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Observation of a Phobia[1]

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This observation was made of a child who came to the Hampstead Nursery at the age of 7 weeks. It was therefore possible to get a fairly coherent picture of the factors which contributed to her disturbance.

At the age of 2 years, 5 months, Sandy woke up screaming in the early evening shortly after falling asleep. She insisted that there was a dog in her bed and it took a long time to calm her down. From the next day on she showed an intense fear of her bed and a few days later she started being afraid of dogs in the street, getting into a panic whenever she could discern a dog even at a great distance. It was about one month before these difficulties were finally overcome.

Here are the main facts of Sandy's development up to the time of the occurrence of the phobia.

Family History. Sandy's father was killed in a road accident while serving in the army, before Sandy's birth. Her mother held a clerical job with the borough council. Finding this work dull, she first combined it with the activity of an air-raid warden and afterward gave it up altogether to become an ambulance driver. Still later she learned to ride a motorcycle and acted as a dispatch rider. She enjoyed these masculine activities and usually wore some uniform with trousers, but she was also a very devoted mother. She felt particular affection for Sandy, born after her husband's death. She came almost every night to put Sandy to bed and when she was too late from work for that, she at least came to kiss her goodnight and bring her a biscuit or a piece of chocolate.

There were two other children, a girl 7 years older than Sandy and a boy 2 years older. Both were evacuated. The girl died of meningitis when Sandy was 2 years old.

Physical and Intellectual Development. Sandy's physical and intellectual development were normal. She was a daintily built child with ginger hair, greenish-blue eyes and a delicate complexion. People's opinions differed greatly with regard to her looks and attractiveness. Some visitors and new students picked her out at first sight as one of the most attractive and charming children of the nursery, while others found her plain and of unpleasant character.

Instinct Development. When Sandy was 4 weeks old her mother had a breast abscess and Sandy was immediately given the bottle. Mrs. H.

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1 Read at Anna Freud's Seminar for workers in Education and Child Guidance, December, 1946.

2 When the last follow-up visit was made, Sandy was 4 years, 8 months. She was still sucking her sheet.

told us that at that time Sandy took to it at once. However, when she came to the nursery 3 weeks later she was found to be a poor eater, and when vegetables were introduced into her diet she became increasingly difficult with her food. Her only pleasure at mealtimes consisted in smearing. Gradually the eating difficulties diminished and when Sandy was about 18 months old they were entirely overcome. Sandy was a very persistent sucker. At 2 months she sucked her first, by 3 months, mainly her napkins and clothes. This habit she kept up for a long time. During her second year the hem of her dress was always wet from sucking and when she left the nursery at the age of 2 years, 7 months, she still did not go to sleep without a corner of the sheet in her mouth.[2]

Sandy's habit training was easy. She was reliably clean day and night by 2 years, 2 months. After her napkins had been left off during the night and during her afternoon nap, Sandy was occasionally observed to masturbate in bed.

Sandy was very attached to her mother. She had no difficulty in establishing a relationship with me when I became her mother substitute at the beginning of her 2nd year.[3] She was also quite ready to show affection to other workers who took care of her or to the visiting mothers of other children.

At the end of her first year Sandy was the most aggressive child in her group. She had to be put into a playpen by herself to save the others from her attacks which consisted mainly in violent hair-pulling. She showed a peculiar expression during these outbursts. Watching other children of this age in an aggressive act, one gets the impression that they feel happy and relieved in gratifying their instinct; quite often they accompany their attacks with a radiant smile. Sandy's face was tense and hostile, which gave the impression of a tinge of maliciousness. It was probably for this reason that some people disliked her. Sandy hardly ever appeared to be really happy.

Though there can be no doubt that Mrs. H. loved Sandy, there was an element of aggression in her handling of her which brought out an aggressive component in Sandy's response. For instance, when Sandy was about 5 or 6 months old, her mother, while changing her, used to tickle Sandy with her hair. Sandy, whose skin was especially sensitive and who had been ticklish from the age of 3 months, got very excited on those occasions and pulled her mother's hair. Mrs. H. accepted this laughingly as part of the game. At that time Sandy always smiled when playing in this way with her mother. A few months later she started to pull the children's hair and was reproved for doing so. It is possible that it was at this time that she changed the smiling expression with which she had up to then accompanied the hair-pulling, to a hostile one.

Later on, toward the end of Sandy's first year, Mrs. H. started to play a new game with her. When she came to visit Sandy, she approached her only slowly and hesitatingly, leaving her for some time in doubt; as to

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3 For the organization of family-groups in the Hampstead Nursery cf. A. Freud and D. T. Burlingham *War and Children*, 1943, and *Infants Without Families*, 1944; Allen & Unwin, London, and Internat. Univ. Press, New York.

whether she would really come or not. Sandy reacted with great excitement. Another game was to offer her a piece of chocolate or a biscuit and to withdraw it again before giving it finally to her.

In the beginning of her second year, Sandy started to tease others in the same way that her mother used to tease her. She offered some object to people she was fond of and when they were nearly touching it, she threw it as far as possible in the opposite direction. These teasing games seemed to replace her more direct aggression. When direct outbursts of aggression did occur Sandy got very upset if reprimanded. There was also a marked change in her general behaviour. She became more gentle and affectionate and seemed much happier than before. She also started to make constructive use of toys, which up to then she had been merely throwing about.

