

## Trial to create a grid in (-) K (Less Knowledge)

Cecil José Rezze

### Abstract

Through clinical experience an effort is made to develop a grid in – knowledge (-K) which was achieved by displacement of column 2 ( $\psi$ ) to the left of the original. It is asserted that it actively arises as a barrier against the unknown or known and disagreeable. The grid's heterogeneity is stressed, which becomes more accentuated with the negative dimension. There we face the lower part of the grid (starting from line C) as an inversion of the elements corresponding to the positive grid. However, ( $-\beta$ ) elements were created, that are studied by autistic phenomena.

Conception of the ( $-\beta$ ) elements ruptures or expands Bion's referential. Transformations into knowledge become important because they will lead the way to transformations in O. A theoretical review became mandatory to develop these ideas about the concepts of – space, -K space, transformations in – K, transformations into hallucinosis,  $\beta$  element and grid according to the parameters of Bion and other authors.

**Key-words:** Group, Grid, K, O, Alpha, Beta.

### The grid of knowledge (K) and (Less) –Knowledge (-K)

#### Conjugation of different areas

|           | -A<br>ction | -In<br>qui<br>ry | -A<br>tten<br>tion | -No<br>ta<br>tion | -Defi<br>nitory<br>Hypothe<br>ses |                        | Defini<br>tory<br>Hypothe<br>ses | No<br>ta<br>tion | A<br>tten<br>tion | In<br>qui<br>ry | A<br>ction |          |
|-----------|-------------|------------------|--------------------|-------------------|-----------------------------------|------------------------|----------------------------------|------------------|-------------------|-----------------|------------|----------|
| ...-<br>n | 5           | 4                | 3                  | 2                 | 1                                 |                        | 1                                | 2                | 3                 | 4               | 5          | ...<br>n |
|           | -A5         | -A4              | -A3                | -A2               | -A1                               | A<br>B elements        | A1                               | A2               | A3                | A4              | A5         |          |
|           | -B5         | -B4              | -B3                | -B2               | -B1                               | B<br>$\alpha$ elements | B1                               | B2               | B3                | B4              | B5         |          |

|  |     |     |     |     |     |   |    |    |    |    |    |  |
|--|-----|-----|-----|-----|-----|---|----|----|----|----|----|--|
|  | -C5 | -C4 | -C3 | -C2 | -C1 | C<br>Dream<br>Thoughts,<br>Dreams,<br>Myths | C1 | C2 | C3 | C4 | C5 |  |
|  | -D5 | -D4 | -D3 | -D2 | -D1 | D<br>Pre-<br>conception                     | D1 | D2 | D3 | D4 | D5 |  |
|  | -E5 | -E4 | -E3 | -E2 | -E1 | E<br>Conception                             | E1 | E2 | E3 | E4 | E5 |  |
|  | -F5 | -F4 | -F3 | -F2 | -F1 | F<br>Concept                                | F1 | F2 | F3 | F4 | F5 |  |
|  |     |     |     |     |     | G<br>Scientific<br>Deductive<br>System      |    |    |    |    |    |  |
|  |     |     |     |     |     | H<br>Algebraic<br>Calculus                  |    |    |    |    |    |  |

### Area of overload of the $\beta$ elements

#### Area of Classical Psychoanalysis

Area proposed for the expansion of transformations in hallucinosis

#### Area proposed for further investigations

I intended to develop a negative grid and thus I tried the “Grid of Knowledge (K) and of – Knowledge (-K)<sup>1</sup>

<sup>1</sup> This work was presented at a Scientific Meeting of the Brazilian Society of Psychoanalysis of São Paulo; on May, 21, 2005.

I began to have difficulties in harmonizing clinical practice with theoretical concepts. Studies of autistic conditions helped me and from there evolved “Clinical Understanding by means of Grids of Knowledge (K) and – Knowledge (-K) (2004)”. Therefore reflection on the utilized concepts was expanded.

Work was stimulated by the following.

Some patients made it very difficult for me to follow what they were experiencing. I used my experience together with a broad theoretical referential, in which are highlighted the contributions by Freud, Klein and Bion, but the **not learning** with the emotional experience seemed to be an activity superior to that consisting of learning. The client’s activity was not only a situation of being in ignorance, which by the way would be favorable to psychic development. The purpose was to annul knowledge that might arise or that had already been acquired, so as to create an active situation against all participation by the analyst and by the client that might culminate in a framework of having knowledge of psychic reality; avoiding that it might have a reach on the emotional experience as he knew it.

Bion (1963) created an instrument of clinical and theoretical investigation: a grid in knowledge (K). In this, column 2 might be viewed as an instrument to investigate the phenomena described above and represents “a barrier against the unknown and the known but disagreeable”. We are in the area of the links knowledge (K) and (less) – knowledge (-K).

Column 2 progresses in highly complex areas of Bion’s thinking.

In “Attention and interpretation” (1970), when considering the emotion awakened by the “no-thing” he stresses: “In practice, this may mean a total lack of feeling or an emotion, like rage, which is a column 2 emotion, that is to say, an emotion whose fundamental function is the denial of another emotion”. In “Transformations” Bion (1965) when studying the –K spaces and the transformations in –K considers “←unconscious and unconscious→ will be marked by the presence of column 2 elements. Typical would be the theories about past and future, that as known, are false”.

