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SOME VARIABLES AFFECTING TRANSITIONAL
OBJECT USAGE

by

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Abstract

SOME VARIABLES AFFECTING TRANSITIONAL OBJECT USAGE

by

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Winnicott's formulation of the emergence of a transitional object in the course of a child's development emphasizes the mother's physical and emotional (empathic) availability as the matrix from which the child can enter into this first act of creativity and begin to coordinate inner and outer experiences.

Studies investigating transitional object usage have reported that greater physical availability of the mother (especially at night) results in either a by-passing of the use of transitional objects altogether or in a tendency on the part of the child to use stuffed animals rather than blankets as their attachment objects. No study has attempted to explore the nebulous concept of empathy or to devise a way to measure it.

In this study availability of the mother was thought of in two ways: physical time mother spends with the child and amount of empathic understanding she displays toward the child in his rapidly changing developmental context.

Interviews were conducted with thirty mothers, all white and of middle socio-economic status and all of whom had children between the ages of two and four years. Assessment of the amount of time mother spent

with her child both during his first year and now was made. Other variables such as sleeping arrangements, use of pacifiers or bottles, play activities as well as transitional object usage (if any) were also investigated.

An attempt was made to measure maternal empathy using the Psychological Mindedness Scale devised by Engel et al.

It was hypothesized that:

1. Greater physical availability of the mother would result in less transitional object attachment
2. Higher ratings on the Psychological Mindedness Scale would correlate with greater intensity of attachment to transitional objects
3. Gender would not affect transitional object usage
4. An optimal point of physical and emotional availability could be predicted.

Only one of these hypotheses was supported: gender does not influence the intensity of attachment to or preferred usage of a transitional object. There was a trend for decreased intensity of attachment to transitional objects when the mother was the full time caretaker in the child's first year, but it was not supported statistically.

Other important trends were noted although these did not form part of the original hypotheses. There is a clear difference in the way in which a child uses the transitional object depending on whether the object is a blanket or a stuffed animal (or other type): the animal users tend to play directly with the object, include it as part of their play setting along with other toys. The blanket users, on the other hand, are more

likely to rub their own bodies with the object. Mothering type activities and verbalization occur more frequently when the object is an animal or doll rather than the blanket.

Mothers who worked in the child's first year tended to have children who used transitional objects other than blankets, to rate higher on the overall Psychological Mindedness Scale, to talk more to their children, and to breast feed for some period of time during the child's earliest months. They favored the use of transitional objects and tended to see them in a positive light in terms of the child's development.

Comparisons with other studies were made and similarities and differences underscored. Some ideas for future research were generated and the limitations of the present design noted. Finally, a brief but illuminating example of transitional object usage was offered as an example of the complexity of the field.

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CHAPTER I

REVIEW OF THE LITERATURE

Winnicott's Formulations

In a paper written in 1946, M. Wulff brought to the attention of the psychoanalytic community a series of observations describing the very strong attachment that some children had to inanimate objects. His implicit purpose in writing the paper seems to have been to draw attention to the fact that some children may be viewed as using a fetish and to emphasize therefore that fetishism was not by any means confined solely to adults. He described in detail five cases of childhood fetishism, some based on his own observations and others gathered from observations made by other analysts over a long period of time. For example, Wulff cited his own observations of the case of a four year old boy whose mother and father were friends of his. The boy was tearful and refused to go to sleep. His mother volunteered the use of what she called a "magic blanket" to help the child go to sleep. When queried about this, she stated that the child had used this ever since he had fed at the breast and that it was a small, warm and very soft woolen coverlet. He prized it above everything else in the world, continued the mother, and was so happy if he had it that nothing else mattered. The blanket was used in a variety of stressful circumstances including going to sleep, separating from the mother when she had to leave the house, soothing himself when he ached, etc. The child would wrap his head in

the blanket and fall asleep contentedly with it. Wulff concludes that "the magic blanket in this instance was not lacking in its magic spell" (p. 455).

Wulff tried to draw his data together by noting that in at least two of the cases (those reported by Friedjung in which a boy of 16 months needed a stocking or brassiere that belonged to his mother before going to sleep and Sterba who described a six month old girl who became attached to the bib she had worn when suckled at the breast) the appearance of the fetish followed immediately after weaning, that both cases were associated with sucking, and that in both the need for the object was intensified at sleep time and when used "quickly induced quiet and 'satisfied' sleep" (p. 458). As he continued speculating about these cases, Wulff eventually felt convinced that the childhood fetish "represents a substitute for the mother's breast and the mother's body" and that by using the object usually in association with some autoerotic component as well (e.g., rocking or thumb-sucking) the child was attempting to re-establish for himself the "happy moment" which followed nursing at the mother's breast in which the child usually fell into a quiet sleep. This conclusion, however, presented Wulff with a crucial theoretical problem.

Friedjung's case was observed in 1927 and he had written to Freud about it. Freud had already come to his conclusion that the fetish in adults always represented the illusory phallus of the mother and was utilized as a defense against castration anxiety "and nothing else" (cited by Wulff, p. 462). He advised Friedjung to find out if his child fetishist had had the opportunity to view his parents naked and hence to observe the

anatomical differences between them. This indeed turned out to be the case and Freud used the example as another proof of his theory regarding the origin of the fetish. Wulff, however, realized that if that were so in the case of this 16 month old boy, it would contradict the psychosexual stages of development because it would assume that the boy had developed intense castration anxiety at age one and a half years and that he also had the mental capacity to repress the images and feelings connected with the observation of his naked parents and institute the complex defense of a fetish.

Wulff tried to resolve this dilemma by pointing out that in the child the fetish is valued for a specific property (e.g., its odor) and that it gives rise to a specific kind of gratification (p. 466). It is not the object itself but only a property of it which is used in a fetishistic manner. Also, "no sign of any emotional tie to the object, apart from gratification in relation to the erogenous zone, is to be observed" (p. 466). He also points out that the way in which the object is used changes as the child progresses through the psychosexual stages and eventually does indeed become a means of defending against castration anxiety in the phallic phase.

Winnicott's extensive work with parents and children led him to a similar awareness of the importance of a child's attachment to inanimate objects and in 1953 he proposed a theoretical construct as a way of understanding these phenomena (the original paper is reprinted in his collection of articles published in 1971). Since this paper has stimulated much speculation in the developmental area and has influenced the analytic understanding of early mental development, it is important to consider its

propositions in some detail.

Winnicott begins by noting a consistent developmental sequence in the child from the earliest autoerotic activities (fist, thumb, fingers in stimulation of the oral zone) as soon as he is born to attachment to inanimate objects (e.g., dolls) after a few months. This is true for children of either sex. He calls this object the first "not-me" possession (1971, p. 1) and emphasizes that something more than simply oral excitement is involved in the use of the object. He considers these attachments to belong to an intermediate area of experience which is labelled "transitional objects" and "transitional phenomena":

I have introduced the terms "transitional objects" and "transitional phenomena" for designation of the intermediate area of experience, between the thumb and the teddy bear, between the oral erotism and the true object-relationship, between primary creative activity and projection of what has already been introjected, between primary unawareness of indebtedness and the acknowledgment of indebtedness ("Say: 'ta'"). (p. 2)

A necessity is seen for understanding an intermediate space between that which is subjectively experienced (inner reality) and that which is perceived as outside of the self (the external world). This third or transitional space permits inner and outer reality to be kept separate yet interrelated. This mental activity is the substance of illusion and, in adult life, forms the basis for a sharing of artistic and cultural (religious) experiences. The study of transitional phenomena involves therefore not the child's object per se but the beginning use of this intermediate area of experiencing which begins for the child as he first starts his struggle for individuation and separation from the early maternal symbiotic unit.

As the infant acquires speech, a special word may be used to refer to the transitional object. Usually this word has a word or sound used by adults in the child's environment incorporated into it.

At times, the mother herself may be used as the transitional object or transitional phenomena may be present in the child's life but hidden from direct observation. Winnicott seems to imply the universality of these phenomena (p. 5) and states explicitly that "there is no noticeable difference between boy and girl in their use of the original 'not-me' possession" (p. 4).

Winnicott lists seven features of the transitional object by which it can be distinguished as the special object of the child. Amongst these, he points out that the object can be affectionately cuddled, excitedly loved and mutilated and that "it must survive instinctual loving, and also hating and, if it be a feature, pure aggression." It cannot be changed (unless by the infant himself) and must retain an element referred to as "vitality" for the child (via its tactile or odorous properties). For us as observers the object is outside but for the child this is not so. Nor does it come from within; it is not hallucinated.

The fate of the transitional object is to gradually fade in importance as the child continues to develop. It is not mourned, forgotten or repressed nor does it "go inside." The object decreases in importance for the child as the transitional realm becomes gradually extended to include the common cultural and artistic channels available to the child via his social arrangement. The transitional phenomena thus become diffused over ever increasing areas.

The ability of the child to enter into the transitional realm is

dependent upon the quality of his relationship with his mother from the moment of birth. Winnicott stresses the importance of the "good-enough mother" in the beginning development of the child and explains what this means. At birth and for some time after, the good-enough mother is in almost complete adaptation to her infant's needs. This person is usually (but not indispensably) the biological mother or the person who cares for the infant with a sense of "devotion" (p. 10). In her capacity to adapt almost 100% to the infant, the mother enables the child to enter into the illusion that her breast is under his control and this control is to be thought of as having omnipotent-magical qualities. As the child experiences instinctual tension, the breast is presented to him just at the right moment giving the illusion that he has created it. Thus, "the breast is created by the infant over and over again out of the infant's capacity to love or (one can say) out of need. A subjective phenomenon develops in the baby, which we call the mother's breast" (p. 11). (In a footnote, Winnicott explains that what is created subjectively for the infant is the "whole technique of mothering." Thus, a good-enough mother can utilize a bottle rather than the breast in these early exchanges with her infant.) At the beginning of life this phenomenon of illusion is indispensable if the infant is to eventually begin to be able to distinguish external reality.

As the child develops, the mother begins a process of disillusionment as the child becomes better able to deal with the frustration of not having needs met immediately. This is necessary if the object (person) is to become real for the child--both loved and hated. It is this interplay between illusion and disillusion, between initial near complete adaptation and gradual frustration on the part of the mother which allows the child

to gradually utilize the transitional realm as he begins the task of reality acceptance. Winnicott thus states that use of a transitional object always involves some abrogation of omnipotence (p. 5). The task of relating inner and outer reality begins for the child in the early months when transitional space begins to be utilized (anywhere from 4-12 months according to Winnicott [p. 4]). This task is never completed for the human being and the original transitional object follows a line of development which goes from transitional object to play to the arts, religion and other cultural institutions.

Interspersed throughout his paper are several clinical examples which Winnicott cites in order to illustrate his propositions and others which serve to point out contrasts with the normality of the processes he is describing and to therefore aid in the detection and diagnosis of pathological manifestations. He contrasts two brothers (X and Y) one of whom (X) had a very strong attachment to a toy rabbit starting from age 12 months and then transferring to real rabbits. This was not, however, a transitional object because of the particular way in which the child used the object. His mother was overly serious in her ministrations to him and breast-fed him for seven months. He was very difficult to wean. He never displayed autoerotic activities such as thumb-sucking and manifested an intense attachment to the mother herself rather than to anything in his environment. His use of the rabbit is referred to as a form of comforting rather than true transitional object usage since the object never became more important than the mother or an inseparable part of the infant.

In contrast is X's brother Y who was weaned at four months without

difficulty. He had sucked his thumb in his early weeks and also used the end of a blanket (this began after weaning at age 5 months) with which he would tickle his nose. He gave a name to this ("Baa") and at one year substituted a green jersey with a red tie (very soft in texture) for the original transitional object. Winnicott distinguished between the 'comforter' of his older brother and the 'soother' represented by the "Baa." It would comfort him invariably in times of stress and he would go to sleep within a few minutes after using it if sleep time was near. He would suck his thumb at the same time as the blanket. This is the true transitional object.

A transitional object may become overcatheted and hence lose its adaptive capacity if it becomes associated with particularly traumatic incidents in the child's early life. Such a case is described by Winnicott in a boy's obsessive use of string which served to deny separation from his mother which had been a recurrent traumatic event for him. In this case the string serves as a denial and becomes pathologically defensive rather than soothing. Winnicott calls it the beginning of the development of a perversion.

It is worth noting that Winnicott (1953) acknowledged that in certain cases the transitional object may develop into a fetish object and thus persist into adult sexual life. He thus took cognizance of Wulff's paper but wished to draw clear distinctions between transitional objects (a normal aspect of development) and the fetish (a pathological development of the transitional object). He distinguishes between "delusion" (e.g., of a maternal phallus as in the case of the fetishist) and "illusion," "a universal in the field of experience" (p. 96).

The content of Winnicott's original paper may be generally divided

into three broad categories: description of the transitional object including definition, distinctions with other strongly cathected objects and age and sex parameters; theoretical considerations regarding the meaning of the transitional object and its implication for developmental theory; and clinical manifestations in the use of the transitional object including regressive re-evocations in adults, and pathological distortions and perversions (fetish-objects). In the remainder of this chapter the research spurred by Winnicott's formulations will be reviewed using these divisions as a way of grouping the various studies and papers under consideration.

Transitional Objects: Definitions and Parameters

The normality of the phenomena he had described and their distinction from the pathological fetish is reiterated by Winnicott in his introduction to the first study to appear in the literature in which some attempt was made to empirically verify some of Winnicott's concepts by studying mothers and children. This was done by Olive Stevenson (1954) and consisted of profiles of from 50 to 60 children in which information was obtained concerning the properties of the object, when it became important to the child, how long it remained important, how its importance ended, the uses to which the object was put, and family information (e.g, number of siblings, position held by the child in the sibling order, general mental health of the family, etc.) Her sample was taken from a variety of sources including personal interviews with acquaintances, information from files at children centers, nurseries, and responses to a letter Stevenson had published in The Nursery World. While the amount of information she obtained varied tremendously, Stevenson discovered that "mothers seemed everywhere to recognize that these adored objects could not be lightly dismissed and

must be respected by the adult" (p. 203). Most mothers thus never forced the child to relinquish their object although as the object's use persisted into later childhood, some mothers became concerned about the appropriateness of the object's usage and began to wonder if it represented something gone wrong.

Most mothers realized that they were in some way connected with the object and that its usage had something to do with anxiety in the child (although these intuitive reactions varied depending on the intelligence of the mother).

Stevenson did not choose to categorize and describe statistically the data which she gathered. Rather, she gave several examples of what were "typical" of her findings. One child, a boy named Roy, age 7, used a duster named "Say" as his transitional object. This was a duster similar in texture to the blanket he had used as a baby. Its usage started at 18 months and had continued up to the time of the investigation and the dusters were replaced by similar ones as they wore out. It was sometimes held or sucked and taken to school with him. He relinquished it with great resistance and then for only short periods of time. The mother was concerned about the usage of "Say" especially because it was dragged to school and could not be given up.

While this example was to serve as an illustration of Winnicott's formulations, it seems to raise more problems than it solves. What is highlighted in the example is a case in which the natural progression from autoerotic to transitional phenomena to play to social mutuality which Winnicott described has been arrested at the transitional stage. The child's reluctance to relinquish his object especially in school suggests that the

transitional realm has not diffused across socially shared activities and that relating to others ~~must~~ be fraught with dangers and difficulties which makes the "security" of the object essential. The mother's intuitive suspicion of the appropriateness of the object may be a sign of recognition on her part that the proper sequence of separation from the total maternal environment and progression to wider cultural and interpersonal pursuits has not taken place.

Stevenson herself discussed the "passing" of the transitional object in one section of her paper. She states: "It is interesting to note how the child himself recognized the infantile nature of his dependence, even when he is not yet able to relinquish the 'object'" (p. 209). One boy put his "own pillow" in his newborn brother's cot, stating he was "a big boy now" but could not immediately cease using the object despite this recognition. Others manifested the same ambivalence in terms of "letting go" of the object.

Stevenson directs attention to a phenomenon which Winnicott had mentioned in his paper: the distinction between the transitional object and other strongly cathected inanimate objects. Stevenson labels the first transitional object "primary" and later developments (e.g., strong attachment to a favorite toy) as "secondary" objects. This distinction seems, however, to add confusion rather than clarify the definitional problem of the transitional object because she seems to imply that those children who evince attachment at a later age (e.g., two years) have passed through a primary phase of attachment which has gone unnoticed. The categorization of primary and secondary therefore seems to have to do with age of appearance and sophistication of the object (i.e., a teddy-bear

is more sophisticated than a blanket). In fact, out of forty-three children, twenty-two showed strong attachment to an object at one year or over and twelve at two years or over. The discussion which follows in Stevenson's paper tries to illustrate how the intensification of attachment at a later age may have to do with phase specific dilemmas which the child tries to resolve in part by his attachment (e.g., tensions at the Oedipal phase may be handled by loving an object which is safe and under one's control). Stevenson feels that when an object is used in this way, it is invested with more personal feelings than the primary transitional object. (In other words, one projects human emotions onto the object. In one case, the doll in question was burned and to console the grieving owner [a girl of seven] it was given an elaborate funeral.)

There are several additional observations made by Stevenson which are all relevant in trying to understand and demonstrate Winnicott's hypothesis. For example, is the pacifier ("dummy") or empty bottle a transitional object? (Stevenson feels that the extended use of the pacifier can qualify as a transitional object but that because of its very "temporary and limited significance" it is not quite the same thing.)

Several children were able to accept substitute objects when the original one had to be washed or replaced. Children varied in the tenacity with which they clung to the original object and it was felt that the mother's tact in presenting the idea of the substitute object was essential here.