At the same time Sandy developed a tendency to turn her aggression against herself. When blamed for pulling another child's hair, she frequently started to pull her own. Once she was observed pulling her hair with one hand and stroking it with the other one. She also played the teasing game with herself and this went so far, that for many weeks she would not take a biscuit or a piece of bread offered to her on a plate, without alternately approaching and withdrawing her hand for several minutes.

At the time of the flying bombs (June, 1944) Sandy was evacuated to the country house.[4] After a difficult initial period, she settled down well there. She returned in October, when she was nearly 2 years old. She had not seen me for 4 months, but recognized me at once and seemed rather embarrassed. She quickly became attached to me again; there seemed to be no difficulties with her mother either, who had visited her there. At that time Sandy appeared relatively stable emotionally.

About 3 months later, Sandy made a relationship with another worker, which reminded us of her earlier teasing games. She started hitting this worker with a defiant, aggressive expression, alternating between suppressed and then open laughter, and demonstrations of affection. Apart from these occurrences which were not very frequent, Sandy did not show any excessive aggressiveness, either in her relationships to adults or to children. She seemed to be very interested in the male workers and tried to attract their attention. Her relationship to her mother and me were good. She got very upset if another child was aggressive toward me in her presence. When told that she could not have or do something she wanted, she quite often replied very sensibly: "All right". Temper tantrums were not very frequent. Sandy started nursery school at this time. She made a good adjustment, becoming deeply absorbed in picture books and Montessori material.

These are the events which seem to have a direct bearing on the formation of the phobia:

In *December, 1944*, when Sandy was 2 years, 1 month old, she became consciously aware of the difference between herself and a boy. Growing

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4 The third house of the Hampstead Nursery: "New Barn", Lindsell, Essex for children from 2–10 years. During the time of the flying bombs the children from 5, Netherhall Gardens, were sent there.

up in a nursery she had always had the opportunity to see little boys and girls without their clothes, but up to that time had never, so far as I know, been in any way impressed by the difference between them.

One day a small boy of about 2½ years was brought for his afternoon rest to the group to which Sandy belonged. Before lying down, he used the pot, urinating in a standing position. Sandy stood next to him, watching intently. She had not seen this happen before as the boys in her own group were still in the nappie-stage. A short time after she had made this observation, Sandy asked for her pot and tried to use it holding it up in front of her. When she could not do so she was very dissatisfied; she lifted her frock, showed her genitals, and said something like "bicki" in a demanding voice. "Bicki" was a word she used at that time for desirable things generally. She repeated this several times, becoming more and more urgent in her demand. In the end she nearly cried. The following days she tried again to urinate like a boy, insisting that I should hold the pot for her and getting cross with me because it did not work. She refused to sit down, and though she wanted very much to use the pot, I could finally only persuade her to do so by pushing it from the front in between her legs to the back. I tried to explain to her that only boys could urinate standing up. During the following weeks Sandy showed less open concern in the matter and by the middle of *January* she had entirely given up her attempts to urinate in a standing position. But her interest in the difference of sex remained. When looking at pictures she distinguished carefully between the boys and the girls, and when she met a strange child she referred to it as a boy or girl.

Another important event in Sandy's life occurred in *March*, when her mother had to go to the hospital for an operation. Mrs. H., who up to then had come nearly every day, stayed away for 3 weeks. Sandy occasionally mentioned her with the words, "My mummy sweetie, my mummy chocki, my mummy bicki," remembering the good things her mother had brought her every night. Otherwise Sandy did not appear in any way disturbed. When Mrs. H. came back, she was in very poor health, she walked with great difficulties, leaning on a stick. Sandy greeted her with great affection. Mrs. H. came for 2 evenings. She could not bath Sandy as usual, but she played with her and gave her sweets. Then she left London for convalescence. Whenever during the next days Sandy passed the little room where she had been with her mother on the evening after her return from the hospital, she said, "My mummy in there", and going inside, she touched the armchair where Mrs. H. had been sitting, saying, "My mummy chair". As during her mother's first absence, Sandy did not show any outward signs of distress.

In the beginning of *April* Sandy had another unpleasant experience. While I was bathing her she pushed a piece of soap into her genitals. She was very much upset and frightened at the resulting pain and it took a long time to clam her.

It was in the night from the 13th to the 14th of *April* that Sandy had the nightmare, which marked the beginning of the phobia. From that day I kept daily records from which I am quoting now.

13.4. After being put to bed Sandy was restless and appeared to be

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5 As an air-raid precaution all the children at 5, Netherhall Gardens, slept in the basement which had been converted into a shelter. The beds were arranged in 2–3 tiers. The children in the upper tiers were protected by a net.

upset about something. The nurse on shelter-duty thought that she was frightened of the weight hanging down in front of the shelter door, which she could see moving from her bed.[5] She was taken outside the shelter and shown the moving object on the door. After that she quickly feel asleep. A very short time afterwards she woke up, screaming with terror. She told the nurse a dog was in her bed. Sandy cried for nearly an hour before she fell asleep again.

14.4. When I came to Sandy this morning, she pointed to a crack in the backwall of her bed through which the light from the next shelter was shining and said, "Doggie; doggie sleeping." Then she lifted the mattress, apparently looking for something. During dressing Sandy was obstinate and aggressive and she stayed bad-tempered and difficult all through the day. In the evening, when put to bed with a piece of chocolate which her mother had sent, Sandy seemed at first quite cheerful. Then, as if suddenly remembering something, she sat up, pushed her feet through the net trying to get out of the bed, and cried out in a panic, "Out, out, out, doggie coming". After I had taken her out, she indicated that she would like to lie in one of the big bottom beds. Her own was a small top bed. She said, "Big one bed," and let me put her in. But she got out again after a little while and stayed sitting up with the nurse. Only much later could she be persuaded to go back to bed.