Bion (1963, a) suggests that column 2 would be transformed into another grid. For that, column 2 would be suppressed from the grid placing to its left another, albeit with the negative sign.

The proposal of the negative grid entails a series of problems, of an empirical nature as well as thinking about the psychoanalytical theories used.

Let us bring concepts together. The grid developed by Bion examines the link of knowledge (to study it under love or hate remains pending) and, then it is called **grid in K**. Using the proposal to utilize column 2 and expand it to form a negative grid,

the opportunity to use it in – K ( less knowledge) appears. An even more complex situation would be that of grids in –L (less love) and –H (less hate).

Although brief, a review of the grid becomes mandatory.

Let us consider the vertical axis. “The function  $\alpha$  acts on sensorial impressions, whatever they may be and on emotions that the patient perceives, whatever they maybe” (Bion, (1962, a). Thus are shaped the  $\alpha$  elements that will permit moving towards the lines ranging from C (dream thoughts, dreams and myth) to D (pre-conception), E (conception), F(concept), G (scientific theory) and H (Algebraic calculus). When the function  $\alpha$  does not operate, the remaining elements are the  $\beta$  elements.

The  $\alpha$  function allows for symbolic development. Due to diverse factors, there may be a reversal to  $\beta$  elements by the elements that had already evolved in the vertical axis of the grid. The ascending and descending movement on this axis is also part of the psychogeny of thoughts and forms its dynamic.

In the grid there is a heterogeneous situation when we take into account the upper part ( $\beta$  and  $\alpha$  elements) in relation to the lower part. When complying with Bion’s (1963, b) suggestion to create a negative grid, at the expense of column 2 ( $\psi$ ), a situation of even greater heterogeneity arises:

- 1) Elements located on the horizontal axis from –C to –G in the negative grid, were achieved through the action of an unbearable emotion that determines a falsification;
- 2) The (-) $\beta$  (minus beta) and (-) $\alpha$  (minus alpha) elements that have no reference in the theories described by Bion<sup>2</sup> arise. We shall study these hypotheses through clinical material and shall take the (-) $\beta$  element and (-) $\alpha$  element as representations or definitory hypotheses whose meanings we shall try to reach.

### **Clinical situation 1**

The client has been under analysis for some years. She arrives at her morning appointment, slightly late, lies down and starts to talk. She relates that she had been at a party of a friend and that there she had met a professional colleague, with whom she had engaged in a quite lively dialogue. She goes over some divergent points with this colleague and, hotly takes a position in the discussion that is taking shape. She questions if this would be favourable or if, later, it might create problems for her personal interests in her ambient. Next, the patient keeps telling, associated to the same issue, that a conflicting situation arose in the hospital where she works, when she participated in a workshop. A colleague behaved in a way incompatible with the ideas of the remaining members. The group unites against the colleague so much so

---

<sup>2</sup> We are using a writing in which the sign - (minus) is between parentheses, for instance: (-) $\beta$  element, minus beta element. This to distinguish Bion’s writing and that of his translators that use the hyphen between the word element and its attribute, for instance:  $\beta$ -element or beta-element, that is to say, the positive beta element.

that he is no longer able to participate. A major uproar arises which is described at length by the client. About these elements, she cites a colleague who voices an opinion about her. A comment was made that the client was much too aggressive. Her colleague then says: *What? You aggressive! Never!*

I must stress that all these citations were made in a way that requires a pronounced discipline so that these elements do not stimulate memories, feelings, resentments, and issues of my person. The client asks if I agree with this opinion. I say: **Well if you consider what you usually say, I believe that your colleague is right. It seems that in a group you become a docile, reserved, person who in a very restrained way, proffers an opinion. However, it seems that you are different among people with whom you have developed closer relationships, then, it seems that you can turn into a beast and attack. It is as if you had a double personality.**

The client reacts saying: *double personality, bullshit!* In a provocative and hostile attitude, in a kind of reciprocity of aggression and sadism, shared by the two of us.

I remark that her observation has this character, this aggressive intimacy as participation by both of us which, in reality I do not participate in nor did I give her permission to have this type of attitude towards me. I call to her attention, that there are certain popular sayings that somehow clarify the situation. For instance, a saying goes “business is business, friendship apart”, another saying “more love, less trust”. The client seems to grasp what is involved. She makes a remark in which she says: *yes I am aware that I laid it on heavily (something like that).*

She acknowledges, but does not seem touched nor has compassion for the object.

Immediately, she starts to describe something about her work. The boss had told her that she was doing a good job. She comments that this opinion was of no avail, because the person giving it was a square and of no great worth. The client continues, makes one or two other statements that I don't clearly remember. And then, she stops talking. I remain silent for a moment and soon after I say that in my opinion, each of her communications could have a corresponding comment. However, there was something in common: her speeches made it so that in one way or another I became involved and that I had to keep in mind what she said about me. With this onslaught, I had the impression that she tried to know if I knew what she was dealing with. What she was doing with me, because apparently she did not know neither what she was dealing with nor what she was doing there with me.

Once the observation was made and listening to her, the client expresses herself as follows: *Gosh, but what an interesting thing you said! I think you are right. It seems true. It makes sense to me.*

I listen and the *meaning of* what she is talking about does not seem clear. But, that she finds it interesting she does! She appreciates getting this information. It is not a

knowledge that makes her feel what is going on and be aware of how she intrudes upon me.

