

Cleuber Cristiano de Sousa

Acceptance date: 10/03/2025



All content in this magazine is licensed under a Creative Commons Attribution License. Attribution-Non-Commercial-No-Derivatives 4.0 International (CC BY-NC-ND 4.0).

Abstract: Identifications are the most original form of emotional attachment, even before a particular object is formed. Ferbain (1940) states that a child's development allows them to internalize not only a person or object, but as they progress through life, internalization also extends to complete relationships, which are characterized in withdrawal as socio-emotional reciprocity and an understanding of impoverished relationships in autism. The aim of this work is to consider the existence of an identification in the autistic position, in view of their cultural disidentification and their impaired emotional reciprocity and understanding of relationships. The case study follows the subject R.A. and his account of possible secondary identification as a partial trait based on the *hat given to him by his uncle*. The methodology is based on the quaternary structure of psychoanalysis: free association, dimensioning and re-dimensioning the demand, transference and counter-transference and the healing process. Thus, the method in psychoanalysis essentially corresponds to three articulated elements that establish a psychoanalytic psychopathology that is a remnant of Freud's accurate and sophisticated clinical approach to hysterics and, consequently, his investigation into the production of hysterical symptoms: experience, investigation and interpretation. For Freud, scientific questions have always been based on experience and not on the authority and assumption of theories.

Keywords: Identifications. Identity. Social ties. Subject. Autism.

INTRODUCTION

Psychoanalysis is part of this 21st century due to the multiplicity of identifications and the ways in which they resonate, both in terms of the phenomena of globalization due to the pandemic, which has narrowed distances, and the dissonant currents and proposals for the constitution of subjects, history, the symbolic and culture. This notion of proximity and

distance has become an imaginary equidistant point. The shortening of the symbolic, due to "*Stay at home!*", was not only a character of social isolation, but also ushered in the advent of communication as a dynamic mechanism of an existential body that was exhausted in the individual, calling for a collective of mental and physical health of being and feeling worked by speaking.

Being and feeling real are essentially about health, and only if we guarantee being can we move on to more objective things. I maintain that this is not just a value judgment, but that there is a link between individual emotional health and feeling real. (Winnicott, 1967 / 1999, p. 18)

When dealing with social relations in specific contexts (Pandemic), it is important to highlight the identifications that are the line of the psychoanalytic path to understand the bonds of belonging and the very constitution of the subject marked by history and touched by the symbolic in its primary and secondary (narcissistic and partial instances.) According to Freud (1923), identifications are the most original and primitive way of expressing a bond.

The effects of the first identifications made in early childhood will be general and lasting. (Freud, 1923a, p.45)

In his work *Psychology of the Masses and Analysis of the Self* (1921), Freud goes beyond the concepts of *the death drive*, *Eros and negation*, already discussed in previous works, and presents social dynamics and an analysis of identifications that culminate in a social analysis that currently explains and describes the perverse historical moment that we are witnessing or, if may say so, astonished weby. We have been provoked into reinventing social relations and the contexts have been recognized as an infinite *loop* return to the traumatic contents of our childhood.

Uncertainties and constant variability alternated in the self-regulation of life's dynamics and launched into a universe of sensations, an

apparent normality contrasted with the emerging whirlwind of feelings of instinctual due to maternal and losses and renunciation paternal those of people we lived with every day.

The interpretation of the game then became obvious. It related to the child's great cultural achievement, the instinctual renunciation (that is, the renunciation of instinctual satisfaction) that he had made by letting his mother go without protest. He compensated himself for this, so to speak, by staging the disappearance and return of the objects within his reach. (Freud, 1920/1976, p. 26)

For Freud (1921), identifications are the most defensive forms of relating to something, as a tendency of the ego, and sometimes even prior to the constitution of an object. The three forms of identification emerge from an articulation that presumes the constitution of the historical subject driven by desire and marked by lack. In times of emotional instability, a relatively exacerbated subjectivity became a mechanism for decompensating investment and, consequently, the libidinal economy.

Such a motion is what we call desire [Wunsch]; the reappearance of perception is the fulfillment of desire [Wunsch Erfüllung], and the full investment of perception by the excitation of need is the way shortest to the fulfillment of desire. (Freud, 1900/2015, p. 594)

LITERATURE REVIEW

IDENTIFICATIONS AND THE SOCIAL BOND

Freud (1923), in his theory of the Oedipus complex, inaugurated a revolutionary proposition on the elaboration of an infantile sexuality, that is, the child as a pulsional body.

The superego retains the character of the father, while the more powerful the Oedipus complex and the more quickly it succumbs to repression (under the influence of the authority of religious teaching, school education and reading), the more severe

the superego's domination over the ego will subsequently be, in the form of conscience or, perhaps, an unconscious feeling of guilt. (...) The ego ideal, therefore, is the heir to the Oedipus complex, and thus also constitutes the expression of the most powerful impulses and the most important vicissitudes libidinal of the id. (Freud, 1923/1996, p. 49-51)

Freud (1921) states that the core of what we mean by love naturally consists (and this is what is commonly called love and what poets sing about) in sexual love, with sexual union as the goal. For Lacan (1966), the signifier is expressed through desire. Thus, we can see an immediate relationship with the unconscious, immediate but constant. We are desiring beings, so we are signifiers; speech itself is constituted.

Lacan (1966) also states:

The unconscious is not a species defined in psychic reality by the circle of what does not have the attribute (or virtue) of consciousness". (Lacan, 1966, p. 830)

For Lacan (1956), it is in systemic approaches to structure that unconscious desire is organized as language, crossing the symbolic. It is in this field of language that the subject is constituted in relation to the other. But what other? And is there always another, even if the subject is emptied? Does the theory of the vase figure in *emptiness* or *nothingness*?

