

VIEWPOINTS

Projective Identification: From Klein's Original Formulation To Bion's Theory Of Thinking

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Projective identification is one of the central yet most complex concepts in psychoanalytic theory. First introduced by Melanie Klein within the framework of the paranoid-schizoid position, the concept underwent significant theoretical expansion in the work of Wilfred R. Bion. This paper provides a detailed reconstruction of the development of projective identification through Klein's published and unpublished writings, as well as its transformation in Bion's theory. Klein conceptualized projective identification as an unconscious fantasy in which parts of the self are split off and projected into an object, with the aim of control, evacuation, and preservation of both good and bad aspects of the self. Archival material reveals that Klein initially framed the phenomenon within the broader context of splitting and only later formally named it. Bion further extended the concept by emphasizing its communicative function and its role in the development of thinking, introducing the container-contained model and the transformation of beta elements into alpha elements. Through clinical examples, particularly in psychotic states, Bion demonstrated how disturbances in projective identification lead to attacks on linking and impairments in thought processes. The paper highlights the conceptual continuity and divergence between Klein and Bion, ultimately presenting projective identification as a fundamental mechanism bridging emotional experience, object relations, and cognition.

1. Introduction

Melanie Klein first introduced the idea of projective identification in 1946 in her seminal paper *Notes on Some Schizoid Mechanisms*, in which she described the paranoid-schizoid position as a fundamental early developmental configuration.¹ However, it is important to note that the now-famous sentence—"To refer to these processes I recommend the term projective identification"—was not included in the original publication, but only appeared in the revised 1952 version of the paper.²

Although Klein had long entertained the idea that children possess unconscious fantasies of entering the mother's body, it is in this text that she explicitly connects these fantasies with the mechanism of projection. She conceptualizes projective identification as a complex unconscious fantasy in which parts of the self—particularly unwanted or "bad" parts—are split off and projected into the mother or her breast. These projected elements

are often associated with excrements and are intended not only to evacuate unwanted aspects of the self but also to control, possess, and transform the object into a representation of the bad self.¹

At the same time, Klein emphasizes that not only bad parts of the self are projected. Good parts are also expelled and projected into the object, where they may function as gifts and contribute to the establishment of positive object relations and the strengthening of the ego.¹ This dual movement complicates any simplistic understanding of projective identification as merely defensive or destructive.

Despite the somewhat tentative way in which Klein initially introduced the concept—and her own later concerns about its possible misuse³—projective identification became one of the most widely used and influential concepts in psychoanalysis, extending far beyond the Kleinian tradition.

A key theoretical issue concerns its distinction from projection. According to Segal, Klein clearly differentiated between the two: projection is a mental mechanism, whereas projective identification is a specific type of unconscious fantasy that is expressed through projection.^{3,4} Unlike Freud's concept of projection, projective identification necessarily involves splitting and the projection of parts of the self, not merely impulses. Crucially, these projected parts are not experienced as lost; rather, they are felt as entering the object, maintaining an ongoing connection between subject and object.

2. Bion and the Communicative Transformation of the Concept

Wilfred R. Bion accepts Klein's view of projective identification as an unconscious fantasy but extends it significantly by emphasizing its interpersonal and communicative dimensions. He observes that individuals may project feelings in such a way that the recipient—most notably the analyst—comes to experience these feelings and feels compelled to respond to them.⁵

Bion writes:

*“I think that the experience of counter-transfer has a considerably different quality to the analyst and varies whether the analyst is or isn't the object of the projection... The analyst feels manipulated and that he is playing a role in someone else's fantasy...”*⁶

This formulation marks a crucial shift: projective identification is no longer understood solely as an intrapsychic defense but as a dynamic interpersonal process that shapes the analytic relationship.

In a clinical example, Bion describes a session with a psychotic patient in which he experienced intense fear of being attacked. He later interpreted this fear as the patient's projection of his own murderous impulses. When

the patient re-introjected this fear, he became afraid of committing the act himself.^{4,7} This illustrates how projective identification can function as a mechanism of emotional communication and transformation.

3. The Emergence of Projective Identification in Klein's Work

3.1. The 1946 Formulation

In the original 1946 paper, Klein describes the process in strikingly concrete terms:

*"Together with these harmful excrements, expelled in hatred, split-off parts of the ego are also projected on to the mother or, as I would rather call it, into the mother..."*¹

She continues:

*"These excrements and bad parts of the self are meant not only to injure but to control and to take possession of the object..."*¹

And further:

*"It is, however, not only the bad parts of the self which are expelled and projected, but also good parts of the self..."*¹

These passages clearly articulate the essential features of projective identification, even though the term itself appears only once in the text:

*"...weakening and impoverishment of the ego resulting from excessive splitting and projective identification..."*¹

Only in 1952 did Klein formally introduce the term as a conceptual label.²

3.2. Insights from Unpublished Archival Material

Unpublished notes from 1946–47 provide valuable insight into the development of Klein's thinking. Notably, she refers to the work as "my article on splitting," suggesting that projective identification initially emerged as a derivative of the broader concept of splitting. These notes elaborate several key themes. First, both good and bad parts of the self are involved in projective identification. Second, projection and introjection operate simultaneously and reciprocally, producing persecutory anxieties both within the self and within the object. Third, the development of a stable sense of identity depends on the successful internalization of a good object. Finally, excessive projection leads to a weakening of the ego.⁴

Klein's clinical material vividly illustrates these processes. In one case, a patient who experienced satisfaction with analytic progress simultaneously feared that his longing would lead him to intrude violently into Klein's mind.