15.4. Sandy's anxiety began to mount as soon as bedtime approached. She said repeatedly, "No bed, doggie coming." She tried putting off going to bed as long as possible until she finally agreed amid tears to lie down in the big bottom bed.

16.4. The second morning after the nightmare Sandy received me barking. She obviously thoroughly enjoyed pretending to be a dog. But when during the same day a little boy played at being a dog, crawling on all fours and barking, Sandy became desperate with fear.

Sandy was still more difficult than on the previous days, unable to bear any "no" from me. Her aggressiveness reached a peak at bathing time, when she started to hit me wildly. After that outburst she seemed to feel guilty, came back and patted me, uttering affectionate sounds. This evening Sandy could not have the big bed she had occupied the previous nights, as the rightful owner had returned from a holiday. We found her another bottom bed, but it was a small one. Sandy was very unhappy, talked of the doggie and asked for the "big one bed".

17.4. When getting ready for her bath Sandy grew anxious again. She repeatedly said, "No bed." Then sitting on the bench in the dressing room with another worker and me standing in front of her, Sandy undertook a thorough inspection of her genitals. She was deeply absorbed in this activity and did not take any notice of our presence. The worker told her that everything was all right there and that all girls looked like that.

A little while later I found Sandy sitting on the pot, drinking from a mug of water. She was saying to herself, "No doggie shelter, no doggie shelter, Sandy water, not doggie water." She repeated these phrases

innumerable times. But in spite of her efforts to reassure herself she got frightened again as soon as she was in the shelter. No bed was big enough for her and it took some time before she went to sleep.

18.4. On the way to the nursery school some of our children started to play with a strange dog. I explained to them that he might bite if they frightened him. After this little incident all the children, Sandy included, greeted every dog we met with cheerful shouts: "Doggie!" Neither on this nor on the previous days had Sandy shown any fear or even particular interest in the dogs we met in the street. When we had nearly reached the nursery school, Sandy started talking excitedly. First there was a jumble of words: "Doggie, bite, boy, Bobby, mummy, ballie." Then Sandy said quite clearly, and nearly breathless from the longest sentence she ever produced, "Doggie bite naughty boy leg." Immediately afterwards she repeatedly showed her finger, unhurt, saying: "All better."

19.4. Today Sandy refused to play at being a dog. I had encouraged this game after she had started it by herself 2 days after the nightmare. When I wanted to make her play it today by making barking noises, Sandy stopped me and asked me to imitate a cat instead. For the first time she showed fear of a dog in the street. She also talked again about a dog on her way to the nursery school. It was an unintelligible story, the only distinct words in it being doggie and knickers. Sandy again tried to urinate like a boy. To my knowledge this was the first time since her attempts 5 months ago.

... And now Sandy extended the difficult and aggressive behaviour which she had shown since the nightmare to the nursery school. As already mentioned she had made a very good start there 2 months previously, being especially interested in books and Montessori material. From now on she hardly showed any interest in quiet constructive occupations. The only activity she really enjoyed was the handling of hammer, nails and saw. These tools were almost exclusively used by two very aggressive boys. Sandy, like these boys, did not pursue any constructive purpose in her play with the tools. But it gave her intense pleasure to hammer very hard, her face lighting up while she did so. When she could not have the tools, she clung to me, asked to sit on my lap and would not let me leave the room. She cried frequently and tried to provoke people by deliberately doing things which were forbidden.

21.4. The next phase in Sandy's disturbance was marked by her concern about the intactness of her own and other people's bodies. After the encounter with the dog, she had tried to reassure herself by repeating that her finger was "all better". Three days later she came crying out of the bathroom, telling me that she had hurt her feet. She took one slipper off, noticed some fibres from the lining sticking to her sole and said in a disgusted tone, "Dirty." Then she contemplated her big toe with an anxious expression and I had to assure her several times that it was "all better". In bed Sandy was restless and anxiously touched her genitals. She settled down after I had assured her that everything was all right there. Then she touched my ear and hair saying, "Annie ear, Annie hair." I enumerated the parts of my body and of her body and explained that we had all the same things because we were both

girls. Sandy listened carefully, said, "All right," and was quiet for a little while; then she suddenly burst out talking, repeating again and again the same sentences, "Lydia ill, Margy ill (two little girls who had been in the sickroom for several days), my Mummy ill, my Mummy come back, my Mummy walkie again;" then in a questioning voice, "Sandy ill?, Annie ill?" and again, "My Mummy back, my Mummy walkie" in between something about "doggie", which I did not understand. I reassured Sandy about everybody's health and especially impressed upon her the fact that her mother would soon come back and take her for walks as she could now walk very well again.

During this conversation Sandy was lying quietly under her bedclothes holding my hand. In contrast to the previous evenings she objected only slightly to being left alone and did not make a fuss when I finally went.