So then I make a remark about her pleasure in getting information and that feeling seems out of phase in relation to me: Ah, after “*bullshit*”, now “*what an interesting thing*”, but what I am pointing out is experiencing violence related to me. This information, this moment of the session, this knowledge slides away, has no echo. The client continues in successive movements and I here stop the clinical quotation.

## Comments

In my opinion, if we observe each segment that the client recounts, we will see that according to common sense it could be viewed as certain corresponding situations of her life. It would not be very different from the many exchanges we hear in the social world we live in. In terms of the positive grid we can say that she transits from the C1 elements (personal myth as defining hypothesis) to F6 (concept as action, for instance speaking). However, if we consider the situation of this continued placing of elements, communications to my perception, attention, sensitivity, memory we shall note that I am being hit by a downpour. That is why the same elements seen in the positive grid are now considered in the negative grid and thus start to belong to the –C1 to –F5 slots (as column 2 has disappeared, the numbers changed).

This may become more evident if we take: “*what an interesting thing*”. She notes the information given. Thus, one may think that it is in knowledge, therefore it made a transformation in K. Possibly in concept (F) in columns 1, 2, 3, 4, 5, or 6 (defining hypothesis,  $\Psi$  notation, attention, inquiry, or action). But this euphoria is experienced making an inversion, taking what I told her, for what I had not told her and thus, does not acknowledge the realities of her emotional relationship towards me: the violence, the lack of prejudice and separation and so on and so forth. This inversion, in terms of the negative grid will be considered as –concept, -F (1, 2, 3, 4, or 5).

The downpour considered above could be viewed as something connected to a transformation into hallucinosis, therefore the elements achieved would have been transformed into  $\beta$  elements. However we elected the use of column 2, that is to say “an emotion whose fundamental function is denial of another emotion”. As we have the unfolding of column 2 into a negative grid, we shall thereupon have the space –C to –H5 or –G (figure) instead of insertion in A1 to A6 (element  $\beta$ ).

We surmise that in this movement we progressed in the theory of observation, without denying the field of “classical psychoanalysis”, C1 to C6.

The above facts lead us to consider that the concept of the grid in –K cannot exist without a concept of grid in K because it is the fluid movement of the situations described, that allows to formulate the idea of the grid in –K. When considering the  $\beta$

and  $\alpha$  elements we introduced an idea of heterogeneity with the  $\alpha$  elements accomplishing the transition from the upper to the lower part of the grid.

In the case of the expression “**bullshit**” I would view it as something that could bring about what in theoretical terms would be an evacuation, therefore an expulsion of the  $\beta$  elements. I go back to the idea that the  $\beta$  screen is a live situation where the elements achieved are actively transformed and produce the  $\beta$  elements (figure, line A) that are now utilized in a way suitable for them.

It can be seen that we are expanding ideas. The concepts of grid in K and  $-K$  entail a perception of coherence between various concepts that must be used together to enable these theories to be developed.

What we had been dealing with becomes rather complex.

We are now faced with the rather complicated issue of how to consider the  $\beta$  and  $\alpha$  elements in the negative grid. If Bion (1962, b) stresses that performance of the concept of the  $\beta$  element is impossible, nevertheless an approximation by the bizarre objects is possible, here we have a challenge that we shall try to overcome considering the elements  $(-)\beta$  and  $(-)\alpha$  as representations or as defining hypotheses whose meaning we shall endeavour to develop.

We shall call to our aid the concept of autism and its examination in neurotic personalities (Tustin, 1981 and 1986).

We shall follow the method of basing ourselves upon clinical experience used until now. This was possible thanks to the material of a supervision in which we took part, provided by the analyst. This data is transcribed below, without comments to avoid interference with the reader’s opinion. Next, we shall repeat excerpts insert comments we regard pertinent.

## **Clinical situation 2**

*Patient coming in as usual greets me with a kiss.*

*I notice in her way what appeared to be “indifference” towards me.*

*I perceive in myself a feeling of discomfort, in view of this I think: “when is she going to stop with this kissing”?*

*The patient enters the room and says:*

***P- Are you cold?** (she is mentioning a light weight jacket I had on my back).*

*Her comment is made in an intonation that seems to intend interfering with me, whereupon I decide not to reply. I walk towards my chair and she goes to the couch.*

*She continues...*

***P – It's that you stay shut in here the whole day long, this makes you feel cold, right? Outside it is warm!***

*I continue without saying anything.*

*She lies on her side, cuddling up on the couch, as if she was in bed and was going to sleep. In an intonation of complaint she starts to say that she is very sleepy.*

*I get the impression that she wants to tell me “that she is not willing to make any effort”.*

*I remain silent and she continues...*

***P- I don't know why every Wednesday I don't sleep well through the night, the night before coming here, And then I get sleepy here.***

*I make an effort to ask her if she sees any relationship between sleeping badly, as she was telling me, and coming here.*

*I am not successful with the reply, as she seems not to have given the slightest importance to what I asked. I do not even know if she heard me. She continues to “cuddle up and yawn”.*

*I decide to be more direct:*

**What does your being here mean? To come here?**

***P – Ah! Get to know myself....***

*The reply is evasive and the intonation of emotion has nothing to do with “knowing oneself” but seems closer to a certain contempt for “knowing”.*

