs and fantasies. Through mutual mirroring and searching, the child introjects the mother's characteristics and expectations. Through a series of signs the child shows the mother its needs, dissatisfaction, and joy. In a complex manner the mother selectively

answers to these signs. The child gradually changes its behavior according to these selective responses and does that in a selective manner, which is the result of inherited talent and experience of the relation to the mother. These mutual interactions form the basis of the child's first experiences with the outside world, for instance, establishing basic trust in people, belief in stability of mutual relationships, tolerating anxiety and frustration, and differentiating oneself from the others. After symbiosis, the further development of the child leads to the awareness of the separateness from the object and the knowledge that there are two objects – the child and the mother.

This process culminates when the child starts walking and becomes completely physically separated from the mother. However, this period is not so simple since the anxiety of separation prevails and the child's may degrade to earlier stages of development, especially if the separation has not been encouraged by the mother. For instance, the child may refuse to walk, returning to his mother's lap. In adulthood, the person who has not passed through this phase in a satisfactory manner may experience every physical removal from the object, e.g., going away for a trip, as the threat of separation.

The symbiotic phase of development is crucially involved in determining the nature of psychopathology, as well as promoting psychic processes that are involved in creative activity and intimate object relations (15). In a well-established object relation, the partners relate to each other in a symbiotic fashion. Reversible symbiotic fusion regularly occurs in creative activity and empathic intimate relations, and thus symbiotic phase of psychological development can be recognized in intimate relationships.

In relation to Klein's theory, schizoparanoid position is closely linked to the beginning of symbiosis, and depressive position coincides with the phase between the end of symbiosis and beginning of the separation phase.

Capacity for Mature Love

The capacity for adult love involves the attainment of the relation to the object as a whole and satisfying the emotional needs of the subject, including simultaneous tolerance of the specific needs of the object. The object and the self should be both experienced as worthy and good. This involves the optimum resolution of anxiety related to schizo-paranoid and depressive positions and phase of separation and individuation. The primitive defense mechanisms, such as splitting, are replaced by more mature defense mechanisms, whereas primitive idealization is replaced by more mature idealization. The fusion with the object is reversible and helps in creating the experience of closeness with the partner, while the possibility of separation provides the possibility of recognizing and respecting the differences. In a broader sense, the capacity for love and commitment develops in different ways into commitment to various objects experienced as worthy and good. That means that the joy a baby could experience because it was loved is later transferred not only to relationships

with other people, but also to work and everything else a person feels worthy of investing. This also enriches the personality and gives capacity to enjoy in work and find various sources of pleasure. To learn from one's own childhood experiences is a sign of maturity and successful development. This implicates healthy development where good objects dominated over the bad ones, ie, where love won over negative feelings, because nothing that existed on an unconscious level ever fully loses its influence on the personality. That is why external experiences are of great importance, although much depends on how they are interpreted and adopted, which in turn depends on how strong is the influence of destructive impulses and anxieties of persecutory nature. Our basic attitudes, created mostly from childhood experiences, influence the way in which we solve problems. If love is present in such experiences, solving problems will be less painful; however, if these experiences were dominated by doubt and self-pity, minor disappointments can turn into catastrophes.

Capacity for Mature Romantic Love

In addition to developmental achievements from the early phases of development of object relations, for attaining satisfactory romantic love in a partnership, it is necessary to pass favorably through development of instincts. The development of instincts occurs in several phases: oral, anal, phallic – including oedipal phase of latency and puberty, and genital phase (16,17). Not earlier than adolescence, previously separated erotic and tender care components combine into integrated mature love.

To understand the feeling of love, so important and highly complex human emotion, Sigmund Freud (17) approached it from the genetic point of view, considering its ontogenetic development. At the very beginning, when objects still do not exist, the entire libido is self-directed – this primary narcissism may be considered the first form of love. Through establishment of relations to objects and formation of the archaic ego, which works in accordance with the satisfaction principle, the more an object is experienced as pleasant, the more the ego will try to get hold of it and incorporate it. If the object is a source of dissatisfaction, the ego tends to distance itself from the object. This is the root of love, which includes the object providing satisfaction. The path of development of love is long and uncertain: a person must first and foremost overcome his or her own narcissism as well as later infantile pre-genital forms of love, where partial instincts have not been subdued by the domination of the genitals. Infantile sexuality involves the functioning of partial sexual impulses with a tendency towards oral and anal satisfaction (18), followed by the phallic (genital) phase, including the Oedipus complex and a period of latency to puberty (ie, genital phase). According to S. Freud (19), sexual love provides human beings with experience of the highest and most complete form of satisfaction, and represents the original model of happiness. "We are never less protected from suffering than when we love, and never more helplessly unhappy than when we lose

the loved object or its love". In order for adults to attain the satisfaction in romantic love, they need to experience their love object (the partner) as a separate and worthy, but not incestuous.