22.4. The morning after this talk Sandy received me in a disgruntled mood. She said in a weepy voice, "Bite Annie, bite." I asked, "Where bite?" She lifted her nightie, pointed to her genitals and said, "There bite." Then while going up the shelter stairs Sandy examined my finger and remarked, "Annie all better." (There had been nothing wrong with my finger.) When I was doing her hair Sandy insisted on having a bigger hair-ribbon.

In the evening Sandy quickly got under the bedclothes saying, "No doggie bed, Sandy bed." Then she became very affectionate, kissed me and repeated several times, "My own Annie." This she followed up with a repetition of our conversation from the previous day, when we had compared the different parts of our bodies. Sandy started with our clothes saying, "My own dressing gown, Annie's own apron," etc. After enumerating several other things we had in common, Sandy pointed to my glasses with the words, "Where my glasses?" She was however easily persuaded that glasses are not an essential part of a person's body.

23.4. Today at bathing time Sandy investigated her navel with an unhappy face. In bed she pointed to her genitals, making worried sounds, and after she had already been covered up, she suddenly cried out, "My legs, my legs," holding both her legs.

24.4. Tonight Sandy extended her worry about her body to her bed. She had just settled down and I was still sitting with her. Sandy had taken hold of my hand and was vigorously sucking her sheet. Suddenly she started to cry miserably, "My bed, my bed!" I adjusted the sheet and Sandy tried to go to sleep, but every few minutes she started up crying, "My bed." I reassured her about the intactness of all parts of her body and explained again in detail the difference between girls and boys. While I was talking Sandy had become very quiet and did not protest when I left her.

27.4. Sandy showed concern about her bed for 3 or 4 nights. The first night, nothing I did with the bed could satisfy her, but the next evenings she was contented when, upon her request, I arranged the bedclothes neatly. Once she looked anxiously under the mattress, as if afraid the dog might be hidden there.

... It is interesting to consider at this stage Sandy's worry about an imagined damage to her body, in contrast to her lack of concern about real accidents. One day (23.4.) she scratched her foot in my absence

and was treated with gentian violet. She did not remark about the incident to me. Another time (29.4.) she was watching a child having a bath and fell into the bathtub. She had a bad fright and trembled all over when we got her out. But after she had been put to bed she talked quite cheerfully about the accident and it was the first evening since the nightmare that she went to sleep without showing any signs of anxiety. It is possible that it was just the lack of any visible damage that was an essential feature of the dreaded "illness". Obvious injuries and accidents did not concern her.

There are some indications that Sandy regarded her imagined injuries in the nightmare as a punishment. After the incident with the dog in the street she commented, "Doggie bite *naughty* boy leg." Another day while she was in her bath she proceeded to soap her face and continued to do so in spite of my prohibition. Suddenly she broke out into desperate screams, "Soap in mouth!" This was pure imagination, but she still made a fuss about it when she was in bed and calmed down only after I shone a light into her mouth, assuring her that there was no soap to be seen. Sandy actually had a sore throat that day and it is possible that she suddenly became aware of it and brought it into connection with the act of putting soap into forbidden places. She may have remembered her former experience with the soap in the genitals.

30.4. Encounters with dogs in the street continued to be unpleasant, though Sandy tried hard to reassure herself. On one occasion she clung tightly to my hand at the sight of a dog, calling out: "Doggie not bite my coat, not bite my hat!" Today Sandy got into a panic when on the way to the nursery school a dog appeared around a corner. Only the dog's head was visible and this at a distance of about 50 yards. Sandy shouted in despair, "Doggie not bite!" She started the day at nursery school in a state of upset, but played later on quite happily with a doll's pram. I asked her whom she had covered with the blankets. She produced a dog. I said, "A doggie." Sandy replied, "No, pussy-cat."

1.5. On the 1st of May, a fortnight after the nightmare, Sandy's mother came back. She had not announced her return previously and her arrival was a surprise for Sandy. The first I saw of mother and daughter, was Sandy on Mrs. H.'s arm, smiling and waving goodbye to me. Mrs. H. looked well and walked without difficulty. While, in the process of getting Sandy ready for her first walk with the mother, I was adjusting her knickers, Sandy remarked, "My knickers;" then she tried to look under her mother's skirt, asking, "Mummy knickers got?"

Sandy returned very happy from her walk. Her mother bathed her and took her down to the shelter. Sandy let her mother put her into bed without objection, lay down immediately and did not ask for anybody's company.

... With the mother's return Sandy's fear of going to bed had disappeared. Mrs. H. told me that there were never any difficulties. As Sandy spent most of the time with her mother during the next fortnight, I saw very little of her. So I cannot tell whether she had also ceased to worry about her body.

Her fear of dogs still persisted. Then exactly I month after the nightmare and a fortnight after the mother's return Sandy overcame this fear as well. When on the way to the nursery school we met a dog

who was on a lead. Sandy at first made a withdrawing movement, then she approached the dog hesitatingly. When another dog came into sight, Sandy walked directly toward him and barked.

This was the end of the actual phobia. But the behaviour difficulties that had accompanied it still persisted.

Further Development. After the house at 5, Netherhall Gardens had closed down (June, 1945), Sandy went to live with her mother and came to the nursery school as a day-child. There she was still one of the most difficult children, unable to concentrate and trying hard to provoke the adults in charge.