It is from this modeled signifier, which is the vase, that emptiness and fullness enter the world as such". (Lacan, 1959-60/1997, p.152)

The symbolic is thus perceived as a decentering action introduced by the notion of the unconscious in Freudian psychoanalysis. This form of relationship associates and, at the same time, institutes the strengthening of the bonds of social belonging to a *group*. It is in this action that relationships become a form of partial identification and a *leader* becomes the center of a counter-transference based on empathy (secondary/partial identification).

Only through the influence of individuals who can provide an example and whom they recognize as leaders can the masses be induced to do the work and endure the renunciations on which existence depends. All will go well if these leaders are people with a superior inner understanding of the necessities of life, and who have risen to the height of mastering their own instinctual desires. (Freud, 1927, p. 5)

One approach that draws on psychoanalytic theory and knowledge is the psychodynamic, which states that the superego, ego and id maintain a battle with each other, in which expression and discharge are the way in which the demands of sexuality and aggression are received. According to Freud (1926/1959), anxiety is the result of the conflict between these instances, in other words, it is a product of it. *This anxiety alerts the ego to the need for a defense mechanism* (Freud, S., 1926/1959).

I suggest the possibility that a chronological overtaking of libidinal development by the development of the ego should be included in the disposition to obsessive neurosis. A precocity of this kind would make it necessary to choose an object under the influence of the ego instincts at a time when the sexual instincts have not yet assumed their final form." (Freud, 1913/1996, p.348)

For Freud (1921-1923), there are three types of identification, with the first identification being the most original form of emotional attachment, even before a specific object is formed. This identification precedes the Oedipus complex and is called primary, prior to the relationship with objects or people, constituting the mother-baby oneness. So, this primitive form is profuse and consists of a fusional identification, a particular and intimate union of affective and emotional ties with the parents.

Narcissistic identification is secondary, in a regressive way, becoming a stage that precedes object selection based on loss, as it is a substi-

tute for a bond with a libidinal object. While the former inaugurates a baseline or preview of the subject's personal history, the latter marks the ego's identification with the object.

The broad general result of the sexual phase dominated by the Oedipus complex can therefore be taken to be the formation of a precipitate in the ego, consistent of these two identifications united with each other in some way. This modification of the ego retains its special position; it confronts the other contents of the ego as an ego ideal or superego. (Freud, 1923/1976, p. 49)

It is through this process that the formation of the neurotic symptom can be understood in psychoanalytic theory. Thus, the symptom would be a form of compromise, which is a defense mechanism against the imperative imposition of the ID/desire, but gratifies it in an attenuated and masked way. The third form of identification also occurs in a secondary and partial way, for example the identification of a group member with their leader according to a secondary partial trait "of one with another in the ego".

Nothing prevents us from supposing a primitive state in which this path is actually traveled in this way, that is, in which the wish ends in a hallucination. (Freud, 1900/2015, p. 594)

Identity differs from imitation in that it is an unconscious process resulting from successive identifications by a subject who partially or totally retains traits or attributes of another, unconsciously conceiving a set of properties for themselves. For Freud (1914), *it is the result of a long process of identifications in which the subject assimilates, totally or partially, in the manner of an oral incorporation, properties and attributes of another.*

The identity of perception through the fulfillment of a desire is a repetition related to a satisfaction, which in the baby's life is perceived as a hallucinatory reality.

In the unconscious, this (the body) represents the storehouse of everything that is most desired, and which can only come from there; so if it is not destroyed, is not subjected to such great danger and therefore does not become so dangerous, the desire to obtain food for the mind from this source can be satisfied more easily. (M. Klein, 1931/1996, p. 276)

The identity of thought is the result of the confrontation in the ego of the subject's psyche, where there is the inhibition of the hallucination caused by the primary process, leading to the interposition of the chains of thought by the ego and the satisfaction of desire in external reality, in a partial way, thus called the secondary process.

Nothing prevents us from supposing a primitive state in which this path is actually traveled in this way, that is, in which the wish ends in a hallucination. (Freud, 1900/2015, p. 594)

In this way, an is pinpointed early infantile structure, formed by object relations and the psyche in infancy, thus making a leap qualitatively in the Freudian proposal. This proposition was based on the premise of an Oedipus complex in the phallic phase, from the three to five, age of when libidinal energy is directed towards the genitals. It can be said from this perspective, that the subject fixed in this phase would become excessively aggressive or passive.

But we do not isolate from this that, in any case, self-love has its part in the name "love", on the one hand, and, on the other, love for parents and children, friendship and love for humanity in general, as well as devotion to concrete objects and abstract ideas (Freud, 1921/1976, p. 115).

An initial study of child psychoanalysis, based on Freud's *Three Essays on the Theory of Sexuality* (1901-1905), when Freud signaled a counterpoint to the moralizing thinking of the time, which refuted the sexual activity inherent in early childhood.

Therefore, this first psychic activity aims at a perceptual identity, i.e. the repetition of that perception which is linked to the satisfaction of the need." (Freud, 1900/2015, p. 594)

Thus, the fixation on the phallic phase would be related to psychoanalytic concepts such as regression and libido, which would explain the fascist tendencies that persisted during the political movements of the 1920s, violently and irrationally breaking down the moral and welfare barriers of society and the customs of the time.

In relation to the social movements of the early 21st century in Brazil, we could point to the third form of identification, which is called partial and is also secondary. This type of identification is to linked empathy, which is the perceptual ability to identify the quality present in the other, relating the traits to another mental life, based on everyday object relations and social experiences. The approach to the behaviors of social groups and their respective founding ethos inaugurated the proposition that the relationships that constitute children's lives are actually social phenomena that are anchored in the experiences most primitive.

HOW IS THE SUBJECT CONSTITUTED IN AUTISM?