A roughly equal number of boys and girls are included in the sample and there is no difference in usage. Nor does personality type seem to affect usage; thus, two outgoing, active boys are compared, one having no transitional object and another being quite attached to "Shaggy;" a

pajama case. There seemed to be no relationship between position of child in the family and usage either (although it is to be remembered that there was no attempt made to statistically prove or disprove any of these findings).

Stevenson notes that transitional object usage is by no means restricted to children and that its persistence into adult life may be either pathological (e.g., a severe anxiety reaction or a fetish-object) or relatively normal (e.g., the significant objects which are preserved by lovers and may even form an important part of how they express their feelings towards one another).

One aspect of Stevenson's study generated much interest and this was her finding that there were "objectless" children, that is, children who showed no attachment to any object. Winnicott had mentioned that in some cases the transitional phenomena would not be readily observable (repetitive sound pattern, for example) or that it would be the mother herself. Stevenson notes this but goes on to say that in some cases at least the lack of a transitional object seemed to underscore a pathology in development (either too much or too little dependence on the mother). This idea was taken up and elaborated by Provence and Ritvo in their study of institutionalized infants (1961).

Making the general observation that the infants under study had severe developmental lags (although normal maturational stages were reached in terms of physiological growth), the authors specifically note the absence of attachment to any toy or inanimate object used in a comforting or soothing way. (Such objects were available to the infants.)

The authors propose an elaborate theoretical basis for understanding this. By way of summary, the components of maternal availability alternating with optimal dosages of "time alone" and the child not being required to constantly interact are cited as crucial to the development of object constancy, to the stimulation of instinctual drive-energy, to the sharp polarization of comfort-discomfort and to the "permanent cathexis of the memory traces and image of the need-satisfying object" (p. 201). These cathexes facilitate displacement to substitute objects. In the institutionalized infant, the lack of availability of the satisfying mother and the longer phase of discomfort (which flattens the comfort-discomfort polarity) interferes with the setting down of memory traces of the good object and their subsequent displacement to inanimate objects. This theoretical statement seems to support Winnicott's own speculations about the intrapsychic situation of the child as it reflects the earliest experiences with the maternal environment and the crucial role of maternal accommodation to the child's needs.

One of the major problems which besets researchers in the field of transitional phenomena is the difficulty in being precise and arriving at a generally agreed upon definition of a transitional object. Winnicott was deliberately vague in his original statement because he wanted to leave room for all kinds of possibilities. As noted previously, he indicated that a transitional object need not be a tangible object but could be a tune or word or the mother herself (as well as anything else that is used "transitionally" and is created by the infant). Stevenson's article illustrates the difficulty; in giving examples of "typical" cases, she cited some cases which now seem illustrative of pathological usage.

Confusions of the original concept abound in the literature which appeared after Stevenson's article as well.

For example, in a paper published in 1962, Solomon discussed the obsessive-compulsive syndrome from a transitional point of view and saw the fixed idea of an obsession as an "internalized" transitional object. In the course of his discussion he states that the necessity of giving up mother every night when the child goes to sleep pushes him to find a substitute object to replace the mother. He then continues: "The intermediate object presumably is a transitional attachment until a new human object relationship is established" (p. 633). He thus neglects the subtlety of Winnicott's formulations concerning the third area of human experience (transitional space) and implies that transitional means on the way to another object relationship which will take the place of mother. He also implies that the inanimate transitional object is a substitute for the mother and thus ignores the importance of the object in terms of the child's beginning creativity and the continual task of coordinating inner and outer experiences via the transitional realm. He equates obsessive thoughts with transitional objects in that both represent an alternate (but unsatisfactory) way of staying tied to the mother and an inability to fully internalize the maternal imago and does not consider transitional phenomena in adult life at all.

Another paper (Fink, 1962) makes a case for considering the pacifier to be a transitional object. As previously stated, Stevenson had viewed the pacifier as having experiential characteristics similar to the transitional object but as not being quite the same thing. Fink describes one case of a twenty-two month old boy who had used a pacifier since birth and would not give it up at the time of observation, a process desired

by the parents because they felt it was no longer socially acceptable for a child of his age to have such a strong attachment to it. The pacifier had long served as an aid at sleep time and was irreplaceable (the parents had bought him a new one when it became clear through the child's tears that he was not ready to give up the pacifier yet). The rough consistency of the old, chewed up pacifier was an important component in the child's attachment to it and he had given it a name ("ra-roo") which remained unchanged despite the fact that the child's vocabulary had progressed to more mature designations for the other important objects of his environment.

All these facts are used by Fink as a way of pointing out that a transitional object may be any object which the child uses in a particular way. While it is true that not all attachments to pacifiers are transitional in nature, neither are attachments to blankets or teddy bears. What matters is that the child displays qualities of relating to the object which meet some of the criteria that Winnicott has delineated in his paper. Thus the pacifier in this case was treated with aggression and hostility yet at the same time loved and cherished; it was used as a soother by the child and given a special name by the child; it was strongly cathected and sometimes preferred to the mother as a comforter (in the sense that the mother's presence was not enough for soothing--the pacifier had to be employed as well); it could not be changed or substituted unless the child instigated this process himself.

Fink makes a good case for his argument. What seems neglected, however, is the fact that the case he describes occurred at a time of heightened stress for both parents (the mother was pregnant) and child. He thus has no way of knowing if the pacifier was irreplaceable before

this time and hence how much the current situation in the child's life had created the need for a special object for the child which was used defensively. In any case, the child had already advanced quite normally in the separation process and so if he resorted to a transitional object at this time it must have a meaning other than what Winnicott considered as primary in terms of its aiding in the separation process and in making the transition to coordination of outer world experience with internal states.

The problem of the definitional vagueness of transitional object usage and the implications this had for further study in the area was not taken up until the early 1970's when both Fred Busch and Renata Gaddini undertook (separately) a series of studies designed to clarify the dimensions of transitional object usage through observational methods of relatively large numbers of children.

Fred Busch et al. (1973a) collected data on a total of 40 children from 23 families. These families all had at least one parent associated with a large university and hence the sample was an educationally skewed one. Data were collected through a semi-structured interview which covered such items as time of appearance of the object, parental attitudes and restrictions of its usage, changes in usage of the objects over time, etc.

The first problem which these investigators confronted involved the distinction between the primary and secondary transitional object, a division begun by Stevenson. Noting that many children may develop a strong attachment to an object in the second year and that this attachment may be very similar in nature to what is considered to be a true transitional object, the authors decided to call attachments appearing

in the first year of life primary transitional objects and those appearing in the second year secondary transitional objects. In the study under consideration only primary transitional objects were included for investigation.

The next problem involved a stricter definition of a primary transitional object than had yet appeared in any of the existing literature. As Busch himself pointed out, the vast array of objects which children become attached to in the first three years of life make it impossible to carry out a research study if some limitations are not placed on the objects which are to be included under the transitional heading. To this end, a series of criteria are proposed for defining the primary transitional object:

1. Attachment to the object must occur within or close to the first year
2. Attachment to the object should be of lasting duration--approximately one year or longer
3. Its presence must be soothing and bring about a decrease in anxiety
4. It does not meet an oral or libidinal need directly (as does the breast or bottle for example); yet "in the first year of life attachment to it is exceeded in intensity only by attachment to the primary human object" (p. 199)
5. It is not supplied by the parents (that is, given directly to the child for the sake of comforting him as, for example, the pacifier)
6. The object is not part of the child's body (e.g., the fist or thumb).

Of the 40 children studied, 27 showed primary transitional object usage.

There are several interesting observations which were noted by the authors as being particularly significant to an understanding of primary transitional object usage. The object is usually soft and malleable and has been associated with the child since birth. The object (before attachment) was used most frequently around activities connected with sleeping and feeding, and are thus most frequently blankets and diapers (these were often used around feeding activities). "The prototype, then, for the primary transitional object would be a blanket that has been in the child's crib since birth" (p. 200). Some children manifested an attachment to a series of objects rather than to just one. There seemed to be some distinguishing common feature in this series such as a textural similarity or a common trait (e.g., four blankets all different but all with a satin edge).

The preponderance of children in the study manifested their attachment at age six months. Usually, the child had already become strongly attached to the object before the mother became aware of its unusual significance to him. This usually happened when the familiar item was noted by the child as missing from his environment (by crying for example).

Most often the primary transitional object was used by the child in conjunction with some oral gratification such as pacifier, bottle or sucking the thumb while the object is being fondled or handled in some way. A small number of children did not suck on anything while using the object and some sucked on the object itself. Some directly stroked themselves with the object while others kept the object at a distance and handled it in some way. Rarely are these objects handled in an aggressive

way: "they are cuddled, held, and used in a manner noted above, but they are not abused or mishandled" (p. 204).

The times when the object is most significant to the child are marked by the child's failure to be comforted by anything but the object itself. Thus all children used the object at sleep time. All children also used it during periods of distress (when hurt, tired or upset). Many used the object also during periods of "inactivity" (e.g., watching T.V. or being read to). A significant number of children required the presence of the object when going away for extended periods. For a large number of children, the mother is not enough for soothing purposes when they are upset or going to sleep; they require the transitional object in order to be calmed.

A variety of reactions is reported in terms of the object's being lost or being washed. Only one child rejected the object after it had been washed but after a period of time reverted to using it in the same way as previously. The authors feel this is related to the change in textural qualities which follows washing. Whether a child objected to a washing of his object seemed related to the intensity of attachment which the child displayed towards the object; those with less attachment did not object to its temporary loss.

Differences in ease with which a transitional object is relinquished and the way a parent handles this are noted. Some children for example declare that they are too old for such things but then revert to using it for a period of time. Most mothers offer substitute objects when the original one is beyond repair or use. Variations in acceptance of the substitute are noted.

Interestingly, in this sample of children aged 2 to 5, only ten percent

had given up their primary transitional objects. Many parents considered this a problem but did not know what to do about it. (Some parents had, however, restricted usage to specific times or places and this usually occurred early in the history of object usage. In cases where no restrictions were imposed, the child seems to self-regulate usage by restricting himself to interaction with the object only at certain times and places).

Further consideration regarding parental attitudes towards the primary transitional object are elucidated in another study by Busch and McKnight (1973b). Using the same population as in the previous paper discussed, the focus of this study concerned the parents and how their interactions with the child and expectations with regard to the transitional object affected usage in the child. It is noted that a number of parents had no expectations about their child becoming attached to an object but such attachment did occur. Another group intentionally gave the child an object and hoped that he would become attached to it. This did occur. Still another group behaved in the same way and supplied an object but the child became attached to something else (or did not become attached to anything.)

The authors inferred unconscious factors operating in the parents towards the transitional object as well. Several mothers seemed to recognize the importance of the object on a preconscious level (i.e., they would bring the blanket along on an excursion but not know exactly why). Thus the parents may facilitate or hinder the development of an attachment in the child through their unconscious attitudes towards the idea of a child becoming attached to an inanimate object (an object which

the authors state has always been present in the child's environment since birth). The parents must thus at least allow the child the potential of having an object (p. 16).

One of the major points of this study is that the authors conclude that Winnicott's statement that the infant "creates" the transitional object is corroborated by their findings:

Conscious parental expectations do not seem to play a role in whether the infant develops an attachment to the primary transitional object. Parents do not give the child the primary transitional object. Rather, the infant discovers and creates the primary transitional object and uses it for himself. The major parental role in attachment seems to be at an unconscious level as a facilitator. (p. 18)

On the other hand, guilt over inadequate parenting or conflicts over gratification of dependency needs were the major factors leading to arousal of conflicted feelings in parental attitudes toward the transitional object and causing restrictions to be imposed on its usage.

The child's reaction to these restrictions depends upon the type of restriction and the developmental stage of the child. In the sample used, most restrictions occurred between the ages of two and three and the usual reaction of the child was that of rage. This reaction seemed to indicate that an important process had been interrupted in terms of the child's separation-individuation and narcissistic development.

Renata Gaddini undertook a study in 1970 which was designed to test the assumption of the universality of the transitional object in children. She assumed that all children in passing from the shared reality of being awake to the subjective reality of the sleeping state make use of some means of consolation which invokes reunion with the mother (i.e., a transitional object). If no transitional object or phenomena appear, it

is assumed that other means are used for obtaining this consolation. The other hypothesis she made was that different social groups would have different going to sleep patterns which would affect the child's autonomy and his capacity for creative processes.

By way of definition, the following characteristics are deemed essential to a transitional object: it must be external to the child's body; it must be invented or discovered by the child; it must be invented at an age when the child's capacity for imagination has begun to develop; it must have a unique and exclusive property of being able to console the child in times of distress. Also, Gaddini views the transitional object as having the psychic meaning of invoking a symbolic reunion with the mother after separation has taken place. She includes this as part of her definition and thus confounds observational and inferential parameters in her definition.

The research population was divided into three different social groups: children from families in a rural area close to Rome (682 children); children from families in Rome proper (502 children); children selected from the second group consisting of foreign children living in Rome (52 children). Interviews were conducted with mothers and the material focused on the early experiences of the child (e.g., breast feeding, age of weaning, pacifier usage, sleeping activities, etc.) and the mother's reaction to the appearance and usage by the child of the transitional object. The child was sometimes seen as well.

Gaddini also included what are referred to as "precursors" of transitional objects in her study. Winnicott had evidently been in communication with her and had suggested this term to refer to objects which

console the child but which are not discovered by the child but are either administered by the mother herself or are part of the child's or mother's body. These precursors include thumb and fingers of the child (hand into mouth play), pacifiers, bottle used as pacifier, parts of the child's body, parts of the mother's body, etc. (In his personal communication to her, Winnicott has specifically stated that the pacifier is not to be considered a transitional object because what is missing is the baby's "creative capacity.") Other areas of interest which Gaddini included in her interview are mother's rocking of the child, self-rocking by the child, patting and rubbing the baby and the time and place in which all of these activities occurred.

Gaddini found that differing patterns of sleeping arrangements had an important effect on transitional object usage. In the rural group the child usually slept in the same room as the mother (sometimes in the same bed) until late in childhood or sometimes even until adolescence. In the Rome group, children tended to have their own room sooner while the foreign children usually had their own room from birth. There was a negative correlation between sleeping in the same room as the mother and transitional object usage. Gaddini hypothesizes that the mother's actual physical presence impedes the separation-individuation process and that the symbiotic tie is maintained for a much longer time. Never losing the mother physically, the child has no need of recreating her symbolically and hence no transitional object is used.

Those children who had no transitional object usually found soothing via the mother's presence or in rocking by the mother. When these rhythms were stopped too soon the child engaged in a form of self-rocking. These behaviors were interpreted as conclusive proof that the child did not have

a "good enough" mother to symbolize and that "the child's possibility of employing its early libidinal energies outside itself had been impaired" (p. 362). On the other hand, if a child had become able to symbolize the mother it would be very unusual for the child to go back to the actual mother instead of utilizing the symbol.

In the International Congress of Pediatrics held in 1971, Gaddini expanded her study by enlarging the rural group to include siblings of the children studied and dividing it into three groups based on a "good-enough mothering" frustration continuum. (Frustration meant that some of the criteria of gratification were absent in the child's early environment. These criteria included: breast-feeding up to 5 months with a non-rigid schedule; mother at home with child; to be put to sleep in mother's arms with or without lullaby; to sleep in the parents' bed or room.) The optimal ratio occurred in the second group (some frustration defined as no more than two of the gratification criteria lacking) where transitional object usage is much greater than in the low frustration group (all criteria of gratification met) or in the high frustration group (more than two criteria of gratification lacking or severe early trauma). These data are used as evidence in support of Winnicott's statement that the good-enough mother is one who optimally gratifies but also minimally frustrates and thus aids the child to separate from the symbiotic matrix.

According to Gaddini's view, the transitional object represents the child's selection of 'some parts of the total mother's environment which he has experienced mediated through his own bodily sensations" (p. 204). Specifically, the infant's security blanket represents the actual blanket which the mother used to wrap around the child during feeding. The nylon

or linen which the infant manipulates recalls the mother's robe which might have been in contact with him while he was feeding. Thus, the finding that babies born in the Winter or Autumn months more often have woolen objects while those born in the Spring or Summer months usually use linen or nylon objects is explained.

Another study which underscored the differences in transitional object usage with socio-cultural variables as the main determining factor was undertaken by Hong and Townes (1976). A questionnaire was designed to elicit information regarding early child care, developmental milestones and transitional object usage. This was sent to wives of residents in the United States, wives of Korean born residents training in the United States and wives of Korean residents training in Korea. Significant findings included the fact that both the types of objects selected by the children and the age of reported attachment varied across the three groups. The United States group had the highest incidence of attachment to blankets and pacifiers followed by the Koreans in the United States group. Attachment to stuffed animals, in contrast, was highest in the Korean group. Reported age of attachment was between eight and nine months in the United States group while in the Korean group the age was between eight and ten months. A high proportion of children in the U.S. sucked their thumbs while utilizing the blanket (50.5%) while the incidence in the other two groups was much lower. The United States group tended to use their objects frequently at bedtime, at nap-time or when in a strange place such as on a long trip. The Korean children tended to use their objects more when they were alone or with a group of people.

The main difference between the cultural groups which is highlighted

in the paper has to do with amount of actual physical contact with the mother which the child experiences in his early development. Korean children are breast fed longer and weaned later than American children. In addition, the sleeping arrangements are such that by the end of six months most American children slept alone or with siblings whereas the Korean children sleep with the mother. The mothers are thus available all night. They also spend a great deal of time in physical contact with the child when he is put to sleep--she frequently lies down with the infant and rocks, pats, holds (and sometimes nurses) the infant until he falls asleep. The Korean mothers in the United States seem to adopt some of the child-rearing practices of American mothers. Thus, in this group there is a lower incidence of the child sleeping with the mother than in the Korean group but a higher incidence than in the American group. It is thus not surprising that the Korean mothers in the United States have children who occupy a middle position in attachment to blankets and pacifiers with respect to the other two groups.

