



Elements of Winnicott's Theory of Sexuality*

Elementos da teoria winnicottiana da sexualidade

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Abstract: After summarizing the differences between the Freudian and Winnicottian paradigms of psychoanalysis (section 1), the paper lays out the central ideas of Winnicott's theory of sexuality. The main theses defended are the following: (1) Winnicott redescribed sexuality as having two basic roots: the instinctive root (instincts understood as biological drives) and the identity root (the human interrelations that happen parallel to instinctive drives, as identifications of various sorts), (2) he rewrote the essential portions of traditional psychoanalytic theory dealing with this phenomena, and (3) in doing so, added essential elements to his new paradigm of psychoanalysis (section 2). Following a schematic presentation of Winnicott's conception of the instinctive and identity roots of sexuality (sections 6-9), as well as of some of its implications (section 10), I point out the corresponding sexual conflicts and the resulting disorders (in particular, I show that the instinctive root can bring about neuroses, whereas the identity root may produce dissociations with psychotic complications). The final sections (11-12) analyze an additional thesis by Winnicott, according to which both roots of human sexuality are entrenched in the common ground of the process of maturation, and that all conflicts of the sexual type are related to the deeper conflict between being and doing, conceived as a universal human problem inherent to that process.

Keywords: sexuality, maturing, instinct, identification, being, doing.

Resumo: Após resumir as diferenças entre os paradigmas freudiano e winnicottiano da psicanálise (seção 1), o presente trabalho passa a apresentar as ideias centrais da teoria winnicottiana da sexualidade. As principais teses defendidas são as seguintes: 1) Winnicott *redescreveu* a sexualidade a partir de duas raízes: a raiz instintual (os instintos entendidos como impulsos biológicos) e a raiz identitária (as inter-relações humanas acontecendo à parte dos impulsos instintuais, como identificações de diferentes tipos), 2) ele *reescreveu* o essencial da teoria psicanalítica tradicional desse fenômeno, e 3) ao fazer tudo isso, ele acrescentou elementos essenciais ao seu novo paradigma da psicanálise (seção 2). Depois de apresentar de maneira esquemática a concepção winnicottiana da raiz instintual e da raiz identitária da sexualidade, bem como algumas das suas implicações (seção 10), (seções 6-9), especificarei os conflitos sexuais correspondentes, bem como os distúrbios que

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deles resultam (mostrarei, em particular, que a raiz instintual pode dar origem a neuroses e a identitária, a dissociações com complicações psicóticas). Na última parte do artigo (seções 11-12), analisarei uma tese adicional de Winnicott, a de que ambas as raízes da sexualidade humana são fincadas no chão comum do processo de amadurecimento e que todos os conflitos do tipo sexual são relacionados ao conflito mais profundo entre o ser e o fazer, concebido como problema universal dos seres humanos inerente nesse processo.

Palavras-chaves: sexualidade, amadurecimento, instinto, identificação, ser, fazer.

1. The Freudian and Winnicottian Paradigms of Psychoanalysis

Even though traditional psychoanalysis cannot be regarded as a mature factual science, I think it is fruitful to view it from a Kuhnian perspective, trying to find out early forms of a paradigm and crisis, followed by revolutionary research. By so proceeding, it is possible to say that the *main example* of the discipline created by Freud's revolutionary research is the Oedipus complex, the child at the mother's bed grappling with conflicts that could potentially bring about neuroses, which are related to the administration of sexual drives in triangular relationships. The central *generalization-guide* of Freud's research is the theory of sexuality, focused on the idea of a progressive activation of erogenous zones, pre-genital and genital, with the surfacing of pre-genital fixation points. The *ontological model* of the human being, made explicit in the meta-psychological part of the theory, comprises an individual psychic apparatus, which is moved by libidinal drives, and other psychic forces determined by causal laws. Its *methodology* is centered on the interpretation of the transference material in the light of the Oedipus complex and regressions to the fixation points. Its basic epistemological *values* are those belonging to the natural sciences, including causal explanations, and the main practical value is the elimination of the suffering that follows from conflicting internal pulses of the libidinal type. Given the significance of Oedipus' example in Freud's psychoanalysis, we might want to call it the Oedipus or triangular paradigm. Taking into account the sexual nature of Oedipus-type situations, Freud's disciplinary framework may be called sexual.¹

Psychoanalysis underwent several reformulations by the hands of Freud himself and his followers, carried out most often under the pressure put forth by clinical facts. In Winnicott's research, however, the Freudian paradigm as such goes into a *crisis*, giving way to the search for a new paradigm. The main motivation for the crisis was the accumulation of clinical problems – among them, the emergence of anti-social tendencies and child psychoses – which could neither be understood theoretically nor treated clinically within the framework of Freud's Oedipus paradigm, but which, according to Winnicott, should not be eliminated from the domain of application of psychoanalysis.²

On Winnicott's view, the main difficulty for traditional psychoanalysis came from the fact that it thought about the etiology of psychic disorders in terms related to conflicting intra-psychical "drives", and did not see that at least in these cases the pathology or abnormality was primarily in the *environment* and only secondarily in the child. In other words, Winnicott understood the need to

¹ A more detailed description of the Freud's Oedipus paradigm can be found in Loparic (2001a).

² This paragraph is a continuation of the analysis of the Winnicott's crisis presented in sections 3 ff. of Loparic (2001a).

change the etiology of the disorders in question. It was because of considerations of this sort, essentially having to do with psychoanalysis's capacity to solve clinical problems within its theoretical framework – and not because of abstract speculative analyzes, such as those found in Lacan's work, for example³ – that the framework of Winnicott's psychoanalysis came about, substantially different from that of Freud's. It is worth noting, however, that the change in Freud's paradigm was thought out by Winnicott so as “to keep open the bridges that lead from older theory to newer theory” (1989a/1989, p. 256). The point was “to get back to the environment without losing all that was gained by the study the internal factors” (pp. 576-577).

Which modifications would be necessary to ensure the progress of psychoanalysis in the above-mentioned domains? First, the Oedipus paradigm had to be abandoned, since it was based, as we saw above, on the structuring role of the Oedipus complex and on the theory of sexuality conceived as the guiding-theory of psychoanalysis. The new *exemplar* proposed by Winnicott is that of the baby on the mother's lap needing to grow, that is, make up a basis so as to go on existing and getting integrated into a unity. The most important *generalization-guide* is that of the theory of the emotional and personal maturation, of which the theory of sexuality is only a part. If we assume that Winnicott's modifications of Freud's paradigm happened, as Kuhn would put it, analogously to a *Gestalt switch*, then it could not be limited to isolated points, but should affect the whole theoretical field of psychoanalysis. It is easy to show that, as a matter of fact, Winnicott also introduced a new *ontological model* of the object of study of psychoanalysis, focused on the concept of a drive for integration, towards relationships with people and things and towards the psychosomatic partnership. His *methodology* preserves the task of verbalizing the transference material, admitting, however, only interpretations based on the theory of maturation without referring to Freudian meta-psychology, and including also the management of dependency regression and anti-social *acting-out*. The main *value* is the elimination of stilted defensiveness that paralyze the maturation process, and making it easier for it to happen now what needed to have already happened but didn't; as well as the gathering of what remained or became dissociated, or even split-off. The suffering that follows from internal or external conflicts ceases to be fundamental and moves to the backstage as part of a healthy life.

In virtue of the significance of the mother-baby relationship in Winnicott's psychoanalysis, I have been naming his paradigm as *dual*. Given the generalization-guide is the theory of maturation,

³ See, for example, Lacan's ample use of auxiliary phrasal constructions and optical metaphors, which he took as having been authorized by Freud himself (Lacan, 1975, p. 90).