The demands of life then come from within us and from the vital needs of existence. The discharge route is related to the pleasure principle and comes from inside the body. For Freud (1915/2004), the demands of life are essentially those that come from within the body and from vital needs.

We already have some elements to distinguish a drive stimulus from another (physiological) stimulus that acts on the psychic. Firstly, the drive stimulus does not come from the outside world, but from within the organism itself. For this reason, it also acts differently on the psychic and requires other actions to eliminate it. The essential thing about the stimulus is that it acts as in a single

impact and can also be neutralized by a single appropriate action; the prototype of such an action is the motor flight in the face of a source of stimuli. (Freud, 1911-1915/2004, p.146)

The source of the drive is endogenous. We call it the source from within the body, because of its constancy and its action lies in the failure of the reflex mechanism to deal with the external factors of desire and how this can be modulated with internal desire.

For Winnicott, the concept of regression takes on a meaning of its own as regression to dependence; he makes a point of keeping it separate from the notion of regression in terms of the development of the libido and its various organizations, stressing that it is another axis of the maturation process: the one that goes from absolute dependence to mature dependence. (Gurfinke L, 2001, p. 185)

The experiences and vicissitudes of our body are inscribed mentally and neuroses are responses to the inscriptions and demands of the work to maintain balance and pacification. It is at the boundary between the somatic and the psychic that the drive is installed. This drive is presented by Freud as:

Measure of the work demanded of the psychic as a result of its relationship with the bodily (Freud, 1967b, p. 214).

Experiencing satisfaction is the starting point for dealing with the accumulation of energy from somatic needs and psychic activities. This accumulation must be released and it is from this experience that a possible resource is proposed for the development of functions that we treat as cognitive: memory, attention, thinking, reasoning, problem-solving capacity. These are the same functions that are impaired in autism and present themselves as characteristic symptoms of in the nosological diagnosis-impairment, resulting from this decompensation and the accumulation of tension.

The “I” ultimately derives from bodily sensations, especially those that originate from the surface of the body. It can thus be seen as a mental projection of the surface of the body, as well as, as we saw earlier, representing the surfaces of the mental apparatus. (Freud, 1927/2006j, p. 39)

If this loss is achieved in experience, this is the path that psychoanalysis must follow, because this maturing gradual and experiential is not acquired abruptly and completely in the nosological and nosographic approach. Its effectiveness lies in the constancy of a journey between identity of perception and thought.

The chain of physiological processes in the nervous system is probably not causally related to psychic processes. The physiological processes do not cease as soon as the psychic ones begin; on the contrary, the physiological chain continues, except that, from a certain moment on, each link (or isolated links) corresponds to a psychic phenomenon. The psychic is thus a parallel process to the physiological (Freud, 1891, p. 56-57).

Withdrawal in autism is related to the level, intensity and form of responses to the social initiatives of the group and would be situated thus in an instance close to neurosis, which is part of instances of the psychic Freudian metapsychology. Neurosis is concerned with repression, psychosis with foreclosure and perversion with denial.

Psychoneuroses are, so to speak, the negative of perversions. In neurotics, the sexual constitution, in which the expression of heredity is contained, acts in combination with the accidental influences of their life that may disturb the development of normal sexuality. (...) The driving forces behind the formation of hysterical symptoms come not only from repressed normal sexuality, but also from unconscious perverse motions. (Freud, 1901/1996g, p. 56, emphasis added)

The position of determining the Oedipus complex in the relationships presented in Freudian theory is characteristic of second-

dary identification(narcissistic) . In autism, it is through the lens of the child's emotional development and their interrelationships with the environment that we reach the possibility of strengthening their skills social as a subject. Psychoneuroses are based on this path rooted frequency of in the intrapsychic conflicts in the mind of the person with autism. These conflicts mark the individual's inhibition when it comes to social relationships and interactions with the group.

This illness is a disturbance of emotional development that goes so far back that, in some respects at least, the child is intellectually deficient. In others, it may show signs of being brilliant (Winnicott, 1966/1996, p. 181).

This form of withdrawal could be a libidinal economy of the new century, given the scarce or empty transfer to the external object, i.e. the investment is transferred to the ego, in the service of unrealization.

(...) the discovery that the ego itself is cathe- xized by libido, that the ego, in fact, con- stitutes its original stronghold and continues to be, to a certain extent, its headquarters. This narcissistic libido turns towards ob- jects, thus becoming object libido, and can transform itself back into narcissistic libido (Freud, 1930/1996k, p. 122).

Reactions to loss can be of an ideal or ma- terial nature and contribute to the lack that is concealed in the fulfillment of desire. There is a dynamic between the loss and the lack that are installed in the affective distancing of the mother-baby and the evolution of the dis- tancing results in a form of digression. With regard to withdrawal in autism, it can be as- sociated with the process of inhibition of the topographical balance in the libidinal scarcity of transference to the external object. There is no lack and there is indifference in the mo- ther's distancing for this baby. There is thus an impoverishment of the self and if is not ins- cribed the lost object in it, it becomes deper- sonalized.

It is through the search for a past and sur- passed satisfaction that the new object is sought, and which is found and apprehen- ded elsewhere than at the point where it is sought. There is a fundamental distance here, introduced by the essentially conflic- tual element included in every search for an object (Lacan, 1994/1995, p. 13).

It is important to state that from this point of view, the psychotic structure is very simi- lar to the symptoms of this withdrawal, even though it is a very delicate subject and, in the discussions, several authors do not agree or abstain from this position, we will now use the clinical line of reasoning of theoretical approximation of this autism to the studies of psychosis, however with the caution of the fle- xibility of the spectrum.

(...) a much more energetic and successful defensive modality, which consists in the ego rejecting the unbearable representa- tion, together with its affect, and behaving as if the representation had never appeared. Only at the moment when it has achieved this, the person is in a psychosis that admits of no other classification than 'hallucinatory confusion' (Freud, 1893-1899/1987, p. 59).