The Korean mothers tended to work and thus be out of the house a good deal. The children, however, are generally cared for by a close relative (mother substitute). In the American sample, most children of working mothers were cared for by a baby sitter. Most of the relatives in the Korean group were grandmothers who usually live with the mothers and to whom the infant sometimes becomes more attached than to his own mother.

The pattern of caretaking is substantially different in the Korean versus the American group. Babies are usually carried on the back of the caretaker and are not left alone very much during their first year. The infant frequently naps on the caretaker's back and spends much time on the

lap and in play with the caretaker.

All of these observations are used by the authors to support their view which agrees with Gaddini's findings previously cited: the more physically available the mother is, the lower the incidence of transitional object usage. The authors do not draw theoretical implications from their findings nor do they attempt to explain the interesting finding that Korean infants become attached to stuffed animals more readily than they do to blankets.

In addition to environmental variables which affect transitional object usage, innate factors may be at play also. This is discussed in a study by H. R. Schaeffer and P. Emerson (1964). The authors point out that almost from birth infants show differing patterns with respect to the amount of physical handling they will tolerate and seek. A division into two groups was made: cuddlers versus non-cuddlers. Descriptions of behavioral patterns were obtained via questionnaires given to the mothers and several variables of behavior were compared.

The non-cuddlers were described as making social contact and seeking a soothing experience by means other than physical proximity or the use of soft, cuddly tactile sensations. They preferred other types of diversion (for example, wheeling in a carriage, being placed on the floor and diverted with a toy, being held up on their feet, etc.) They were easily identifiable from birth as infants who were "restless" and non-cuddling.

When the 9 cuddlers (18 months of age) were compared to the 19 cuddlers (also 18 months) in terms of the use of soft, cuddly objects, it was found that practically none of the non-cuddlers used soft objects (p. 1). In addition, the non-cuddlers showed much less autoerotic behavior

(defined as oral habits such as thumb sucking) than the cuddlers. The authors conclude that (at least sometimes) the cuddlers who receive more physical contact tend to show more sensual responses in general (including autoerotic behavior) than the non-cuddlers.

The authors consider in their discussion whether these differences in contact comfort can be attributed to some quality of mothering. They could not assess this adequately in their study but point out that the non-cuddlers show a wide range of motorically different behavior than the cuddlers (e.g., the non-cuddlers reach such milestones as being able to sit unsupported, to stand holding on, and to crawl sooner than the cuddlers) which lends support to the idea that the characterological difference is the crucial factor in the noted differences in behavior. The ultimate ability to form strong social attachments (to the mother firstly) seems not to be affected provided that the mother can accommodate to the child's different activity pattern and relate in other than the traditional ways to the child. (It should be noted that the non-cuddlers do not resist physical contact all the time. At feeding time for instance the two groups could not be differentiated. It is the general pattern of contact seeking that is the point in question.)

Most studies describing transitional objects concentrate on descriptions of interaction with concrete tangible objects. It is to be remembered, however, that Winnicott stipulated a wider area of possibility for transitional phenomena to appear including songs and word patterns used in a "transitional" way. While Gaddini talks about children being rocked while a lullaby is being sung to them, she views this as one reason why the children may not develop an attachment to a transitional object and does not mention whether

at least some children become able to sing to themselves or include some kind of self-regulated verbal ritual in their going to sleep patterns.

Marjorie McDonald (1970) was interested in a particular method of teaching very young children to play string instruments which was invented by Suzuki in Japan. In the course of investigating this, she became aware of how certain children responded to a specific tune and since in the Suzuki method the mother is an integral part of the learning experience of the child, she recognized that the differentiated response to a specific tune was, in the context of the shared experience between mother and child vis-a-vis the tune, a transitional phenomenon. As she states, "a transitional tune has to be a familiar tune, frequently filling the atmosphere between parent and child. It has to provide a shared and comforting experience ..." (p. 513). When the child becomes capable of reproducing the tune himself (either by playing it on a record or singing to himself), he gradually controls the production of the tune himself and it hence becomes his own creation. The specific tune is his own choice, just as the transitional object is "created" by the child out of the available material of his environment.

McDonald speculates that the melodic line of lullabies may be intended to convey to the infant a feeling of separation (and tension) and reunion (and resolution). The wide musical interval in some lullabies followed by the rhythmic rocking return to a lower pitch represents this. Also, many words of lullabies (which may be the transitional objects themselves) talk about the absence of important persons (e.g., a parent, or older sibling) and then offer reassurance of the eventual return of that person.

An experiment designed by Weisberg and Russell (1971) was designed to

test the hypothesis that the favorite blanket was indeed preferred to other available objects (even the mother's presence). Three toys and, depending on the session, either the subject's own blanket, an unfamiliar blanket with light yellow satin binding, a pink foam cushion, or a familiar article of clothing which when worn touched the child's skin were available. Both proximity to the object and length of time were measured systematically. The subjects overwhelmingly preferred their own blankets to each of the three other tactile objects. Also, if a subject was near his blanket he tended to interact with it.

The interaction with the blanket tended to decrease over five two-minute intervals but intrasessional interaction with the mother did not change systematically. (Mothers were instructed not to interact with the child unless the child persisted in his attempts to gain such attention.) The authors wonder if the blankets are thus used as substitutes when the primary social object is unavailable (this is Bowlby's view).

Some additional findings of interest included the following: Six of the 24 subjects never touched their blankets although they were told specifically that it was theirs; of the 18 subjects that interacted with the blanket, four thumb sucked and two used pacifiers while touching the blanket; amount of time spent in interaction with the blanket for the orally stimulated did not differ significantly from the other subjects.

Transitional Objects: Theoretical Considerations

Theoretical understanding of the transitional object touches on a difficulty which has already been noted in the literature thus far reviewed: the definitional confusion and complexity in trying to understand this phenomenon. Unfortunately, one cannot easily talk about transitional object

usage and its variations without first stating what the object under study is. Depending upon the definition, different objects are termed transitional which further confuses the matter. The way in which an author theoretically understands the significance and developmental meaning of the transitional object will determine the focus of study and research design which the author finally formulates. In this section, therefore, the major theoretical positions with regard to the developmental meaning of the transitional object will be reviewed.

Winnicott (1953) seems to have stressed the role of illusion in the use of a transitional object and that a major developmental step is taken by the child when he becomes able to "create" the object for himself and thus invest an externally real object with subjective (internal) meaning, thus beginning to coordinate what is outside with what is inside. This is a life-long process.

Even in his answer to Wulff's paper in which he stressed the normality and universality of transitional phenomena, Winnicott highlighted the fundamental importance of illusion in his concepts. In comparing transitional objects to childhood fetishes he stated,

I would prefer to retain the word fetish to describe the object that is employed on account of a delusion of a maternal phallus. I would then go further and say that we must keep a place for the illusion of a maternal phallus, that is to say, an idea that is universal and not pathological. If we shift the accent now from the object on to the word illusion, we get nearer to the infant's transitional object; the importance lies in the concept of illusion, a universal in the field of experience. (p. 96)

Likewise, Gaddini (1970) includes the imaginative (creative) component as one of her definitional criteria for her study on transitional object usage; the object cannot appear until the child has begun to develop

his capacity for imagination (p. 350).

For Gaddini the basis of all transitional object usage lies in its symbolic value--the object symbolizes union with the mother after sufficient separation has taken place. It tends to be used most when a stressful or anxiety laden situation occurs and Gaddini thinks of the way in which the object is used as part of a personal pattern by which the child deals with these stressful situations. The patterns may persist late into childhood or even adulthood. This pattern "can have value as an object intermediate between the self and the outside world" (p. 348).

This conception incorporates at least two other aspects from a developmental point of view. In order for the child to symbolize a reunion with the mother via an object, the mother must have been at least "good-enough," that is, have been a basically gratifying object to the child who would have minimized frustration and discomfort. (Thus, in her 1971 study, Gaddini looks for correlations between good-enough mothering and transitional object usage based on a gratification-frustration scale which is her way of experimentally defining the good-enough mother.) The second component assumes that the child is given sufficient autonomy at the appropriate phase of development to separate (psychically) from the mother. When the mother is continuously available to the child (via her presence in the child's room or bed during the night for example), the symbiotic tie between mother and child is maintained and he has no need to symbolize her. "This lack of stimulation may also give rise to a delay in symbol formation in general and in developing an imaginative life" (p. 360). It is thus the mother again who, by allowing the separation process to unfold by not being totally available to the child and by allowing

maturational processes in the child to indicate when it is appropriate to "let go" in small doses, facilitates the child's total development. (These two ideas are, of course, inherent in Winnicott's original statement as well.)

Busch (1974) has attempted to clarify some of the dimensions of transitional object usage by addressing himself to theoretical as well as definitional issues. He maintains a distinction between primary and secondary transitional objects according to the age at which attachment first appears (the primary object is used between the ages of six months and two years and the secondary object from age two years and up. Busch also substitutes the terms first and second transitional objects for primary and secondary objects since he feels that the words primary and secondary imply a developmental sequence which he did not intend). It is the first transitional object that he discusses extensively.

In the sample studied by Busch, the first transitional object was always an intimate part of the crib experience since birth. Two factors influence the child's selection of an object from the crib environment according to Busch. The first is the absence of the mother when the child goes to sleep (a cultural variation as we have seen); the second has to do with the stressful experience of going to sleep during which the child is expected to adapt to a regressive experience more or less on his own. It is assumed that the child will select something immediately at hand and familiar to aid in dealing with his distress at sleeptime and hence the tendency to use the blanket which the child has known since birth.

The softness of the object is a crucial factor in its importance to the child. Cloth, silk and terry cloth were the most common materials of the transitional objects noted by Busch. He views this as an equivalent

to what Harlow described in his monkeys who seemed to prefer soft textures and to derive more comfort from contact with them.

The first transitional object is used mainly in a tactile way. The infant relates to it "via contact perception" and thus will, when in distress, take the blanket and bury his face in it. (Contact is made primarily by use of the "oral cavity" at this stage; this is understood to mean the tongue, lips, cheeks, and nasopharynx as modes of reception) (p. 223). When the child sleeps he likewise pushes the blanket up to the face area. Both of these behaviors suggest the regressive nature of the child's experience as he attempts to merge himself with the blanket and thus in some way re-experience the soothing, and affective components of the symbiotic phase of relating to the mother. The fact that the child seeks a re-experience of what is passed suggests that a successful relationship between mother and child has existed and that, under the pressure of emerging new capabilities in the child and changes in the mother's way of relating to the child due to these increased capabilities and new expectations on the mother's part towards the child, the separation-individuation phase has begun and the mother is no longer totally available to the child. These views are similar to Gaddini's (at least in terms of what the transitional object represents. Gaddini has different ideas about the prototypical situation which elicit an object's use in the child and also about the distinction between first and second transitional objects).

Variations in intensity of usage of the object are hypothesized to be related to two factors: the degree of stress which the child is under at any particular moment and second, the amount of internalization of the

soothing properties of the object (this implies that when the child can soothe himself by a psychic process the need for his object diminishes and eventually disappears. This is a view held by Tolpin and will be further explained below.)

While the prototypical first transitional object and its origin are the focus of Busch's study, he also acknowledges the tremendous variation in usage (e.g., not all children make contact with the object via the oral modality) and the fact that, in addition to serving the primary functions of soothing and comforting, the object can also undergo variations depending on the psychosexual stage of the child thus taking on anal and phallic properties as well.

(Gaddini [1975] takes issue with some of the points in Busch's paper. She views the distinction between first and second transitional object based on age as untenable; the question is what makes the child create the transitional object, a creation which can spring from the same processes over a wide age interval. She also views the prototypical situation for the creation of the object as a "holding situation" rather than as the bedtime situation described by Busch. The object will invoke earlier holding situations through similarity of textural qualities to experiences and contacts made in the infant's first months. The feeding situation is more likely to be involved in these early contacts than is the sleep situation.)

Marion Tolpin has written an extensive account of the significance of the transitional object from the point of view of emerging new structures in the child's ego development (1971). Tolpin's paper seems to bridge a gap in the theoretical picture because she tries to understand

where the child is going (psychically) with the object and not just where it came from.

Tolpin speculates that the ~~fact~~ of the transitional object is to be converted into a psychic structure by which the child can soothe himself and assuage anxiety without need of an object. At that point, the object is relinquished. When this has occurred, a psychic leap has taken place in terms of the child's expanding mental apparatus. It also permits the child a greater degree of autonomy and independence from the mother.

The transitional object is not a substitute for the mother but rather embodies certain of the need-satisfactions which the mother herself administered at the beginning of the infant's life. By a process termed transmuting internalization these functions of the mother are eventually preserved as part of the child's own psychic structure (the process described and the term is taken from Kohut's work on the development of the narcissistic aspect of personality).

As in Gaddini and Busch, Tolpin feels that the transitional object serves to recreate the symbiotic state once it has begun to pass in the normal separation process. The object represents "idealized" aspects of the maternal imago and is thus cathected with narcissistic libido. (The pacifier is viewed as an earlier object belonging to the autoerotic stage which precedes the idealized parental imago phase of which the transitional object is an important part.)

At this stage, the object exemplifies the still blurry distinctions between "I-you" and "internal-external." The object is thus a "transitional form of mental structure" because it is not wholly internalized (as seen

for example in the child's "falling apart" if the object is not present when he needs it) nor wholly external (as when the infant calms himself with it). As the soothing functions are gradually internalized, the object is decathected little by little.

Differences in intensity of usage as the child develops are seen as representing degrees of internalization with the older child thus interacting less with the object.

The infant's ability to create the transitional object and thus soothe himself aids in the formation of a cohesive self. In contrast, when mothering is not good-enough, a structural deficit is left because the mother ~~imago~~ cannot be benignly internalized. This creates the persistent need for a "transitional self-object" so that narcissistic homeostasis is maintained (p. 333).

It will be recalled that in Wulff's paper he referred to all the attachment objects he discussed as forms of childhood fetish. A continuous argument and confusion has remained throughout the years about the differences between a transitional object and other types of objects to which children show strong attachments and as to whether a specific way of relating to an object can be called a fetish in the case of children. Opinions range widely in this area.

For instance, Melitta Sperling (1963) considers Winnicott's ideas to be "not only fallacious but dangerous because they lead to erroneous assessment of the meaning and function of fetishistic childhood phenomena and childhood fetishism" (p. 377). She views all intense childhood attachments as pathological and as representative of a serious disturbance in object relationships. An attachment before the age of two to an inanimate object is a sign that weaning has not been accepted by the child and that

he is attempting to replace the part-object (nipple or breast) with the fetish object. In this development the mother has a large part and her unresolved conflicts over the child's separation during the weaning stage are often involved in the ultimate use of such an item by the child.

The intense interaction with the object manifested in the child's carrying it about or crying intensely if not present when needed is seen to be a function not only of its need gratifying properties but also its role in the denial of loss of omnipotent control of the pre-oedipal mother. The fetish stands for the pre-oedipally gratifying mother and its use shows that a specific fixation has occurred in the child's object relations. In contrast to the child's panic reaction when he loses the fetish object, reaction to loss of a favorite toy is not as compulsive or full of panic.

Greenacre (1969) has tried to delineate the properties of the transitional object and how these differ from the childhood fetish based on a theoretical understanding of the origin of both types of objects. The transitional object, seen as an aid in the acceptance of the unfamiliar, helps in separation and individuation from the mother (p. 145). It is considered the first "not-me" possession but it is never totally not-me, consisting of odors which are derived from the mother and child. Tactile properties of the object also represent interminglings of the sensations derived from the mother-child interaction and the blurred boundaries (from the child's point of view) of this early stage. The object therefore is the "larval representation of the self, arising from already experienced needs of the infant which have been

satisfied by the mother" (p. 146). It is a bridge between body closeness and separation from the mother and is "selected" usually in the first year of life. Odor is important. (Busch [1974] disputed this importance.)

In contrast to the transitional object which is derived from the mother-me dyad and is focused on mouth-nose-breast modalities, the fetishist's "mother-me combination is distinctly concerned with the genitals" (p. 150). It is like the transitional object in that it is preferred and chosen by the user and has associations (sometimes) with the female body. But its symbolic value is rooted in its bisexual connotations and both "affirms and denies sexual differences" (p. 150). While both types of objects serve to bring anxiety under illusory control, the fetishist does not outgrow his need for the object.

The transitional object is a positive manifestation of the developing psyche of the infant and by its ability to represent tighter or looser relations to mother, it serves a homeostatic function as individuation progresses. The fetish, on the other hand, serves as a "patch for a flaw in the genital area of the body image" (p. 163).

Further clarification of the distinction between these two types of attachment objects is presented by Greenacre in her 1970 paper. In this study, Greenacre points out that the transitional object serves as an aid neutralizing aggression through its union of (non-hostile) aggression with tenderness. (Greenacre feels that the transitional object is rarely destroyed in violence [1969, p. 145]). Without the good-enough mother experience, aggression may remain less neutralized resulting in a body-bound discharge which may cause premature sado-masochistic erotization and/or precocious genitalization under strain (p. 447). If an object is used to

discharge the tension, it is more concretized in form and may become the infantile fetish. Thus, in its connections with the earliest symbiotic phase of development and the experience not good-enough- mothering, the fetish may be more closely linked with the earliest feeding experiences than even Wulff speculated (p. 448).

The transitional object, rooted in early familiar and gratifying experiences, aids the child in his exploration of the unfamiliar through its combination of familiarity and its illusionary plasticity. The use of the object thus promotes interest in a widening array of experiences for the infant and is not solely linked to a symbol of reunion with the mother (p. 451). (This is, of course, the opposite of Gaddini's view.) The fetish is more circumscribed in its significance, symbolizing a combination of breast and penis "in which the wish for the breast may predominate" (p. 451). By its durability and solidity in form it serves to consolidate the illusion of maternal supplementation to the child's own body image which has suffered in the early phases of consolidation because of the emotional unavailability of the mother. In the case of the fetishist, individuation is delayed and incompletely achieved although the child may appear to be precocious and independent. The actual use of the fetish may not appear until latency or even adolescence when experiences arousing severe castration anxiety may threaten the vulnerable narcissistic structure of this type of personality.