He expressed somatic symptoms such as feelings of squeezing and respiratory difficulty, which were linked to fantasies of entering and exiting the analyst's body.⁴

Her theoretical reflections are equally evocative:

"A vampire likes sucking. Sucking is sadistic in character."

This formulation highlights the dual movement inherent in projective identification—taking in and putting out—as well as its roots in early oral-sadistic impulses.

3.3. Projection, Introjection, and the Formation of Identity

Klein emphasizes that projection and introjection are inseparable processes. Their interaction generates complex patterns of anxiety, particularly persecutory anxieties in which the self feels both invaded by internal objects and threatened by external ones. The sense of identity is built around the internalization of a stable good object. When this process fails, the individual is left with chaotic patterns of intense but poorly integrated introjections and projections. One way of forming a stable internal object is through identification processes, including projective identification itself.⁴

However, excessive projection—whether of good or bad parts—can lead to a depletion of the ego, resulting in fragmentation and instability.

3.4. The Paranoid-Schizoid Position and Early Development

Klein situates projective identification within the broader framework of early development. From birth, the infant relates to the breast as the primary object, which is split into good (satisfying) and bad (frustrating) aspects. Early anxieties, rooted in the death instinct, birth trauma, and frustration, are experienced as fears of annihilation and persecution. These anxieties give rise to defense mechanisms such as splitting, idealization, and denial.¹

Importantly, Klein argues that the ego cannot split the object without simultaneously splitting itself. Although these processes occur at the level of unconscious fantasy, their effects are experienced as real, leading to disruptions in emotional continuity and object relations.

3.5. Projective Identification and Schizoid Object Relations

Projective identification plays a central role in the development of schizoid object relations, which are characterized by oscillations between idealization and persecution. Individuals may establish relationships in which others become carriers of projected parts of the self—either idealized or denigrated. Guilt emerges when the child recognizes that the loved and hated object are one and the same. This leads to attempts to displace guilt onto others, while simultaneously maintaining an unconscious sense of responsibility toward

them.⁸ Such relationships are often artificial and lacking in spontaneity, reflecting disturbances in both the experience of the self and the perception of reality.

3.6. The Depressive Position and Integration

The transition to the depressive position marks a crucial developmental achievement. As the infant begins to perceive the object as whole, the integration of love and hate becomes possible. However, this also intensifies anxiety, as the infant fears the loss of the loved object due to its own destructive impulses.⁸

This position introduces the capacity for guilt, mourning, and reparation. Successful navigation of the depressive position leads to greater ego integration and more stable object relations. Failure to do so may result in regression to the paranoid-schizoid position and increased psychopathology.

4. Wilfred Bion: Attacks on Linking

In *Attacks on Linking*, Bion describes projective identification as a mechanism used to evacuate destructive elements of the psyche:

*"...projective identification [is] the mechanism employed by the psyche to dispose of the ego fragments produced by its destructiveness."*⁵

Through detailed clinical examples, Bion demonstrates how patients attack the links between thoughts, objects, and meanings. These attacks may manifest as disruptions in communication, hallucinations, or emotional withdrawal. He shows how envy and hatred toward the capacity for understanding lead patients to destroy not only the object but also the very possibility of thinking.

4.1. The Container–Contained Model and the Theory of Thinking

Bion's most profound contribution lies in his reconceptualization of projective identification as a developmental mechanism underlying thinking itself. In the normal developmental scenario, the infant projects unbearable emotional experiences into the mother, who functions as a container. Through her capacity for reverie, she transforms these raw experiences (beta elements) into thinkable forms (alpha elements).⁹

Bion writes:

*"...the infant's cry... [expresses] the fear that the child was dying... He strove to split it off... and project it into the mother."*⁵

If the mother successfully contains and transforms these projections, the infant gradually develops the capacity for thinking, symbolization, and emotional regulation. In pathological conditions, however, this process fails. The infant experiences the object as rejecting, leading to excessive, evacuative projective identification and the destruction of links between thoughts. This results in profound disturbances in thinking and learning.^{5,10}

5. Conclusion

The concept of projective identification evolves from Klein's formulation as an unconscious fantasy rooted in early developmental anxieties into Bion's conception of a fundamental communicative and cognitive process. This evolution reflects a shift from a primarily intrapsychic model to an intersubjective and developmental framework. Projective identification emerges as a central mechanism linking emotion, object relations, and thought. It plays a crucial role not only in psychopathology but also in normal development, forming the basis for communication, symbolization, and thinking itself.

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Conflict of interest statement

The author declares that there is no conflict of interest.

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