I have also suggested calling it *maturation*⁴. This term should not be taken in an exclusively biological sense, because human development has not only an anatomic-physiological aspect, but also a personal aspect.

2. The two roots of sexuality: instincts and identifications

This change in the psychoanalytic paradigm opened for Winnicott the way for his own research on the nature, roots, development and disorders of the human sexual life⁵. The main results can be summarized as follows. Adult human sexuality is a result of a process of maturation which stems from two roots that are not in themselves sexual: bodily excitements of all kinds and inter-human relationships. The main acquisitions obtained throughout this process are two: (1) the development of instinctive life, which comprises the elaboration of all instincts – biological drives – in imagination, integration of those instincts in the self and interpersonal relationships (dual, triangular, or multiple), eventually establishing sexuality as the dominant drive in adulthood, and (2) the development of sexual traits not based on biology, stemming from inter-relations of various kinds. In this paper, I will present the central elements of Winnicott's theory of sexuality, highlighting the features that distinguishes this theory from the original Freudian version. Thus, I will point out additional points of the paradigm shift that separates Winnicott from the founder of psychoanalysis.

3. The early development of instinctive life

In the exposition of his instinctive root theory of sexuality, Winnicott often uses terminology borrowed from Freud. At the same time in which he accommodates this kind of theorizing, Winnicott also indicates its limitations, showing the need to complete or to reformulate the Freudian theses within a theory of maturation. The main limitation is due to the fact that the Freudian conception of sexuality was based on Oedipus-kind situations in its simplest form, the love of a boy for his mother; it essentially comprises a study of instinct management within the context of a certain phase of personal development – that of the first interpersonal triangular relationships (1988, pp. 49 and 54). Now – and this is one of the central theses of Winnicott's psychoanalysis – the early personal relationships of the human baby are not triangular, but dual. Strictly speaking, they are not even dual,

⁴ A detailed analysis of Winnicott's theory of maturation can be found in Dias (2003). Since Winnicott's concept of maturation can be interpreted in terms of Heidegger's phenomenology of the happening of the human being as being-in-the-world, the paradigm put forth by the English psychoanalyst could also be called *occurential*. For further details on this aspect of the Winnicottian paradigm, see Loparic (2001a).

⁵ This topic, rarely taken up, was the object of Maria de Fatima Dias's (2005) doctoral thesis, written in accordance with the research line of the Research Group in Philosophy and Psychotherapeutic Practice (GFPP) of the PUC-SP.

since at the early stages of life the baby does not exist as an entity separate from the maternal environment and therefore cannot establish “relationships”, not even with its own mother. In the first phases of life, the baby is the mother. Thus, sexuality, as described by Freud, should be seen as a human phenomenon that arrives relatively late, and belongs to a period in which the individuals are already constituted as whole persons, separate from the environment, who use that environment when excited and acknowledge the existence of a *third* party involved in the same situation. The description of that phenomenon, which can correctly be made in an objectifying language, does not apply to the more primitive phases.

Winnicott is far from denying the importance “for Freud to go to the full length of tracing the origins of adult or mature genital sexuality to childhood, and of showing the pre-genital roots of childhood genitality” (1988, p. 58). However, the main outcome of this approach was not the discovery of child sexuality, but the “description of the beginnings of the whole development of instinct life” (1988, p. 58). Freud biggest achievement was his having elaborated a theory of the *origins and development of human instinct*. In accordance with this assessment, Winnicott begins using the Freudian term “sexual”, which in Freud is synonymous with “instinctive”, to designate “the whole range of local and general excitements which are a feature of animal life; in the experience of these there is a period of preparation, an act with climax, and an aftermath” (1965b/1965, p. 130).

Winnicott's theory of human instinctive life is therefore based on Freud's, but differs from it in several essential points. For Winnicott, there is no need to differentiate too strongly the several types of instinctive demands, and neither are there too much diversity among humans and animals. “It is not necessary here to enter into a discussion about classification of instincts, nor even to decide whether there is one instinct, or whether there are two or perhaps scores of instincts. All this is irrelevant” (1988, p. 40). Not so for Freud. In his theory, libido is separate from the energy of psychological processes in general, since it has a “special origin” and a “qualitative character”⁶. The libido drive is essentially different, for example, from hunger: objects of the former can be transformed by fantasy or even sublimated; those of the latter cannot. Against Adler, Freud insisted on excluding from psychoanalysis the drive for power. For that very reason, Freud thought that a good classification of the drives make up an indispensable theoretical – that is, meta-psychological – demand.

⁶ See Freud, 1924[1905]/2000, Part III. 3.

Equally important is determining the number of instincts: there are only two fundamental drives⁷. Constantly restated throughout his work, the dual drive thesis was used strategically by Freud several times, for example in 1912 against Jung's alternative view, which stated that there would only be a single basic drive⁸. For the English psychoanalyst, on the other hand, the primitive love drive, which can be properly attributed to the baby in its early life, is indistinguishable from aggressive and destructive drives, also considered to be primary. Like fire, the original love drive is in itself destructive, and due to this "primary unity" it can be called "combined love-strife drive"⁹. Here we have a strong indication that Winnicott came close to a form of *primitive* drive monism, affiliating himself, on this particular point, more to Jung than to Freud.¹⁰

Finally, Winnicott's thesis that man and animal do not differ with respect to instincts – and here we have yet another indication that Winnicott takes seriously the animal side in man – is opposed to Freud's thesis that libido is typically human drive.¹¹

Would Winnicott have relapsed into a Darwinian type biologism? No. What distinguishes man from animal is not the type or the number of instincts, *but what happens to them in human and animal life*, respectively. In man, much more than in animal, the instinctive excitements and bodily functions in general are gradually integrated into the person as a whole through imaginative elaboration. Imaginative elaboration is not synonymous with sexual fantasy. Rather, it is an activity of the human psyche that comprehends bodily functions, excitements, and sensations in general, thus guaranteeing their unification and organization. In certain phases of the maturation process, some kinds of excitements are xxx dominant, so that the "the imaginative elaboration of all excitements tends to be in terms of the dominant instinct type" (1988, p. 40).

Imaginative elaboration not only unifies and organizes the instincts, but also prepares the satisfaction and allows for them to be controlled. A great deal of that which happens between an excitement and the next has to do, according to Winnicott, "either with warding off instinct, with preparing for eventual satisfaction of instincts, or with keeping the instincts alive through play or the

⁷ This thesis is constructed by analogy to the dualism of forces of attraction and repulsion established by Newton and taken up again by Kant, a position which in today's physics is completely archaic.

⁸ Jung defended the supposition that there would only be a single original libido, identical to the "interest for objects", which would go through various phases of development and differentiation until eventually taking up the characteristics of libido in Freud's sense (see Jung, 1911-12/1938, pp. 122 ff.).

⁹ See Winnicott, 1989a/1989, p. 245. On this central idea of Winnicott's theory of primitive drives, see for example his (1988), p. 79.

¹⁰ The relation of Winnicott to Jung remains little studied. A resenha que Winnicott dedicou à autobiografia do primeiro e mais notável dissidente do movimento psicanalítico Ã© a referÃªncia central para tal estudo (cf. Winnicott, 1989a/1989, cap. 57).

¹¹ On Winnicott's concept of a human animal see Loparic (2000).

acting out of fantasy” (1988, pp. 53-54). With regard to control, it is managed by ideas that accompany instinctual excitements. In the Oedipus phase, for example, control is run by the ideas of the death of the father, castration, full responsibility for the satisfaction of the mother, etc. (p. 59).