Roiphe and Galenson (1973) have pointed out inconsistencies in Greenacre's thinking with regard to the infantile fetish and have attempted to study fetishism in actual cases of children under their observation. Noting Wulff's use of the term fetish to refer to all objects strongly cathected by children, the authors underscore the need for clarification

of the childhood fetish from the useful concept of the transitional object. Roiphe has proposed a solution to the theoretical confusion of these two different kinds of objects and their respective usage and meaning in childhood.

Roiphe noted that a normal sexual arousal occurs in children between the ages of 16 and 24 months (as seen in increased masturbatory activity and curiosity in the genitals of other children and adults). This is not an early manifestation of Oedipally related difficulties but rather represents a stage of consolidation with respect to object representation and body-self schematization (p. 154).

In the case of the child fetishist a confluence of three factors was necessary:

1. indications that sexual arousal had appeared between the ages of 16 and 24 months
2. the child had an opportunity to observe the anatomical difference between the sexes
3. an instability of self and object representations seemed to be at play usually because of some earlier experience such as birth defects, severe illness, surgical intervention, loss of a parent, or not good-enough mothering (p. 155).

The expected castration fears of this early period (because of increased genital arousal) are thus compounded with defects in self and object representations thus leading to a fetishistic type of defense. Children who used a fetish were characterized as displaying a strong dependence on the mother and intense stranger anxiety, as showing intense hostile aggression and ambivalence and as manifesting a sadomasochistic erotization.

In addition, inhibition in sexual curiosity and deterioration in symbolization and play were also noted (p. 164).

In a pilot study conducted in preparation for further research in the area, Gay and Hyson (1977) have looked at children's patterns of interactions with their favorite objects in an effort to clarify the effects which this interaction has on the child. They have taken as a model a notion proposed by Luborsky which explains the emergence of symptoms within a psychotherapy session as a defense against unacceptable thoughts. The emergence of the symptom serves to both alleviate the anxiety which accompanies the thought and to replace it (p. 277). In order to study this, Luborsky has studied the verbalizations of patients right before the emergence of symptoms and compared these to what he terms "control" verbalizations or those which are removed from the time the symptom appears. He has noted both general trends supporting his hypothesis and individual differences and patterns as well.

In a somewhat analogous fashion the authors reason that the child's use of a blanket (they refer to all transitional type objects with this term) serves to alleviate anxiety and hence represents "defensive processes at work" (p. 274). The manner in which the object is used may vary, reflecting different kinds of defense mechanisms (for instance, covering one's head completely with the blanket might be thought of as a kind of denial of what is frightening in reality whereas stating that the blanket is afraid of robbers might represent projection). The variations in usage which transitional objects undergo as the child matures are thought of as reflecting changes in the child's ego and cognitive processes and as representing individual styles and characteristic defense hierarchies.

The authors conducted pre-observational interviews with mothers of children who were attached to a transitional objects. From these interviews, several scales were devised (19 in all) which attempted to tap the use of an object as a means for coping with stress and as a way of alleviating anxiety. These scales fell into three broad categories: individual scales (these rated the child on affect and behavior including such categories as anxiety, fearfulness, tiredness, physical and verbal passivity, etc.); interactional or environmental scales (these rated the child in terms of a situation such as separation from home, unfulfilled needs [if a request went unsatisfied], needs for closeness, etc.); a regression-progression dimension which contrasted use of higher developmental schemata with regression to earlier modalities and how and when this occurred. Four children were observed (two at 2-3 years and two at 4-5 years). The verbalizations and behavior for each of them was noted both immediately preceding the use of the blanket and in situations removed from such use (the "control" verbalizations noted in Luborsky's method). The transcripts were then divided into 100 word segments and rated on a three point scale in the various categories (a rating of 0 meant total absence of an affect or behavior; a 1 indicated some of that particular affect or behavior, while a 2 signified a large amount of it). The authors describe their results both in general terms and in a descriptive profile of each child.

Their findings indicate that, according to the scales used, children show a good deal of stress immediately before contact with the blanket. The blanket thus can be thought of as a means by which the child deals with his stress. During his contact with it, the authors found a substantial

decrease in stress with a concomitant increase in regressive type behavior: "The use of the blanket, then, is often accompanied by behavior typical of an earlier stage of development" (p. 307). Typically, this behavior has elements which are similar to how the child behaved when being fed or cuddled at an earlier stage by the mother.

After the child puts down the blanket, the authors noted a decrease in both stress and regressive responses and concluded that the blanket was a successful means for coping with stress.

In addition, different ways of dealing with stress are noted. For instance, sometimes the blanket is used regressively, accompanied by general passivity and other activities such as thumb-sucking or hair curling. At other times the child behaves as if the object has magical protective powers (he feels safe as long as the object is in contact with him). Still another use of the object indicates that it is being used as a vehicle through which questions or concerns appropriate to his stage of development are being progressively worked through. Thus, one child, after listening to a discussion about birth, played kangaroo with the toy bunny which was his transitional object serving as the baby.

Finally, R. Bak (1974) has tried to schematize the different types of objects which children cathect using theoretical variables as his way of understanding these distinctions. He maintains that a fetish is used primarily to defend against castration anxiety and to maintain the illusion of the female phallus (the classical Freudian position). The fetish may also fend against threatening losses (e.g., separation) before the phallic phase has fully developed (p. 194).

As for the transitional object, his view emphasizes the association

of the object with feeding experiences and the caressing and tactile associations that went along with feeding. The transitional object satisfies the need for clinging and invokes not so much the mother but the total ambience of the mother. The object may be used along with the night bottle and may be the night bottle itself (this view based on a discussion held with Margaret Mahler) (p. 194). The object receives both care and hostility.

Bak points out that the transitional object may undergo "maturational stages" by which it takes on anal and phallic significance. But its primary function is to attenuate the trauma of weaning-separation (p. 196).

Three further types of attachment objects are delineated:

1. Comforters which defend against depressive anxieties and reflect a need for the total mother (mother fixation). Tactile needs may be the primary determinant in the choice of the object.
2. Intermediary objects which are given by the mother with an unspoken understanding that it substitutes for the mother in toto.
3. Prosthetic objects which are not involved so much in the separation process but are used for a narcissistic maintenance of body integrity and "the reinforcement of phallic or clitoral representations" (p. 198).

Transitional Phenomena: Clinical Manifestations

The last major area of consideration in Winnicott's original paper dealt with manifestations of transitional phenomena in children of more advanced age than the one year old infant and in adolescents and adults. Winnicott indicated that these manifestations might be either of a regressive nature, as when previously used (and abandoned) transitional modalities reappear under the pressure of current anxiety in the person's

life, or they may represent continuing (and pathogenic) means of dealing with prolonged separation fears and primitive defenses against an unbearable external reality which is too difficult to face. Several theoreticians and therapists have noted instances of this in therapy and have reported on these cases. In addition, the transitional phenomena which are represented by commonly shared cultural-religious values are understood by these authors as offering a healthy field which when fully used may lead to a mature coordination of inner needs to external reality and, by the commonality of the shared experience, to freer and more meaningful ways of relating with others.

In 1954 Greenson reported on the use of the sound "mm" in one of his analysands. This patient vacillated between extreme mood swings of depression and euphoria and during the euphoric mood he reported that he felt a pleasant humming sensation on his lips (the sound "Mm"). The analysis revealed associations of feeling that he was his mother's favorite and that she really loved only him. He recalled via a dream fragment that his mother had used a velvet cloth when feeding him which led to further associations about "especially 'delicious' and rich tactile temperature and taste sensations localized predominantly in the hand and mouth" (p. 234). He remembered being told by his mother that he liked to fondle a soft woolen blanket or some other soft object when sucking at the breast or bottle. Later, he used a special blanket to sleep with (he could not sleep without it) and, as an adult, he could not sleep unless he embraced his wife or the pillow in a special way. (The patient had severe sleep disturbances as part of his symptom picture.)

The "Mm" experience was very pleasurable and erotic for this man;

all of his associations to it led to the conclusion that it was derived from the memory (or fantasy) of nursing at the mother's breast. The sound indicated "a sense of contentment and satisfaction rather than a more high-pitched joyous emotion" (p. 236).

Merton J. Kahne (1967) has also reported on several of his therapy patients whose continued use of transitional patterns of behavior indicated ego deficits which required special parameters in the therapeutic intervention for successful resolution. One woman, aged 24, reported in her third year of analysis that she placed the edge of a bedsheet in her mouth in order to go to sleep. In the analysis itself, whenever a threatened breakdown of even her most minor defenses occurred, she would be silent and then sing softly to herself or hum or place beads in her mouth. She wished total privacy at these moments; she would not allow her analyst to interpret what was happening nor would she share her inner life with him. This patient rarely reported dreams and this inability plus her difficulty in free associating led Kahne to view these behaviors not as resistance but as real ego deficits.

A 23 year old schizophrenic woman kept some particular special thing with her at all times. When she moved out of her home, she considered an unworn new pair of shoes as special and kept them at her bedside all the time. She herself saw this behavior as being similar to the way she felt about her childhood doll.

A 28 year old clinical psychologist reported that he had twisted a sheet and sucked his thumb in the second or third grade. When dealing with the impending vacation of the analyst, he began twisting his neck while lying on the couch.

All three cases displayed severe pathological orality and made frequent references to food, being hungry, being eaten, etc., as therapy progressed. In the case of the schizophrenic, she had auditory hallucinations in which the voice of the analyst was experienced as a benign force bringing calm and comfort to her when she was in distress.

Kahne goes on to state that all three patients had a need to see the analyst as "omnipotent, omniscient, and infallible" and dreaded any discovery of imperfection or incompetence. Two of the patients continually attempted to impose their own wishes on the analyst and behaved as if this were a sine qua non for relatedness.

Theoretically, the intense disturbance in object relatedness and the primitive methods in which they dealt with the disturbance points to difficulties in the earliest (oral) stage of development and lends support to Winnicott's assumptions that transitional phenomena are related to conflicts experienced very early in the symbiotic and separation phase.

A somewhat different direction is taken by Coppolillo (1967) in his description and theoretical consideration of his analysands who showed an incapacity to utilize any transitional phenomena at all and hence suffered from depression and inadequate relationships. This patient had a relatively normal childhood until age 5 but at that point, when immersion in cultural transitional phenomena such as movies, cartoons, fairy stories, etc., reaches a peak, his mother, who was severely depressed, intruded and offered herself as the "continuing primary object." This prevented an adequate way of modulating and neutralizing id impulses and left him extremely vulnerable to his needs and always in a state of chronic need tension.

Coppolillo sees the function of the transitional phenomena as providing

a way in which optimal distance between the ego and the id is maintained and, because of this, adequate reality testing is assured. The transitional object can alternately be invested with instinctual drives or recognized as part of external reality. Thus impulses emerge "only to the degree that they will participate in structuralization and serve adaptation" (p. 243).

The patient described thus had an intense need for direct physical signs of love from the analyst. When these were not forthcoming, he experienced them in the sound of the analyst's voice and the warmth of the room and the couch. He had the fantasy that the analyst had chosen him above all others and that if he were successfully analyzed, the reputation of the analyst would be made. (It is noteworthy that both in this case and in those described by Kahne the link between transitional relating and grandiose parental-self fantasies emerged in the analysis. This lends support to Tolpin's view concerning narcissistic cathexis of the transitional object.) As analysis progressed, the patient learned to better master his impulses and began to explore transitional modalities outside the analysis through literature and art. Eventually, his relationships improved and were less narcissistically determined as his perception of reality became less colored by his own needs and perceptions. Transitional phenomena are thus seen as necessary elements in aiding neutralization of the drives and compromise formations which lead to more mature forms of object relatedness.

Marion Milner (1952) has also underlined the importance of transitional space although she does not use this terminology since her report antedates Winnicott's paper. She describes treatment of an 11 year old

boy who always stopped using a hectoring, bullying tone when he began imaginative play. He could do what he liked with his toys yet they were always part of external reality and outside of himself. This boy had lost a favorite wooly rabbit at the start of the war. At the same time, his father left for service and his baby brother was born. In the transference, the analyst became the lost rabbit; the child treated her as totally his own to do what he liked with. In Milner's opinion, the child needed the illusion that she was part of him in order for progress to take place.

Milner views the process of recognizing an external reality as dependent in part on a "capacity in the environment" by which reality provides a way of partially returning to the feeling of being one with it. The environment does this by providing a framed space and time (a "pliable medium") which makes possible the maintenance of a necessary illusion (at times) of oneness. This is the transitional space which Winnicott described. (In fact, Winnicott wrote a footnote to this paper in which he states that when illusion is interfered with, a pathological precocious ego development occurs.) (p. 188).

A similar and expanded view is offered by Susan Fisher in her description of the developing capacity to use a transitional object in an autistic child (1975). She emphasizes the necessity for the tolerance of paradoxes (internal and external, within and without) which must be part of the early parental atmosphere in which the child grows. The beginning interactions with "out-there" are essential to the establishment of adequate personal reality. The transitional stage in development marks a point in which the child has already experienced some meaningful interaction with external reality. Use of the transitional object

represents "the child's individual attempt to integrate and tolerate the separate existence of others with different personal realities" (p. 115).

She emphasizes that use of a transitional object, while related to dimensions of the "I-you" dyad, signifies, in addition something that is "neither of us" and enables the child to begin to grapple with what "neither of us" means. As the child she treated developed a true transitional object (a coke machine), his capacity for humor and playfulness greatly increased. This occurrence is considered to be part of the increasing development of a boundary between the child and the external world of others. Thus, the child began to "integrate the most profound paradox--that his own reality was different from those with whom he had once been fused, yet could be contained within a larger community" (p. 123).

There is a growing body of theoretical statements concerning the way borderlines use the transitional object and extend its usage into relationships with others such that "transitional relating" is becoming one diagnostic sign by which the borderline may be recognized.

Fintzy (1971) describes a five and one half year old borderline child who had a long history of attachment to inanimate objects (a bottle until age three, followed by a blanket until age five). This patient could not tolerate any interpretations about his inner life; when an interpretation was offered, his fantasy life ran rampant. His pattern in therapy consisted of bringing in various objects from home which he would then set aside for the rest of the session. Feared loss of the object produced panic. Fintzy understands this behavior in terms of transitional phenomena: the objects he brought aided him in overcoming his anxiety of separating from his mother by magically undoing the separation through endowment of

the object with omnipotent properties. In Fintzy's view, the borderline maintains a facade of normality by the covert use of an array of transitional type objects which are not always obviously important to an outsider.

The borderline patient displays "narcissistic entitlement" as he demands that the omnipotent control he maintains over the transitional object now be forthcoming from the outside environment as well.

Modell (1968) also used the concept of the transitional object to characterize the love relationships of borderlines and psychotics as being more primitive than those of the neurotic and as constituting a class of object relations which he labels transitional (p. 33). (Modell is quick to point out, however, that every relationship has "transitional" aspects to it; it is a matter of degree which delineates the quality of the relationship.)

The transitional human object (like the inanimate object) exists in reality but is imbued with properties which emanate from the inner life of the subject. The object is thus "created" in the sense that its main importance lies in the life that the subject gives it (with a concomitant minimization of the real, objective qualities of the object). The transference of borderlines and schizophrenics thus very often displays transitional qualities: "The image of the analyst is created in accordance with need. He exists for them alone. Such a relationship is dyadic, exclusive; this couplet encompasses the entire environment" (p. 35). The relationship is necessarily exploitative since the analyst as a real, separate person is denied. The patient creates the illusion of an omnipotent, protecting object in the person of the analyst and as long as that relationship can be maintained, no harm can befall him. The extremity of this denial

of reality is reflected in a patient of Modell's who tried suicide firm in the belief that death was not a real possibility for him because the analyst had magical qualities which could protect him, even from death.

In accordance with the primitive stage which the transitional object relation represents, it is characterized by ambivalence. The all protecting figure can become an all malevolent sorcerer as the intense rage over desires which can never be satisfied is projected onto the outside person. The maintenance of the illusion of protection from an all powerful object which also embued with malevolence is accomplished through the mental mechanism of splitting such that the object is all good and all bad (but is not recognized as both by the patient).

The minimization of the difference between self and object may lead to feelings of fusion with the object (the affective component of this may be a religious like mysticism, or a sexualized ecstatic feeling) or, when the "bad" object predominates, to fears of loss of identity or to dread of complete annihilation. The mode of behavior in these patients indicates that a proper internalization of the "good" qualities of the actual mothering functions has not taken place and that their reliance on external objects to provide certain functions represents an ego deficit (e.g., the need to be admired by everyone). The capacity to internalize the qualities of the good mother leads to a sense of a "beloved self" which in turn aids in the establishment of one's discrete identity and to a tolerance for the separateness of other objects from the self (and the fact that these objects may be lost or destroyed). Mature love implies acceptance of separateness and the ability to maintain a relationship in the face of privation and ambivalence (p. 60). (This

is not, however, to deny the wish to merge with the beloved or the "created" aspects of relating which exist even in the most mature love relationships.)

Volkan (1976) has written of patients who have used what he terms "reactivated transitional objects" in their analysis as part of working through primitive merger fantasies with the analyst-mother. He emphasizes the need of these patients to maintain absolute control over these objects which reassures the patient of his absolute control over external objects as well. Through the use of the transitional object the patient maintains illusory control over distancing himself from external objects (the intensity of usage varies according to the extent of anxiety provoked by the stage of relationship with the external object) but also sustains a link with the object. Thus, sometimes the use of a transitional object in therapy may aid in the establishment of less anxiety laden dealings with a real object (as Fintzy noted in his treatment of the five and a half year old boy).