According to Jerusalinsky (2012), autism is a structure alongside psychosis, neurosis and perversion. The subject who appropriates lan- guage and is out of sync with the rupture with the signifiers of the other falls into psychosis. Structurally, this doesn't seem to be the case, because the defense mechanism operating in autism is exclusion and not foreclosure.

(...) in psychiatry this idea of a clearly de- fined illness is always erroneous, because every condition of psychiatric illness is mi- xed with deviations that belong to normal development. The details of the illness, in- fantile schizophrenia, actually spread out on all sides, and can be found in the description of any normal child". (Winnicott, 1963/1996 p. 176-177)

In this case, there is an *aversiveness* that results from a contained displeasure that leads to tension and is expressed in stereotyped, repetitive motor movements. This way of neutralizing this energy in an immediate and action unique produces effects of stimulating themotor movements that automate sensory search and self-regulation.

Displeasure is always the expression of a higher degree of tension, and that, therefore, what happens is that a quantity in the field of material events is transformed, here as elsewhere, into the psychic quality of displeasure [...] We recognize our mental apparatus as being, above all, a device designed to subdue excitations that would otherwise be felt as distressing or have pathogenic effects. (Freud, 1914/2006, p. 92)

The most complex aspect of this process of mental facilitation with autism is understanding that the lost object doesn't bring pain, but rather triggers the process of emptying in order to replace the object, without the identity of thought. For Freud (1895), it is not the that is painfulloss of the object , but the hard work of the *hypersensation* of attachment to the representation of the lost object.

The human organism is initially incapable of promoting this specific action. It comes about through the help of others, when the attention of an person experienced is drawn to an infantile state through discharge via the alteration pathway. This route of discharge thus acquires the all-important secondary function of communication, and the initial helplessness of human beings is the primordial source of all moral motives. (Freud, 1895/2006, p. 379)

In this case, it's the pain of attachment that requires *hyper-investment*, not the pain of separation. What becomes latent is not separating but becoming increasingly attached to an mimetic traceimmaterial . Bringing it back to neutrality, in the autistic position, there is a universe of sensations that are responsible for this substitution (experience of satisfaction),

which is copiously lived and experienced in a circularity of *hyperinvestment* in oneself. Moving away doesn't stop the pain, but striving to connect with the loss does.

For us, the repressed is the prototype of the unconscious. We realize, however, that we have two types of unconscious: one that is latent, but capable of becoming conscious, and another that is repressed and is not in itself, and without further work, capable of becoming conscious. (Freud, 1996, p28).

By making the apparent and decisive distinction for the clinic in the elementary concepts between loss and lack, one can also pinpoint reality from the point of view of neurosis and psychosis. It is worth noting that for a long time the concepts of infantile autism, psychosis and schizophrenia were confused and commonly used with similar meanings. The defense of semantic distancing is found in a relationship narcissistic that overcomes the correspondence of the process of social withdrawal and the resulting substitution by disturbances in interaction with the group, which would be an exclusion from reality.

In neurosis, a fragment of reality is avoided by a kind of escape, whereas in psychosis, the initial escape is succeeded by an active phase of remodeling; in neurosis, initial obedience is succeeded by a postponed attempt to escape. (Freud, 1924/2006, p. 209)

In autism, there is no effective escape or disconnection from reality due to psychological suffering. Because of the combination of stimuli and sensations, there is an avoidance and disregard of the effects of reality on the subject's life story.

To put it another way: neurosis doesn't repudiate reality, it just ignores it; psychosis repudiates it and tries to replace it (Freud, 1924/2006, p. 209).

In the opposite direction to loss, there is lack, which acts as the driving force behind the desire for life, which is detached from loss as an incursion into the perceptual identity of

the connection to the lost object. As a remedy for loss, there is only representation to replace the lack. And is this the path that autism can take, and for this reason, the symbolic is fundamental, because thrown out of communication, the condition of the autistic is to be immersed in the real.

It's about the phallus, and knowing how the child realizes more or less consciously that his omnipotent mother fundamentally lacks something, and it's always a question of knowing by what means she's going to give him this missing object, which she always lacks herself (Lacan, 1956-57/1995, p. 196).

According to Freud (1900), only desire is capable of setting the psychic apparatus in motion. Primal experience refers to the reminiscences of the baby's experiences that still persist in our bodies, carved into our psychic memory. The withdrawal that corresponds to the 's behavior baby in autism refers to the initiative to distance and isolate themselves from their peers or from the social group. It is distinguished thus from an apparent inhibition or fragility in contact due to shyness.

Traumas are either experiences of the individual's own body or sensory perceptions, mainly of something seen or heard, i.e. experiences or impressions (Freud [1938] 1996, p. 89).

The prototypes are hunger and the breast and the search is for satisfaction from this first experience of pleasure. These experiential itineraries are the scenarios that provide the processes of experiencing satisfaction or exhaustion (pain) for the return of the repressed or if the drives are constantly and entirely directed towards and find this internal object, which would consist of the massive return of receiving this libidinal investment.

The field of language is a decisive point in the development of babies with autism. Speech must be addressed to the other. Its exclusivity as a word-object inscribes in itself the mark of

jouissance, a signifier outside of communication, becoming an inanimate body that is not inscribed as symbolic in the social exchanges of otherness.

The sexual drives rely, at first, on the process of satisfying the drives of the "I" in order to convey themselves, and only later do they become independent of them. This way of relying on the processes of satisfaction of the drives for self-preservation in order to be able to convey themselves is evident when one observes that the people involved in feeding, caring for and protecting the child become its first sexual objects, thus first the mother or her substitute" (Freud, 1914b/2004, p. 107).

