The Cornerstone Treatment of a Preschool Boy from an Extremely Impoverished Environment

Thomas Lopez, Ph.D. and Gilbert W. Kliman, M.D.

MONROE WAS THE KIND OF CHILD FROM WHOM USUALLY LITTLE IS expected therapeutically. A member of a disadvantaged ethnic minority, he lived in the poverty of a big-city slum ghetto; as do so many children from such circumstances, he had as presenting problems marked intellectual retardation, a nearly psychotic degree of withdrawal, impoverished affect, and episodic difficulties with impulse control (Meers, 1970, 1973). The fact that his treatment ran dramatically counter to the usual pessimistic expectations makes the fascinating adventure it turned out to be especially worth reporting. It also is worth reporting because it serves as an example of the therapy of several dozen similar children treated by the Cornerstone method, all of whom have been helped.

The Cornerstone Method (Kliman, 1968), (1969), (1970), (1975), (1978) is an attempt, in the context of a community clinic, to integrate psychoanalytic therapy with the therapeutic nursery education of preschool children in order more fully to exploit the properties of each. A child psychoanalyst or psychotherapist works in the classroom alongside two teachers for about two of the daily three hours of class time, four to five days each week, with seven or eight children. The psychoanalyst or therapist treats the children individually right in the classroom, in sessions of 20 to 25 minutes; each child receiving three or more such sessions weekly.

The teachers simultaneously conduct a therapeutic nursery program. By means of affection, example, limit setting, guidance, and stimulation, they work to promote the children’s interest, skills, and talents; aim at taming their "drive" behavior in order to divert it into play, learning, and work; and encourage their gaining independence from primary objects by helping them to establish other relationships (Edgcumbe, 1975). The teachers also provide guidance for the children's parents. Where possible, each child’s parents are seen once weekly by a teacher, except for once every fourth week, when the therapist sees them.

The teachers and therapist also become involved in complex interactions with one another and with the children (Kliman, 1968), (1975), aspects of which can only be touched on in this paper. It is important to bear in mind, however, that a consistent effort is made to maintain the roles of therapist and therapeutic teacher separate: the former adhering as closely as possible to the interpretive stance of the psychoanalyst; the latter, to the stance of the therapeutic educator of the preschool child.

CASE PRESENTATION

Monroe was the second of three sons born to an impoverished black couple. When he was 2½ years old, his...
mother suffered a psychosis following the birth of her third child, who was born with a defect requiring a chronic tracheotomy. The mother's psychosis—about which no more than the most fragmentary information was ever included—delusional fears a man would enter her window and attack her. She was hospitalized for nine months and then treated by drugs, the dosage level of which induced her face to take on a masklike appearance and caused her to become grossly obese and slow in her movements. While she was in the hospital, Monroe and his brother, older by 2 years, were cared for by their father and paternal grandmother. The baby was placed in permanent foster care. When Monroe's mother returned home, his father moved out for good, and remained out of contact with the family, except for occasional visits. Throughout Monroe's treatment, neither his mother nor anyone associated with the case knew where his father lived, nor were they able to meet with him. The combination of father's absence and mother's condition made it impossible to gain information about Monroe's early development.

Monroe was referred by a daycare center as a result of his obvious profound developmental lags and grossly atypical behavior: he had little ability to relate to peers and adults; very sparse use of language (limited to occasional phrases such as, "I don't know" or "Thomas hit me"); grossly deficient capacity to learn; a withdrawn, detached appearance, interrupted only by occasional outbursts of obstreperousness; overall, a joyless lack of vitality. On intake, he was described in terms of wandering gaze, lax facial musculature, paucity of expressive interchange, impoverished affect, and scored an IQ (WISC) of 53. However, the examining psychiatrist (G.W.K.) noted some positive features. Monroe's receptive comprehension of verbal communication was at a higher level than his active linguistic expression: he readily brought a toy elephant and a yellow truck when asked to, finding them in the middle of a cluttered floor. On request he built an excellent tower of blocks with some 25 pieces. And he seemed very pleased at the examiner's admiration and encouragement.

Monroe began what were to be two years of Cornerstone method treatment at age 4. Prior to it, he had been seen individually by Mrs. H. Baskerville of The Center for Preventive Psychiatry in educational psychotherapy (Stein and Ronald, 1974)—an approach similar to that discussed by Weil (1973)—for some ten months, three sessions weekly. Educational psychotherapy, though it may have enhanced Monroe's response to treatment in the nursery, brought about no appreciable improvement in his functioning.

A "homemaker," a woman employed by the county, spent eight hours of each weekday with the family to help care for it. A "therapeutic companion," a female graduate student, was provided by the Center to spend time with the family, one day of each weekend.

**THE FIRST YEAR OF TREATMENT**

When Monroe arrived at Cornerstone, accompanied by his seemingly barely ambulatory mother and the homemaker, he fully fitted the description of him at intake. His eyes appeared glazed; his visage, like that of many institutionalized patients, blank; his affect flat.

However, in the very first session, when, in an attempt to make emotional contact with him, I cautiously rolled a toy truck to him, a somewhat livelier facial expression immediately developed. More important, Monroe rolled the truck back! I suggested we were getting to know each other. Monroe managed to smile through his sad vacant look and actually seemed delighted. Then he smiled broadly and rolled the truck to other people in the room: to the teachers, to his mother, and to other mothers, present because it was the first day of school. He responded to my remarking on his discovering other people eager to play with him with an almost uncanny show of ecstasy: he squirmed about the floor, seemingly trying to rub as much as he could of his body on it. A thing as
good as this, I commented, ought be made contact with by as much of one's being as possible.

Monroe quickly became more active. In the second session, he jumped off a table into my arms, declaring he was a baby and I his mother, and assigning to me the task of his caretaker. By the end of the first week, when another child was in possession of something or someone he coveted, or when the day's class session had come to an end, Monroe shrieked in a deeply pained, almost unearthly manner, though without tears. At the end of one session, he attempted to destroy the watch on a teacher's wrist, seemingly in an effort to halt the passing of time. Within two months, Monroe cried and wept continuously during the greater part of three sessions immediately following the three-day interruption of school.

Within a month of entering Cornerstone, Monroe became very difficult to cope with. He would kick, bite, spit, punch, scratch, and make a shambles of the classroom, create chaos and drive the teachers to near despair. He would ingest great quantities of food, storming the cupboard where it was kept or attempting to appropriate all of what had been set out for the entire class. When he was stopped and scolded, his frenetic activity might well dissolve in a flood of tears, as he would fervently hug and kiss his scolder, ask to sit on her lap and be cuddled by her. As infuriating as Monroe might be one moment, as lovable he became the next. In one session, he bit a very attractive female psychologist who had come to administer tests. Then he stuffed himself with pretzels and potato chips. My verbalizing that the recipient of his bite was a "yum-yum" brought forth ecstatic nods of agreement from Monroe. He then declared a wish to go camping with her in a nearby forest.