**A – So being here to know yourself makes you sleepy, listless for the task?**

***P – Yesterday I got into a house cleaning with the maid. I only cleaned two bathrooms! A real thorough cleaning! But it was enough. I was worn out! I can't do it! I want to see when I start the kitchen with her. I would much rather cook than do the cleaning!***

*Her speech is emphatic, and she seems willing to convince me that she has reasons to be sleepy.*

**A – Something like that seems to be happening here There is a thorough cleaning to be done inside of you and you come and tell me that your are tired, sleepy, not willing...**

*She instantly replies...*

***P – I do not know what kind of cleaning you want to do”! Inside of me there is nothing but a “hollow”!!***

*The reaction expresses violence, revolt and contempt.*

*I feel an impact and notice that I was trying to find “what to clean thoroughly”.*

*At this moment I think that I must "redress the course”.*

*Then I had an insight and a thought:” it seems as if “they washed the baby out with the bath water” Nothing is left but a hollow”.*

## **Comments**

During the supervision work, the analyst emphasizes the difficulty of communicating with the patient. The supervisor foresees, by the emotional manifestation of the supervisee, that she seems to be facing a kind of communicative “impossibility”. The analyst’s manifestations are not to be taken into account as counter-transference (which will be a subject addressed in analysis). I consider these facts as the communication of the emotional quality which we propose to investigate. That is why my attention focuses on emotional experience, on that recounted in relation to the session as well as that taking place during supervision.

We shall consider various excerpts of the session.

*Patient coming in as usual greets me with a kiss.*

*I observe in her way what seemed “indifference” towards me.*

*I notice in myself a feeling of discomfort, in view of this I think:” when is she going to stop this kissing”?*

The *kissing* is the social greeting of a peck on the cheek, which the supervisee perceives as “indifference”, The action of *kissing* causes her a visible discomfort, which becomes obvious in her inquiry about *when is she going to stop this kissing?* In these elements a form of acting with physical contact becomes overt, which leaves the analyst unable to access what goes on in the patient’s innermost feelings.

Let us proceed.

*“The patient enters the room and says:*

***P- Are you cold?*** (she is mentioning a light weight jacket I had on my back).

*Her comment is made in an intonation that seems to intend interfering with me, whereupon I decide not to reply. I walk towards my chair and she goes to the couch.*

*She continues...*

***P – It's that you stay shut in here the whole day long, this makes you feel cold, right? Outside it is warm!***

*I continue without saying anything.*

We have two interventions by the client, which in the perception of the analyst intend to interfere with her. It seems to me that we are in the action field.

Until now we had the kissing, cold, warmth. Elements of the essence of autism?

The information that follows is outlining the field.

*She lies on her side, cuddling up on the couch, as if she was in bed and was going to sleep.*

*In an intonation of complaint she starts to say that she is very sleepy.*

*I get the impression that she wants to tell me “that she is not willing to make any effort”.*

The patient's physical experiencing area becomes prominent: “*She lies on the side, cuddling up on the couch, as if she was in bed and was going to sleep*”. I surmise the indication of non-communication, in the emotional experience of the analyst. Those are elements of sensory essence that, it seems to me, are nearing the concept of autism in neurotic patients. The sequence seems significant.

***P- don't know why every Wednesday I don't sleep well through the night, the night before coming here, And then I get sleepy here.***

*I make an effort to ask her if she sees any relationship between sleeping badly, as she was telling me, and coming here*

*I am not successful with the reply, as she seems not to have given the slightest importance to what I asked. I do not even know if she heard me. She continues to “cuddle up and yawn”.*

Although there is a verbal manifestation, I consider that the non verbal dimension is more important. When the analyst attempts to engage in verbal communication and its meaning, no reply is forthcoming. I suppose that “*I do not even know if she heard me*” and further “*she continues to “cuddle up and yawn”*”, are the points where more perceptibly we may consider autism manifestations. This because we are not considering the manifestations of the client as possibly fitting into the modalities of transformations suggested by Bion: in rigid movement, projective and in hallucinosis.

Our assertions are valid within the parameters in which we are working.

Should there be other parameters and above all, if the described manifestations were viewed as communication, we would have another approach and therefore the pertinent theories would be different.

On the track of what was said, the analyst tries “to improve” communication by being “*more straightforward*”

**What does it mean for you to be here? To come here?**

*P – Ah! Get to know myself...*

*The evasive reply and the intonation of emotion, has nothing to do with “ know myself ”but seems to be related with a certain contempt for “know”.*

Next the client speaks about a “**house cleaning**” apparently in a concrete meaning. Along the line of a communicative possibility the analyst proposes:

**A - Something like that seems to be taking place here. There is a house cleaning to be done inside of you and you arrive here announcing that you are tired, sleepy, not willing...**

*She immediately retorts:*

**P- I don't know what cleaning you want to do! Inside of me everything is “hollow”!!**

*The reaction expresses violence, revolt and contempt.*

*I feel an impact and realize that I was trying to find “what to clean”.*

*At this moment I feel that I must “redress the course”.*

*Afterwards I had an insight and a thought:” it seems “they washed the baby out with the bath water”. “Nothing is left but a hollow”.*

There is a perceptible manifestation of the analyst *I must “redress the course”*. Even more perceptible here is the dream image that relates “hollow” with the baby that was thrown out with the bath water.