Integration of achievements of object relations and instinct development is a precondition for harmonic love relationship. On the other hand, sexual intercourse can be a source of conflict or used for fulfillment of some other emotional needs. For example, men with low self-esteem may have many sexual partners to achieve the feeling of self-worth, or women with the same problem can experience the sexual intercourse as source of humiliation. When the development of instincts did not lead to a satisfactory solution of Oedipus conflict, love object can be treated as incestuous object (the mother or the father). This can cause the difficulties in realization of pleasure in sexual intercourse, or sexual pleasure can be achieved only after humiliation of the object.

Application of Object Relations Theory to Understanding Adult Love Relationship

Since early relation to important figures (usually the mother and the father) is constantly present and alive in our unconsciousness, the unresolved developmental problems emerge in our love relationships.

We all retain the early concept of a relationship with an idealized love object, and therefore need to realize such a relationship in the adult years (20). The concept of an idealized object may be linked with the first love object, e.g., the mother satisfying the needs of the child for food, love, and understanding; a desired object that did not actually exist in reality; or the experience may be bad. Later on, with the inclusion of the father, the image of an idealized parental couple is formed. If the need for love at an early stage was not satisfied in a satisfactory manner, the negative experiences remain recorded in the unconsciousness and may lead to difficulties in realizing the relationship with the love object in adulthood. For instance, they may lead to fear of hurt caused by the love object, or to overidealization of the love object accompanied with non-realization of the relationship only to avoid testing the relationship in reality, which might cause pain.

Falling in love includes a mutual projection of idealized objects, producing the feeling of happiness and satisfaction (20). Aggressive parts are repressed or projected into other people or the world. The bliss of falling in love is seen as the result of a revival of feelings that once belonged to the symbiotic phase of infancy (21).

If an individual did not successfully pass through all the stages of development during which the capacity for love was acquired, he or she may have inadequate reactions to partner's love. It is certainly one of the reasons for disharmonic partner relationship – the source of conflicts dominated by a projection as a distancing mechanism to avoid the closeness with a partner, which frightens the person whose development was interrupted in the period of building the capacity for love. People with this unresolved conflict suffer, and in most cases are unaware of that. They turn fear of closeness into irritation and anger in order to defend themselves from the pressures of the partner. The loving partner feels that what he or she gives is not enough, and tries to give more, but meets with an even greater frustration. Thus, their relationship turns into a relationship of two unsatisfied people, each having their own psychological reasons.

Two components are always present in the romantic love relationship - fusion/symbiosis and separation. Individual's moving between these two poles is of vital importance for establishing and maintaining a mature love relationship during the life (20). The fusion or symbiosis stands for experiencing the undifferentiated oneness with the other person due to a high permeability or broadening of boundaries. This reversible fusion occurs in intimate relationships and allows the feeling of attachment, closeness, and empathy, as well as mutual exchange of fantasies. When a man and a woman are in love, the process of their mutual idealization is associated with projections of idealized objects providing love, care, and understanding. It is suggested that satisfying and stable relationships reflect the partners' ability to see the imperfect other in an idealized way (22).

Separation within a relationship serves the purpose of better realization of the real aspects of ourselves and others and better differentiation between ourselves and the other.

When an individual grows up (20), he or she retains the idea of a relationship with an idealized loved object, so there arises the need for the concrete realization of relationship. When this relationship is not satisfactorily fulfilled, the person can easily fall in love. Mature love requires that both partners are capable of experiencing, without a significant conflict, the simultaneous presence of illusory and realistic dimension of the relationship. A mature person is the person who knows how to shift from illusion to reality and vice versa, but not to shatter the illusion or forget the reality. In mature love, the feeling of symbiosis and separateness is both flexible and rigid. Separation helps us to experience the partner as an independent person, as a separate object with his or her own wishes, needs, and individuality. On the other hand, fusion helps us to empathize with the partner and learn how they feel, what they want, and what they are like.

With immature love, the partner is experienced mainly as part of us, or we are experienced as part of him, and therefore there is not enough room for individual needs and wishes (20). The break up of a relationship is painful for the one who still experiences large areas of symbiosis with the object, since the person has not separated his or her own from the partner's to a sufficient extent, and therefore they feel as parts of themselves disappear. The one leaving, who has already discovered great differences or experienced a number of frustrations, is not in symbiosis any more.

Object relations theory offers a framework for better understanding of the suffering of love-sick patients who cannot accept the fact that the relationship has ended and cannot mourn the loss and go on with their life (23). From the clinical work it comes that the patients having experienced early relationship disturbances, and their adult love offered an illusory defense against deep feelings of fragility and low self-esteem. Accepting the finality of their lover's departure meant re-experiencing feelings of abandonment and worthlessness.

We agree that one aspect of self-realization (24) requires working on constructive intimate relationships in which another person adds to the richness of our existence and expands our horizons.