4. The phases of instinctual maturation

In this section, I explore in a very summarized and partial manner the rewriting of the main phases of instinctual development presented by Winnicott in *Human Nature*. Another, more detailed though less technical approach to the same subject matter can be found in *The Child, the Family, and the Outside World*, and also in numerous remarks scattered throughout his work.

4.1 The oral and anal phases

To begin with, let us see how Winnicott changes the traditional conception of the oral and anal phases. At the beginning of life the dominant type of instinct is oral – given that the excitements of the digestive process, even though not wholly integrated, prevail over all others – and imaginative elaboration sorts out all of the baby's excitements around the “oral erotism”, colored (adds Winnicott) by ideas, that is, fantasies also of the oral kind¹². So we can speak of a (pre-genital) oral phase in the maturation process. However, as in any other phase of human development, the oral phase cannot be described exclusively in instinctual terms. One must also consider the initial instincts of the baby within the framework of its overall emotional maturation, a process which depends on a facilitating environment that is indiscernible of the primitive self in the early stages.¹³

Winnicott disagrees with Karl Abraham about subdividing the oral state into erotic and sadistic based on whether libido or constitutional sadism prevails.¹⁴ Even if we admit that it would be “unwise to throw away all of this work on the theory of the infantile instinct life” (1988, p. 41), Winnicott has doubts about the existence of an oral sadistic phase: “There is no certainty that the fantasy of oral activity is at first erotic (i.e. without sadism, or pre-ambivalent) and then sadistic, destructive and, so to speak, ambivalent” (1988, p. 42). The reason for this “uncertainty” follows

¹² As is well known, in the very primitive phases, elaborative imagination takes on less sophisticated modes, and stays closer to the physiological functioning of the body. For details, see Loparic (2000).

¹³ This task had already been formulated by Winnicott in 1945, again with reference to Jung, even though in terms that are not yet quite clear: “We [psychoanalysts] try to reduce everything to instinct, and the analytical psychologists [Jungians] reduce everything to this part of the primitive self which looks like environment but which arises out of instinct (archetypes). We ought to modify our view to embrace both ideas, and to see (if this is true) that in the earliest theoretical primitive state the self has its own environment, self-created, which is as much the self as the instincts that produce it. This is a theme which requires development” (1958a/1958, p. 155 n. 2).

¹⁴ The basic reference here is Abraham (1925/1998), pp. 209 and 214. Freud seems to accept Abraham's proposals (see Freud, 1924[1905]/2000, Part II. 6, note 2).

from Winnicott's thesis of primitive instinct monism stated earlier, which affirms the original unity between the primitive love drive and the primitive aggressive and destructive drive. Thus, instead of talking of impersonal drives, Winnicott would rather say "that it is the infant who changes, starting ruthless and then becoming concerned" (1988, p. 42; my italics). His justification for this change in language is the following: "The ambivalence has to do with the Ego changes in the infant rather than with Id (or instinct) development" (1988, p. 42). Summing up: for Winnicott the ambivalence is defined primarily in terms of inter-personal relations, established according to the tendency for integration of the infant, and only secondarily by instinctual relations as such.

The same does not hold for the anal phase. Here an important point to consider is the fact that the excretion of some "thing", the theme of the anal experience, has a prehistory: "it has been inside, and it was originally a by-product of oral experience" (1988, p. 42). Furthermore, it has effects on the environment, that is, the history of this "thing" goes on. Thus, Winnicott concludes, "anal (and urethral) experience is much more than a stage in Id growth, so much so that it cannot exactly be classified and timed" (1988, p. 42)¹⁵. This "much more" is the growth of the infant as an individual. By inserting the anal and urethral experiences into the wider process of maturation – all of them will be again particularly significant in the concerned stage – Winnicott's view is essentially different from traditional psychoanalysis¹⁶. The paradigm shift is clear: the description of the early stages of sexual instinct is factually incorrect and needs to be reformulated within the framework of the "theory of the Ego" – or, in Winnicott's terms, within the theory of personal maturation.

4.2 A concrete example of the paradigm shift in psychoanalysis: Winnicott's rewriting of the activity of sucking one's thumb

The theoretical consequences of looking at sexual development within the wider process of emotional maturation, which may or may not occur in facilitating environment, can be illustrated by the reformulation of the Freudian theory of the activity of sucking one's thumb, presented by Winnicott at different points of his work. I have not chosen this example randomly. According to Freud, the act of sucking one's thumb or some other finger by babies and infants is a "model" for the understanding of all manifestations of the sexual development stage, that is, it is a paradigmatic case to be used in the study of all "essential traits" of infantile sexuality (Freud, 1924[1905]/2000, Part

¹⁵ In his study of the concerned stage, Winnicott shows that the meaning of the feces is much richer than, for example, the erotism associated with defecation or the oral erotism shifted to the receptive anal experience. See Winnicott (1988), part 3, chapter 1. Criticism of the traditional conception of the anal phase can be found in the same book: part 2, chapter 1.

¹⁶ Some details of this change in view are made explicit in Winnicott (1988), pp. 42-3.

II.2). Winnicott, in turn, in a 1945 paper called "Primitive emotional development" which presents for the first time his theory of the initial stages of human life, uses precisely the act of sucking one's finger as a paradigmatic case illustrating the application of his theory of maturation (1958a/1958, p. 155).

At the beginning of life, says Freud, the search for sexual satisfaction – the implementation of that which Freud later would call the pleasure principle program – is supported by the sucking of the mother's breast, which has however another goal: satisfying the need for food. For this reason, the bodily function of sucking remains a basic reference for all later love relationship. In due time, specifically sexual activity separates itself from feeding (it ceases to be analytic) and starts to show up explicitly in the act of putting one's thumb or some other finger in the mouth, which is an auto-erotic type of act that preserves the erogenous zone but replaces the external object of satisfaction with one's own body, thus paving the way for masturbation, which in turn is related to several later disorders, such as enuresis and nocturnal emissions.¹⁷ Noticing that not all babies suck their finger, Freud assumes that this activity only begins if "there is a constitutional intensification of the erotogenic significance of the labial region" (1924[1905], Part II. 2, p. 48). In these case, adults tend to be inclined to "perverse kissing", drinking and smoking, or, if there is repression, to develop pathologies such as eating disorders (disgust for food, hysteric vomiting), etc.

Winnicott does not deny that the mouth is an erogenous zone, organized especially in childhood, nor that human babies use from birth onwards use their thumbs, fingers and wrists to appease auto-erotically the instincts of this zone and provoke pleasure. Observing the damage that the infant causes to the fingers or to the breast, by sucking it too strong or too often, he also notes reflectively with respect to M. Klein's ideas, that the object of primitive love also suffers for being loved, and not only for being hated. However, according to Winnicott, these statements, which are supported by traditional psychoanalytic theory, do not exhaust the matter. There is a fundamental reason for that: the life of a human being is not the realization of the pleasure principle program, but a precarious attempt to respond to the question whether life is worth living (see Winnicott 1986b/1986, p. 39).¹⁸

Let us see how this divergence with Freud applies to the present case. Sucking a finger can mean very many things and not merely pleasure; it can, for example, serve as a consolation: "the fist or finger are there, instead of the mother's or someone else's breast" (1924[1905]/2000, p. 156). In

¹⁷ See Freud 1924[1905]/2000, Part II, chapters 2, 4, and 6; Part III, chapter 5.