We may consider the analyst's image as a perception of the “catastrophic fall” (Tustin 1986, a). In the saying of Tustin (1986, b): ”The fall from the sublime state of jubilant unity with the “ mother” taking place in infancy, is the centre of the universe of the child dominated by feelings”. The author's “basic thesis is that the autistic condition is a reaction to a traumatic awareness of separation from the nourishing mother, producer of sensations”. Regarding these facts there is a quotation (Balint, E.) that resembles the analyst's narrative. Those patients (that manifest in a disembodied form) feel that having left their bodies, there is a carcass leftover which moves automatically and which is **hollow** and empty”.

That the analyst needs to redress course is an outcome of not having had something to clean. “Indeed, autistic children are mentally retarded and did not develop fantasies and thoughts. Their capabilities for symbolization are rudimentary. Their world also is almost entirely based upon their own physical sensations, through which they experience a very different world from the one which we perceive with our more developed perceptions” (Tustin, 1986, c).

Regarding the manifestations of violence, revolt and contempt the continuation of the quotation seems adequate.” They (autist children) are so little differentiated from the outer world that that they are incapable of emphatic imagination and identification with others”.

We cannot forget that we are dealing with a neurotic adult patient who, we are surmising, has other autistic aspects. However, “when patients are paralyzed by autism they cannot tell us what it is like. It is only when they emerge from these conditions that, if we are receptive, they can tell us something about its nature” (Tustin, 1986, d). Nevertheless, eventual communication with this client is fraught with these difficulties, as becomes clear from the supervisee’s contribution.

### **Condensing – Conjectures**

The manifestations described, surmising that Tustin’s (1981) characterizations are followed, would be those of encapsulate or in shell autism. These are found in the natural development of the child. However, when they do not develop, remaining at a stationary stage, they determine pathologic autism.

Another type of autism is the confusional, in which there is no discrimination with the environment. Possibly it leads towards psychotic states (Tustin, 1981).

Later, Tustin (1982), states that she made a mistake by using the term autism for the initial conditions of child development as well as for specific pathology. The term autism must be kept “only for a specific gamut of disorders, in which there is an absence of human relationships and an enormous impoverishment of the mental and emotional life”.

We shall continue with encapsulated autism since it was not our intention to utilize the concept of normal autism.

In the proceeding emotional experience of the session, we are not considering the client’s products as  $\beta$  elements, these represent sensorial experiences and emotions, whatever they are, which treated by the  $\alpha$  function permit surfacing of  $\alpha$  elements. When there is a reversal of the  $\alpha$  elements, we will not have the original  $\beta$  elements but the bizarre objects that hold parts of the ego and superego (Bion, 1962, d). This is in accordance with the study of psychoses, because Bion outlines two major psychic areas: neurosis and psychosis.

Tustin delimits an area that does not belong to neurosis nor to psychosis, that of the autistic conditions. Her studies do not follow the lines described by Bion, although she was aware of them (there are at least two quotation). Her investigations characterize the autistic object which differs from the bizarre object. The appearance of the autistic object is due to the arrest of development at very initial stages of the child's life, resulting in a prevalence of manifestations that pertain to the domain of sensations. "The autistic objects are not objects in the real sense, they are solid feelings produced by firmly holding an object. They are pseudo-objects" (Tustin, 1986, e).

Just as a bizarre object differs from an autistic object also the  $\beta$  element (comprised of sensorial impressions and **emotions**) differs from feelings that shape the autistic object. We surmise, in this difference between the  $\beta$  element and feelings (autistic) that the first is more complex originating neurotic and psychotic personalities and the latter are more elementary originating autistic conditions. We shall call the autistic sensations elements (-)  $\beta$  (minus beta elements) (Figure).

"Autistic barriers arise when the child's "mental apparatus" is not sufficiently developed to bear the "fall", the condition of unity with the mother, which is dominated by sensations" (Tustin, 1986, f). " These reactions of avoidance (autistic barriers), which were needed at the time of the catastrophic Fall, but that lasted more than necessary, became barriers to cognitive and affective functioning" (Tustin, 1986, g).

Autistic barriers serve to avoid conditions of terror, of fall, fears of disintegrating, of falling forever, with the characteristic that they are not expressible, because they were experiences in a pre-image, pre-verbal, pre-conceptual stage.

I believe that relationships established with Tustin's ideas on the autistic object characterize well enough the (-) $\beta$  element in their description as well as in the characteristic originated in column 2, that is to say "as barriers for the avoidance of the catastrophic fall". Therefore, some ideas fit into a more primitive meaning than that assigned by Bion (1963), when he remarks that column 2 represents "a barrier against the unknown or known but disagreeable".

These assertions are troublesome because they rupture or expand Bion's former paradigm, creating a new conceptual identity.

### **What is the utility of the negative grid?**

**1.** *The concept of negative grid induces us to a greater reflection about that of a positive grid.* Thus, considering the positive grid we can divide it into the upper part (lines A and B,  $\beta$  and  $\alpha$  elements) and lower (elements from C1 to H). Mainly the  $\beta$  elements are going to be the ballast of transformations in  $-K$  ( $-K$  space, domain of psychotic phenomena) and of the transformations into hallucinosis. The lower part of the positive grid represents the space where "classical psychoanalysis" takes place,

that is to say the domain of the conscious and unconscious, the ego defence mechanism, repression, generically the domain of the neurosis and, also, where thinking develops.