Despite the turmoil there was a general feeling that Monroe's condition was improving. Following his morning session in Cornerstone, he continued to attend the daycare center, where he was functioning better: he was following his teachers' instructions and getting on better with the other children. It appeared that the attention, tolerance, and affection—and, of course, the food—Monroe was receiving from the nursery were enabling him to feel more nourished and intact outside of it (Kohut, 1971), (1977). Confirmation came from a most unexpected source and for reasons that were astonishing: Monroe's mother, her pitiable appearance unchanged, volunteered that her son was improved because he seemed more lively and troublesome at home! While it was difficult to know to what extent she was suffering from mental illness, and to what extent from her drug treatment, it was clear that she was no longer actively psychotic. We failed in our efforts to prevent continuing overmedication to which she was subjected by a nearby aftercare clinic, but we were able to engage her in nearly weekly parent guidance.

Within three months, Monroe was affectionately feeding a dog outside the school; playing at being a fireman at the local fire station which we often visited at his request; proudly presenting Ms. Balter, one of his teachers, with splendid phallic structures made of blocks; affectionately hugging her while wearing a mask he had cut out of paper to disguise himself as a grown man; and once playfully urinating on her hand when she helped him with his trousers in the toilet. He emerged as the most competent among the children at cutting designs from paper, and radiated a charisma which made him very popular among his peers.

Nevertheless, Monroe's ego limitations were glaring. His thinking was so stimulus- or context-bound (Goldstein, 1939); (Werner, 1940), (1957), he was unable to engage in conversation because he could not, at will, call up relevant ideas within himself. For example, to deal with the fact that waiting for him to produce material

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1 T.L. was the analyst, supervised by G.W.K., the method's originator.
relevant to therapy invariably resulted in little more than his ignoring me, I would at times begin work with Monroe either by throwing him in the air and catching him, or by holding activities which delighted Monroe. When asked which he preferred, however, Monroe was unable to verbalize his choice, simply saying "yes" when I did so.

His affects had an unmodulated, all-or-none quality (Fenichel, 1941); (Rapaport, 1953). Rage, anxiety, despair, affection, happiness would emerge, dominate his entire being, and then recede only after they had seemingly exhausted themselves or in response to a dramatic change in the environment, such as a scolding, a cuddling, a frustration, or, at times, an interpretation.

the sound of his crying; the clinging torturing manner by which he related; his preference for drinking from a baby bottle; his occasionally becoming incontinent with regard to urine; the manner in which he sought adults' laps for increasingly took on the qualities of a toddler, frequently of a desperately grieved toddler. Time and again, on little or no pretext, or on one he had largely manufactured himself, he spent long periods crying pitifully on a teacher's lap. Gradually I had changed my approach and stopped the game of throwing him in the air and catching him so that we might work on "ideas." In response, Monroe clawed and hit at my watch. When I verbalized how terrible it was that good things, like our playing, come to an end, Monroe became desperate, pleaded to be given a baby bottle, and calmed only after he had received it. But when I verbalized the hurt "baby feelings" that had been stirred in him, Monroe again broke down into desperate crying and continued uninterruptedly for some 20 minutes. During this time Monroe repeatedly called for his mother and cuddled close to me while sitting on my lap. Presently, he picked up a plastic shell shaped like an egg split in half (a container for pantyhose), placed it on my chest, and mouthed and sucked it as a baby would a breast. At that time I attempted an interpretation that related his behavior to his mother's current psychically impoverished condition and past breakdown. I reconstructed: long ago, his mother became sick, and had to leave him to go to a hospital. He could not be with her, sit on her lap, or get "good feeling" from her. She still was very sad, slow, and difficult to feel close to. Now, when he is unable to get something he wants, the terrible pain of being unable to feel close to his mother comes up.

For the next four months this was the main line of interpretation. The results were dramatic. A way had become available for making sense of Monroe's internal chaos and desperation. Although the reconstruction may have been valid only in a "hazy way" (Valenstein, 1975, p. 63), and though they surely made use of much that Monroe had since pieced together from discussions with his mother and perhaps from other sources, dialogue became possible where previously only comforting and restraint could be resorted to. Material became accessible for understanding and mastery which otherwise almost surely would have remained out of reach. In one session, after having become furious at me for working with other children before working with him, Monroe ostentatiously ignored me when his own turn came. I verbalized Monroe's rejecting me as a retaliation, and said how difficult it was to wait for someone one wanted to be close to and how often Monroe must have felt and still feel rejected at home by his mother. He continued to ignore me. I then became more concrete. I first enacted Monroe's feeling rejected when I worked with other children, playing both Monroe's and my own role, and verbalizing his pain and anger. Then I enacted Monroe's trying to gain his mother's attention, imitating Monroe's and his mother's mannerisms and vocal qualities. Monroe

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2 Settlage and Spielman (1975, p. 46) offer a similar formulation.
abandoned his withdrawal. He alternated between furiously attacking me with spit, bites, kicks, and punches, on the one hand, and desperate crying, on the other. Finally, with great venom, he loudly accused me of being crazy. I pointed out that Monroe's mother had been crazy when he lost her, and might still seem crazy to him. Moreover, her withdrawn state might often make Monroe feel crazy. He sobered, went to a doll representing a woman, undressed it and caressed it. Then he twisted its movable limbs so that they became hopelessly tangled. I interjected that Monroe's mother had become all mixed up. Monroe dressed the doll and again caressed it. "How you love your mother and want to care for her," I commented. Again Monroe began to cry, but this time, instead of hitting out, he hugged and kissed me.

In many of the ensuing sessions Monroe continued to hug and claw me while crying desperately. I in turn attempted to facilitate Monroe's expressing his emotions. I verbally elaborated on the persistence in Monroe of "bottled up" feelings, which originally had been evoked by his mother's disappearance, and were still aroused by her withdrawn state. I imitated Monroe's and his mother's manner of speaking to dramatize their mode of interacting: Monroe seeking; mother unable to respond; Monroe becoming frantic. After a period of intense crying, Monroe usually became calm and sat quietly for a time, often continuing his sobbing with a teacher. During this period other material emerged:

1. Monroe ran out of the classroom, as if to escape. However, he quickly ran back in, said he was scared, and sought refuge in the arms of one of the teachers. In response to my comments on how frightening it must be to—how often he must want to run away, and then how terrifying the prospect Monroe volunteered a considerable amount of information about the baby whose birth had apparently precipitated his mother's breakdown. He said his mother had told him about, and had shown him pictures of, the baby. He described the hole in the baby's throat and told of his currently living with another family. In this interchange the concretistic quality of Monroe's thinking was not as evident. Invariably when he described matters which deeply engaged him, his thinking was less concretistic.

2. Monroe walked about aimlessly, seemed terribly sad, and said he was scared. He turned to me and pleadingly asked, "Who took my Mommy away?" To my question who he thought had done so, Monroe answered that he himself had. Then, extremely sad, he fetched a teacher's sweater and her apron. He went to a corner of the room, curled up on the floor, held them to his face, and sobbed. Relying on dramatization, I elaborated the idea that in his mother's absence, a child may try to hold onto things that belong to her, like her clothes. Perhaps Monroe had done so when his mother was away, and, to help tolerate her emotional absence, still did so. Monroe's crying became almost unbearably desperate. At times he literally clawed the walls. Several times he came to hug me, only to push me away as if I were not the person he was looking for. I commented that there are other people, but they do not easily replace the mother we love. Finally, tired from crying, Monroe hugged the teacher whose garments he had gathered. "It's so good to have a woman to hold and love," I said.