Volkan speaks of several cases in which cats served as transitional objects, changing in significance as analysis progressed. In these cases transitional properties of the object mingled with fetishistic qualities as well and the various and complex meaning of the patient's use of the object had to be slowly unraveled. In addition, patients may use specific fantasies which are repeated over and over without variation as their transitional "objects." The patient is "addicted" to the fantasy much as the child is "addicted" to his transitional object (p. 235). In any case, however, the transitional fantasy serves a similar purpose to the use of a concrete "reactivated" transitional object: it both buffers the

patient and yet links the patient to the external world and creates the illusion of total control over reality. Control of the transitional fantasy protects the individual from "being disillusioned by the cost of relating to real objects in the real world--frustration and separation--since control over the fantasy gives him the illusion of being able to control what is external to him also" (p. 236).

In the 1976 edition of the International Journal of Psychoanalytic Psychotherapy two articles appeared which incorporated the idea of the meaning of transitional objects into a clinical framework. In the first, Joseph Natterson reported on three cases of males in psychoanalysis with him who had severe narcissistic problems and homosexual conflicts. The thesis of the paper is that in all of these cases the men experienced themselves as transitional objects and, more specifically, thought of themselves (in part) as dolls. In one case of a thirty year old male, the interpretation is made that in the face of any severe stress or threat the patient withdrew into himself and became in fantasy a little child who cared for himself by being swathed in warm fabric and fed with good warm food. Thus, he became his own transitional object and always relied on self-love or self-dependency with consequent emotional isolation. The patient's inability to feel fulfillment in either love or work and his constant feeling of being unable to become engaged or committed to anything is viewed as another manifestation of the use of the self as a transitional object: a part of himself was always elsewhere and this was his transitional object self which was his companion and "comforter" with whom he spent long and lonely (but also cozy) nights sitting in front of a fire (p. 134).

In another case of a thirty-five year old male, the fantasy of being a doll was specifically verbalized by the patient after the analyst made an interpretation about the patient's using interpretations as a young child uses toys. While the doll fantasy was discomforting to the patient because it meant that he was at the mercy of others, he also derived pleasure and comfort from it. Here again, the view is held that the fantasy is used for defensive purposes in that it serves to deny intense dependency needs towards the analyst and preserves the fantasy that soothing and gratification of needs can be controlled by the patient alone.

Searles has written a long paper in which he uses many different examples to illustrate transitional phenomena in the analysis of patients of all kinds of different diagnostic groups. The general gist of the paper is that in the course of an analysis the patient's symptoms become transitional objects for patient and analyst and thus provide a sense of security, thus staving off the inevitable separation between patient and analyst which occasions both joy and sadness for both. (The same feelings occur between mother and child in the normal separation process.) This process of experiencing symptoms as transitional objects involves the analyst's being acutely aware of the countertransference feelings in himself (real feelings) which can then be used for the understanding of what the patient experiences, what the projections onto the analyst mean and represent in terms of past object relations, and how these feelings can eventually be better integrated into the patient's personality. Relevant to this idea, Searles states:

What I am trying to describe is an aspect of one's work... whereby both the patient and to a significant degree the analyst also are involved in a struggle as to whose will be the psychopathology in question. (p. 164)

It is necessary for both participants in the analysis to experience the symptoms of the patient as transitional objects (i.e., a shared experience with real affect) so that the analyst may ultimately feel predominantly neutral with respect to the patient and the symptoms and as a step to the establishment of therapeutic symbiosis in the transference. The feelings of the analyst are not solely reactions to the patient's projections but represent aspects of his own psychopathology as well which become activated in the interaction with the patient. Symptoms which are resistant to resolution are seen as having developed a transitional object quality for both patient and analyst which serves to defend against a "more free, constructively therapeutic symbiosis" (p. 174).

Props in the office can be transitional objects as well. The couch is a good example which for Searles very often takes on properties of the interaction with the particular patient who just used it (i.e., rage, contempt, tenderness, etc.). And, significantly, one woman spoke of the couch in terms that are truly transitional. Responding to an impending separation with her analyst, she said:

This couch has more-something-more substance. It's more real to me than you are; it really is...The couch is even more than you--it has something more--it's because I lie on it and touch it and I do things to it, and I can't touch you, I can't do things to you--This couch stays here and it's nice and certain...It's no wonder people get attached to their furniture, their belongings--That's why the couch is more important than you are. (p. 187)

Finally, in a recently published paper (1977), Fox has called

attention to the inherent usefulness of retaining Winnicott's emphasis on transitional space and the relating of inner and outer reality via the transitional object in understanding complex clinical and psychotherapeutic manifestations. He contrasts this with the increasing tendency in the literature to view the transitional object solely from the point of view of a soothing, comforting or defensive device which ultimately replaces the mother's original ministrations (e.g., Tolpin, 1971; Gay and Hyson, 1976).

He reports on his treatment of a twenty year old girl who was hospitalized with severe paranoid and psychotically regressive symptoms. There was much conflict in the area of separation-individuation from the mother and it seemed that up to a certain point certain artistic pursuits (dancing, writing poetry, etc.) had served as tension regulators in a transitional sense; that is, she was able to take segments of reality, invest them with personal, symbolic meaning, and yet maintain a contact with the socially recognized, shared experiences which these activities represented. Fox feels that when these areas lost for her the realistic components which were not specifically personal to her, the overt psychosis began. In other words, when she lost what the author calls her transitional capability, the activities became totally symbolic for her and hence no longer served as regulators between her inner world and her participation in reality. This was dramatically portrayed at the beginning of her illness; she "got stuck" in the middle of a dance improvisation in her class one day when the dance became invested with personal symbolic meaning and it no longer served as an effective illusory expression of her internal world (not the

internal world itself but a form of expression which stood for it).

The therapeutic descriptions offered by Fox highlight the gradual reinstatement of a transitional capability and her eventual sharing with the therapist of her feelings by means of transitional areas which they both recognized as meaningful: music, writing, dreams. The ability of the therapist and the patient to "play" in the sense of sharing the meaningful but illusory transitional communications of the patient is seen as an essential in effective therapeutic treatment. (In an analogous way, the mother shares the illusion of importance with which the child invests his transitional object and hence affirms and fosters the child's beginning development in the area of play and creativity.) There is a progression (both in the normal development of the child and in this particular case) from playing with an object (in the case of this girl, a rubber band) to playing in a shared space (the treatment setting) to shared playing with the psychotherapist in the investigation and communication of meaningful and affectively laden inner states in a form which is comprehensible to both participants in the therapeutic structure.

Summary

The various theoretical and clinical positions which have been presented may cause considerable confusion since many different aspects of transitional phenomena are emphasized in the presentation of the individual author. The following is an attempt to clarify some of this confusion by providing a brief comparative description of the different areas underscored by the major theorists in the field.

Winnicott emphasized the creative aspect of the transitional phenomenon and considered it a progressive step in the child's capacity for imagination,

differentiation between self and object and integration of inner need stages with external reality via a meaningful third area (transitional), unique for each individual. He noted the crucial role of the mother in this process but did not view the transitional object as solely an attempt to recreate a lost state of symbiotic bliss and security with the mother.

Greenacre has also pointed to the creative aspects of transitional object usage as one of its major characteristics and feels that its origins in early and gratifying experiences makes it particularly useful in the exploration and acceptance of the unfamiliar. It aids in separation from the maternal dyad, is the first "not-me" possession and also aids in neutralizing aggressive impulses. It may thus be considered a progressive phenomenon and an important step in psychological development.

The transitional object is distinguished from a childhood fetish by both Greenacre and Roiphe and Galenson. Greenacre emphasizes the use of the fetish to repair a flaw in body image representation, especially in the genital area of the body image. Roiphe and Galenson point to a combination of factors which may result in attachment to a fetish and emphasize an instability of self and object representations as the underlying pathology which combines with a phase appropriate genital arousal at age two to produce increased castration anxiety and intense hostile aggression.

Melitta Sperling considers all intense attachments to inanimate objects as pathological and fetishistic in nature and representative of lack of acceptance of the weaning experience. She feels Winnicott's ideas are both fallacious and dangerous.

Renata Gaddini has highlighted the regressive aspects of the transitional phenomenon by theorizing that the object represents a symbolic

union with the mother after separation has taken place. The object, however, also represents an important step in the imaginative life of the child and aids in the development of the symbolic capacity. It is used to cope with stress and anxiety.

Busch agrees with the notion that the object is utilized when the child is stressed. He views the prototype of this stress as the sleep situation in which the child must give up the mother and adapt to a regressive experience. He feels the transitional object is therefore usually selected from the environment of the child's crib. Gaddini disagrees and points to the maternal "holding" function as the crucial area out of which the object is created. Tolpin has elaborated this position (although she makes no references to Gaddini) and elaborates on the building up, in gradual steps, of psychic structure which ultimately permits the child to soothe himself, much as the mother and the transitional object once did. The concept of "transmuting internalization" is explained and, in contrast to Winnicott, she feels the object does not fade into culturally acceptable modalities but that it goes "inside" via the attainment of crucial psychic structures which permit greater independence for the child and an inner source of narcissistic comforting.

The narcissistic aspects of the phenomenon are stressed by many of the clinicians who try to understand certain stages of psychoanalytic treatment with certain patients by invoking the transitional object concept. Many (Kahne, Modell, for example) stress the need in some patients for an omnipotent control over the analyst as a way of denying his separateness and their vulnerability. These authors make an analogy between this aspect of therapy and the child's use of the transitional object by which he

denies his total lack of control over the mother. In other cases (Greenson) the concept is used as an example of a useful way in which a patient can cope with regressive feeling states both in and out of treatment. (There is a difference of course between utilizing a preferred transitional object when under stress and creating a transitional transference which characterizes the types of patients Kohut describes as narcissistic disorders [1977]). The capacity to invest an aspect of reality with particular emotional significance is sometimes seen as a favorable prognosis in the course of an analytic treatment (Kohut, 1977, p. 14).

Finally, Busch maintains a distinction between primary and secondary transitional objects (later he calls them first and second) based on age: the first object is used between six months and two years and the second from two years and up. He acknowledges the symbolic aspect of the first transitional object and its representation of the gratifying symbiotic mother but also feels that it and the second object may evolve into representations of other psychosexual stages of development. Gadini discards the distinction between first and second transitional objects, maintaining that the psychic state which induces the creation of the object can occur over a wide range interval.

CHAPTER II

HYPOTHESES AND METHOD

A review of the literature on transitional object usage will reveal that crucial issues related to the ways in which the object is defined and the factors that influence differential usage and strength of intensity of attachment to the object have not yet been clearly delineated. Problems concerning the definition of the transitional object relate to the fact that children become attached to a large number of different items during the course of development and that these may range from parts of the child's body (e.g., the thumb) to a pacifier supplied by the mother, to articles of clothing worn by the mother, to soft pieces of fabrics to toys of all kinds. Certain authors (e.g., Fink, 1962) have considered such things as pacifiers to be one form of transitional object while others (Busch, 1974) have presented reasons why pacifiers and parts of the body should be thought of as separate from what the original concept of transitional object was meant to include. The definitional problem therefore depends on the point of view of the author for its resolution.

In terms of the factors which may relate to differential usage of a transitional object and the degree of intensity of attachment to it, such variables as different activity patterns in infants (passivity versus activity), sex differences, sibling order variation, and preferences in soothing modalities (those infants which respond to cuddling versus those who are soothed by other means) seem crucial as do different qualities

in the mothering environment. Winnicott (1953) described the transitional object as a phenomenon intrinsically connected with the maternal ambience (the "good-enough-mother") but the concept of good-enough-mothering is difficult to define or measure empirically.

At least three studies have strongly underscored maternal availability as being a crucial factor in whether the child uses a transitional object at all and, if he does, in the age at which usage first appears (Gaddini, 1970, 1971; Hong and Townes, 1976). These studies stressed the notion (supported by empirical data) that if the mother was more physically available to the child the need for a transitional object was obviated since the separation process from the mother was delayed and the need to recreate the earlier maternal symbiotic environment was forestalled. The physical availability of the mother was assessed by noting whether the child was breast fed or not, age of weaning, and physical proximity to the child at night by sleeping either in the same room with the child or even in the same bed. There was no attempt to consider the empathic qualities of the mothers in these cases to determine whether those mothers who were more responsive to developmental changes in the child (i.e., could attune their responses to the child's needs) had children who were more prone to use transitional objects. As noted above, Winnicott considered the empathic response of mother to child (including being able to "let go" of her near perfect adaptation to the child's needs when it was developmentally indicated) as the crucial factor in facilitation of transitional object usage and Busch (1973b) concluded that parental attitudes could foster or hinder the child's "creation" of an object depending on whether the mother could tolerate the beginning separation from her

which use of the transitional object seems (at least in part) to represent.

The following research is an attempt to explore more thoroughly the variables of maternal availability and maternal empathy and how these relate to both use of a transitional object and intensity of attachment to it. A further point of consideration was to test Winnicott's view that no significant differences in object usage occur because of sex differences (Winnicott, 1971, p. 4).

The criteria set forth by Busch (1973a) were used for purposes of defining the transitional object under investigation. To reiterate, these consisted of the following dimensions:

1. Attachment to the object must occur within or close to the first year
2. Attachment to the object should be of lasting duration--approximately one year or longer
3. Its presence must be soothing and bring about a decrease in anxiety
4. It does not meet an oral or libidinal need directly (as does the breast or bottle, for example); yet intensity of attachment to it is strong, exceeded only by attachment to the primary human object
5. It is not supplied by the parents (that is, given directly to the child for the sake of comforting him as, for example, the pacifier)
6. The object is not part of the child's body (e.g., the thumb, fist, etc.)

Pacifiers, bottles, and parts of the child's or mother's body will therefore not be considered examples of transitional objects in this study.

Since only one investigator was available for the study, the method of an extended interview with the mother was employed, structured by a questionnaire prepared in advance of the interview. In the course of the interview, all items on the questionnaire were covered for each mother as well as allowing for individual variations and elaborations which the items might elicit. The interviews were taped and the relevant data transcribed thereafter.

An attempt was made to interview mothers of middle socio-economic status who have obtained a college degree. The children ranged in age from 24 to 54 months. Within this age range some attachment to an object should have appeared and enough time will have elapsed to allow an assessment of whether the attachment to a particular object is of lasting duration (as indicated in criterion 2 above). Mothers were selected who have children within the specified age range in order to avoid to as great an extent as possible the necessity of reconstructing experiences from the child's past.

The first independent variable under consideration is maternal availability--viz., what percentage of the mother's day is spent in interaction with the child (both at present and in the child's first year). Through the questionnaire, information was obtained on the following items: mother's estimate of how much of her day is involved in caring for the child; which activities require the greatest amount of time (feeding, changing the child, playing, bed-time activities, etc.) and how these are handled. How does the mother respond to the child's crying if she is not within his immediate presence? What are the sleeping arrangements in the family? Are there other significant caretakers who

take over for the mother at times and are they close relatives or outsiders? There are of course some mothers who work and it is important to find out what arrangements are made for the child in these circumstances.

From this information, the approximate number of hours which the mother spends with the child per day was obtained. If the mother works, the number of hours worked per week was considered as a separate scale and as a different measure of availability (the same is true of number of hours spent by a caretaker with the child per day).

The second independent variable relates to the mother's empathy or her responsiveness to the child's needs and variations as development proceeds. For this variable the Psychological Mindedness Scale devised by Engel (1969) will be employed. This consists of administration of 10 items involving a situation describing typical occurrences in which a mother finds herself when raising a two year old. The responses of the mother are rated on a scale from 1 to 7 on three different aspects of maternal psychological mindedness: the affective responsiveness scale (the extent to which the mother can recognize and deal with emotional aspects of the baby's behavior); the scale of developmental change (the extent to which the mother ~~views~~ views the child in the context of growing, changing and maturing with time); and the scale of behavior shaping (the extent to which the mother has a rationale for the interventions she makes with her baby and what effect she expects to have on the child's behavior). The seven points for each variable are defined and the ratings are done by independent researchers (a reliability coefficient should be obtained for the independent ratings). The overall Psychological Mindedness (PM) score for each mother is the "mean of scores of each of ten responses on

each of three seven point scales" (Engel, Nechin, and Arkin, 1975, p. 45). Thus each mother will have one rating ranging from 1 (low) to 7 (high).

The dependent variable consists of whether the child has a transitional object or not and, if he does, the intensity of attachment to it. Three different measures of intensity of attachment were employed. The first assigned a number based on the total number of different situations in which the object is employed. From the literature, the following typical situations were found:

1. at bedtime
2. at feeding time
3. while napping during the day
4. during passive activity (e.g., watching T.V.)
5. while actively playing with the object
6. during activities outside the house (trips)
7. during times of unusual stress.

Further, we have seen that differences exist in ease of relinquishing the object (Busch, 1974). Some children cling to the object and howl, some accept a substitute with ease and others do not need any substitute at all to relinquish it. Thus three groups may be identified: those who relinquish the object easily, those who need substitutes, those who will not accept anything but the original object. This information may be thought of another dimension in the intensity of attachment variable.

It is also to be expected that children will spend different amounts of time in interaction with the object. For instance, a child may be involved with the object in only one or two of the seven situation listed above but may spend a large amount of time with the object in that

situation. These variations in time spent in interaction with the object and the settings in which they occur were elicited in the interview and the information used as another measure of intensity of attachment.

A multiple regression technique was used to analyze the data. Since several ways of measuring the variables relating to maternal availability and intensity of attachment were employed, more than one correlation coefficient was obtained for a particular combination. For instance, maternal availability as measured by number of hours mother spends with her child may correlate significantly with intensity as measured by number of occasions in which the child uses the object but not with ease of relinquishment. These various combinations reflected in the correlation coefficients will be tested for significance.