¹⁸ The same criticism of Freudian naturalism is formulated in Winnicott (1971a/1971), pp. 116-7.

schizoid personalities, the same activity may be extremely compulsive, a phenomenon which cannot be explained without considering the idea that it comprises, according to Winnicott, "an attempt to localize the object (breast, etc.), to hold it half-way between the in and out. This is either a defense against loss of object in the external world or in the inside of the body, that is to say, against loss of control over the object" (1924[1905]/2000, p. 156). The normal act of sucking one's finger can serve the same function. By doing so, the human baby rules over this part of its body. There are clear cases in which the interest in this activity lies not in libidinous discharge, but above all in the fact that the thumb *represents all the other objects* which are then collected and controlled by this single instance. Thus, Winnicott concludes, the "auto-erotic element is not always clearly of paramount importance and certainly the use of dummy and fist soon becomes a clear defense against the insecurity feelings and other anxieties of a primitive kind" (1924[1905]/2000, p. 156).

In later works, Winnicott describes several new aspects of this phenomenon. I mention here a few. Since all activities of an individual are essentially communication *gestures* towards other human beings, prior to and independent of being an *act* to appease sexual instinct sucking the thumb cannot be reduced to an attempt to ease sexual tension; and even when it serves that end this activity still is a mode of *communication* or *contact* with the mother-environment, which has the sense of an interpersonal relationship and not merely a relationship with objects that satisfy one's instincts¹⁹, except in cases of deep pathological despair of attaining contact and personal communication, which is a topic I shall not dwell upon. One might also add that, according to Winnicott, placing the thumb in the mouth is from the very outset a bodily function ruled by imaginative elaboration, which *integrates* it to the individual and also because of this reason acquires a meaning that is distinct from that of a means of discharge.

In works on transitional phenomena, Winnicott returns to the thesis that already in the first few months of life the baby's auto-erotic experience of sucking their fingers is "complicated" by a series of simultaneous activities by virtue of which that experience quickly acquires an additional meaning or significance. The thumb begins to symbolize external objects, paving the way for the appearance of transitional objects, such as teddy-bears, whose value is not primarily given by any pleasure that might give through the discharge of impulses, but by totally different reasons. One of them is that they have their own vitality and reality, and can thus stand for the presence of the mother,

¹⁹ Underlying this opposition is Winnicott's rewriting of the theory of object relations mentioned above. Following Fairbairn, Winnicott distinguishes relations with objects that come from instinctual satisfaction (Freud, Klein) from relations with objects that promote maturation, such as transitional objects, which favor the constitution of an external reality (1989a/1989, p. 582) or subjective objects that allow for the emergence of a sense of reality and of personal identity in an incipient way.

that is, symbolizes the mother²⁰, and even becoming more significant than the mother because they are in complete control of the baby. Once acquired, this symbolic capacity will allow the baby to invent a variety of representations for its union with the mother, located in the potential space between them, a capacity which will broaden steadily so as to encompass play, artistic creativity, dreaming, and so on (see 1971a/1971, p. 6). Playing, in particular, is an activity that does not require libidinal excitement²¹. To be sure, playing is in itself exciting, but that trait does not come from instinctual awakening, but from the “precariousness that belongs to the interplay in the child’s mind of that which is subjective (near-hallucination) and that which is objectively perceived (actual, or shared reality)” (1971a/1971, pp. 61). Winnicott even says that bodily excitement of erogenous zones is a constant threat to playing and therefore to “the child’s sense of existing as a person” (1971a/1971, p. 60). In the context of creative playing the activity of sucking one’s thumb, far from having the sense of replacing the initial lactating activity with another activity that is more specific and has a sexual goal, has the important role of preparing for the emergence of a series of other *non-sexual* capacities, among which is that of using an object to play with and to symbolize the union of two entities that are about to separate one from the other.

Winnicott knows very well that his practice ended up impregnated by his theory of maturation. The theory of transitional phenomena revealed itself particularly significant. In a work of the later period, he confesses that when engaged in his practice “I feel that the theory I have formed for my own benefit in regard to transitional phenomena affects what I see and hear and what I do.” (1971a/1971, p. 24). Here, as in all other cases where Winnicott’s theory of maturation is used on clinical facts, it is worthy of note the following *fundamental rule of application*: 1) specify the maturation stage at which the material to be worked on belongs (the diagnostic), 2) determine the concepts and statements of the theory of maturation that apply to this stage, and 3) render explicit the particular sense of the concepts and statements of the theory of maturation when referred to that specific stage. Following this fundamental rule, Winnicott observes that although it may seem that the concept of the theory of transitional objects make sense in the very primitive infancy, one cannot disregard the fact that “there is an age before which the transitional object cannot exist, on account of the immaturity of the infant” (1965b/1965, p. 110). The transitional object cannot exist at the beginning of life because the baby cannot give (here to give is the same as to create) this significance to any detail of his body or environment. Winnicott writes: “Even the thumb-sucking of earliest

²⁰ See, in particular, Winnicott (1971a/1971), chapter *I et passim*.

²¹ Winnicott notes that masturbation is essentially lacking in actual true playing (1971a/1971, p. 45).

infancy cannot have the significance for the infant at birth that it can have for the infant of a few months, and certainly not the whole of the significance that compulsive thumb-sucking has for a psychotic child of ten years" (1965b/1965, p. 110). Therefore one may not apply the concept of transitional object to very primitive stages.²²

Let us now look into a few examples by Winnicott himself of application of the theory of maturation to the activity of sucking the thumb conceived as a transitional phenomenon. I have already mentioned Winnicott's view of the pathology of the thumb in schizoid patients. In a clinical saying that illustrates the pathologies specifically relating to transitional objects, Winnicott reports the case of a boy who has never sucked a thumb or finger and who, when weaned, "had nothing to fall back on" (1971a/1971, p. 7). At 12 months of age, he adopted a toy rabbit as a comforter, but not as a truly transitional object, something that would be "more important than the mother, an almost inseparable part of the infant" (1971a/1971, p. 8). One can thus understand why preventing children to suck their fingers is "a gross mismanagement" (1989a/1989, p. 436). Following this same line of theorizing, Winnicott holds that masturbation is a new form of auto-erotism, created as a defensive reaction against environmental insecurity, and not as a continuation in the transitional stage of the libidinal occupation of the fingers. Enuresis is seen as a reaction to deprivation – that is, sudden loss of relations with objects that strengthen the ego or facilitate the maturation process – and no longer as a return to the libidinal excitement of the very beginning of breast-feeding, or, in this case, of the first few erotic relations with the breast. A topic of special interest is the fact that the transitional object can transform itself into fetish when the transition stage is dominated by insecurity towards the mother. In this case, instead of symbolizing unity with the mother, the transitional object is used to deny separation from her, and for that reason it loses its original symbolic meaning and becomes a thing in itself that can give occasion to the beginning of the development of homosexuality or to perversions (see 1971a/1971, p. 22). The use of the thumb as a *fetish* in this non-Freudian sense, as an object of attachment, in reaction to the sudden separation from the mother in accordance to the growing capacity of the baby to deal with maternal failure, is very well illustrated by the material from case B.²³ To sum up: having re-elaborated Freud's theory of the activity of thumb sucking, Winnicott drew a picture of the pathologies associated with it that is very unlike Freud's.

²² I believe this is one of them main reasons why Winnicott introduced the concept of subjective object, which is indeed applicable even to the stage of the first theoretical breast-feeding.

²³ See Winnicott (1986a[1972-55]/1986), pp. 23, 53 and 112. The same case contains precious indications on Winnicott's clinical practice dealing with this kind of disorder.

4.3 Instincts in the object use and concerned stages

Winnicott considers instinctive experiences when dealing with all the later stages emotional development, in particular the object use and concerned stages, both disregarded by the traditional theory of Freud and Abraham. Given that these experiences will be essential for the understanding of Winnicott's redescription of the disorders that are typical of those stages – the reactive depressions – we might want to dwell shortly on this important contribution that he made to the psychoanalytic theory of the instincts.