It is in the encounter between the need and the other that the tension dissipates and the pleasure is installed, not exhausted in itself. It is this other who plays the role of promoting this initial satisfaction and fulfilling the function of primary care and protection. It is then in the experience of satisfaction that the subject is inscribed in culture through their cultural history and group history, appropriating the symbolic through language. The autistic person's distance from this social group is due to the absence of this experience of satisfaction.

The totality of the event then constitutes the experience of satisfaction, which has the most radical consequences for the development of the individual's functions (Freud, 1886-1889/1996, p.370).

Tracking or mental facilitation is the repetition of this activity that is satisfied in the whole process of constituting the contemplation of a perceptual identity, which is also hallucinatory. The autistic defense is a specific way of representing a subjective dynamic that is eluded by the separation from this other, because it prevents the word from affecting this body. A defense that prevents a symbolic incursion into the body and not having speech as an effect, what would be left for this autistic position would be language as trauma.

(...) the “I” separates itself from the unbearable representation, but this is inseparably intertwined with a fragment of reality and, as the “I” completes this operation, it also distances itself, totally or partially, from reality. The latter is, in my opinion, the condition under which a hallucinatory vividness is attributed to one’s own representations, and thus, after a successful defense, the person falls into hallucinatory confusion (Freud, 1893-1899/1987, p. 60).

Freud (1893) treats it as hallucination, because the insistence on achieving perceptual identity allows for exhaustive investment in the representation of this experience primal, leading to confusion (distortion) of sensory-perception, with signs that refer to meanings that are not real in time and event, but are in the memory of the subject’s repressed discourse. The trace imaginary left by the imaginary experience is temporalized in the actualization of the saying, which is an action, but which nevertheless merges into the hallucinatory act. And it is on this path that, once again, there is an approximation to psychosis.

The apprehension of the body by the subject, however, requires a new operation to take place. This operation, through which the body is subjectivized, is of the order of the imaginary, insofar as it depends on the investment of an image - the image of the body (Elia, 1995, pp. 152-153).

In the opposite direction to the identity of perception, as a hallucinatory way of *illusory satisfaction* of desire, thought emerges, which through an indirect channel of fulfillment of this experience of satisfaction characterizes what is called the identity of thought. The body will not be satisfied by the image, it craves the material and without this need, the result is being met with the experience of helplessness. The loss of investment in this imaginary experience, which will not be enough to feed the body, is incomplete and destroys the investment that would produce the satisfaction of libido.

Anxiety is something you feel, an affective state. As a feeling, anxiety has a very strong sense of displeasure. It is accompanied by more or less defined physical sensations that can be referred to specific organs of the body. The generation of anxiety sets the generation of symptoms in motion and is, in fact, a prerequisite for it. (FREUD, 1926/1986, p. 155)

The autistic person doesn’t experience pleasure in the same way, but is satisfied with the corresponding updating of the experience, and begins to seek reparation in the cyclical dynamics of life. Like an open neural pattern that can’t close, the autistic person constantly relives the same thoughts and ideas and doesn’t resent this insistence on sameness. In this game of conformation, there are no winners. The sensitivity with which babies respond to the rhythm of the imposition of the contingencies offered to them is annulled, and then, because there is no return to the past, in memory, these babies take refuge in a suspended time, as if they were expelled from a present time. (Guedeney, 2005, *emphasis added*)

It manufactures for the subject, caught in the lure of spatial identification, the fantasies that follow one another from a shattered image of the body to a form of its totality that we will call orthopedic - and to the finally assumed armor of an alienating identity, which will mark with its rigid structure the whole of his developmental. (Lacan, 1949/1998, p. 100)

The mnemonic mark refers to the reminiscences of this support, which, inscribed in memory, is located as an image in the scope of what will be the real of the impossible. This satisfaction is hallucinatory and will lead to unsuccessful drive investment, because it results in mental confusion and a confrontation between desire and need. affective and attachment, and its constancy diminishes It can be said here that poor transference results in social withdrawal, which is a chronic reduction in response belonging and fades the effect of interaction.

Even babies need a history [...], a genetic, biochemical, cognitive history, a history of their bodily equipment, but they also immediately need to be inscribed in a family history, a cultural history, a group history in order to be able to appropriate the thought and language that exist certainly in the world where they arrive and which proceeds them. (Golse, 2003, p. 19)

METHOD

The method in psychoanalysis the psychoanalytic lens stems from , which has the cultural matrix of the time as its guiding element. Freud (1914/1980), in his work *Remember, Repeat and Elaborate*, described the analyst/analysand relationship in as detail the phenomenological mechanism of the repetition of behaviors and experiential experiences on the couch, in a spiral of events and situations intrinsically related to the traumatic contents of childhood life. For Freud (1914/1980), there is no recollection or memory of what has been forgotten or repressed, there is an action expressed in the dynamics of events. This repetition is not in the memory, or in its immediate recollection; there is an experiential dynamic that promotes the link between present and past in the expression of the subject's attitudes.

Therefore, the method in psychoanalysis essentially corresponds to three articulated elements that establish a psychoanalytic psychopathology that is a remnant of Freud's accurate and sophisticated clinical approach to hysterics and, consequently, his investigation into the production of hysterical symptoms: experience, investigation and interpretation. Scientific questions for Freud have always been based on experience and not on the authority and assumption of theories. To this detailed observation we can already relate the second element, which is investigative. The phenomenon must be investigated and the message (symptom) must be unveiled and interpreted, and the essentially psychoanalytic method is based on interpretation.

Thus, by observing in detail the phenomenon of the scaling and resizing of a symptom and investigating not the topography but the message of this symptom,, the psychic structure is revealed to the interpretation of the unconscious content that can possibly be realized through a discourse in free association. The quaternary structure: free association, demand, dimensioning and re-dimensioning of the symptom and the healing process are articulated in search of the meaning that is hidden. In the psychoanalytic , *setting* the transference act allows fantasies and thoughts to emerge from the unconscious to be represented symbolically.