3. I took up Monroe's rejecting another child's efforts to befriend him in terms of his identification with his mother in her past and present rejection of him. He responded by asking who took care of him in her absence. I gave a completely factual answer to his question, feeling that such an answer would be the most helpful to Monroe's efforts to organize his experience (Buxbaum, 1954).

4. I related Monroe's crying at not gaining the attention of a teacher occupied with another child to the pain he felt when a person he loved was unavailable to him. He responded by crawling under my chair and declaring he wished to eat my feces. I then elaborated on the terrible drop in self-esteem and immense hunger Monroe...
felt when the person whose attention he was seeking was unavailable; on how lonely and hungry for his withdrawn mother Monroe must often feel. Next I used Monroe's wish to eat my feces to reconstruct that such a wish would have been a natural reaction on his part to the loss of his mother at the age of 2. Monroe emerged from beneath the chair and sobbed quietly while sitting on my lap.

5. I took up Monroe's ignoring me in terms of retaliation for my ignoring him while I was working with other children. Monroe fetched a set of keys from the teacher's desk and attempted to unlock the door to a closet. He claimed he was trying to release his mother from the hospital. In response to my saying how much Monroe had missed her, he sat on my lap, sucking and biting my chest. Then smiling, he tenderly combed my hair. Understanding Monroe's actions in terms of displacement, I acknowledged Monroe's love for his mother and his wish to care for her. I also underscored that although she no longer was in the hospital, she still seemed very much locked up—not in an institution, as she had been, but within herself. How often Monroe must want to unlock the barrier that separates them and sink his teeth into her.

6. Monroe kicked me in the stomach while vehemently calling me a "fucker," in response to my having interpreted his obstreperousness as a defense against painful affect. I linked his outburst to rage at his mother to have int and have the baby whose birth precipitated her breakdown. He furiously grabbed at my throat, thus enabling me to take up Monroe's rage toward the throat-damaged baby. Monroe sobered and became calm.

7. Seemingly in response to my having missed a week due to illness, Monroe again hit me in the stomach and called me "fucker." He also howled "Mommy" time and again while crying desperately. Again I acknowledged that Monroe understood that his mother's breakdown had been precipitated by the birth of his brother. I also pointed out that my own absence had aroused in Monroe feelings similar to those he had experienced when his mother was absent.

8. Monroe stared out of a window for a time, in an effort, he said, to find ambulances among cars he saw in the street. He then set himself to draw a face which he called "the Easter bunny monster." For the eyes, mouth, and nose, he drew holes. Asked to tell me about the drawing, he said the picture reminded him of his little brother and the hole in the latter's throat. He elaborated the similarity further with one of the teachers, after his time with me had ended.

Monroe's fixedness to a prephallic position was loosened considerably by this line of work. The four months during which it had been central were followed by nearly a month during which remarkably conflict-free phallic material and behavior were dominant. Monroe's despair and his obstreperous, provocative, sadomasochistic ways receded. They were replaced by his strutting about wearing a fireman's hat or an Indian headdress; demonstrating expertise in riding a tricycle; building handsome towers of blocks which he delighted in presenting to his teachers; proudly waving a flag at the end of a sizable stick; and lifting cardboard boxes by inserting the same stick into their handles. He often assumed a very "manly," responsible role in the nursery: he eagerly volunteered to do chores, such as serving food during snacktime, or cleaning up. Frequently, he assisted smaller or less able children. Once he stopped a fight involving two other children.

A clear yearning for a paternal figure he might love and admire—in whose strength he might participate—began to emerge. He frequently requested that we take walks and on these occasions displayed great skill in attracting the notice of the neighborhood "father figures." At the fire station, firemen patiently
demonstrated their fire-fighting equipment to him. Construction workers similarly displayed their shovel-wielding techniques. A guard at a nearby museum we occasionally visited allowed himself to be placed under arrest by Monroe, who had dressed himself to look like Batman. Often, following an interaction in which his self-esteem had been raised by participation in the manly strength with which he had endowed me, Monroe made romantic overtures to one of the teachers. In addition to employing his impressive displays of phallic power to woo them, on one occasion he shyly presented a teacher with a necklace he had patiently constructed from beads and thread.

Then a shift in the material occurred. What had been an ebullient seeking of association with men to gain a feeling of strength became rigid, compelling, and clearly defensive in character. It became a means of escaping in the nursery, from closeness to the teachers. When I became aware of this shift, I began to frustrate Monroe's desire to go into the neighborhood to seek men and focused on his need to take flight. Monroe's reaction was dramatic. Outbursts of chaotic ambivalence returned full force: hitting, throwing, spitting, and biting on the one hand, desperate clinging and crying on the other. He fell frequently, on occasion hurting himself. Once he threatened to jump from a balcony in the school's stairwell, and was convincing enough to cause the teacher accompanying him to become quite frightened.

The turn of events was, at first, puzzling. My focusing on Monroe's longing for a father to rescue him, and on guilt causing him to turn aggression against himself, as manifested by his suicidal gesture, was probably at least partially valid, but it seemed not truly to hit the mark. Finally, information conveyed by Monroe's therapeutic companion shed light on what was happening. His mother's condition had deteriorated. She had become even more inert and less involved with her children. This information was now made use of in working with Monroe, and care was taken that his home was visited weekly. (The therapeutic companion had missed a week, leading to the delay in my gaining this information.) A closer tie with the homemaker was established.

For the next two months, the further deterioration of his mother's condition was the main focus of my work with Monroe. His experience and expression of pain became more intense, but our work appeared to be effective in helping him to cope. I shall describe in detail three sessions from this period. They illustrate that despite the dreadful grimness of the situation, Monroe's grip on it actually improved.

1. Following a day when I had been absent, Monroe frenetically insisted that we leave the classroom and visit the fire station. Ms. Schnall, the head teacher, nonjudgmentally reported that prior to my arrival that morning, Monroe had been demanding all manner of food he knew he was not permitted and creating chaos when refused. As Ms. Schnall spoke, he became even more insistent that we go out. When I linked the behavior his teacher reported to his yearning for the emotional nourishment his mother's involvement might provide him, and which she now was even less able to give, Monroe became truly beside himself. He hit, bit, spit, and attempted to turn the classroom upside down. I caught him and placed him atop a closet where I could maintain him relatively immobile without actually sitting on him. Ms. Schnall now added that on the previous day Monroe had cried frequently and had asked for his mother. I commented that Monroe must also have missed me, whereupon Monroe broke down in a flood of tears. I verbalized how painful it was for Monroe to live with a mother as unresponsive as his, and to be a whole day without a person, like myself, with whom Monroe was able to have good feelings. I also commented that if only his father were with the family, Monroe might gain some relief from his mother's emotional absence. For a time Monroe's crying did not decrease; then, perhaps as a result of fatigue and discharge, it abated, and he asked for a baby bottle. He spent the next half hour sucking on it, while cuddled on Ms. Schnall's lap.