## *2. Overload in the concept of the $\beta$ element*

In view of the previously seen, transformations into hallucinosis and in -knowledge (-K) (domain of psychosis) have their theoretical ballast based upon the  $\beta$  elements. But, these are also the ballast of psychosomatic phenomena, of protomental conditions (at the source of basic in group postulates) and of wild thoughts (according to Mastering wild thoughts, 1977 and Italian Seminars, 1983). In this sense, the concept of the  $\beta$  element is extremely extensive.

Further, Korbivcher (1999, 2004) inquires if we need to “develop a grid of beta elements, that is to say, establish a ranking of the beta elements”.

In this direction we have the inquiry (Chuster and Conte, 2003) “would the beta elements not form a spectrum, a scale of clinical manifestations just as the alpha elements?”

Ranking of the  $\beta$  elements would be compatible with extending column A on the vertical axis, allocating there the sub-categories, possibly keeping in mind the extension described above, without interfering on the axis of uses. But, the creation of a grid in beta element would entail such complexity that I cannot imagine how to invent it.

Despite raising this significant issue, I do not venture a solution because it seems to me that any interference in this area would not be fitting, since we still do not reckon with clinical and theoretical elements that permit us to advance into such abstractions.

## *3. The concept of negative grid allows for the expansion or rupture of paradigms*

Such changes may be considered in the upper and lower part of the grid in -K (Figure).

**a)** In the lower part we propose that the elements ranging from C1 to H in the positive grid (in K) become the elements -C1 to -H (-H being a hypothesis to be investigated) in the negative grid. The clinical example “*what an interesting thing*” illustrates the passage mentioned. **b)** In the upper part of the negative grid we proposed the (-) $\beta$  elements and used a clinical illustration with “autistic aspects” identified in an adult, neurotic patient. The (-) $\beta$  elements, differently from the  $\beta$  elements, will harbour the hallucinatory of transformations into hallucinosis and of the transformations into -K. Implicitly they shall not fit into transformations of rigid movement nor to the projective, because autistic conditions do not fit in neurosis nor into psychosis (Tustin, 1986). The (-) $\beta$  element provides an expansion or rupture of the paradigm

because it will not support the transformations proposed by Bion, but perhaps would help to clarify autistic phenomena.

#### 4. *A proposal for investigation*

In the Assumption that autistic conditions correspond to the  $(-)\beta$  elements in the negative grid, we may conjecture that they may evolve in clinical practice. Assuming that the methods described by Tustin and others permit the  $(-)\beta$  elements to evolve towards  $\beta$  elements, that is to say, in addition to the qualities of feelings, acquire the quality of “emotions”, whatever they are (Bion, 1962). Thus, giving way through the action of the  $\alpha$  function to the  $\alpha$  elements, thereby permitting development of the C line in the grid, condition *sine qua non* for the appearance of knowledge (K). This fact is important since it would permit transformations in knowledge that in turn would enable transformations in O.

#### **Relationship with parameters from other authors**

Some authors highlight the importance of the negative grid. Meltzer (1978, pg.105) polarizes fear against catastrophic change and lie. In favour of the latter there is column 2, however insufficient, thence the need to develop a negative grid. The same proposal (1987) returns adding the difference between mental and non-mental processes, the latter resulting from the failure of the alpha function. This function may have initiated, but the process that took place in the emotional experience may have brought about such pain that there is an inversion of the alpha function, with consequent appearance of the beta elements. These are called failed elements of which the person must be rid: “1) through a beta screen (enormous flow of verbal material, grammatically correct, however rubbish void of any meaning); evacuation of beta elements through the senses (hallucinations and transformations into hallucinosis); 3) group behaviour, according to the basic premises; 4) beta elements may unload themselves through the striated matter, which is the basis for psychosomatic disorders. We are facing a new nosology of the psychiatric phenomenology: on the one hand, alteration within the symbolic area and on the other, outside the area of symbolic functioning, that produces a psychotic type behaviour, psychosomatic disorders and group behaviour of a primitive type (where basic premises operate)”. He states that to these parts must be added the destructive part of the personality operating in accordance with a negative grid bonded to the negative links  $-L, -H$  and  $-K$ . This “satanic” part of the personality operating with the negative grid, builds a delirious system which nevertheless represents a necessary part of the mental structure. In the “Concept of the Negative Grid” (1990), he returns to the former concepts, but highlights that in clinical practice we encounter the “bizarre objects” that are beta elements with vestiges of ego and superego. Meltzer does not attempt to make a new grid nor progresses in the development of such ideas.

Sanders (2002) stresses Meltzer’s contribution considering “the existence of a negative grid (for creation of lies and propaganda as opposed to a method for

digesting thoughts within the thinking process). So much that destructiveness must only be focused as means for describing a conduct, and there is no requirement, for instance, for “the death instinct”. Sanders proposes the creation of a negative grid. This would be based upon the additions by Meltzer to the positive grid in the axis of uses, the column 6 (action) is replaced by endless Conversation; in the genetic axis, on lines G and H we have the replacement of the scientific deductive system and Algebraic calculus for Esthetical and Spiritual. Thus, it shapes a negative grid where the genetic axis remains with some change and the axis of uses is shaped as: -1 Negation of inner reality, - 2 Omniscience, – 3 Lies and deliriums, - 4 Language abuses and -5 Hallucinations.