Analyzing people with autism is a methodological challenge for psychoanalysis. The definition as a psychic structure already raises a series of clinical structural issues, with characteristics identified as neurotic and sometimes psychotic. It is not our purpose to accentuate this discussion between historical approaches to psychoanalytic studies autism, but rather to ponder on a place of speech in this territory if there is a spatial demarcation in this profuse universe, ,and to be more productive in signaling an existential delineation in contrast to the worn-out structural discussion or a particular nosographic framework.

The traditional methodology consists of a design based on a characteristic scenario with samples for data collection and intervention and subsequent measurement and analysis. This classic research dynamic would make it possible to relate the object of study/research to a specific place of social coexistence, which would not be limited to a tangential physical space, but to a community of social insertion. In conjunction with psychoanalytic thinking, it should be related to counter-transference studies and be based on interpretation.

The delimitation of this space existential (personal, social, cultural, economic, political, etc.) would make it possible for this population to identify with the means or goods of

production, becoming part of an institution, in other words, formalizing its institutional geography. This population *disidentified* (autism) becomes a *non-place*, and being in a place would characterize the historical nature of formal existencethe group's .

*To put and towards.*it plainly, the place is necessarily what the body moves in A body cannot move within itself, nor, by a natural movement, seek the high and the low if, in itself, it has these differences. We must therefore establish not only these differences outside the body, but also the theater of movement. (Bergson, 2013. p. 47.).

The influence of the first years of life and the importance of childhood experiences in shaping the psyche and interpreting psychoanalytic phenomena is a dynamic reality. Affective life, emotions, identifications and the strengthening of bonds of social belonging are anchored in this childhood phase and from there emanate all the threads that link the unconscious content and the psychic universe of this subject. In the phase before speech, linguistic and symbolic content is contained by regression and introjection of expression and feelings. In autism, there is a search to relate traits, objects and qualities of objects in this incursion or internalization.

The mouth is the first cavity of emptiness: speech suffers from its hunger. It will continue for a long time, "suckling, biting", eager for faces, insatiable. There is no shortage of expressive details to show how clearly the emptiness imposes itself in analytical treatment. It's a matter of letting it settle in with your speech, not trying to avoid it or it infill. (Fédida, 1975, p. 290)

The manifestations of this set of events and happenings are essential for the construction of the subject's personal and social history, which without these identifications would be emptied of symbolic and imaginary content, mentally struggling to *remember, repeat and elaborate*. The research method must take into account this effort to return to a personal his-

tory that should have been built back then, but due to the absence of symbolic content, wishes to be repeated, but cannot be recalled. A void has not been created, because in the epistemological field of Freudian metapsychology, the void without successlies between nothingness and being. In opposition to nothingness, we have a dynamic of expulsion from this object of desire which is the other, ,the *non-being*.

Emptiness is a metapsychological concept insofar as it refers to psychic space, which only has metapsychological value because of its technical operability: this is the creative function (reconstruction) of metaphor. This is why we can say that emptiness is the psychic space of metaphor (Fédida, 1978, p. 320).

R.A. AND HIS UNCLE'S HAT

R.A. is an only child and since the age of three he has shown a well-developed set of social, psychomotor, play and language skills, which is considered to track his abilities compared to a typical child of the same age. But it wasn't always like this. His mother played a decisive role in strengthening the bonds of social belongingchild's , guiding him affectionately and safely into spacesocial and cultural . R.A.'s history of withdrawal social began as early as first year, around three months old, with thesignificant damage to social relationships and understanding of relationships between peers and the family.

According to her mother:

When I felt that something wasn't right with him, it was at the age of one year and three months that the first signs of autism appeared. He played functionally, interacted well with everyone, smiled back, danced, imitated, spoke a few little words like grandma, bread, water, daddy, brown (the dog), we noticed that he suddenly stopped doing what he was already doing, even simple skills like saying goodbye and kissing, it was as if he had become apathetic the world, including tome. But as it was right in the middle of a pandemic, I wasn't sure of anything yet, I knew only superficially about autism.

When he was two, we went to see a psychiatrist and I told her all my worries. She said it could be because of the pandemic, and that it was too early to diagnose him as autistic, so she referred for interventions. During this period, he us began to play dysfunctionally and put frequently objects in his mouth, at the age of two years and three months. That's when he started interventions, and then I began to study more about the subject (autism) and to feel my son close to me again.

He had some problems with his diet at the same age as he started the interventions. He wouldn't accept anything "soft", or salty food, only sweets, bread, cookies, juices, yogurts and fruit.

For a while, he only wanted to have a banana for lunch. As he was staying at the little hotel, I told the girls that I could give him whatever he wanted and that at home I would feed him salty food, and so we did for a year.

In the next year, when he entered nursery school with an autism report, the issue of feeding improved a hundred percent. Now he's free to let himself eat, he can and he likes it. Before, I didn't encourage him to eat alone, because I knew he wouldn't be interested. From an early age, he showed hypersensitivity in the head area. He had difficulty with haircuts and other personal care that required touching this area, as it was extremely sensitive for him. As he liked to play jigsaw puzzles, on one occasion he was put on his head and began to accept the game, so he started putting plastic pots and pans on his head. After these events, my brother gave him a hat, which has become his trademark. He puts it on objects in a very unusual way.

After the interventions, I feel him getting closer and closer to me, it's as if he perceives me and I perceive him. I remember that once the girl from said that he didn't seem to have a sense of space, he even walked over the children. Today he wants to stay close, but he watches where he goes so he doesn't trip over his classmate. When I come from anywhere to pick him up, he always celebrates, welcomes me with smiles and hugs and,

even knows our car, its model and color. In fact, R.A. has been talking since he was nine months old (CVE, emphasis added). I always felt that he was more agitated than other children, he always slept well, but during the day, from the time he woke up until bedtime, he needed a lot of activity.