2. This session, from the middle of this period, illustrates Monroe's increasing symbolic elaboration. He again...
began by requesting that we visit the fire station, but he was no longer frantic. I reiterated the importance of our staying in the classroom to work on issues we might otherwise avoid. Seemingly appreciating my position, Monroe began to play with a baby doll. He declared he was its mother, and alternated between affectionately bathing and caressing it and blandly throwing it about the room; carefully applying talcum powder to it, and bizarrely burying it in the powder. I wondered whether Monroe could trust his mother to care for him; not to hurt him; even not to kill him? Monroe, very serious, looked up and said, "Don't take my Mommy away." I focused on Monroe's fear that if he told me what his mother was like, this might well cause her to be taken away. I then linked these fears to Monroe's angry wishes to be rid of her, which his mother's withdrawn, frightening state aroused in him. Monroe walked about aimlessly for awhile. Then he wandered to where clothes used by the children as costumes were kept. He dressed in women's garments—a hat, high-heeled shoes, a shawl—but in such a way as to make himself look ridiculous, accentuating this appearance by the manner in which he carried himself. I interpreted that Monroe was conveying how mixed up his mother seemed to him. Again, Monroe dissolved into tears, and this time pleaded that I be his mother. While holding him, I elaborated on the pain of his situation.

3. The next session is taken from the latter part of this period. In what had by then become almost a ritual, Monroe began by requesting that we visit the fire station. My usual refusal, for the usual reasons, brought on demands for cookies and, when these were refused, another of Monroe's colossal storms of obstreperousness. Again, I contained him by placing him atop the closet. While crying desperately, Monroe positioned himself on my shoulder, much as a baby being burped by his mother. As Monroe cried, he dribbled saliva down my back. I said he seemed like a baby, and asked him why he was crying. Through sobs Monroe answered, "I'm crying for my Mommy." He gradually calmed down as I focused on the baby feelings stimulated in him by his mother's worsened condition, then asked to get off the closet, and returned to ground level with the other children. Behaving more maturely, Monroe appeared to create a family of his own. He protected a smaller boy, whom he called his brother, from attack by a larger boy. Then he rested his head on a teacher's shoulder, and "jokingly" called her "Mommy." I verbalized his enactment and enumerated the terrible things that had happened to his own family. As I spoke, Monroe once again was unable to maintain his composure. He broke into tears and ran to raid the food cupboard. When he was prevented by a teacher, he furiously hurled everything he could lay his hands on at her. His fury, however, soon gave way to fear and then to a desperate affection, as he hugged and kissed her when she succeeded in holding him. He then hugged and kissed the other teacher, several of the children, and me. I reflected on how painfully empty within it makes a little boy feel to love his mother so, and have her to unable to return his love.

Presently new stresses burdened Monroe's beleaguered ego. The Cornerstone Therapeutic Nursery remains in operation 12 months a year. When summer came there were vacations and substitutions of the nursery's teaching staff. Ms. Balter announced she would be leaving permanently in early July. Despite these losses and changes, Monroe did not substantially deteriorate, though his dramatic storms recurred. Previous work clearly had provided him with an enhanced capacity to cope. Monroe had learned to use the nursery as a family which was fluctuant but generally reliable and enduring. He clearly came to understand that in it he could safely express and experience the agony within. As his affects remained accessible to his ego, mastery of his inner life continued.

A few days prior to my own one-month summer holiday, and about one month following Ms. Balter's departure, Monroe began a session by telling me explicitly that his mother had seemed very sad that day. He then played with a toy ambulance, aimlessly rolling it about. I verbalized both

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Monroe's sadness and his recurrent fear that his mother would again be hospitalized. Monroe responded by placing a toy sheep in a small rectangular wooden box, the lid of which he shut. The resemblance of the box to a coffin led me to take up Monroe's fear for both his own and his mother's life. Monroe began to cry softly, but he did not fall to pieces. He hugged and kissed two teachers; then sat quietly sucking a baby bottle and listening to a story. I commented only that Monroe was bearing his terrible situation better all the time.

In another session, just after the children had been informed of the nursery team's summer vacation schedule, I began working with Monroe while sitting on a wooden ladder laid horizontally between and bridging two climbing frames. Monroe ran under me, shouting, "Move your big but!" I did not, instead suggesting to Monroe that we examine the ideas that emerged. Monroe responded by poking his head up into my buttocks. He said that he wished to pull down my trousers so that he could go into my "butt" and get my "doo." I stopped Monroe from undressing me, and with great formality indicated to Monroe that children of his age were able to use words in place of actions. I then drew a pair of large buttocks on the blackboard and offered him a board eraser in place of feces. Monroe refused it, insisting it stank.

To elicit more material, I went along with Monroe's maneuver. I cried pitifully at his refusal of my fecal gift, and loudly protested that Monroe did not care for me at all. Monroe, sensing victory, now refused my gift even more strenuously, declaring for all to hear that its stench was horrible. As my crying achieved "uncontrollable" intensity, Monroe ran behind Ms. Herzog, the teacher who had taken Ms. Balter's place, hugged her around the hips, and stuck his tongue out at me.

I commented that Monroe seemed to be saying he did not need my buttocks. Ms. Herzog's were softer, more like his mother's. Ms. Herzog gently stroked Monroe's head and showed absolutely no sign of discomfort. I elaborated my understanding of what Monroe was communicating: Monroe was experiencing the coming vacation of the nursery's team, on the one hand, as an anal rejection of him, as if he were feces, causing him to try to "reenter" my anus, and, on the other, as a rejection at the anal level of his own gifts of love, of his fecal products. Moreover, he was defensively turning passive into active by becoming the rejector. I also linked this material to its roots in the anal phase of Monroe's development and to his mother's illness, which had occurred during that phase. Monroe listened quietly, his receptiveness greatly enhanced, I felt convinced, by his identification with his teacher's comfort with what was being said.

THE SECOND YEAR

When I returned from vacation, Monroe at first withdrew emotionally, but by the second day became angry, tearful, obstreperous, and difficult to manage. Several times he lost control of his urine in class, something he had not done for some time. However, within a week and a half, his behavior indicated that he had in fact not deteriorated in my absence, but rather was reacting to my return. The following session marked a turning point: Monroe was supplied with a fresh pair of trousers after he had urinated in his own. Embarrassed, he sat sullenly, staring straight ahead. When I sat next to him, he looked up and called me "stinky." I accepted Monroe's externalization, pretended to cry, and wailed that Monroe did not like me. No longer withdrawn, Monroe railed at me, insisting that he did not like my smelly feces, and inducing other children to join him. My pretending to be further driven to despair made Monroe wild with power. As was his wont, he proceeded to wreak havoc in the classroom, knocking furniture and toys about. I caught him and held on to him. I interpreted his having felt discarded like feces by me during my absence, and again related these feelings to similar ones he had when his—which dramatized to improve my

Monroe broke into tears and cried terribly for some ten minutes. Seemingly spent, he became quiet. Then he fetched a stick and furiously tried to hit first me and then a child with it. When I again
contained him and urged him to express himself verbally, Monroe asked to be taken to the toilet. On the way he stumbled and had a painful fall down the stairs. I comforted him, and interpreted his rage at having been left, his guilt over his own aggression, and his turning this aggression against himself by hurting himself. Monroe hugged me and again cried pitifully, to which I responded by once more emphasizing how much Monroe had missed me.

After the toilet, at Monroe's request, we went outside and came upon a group of physically impressive workmen digging a large hole. Monroe looked longingly at them for some time. At intervals, he whispered to me that he wanted to handle one of their shovels. Finally, a workman noticed him, and Monroe had his wish fulfilled. As we walked back to the classroom, Monroe asked me to carry him, and again cried, this time softly and sadly. I verbalized Monroe's desperate longing for a man to help him feel strong and good about himself, and I related this longing to his having missed me.