The following hypotheses are the main considerations under study:

1. The greater the physical availability of the mother, the less need for the transitional object (either none is used or intensity of attachment is less than in subjects with less available mothers).
2. The psychological mindedness of the mothers (empathy) has a differential effect on transitional object usage. The more psychologically minded mothers should have children who more frequently use transitional objects with greater degrees of intensity than the less psychologically minded mothers. (The basis of this hypothesis rests on Winnicott's notion of the "good-enough-mother" as explained in detail in the literature review. The child's use of the transitional object depends on the mother's almost near perfect empathic response to his needs in the beginning months and then on the gradual process of disillusionment by which the child experiences his primary (illusory) omnipotent control of the mother as having changed. This

change is occasioned by the mother's awareness of the increased ego capacities of the child as development proceeds and thus is also a reflection of an empathic understanding on the part of the mother in terms of her changing interaction with the child. The Psychological Mindedness Scale devised by Engel et al. is specifically concerned with measures of the mother's awareness of how the child changes developmentally and what her response to these changes is and therefore seems appropriate as a way to measure Winnicott's notion of the "good-enough-mother" as explained above. The less empathic mothers (less psychologically minded) should be less aware of the child's rapidly changing needs and hence of a need to alter their own behavior with respect to the child. This, according to Winnicott, should hinder optimal transitional object usage in the child.)

3. The sex of the child should not effect prevalence of usage or intensity of attachment.

4. There should be an interactional effect between availability and psychological mindedness so that a point at which empathy and the right amount of physical presence combine to produce optimal usage of the transitional object.

CHAPTER III

PROCEDURES IN SAMPLE SELECTION AND DATA ANALYSIS

The Sample

Utilizing a structured questionnaire and the Psychological Mindedness Scale as devised by Engel et al., a total of thirty-four interviews were conducted of which thirty were utilized in the final data analysis. Four interviews were rejected on the following basis: in two cases it was learned (while the interview was being conducted) that the child had been adopted sometime within the first year of his life and in another two cases the mother was divorced or separated from the child's father at some point during the child's early developmental years. In all these cases it was felt that the consequences of the particular environmental setting could affect transitional object usage in a way that had not been accounted for in the design of the study and so they were eliminated from further consideration.

All of the mothers were in the sample were of white, middle socioeconomic status. All but two of the mothers had obtained at least a bachelor's degree from a four year college and several had gone on to further graduate training in fields such as teaching (7 cases), social work (2 cases), psychology and guidance (2 cases) and nursing (2 cases). In two cases the mother had obtained an Associate degree from a junior college. One of these mothers had continued her training to become a pediatrics nurse and the other had become a housewife.

The age range of the mothers in the sample was from 27 to 39 years and the mean age of the mothers was 31.8 years.

The fathers (not interviewed) ranged in age from 28 to 43 years (mean age, 34.8). All were fully employed at the time of the interview in such enterprises as teaching (4 cases), psychology (3 cases), medicine (5 cases), sales (4 cases), law (2 cases), and social work (2 cases).

The families interviewed all live in the New York City or greater metropolitan area (including some from Long Island and Westchester). Names of mothers who were contacted were obtained from several sources including recommendation from friends or relatives, lists of mothers whose children were attending day care or nursery school programs, and mothers who were members of the same P.T.A. In some instances, mothers knew each other and where this was so an effort was made to limit the number of interviews in that particular group and to go on to a completely different geographic location so that the final sample was not completely culled from one group of mothers all of whom shared their experiences with each other.

In terms of the children, they ranged in age from 24 to 54 months with a mean age of 39.7 months. Without any deliberate pre-selection, the sample turned out to include 15 girls and 15 boys.

No attempt was made to control for birth order and so the children who were investigated via the interview ranged in sibling order as follows: 12 were only children; 6 were first borns; 10 were second borns; and 2 were third borns. Although information was obtained about the other siblings and their use of transitional objects, this did not enter into the final assessment of the hypothesized variables under consideration.

Since maternal availability was one of the main independent variables in the study, it is important to note that 10 out of the 30 mothers reported that they had worked during the child's first year. The amount of time worked in that first year ranged from 8 to 40 hours with a mean of 19.25 hours. In answer to the question of whether these mothers were currently working, 16 out of the 30 reported that they were (not necessarily the same as those included in the group that worked during the child's first year) and the amount of time worked ranged from 8 to 40 hours with a mean of 18.44 hours per week.

Whether mothers worked or not, several had provided for their own time away from the children by arranging for alternative means of care. Thirteen mothers reported that they used a baby sitter at some point so that they could leave the house, either for purposes of working or for simple time away from the chores of child rearing. Another 7 used a nursery type setting for the same purposes, while 16 had enrolled the child in some sort of play group which was usually felt to be not only a means of providing leisure time for the mother herself but educationally enhancing for the child as well. In 7 of these cases, the means of alternative care overlapped so that there was some combination of the three methods described above (most of the overlap occurred between use of the baby sitter and employment of a relative to care for the child and who functioned like a baby sitter but was categorized separately because of the familial relationship.)

The Interview

All interviews were conducted in the homes of the particular family under consideration and consisted essentially of two parts. In the first,

a predetermined questionnaire was utilized so that each mother was asked the same questions in the same order. Answers were recorded on tape and, where further explanation was required, additional inquiry was made to a particular item so that as complete a picture was obtained as possible. Thus, the interviews vary in length both because of variations in mother's verbal rates and because of more inquiry for clarification in certain cases. This phase of the interview was concerned with obtaining information regarding child rearing practices, feeding and sleep patterns of the child, sleeping arrangements, mother's work schedule, and patterns of caretaking where the mother was not at home all the time. In addition, after a brief description and definition offered by the interviewer, information was gathered concerning transitional object usage with specific reference to the type of object used, the setting in which it was used and the ways in which it was used.

In the second half of the interview, the Psychological Mindedness Scale was administered and here again the answers were taped. These were subsequently transcribed verbatim for purposes of rating and scoring the scale.

At the end of the interview, a time was reserved for exploration of the mother's reactions to the questions asked and the topic of attachment objects in general. Initially, this helped to further refine the questionnaire so that in the subsequent interviews aspects which the mothers considered insufficiently investigated could be included.

A coding sheet was prepared which was filled out according to the information obtained in the first part of the interview. The purpose of

this step was to translate descriptive responses into numerical form so that correlations could ultimately be obtained. In some instances this consisted of no more than recording a number offered by the mother; for instance, a mother would say that feeding in the first year took 30 minutes and was carried out five times a day (150 minutes) or that the mother worked part-time for 12 hours a week. In other cases, a code was used whereby numbers could be assigned to differentiate certain amounts of a particular item. For example, with regard to transitional object attachment, 0 was assigned to those cases where no protest was offered when a substitute object was presented, 1 designated some protest but ultimate acceptance of a substitute, and 2 represented a great deal of protest and no acceptance of a substitute. In cases where the response consisted of yes or no (e.g., did the child use a pacifier?), 0 was assigned to no, 1 to yes.

The numerical data was ultimately transcribed to key-punch cards for computer analysis. A P-Stat program was used and correlations obtained between pairs of 119 variables.

The Psychological Mindedness Scale Rating

As noted in Chapter II, this instrument consists of ten brief descriptions of children's behavior to which the mother is asked to furnish an explanation of why the child is behaving in the way that is described and to state what the mother can do about this behavior. Ratings of these responses is done on the basis of three sub-scales of the test (Scale of Affective Responsiveness, Scale of Developmental Change, Scale of Behavior Shaping) and then, on the basis of the mean response score on each of these sub-tests, an overall psychological mindedness (PM) rating

is determined.

As described in Engel's paper (1975), the Psychological Mindedness Scale was devised through interviews with a sample of mothers very different in nature from the sample used in this study. In the original group, mothers were selected on the basis of their infants and not their own personal characteristics (infants studied all had to be first born black males). About one-third of the mothers were on welfare when the study began and educational level varied from 8 years to two years of college. Ages ranged from 14 to 34 years and the mean age was 20 (p. 22).

Several statistical analyses are reported by Engel to support the notion that there is no reason to drop any of the ten situations or the three originally devised scales of the test (p. 48). She does note, however, that one item "pulls" more psychological mindedness than the others and that "at least one scale elicits higher psychological mindedness than the other two" (p. 48). At this stage in the development of the scale, however, no further work was done to elaborate these findings.

In terms of inter-rater reliability it is noted that it is high between pairs of judges provided that the judges have similar backgrounds (p. 45). Two psychiatrists may agree but a clinician working with children and a psychiatrist may produce a lower inter-rater reliability coefficient.

The raters in the present study were two psychiatric social workers, both of whom had obtained MSW degrees at a recognized program in New York City. Both had several years of experience working with psychiatric populations and both had undergone some amount of personal psychotherapy. During an initial training session in which the idea of the scales and the rating system devised by Engel et al. were explained, two protocols were

rated and then compared for amount of inter-rater agreement. Any further questions about the scoring system were then discussed, and from that point all ratings were done independently and no further discussion was held concerning the way to score or interpret a response.

Inter-rater reliability on the overall PM scale was .952 ($p < .01$, two-tailed test); for the affective responsiveness scale inter-rater reliability was .886 ($p < .01$, two-tailed); for the scale of developmental change the interjudge reliability was .856 ($p < .01$, two-tailed) and for the scale of behavior shaping $r = .873$ ($p < .01$, two-tailed test).

A word about the scoring system itself is in order. In general, a higher number is assigned as the mother demonstrates increasing awareness of the particular variable in question. Thus, for example, on the scale of Developmental Change, a mother who says that children behave immaturely because they have not learned to act differently is assigned a score of 2 as opposed to a mother who recognizes that there is a stage-appropriate aspect in development and that some behavior is normal at some times but not others. This mother would receive a rating of 7. Or, on the Affective Responsiveness Scale, a mother who views her baby as being in her total control with no moods or feelings would score 1 as opposed to the mother who recognizes that a baby's moods are variable and complex (score of 7). For each scale, several examples are offered as a way of clarifying the scoring system.

CHAPTER IV

RESULTS

The various correlations which were calculated for the variables investigated will be reported and discussed under the following sub-sections:

1. The hypotheses stated as the prime areas of interest in the study
2. Factors in the child's environment related to transitional object usage
3. Factors related to the kind of transitional object employed
4. Factors related to the way in which the child uses the transitional object.

Any correlation with $p \leq .05$ will be reported as significant. For the convenience of readers preferring other significance levels, probabilities other than $p \leq .05$ will also be reported.

Unless otherwise indicated, all statistics are reported on the basis of a two-tailed test.

Stated Hypotheses

Hypothesis I proposed that the greater the availability of the mother (in terms of her presence and amount of contact with the child), the less the frequency of transitional object usage and intensity of attachment to the object if used. (To repeat, intensity of attachment to a transitional object was measured in several different ways. The

ease with which a mother could induce her child to accept a substitute object for the original was one type of measure. In addition, the child's use of the object provided other measures:

1. The number of situations in which the object was used (e.g., in the feeding situation, on trips, during sleep, at nap time, during play periods, passively [along with doing something else], when upset, or at other times);

2. The number of situations in which the object was most used (e.g., were there particular situations in which the object tended to be used more than other times);

3. The different ways in which the object was used (e.g., holding it, talking to it, mothering it, sleeping in contact with it, picking it, dragging it, rubbing it, rubbing oneself with it, etc.).

These provided alternate measures of intensity of attachment so that a total of four such measures were considered in interpreting the data.

Out of thirty subjects, a total of twenty-two children used some form of transitional object (73%). Mothers estimated a percentage of time spent with the child per day during his first year. The mean percentage time was 87.93; the standard deviation was 24.70.

It was found that the correlation between percent of time mother spends with the child per day in his first year and whether the child uses a transitional object was $r = -.300$ ($p < .1$, $N=30$).

Intensity of attachment to the transitional object was studied in the twenty-two cases of reported usage. A total of eight situations in which a child might use his transitional object was identified through the interview material and a count was made of the number of these situations

in which the child used the object (mean=3.09, standard deviation=1.23).

Five situations were identified as the most common setting for transitional object usage. Again, a count was made of the number of these situations in which the object was used (mean=1.86, standard deviation=.84).

A total of ten different ways of using the transitional object was noted and again a count was made for each subject to derive a total number of ways used (mean=3.36, standard deviation=1.25).

Finally, acceptance of a substitute transitional object was measured on a three point scale: a rating of 0 indicated easy acceptance of a substitute object; a 1 indicated acceptance of a substitute object with some reluctance and coaxing; a 2 indicated no acceptance of a substitute object (mean=.90, standard deviation=.69).

The correlations between intensity of attachment to a transitional object and mother's availability as measured by percent of time spent daily with the child in the first year are reported in Table 1.

Although none of these measures attained statistical significance at the .05 level, the negative direction of the measures suggests that higher maternal availability may influence both use of the object at all and the amount of flexibility which a child will display toward the object if he uses one (e.g., the number of things he does with it).

Another way of measuring maternal availability consisted of investigating those mothers who worked during the child's first year (and hence were less physically available to the child during the course of a day). Does this affect either attachment to an object or intensity of attachment in any way?

TABLE 1
Correlations Between % Time Mother Spends With
Child Per Day and Measures of Intensity
of Transitional Object Attachment

Intensity	% Time
Situations used	-.310
Situations most used	-.314
Number of ways used	-.365*
Accepts substitute	-.204

* $p \leq .01$, $N=22$, two-tailed test

A total of 10 mothers (33%) of the sample reported working in the child's first year. (The mean number of hours worked was 5.13, standard deviation was 10.01).

The correlation between whether a child uses a transitional object and mother's working in the first year was $r=.267$ ($N=30$). Correlations between intensity of attachment and whether the mother works in the first year are reported in Table 2.

None of these correlations support the hypothesis concerning greater transitional object usage when the mother is less physically available to the child.

Hypothesis II also considered the effect of maternal availability on transitional object usage but this time availability was conceptualized in a psychological sense: how in tune was the mother with her child (i.e., empathic)? According to Winnicott, empathy and intuitive understanding of the child's development are the sine qua non for the child's entry into the realm of transitional phenomena. An attempt was made to measure empathy via the Psychological Mindedness Scale and it was predicted that those mothers who scored higher on the PM scale would have children who more frequently used a transitional object and who used the object with greater intensity. An attempt was made to see if any of the particular sub-scales on the PM scale could relate more consistently with transitional object usage as well.

On the overall PM scale, scores ranged from 2.8 to 5.5 (mean=4.40, standard deviation=.714). For the scale of Behavior Shaping the range of scores was from 2.3 to 6.5 (mean=4.92, standard deviation=.836); for the Affective Responsiveness Scale the range was from 2.7 to 6.6 (mean=4.92,

TABLE 2
 Correlations Between Whether Mother Worked During Child's
 First Year and Measures of Intensity Of
 Transitional Object Usage

Intensity of Attachment	Mother Worked in First Year
Number of situations used	-.048
Situations most used	.019
Number of ways used	-.362*
Accepts substitute	.189

* $p \leq .1$, N=22, two-tailed test

standard deviation=.886); for the Developmental Change Scale the range was from 1.5 to 5.4 (mean=3.40, standard deviation=.908).

The correlations between the overall PM rating and the sub-scales with transitional object usage and intensity of attachment measures is summarized in Table 3.

Table 3 presents correlations which indicate that Hypothesis II is not confirmed: the degree of psychological mindedness of the mother does not influence the usage or intensity of attachment to a transitional object in any demonstrable way in this study.

Hypothesis III stated that the gender of the child does not affect transitional object usage, that one gender is not more likely to use a transitional object than the other and that there will be no differences in the way the object is used or in the situations in which the object is used (at least in the initial stages of transitional object usage. Gender differences may manifest themselves as the child continues to mature and as sex differentiation begins to take place). It is to be remembered that in this study there were an equal number of boys and girls. Table 4 summarizes the correlations for these data.

None of these correlations is high enough to attain statistical significance at the .05 level and so Hypothesis III is confirmed: gender difference does not affect the capacity of the child to use a transitional object or the ways and circumstances in which such an object is used.

Hypothesis IV dealt with a theoretical picture of maternal availability whereby transitional object usage would be most likely to occur. That is, the amount of mother's physical presence and the degree of empathy (psychological mindedness) shown toward her child were thought of as interacting to produce a point at which it could be predicted that a child would

TABLE 3
 Correlations Between Ratings on the Psychological Mindedness Scale
 and Measures on Transitional Object Usage
 and Intensity of Attachment

Transitional Object Usage	Ratings on PM Scale			
	PM Rating	Behavior Shaping	Affective Response	Developmental Change
Uses T.O. N = 30	-.005	-.148	.163	-.048
Number of situations used N = 22	-.130	-.148	.044	-.221
Number of situations most used N = 22	.052	.056	.204	-.134
Number of ways used N = 22	-.110	-.152	-.037	-.089
Accepts substitute N = 22	.119	-.155	.136	.305

TABLE 4
 Correlations Between Gender and Transitional Object Usage
 and Intensity of Attachment

Transitional Object Usage	Gender
Child uses T.O. N = 30	.0
Number of situations used N = 22	.055
Number of situations most used N = 22	-.121
Number of ways used N = 22	.0
Accepts substitute N = 22	.098

be most likely to use a transitional object. The method used to investigate this hypothesis was to prepare several scattergrams (done by computer) in which the variables dealing with psychological mindedness, physical availability, mother's work in the first year, etc., were plotted against those measures dealing with transitional object usage and intensity of attachment.

None of the scattergrams showed any significant trends with respect to the variables in question and thus Hypothesis IV was not confirmed--from this study and the scattergrams obtained it is not possible to make any predictions regarding the optimal maternal pattern which is most likely to aid the child in his entry into the transitional realm.