I left the Hampstead Nursery a few days after Sandy had gone to live with her mother; whenever I came to see her in the nursery school or in her home she was very pleased, but I do not think that she missed me, as she now had her mother. Her attachment to her mother, with whom she shared a bed, grew very intense. Mrs. H. was delighted with Sandy's demonstrations of affection, but she complained about her falling asleep late and waking early in the morning. When Mrs. H. brought her to the nursery school, Sandy's screams could be heard a long time before she reached the nursery. The separation from the mother was a new tragedy every day.

When the Hampstead Nursery closed down altogether in October, 1945, Sandy went to a London County Council Nursery School, where according to her mother she settled down quite well. During this time I visited a tea shop with Sandy and her mother. Sandy started wandering about and whenever she passed a certain woman, seated at a nearby table, she gave her a furtive little slap, half aggressively, half affectionately. The woman was her present nursery school teacher. In her relationship to the teacher she seemed to show her old tendency to alternate between affection and aggression mixed with fear. In the street Sandy approached every dog who was not looking her way, smacking him gently on the back. When the dog turned round, she retreated with a rather frightened expression. There was a certain resemblance between her reaction to the dog and to the nursery school teacher. Mrs. H. told me that Sandy was usually still afraid of dogs, but that she apparently wanted to show off for my benefit.

In the late autumn Mrs. H. married her first husband's brother. They went to live in a small village where Mrs. H. had been born and had grown up and where her parents are still living. During the following months Mrs. H. wrote several letters, telling me about Sandy's progress.

From the beginning she got on very well with her stepfather and his 11-year-old daughter. The latter lives with relatives in a nearby town and comes home during the holidays. Sandy's brother Barrie is now 6 years old. For the first few months after his mother's remarriage he remained with his aunt in another village, where he had been all the war. He came for occasional visits to his mother's home and there, as Mrs. H. put it, Sandy and her brother were fighting like cat and dog. Later on Barrie came home permanently and after some time Mrs. H. wrote that the two children were getting on better.

Mrs. H.'s letters always indicated her genuine feelings of affection for Sandy. She was pleased with her physical development, proud of the

clever remarks she made and of her popularity with the whole family and the village people.

In June, 1946, I accepted an invitation to spend a weekend with the family H. I met Sandy at the station, not having seen her since my visit to her in London 7 months previously. She struck me as a healthy-looking 3½-year-old. She did not recognize me and greeted me as "Auntie", seeming to have forgotten all about the nursery.

Mr. H. is a miner, a fairly young, friendly and quiet man. He does not talk much, but the children like being with him when he is working in the garden or looking after the animals. Mrs. H. seems happy and contented. The house is not too clean and certainly not tidy, but there is a warm and homely atmosphere. Mrs. H. is not the type of mother who disturbs her children's activities for fear of a mess. Mrs. H.'s demands with regard to Sandy's behaviour are on the whole reasonable and adequate for Sandy's stage of development. If there is a clash between the wishes of mother and child, Sandy conforms in most cases without difficulties. However, if she wants something very much or is bad-tempered or tired, she flies into a rage, screams, shouts at her mother, and hits her. Mrs. H. does not make serious attempts to check these outbreaks, but gives in to Sandy's wishes.

Sandy speaks with a broad country accent, she talks a lot, has a great vocabulary and facility of expressing herself and enjoys repeating strange and difficult words. She takes an active interest in all the happenings in the home. She runs errands, reports when the chickens have got out of their run, knows about and participates in all the stages of meal preparation. Her favourite activities when she plays by herself are water-play, i. e., amusing herself with running the tap at the sink, and cutting up paper with a large pair of scissors which she handles very skillfully.

For a short period after they moved into the new house Sandy asked her mother to stay with her when she was put to bed. Mrs. H. complied with her wishes and after a month Sandy no longer required her mother's presence. She is sharing her parents' bedroom, while Barrie sleeps in a room by himself.

As Sandy had reacted so strongly to her discovery of the difference between the sexes, we rather expected that she would find it difficult to adjust to life with a brother. I mentioned before that there were violent clashes between the two in the beginning. I do not know what actually happened during the children's first meetings, and whether Sandy showed the jealousy we had anticipated. At present Barrie is extremely jealous of his small sister and Sandy seems to be secure in the feeling that she is the favorite. Mrs. H. shows her preference for Sandy quite openly and in a dispute between the two children always takes Sandy's part, even if this is quite unjustified. Barrie reacts to this situation with uncontrolled aggression directed against his mother, sister and the cat, and also with babyish behaviour, apparently in imitation of Sandy. As far as I could observe, Barrie demonstrates these difficulties when both his mother and Sandy are present. If the two children are left alone together, he seems to assume the rôle of the protective older brother. He is an intelligent child; his teacher is very satisfied with his school work. Sandy reacts to Barrie's often very violent aggression sometimes with crying and withdrawal to the mother for protection, sometimes

with aggressions of her own. She certainly does not try to get out of her brother's way to avoid his attacks.

I had the impression that Sandy was being exposed to several situations that might easily arouse the same conflicts which a year ago had led to the development of her phobia.

Her brother's aggression often assumed an overtly sexual character. He attempted to lift her frock and to hit her on the genitals; he also showed off his penis in front of her and on one occasion urinated on her. When he once tried to lift her frock in the street, Sandy said in a matter-of-fact tone, "Nobody wants to see me undressed," but to the other provocations she reacted with crying.