Once Monroe's relationship with me had been reestablished, this session turned out to be the beginning of a period of progress, sustained throughout the year. Monroe achieved a level of functioning far superior to what had been possible for him previously. Soon after this session, it became commonplace for Monroe to strut about the classroom waving a flag; wearing masks he had cut out of paper, representing children's current superheroes; and imitating the shovel-wielding men at whom he had so movingly stared. It became especially commonplace for him to eat great quantities of food in an effort, he said, to make himself big; and insatiably to ask me to throw him in the air and catch him.

Monroe turned to women for support of his emerging phallic self. On one occasion when Ms. Solomon, the teacher who had permanently replaced Ms. Balter, failed to attend him, he impulsively kicked her in the face. Shocked and hurt, she responded first with anger, then with withdrawal. Monroe was shaken and frightened, until my verbalizing of what had happened helped his teacher regain her composure and again relate to her charge. Greatly relieved, Monroe hugged her and apologized. Then after sucking from the barrel of a toy gun, he delivered a dramatized rendition of Superman to his now attentive teacher. On other occasions, when women observers were present, Monroe cavorted exhibitionistically before them in ways that ranged from demonstrations of athletic prowess to ogling at them like a grossly undersized King Kong.

Sexual wishes manifested themselves in other ways: Monroe invented a way of making bow and arrows from plastic drinking straws, and affectionately shot these at the teachers and children. He delighted in my drawing a Valentine heart with an arrow through it, as an aid in interpreting the loving connotation of his activity, and also in my underscoring Monroe's getting people to "fall for him," as they often playfully did when hit by one of his arrows.

Monroe created family groups and situations, assigning roles of mother, father, and son to himself and to the adults and children whose participation he enlisted. For example, Monroe had been playing family with two other boys, assigning himself the role of "baby," to one of the boys the role of father, and to the other boy that of mother. When his turn came to work with me, he asked to visit the fire station, but stipulated that he and I be accompanied by Ms. Solomon. Monroe walked between us, holding h an obvious an obvious continuation of his play with the boys. He proudly told us that his father was planning to buy him a tricycle. This was the first hint we had of his father's reappearance.

After a very successful visit to the fire station, Monroe set about digging for a "brown snake," which he said
lived in the ground outside the classroom. He declared he wished to bite the snake, and also to keep and hide it. When it did not materialize, he angrily beat the ground with his spade. I suggested that he was searching for his father, the man with the brown penis, who was so hard to find. Monroe was serious for a time, then said he wished Ms. Solomon would come to live at his home. I interpreted that Monroe's thought might be: if Ms. Solomon lived at his home, his father might be persuaded to live there too. He must feel it was his mother's illness that had caused his father to leave. Monroe nodded sadly.

After some quiet contemplation, Monroe noted that Ms. Solomon, now with another boy, lacked a spade with which to dig. He lent her his. Then, almost manly in his demeanor, he demonstrated his prowess at running up and down a nearby hill. If

Monroe could not have his father, I interpreted, he could act in fatherly ways toward others.

20 points higher than on intake. As the year progressed, his intelligence appeared steadily to improve; he probably would have scored even higher by the end of the year, had it been possible to retest him. He displayed leadership qualities as he organized other children for dramatic play, or to hunt for insects and worms which after capturing he placed in paper cups. He exuded an air of competence and became so helpful with less able children and teachers, that he earned the title, "Dr. Monroe Macher." The classroom took on the quality of home for him. He even set himself the responsibility of keeping the grounds immediately outside of it free of debris. Late in the year, he conveyed a clear recognition of his parents' intellectual retardation. Wearing a mask he had cut from paper, Monroe enacted robbing a bank. He planned to use the money, he said, to buy food with which to fill his refrigerator. However, he planned to hide whatever money remained from his parents. He feared his mother would either burn it or wash it down the sink, and his father might leave it on the street where it could be stolen. I underscored Monroe's belief that he was the cleverest person in his family. He responded by hugging me affectionately, in clear appreciation of having been understood.

In the latter part of November, unexpectedly, Monroe's father emphatically entered the scene. By way of the therapeutic companion, we learned that he had come unannounced, without a word had taken Monroe and his brother with him, and had kept them at his home for the four-day Thanksgiving weekend.

The stay with his father truly moved Monroe. He described it with delight in the immediately following sessions, conveying affection for the woman who was living with his father and telling of outings the four of them had had together. Guilt over his pleasure soon intruded, however: Monroe began calling himself a "bad boy"; enacted a thief attempting to evade the police; took prohibited food from the cupboard, clearly in order to be caught at it; and once hurled himself headlong into a large garbage can. In the course of several sessions, I took up Monroe's guilt in terms of his feeling disloyal toward his mother for wanting to

3 Mannoni (1972) and Berger and Kennedy (1975) present similar material.

leave her and live with his father. Monroe met my attempts at first with protest and avoidance, but then with a kind of resigned, sad acceptance.3

A new spurt in the direction of positive development followed. During the next three weeks, Monroe showed a greater seriousness about his schoolwork and again made use of me (e.g., rides on my shoulders) as a fueling base
for his phallic forays.

Then, as unexpectedly and unannounced as the first time, Monroe and his brother were once more taken by their father for ten days, including Christmas. On this occasion, however, it was possible to elaborate his experience considerably, because material relating to it remained central for two months: Monroe talked of what had occurred at greater length than he had after his first visit. He described the appearance of his father's apartment and of the room he and his brother had slept in. He told of how kind the woman living with his father had been: she read bedtime stories, gave them medicine when he and his brother's tummies hurt, and cooked tasty meals for them. He told of the four of them having gone fishing. In class he rendered elaborate and sustained dramatizations of family groups and situations, enlisting both adults and children clearly efforts to recreate the familylike situation he had enjoyed with his father.

However, as had been true after his first stay with his father, Monroe's good feeling frequently gave way to painful affect and outbursts of crying. He often hurt himself by falling and mishandling toys. Repeatedly he would be overcome by a depressive mood. At the core of his pain was the conflict over his wish to leave his mother and be with his father. In one session he called me, in another, one of his teachers, "Mom." On each occasion, as if to escape, he then ran to the telephone and frantically but randomly dialed it, in an effort, he said, to reach his father. Each time, when there was no answer, Monroe lapsed into helpless crying, allowing me to put my understanding of what he was saying into words. I was also painfully moved by Monroe's enacting the part of my son, after he had disguised himself as Caucasian with the help of a mask he had cut out from paper.

Monroe's efforts to separate psychologically from his mother manifested themselves in another striking way. The final nine months of his treatment were marked by good progress interspersed with episodes in which he would call desperately for her—sometimes insisting that her hospitalization or even her death was imminent. Vomiting, complaints of stomachaches and head pains, painful minor accidents, and another threat to jump from the balcony on the stairwell outside the classroom accompanied his tears. However, no relationship between these episodes and his mother's actual condition could be discerned from home visits and interviews with her.