We have seen that according to Winnicott the primitive love drive – the one that can be properly attributed to the baby in its very primitive stages of maturation – is indistinguishable from the primitive aggressive and destructive drive. This thesis had a long period of maturation in his work and was only made explicit in the 1968 paper “The Use of an Object and Relating through Identifications”. Once formulated, it provided the conceptual means for describing the passage from the world of subjective objects (including transitional objects) to the world of objectively perceived objects that exist separately and independently from the individual and have properties in their own, and which can be perceived by the child as having been always there, in *external* space and time. This passage – which goes from the subjective object to the objectively perceived object – involves a destruction of the object that is not related to envy but – and this is a central thesis for Winnicott – relates to the effective drive to destroy, indistinguishable from primitive love, which “creates the quality of externality of the world and its objects” (1971a/1971, p. 110). Once an external reality is set up that can be used, the child can come to the idea of a limiting membrane that, in turn, allows him or her to conceive the opposition between the external and the internal world, between the not-I and the I, whose contents are in part precisely those of imaginatively elaborated instinctive experiences (1988, p. 68).

At the next moment, after having reached an identity as one, the child develops the feeling of responsibility for the instinctive experiences, as well as that of independence for what is outside her. At this stage, called *stage of concern*, the predominant instinctual experiences are those relating to digestion (incorporation), which go on being integrated to the child's self by imaginative elaboration.²⁴ Digestion as a function comprising breast-feeding and transportation of the material ingested inside the child's body, allows her to have a series of new experiences with herself and the world.²⁵ The child starts to distinguish between satisfactory (and, in this sense good) and

²⁴ The same does not occur during the oral stage, because in that period the inside of the baby's body is not yet constituted.

²⁵ One should not think that before the concerned stage there is no elaboration of the incoming and outgoing food material, but that in this stage digestion is elaborated as a complete cycle.

unsatisfactory (bad, complicated by anger and frustration) incorporation. The actual objects of the good incorporations are themselves experienced as beloved and good, whereas those of bad incorporations are hated and evil. Good and bad objects actually incorporated are lived as contributions for the general, unspecific enhancement of the baby's internal goodness or badness. At the same time, excretion happens and populates the facilitating environment – the situation is supported in time by the mother or by whoever stands for her – with good and bad objects. This basic cycle can become, and as a rule of thumb it is, followed by a cycle of projections and introjections in M. Klein's sense, that is, by mental processes that presuppose prior idealizations and which are the source for magical good and evil, quite apart from instinctual experience (see 1988, p. 75).²⁶ Because they are mental, these processes must be carefully distinguished from the bodily functions of incorporation and excretion that, when properly understood, allow due importance to be given to the historic character of the digestive process and to “the locations of all that goes on between eating and defecation and that it had to do with the inside of the body” (1989a/1989, p. 576).²⁷

When all goes well, a benign circle is created, comprising the mother-environment (which supports the situation through time), the child involved by the mother, and the external object-mother. It is inside this new totality – which remakes, under new maturational conditions, the initial unity of baby and mother – that *concrete* changes can happen between what is good and bad, a basis for the future constitutions of a child's self capable of feeling compassionate for the mother and concerned for the damage he caused her by his excited use. This is, according to Winnicott, the main source of the responsibility for others, of the capacity for feeling guilty and rewarding constructively the environment for the damage caused, and, even more significantly for giving good things to the environment. At the same place, however, a capacity to hate and to hurt with bad things is created.

4.4 Penis envy

The thesis of the incompleteness in Freudian theory of sexuality can be additionally illustrated by Winnicott's analysis of penis envy. This envy happens and reveals the presence of a male element in girls. It is an uncontested clinical fact that the fantasy of the “castrated male” makes up a moment

²⁶ The idealized, and in this sense magical character of the objects of projections and introjections can be a severe sign of disorder: “I wish to add the reminder that a good breast introjection is sometimes highly pathological, a defense organization. The breast is then an idealized breast (mother) and this idealization indicates a hopelessness about inner chaos and the ruthlessness of instinct” (1958a/1958, p. 276).

²⁷ Winnicott believes he has learned this distinction from M. Klein, although she never agreed with his ideas about the body's inside (see 1989a/1989, p. 576).

in the development of children belonging to the female biological sex. A brief synthesis of the story of this envy as it is elaborated in the fantasy of sane girls runs as follows:

I have a penis. Of course a penis will grow on me. I had a penis, I am traumatized (punished by the excitement). I can use a substitute penis, some male can act on my behalf. I will let the male use me. Thus, I will have a defect corrected, but I will have to acknowledge that I depend on the male to be complete. This way I find out my true genital. (1988, pp. 44-45)

This text is followed by a footnote that says: "In phallic stage, the boy is complete, and in the genital stage he depends on the female to be completed." An important note: in the phallic stage, girls do experience penis envy. However, as they become aware of the incompleteness of boys, they eventually find out that the male and female sexual organs complement each other, and that boys and girls need each other to fully exercise their sexual roles; when this is over, if all runs nicely, penis envy ceases to be major concern.

Penis envy therefore characterizes only one rather short stage of female sexual development, one in which the girls needs to integrate her male element. This stage is soon overcome by the insertion of this element in the *whole* of prior achievements (including the more primitive ones), among them that of having an interior and being able to keep a secret – prefiguring the full genital capacity of getting pregnant, giving birth, and breast-feeding. One of the effects of this maturing of girls observed in boys and men is the *envy* and even *fear* of women (that is, fear of dependency and of domination)²⁸, which are feelings no less strong than penis envy in girls during the "phallic stage".

In traditional psychoanalysis, the opposition between male and female is essentially connected to the problem of castration, being the term "woman" practically synonymous to "castrated male". In Winnicott's redescription, this opposition is disconnected from castration and linked to the problem of the constitution of personal identity, relating to the imaginative elaboration of bodily functions and various types of identifications. Thus understood, the pair of concepts male-female has a central place in Winnicott's theory of personal maturation, opening up a new perspective both for the study of phenomena that characterize masculinity and femininity, and the understanding of various kinds of homosexuality.²⁹

²⁸ On this point, see Winnicott (1986b/1986), pp. 125 and 191-2.

²⁹ Freud's insistence on male sexuality is sometimes attributed to his relationship with his father. Winnicott, in turn, acknowledges a special debt towards his mother: "For my part, I happen to have been drawn towards finding out all I can about the meaning of the word 'devotion', and towards being able, if possible, to make a fully informed and fully felt acknowledgment to my own mother" (1986b/1986, p. 126).

4.5 The genital stage: the Oedipus complex and the repressed unconscious

In general, when speaking of Oedipus, Winnicott could not but paraphrase Freud or add personal emphases. The term "Oedipus complex" is used, Winnicott says, in the "description of the first interpersonal relationship in which the instincts are in place", a triangular situation in which "the child is power-driven by the newly established instincts of a genital quality" (1988, p. 49). Based on Freud, Winnicott will deny, against the Kleinians, the applicability of the concept of Oedipus complex to the early stages, where there are "only two persons involved and a third person or part object is internalized, a phenomenon of inner reality" (1988, p. 49). He adds: "I cannot see any value in the use of the term 'Oedipus complex' where one or more of the trio is a part object. In the Oedipus complex, for me at least, each of the three of the triangle is a whole person, not only for the observer but also and especially for the child" (1988, p. 49).