Chuster and Conte (2003) propose a “Negative Grid”. Creatively they used the Hamlet character as a model for the development of ideas. “In the horizontal axis we place the evolution of –H (hate) and in the vertical axis –L (love). The link –K would make a descending crosswise evolution, outcome of interactions between the coordinates and the abscissas starting from the A1 cell defined later, towards the G6”.

The authors introduce the negative bonds (-H and –L) and their development. This would require development of grids in love (L) and hate (H) to enable a comparison with the negative grids. Although this has been tried with the grid in Love (L) (Rezze, 1997), I believe that this takes us far beyond the scope of this work.

Braga (2004) proposes: “*An extended grid to examine the scope of the hallucinatory*”, a work preceded by “*The hallucinatory in clinical practice*” (Braga 2003). In this work the author bestows upon us a series of reflections that permit an appraisal of Bion’s work as a whole. From the very beginning ( Braga 2003), when he supplies the basis for his work makes a crucial statement : “The concept of *transformations in hallucinosis* poses today, to some analysts, an issue similar to that once occupied in the development of psychoanalytical ideas by the concepts of repression and projective identification. That is to say, it is the formulation of barriers of knowledge and of theorizations that led to reconsider the already accepted paradigms”. Braga proposes that the *grid of the hallucinatory* be governed by two principles. The first keeping column 2 as a barrier against the unknown and the second highlighting dimensions of A6,”...beta elements manipulated in a mental domain where thoughts are not distinct from things and in which the mind is felt to be functioning as if it were a muscle”.

Thus, Braga keeps the vertical axis of the grid unchanged and creates the negative horizontal axis with characteristics in which is stressed the action (a graphic resource is used for representation): -6 Evacu Action, - 5 Fabric Action, -4 Dementaliz Action,-3 Represent Action, -2 Imit Action, -1 Non-Mentaliz Action .

**Let us correlate these works with the negative grid that we proposed**

We retained the same characteristics originally proposed by Bion (figure) for the horizontal axis. Thus we intend this to be the instrument for observation that can be used to examine the horizontal categories proposed by Sanders and Braga, which would be considered as constant conjugations or clinical descriptions, (i.e. awareness, lies and deliriums, etc.) originated from the emotional experience taking place during sessions. We return to consider Braga's proposal, in the grid of the hallucinatory with its substrate: column 2 and beta element. We inspect the beta element in its aspect of overload, where it would be related to transformations in  $-K$ , in hallucinosis, psychosomatic phenomena and protomental contents in the basics group postulates, all in a positive grid in accordance with the position of various authors (for instance Meltzer). I believe that the horizontal axes proposed by Sanders and Braga would render the A line of the positive grid (element beta) practically useless and would determine a new appraisal of the entire grid.

Another situation, derived from these problems, is that Bion talks to us about the beta element as a theoretical instrument and we may approximate its performance by means of the bizarre object. That is why it will be difficult to develop a grid of beta elements, but possibly something related to the bizarre object, that is to say, beta elements with added traits of ego and superego, when there is an inversion of the alpha function. Therefore in Sanders and Braga titles of the grid's horizontal axis lead to the imaginative hypothesis that they may be something similar to a grid of bizarre objects (beta elements). The difficulty would arise in its applicability based upon the B line (alpha element) of the grid's vertical axis. Further, a remark about *the grid of the hallucinatory* can be made. This grid comes from the work "*The Hallucinatory in clinical practice*", in which "*the hallucinatory*" is therefore a different descriptive concept from those we have been pursuing. Nevertheless, as the author is going to take recourse of the concept of column 2 and element beta, this grid has a conceptual independence with regard to the work that brought it about, which may make its application more encompassing. Investigation of the  $(-\alpha)$  element remained beyond the scope of this work.

## Conclusion

We developed a negative grid (2001 and 2004). Afterwards and in collaboration with Braga (epistolary communication) we were able to perceive certain inconsistencies in the proposal that led to a review of the concept, comprising the current work.

We must keep in mind that the negative grid I used is associated to the theory of transformations with the nature of the observation theory. Its function is to provide an instrument to the psychoanalyst – that when used out of the session or incorporated by its person in the session – would permit studying other possibilities of the analytic work.

It diverges from the epistemic contribution of "Transformations" where unfolding of transformations in  $K$  in its possibility of evolution towards transformation in  $O$ , is

going to create a new conceptual field (not only the observational field), encompassing the possibility of transformations in O by means of a process similar to those that the mystics reach.

We have studied the negative grid. Considering the counterpoint knowledge and –knowledge, it would be possible to propose a grid **of the negative**. Such a proposal seems inadequate to me, because elements of the negative such as the transformation in –K have their clinical and theoretical development carried out in the positive grid, through appreciation of the beta elements. In this proposal, we would have to make an extensive review of Bion's concepts and modify his theorization. This encourages us to reflect on the possibility of transforming column 2 into another grid, a task not undertaken by Bion. I believe that it will remain a conceptual hiatus, even if we proposed and developed a grid to the left, according to Bion's proposal. We do not agree with Meltzer when he states:” We are facing a new nosology of psychiatric phenomenology”. I do not find it appropriate to consider the proposals of Bion as introducing a new psychiatric nosology. This statement seems to me to be the opposite to his work of opening thinking. Therefore it is also appropriate to remain alert so as not to pursue any proposals of a grid as having some nosologic quality.