It dawned on the nursery team that the key to understanding these episodes lay in Monroe's concretistic mode of thinking, causing intensely experienced ideas to become confused with reality. Thenceforth I related these episodes interpretatively, not to Monroe's mother's imminent departure, but rather to Monroe's own efforts to detach himself psychologically from her both by functioning independently and by going beyond her inadequate mentation. In each instance my efforts were rewarded. Monroe regained his composed rather quickly and resumed his progressive development. For example, Monroe was carrying on in his all-too-familiar provocative, obstreperous, sadomasochistic manner in a session which followed one in which he had responded to an attractive female observer by being stimulated to ecstatic heights of phallic exhibitionism. When I focused on this shift in his material, Monroe sobered, turned to me, and said, "My brother killed my Mommy and sent her to the hospital." I verbalized Monroe's wish to be rid of his mother, especially after having been exposed to the visitor of the previous day, his guilt over this wish, and his displacing responsibility for it onto his brother. Monroe stopped and nodded sadly. He then engaged in a variety of activities, including instructing a boy with a tested IQ of more than 130 on how to make bow and arrows out of drinking straws; hugging a teacher and two children affectionately; and playing at being an Indian warrior battling imaginary adversaries on the nearby hill.

In early May, Ms. Solomon announced that she would be leaving the nursery within a month. Monroe's coping with her departure conveys something of the progress he had made. He acknowledged the fact and pain of it, and at the same time demonstrated a readiness to seek and accept substitutes. Initially, he
responded by stuffing himself with food and by angrily shouting obscenities. Soon, however, a more complex response emerged. In one session, I attributed Monroe's being especially difficult with Ms. Solomon to her leaving. Monroe responded by hugging and kissing her and then by proposing that I marry her. I interpreted: "Since I was not leaving, if Ms. Solomon and I were married to one another, she would not be leaving either." Monroe developed a surprising variation on this theme in the following week. When his turn came to work with me, he hurled obscenities first at Ms. Schnall and then at me, but he ostentatiously ignored Ms. Solomon. When I became the target of Monroe's abuse, I gradually moved closer to Ms. Solomon in an attempt to undo the displacement. The strategy worked as Ms. Solomon soon became the unequivocal focus of Monroe's rage. Monroe loudly declared he hated her for leaving him. But when I interpreted the pain underlying Monroe's anger, he melted, cried, hugged his beloved teacher— and more! He proposed another solution. He would marry Ms. Solomon, and I would be his and his bride's child. Accepting this role, I focused on the dilemma small boys find themselves in. Because they are not able to marry, they repeatedly lose the women they love so dearly. Monroe sadly agreed, but that did not stop him from further elaborating his solution. He enacting being caring and affectionate to the family he had created and set up a home for it. He took me, as his son, for a walk, gave me money, and bought gifts for me. Finally, he built a handsome phallic structure of blocks for Ms. Solomon, his wife.

In a later session, Monroe submitted yet another solution. He had been withdrawn and in a melancholy mood, but intermittently he launched into angry verbal tirades against his teacher for leaving him. When I verbalized his grief and anger, Monroe stuffed rags under his shirt in the region of his chest and announced elatedly that he had breasts just as Ms. Solomon did. I focused on Monroe's identification with his soon-to-be-lost love object, and took the opportunity further to explicate Monroe's depleted state prior to treatment by stressing his earlier identification with his barely available, depleted, intellectually retarded mother.

On Ms. Solomon's last day, Monroe loudly proclaimed he wanted nothing to do with her because she was leaving. Then the teacher who was to replace her entered the classroom for a visit. Monroe already knew her from several occasions on which she had substituted for a temporarily absent teacher. Ascertaining that Ms. Solomon was aware of him, he flamboyantly presented the new teacher with a plant he had taken from the windowsill. When I verbalized that thought he was losing a person he loved, he was looking forward to a new relationship, Monroe became very sad. He placed a chair in front of a window, sat on it and stared into the distance. I focused on Monroe's not wanting to look into the room where Ms. Solomon would no longer be, and on his staring far away where she would shortly go. Monroe turned to Ms. Solomon, tried to smile, but, finding the effort beyond him, ran and enclosed himself in a large metal box. I did no more than put into words the pain of it all.

In the session that followed, Monroe openly and soberly verbalized how much he missed Ms. Solomon. Then in appreciation of love objects still present, he went around the room kissing each of the children, the teachers, and me. Smiling, he announced that he had "other friends."

Monroe's treatment ended shortly thereafter. In August, without warning, his mother moved with him and his brother to a rural area in the South to be with her own mother. A letter sent them by registered mail was received, but there was no reply. A half year later, however, another letter was sent, and this time there was a reply! Monroe's grandmother wrote, stating simply that the family was doing well. Perhaps more important, Monroe wrote back! In his letter he demonstrated that he could spell his first and last names and write the numbers from 1 to 20. Three and one half years later, just prior to publication, we reached Monroe's mother by phone and, through her, his school and teacher. Though she did not have a recent IQ score available, the latter said: "If you treated
him, you must have cured him. He's a most wonderful, outgoing little boy. He talks like a cricket, and is most enthused about learning. Though he was placed in a learning disabilities class, and left back one grade, we're going to move him up to grade level. He's too smart to be left back. If he keeps up his enthusiasm, he should easily keep up." His mother, in a very lively voice, said that she and the children were "happier than ever" and doing well. She added that she had wanted to visit Cornerstone for some time, but had not had the would be good for Monroe and his mother, it seemed, was being fulfilled. The team also suspected that the move was a successful escape on the mother's part from her debilitating chemotherapy.

**DISCUSSION**

Contrary to what might all too easily have been assumed, Monroe's treatment established that he was not a child who had been catastrophically deprived and unalterably damaged by life with a mother whose personality had been profoundly impoverished throughout. Rather it showed him to be a child, living in the dismal conditions of a big-city slum (Meers, 1970), (1973), (1975), who in addition was impinged upon by three monumental interferences with his early development (Nagera, 1966): (1) at the age of 2, he lost his mother for nearly a year due to her psychosis; (2) then he was forced to live with the barely recognizable shell of her former self who returned to him; (3) on her return he lost his father and his paternal grandmother, leaving his heavily sedated, pitifully inert mother as sole caretaker.

The detachment, passivity, and flat affect he manifested on intake became clarified as states into which he had to withdraw in order to survive in the grimly unsupportive circumstances in which he lived (Kliman, 1977). Joffe and Sandler (1965), discussing detachment, the third of three phases described by Bowlby (1960) as children's reactions to prolonged separation from love objects (protest, despair, and detachment), aptly state:

*Whereas in the phase of despair we can discern a general inhibition of both id and ego functions, in the phase of detachment we can postulate a partial lifting of the generalized inhibition which is characteristic of the depressive response. This is made possible by a form of ego restriction, in particular a restriction of attention and a flattening of feelings. It shows itself in a devaluation of the unique affective importance of the mother or indeed of any object. The child settles, so to speak, for its actual state of the self. It is a type of resignation which can be seen as an attempt to do away with the awareness of the discrepancy between actual self and ideal self, and in this*

response to a separation expe

"detachment" may occur even in situations where there is no actual separation, but rather chronically inadequate mothering [p. 409f.].