At several important points, however, Winnicott introduces substantial innovations relative to Freud. For example, castration anxiety need not be thought as following from a rivalry with a more powerful father. If we pay attention to the fact that in the genital stage the *performance* (his capacity to *do*) of the child of the male biological sex is still deficient, and that "the child must wait (till puberty as we know) for the ability to act out the dream", we can conclude that the fear of castration by the rival father "becomes welcome as an alternative to the agony of impotence" (1988, p. 44). This short stage opens up space for a full chapter in Winnicott's theory of sexuality, one that is still to be written: it would deal with the relation between sexual anxiety and the natural, inevitable – or else untimely, avoidable – experience of somatic immaturity. Here we have yet another example confirming the thesis that Winnicott's theory of sexuality should be read with his theory of the psychosomatic partnership.³⁰

In his general characterization of the neuroses, Winnicott follows traditional psychoanalysis: they are disorders that stem from conflicts that happen in triangular interpersonal relations at the Oedipus complex stage. If the defensive organizations against the anxiety brought about by these conflicts are more evident than the instincts themselves, more significant than the conscious control of the instincts, then, says Winnicott, "the clinical picture is more that of psychoneurosis rather than of health" (1988, p. 62). The essential trait of the defenses that characterize the neurotic picture is

³⁰ Another general point deserves to be noted: the pre-genital stage cannot be treated, as a whole, as being pre-Oedipal. Properly speaking, its dynamic and structure are *not Oedipal*.

that they are unconscious, they make up the central core of the “repressed unconscious”, and are largely regressive; regression can reach but not overcome the threshold of the I AM.³¹

5. Summary of Winnicott's redescription of the instinctual root of sexuality

Winnicott's theory of the instinctual root of sexuality has the following general traits:

1) it is neither based on drives (psychic forces that have a speculative or mythological character) nor on the instincts themselves;

2) instincts result from imaginative elaboration within the process of personal maturation, and presuppose the locating of the psyche in the body, the constitution of the self and the acquisition of the capacity for interpersonal or dual and triangular inter-human relations, besides posterior plural social relations also based on instincts, that is, on the excited use of external objects;

3) it not only takes into account the imaginative elaboration of the instincts, but keeps performance in sight – the doing, the execution of actions that result in the satisfaction of instincts and assure maintenance in the context of interpersonal relations – and not just sexual fantasies;

4) it is essentially incomplete, like the original Freudian theory, above all with respect to feminine sexuality, which involves pre-genital instincts elaborated imaginatively at very primitive stages that cannot be described in the language of instincts, as well as non-instinctual components disregarded by the traditional theory;³²

5) it opens up new perspectives for the etiology and nature of neurotic disorders engendered by repression of genital instincts during the Oedipal stage;

6) it does not allow for the understanding or treatment of non-Oedipal disorders of the other stages or disorders relating to another kind of etiology (psychoses, schizoid depression, anti-social tendencies, psychosomatic disorders etc.).

Winnicott's theory of instinctual sexuality can be properly characterized as one of the central parts of a general theory of the psychosomatic maturation the human being. Put forth as a factual doctrine, it is formulated without reference to Freudian type meta-psychology, and in particular without the ideas of psychic apparatus and psychic drives, and without many other speculative formulations of traditional psychoanalysis borrowed from naturalized philosophy of subjectivity. Although he deals with biologically based sexuality, Winnicott is not biologicizing, since biology is

³¹ The various defenses that comprise the neuroses and the possible breaches of those defenses are precisely enumerated by Winnicott (1988, Part II.2, summary). A detailed analysis of that material is essential for understanding Winnicott's theory of neurosis and the corresponding clinical practice. For some initial results, see Loparic, 2010.

³² The meaning of this incompleteness is more precisely explained in what follows.

taken into account only insofar as the excitements that are said to be instinctual and the parts of body are organized by imagination, which is an activity of the human psyche.³³

6. Bisexuality and the male and female elements

Like Freud and the orthodox psychoanalysts, Winnicott admits the bisexuality of human beings. In this sense, he speaks of a “female” and a “male side” of human nature, as well as of the male and female “elements” in each human being.³⁴ There is the “female” in boys and girls and the “male” in both sexes considered from the standpoint of gender.³⁵ Hence the need for a theory of the presence and development of these elements in the life of the individuals. This is in part a new type of problem, since Freud's theory of the development of the id or drives (Winnicott says “instincts”, as explained above) is “more suitable for the description of the male than of the female element” (1988, p. 47).

There are at least two reasons for why the traditional theory is insufficient for characterizing the feminine. First, for a good description of female sexuality it is necessary to be familiar “with the child's developing fantasy about the inside both of herself and of the mother” (p. 47). Thus, theorizing about the feminine needed to be more explicit than the theorizing about boys with regard to the distinction between the inside and the outside of the body, internal and external worlds and the multiple relations between the two worlds, and the internal conflicts that result from these relations; for example, the ones that give rise to depression. These aspects of maturation consolidate during the concerned stage and cannot be satisfactorily stated in the objectifying language of the traditional theory of drives.³⁶ In general, “female function and fantasy draw much more heavily on pre-genital roots” than male function and fantasy (1988, p. 47).

Commenting on an apparently Oedipal dream that a young woman had who suffered from reactive depression (a nightmare in which her mother is run over by a car driven by a man wearing a hat similar to her father's), Winnicott wrote: “Here one could speak of a repressed hate and the death wish in the heterosexual position, leading to inhibition of instinctual impulses” (1986b/1986, p. 75).

³³ Overall, Winnicott's psychoanalysis differs from Freud's psychoanalysis precisely because it is not a naturalistic science.

³⁴ See Winnicott (1988), pp. 43 and 47, respectively. In the present context, Winnicott does not deal with *pure* male and female elements. Those two concepts will only be introduced by him in the later stage of his work, as we shall see shortly.

³⁵ Although he did not address the problem of gender in a systematic way, it seems to me that Winnicott made important contributions to this matter.

³⁶ On this point, Winnicott considers himself to be indebted to M. Klein. A more detailed analysis would allow us to show, however, the existence of deep differences that justify Klein's refusal to agree with Winnicott's redescription of the “depressive position”, that is, her refusal to agree with Winnicott's theory of the concerned stage.

However, in this way of speaking one omits that which is characteristic of this young woman, the depressive humor, the sensation of a lack of life. One also would not be describing the main reason for her nightmare. It was not only due to the sexual rivalry with her mother, but also to the idea that if she remains alive her mother might get hurt. An important part of the unconscious motivation for the dream was the feeling of guilt operating preventively, a guilt related primarily to the damage caused to the mother due to excited use, and not due to the Oedipal situation.

So as to account for all aspects of female sexuality, one has to consider stages even more primitive than the concern stage, stages in which initial identifications of the girl with the mother-female and with the mother-woman happen. By means of the former identification, the basis for the female-genital traits are made up, and by means of the latter the maternal traits of the girl are brought about. On the one hand, the girl acquires the capacity to keep a secret that, in the future, will be that of becoming pregnant and breast-feeding. On the other hand, she becomes fit for passing on the continuity of being (generational continuity). Neither of these identification processes can be conceptualized in terms of the development of the id.

Summing up: mature female genitality, due to its being co-determined by a gradual integration of different maturational moments, both personal and somatic, some of which occurring very early on, is essentially distinct from mature male genitality, which is centered on the phallic moment. This renders the description femininity within the Freudian paradigm, which is guided by the instinctual paradigm of sexuality, necessarily incomplete, as already mentioned above. I will examine next how Winnicott repaired this incompleteness.