## References

Bion, W. R. (1962). *O Aprender com a Experiência*. Rio de Janeiro. Zahar Editores, 1966.

a) P 22 L 6. b) P 42 L 11. c) P 114 L 13.

Bion, W.R. (1963). *Elementos de Psicanálise*. Rio de Janeiro. Zahar Editores, (1966).

a) P 201 L 1. b) P 207 L 12.

Bion, W.R. (1965). *Transformazioni*. Del aprendizaje al crecimiento. Argentina: Centro Editor de América Latina S., A.

Bion, W.R. (1983). *Seminari italiani*. Roma: Borla.

Bion, W.R. (1977). *Taming Wild Thoughts*. London: Karnac (Books), 1997.

Braga, J. C. (2003). O Alucinatório na Prática Clínica: Aproximando Algumas Questões. Apresentado em Reunião Científica da S.B.P.S.P, 22 de março de 2003. São Paulo.

Braga, J.C. (2003). Uma Grade Ampliada para Examinar o Âmbito do Alucinatório. Not published paper.

Chuster, A. e Conte, J. (2003). Uma Grade Negativa. In *W. R. Bion, novas leituras: a psicanálise: dos princípios ético-estéticos à clínica*, Arnaldo Chuster e colaboradores. Rio de Janeiro. Companhia de Freud.

Korbivcher, C. F. (1999). Mente Primitiva e Pensamento. *Rev. Bras. Psicanal.* V. 33, n. 4, p. 687-707.

Korbivcher, C.F. (2001). A teoria das Transformações e os Estados Autísticos: Transformações Autísticas: uma Proposta. *Rev. Bras. Psicanal.* V. 35, n. 4, p. 935-58.

Korbivcher, C.F. (2004). A Mente do Analista e as Transformações Autísticas. Apresentado em *Bion 2004*. São Paulo. Brasil.

Meltzer, D. (1978) La Pareja Psicoanalitica y el Grupo. In *Desarrollo Kleiniano Parte III El Significado Clínico de la Obra de Bion*. Buenos Aires: Spatia, 1990.

Meltzer, D. (1987). Il Modello della Mente Secondo Bion: Note su funzione alfa, Inversione della Funzione Alfa e Griglia Negativa. In: *Lecture Bioniane*. Roma. Borla.

Meltzer, D. (1990). Uma Investigación de lãs Mentiras, su Gênese y la Relación com la Alucinosis. In: *Metapsicologia Ampliada*. Buenos Aires: Spatia Janeiro. Imago Editora Ltda, 1983.

Tustin, F. (1981). *Estados Autísticos em Crianças*. Rio de Janeiro: Imago Editora Ltda, 1984. P 52 L 15.

Rezze, C. J. (1997). Interpretação: Revelação ou Criação. In *Bion em São Paulo: ressonâncias*. Maria Olympia A. F. França (coord.). Sociedade Brasileira de Psicanálise de São Paulo. São Paulo. Imprensa Oficial do Estado, 1997.

Rezze, C. J. (2001). A Grade em Conhecimento (K) e –Conhecimento (-K). Internal distribution in Six Seminars - *Transformations* coordinated by Cecil José Rezze, Sociedade Brasileira de Psicanálise de São Paulo.

Rezze, C. J. (2003) A Fresta. In: *Panorama*. Sandler, Paulo César, org. Haudenschil, Teresa Rocha Leite, org. São Paulo. SBPSP. Departamento de Publicações, 2003. P. 41-56.

Rezze, C. J. (2004). Apreensão Clínica através das Grades em Conhecimento (K) e – Conhecimento (-K). *Bion 2004*. Sociedade Brasileira de Psicanálise de São Paulo. São Paulo.

Sanders, K. (2002). Modificaciones de Meltzer a la Tabla de Bion. Apresentado no Encontro Comemorativo aos 80 Anos de Donald Meltzer. Barcelona.

Tustin, F. (1986). *Barreiras Autísticas em Pacientes Neuróticos*. Porto Alegre: Editora Artes Médicas Sul, 1990. a) P 28 L 7. b) P 28 L 7. c) P 156 L 20. d) 152 L 35. e) P 118 L 20. f) P 28 L 7. g) P 28 L 27. h) P 157.

Tustin, F. (1992). *Autistic States in Children*. London: Tavistock /Routledge.

## Notes

[1] This work was presented at a Scientific Meeting of the Brazilian Society of Psychoanalysis of São Paulo; on May, 21, 2005.

[2] We are using a writing in which the sign - (minus) is between parentheses, for instance: (-)β element, minus beta element. This to distinguish Bion's writing and that of his translators that use the hyphen between the word element and its attribute, for instance: β-element or beta-element, that is to say, the positive beta element.

**Acknowledgements.** I would like to thank Célia Fix Korbivcher for the encouragement received for the understanding of autistic phenomena; to Sonia Regina Saborido Gazzieiro for the valuable collaboration and to João Carlos Braga for the careful reading and questionings essential to this work.

**Cecil José Rezze** is Training Analyst and Effective Member of the Brazilian Society of Psychoanalysis of São Paulo; PhD from the School of Medicine of the University of São Paulo.

Rua Antônio de Gouveia Giudice, 1122. CEP 05460-01. São Paulo. S. P. Brasil.

E-mail: [cjrezze@uol.com.br](mailto:cjrezze@uol.com.br); Phone/Fax 5511 30230129