Variables Affecting Transitional Object Usage

Although it was hypothesized that maternal availability is a key factor in transitional object usage (these results have been discussed above), the study was designed in such a way as to include several different kinds of variables all of which might be important in leading to transitional object usage and some of which might be more important than others. In this section, those variables which are frequently cited in the literature as affecting transitional object usage will be discussed.

Since Gaddini (1970) cited differences in sleeping arrangements between the rural versus urban Italian population as being important in the development of a transitional object, let us begin with these variables in our study.

There was no indication that in those cases where the child had slept in the same room with the parents for some portion of time in the first year transitional object usage was affected in any way ($r=.10$, $N=30$).

Nor was there any indication that sleeping in the same room as the parents affected the intensity of attachment to an object (for example, on the measure dealing with acceptance of a substitute object, $r = -.130$, $N=22$). It should be noted however that in Gaddini's study, sleeping with the parents usually meant in the same bed as the parents and not just in the same room as the parents. In none of the cases in this study did a child ever sleep with his parents in their bed except for a transient comforting experience from time to time.

When we investigated the correlations between sleeping in the same room as a sibling (or siblings) and transitional object usage, no significant findings at the .05 level were indicated either. (The correlation between sleeping in the same room as siblings and using a transitional object was $r = .167$, $N=30$; the correlation between sleeping in the same room as siblings and accepting a substitute transitional object was $r = .157$, $N=22$.) A significant correlation did appear, however, when we looked at some common precursors of transitional objects (the three considered were bottles, pacifiers, and fingers.) In this case, it was found that the correlation between sleeping in the same room as older siblings and using a pacifier was $r = .388$ ($p < .05$, $N=30$). The more the child had older siblings around at sleep time, the less tendency there was for the mother to employ (or the child to demand) a pacifier for comforting.

Again following an idea of Gaddini's, it was thought that the amount of time the mother spent breast feeding her child might also influence transitional object usage (i.e., the longer the child is breast fed, the more available the mother and hence the less the need for a transitional object). Again, no significant correlations appeared. It was found, however,

that mothers who breast fed their children (regardless of how long) tended to have an attitude of acceptance and pleasure at the idea of a child using a transitional object (correlation between mothers who breast fed their children and feeling pleased at the idea of a child having an attachment object is $r=.397$, $p \leq .05$, $N=30$).

With regard to precursors of transitional objects, Winnicott (1971) identified these as experiences of a primarily oral nature leading to soothing in the child which usually involved the use of a bottle for comforting, a pacifier and/or fingers or hand in the mouth. No trends were noted with respect to use of these precursors and subsequent transitional object usage. Girls, however, tend to use fingers more than boys as their precursory object ($r=.566$, $p \leq .01$, $N=30$).

Variables Affecting the Kind of Transitional Object Used

Out of the 30 case studies, 22 children used some form of transitional object which qualified as acceptable under the criteria for this study described in Chapter II. Of these 22 cases, the most usual kind of transitional object employed was the blanket (14 cases). The remaining 8 were divided among stuffed animals (of the "furry" kind) or toy dolls (5 cases) and other kinds of objects not usually thought of as typical transitional objects (e.g., books, etc., 3 cases).

Certain trends were noted with regard to the kind of transitional object employed by the child. One way of looking at this was to simply divide the objects described into two groups based on softness (those likely to be designated as "cuddlies" versus those of a harder texture). The first group would include blankets, soft furry animals and soft pieces

of clothing or fabric; the second would include toys such as trucks, blocks, games, etc. and other objects such as books or records.

Soft and furry transitional objects were usually the ones that were introduced to the child in his crib rather than in other typical places of introduction such as placement somewhere in his room or during the feeding situation ($r=.671$, $p \leq .001$, $N=22$).

Mothers of children who employed this type of object tended to use singing less as an activity for soothing and/or play than other mothers ($r=-.444$, $p \leq .05$, $N=22$).

A second way in which the type of transitional object used by the child was investigated consisted in dividing the objects again into groups, this time based on the kind of object used rather than its textural qualities. Three groups were thus involved: the blanket users, those who interacted with a stuffed animal or toy doll, and a third group consisting of everything else that was described by the mothers as objects of attachment used by their children and that met the criteria for qualification as a transitional object in this study (others). The rationale for this division rested on the notion that a stuffed animal or toy doll is a complex kind of attachment object in that it represents a closer approximation to differentiated object representations than does the blanket which is more likely to preserve a quality of interaction with the mother rather than aspects of the mother as person. In any case, there were some apparent differences in terms of circumstances of introduction of these kinds of object and, especially, in the ways the objects were used (these to be described in the section which follows).

Mothers who worked during their child's first year tended to have

children who used objects falling into the "other" group ($r=.427$, $p \leq .05$, $N=22$). These mothers also had a tendency to rate on the higher end of the overall PM scale ($r=.434$, $p \leq .05$) and also to attain higher ratings on the scale of Developmental Change ($r=.491$, $p \leq .05$). The object was usually introduced in a situation other than the child's own crib or room ($r=.549$, $p \leq .01$).

With respect to the use of blankets as transitional objects, it was found that those mothers whose children used blankets as attachment objects had a tendency to swing their children less while playing or interacting with the child ($r=-.474$, $p \leq .05$, $N=22$). It is possible that these mothers favor a quieter, more passive interchange with the child.

In the group which uses the stuffed animal or toy doll as the attachment object, it was found that these children have a greater proclivity to watch television as their preferred play activity ($r=.575$, $p \leq .01$, $N=22$). Usually, this kind of transitional object is not introduced to the child by his mother. Rather, these dolls or animals tend to be given to the child by relatives or friends as baby gifts (correlation between use of an animal or doll as an attachment object and its introduction by the mother is $r=-.561$, $p \leq .01$, $N=22$).

Variables Affecting the Way the Transitional Object is Used

Different transitional objects are used in different ways. In order to get a better picture of transitional object usage, the child's activity with the object was thought of as falling into two broad categories: when the object is used (e.g., at sleep time, during sleep, during feeding, etc.) and how the object is used (e.g., drags it on the floor, talks to it,

plays with it, etc.). The more noteworthy trends will be discussed below. (In cases where transitional object usage is being described, $N=22$ since the eight non-users were eliminated in the statistical computation.)

A child who uses a stuffed animal or doll has a tendency to use it for play purposes during the day ($r=.561$, $p \leq .01$, for transitional object being animal or doll and child's use in play time). In contrast, a child using a blanket does not tend to use it for play ($r=-.701$, $p \leq .001$) nor does he play with it ($r=-.598$, $p \leq .01$) whereas the animal and doll users do play with it ($r=.642$, $p \leq .01$). (This categorization may appear confusing. Essentially, the child's use of the object is seen from the point of view of whether he uses it as part of his play activity with other things as well and also from the point of view of whether he plays directly with the object itself.)

The blanket users tend not to mother the object--they don't scold it, soothe it, feed it, etc., as much as the animal-doll users do ($r=-.492$, $p \leq .02$, and $r=.417$, $p \leq .0$, respectively for the blanket users versus animal-doll users and tendency to mother the object).

Not surprisingly, the blanket users spend a lot more time in direct physical contact than do the animal-doll users (and this seems to be the trend regardless of the fact that some animals are furry, soft and cuddly). A blanket user has a tendency to rub his body with it ($r=.571$, $p \leq .01$) while the animal-doll user does not tend to rub his body with the object ($r=-.410$, $p \leq .1$).

Certain circumstances in the child's early environment seemed to be associated with certain uses of the transitional object. For instance, the more time the mother spent with her child during his first year, the

less he spoke to the object subsequently ($r = -.562$, $p \leq .01$).

Playing directly with the transitional object tended to be associated with mothers who breast fed their children ($r = .438$, $p \leq .01$) and with the child watching television as a preferred play activity in the daytime ($r = .510$, $p \leq .02$). (Incidentally, the children who watched television as a routine part of their play life tended to use their transitional objects most during the day ($r = .510$, $p \leq .02$).

Those children who slept in the same room as an older sibling tended to use the transitional object when they were upset for some sort of comforting ($r = .528$, $p \leq .02$).

A summary of these findings is provided by means of Tables 5, 6, and 7.

One final note concerning the differentiation of types of transitional objects employed by the children in this study is in order. The possibility existed that since the children ranged in age from approximately two to four years, the animal-doll type of object might be a function of increasing development in the child and a reflection of an increased capacity to interact with a more human-like object. To test this, the children using transitional objects were divided into two groups: those using a blanket and those using either an animal or doll or any other kind of object reported. A t test was then performed to test for the significance of difference between the mean age at which mothers reported that the child had begun to use his transitional object. This turned out to be $t = .625$ which was not statistically significant. Thus, in this study, differences in type of object employed by the child was not due to an age factor.

TABLE 5

Correlations Between Different Kinds of Transitional Objects
and Situations in Which These Objects are Used

Situations	Kinds of Objects	
	Animal-Doll Type	Blanket
Used during play	.561**	-.701***
Plays directly with object	.642**	-.598**

** $p \leq .01$, N = 22, two-tailed test

*** $p \leq .001$, N = 22, two-tailed test

TABLE 6

Correlations Between Different Kinds of Transitional Objects and
the Ways in Which These Objects are Used

Ways	Kinds of Objects	
	Animal-Doll Type	Blanket
Mothers object	.417*	-.492**
Rubs own body with the object	-.410*	.571***

* $p \leq .1$, $N = 22$, two-tailed test
 ** $p \leq .02$, $N = 22$, two-tailed test
 *** $p \leq .01$, $N = 22$, two-tailed test

TABLE 7

Correlations Between Certain Factors in the Child's Environment
and Variations in Usage of the Transitional Object

Usage	Environmental Variables	
	% time mother spent with child in 1 year	Sleep in room with older siblings
Speaks to object	-.562***	.016
Uses object when upset	-.382*	.528**

* $p \leq .1$, N=22, two-tailed test
 ** $p \leq .02$, N=22, two-tailed test
 *** $p \leq .01$, N=22, two-tailed test

CHAPTER V

DISCUSSION

The results reported in the previous section raise several questions which will form the basis of the discussion in this chapter. In general, these questions divide themselves into the following areas: why most of the predicted hypotheses failed to attain statistical significance and what the implications are for the limitations of this study; how the statistically significant results might be understood and how these compare to previously published studies concerning transitional object usage; some new thoughts on what variables might be operating that affect transitional object usage and how these might be incorporated in future research; finally, a brief case example illustrating a particularly striking and different kind of transitional object and how this might be understood in terms of the child's environment (and personal genetic predispositions.)

Limitations of the Study

Since the percentage of time a mother spent with her child was seen to have an influence on transitional object usage in the direction predicted (that is, the more the mother was with the child, the less transitional object usage), and since some of these correlations were near the .05 significance level, a larger sample size might have produced more statistically significant results in this variable. This is of course also true for the kinds of transitional objects reported and the various

implications concerning the trends noticed in differential usage of the object and environmental variables associated with each of the objects; a larger sample might have produced stronger confirmation of the trends noted or even contradicted them. In any case, the correlations were, for the most, relatively low (regardless of whether they were significant or not) and, remembering that the square of a correlation coefficient represents a percentage of the variance accounted for by the particular variable in question, the results do not explain all that much with respect to what influences transitional object usage. (For instance, to take one of the highest correlations reported, it was found that the percentage of time a mother spends with her child has a negative effect on the amount of talking that a child does to his transitional object and the correlation was reported to be $-.562$ which is significant at the $.01$ level. Even so, this number accounts for about 32% of the variance--that is, the remaining 68% of the variance is estimated to be due to factors other than maternal availability in the first year and is hence unexplained.)

Another problem with this type of study rests on the amount of recall (and probably reconstruction) which the mother must do regarding both her own practices in rearing her children and the types of attachment objects which were characteristic for her particular child. Although an attempt was made in the study to delimit the age range of the children studied and thus to minimize the amount of recall the mother had to do (the younger the child was the more actively engaged with a transitional object he was at present and therefore the more immediate the material in the mother's mind), it was apparent during the interviews that many of the responses

the mothers gave were approximations at best. This was especially true with regard to information concerning the child's first year--amount of time mother spent with him, time spent in feeding, changing, playing, etc., and in recall of when the transitional object was noted by the mother as being of particular significance to the child. All of these were of course crucial variables in the study and so we have "more or less" type information rather than total accuracy.

The generalizability of the results also deserves comment. The sample of mothers interviewed was intentionally limited to a particular racial and economic grouping and so of course any generalizations made about the results are limited to this group and await comparative studies with other groups for clarification, similarities and/or differences. But even within the group sampled itself, the limit of the sample size and the way in which the sample was obtained (that is, the mothers who wished to participate in this study were all more or less intensely interested in their children's development, aware of developmental vicissitudes and fairly sophisticated concerning the ways in which psychologists think) points to a rather special kind of group which is not typical for the general population. (Busch, 1973a, had the same type of problem with his "educationally skewed" sample when he investigated primary transitional object usage.) Therefore, whatever trends are noted in this study are probably best thought of as applying to this group particularly and are generalized to other groups (of the same socio-economic profile) with caution.

An even greater problem than sample size and the one man investigator approach concerns the way of assessing one of the most crucial variables in

Winnicott's conception of the ambience which fosters transitional object usage--maternal empathy. This is such a nebulous concept and so difficult to conceive of in empirical terms that it has not been included per se in any of the studies reported in the literature. The fortunate circumstance of having Engel's Psychological Mindedness Scale available for this purpose in the study was one of the more intriguing components in its design. Unfortunately, the results were less than spectacular since the second hypothesis concerning maternal availability in the psychological sense (i.e., empathy) and its effect on transitional object usage and intensity of attachment was not only unsupported but, unlike Hypothesis I, had no uniform pattern or anything approaching statistical significance. The question arises as to whether this scale indeed reflected maternal empathy (in Winnicott's sense), whether something other than empathy is being measured in the scale or whether empathy is not that crucial a variable in transitional object attachment at all.

One striking finding concerning the Psychological Mindedness Scale and its subscales was that some of the correlations between sub-tests were low (this touches on issues of reliability--how consistently are the sub-scales measuring the trait under investigation, in this case, empathy). For instance, correlation between the affective responsiveness scale and the developmental change scale was .343; between the behavior shaping scale and the developmental change scale .446; and between the affective responsiveness scale and behavior shaping scale .627. If the scale is measuring an overall concept of empathy, the expectation is that the more highly empathic mother would score higher on the sub-scales and that the scores would produce much higher correlations between themselves.

According to Winnicott's concept of "good-enough-mothering," empathy should include an intuitive awareness of a child's moods (affectiveness scale), a sense of a child's maturation and a grasp of the notion that the mother must attune herself to the child's growth and monitor her responses accordingly (developmental change), and awareness of the dyadic unit between mother and child and that her responses to the child influence his responses to her and vice versa (behavior shaping). Therefore one would not expect one particular sub-scale to be a better measure of empathy than another--it is an all inclusive concept in which the three sub-scales should all be additive measures.

Using the Psychological Mindedness Scale, however, a profile began to emerge of a certain kind of mother (not necessarily more empathic than another) who had a tendency to behave in a certain way towards her child and whose child tended to use certain kinds of transitional objects. This profile can more easily be seen by means of a summary of significant correlations in table form (see Table 8).

The mothers who tend to rate higher on the overall PM scale are more likely to work and to encourage the child to adapt himself to new people and different situations while the mother is absent (e.g, to a relative or to new peers and adults via the play group). They tend to emphasize verbal interaction with the child through using talking as an important activity (many of these mothers reported that they would always talk to the children even when the child had no language at all and especially during the feeding situation). They seem to breast feed their children longer (an activity related to children's playing with their transitional object) and to have children who use transitional objects

TABLE 8

Correlations Between High Scores on the Overall Psychological
Mindedness Test and Certain Characteristics
of the Mothers

Maternal Characteristics	Overall PM Rating
Mother worked in child's first year N = 30	.376*
Mother works now N = 30	.494**
Child in a play group N = 30	.361*
Age until which child was breast fed N = 30	.363*
Care of child by relative N = 30	.428*
Mother talks to child N = 30	.408*
Use of "other" T.O. by child N = 22	.434*

*p \leq .05, two-tailed test

**p \leq .01, two-tailed test

other than the usual furry animal or soft blanket. It is possible that one of the factors therefore involved in differential transitional object usage is the personality or values of the mother herself--what she encourages in the child (activity versus passivity, inquisitiveness versus acceptance of the environment, home-bound versus outer oriented adjustments, etc.) and how these factors interact with the child's own personality. The mothers in this sample were probably all good-enough (the range of scores on the overall PM scale was 3.9 to 5.5) and it might be therefore that empathy was not a particularly important variable in the present sample of mothers and that other factors, not included in the original hypotheses, were more important.

Comparison With Other Studies

It is instructive to consider the findings of this study in the context of the few other studies in which attempts were made to highlight aspects of the child's situation which affected his attachment objects.

It will be recalled that Gaddini (1970) maintained that the presence of the mother in the child's room at night and her continual availability to the child in moments of stress resulted in delayed separation-individuation from the maternal dyad and in the by-passing of transitional object attachment. She found that a child in this situation would resort to an autoerotic kind of substitute rocking which took the place of what mother would do but that he lacked the essential elements which are the core of the developmental step into the transitional realm. She contrasted her rural group with an urban group where the child was much more likely to sleep alone, where the mother was not as continuously available and where the child was much more likely to use a transitional object.