7. The FM case

Winnicott's research on feminine sexuality and on sexuality in general has received in the later period a new impulse from a clinical case which I will call the FM case – in which shows the dissociation of “sexual characteristics that are other than those that his or her biological sex justifies” (1989a/1989, p. 190). In what follows, I will present a summarized version of the case and the main steps of Winnicott's theorizing on the topic. I will attempt to offer evidence for the thesis that from this clinical case Winnicott formulated the theory of a *second root* of sexuality, additional to instinct and based on the study of the proprieties of two different ways of relating to other people – *identifications* and *objectification*.

The results of this study can be found in the 1966 paper “The Split-Off Male and Female Elements to Be Found in Men and Women” originally published as part of chapter 5 of *Playing and*

Reality (1971a/1971) and republished in chapter 28 of *Psycho-Analytic Explorations* (1989a/1989), together with additional material on the same case and theoretical comments elaborated by Winnicott in 1968-9 in the context of a public debate on the matter. Chapters 10 and 15 of the latter book deal with the same clinical material. The chapter 10 of *Playing and Reality*, "Interrelating apart from Instinctual Drive and in Terms of Cross-identifications", is part of the same set of texts. My interpretation is far from evident, and to be properly assessed it demands a careful rereading of that set of texts.

I recall an essential moment of the FM case. The patient was a married man with children, successful in one of his professional careers but whom, however, complained of feeling like a woman. In a Friday session, which turned out to be decisive, he talked about something that could be understood as penis envy. Winnicott told him: "I am listening to a girl. I know perfectly well that you are a man but I am listening to a girl, and I am talking to a girl. I am telling this girl: 'You are talking about penis envy.'" This remark -which, Winnicott emphasizes, has no homosexual connotation whatsoever – had an immediate effect on the patient in the form of acceptance of the idea of the girl, still merely intellectual but followed by relief. After a pause, the patient said: "If I were to tell someone about this girl I would be called mad". Feeling he had touched on an essential point, Winnicott allowed himself to a surprised remark about himself: "It was *not* that you told this to anyone; it is I who see the girl and hear a girl talking, when actually there is a man on the couch. The mad person is myself." The patient then said that he now felt sane in a mad environment. Subsequently he added, calmly: "I *myself* could never say (knowing myself to be a man) 'I am a girl'. I am not mad that way. But you said it, and you have spoken to both parts of me" (1989a/1989, p. 171).

Material from prior stages of the analysis gave Winnicott some additional clues on the two aspects of his patient about which he just found out. There were good evidence to think that the patient's mother "saw a girl baby when she saw him as a baby before she came round to thinking of him as boy". In other words, Winnicott remarks, "this man had to fit into her idea that her baby would be and was a girl". Furthermore, there were clear indications "the in her early management of him the mother held him and dealt with him in all sorts of physical ways as if she failed to see him as a male." (1989a/1989, p. 171).

In the following Monday's session, the patient presented several psychosomatic symptoms which Winnicott interpreted as manifestations of the girl in the patient. This girl was not interested in the man that him but in "full acknowledgment of herself and of her own rights over your body", rights

that showed up in the form of penis envy (p. 172). Taking advantage of a flu in the patient, this female self in him made a "protest", hoping to feel ill, that is, pre-genitally pregnant.³⁷ This psychosomatic moment was motivated, according to the interpretation Winnicott communicated to the patient, by the fact that the female part of his personality "always hoped that the analysis would in fact find out that this man, yourself, is and always has been a girl" (1989a/1989, p. 172).

8. Theoretical analysis of the FM case

What we can see in this case are the female sexual characteristics that are present in a male personality and split-off from that personality. In Winnicott's words, in order to contribute-in in the family situation "a boy or a girl may need to exploit the other-than-biological sex characteristics" (1989a/1989, p. 190).³⁸ In the patient of the FM case there seemed to be a "female element" which, however, "*has nothing to do with drive (or instinct)*".³⁹ It would all go, says Winnicott, as if a new theory of the early stages of the emotional development of the individual "is necessary to separate out (not boys from girls but) the uncontaminated boy element from the uncontaminated girl element" (p. 180). The facts seemed to suggest the hypothesis that there is an opposition between the male and female that is not definable through sexual differences in the imaginative elaboration of the instincts (or of gender). This hypothesis in turn allows us to say that a person has multiple sexual identities, some of which are instinctual and supported by bodily functions and gender (biological sex), while others are relational and conceived exclusively in the context of inter-personal relationships established both by the true self and by the false self.

In the light of this clinical find, Winnicott concluded that neither the Freudian theory of the drives nor his own theory of instincts could account for all the clinical problems relating to human sexuality. There were disorders that could not be approached in terms of an opposition between "active" and "passive", "doing" and "letting be done". It was something that needed to be described "in terms of some other type of consideration which goes deeper and which is more primitive" (1989a/1989, p. 190). One needed to create new theoretical concepts and admit the existence of new mechanisms: "What is needed, however, is an enumeration of the other mechanisms employed when a patient manifests sexual characteristics that are other than those that his or her biological sex

³⁷ The idea of a pre-genital (oral) pregnancy is illustrated, for example, by the second session of the Piggie case.

³⁸ The FM case demanded "the separating out of the whole idea of boys and girls and of men and women from the idea of two basic principles, those which I call male and female elements" (1989a/1989, p. 191).

³⁹ Here it is particularly important not confuse Winnicott's drive or instinct, which is a biological entity imaginatively integrated, with Freud's Trieb (drive), which is a speculative meta-psychological entity rejected by Winnicott.

justifies" (p. 190). Among these sophisticated mechanisms, "must be found a cross-identification which can be almost entirely organization of defense", which may be determined, as other cross-identification are, by expectations coming from the environment (1989a/1989, p. 190).⁴⁰

So as to explore this line of reasoning, Winnicott dug deeper into the etiology of the split-off of the kind shown in the FM case. It seemed clear that the patient had from the time he was a baby been exposed to sexual expectations that crossed the lines between the biological sexes; furthermore, he had been subjected by the mother to an effective *handling* that would correspond to those expectations and that he was since then trying to satisfy. Here the crucial question was: why did he do that? Winnicott answers:

In my patient there was the extreme of the mother's unconscious need for a girl which determined her *handling* of her baby at the very early stage. The result in my patient was that although he retained his certainty of his *male identity* he carried with him right up to this point in the analysis that I describe the conviction that in *order to have a relationship to his mother* he must be a girl. (1989a/1989, p. 190; my italics)

Confronted by the mother's *gaze*, and even more significantly by the mother's *handling*, with what she would *do* to him – with the breast that does, and not with the breast that is – the patient was unable to grow accordingly to his "biological provision" and started "exploit every particle in himself of being female and wanting to be so" (p. 183). Objectively, physically he really had no other choice: the one who handled his diapers was his mother. In this stage of extreme immaturity, merely mental (fantasy) solutions were out of question (p. 183). So he created an unreal, false female self – false because, as we saw in the description of the case, it was reactive and envious. When a mother has the breast that is, she "does not produce a child whose 'pure female' self is envious of the breast, since for this child the breast is the self and the self is the breast" (p. 179). "Envy is a term", Winnicott goes on saying, "that might become applicable in the experience of a tantalizing failure of the breast as something that IS".