The gross interferences which impinged on Monroe's development, in combination with his environment's failure to compensate for them, caused the basic integrity of his very young personality to be profoundly undermined. His ego became inundated and overwhelmed by diffuse anxiety, the pain of narcissistic collapse, and unintegrated, unneutralized libidinal and aggressive strivings. It could do little more than capitulate and retreat one in which substantial detachment from his mother and from the object world were central. The alternative surely would have been even greater psychic disintegration and damage (A. Freud, 1967); (Kohut, 1971), (1977). For, stultifying of his capacity for life though it was, Monroe's detached state also performed a protective function. It acted to diminish, to dull, the amount of stress his environment could inflict upon him.

In Cornerstone, Monroe's pathology began to reverse itself. Efforts on the part of teachers and analyst to gain
access to the "person within" Monroe resulted in his forming increasingly strong attachments to them. Nurtured, sustained, and enhanced by interpretive work and by analytically informed acceptance, these new ties began to provide him with the empathic, caring objects of which his life was so starkly devoid. Detachment began to life. Aided by the presence of a supportive environment (Aichhorn, 1925), he began to reexperience his despair and thereby to diminish it. As hopelessness lessened, for the first time in more than one year, Monroe became able to protest, and protest he did! Potentials for interacting with the world about him (Erikson, 1950) were stirred from dormancy. Since he had been so little exposed to the taming effects of participation in social life for so long, their awakening was accompanied by repeated storms of intense affect (Fenichel, 1941); (Rapaport, 1953). Time

and again Monroe ran rampant, made a shambles of the classroom, and became generally very difficult to control. But he had come to life! The beauty of his rebirth helped the nursery team to endure.

With Monroe's self revitalized, the social world (Erikson, 1950) — the world of love objects beyond that of his depleted mother — also became revitalized (A. Freud, 1951). Incentives to "improve his relationship" to it (Hartmann, 1939), to resume development (Aichhorn, 1925); (A. Freud and Burlingham, 1943); (A. Freud, 1960), were activated. For only by so doing could he hope to reside in this more vital world he was becoming increasingly aware of, and increasingly able to love.

indeed, Monroe's whole inner world, largely inactive behind this revived inner world by therapy, Monroe's ego was stimulated to efforts to master its chaotic state. Thereby his ego also was stimulated to greater differentiation and development (A. Freud, 1936).

The treatment which Monroe underwent in Cornerstone can be thought of as having two distinct, though highly related foci: one, its basically nonanalytic, "upbringing," educational aspect; the other, its more specifically psychoanalytic aspect.

With regard to the nonanalytic aspect, it became commonplace for Monroe to use teachers, analyst, and children to create familylike situations and relationships, in an effort to compensate, however partially, for the terrible deficiencies of his home environment. Spurred and sustained by the teachers' and analyst's pride in him (Mannoni, 1972); (Berger and Kennedy, 1975), Monroe strove to become more adept in the realms of language, cognition, and social interaction. He became, in a sense, "addicted" to his new love objects, nourished more and more preferentially through them, and increasingly reactive to them as objects for identification and as auxiliaries to his own ego functions.

This manner of using objects was substantially enhanced, we believe, by the concerned, nonjudgmental way in which teachers and analyst routinely discuss each child, right in the child's presence, immediately before and after the child works therapeutically

with the analyst. These interchanges give the child, often for the first time in his or her life, an experience of being thought and cared about by two collaborating adults. Further, they promote verbalization and self-observation in the child by contributing to a group-supported atmosphere in which talking about one's feelings and about what motivates one's behavior is the accepted norm. The discussions, at the same time, give the analyst the advantage of broad knowledge about recent events or behavior and often about themes the child has been developing with one of the teachers immediately after or before working with the analyst. Never, in our experience, has a child objected to these discussions.

There are many values in the "teamness" of the therapy, not only for the children, but also for the analyst and
teachers. The team members support and provide narcissistic supplies for one another. This helps counter the
development of "burnout," emotional fatigue, and depletion, which are otherwise likely to occur when therapists
deal for years with large numbers of depleted patients.

Finally, we would like to underscore a special feature of the Cornerstone method, one amply illustrated by this
case. The analyst's interpretations, as they do in individual treatment, appear to release in the patient considerable
quantities of libido and aggression. But instead of becoming available only for further analytic work, as these
energies are in individual treatment, in Cornerstone they are provided with a therapeutically novel opportunity.
They can immediately become employed in intense relating to the teachers and other children. These
relationships, in turn, provide the child with myriad opportunities for sublimation and structure building, both in
the social and in the cognitive realms (Rapaport, 1960); (Lustman, 1970). The value of these opportunities for
Monroe is strongly implied in the way in which he explored the environment in and around Cornerstone; took
pride in and tended to its upkeep; charmingly and skillfully courted his teachers; constructed headdress, bow and
arrows, and necklaces; and in the end vigorously asserted himself as rational, social, and dignified, rather than
remaining the depleted, dull, unsocialized, almost "feral" child he started out as.

We are convinced, however, that the nonanalytic aspects of the

Cornerstone method could not by themselves have accounted for Monroe's coming to life in the way he did.
Otherwise, the educational therapy offered him during the previous year, together with the provision of daycare,
homemaker, and therapeutic companion, should have had more evident value than it did. In our opinion, the
crucial difference lay in the analytic approach. Indeed, we believe it was the analytic work which permitted the
nonanalytic aspects of the treatment to be effective at all.

Our reasoning is as follows. By the time Monroe began treatment the stress and deprivation to which he had
been subjected had rendered his capacities to make use of empathic understanding and narcissistic supplies
defensively inoperative. We mean by this that under ordinary, i.e., nonanalytic circumstances, Monroe could no
longer "open up" to people. He could no longer benefit from people's affection, support, or generosity, however
well intentioned. Analytic work was required to lift Monroe's pathogenic defenses so that his needs and capacities
could again become operative and available to him. Once these were operative and available, analytic work was
required to maintain them against persisting resistances, to permit working through.

Consistent with this view is the experience one of us gained in supervising Monroe's very dedicated
educational therapist during the year prior to his entering Cornerstone. Two factors seemed central in the minimal
impact educational therapy made on Monroe to deal, without herself withdrawing emotionally, with Monroe's
primitive chaotic material. The other was educational therapy's inability as a method to cultivate and work
through a transference illness.

A transference illness was, however, in our opinion, activated and cultivated in Monroe. His analytic
treatment evoked in him a condition in which all of the basic elements of his previous pathogenic experiences and
pathology were repeated, though in a form which was entirely new. From at least the age of 2, Monroe was
chronically subjected to object loss and deprivation as a result of his caretaker's emotional withdrawals and
absences. These

though, of course, in highly in all likelihood for the

on experiencing his desolate aloneness, Monroe was responded to in a consistently empathic
form of affect storms and intense, persistent crying, or at times in the form of violent, destructive, and near-suicidal behavior. The illness, in turn, was responded to neither with emotional withdrawal nor with efforts to tone it down. Rather, teachers and analyst worked to help Monroe tolerate, understand, and conquer it. They made themselves affectively and physically available to provide Monroe with a holding environment (Winnicott, 1965) that would enable him to express and experience his illness. Further, his transference illness was analytically interpreted to him, in order to help him gain insights into its topographic, economic, dynamic, genetic, and adaptive aspects.