I further observed how freely the castration threat, although in a slightly disguised form, is used in some social milieus. Sandy was indulging in some forbidden activity. Mrs. H. started to sing a song of the "Scissor-man" who comes to naughty children and says "snip-snap, snip-snap". Sandy cheerfully joined into the song. Another time Mrs. H. was leaning out of the window, talking to her son who was playing in front of the house and apparently misbehaving. Mrs. H. called out laughingly that she was going to cut off his behind. Actually I had the impression that these threats were uttered and understood as a joke.

The H.'s have acquired a huge Alsatian dog. Mrs. H. told me that during the first 2 days after the dog had joined the household, Sandy was rather afraid. Later she simply ignored the dog, an attitude which she still maintains.

It was of course not possible to form a definite judgment after a visit of little more than 1 day. My general impression was that Sandy had very satisfactorily developed in every respect. It seemed that she had largely overcome the conflicts that had resulted in the formation of a phobia a year ago.[6]

The foregoing case history deals with the origin, development and overcoming of a phobia. The relatively simple structure of the disturbance and the opportunity for direct observation make the case especially suitable for the study of the factors contributing to the formation of a phobia.

Sandy was a child with a probably healthy emotional disposition. Her sustained need to suck as well as her lack of interest in food during the first 18 months may be connected with the sudden weaning. Her early aggressiveness can be explained partly as a reaction to the mother's aggression and partly as an identification with the mother in whose emotional behaviour, expressions of love and aggression were mixed up with each other. The masochistic tendencies which Sandy showed in the struggle with her aggressive impulses may also have been reinforced by the mother's attitude; and the particular kind of object relationship, in which love, aggression and fear appeared simultaneously, was certainly

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6 One year later the family H. came for a visit to London. Sandy's development appeared to be that of a normal 4½-year-old girl. Since then she has started school where she is making very good progress.

a reproduction of the early relationship with the mother. It is interesting that while at first all Sandy's relationships were modelled on this pattern, she later on behaved in this way only with a few people, and finally gave it up altogether. Perhaps this was due to identification with other persons and also to a possible lessening of the mother's aggressiveness after she had concluded a happy remarriage.

The quickness and ease with which Sandy responded to any kind of help offered to her seemed to indicate a fundamentally sound disposition. It is an interesting question why this child developed a phobia which was comparatively more severe than similar disturbances frequently met with in children of this age.

Pre-History of the Illness. At 2 years of age Sandy was an apparently well-adjusted child. One could perhaps assume from her history that she had an intense struggle with her aggressive impulses.

The chance occurrence of the small boy urinating in her presence must have coincided with the beginning of the phallic phase in her own libidinal development. The fact that I was assisting the boy may have given her the idea that I was in some way connected with the boy's achievement. This may have added the jealousy felt on this account to the suddenly awakened penis-envy. However, she did not at once accept the fact that she had no such organ, as very soon afterwards she tried to imitate the boy. After she had found out that the organ necessary for this achievement was missing, she asked me for it in the same way that she would have asked for a sweet, and grumbled as she would have done in that case, when her request was not granted. Her idea that it was within my power to give or withhold the penis was also clearly expressed in her wish that I should hold the pot for her as I had done for the boy, and in her anger toward me when even after I had complied with this demand, her attempts failed. However, after some time she seemed to accept my explanation of the difference between boys and girls, and her subsequent interest in picture books, where she so carefully distinguished between the girls and the boys, can perhaps be regarded as an attempt to deal with this problem in a sublimated form.

Then came a series of traumatic events in Sandy's life, which caused the established adjustment to break down and reactivated the old conflict. For the first time Sandy was separated from her mother, who upon her return was hardly able to walk. Sandy must have felt that something terrible had happened to the mother, that her body had been damaged. The mother's second disappearance after 2 days aggravated the trauma. Sandy gave no evidence in her overt behaviour of being deeply disturbed. Her remarks when passing the room where she had last seen her mother showed some longing and affection, but no great distress.

The unpleasant experience Sandy had with the soap probably strengthened any fears she may have had about injury to the genitals.

The Nightmare. The nightmare occurred about a week after the mother's second absence. We do not know about any event of the previous day that may have been the immediate cause.

In the nightmare—as it became clear in Sandy's subsequent behaviour and remarks—a dog was assaulting Sandy in her bed, injuring her genitals, i. e., biting off her penis. A reconstruction of the single factors which combined to produce this terrifying dream leads to the following conclusions:

The most decisive event in the formation of the nightmare and the subsequent phobia was probably the experience of the injury done to the mother and of her disappearance. Both occurrences reawakened old anxieties. The sight of the damaged mother may have confirmed a fear which Sandy experienced when she compared the small boy's genitals with her own; the fear that one can lose a part of one's body.

The separation from the mother also meant a loss. As at this age the mother is somehow felt to be part of the self, her disappearance and the presumed loss of the penis combined in creating in Sandy an overwhelming sense of frustration and fear.

This accounts for the anxiety-situation out of which the nightmare developed. The actual content of the dream, the dog biting off the penis, must be traced back to other sources.

The discovery of her own bodily shortcomings may have aroused the wish-fantasy—sometimes met with in little girls—to bite off the boy's penis. As shown in the history of Sandy's instinct development, there was a certain amount of oral fixation, which would make it seem probable that Sandy had a similar fantasy. During one of the temper tantrums she developed at the time of the phobia, she actually did bite me.

As a next step, following the wish to attack her playmate in this way, came the fear that the latter might become the aggressor and she herself the victim.