Hong and Townes (1976) found that cultural variations in sleeping arrangements and patterns of child rearing did indeed affect the attachment objects of the children in question but, in contrast to Gaddini, they reported that mother's presence in the same room as the child at night did not necessarily result in no attachment to transitional objects but in attachment to different kinds of objects and in variations of usage of the particular object. In comparing Korean mothers and their children with an American group, they found that the Korean group was more likely to use stuffed animals as their transitional object whereas the American group tended to use blankets more often. The Korean children manifested their attachment at a slightly later age than the Americans and tended to use the object more during the day and when they were not alone rather than at bed-time or when they were in a strange place.

The authors point out that, in addition to the mother's presence in the same room with the child at night, the amount of physical contact which the mother displays towards her child is much higher for the Korean group. Breast feeding is more common and continues to a later age than in the American group. The babies in the Korean group are cared for by close relatives when the mother is out of the house, spend much time in the lap or on the back of the mother or caretaker and play frequently with the caretaker.

In the group sampled in this study, it was found that working mothers tend to have children who use objects other than blankets or animals and tend to rate higher on the PM scale. In addition, this last group tends to breast feed longer, to talk more to the child, and to be more accepting of the idea of a child using a transitional object.

A difference also emerges between the ways and circumstances in which a child uses a blanket and the ways and circumstances in which he uses a stuffed animal or doll.

A comparison of these various studies with our findings highlights the idea that viewing a mother's physical availability as a crucial variable in the child's formation of a transitional object (and his attachment to that object) is not a clearcut or simple consideration. Hong and Townes described mothers who were more physically available in the sense of providing greater physical contact with the child than do most American mothers (the mothers in the Hong study worked however and were not always around the child during the day). Unlike Gaddini, they found that greater physical contact (and sleeping conditions similar to those described by Gaddini) resulted in a tendency for the children to use stuffed animals rather than blankets as their attachment objects. In our study, mothers who were less physically available (who worked and who usually did not sleep in the same room as the child or carry the child around on their backs so that the amount of physical contact between mother and child was far less than in the Hong study) had children who also tended to use objects other than blankets.

Certain points of similarity were found between the mothers in the Hong study and those mothers in our group who had children tending to use transitional objects other than blankets. Both tended to use breast feeding for extended periods of time, both groups worked, both tended to use close relatives for baby sitters (in our study play or nursery settings as well), and both seemed to play actively with the child (at least either the mother or the relative did).

Like the mothers, certain points of similarity exist between the style of transitional object usage amongst the children of these two groups. The object is used more during the day than at night, it is used either when the child is alone or in groups rather than on trips or in strange places, and it is usually directly used for play.

The findings in our study thus tend to somewhat confirm the Hong and Townes study. Physical proximity and availability of the mother does influence transitional object usage but in ways in which Gaddini's study does not indicate. It seems that if a mother works, she might do different things with her child than if she is continually at home and interacting with him and this will in turn influence the type of object employed by the child and the manner in which he interacts with it.

Some Ideas for Future Research

In the preceding section we have seen that (in two studies at least) mothers of children who use transitional objects other than blankets have certain traits in common both with respect to their own life-styles and the way in which they bring up their children (these similarities despite obvious cultural variations in child rearing practices). It has been noted earlier that in the present study, working mothers tended to rate higher on the PM scale and to be more favorably disposed to the use of attachment objects by their children. Since the mother is obviously the first person in the child's existence who "does," she is the model that eventually gets incorporated into the child's schema for what he will do with his transitional object. A more closely considered assessment of the personality profiles of mothers therefore suggests itself as one of the more

important variables underlying differences in transitional object usage. Ideally, ways of investigating unconscious attitudes of the mother vis a vis her role as mother, her attitude towards the child's initial total dependency, her feelings about his maturational and developmental growth (especially his process of separating from her) would be explored since the ways in which a child is encouraged to engage himself with the outer world is very much a reflection of how the mother does this herself. (An analogous situation suggests itself--the beginning therapist is usually most like his own therapist in his dealings with patients--or so most novice therapists seem to feel.) Are there mothers who encourage their children to actively explore things, to react more zestfully to new stimulation and to be creative and, in turn, how do these differences, if they exist, manifest themselves in transitional object usage?

If the mother's personality and conscious and unconscious attitudes toward her child are important variables, so too are the particular and unique characteristics of the child himself and the way in which he will mold how his mother (and, by extension, the environment) will respond to him. For instance, intelligence is a variable which has not been systematically assessed and related to transitional object usage (M. Engel, personal communication). Likewise, it might be possible that children vary in what could be thought of as a "creativity" dimension, with those more creative children being likely to make the transitional object experience either more unique, more stimulating, more personal, or more varied in the ways it can be used. (And this in turn suggests another idea--is the transitional object more than just a comforting device?

Certainly the animal users seemed to have a great deal of fun with it and to not just use it when upset or feeling lonely [although sometimes they would do that, too]. In other words, a greater definitional clarity needs to be attained regarding the inclusion of not only different objects under the heading of transitional but also of the variations in usage which these objects undergo.)

In a different context, Ernst Kris (1956) has pointed out that the variations in a child's intellectual potential and in the capacity for active and rich fantasy can not only lead to certain kinds of character structure (e.g., the obsessional) but also to a particularly unique way in which a person will perceive the events in his life and weave them into an autobiographical account which may not accurately resemble the overt facts. As much as personality style relates to cognitive modes, defensive adjustments and different kinds of pathology, it may contribute, at an early age, to the style and quality of transitional object usage as well.

Earlier it was mentioned that the tremendous variations found in the ways which children use blankets as compared to stuffed animals or dolls necessitates a clearer definition of what constitutes the transitional object (and Busch has started to do this in his attempt to divide them into primary and secondary types). Another way of viewing this is to try to more clearly differentiate how the child uses his transitional object at a particular stage of development and how usage changes as development proceeds. For example, do the children who use blankets in the way noted in this study differ developmentally from those who use animals or dolls in their particular way. This has been the subject of

study in an article dealing with the development of representational play in children by Marianne Lowe (1975). She observed a large number of children between the ages of one and three and pointed to a "conspicuous" developmentally related change in the way children use miniature representational toys: the "transition from activities relating to the child's own body to activities directed towards the doll, which thus come to symbolize a person" (p. 45). In Lowe's sample, the transition from self-centered to doll-centered activities occurred at around 21 months and was firmly established by 24 months. She relates this change to concepts based on Piaget (symbolic play proper) and Werner (perspectivism).

Since such a wide age span is usually covered in studies on transitional object usage, the kind of approach taken by Lowe seems important to a better understanding of how the child's chronological and developmental age contribute (independently and together) to the observed types of variation in types of attachment objects and the ways that they are used.

A Brief Example

A particularly interesting example of an unusual kind of transitional object which exemplifies the interplay of contributing factors from the child's environment (especially the mother) and the individual personality of the child was seen in the case of a little girl, age 3. She was the younger of two children, her older sister being 6 and shared the same room with the sister, sleeping in a separate bed however. The sister had used a transitional object from about ages 1 to 3. The mother was not sure how to identify what the object was since it seems she had a strong attachment

to a blanket for a while which was then followed by (and coupled with) a stuffed cat that she would take to bed with her (actually it sounds like both objects became "transitional" and were used together to form a unity in the transitional realm. The cat did come later, however).

Both parents had attained graduate degrees and were thus of a higher educational status. The mother was an educator and the father was a writer and researcher (interesting in light of this girl's transitional object which involved books).

The most immediately striking thing about the interview with the mother was the pace and quantity of her speech. She spoke quite rapidly, gave detailed answers to the questions, elaborated on her rationale for doing things with her child and, although no direct comparisons were made, had to be one of the most verbal mothers seen. She was quite sophisticated psychologically (achieving one of the highest ratings in the PM scale) and very interested in her children and their development.

The mother had worked from the time the child was 3 1/2 months to age 1 1/2 years. This was a full time employment and the child was left with a steady housekeeper who did not sleep in the house, however, but returned in the morning each day. The mother stopped working full time when her child began to walk and talk because she did not want to miss the delight of watching and participating in the growth of her child.

Not surprisingly, this mother breast fed her child until the child weaned herself at 3 1/2 months. Even more strikingly, the mother reported that she constantly spoke to the child, right from the beginning. She told her everything that they were going to do, explained things to her and used verbalizations as a primary means of making contact. She also

read a great deal to her older daughter and very often the younger one would be present.

From the age of 2 this little girl began to use books as her transitional object. She would take many books and surround herself in bed with them at night. The housekeeper was also instructed to read to her when putting the child to sleep (the mother now works part-time).

At present the books are still very much part of this girl's world. It does not matter who does the reading (mother, father, housekeeper will do). She will only go to sleep without books if she is exceedingly tired. Otherwise, the routine is always the same.

The mother has noticed that at times, after the parents leave her room, she will get up, take some books and look through them. She also will drag piles of them out of her room in the morning and try to read them or read to her dolls from them. In her play group, whenever a story is about to be read, she will drop whatever she is doing to go and listen.

This girl had no attachment to a bottle or pacifier. Occasionally she uses her thumb in her mouth while she is looking at her books. But she was fascinated from the time she was 1 with picture books containing snapshots of both herself and her sister. She would look at these for hours, being very pleased and soothed by this activity. This was replaced by her wish to be surrounded by books containing words at age 2. Much as one was struck ("surrounded") by the mother's facility with words, this little girl has preserved a part of her experience with her mother (largely verbal) in her own unique way and has created a highly personal means of internalizing that experience through her own special aptitudes.

Concluding Thoughts

In the study by Gay and Hyson, the function of the transitional object was thought of as primarily aiding in the reduction of stress and anxiety. The prevalence of regressive phenomena was noted as always significantly increased when the object was being used and subsequently decreased immediately following the object's use. Individual differences were reported but these general findings were considered applicable to all cases.

The present study has pointed out that a child differs in the way he uses his transitional object, depending on what the object is. In most general terms, objects other than blankets seem to be used more creatively in the sense that they are played with, included in play situations, spoken to, mothered, and used more during the day. Accepting the hypothesis of Gay and Hyson, it is interesting to speculate whether the different modes of transitional object usage are gradually elaborated into differing personality attributes and defensive styles. The blanket users might be generally more passive, feel less challenged by stressful situations, seek regressive modes of coping with anxiety and display more dependency needs and fantasies of merger with an omnipotent object. Those who use their objects more playfully and who show signs of "mothering" it and hence of incorporating the active stance of the mother into their own adaptive style, may be more stimulated in the face of stress to seek active and more original means of dealing with it, might be more independent, might be more creative and may differ in their ability to tolerate merger and symbiotic aspects in their interpersonal lifestyles.

Additionally, the above considerations suggest the possibility that those who more characteristically seek regressive re-establishment of dependent and passive positions when threatened with stress may suffer from greater narcissistic vulnerability in that the external object becomes more indispensable in maintaining psychic equilibrium and an inner balance. These people may suffer more distress therefore when a significant object in their lives displays separate wishes from them and indicates that he is not under their total control. They may be more predisposed to narcissistic rages, feelings of depression, and psychic blocks in work, play, and relating to others.

Tolpin has stressed the transitional nature of this concept in terms of understanding how the initial total dependence of the child on the mother is gradually relinquished by the child's increasing ability to soothe himself via built up psychic structure which is attained, in part, by means of the transitional object. It seems likely that the children who "mother" their objects are more advanced in the establishment of these structures than those who seem to try to recreate the early maternal ambiance through more physical contact with the object. Thus, the use of transitional modalities in later life may represent a truly creative capacity which aids in the channeling of inner tensions, or it may represent repressed wishes for fusion with an omnipotent object. It might be useful to elucidate the particular meanings of transitional phenomena in patients as an aid in understanding their ego capacities and the state of psychic independence they have attained. In some cases (Kohut, 1977), the therapeutic task consists of aiding the patient in utilizing incipient capacities for creative potential and narcissistic supplies by

freeing them of the earlier (and disappointed) wishes for fusion with an idealized object.

All of these ideas are of course totally speculative but the areas of exploration which Winnicott's ideas have stimulated is tribute to the inherent importance and complexity of this concept.

Appendix A

Interview Questions

Items for Questionnaire

General information about the child:

1. How old is your child (children)?
2. Sex of the child.
3. Were there any complications during pregnancy or at birth?
4. Has the child had any illnesses requiring extended hospitalization either at birth or after?
5. Has the child ever lived anywhere else besides home for an extended length of time?
6. If yes, what were the circumstances surrounding this?

Questions relating to maternal availability:

7. If you think about your activities with your child during the first year, about how much time of your day would you estimate was spent in interaction with the child (try to give a number of hours)?
8. What activities required the most time?
 - a. Feeding? How much time?
 - b. Changing? How much time?
 - c. Sleep activities--rocking, singing, sitting in the same room as child falls asleep, etc.
How much time?
 - d. Playing?
 - e. Any others?
9. Do you work now?
10. Did you work during the child's first year?
11. If yes, about how many hours per day did you work?
12. How was the child cared for when you were out of the house?

13. Did any one else care for the child at times even if you did not work?
14. If yes, was it a baby sitter, day care center, other?
15. About how much time did the child spend in care of baby sitter or at day care center?
16. Was the child breast fed or bottle fed?
17. At what age was the child weaned?
18. Was the weaning experience difficult or easy?
19. Was the child usually held when fed?
20. Does the child like to be held when he is distressed?
21. If not, how does the child prefer to be soothed when upset?
22. What were the sleeping arrangements during the child's first twelve months?
 - a. Own room?
 - b. In same room as parents?
 - c. In same room as siblings?
23. Did you have time to play with the child during the day?
24. In what way did you handle the child's crying if you were not immediately available or near the child (e.g., at night)?
25. Have you ever been away for a long time during the child's first twelve months?

Questions concerning attachment to an object:

26. Some children develop a strong attachment to something early in life which becomes very important to them. Has your child ever had such an attachment to a
 - a. blanket
 - b. stuffed animal
 - c. pieces of clothing
 - d. pacifier
 - e. bottle
 - f. toy
 - g. other
27. When did you first notice this attachment? (Child's age in months)

28. Who gave him the object (i.e., the setting and circumstances of its introduction)?
29. In how many of the following situations is it used?
1. Feeding
 2. Sleep time
 3. Napping during the day
 4. Trips out of the house
 5. Playing with it
 6. Using it while doing something else like watching T.V.
 7. When upset (scolded, distressed)
30. Are there any times when the child is particularly likely to use this object? About how much time does he spend with the object in these circumstances?
31. What happens if you ask the child not to use the object or take it from him (e.g., to wash)?
1. Readily lets it go
 2. Gives it up when substitute is offered
 3. Strongly protests; may howl and will not accept substitutes
32. How does the child use the object?
1. Sucks on it
 2. Holds it
 3. Caresses it or embraces it
 4. Wraps himself in it (whole body or face)
 5. Rubs face with it
 6. Sucks thumb (or pacifier) while using the object
 7. Bites it
 8. Tears it
 9. Others

Questions about the family:

33. Your work. Educational level.
34. Father's work. Educational level.
35. Did siblings use attachment objects? What were they?
36. Do you remember using one? What was it?

24. Does object have a name?

25. Did siblings use one? Yes: No: What?:

26. Did mother use one? Yes: No: What?:

Appendix C

Questions Administered in Psychological
Mindedness ScalePsychological Mindedness in Mothers¹

Introduction to Mother: I want to tell you about some problems that mothers often have in raising their babies who are about the same age as your baby is now. After each, please tell me why you think babies have these problems and what the mother could do about it.

(Restate if necessary)

Note: Each item is followed by the same two questions, about "why" the baby did this and "what the mother could do." Some mothers learn this after the first few items and there is no further need to repeat. But if the mother does not learn to reply, covering the "why" and the "what to do" then be sure that you ask both questions each time.

If the mother says, "I don't know," or shrugs to indicate she cannot reply, coax gently and ask her to try to guess or make up an answer. Tell her any kind of answer would do.

Do not inquire after any of the responses. If there was a reply which intrigued you, you may return to it after all items have been administered, and ask the mother to elaborate her statement.

1

Third and last revision, December, 1969. Address inquiries to Mary Engel, Department of Psychology, City College of The City University of New York, 135th Street and Convent Avenue, New York, N.Y. 10031. (Developed under NIMH Grant # MH-17980-01)

1. This baby's mother decided to feed him. She put him on her lap and began to give him some food. Suddenly he didn't want it; threw it on the floor and started to cry.

How come he did this?

What could the mother do about it?

2. Here was this baby who didn't want to go to sleep. Right after his mother put him to bed, he slipped out and started to want things. It was already late at night and he just wouldn't stay put.

How come he did this?

What could the mother do about it?

3. Here was this baby who knew how to let his mother know when he needed to go on the potty; but often he didn't let her know and just did it anywhere.

How come he did this?

What could the mother do about it?

4. Here was this baby who never cried, and never laughed, and didn't like to play. He just wanted to sit in the corner and not be bothered. He would make noises for himself, but that's about all he ever did.

How come he did this?

What could the mother do about it?

5. Here was a baby who had his toys but he would not share them. When the neighbor brought her baby to play with him, he would want all the things to himself, and if the other baby got anything he would yell about it.

How come he did this?

What could the mother do about it?

6. There was this baby who woke up during the night, upset and screaming. This happened not just one night, but several times, waking up screaming in the middle of the night.

How come he did this?

What could the mother do about it?

7. There was this baby who didn't want his mother to go out. He always wanted to be near her; wouldn't stay with anyone else; wouldn't even make up with anyone else.

How come he did this?

What could the mother do about it?

8. This baby always pulled things off the table, tore up the newspaper, broke things, and wanted to have his way.

How come he did this?
What could the mother do about it?

9. This baby used to be very friendly--he knew the people next door, and some of the relatives, and also knew the man in the store. But now he would have nothing to do with them--and isn't friendly at all.

How come he did this?
What could the mother do about it?

10. This baby was always trying to climb up on things, and to see what was in the cupboards. He liked to open closets and boxes, and look to see what he could find.

How come he did this?
What could the mother do about it?

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