As far as we know, Monroe's stormy behavior in Cornerstone was unprecedented in his life prior to treatment. We believe it had the quality of what Blos (1972) referred to as a latent infantile disorder, which for the neurotic patient is an infantile neurosis. According to Blos, this infantile disorder or illness is activated only by analysis, is a product of analysis, and is not to be equated with an actual preceding childhood illness. It is an iatrogenic illness, but one which seemed essential to accept and cultivate in order to help Monroe.

The view that his crying, storms of affect, and his pain placed a therapeutically unfruitful strain on his already all-too-fragile ego has been put forth by some who know our work with Monroe. In our view, however, the center of Monroe's pathology was not a precarious balance between ego and id which could easily be overthrown by a large influx of affect. Rather, we saw as central to it a psychic apparatus massively depleted of libidinal and aggressive energies. Amelioration was possible only through Monroe's suffering the pangs of love and hate aroused by the transference and "real object" ties fostered and maintained by the Cornerstone personnel and treatment situation. It is well to remember that Monroe's tearless shrieking of the early sessions turned into tearful crying only after he had become emotionally attached to the Cornerstone personnel. Thus, it was his ability to experience himself and others as more fully human that made the communicative, discharge, and self-soothing functions of tears relevant and active (Greenacre, 1965); (Löfgren, 1966); (Kliman, 1978). A related view has been put forth, that Monroe's affect storms and intense crying were little more than ways on his part to protest against the agonies being stirred in him by the analytic work. We regarded them, however, as indicative of revivals in the transference of past agonies, which earlier in his life had led to despair and detachment. They were consistently interpreted accordingly. Monroe's response to these interpretations with steady improvement in his condition seems to lend support to our view.

We believe that the affective intensity which accompanied Monroe's crying actually had an enlivening effect on his psyche, and that its pain was more than compensated for by the positive experience it gave him in causing him to feel more alive. This is attested to by the fact that throughout Monroe made no prolonged effort to avoid analytic work. He was generally enthusiastic about his sessions with the analyst, usually clamoring loudly for his turn to come. He also produced ever more elaborate material in the course of his episodes of crying, which in turn permitted consistently more elaborate interpretations. A period of intense crying during a session with the analyst was usually followed by a period of calm, during which Monroe often cuddled with one of the teachers, and his appearance took on a more "normal," affectively richer quality.

In this regard, it also was striking that we received no complaints from his mother, homemaker, or therapeutic companion about Monroe having become especially difficult to manage at home, as might be expected from his opening up in Cornerstone. On the contrary, his mother expressed being pleased by his greater liveliness. It is possible that Monroe's long experience of living with a withdrawn mother had taught him to expect and demand very little from her. It is also possible that once his condition had improved, he knew better than to put extra pressure on her, and he turned to others or even to himself for
comforting and gratification. We feel, however, that our understanding of the situation is too limited to permit us to make a confident formulation.

Interpretation as a therapeutic tool played a key role in Monroe's treatment throughout. At the beginning it was instrumental in setting therapy in motion by helping to overcome his resistances to relating and by helping to overcome his defensive flight taking. Dynamic, genetic, economic, as well as transference elements entered the interpretive work. Genetic reconstruction, especially of his mother's breakdown, was of great importance in helping Monroe to achieve increased mastery over the archaic affective chaos, narcissistic injury, and conflicts rooted in his chronic deprivation. It was of great importance in making explicit and thereby promoting his efforts to compensate for the gross deficiencies of his early environment, at the same time making more understandable the gross deficiencies of his current environment.

had to be relied on to a greater extent than is usually the case, to determine whether or not interpretations were reaching Monroe, given his initially limited intellectual and verbal capacities. During the first period in which the analyst heavily relied upon reconstructive interpretation, the extremely dramatic, affective discharge responses were considered the main indicator of its effectiveness. Monroe almost immediately changed from acting obstreperously in the service of maintaining emotional distance from objects or driving them into states of helplessness. Instead he became a boy experiencing profound pain, pain which motivated the very opposite kind of behavior. Instead of trying to keep distance from human objects, Monroe began turning to them in desperation, to gain comfort, affection, and support. At times the analyst could now infer the correctness of interpretations on the basis of Monroe's responses in symbolic play. For example, Monroe twisted a female doll's arms in every which way, in a "crazy" manner, in response to the analyst's interpretively linking his chaotic behavior in the classroom to his mother's formerly psychotic, currently withdrawn, "crazy" states. At other times the analyst inferred that Monroe understood his interpretation on the basis of affective responses. For example, following an interpretation Monroe might calm down and take on a sober appearance; or the opposite, he might become aroused or agitated as a result of affect released by the interpretation.

Modifications in the basic technique of child analysis were required by Monroe's pronounced tendency to defensive flight from intimacy, and by his stimulus-bound mode of thinking (Werner, 1940), (1957). The analyst's persistent, highly active, indeed stubbornly intrusive refusal to be "shut out" by Monroe (Radford, 1972); the analyst's relying heavily on dramatization to bring Monroe's material concretely to life; and the analyst's allowing, indeed encouraging Monroe to hug and claw at him as the inner chaos emerged these were, in our opinion, of greatest importance as parameters.

which the context of the nursery classroom made less threatening than it might have been, in counting Monroe's overriding tendency to detachment. Without it, we believe, it would have been impossible to gain his attention and to involve him in a significant relationship. Monroe's detachment, like that of so many other pseudoretarded ghetto children, constituted a "Maginot line" of resistance which had to be circumvented, in part even overwhelmed, before he could utilize interpretations. The analyst's use of parameters such as initiation of play, employing dramatization, and accepting, at times even encouraging, physical contact are not unlike those used by many child analysts to reach psychotic or withdrawn children.

The high degree of dramatization employed by the analyst also helped to compensate for Monroe's concretistic thinking. It acted to provide a cognitive framework in which Monroe's emerging material could "fit," much as
Goldstein's (1939) brain-damaged patients could conceive of a phenomenon such as rain only if it actually was raining. The dramatization also enhanced dialogue and gave boosts to Monroe's self-esteem. On the one hand, it provided him with relief, albeit at first only temporary, from his stultifying inability to communicate with other relief to which he reacted early with grateful elation (Freud, 1905) and increased responsivity. On the other hand, it provided him with the privilege of seeing his thoughts and ideas spur other people, adults and often children, into lively, fascinating enactments. In these, the existence and value of his inner life were graphically mirrored.

Finally, the analyst's physical availability in the classroom ten hours each week concretely diminished Monroe's sense of being alone and overwhelmed by inner chaos. It provided his overtaxed ego with the auxiliary it needed in the palpable way he needed it. Without it, we believe, mastery by means of repetition, interpretation, and working through could not have occurred. Though, at the end of two years, Monroe was clearly far from being a "normal" child, during no appreciable period in the time he was in Cornerstone did his functioning fail to show continual improvement.

In our approach we were fortified by our previous experience with detached and seemingly retarded blind children who appeared to be unlikely candidates for any form of psychoanalysis (Lopez, 1974) and by previous successful Cornerstone work with pseudoretarded ghetto children (Kliman, 1969), (1970) who ordinarily would not be treated analytically. We hope that this report will in turn fortify others who work with the far too many children in circumstances similar to Monroe's. We also hope it suggests the value of the Cornerstone method as an application of child analytic techniques integrated synergistically with therapeutic education.

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