Sandy's masturbation probably also played a part in the formation of her dream. Sexual excitement and physical sensations may have aroused her anxiety when she masturbated. Perhaps there were also aggressive masturbation fantasies, about which she felt guilty. Judging from the mother's later remarks in dealing with her children, one cannot exclude the possibility of an actual castration threat by her.

Sandy's experience when she pushed the piece of soap into her genitals demonstrated to her what she probably feared before, that interference with that part of the body results in injury and pain. Her reaction to my prohibition to soap her face seems to confirm this.

Sandy's fear of damage to her genitals thus had a twofold source: retaliation for her bad wish toward the little boy, and punishment for her masturbation.

It is interesting that she obviously had no clear idea as to whether the supposed damage had already been done or was about to be done. But this fact is not so astonishing if one considers that the thought processes of little children do not conform to the laws of time and logic. As in the unconscious thinking of the adult, opposites do not exclude each other.

The question remains why Sandy chose a dog to represent the aggressor. The people whose aggression she may have feared could have been either the mother, as the possible author of a castration threat, or me as a frustrating person, both of us having perhaps been the objects of sadistic masturbation-fantasies. But according to the existing material it is more likely that the dream was a direct representation, with reversed rôles, of Sandy's wish-fantasy to bite off the boy's penis. The dog would then stand for the little boy.

As Sandy had up to then not shown any special interest in dogs it seems strange that in the dream the dog was invested with great significance. An explanation may be found in the following facts: when the nursery-children were taken out in a group an encounter with a dog was usually met by some kind of emotion on the part of the other children. Sandy, although not showing any excitement, may all the same have been impressed. Playing "doggie" was a favourite game with the toddlers; an identification of dog and child was therefore easy to make. The idea of representing a boy by a dog most probably originated from comparisons between urinating boys and urinating dogs. The fact that 2 days after the nightmare Sandy got into a panic at the sight of a little boy imitating a dog, while the fear of real dogs appeared only several days later, suggests that the dog in the dream was a composite of human being and animal.

The Phobia. The hitherto successfully repressed fears broke through in the nightmare and Sandy was unable to repress them again. She actually made an attempt at a new repression. She "forgot" the dream, and it came back to her with a shock in the evening when she had been in bed for some time. This was the very moment of the outbreak of the phobia. By focussing her fears upon the bed and later upon dogs, she made use of a defence mechanism, which made it possible for her to be free of anxiety on condition that she avoid going to bed and meeting dogs.

As her request to stay up could not be fulfilled, she had to find another way out. She asked to sleep in a big bottom bed instead of her

own small one on top. There are several factors which may have caused this wish. First, the idea of the dog was more specifically connected with her own bed, so *any* other bed might be safer. Second, there was no net in front of the bottom bed, Sandy could get out whenever she liked and seek protection near the night nurse. And third, by sleeping in an older child's or adult's bed she was able to identify with this bigger and stronger person and so feel less helpless in a dangerous situation. Possibly she considered the adults generally as "undamaged", and by taking possession of an adult's bed, she felt that all was well with her.

Another defence used by Sandy was the identification with the aggressor. The second morning after the nightmare she received me barking. But this mechanism did not work for long, though I actively encouraged it, and was only restored at the end of the phobia, when Sandy dared to bark at a real dog.

The real dog became the object of the phobia only after the described incident in the street. It is very likely that my suggestion to the other children, that the dog might bite, established for Sandy the connection between the dream dog and the real dog, whereby the fear was shifted on to the latter. Perhaps this incident gave Sandy the image and the words for an up to then only vaguely conceived fantasy. This, together with the newly-aroused emotion in the experience with the real dog, may have caused Sandy's exclamation, "Doggie bite naughty boy leg." The fact that this was the occasion for an intellectual feat—it was an unusually complicated sentence for Sandy—confirms the theory that a strong emotion can further intellectual achievement.

Concern about Body. In this case history the displacement of the supposed injury from the genitals to other parts of the body, to clothes and finally to the bed, can be seen very clearly. One of Sandy's first reactions to the nightmare was a thorough inspection of her genitals (4th day after the nightmare). The reassurance that everything was all right there, was immediately used by Sandy to comfort herself about the imminent danger of going to bed. (Her monologue, "No doggie shelter, Sandy water, no doggie water.")

The incident with the dog produced the idea that the boy's leg had been bitten; possibly this first displacement was connected with the mother's illness, which to Sandy must have appeared as an injury to the legs. Immediately afterwards Sandy displayed her finger with the words, "All better." The next day she was telling a story about doggie and knickers, thus again coming nearer to the original place of the fantasied injury; and when she later appealed to the dog, "Doggie not bite my hat, not bite my coat," she chose well-known penis-symbols for the displacement.

Three days after the encounter with the dog, when the first displacement occurred, Sandy's anxiety about the intactness of her body reached a climax. In quick succession she worried about her feet, her big toe, her genitals. The reassurance given with regard to the latter enabled Sandy to embark on a further investigation of the problem, by enumerating the parts of my body. On being told that she had everything exactly like me, "Because we are both girls," Sandy found herself confronted with the core of her problem. This produced very strong emotion; but on the other hand the lessening of anxiety enabled the whole complex to find access to consciousness and Sandy brought out in one rush the thoughts she had forcibly repressed for a long time. She revealed that she had been upset by the illness of two little girl friends, who because of an infectious disease were still isolated in the sickroom. The fact that she was prohibited to enter the sickroom, and that on one occasion when she followed me there she was turned out rather firmly, must have excited her fantasies about mysterious illnesses. Immediately after the mentioning of the two little girls, she told of her anxiety about her mother. Her mother's illness, her inability to walk, her disappearance, all matters she had never spoken of before, were referred to. She thought that perhaps all girls were ill, and if I was like her, then we were both ill too.