DISCUSSION

R.A., from an early age, around one and a half and two years old, already used objects in a dysfunctional way, for example, plastic pots and other objects were brought to his mouth, with a change in focus and intensity, with sensory stimuli or unusual interests in sensory aspects. The professional who was accompanying the child advised her to add functionality to the inputs or objects used in play.

From this sensory alteration, there was always hypersensitivity (a reaction against textures, or even a search for sensation, relief and self-regulation) in the head, at which point the mother reported that objects (plastic pots) were placed on the head, in a simple act of everyday play. This heightened sensitivity caused the child to avoid demands, or even to avoid carrying out functional activities or personal care, such as getting a haircut or another task that required better-developed tactile skills.

As much as his mother insisted on including toys and games that related to this hyperactivity, R.A. continued to renounce any kind of tactile desensitization initiative. The change came about when his maternal uncle, according to his mother, gave him a hat, his uncle's hat. The inauguration of this trait, after the strengthening of the bonds of social belonging with the family, enabled an identification and the transfer of libidinal energy to an external object. According to his mother: "He won't take this hat off for anything".

The literature that presents the psychopathology of children with autism has in its diagnostic criteria (DSM 5/2013), characterized as B, a series of behaviors that are presented

as motor movements, insistence on sameness, fixed and circumscribed and perseverative interests, with alteration, abnormality, intensity and focus, with attachments to unusual objects, with circumscribed or perseverative interests and also hyporeactivity and hyperreactivity, with sensory stimuli or unusual interest in sensory aspects and contrary reactions to textures.

Family celebrations, community activities and academic skills in less restrictive spaces were always a challenge for the parents, family members and friends who took part, becoming a tense situation and resulting in a series of stereotypes, both in speech (echolalia and behaviors *flapping* and *rocking*). Therein lay a desire (expressed in the absence) of the parents for closer family relations with the other children, like the father, who also related socially in a punctual and singular way, according to the mother's account.

Social roles in the social microcosm that is the family are imposed by otherness. Based on this assumption, the subject is given a certain imaginary role so that all the actions called for by Lacan's social iceberg can be carried out in society. The other, who is unconscious and breaks into the chain of discourse, is the uncontrollable. Language (the hat) is the outside, but it is linked to historicity. In the unconscious, what's inside doesn't refer to the ideology that is shaped in an external universe, created symbolically in parallel. That's why, for Lacan, the subject who is already there breaks through the flaw.

Children with autism are not inscribed in desire through the search for a lost object, because the process of developing their developmental abilities (imitation) and their psychic reality is a return to an initial position. Thus, we could situate the real "in what always returns to the same place" (LACAN, 1964/1988, p.52).

This case brings up a narrative in which Courtine (1999) recounts a passage from Milan Kundera's *Clementis' Hat*. A crowd was following a Russian leader called Gottwald as he gave his speech. There was a moment when the Clementis Hat was placed on Gottwald. Images were recorded and photographs taken. After a while, Clementis' betrayal became public and the photos of the two of them were modified and Clementis' image was erased, but from the hat, it appears that Clementis was still an absent presence. As for R.A., it's the presentification effect (identification) of his uncle's hat.

FINAL CONSIDERATIONS

This work has focused on considerations about identifications, social ties and the constitution of the *subject* in autism. And whether it is possible for this subject in autism to be characterized as constituted by history and affected by the symbolic, even though *be (Non-being) disidentified* and configured in a *non-place*. The case study presented in this paper is about R.A., a three-year-old boy, and his personal story built from a hat. The universe of relationships between the symbolic and the imaginary so that the subject can be constituted in the field of the other.

The hat is above the head and for the child with autism, the mental configuration who has an impoverished body image of their body, and the body schema, the representation of their physical (biological) body, infers a status of their own body and their own body. This incursion into the universe of corporeality and its relationship with the spatial and existential identifies and becomes a mark similar to the trait of partial secondary identification, as occurred with the subject R.A.

REFERENCES

DIAS, E. O. (2000) *Winnicott: agressividade e teoria do amadurecimento* In: *Natureza Humana: Revista internacional de Filosofia e práticas psicoterápicas*. Vol. 2, no. 1, pp. 9-48.

_____(2003) *A Teoria do Amadurecimento de D. W. Winnicott*. Rio de Janeiro, Imago Editora.

FREUD, S. *Totem e tabu*. Rio de Janeiro: Imago, 1987. v.13.