In conclusion, we may say that only the individuals who have favorably passed through the process of psychological development related to building capacity for love have a capacity for adult mature love. This means that the experience of love in earlier phases of development was predominantly pleasant, creating comfort, and not predominantly negative, causing discomfort. Such people are willing to give and take through the dynamics of the relationship, and thus enrich both themselves and others. This entails maturity not only in the partner relationship, but also in all other relationships.

Experiences during early psychological development may either contribute to later undisturbed and healthy psychological development, slow it down, or hinder it. For healthy psychological development, the relationship between persons taking care of the child in the earliest childhood is important. Within such a relationship, the child's specific physiological and biological needs can be met. Failure at this stage may impair the child's capacity for adult love. The disturbance in psychological development is created when the interaction between the child and the mother was not satisfactory, either due to the mother's inadequate care of the child, or the child's inadequate use of the external object, ie, the mother, due to biological reasons. The attainment of capacity for mature adult love also includes a healthy development of instincts. The person must first overcome his or her own narcissism, as well as later infantile pre-genital forms of love where partial drives have not been subdued by the genital predominance. Obstacles in the development of object relationships from pre-object to object phase, from symbiotic to separation and individuation phase, can impair the capacity to love. However, every person has a potential for change. If he or she has not built the capacity for love due to unfavorable life experiences, he or she may attain it later on through good experience with other people, or through psychotherapy.

References

- 1 Birtchnell J. Does recollection of exposure to poor maternal care in childhood affect later ability to relate? Br J Psychiatry. 1993;162:335-44.
- 2 Mahler M. The psychological birth of human infantsymbiosis and individuation. New York (NY): Basic Books; 1975.
- 3 Meissner WW. Internalization in psychoanalysis. New York (NY): International Universities Press; 1981.
- 4 Kernberg OF. Borderline conditions and pathological narcissism. New York (NY): Jason Aronson; 1975.

- 5 Kernberg OF. Identification and its vicissitudes as observed in psychoses. Int J Psychoanal. 1986;67(Pt 2): 147-59.
- 6 Jackson M. Weathering the storms: psychotherapy for psychosis. London: Karnac Books; 2001.
- 7 Arlow JA. Symposium on object relations theory and love. Object concept and object choice. Psychoanal Q. 1980;49:109-33.
- 8 Klein M. The psycho-analysis of children. 3rd ed. London: Hogarth Press and the Institute of Psychoanalysis; 1949.
- 9 Klein M. Contributions to psychoanalysis, 1921-1945. London: Hogarth Press; 1950.
- 10 Klein M. Envy and gratitude and other works (1946-1963) New York (NY): Delta Books; 1977.
- 11 Segal H. Introduction to the work of Melanie Klein. London: Hogarth Press and the Institute of Psychoanalysis; 1982.
- 12 Stein R. A new look at the theory of Melanie Klein. Int J Psychoanal 1990;71(Pt 3):499-511.
- 13 Winnicott DW. Collected papers: through pediatrics to psychoanalysis. London: Tavistock Publications; 1958.
- 14 Winnicott DW. Playing and reality. London: Tavistock Publications; 1971.
- 15 Giovacchini PL. Symbiosis and intimacy. Int J Psychoanal Psychother. 1976;5:413-36.
- 16 Freud S. Three essays on the theory of sexuality. Standard edition. Vol. 7. London: Hogarth Press; 1905.
- 17 Freud S. On narcissism: an introduction. In: Collected papers, IV. London: Hogarth Press; 1971. p. 385-403.
- 18 Freud S. The infantile genital organisation of the libido. In: Collected papers, II. London: Hogarth Press; 1971. p. 234-55.

- 19 Freud S. Civilization and its discontents [Serbian trans.]. In: Selected works of Sigmund Freud, Vol. V [Serbian trans.]. Novi Sad: Matica Srpska; 1984. p. 261-357.
- 20 Fonda P. The role of fusion in love [in Slovenian]. In: Praper P, editor. Concept of love in psychotherapy [in Slovenian]. Bregantovi dnevi. Proceedings of the Conference on the Concept of Love; 1997; Ljubljana, Slovenija. Ljubljana: Psihoterapijska Sekcija SZD, Sekcija za Kliničnu Psihologiju i Psihoterapiju; 1997; p. 17-37
- 21 Bergmann MS. Symposium on object relations theory and love. On the intrapsychic function of falling in love. Psychoanal Q. 1980;49:56-77.
- 22 Murray SL, Holmes JG, Griffin DW. The self-fulfilling nature of positive illusions in romantic relationships: love is not blind, but prescient. J Pers Soc Psychol. 1996;71:1155-80.
- 23 Moss E. Treating the love-sick patient. Isr J Psychiatry Relat Sci. 1995;32:167-73.
- 24 Simon J. Love: addiction or road to self-realization, a second look. Am J Psychoanal. 1982;42:253-63.

Received: November 13, 2003 Accepted: December 12, 2003.

Correspondence to:

Slađana Štrkalj Ivezić Vrapče Psychiatric Hospital Bolnička cesta 32 10090 Zagreb, Croatia *sladjana.ivezic@bolnica-vrapce.hr*