The reassurance given on this point and the promised return of the intact mother quieted her for that night. But the next morning her worry returned; by now her problem having become more conscious, she could indicate the place where the "bite" had occurred. After having expressed her apprehension, she immediately proceeded to reassure herself by stating that my finger was "all better", and by substituting a big hair-ribbon for the missing organ.

In the evening Sandy defended herself against the uprising fear by saying that this was *her* bed, not "doggie bed", and that I was *her* own Annie (thus treating the bed and me as parts of herself); and by initiating the "comparing game" of the previous night. But there was still some doubt left as to whether we really were quite alike—she did not have any glasses.

The fact that Sandy had at one moment clearly realized her problem, talked about it and received reassurance made little difference in her behaviour during the next week. She still worried about various parts of her body, now extending her apprehension to her bed. In the remark, mentioned earlier, she had shown that she regarded her bed in some way as part of herself; the wish for a big bed may also be connected with this idea. At the repeated explanation of the difference between

boys and girls her anxiety was very much reduced; this could be taken as an indication that the conflict had lost its strength.

There was, however, no lessening in her fear of dogs. She continued getting into a panic at sight of every dog. The only attempt to deal with this fear was her play with the toy dog, which she called "pussycat".[7]

Behaviour Difficulties. It has been seen that along with the phobia Sandy simultaneously developed behaviour difficulties. She became very aggressive, lost interest in and capacity for constructive play, and clung to me and later on to her mother, with an intensity that belonged to an earlier phase of development.

Her aggressive behaviour toward me, which she started on the morning after the nightmare and maintained during the following weeks in varying degrees, can be explained as an expression of her inner tension, but also as a sign of hostility toward me, whom she held in some way responsible for her troubles.

Her provocative behaviour at the nursery school can be attributed to an identification with the two "naughty boys". Sandy's deliberate naughtiness was of the same kind as the behaviour displayed by these boys. She also joined them in their aggressive games; one day I found the three of them in great excitement, chasing and killing a blue-bottle. The identification with the boys presumably served the purpose of making her feel that she was undamaged; in relation to the nightmare it can be understood as an identification with the aggressor.

However, this defence was not very successful, and when its functioning met with obstacles, the aggressiveness changed to a babyish clinging to the adult. Sandy probably feared loss of love in consequence of her aggression. The idea of losing her love object, which she considered as part of herself, was reinforced by her castration anxiety. This and a certain amount of ego-regression due to the emotional upheaval, may have been the cause of her dependent behaviour and her incapacity for constructive activities.

It is interesting that the behaviour difficulties outlasted the phobia for a relatively long time. The sexual stimulation and oversatisfaction which Sandy got by sharing her mother's bed may have contributed to her prolonged unmanageableness.

Overcoming of the Disturbance. With the mother's return the nightly anxieties suddenly vanished, and the fear of dogs was given up within a fortnight.

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[7] To a question of a member of our seminar, why Sandy in this as well as in a former game wanted to substitute a cat for a dog, Anna Freud replied, that in Sandy's eyes a cat possessed all the pleasant qualities of a dog without the dangerous ones, that for her a cat was a "safe dog".

Sandy's inquiry during the first few minutes of the mother's visit as to whether the latter had any knickers, was answered by Mrs. H. with a very friendly, "Of course, Mummy has knickers." Sandy seemed to take that as an indication that all was well with the mother and also with herself.

It is not possible to say whether the return of the intact mother would itself have been sufficient to put an end to the disturbance, even without our giving any interpretations; or whether the phobia would have disappeared at about the same time without the mother's return. But it seems probable that Sandy could master her castration anxiety and penis-envy more successfully after she had been enabled to gain some insight into her conflict.

The external circumstances of Sandy's further life were favourable for a normal development. It may have been a great frustration to her to have to give up her place in the mother's bed to a man, but she soon established a very good relationship with the stepfather; she had shown a marked interest in men even in the nursery.

It was very fortunate that the brother was taken home only after Sandy had settled down. The fact that she was the favourite of the family may have had its disadvantages, but it certainly helped to reconcile her to being a girl.

The mother's tolerance of her attempts at sublimation, the water- and scissor-play, were also a favourable factor in her development.

Sandy was thus enabled to cope successfully with the presence of a difficult and aggressive brother. She no longer identified herself with the "naughty boy", but chose her mother for a model, while at the same time she stood up quite well to her brother's aggression.

The last follow-up showed a continued satisfactory development.

Conclusions. The conclusions which may be drawn tentatively from this case history can be summed up as follows:

A child with a presumably healthy emotional disposition can acquire a relatively severe neurotic disturbance as the result of a series of unfavourable experiences. These experiences gain traumatic effect and become the cause of a disturbance if they happen at a time when the child's libidinal development has reached a stage which makes the child particularly susceptible to effects of the events in question.

If the disturbance can be dealt with soon after its outbreak by psychological means as well as by the provision of good environmental conditions, it is possible to overcome the neurotic illness in a comparatively short period of time.

It appears that a disturbance of this kind can be dealt with in such a way as not to impede the further progress of instinctual development.

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