_____. *O mal-estar na civilização*. São Paulo: Imago, 1992. v.21

_____. *Sobre a psicopatologia da vida cotidiana*. Rio de Janeiro: Imago, 1996. v.6.

_____. *O método psicanalítico de Freud*. Rio de Janeiro: Imago, 1996. v.7.

_____. *A dinâmica da transferência*. Rio de Janeiro: Imago, 1996. v.12.

_____. *Recordar, repetir e elaborar*. Rio de Janeiro: Imago, 1996. v.12.

_____. *Observações sobre o amor transferencial*. Rio de Janeiro: Imago, 1996. v.12.

_____. *Sobre o narcisismo: uma introdução*. Rio de Janeiro: Imago, 1996. v.14.

_____. *Sobre a transitoriedade*. Rio de Janeiro: Imago, 1996. v.14.

_____. *Os instintos e suas vicissitudes*. Rio de Janeiro: Imago, 1996. v.14.

_____. *Luto e melancolia*. Rio de Janeiro: Imago, 1996. v.14.

_____. *O "estranho"*. Rio de Janeiro: Imago, 1996. v.17.

_____. *Psicologia de grupo e análise do ego*. Rio de Janeiro: Imago, 1996. v.18.

_____. *O ego e o id*. Rio de Janeiro: Imago, 1996. v.19.

_____. *Neurose e psicose*. Rio de Janeiro: Imago, 1996. v.19.

_____. *Inibições, sintomas e angústia*. Rio de Janeiro: Imago, 1996. v.20.

_____. *O humor*. Rio de Janeiro: Imago, 1996. v.21.

_____. *Além do princípio do prazer*. Rio de Janeiro: Imago, 1998.

_____ NOVAES, J. de V. (2010). *Com que corpo eu vou?* Rio de Janeiro: PUC.

SOUSA, C. C. (2020). *Psicopatologia Psicanalítica: o estudo do homem pela determinação dos seus desejos e conflitos inconscientes*. Novas Edições Acadêmicas (International Book Market Service Ltd., member of OmniScriptum Publishing Group), Mauritius.

QUINET, Antonio. *Psicose e Laço Social*. Rio de Janeiro: Zahar, 2006.

QUINET, Antônio. *Os outros em Lacan*. Rio de Janeiro: Zahar, 2012.

WINNICOTT, D. W. (org) (1989) *Explorações Psicanalíticas: D.W. Winnicott*. Porto Alegre: Artes Médicas Sul, 1994.

WINNICOTT, D. W. (1999). *Conversando com os pais* (2a ed., A. Cabral, Trad.). São Paulo, SP: Martins Fontes.

WINNICOTT, D. W. (1984) Introdução. In: Winnicott, (1984) *Privação e Delinquência*. São Paulo: Martins Fontes, 1999, pp. XI-XVI. 281.

____ (1945c) *Por que Choram os Bebês?* In: Winnicott, (1957) *A Criança e o seu Mundo*. Rio de Janeiro: Zahar Ed. 1977, pp.60-75.

____ (1946a) *Que Entendemos por uma Criança Normal?* In: Winnicott, (1957) *A Criança e o seu Mundo*. Rio de Janeiro: Zahar Ed. 1977, p.140-147.

REGISTROS FOTOGRÁFICOS



Fig. 1 – O brincar independente e o desenvolvimento das habilidades psicomotoras de esquema corporal e configuração mental do corpo.



Fig. 2 – Habilidade óculo-manual e o brincar social com a mãe.

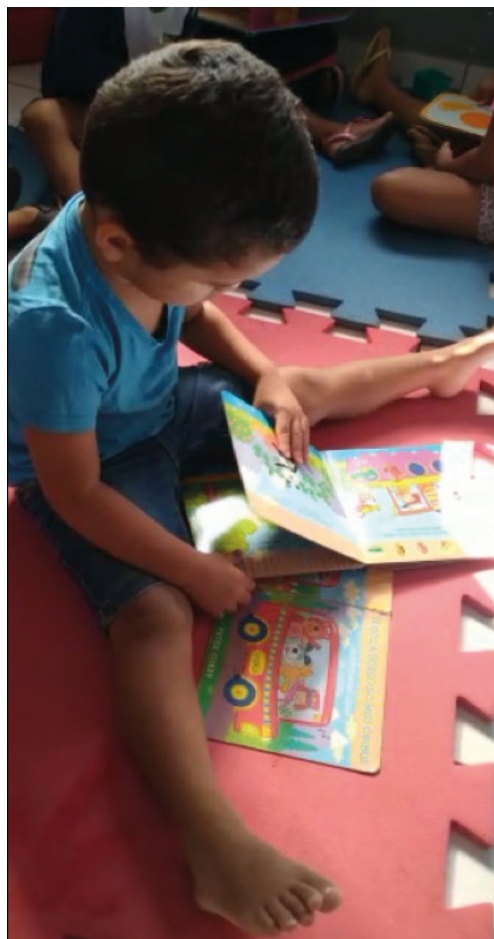


Fig. 3 – R.A e suas interações sociais em espaços menos restritivos.



Fig. 4 – R.A e a utilização do chapéu em objetos inanimados do seu interesse.



Fig. 5 – A utilização do chapéu de forma disfuncional e sua percepção visual.



Fig. 6 – As relações entre sujeito, objeto e espaços.



Fig. 7 – O universo simbólico de identificação de R.A.

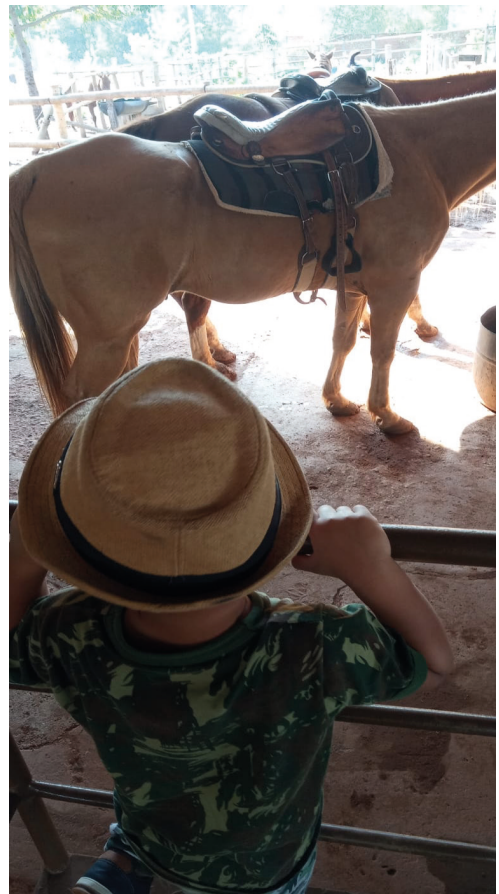


Fig. 8 – O mecanismo de identificação pela repetição (imitação).