The case indicated that as a baby the patient had been put by the mother face to face with the following maddening dilemma: either you become a girl (identify with me as a *female*, a *person whose biological sex is opposite to your own*) and as a reward can have me (can go on identifying with me as a woman, a *person on whom you depend* and who takes care of you, something you need in order to have a personal identity, be yourself, feel real and exist); or else you remain a boy (keep

⁴⁰ Here we have another piece of evidence that Winnicott's theorizing is motivated by his clinical practice, and not by pure speculation as is the case in Lacan's work.

your initial male identity, constructed by your imaginative elaboration of the bodily functions and excitements, and become someone different from the female that I am) but then you will loose my maternal care (and will therefore run the serious risk of loosing also your personal identity). In order to *be* (through primary identification) the *caring-mother* and thus have that care, the baby patient had to function corporeally as if he were the female-mother, thus contrary to his body's way of functioning such as it was genetically determined and initially elaborated by his imagination.⁴¹

Hence, he ended up creating *two sexual identities*: one which was feminine and corresponded to his mother's intrusion and another which was masculine but also reactive, since it was essentially defensive. Both were false (false formations of his self), ungrounded on his biological provision and unreal. Neither assured him a basis for action. The female in him did not manage to take him to the path of open homosexuality, and at the center of his masculine side – Winnicott described this fact very clearly – *there was nothing*, a condition which forced him to use analysis as “part of his search or a self that would feel real” (1989a/1989, p. 51). He had to set aside even his power, since it was reactive.

The price to be paid was a form of madness: the *splitting-off* of this identification with the female-mother – this feminine element within him, non-instinctive merely relational – and his masculine identity, bringing about a permanent conflict that showed up in the inconclusive search for homosexual company and by the protests and demands of the girl that was in him, and in his split-off identity.⁴²

9. On the contrast between pure male and female and the being/doing opposition

The idea of a sexuality without instinct – not backed up by instinct but essentially relational – brought with it great theoretical difficulties. For Winnicott it was out of question to try to accommodate such an idea within the traditional theory of masculinity and femininity, which was developed in the meta-psychological context of the drives. Not even his own theory of sexuality, in which bodily functions and excitements are elaborated by the imagination, could take in an hypothesis of this nature. Winnicott saw himself in the contingency of speaking of male and female elements as not only different from each other but as disconnected from instinct, an idea that did not make sense

⁴¹ On Winnicott's use of the concept of female-mother and woman-mother, see section 3.

⁴² The analysis of the FM case had its effect precisely at the moment when Winnicott took on the mother's madness and thus freed the patient to come back to himself and acknowledge his sexual identity as part of himself.

in Freud's work nor in the theory of sexuality laid out in *Human Nature*. "I saw", he wrote, "that I was dealing with what could be called a *pure female element*" (1989a/1989, p. 173).

Generalizing on this finding, Winnicott formulated a very short theory of the pure male and female elements. According to this theory,

it is necessary to allow for both a male and a female element in boys and men and girls and women. These elements may be split off from each other to a high degree. This idea requires of us both a study of the clinical effects of this type of dissociation and an examination of the distilled male and female elements themselves. (1989a/1989, p. 176)

In the context of this theory, a male or female element is said to be "pure" or "distilled" if it is not "alloyed" – Winnicott works here with a metaphor borrowed from alchemy⁴³ – to concrete persons of the male or female sex or gender, in particular to the bodily functions or to instincts. A basic trait of each of the two pure elements is that it can become permanently split-off from the other, not because of repression, but due to environmental intrusion.

Winnicott decided to go further still and "get right behind all the cross-sex sophistication, cross-identifications, and even cross-expectations (where a baby or child can only contribute to a parent in terms of the other-than-biological sex)" (p. 191). In this attempt, he put forth a reformulation of his own theory of the pure elements in terms of a "speculation" about the contrast between the male and female elements not alloyed and considered "in the context of object-relating" (p. 176). These analyzes of the object-relating ways should not be classified among those of the meta-psychological kind, because unlike the latter, Winnicott employs terms directly referring to the clinical practice domain.⁴⁴

So as to advance in this direction, Winnicott made use of the concept of object-relating. The pure female element "relates to the breast (or to the mother) in the sense of the *baby becoming the breast (or mother), in the sense that the object is the subject*" (p. 176). Once this kind of object-relation is in place, something characteristic of the early stage of maturation that Winnicott calls "primary identification", it allows the baby to create a "subjective world", a "dream world", free from intrusions of the world of external reality, in which one is allowed to live an "experience of omnipotence" and to have a magical control over all that there is, i.e. over all subjective objects

⁴³ I do not exclude the possibility that in this case the choice of terminology might have been influenced by Jung.

⁴⁴ We have here yet another case in which Winnicott uses a term from traditional psychoanalysis with a radically different sense.

(1989a/1989, p. 287).⁴⁵ Primary identification is made distinct by a fundamental difference in the union of two separate persons: “Two separate persons can *feel* at one, but here at the place that I am examining the baby and the object are one” (1989a/1989, p. 177). The experience of primary identification, in which there is no instinct drive, paves the way for the emergence of the “objective subject”, that is, for the idea of the self having an incipient “form” and for the feeling of real. No sense of self emerges, Winnicott clarifies, “except on the basis of this relating in the sense of BEING” (1989a/1989, p. 179). This *transitive* sense of being is something “that antedates the idea of being-at-one-with, because there has not yet been anything else except identity” (1989a/1989, p. 179). Here we have the beginning which is happening-like and is the presupposition of all subsequent identification experiences. In particular, “projective and introjective identifications stem both from this place where each is the same as the other”. Hence, the “object-relating of the pure female element establishes what is perhaps the simplest of all experiences, the experience of *being*”. Here we also find the ground for “true continuity of generations, being which is passed on from one generation to another” (1989a/1989, p. 179).

By contrast, the pure male element “does traffic among objects in terms of active relating or passive being related to, each being backed by instinct” (1989a/1989, pp. 176-177). Although it does not in itself have an instinctual nature, this element relates with objects in way that is similar to that of instinctive behavior. As soon as the organization of the ego becomes available, “the baby allows the object the quality of being not-me or separate, and experiences id satisfactions”, that is, instinctual satisfactions. This kind of relation “presupposes separateness” between the one who does something and the one to which something is done. It “leads to objectification” (1989a/1989, p. 178), a development that could be described with the following key-words: the human being who *does* necessarily seeks action, so long as his instincts are integrated to a certain extent, that is, he has to do something with the other who is there, and in order for that to happen, *separates* himself from the other and *objectifies* him and all other things, *distancing* himself from his original identification with the environment, other people and things.

From then on identification begins to make use of “complex mental mechanisms, mental mechanisms that must be given time to appear, do develop, and to become established as part of the new baby’s equipment” (1989a/1989, p. 178). Among these mechanisms are external perception, projective and introjective identifications, and the capacity for verbal and imaginary symbolization.

⁴⁵ In a text written in the last year of his life, Winnicott states that it is “axiomatic” that “there is no relating to a subjective object”, on the ground that “the world is only there for relating to in so far as it is objectively perceived and what we call external to the child” (1989a/1989, p. 287).

Language acquired during the objectification process is also necessarily an *objectifying language*, language that becomes misleading when used to describe the pure female element and the object-relating of this element. The latter task demands a non-objectifying language, another set of key-words, the meaning of which is determined differently than that of the key-words of objectifying language.

10. Criticism of traditional psychoanalysis

Having an “elementary” theory of sexuality, formulated in the language of the pure male and female elements, Winnicott sets his eyes retrospectively on traditional psychoanalysis: “Psychoanalysts have perhaps given special attentions to this male element or drive aspect of object-relating”. “Perhaps”, says Winnicott, because he is not sure whether they knew at all about the existence of something like the pure male element.⁴⁶ In any case, Winnicott continues, they “have neglected the subject-object identity to which I am drawing attention here, which is at the basis of the capacity to be” and for that reason did not see a fundamental truth, which is the following: “The male element *does* while the female element (in males and females) is” (1989a/1989, p. 178).

All that has been said in traditional psychoanalysis about finding objects, using them, oral erotism, oral sadism, anal stages, etc., can be seen arising from the “consideration of the pure male element” (p. 180). This psychoanalysis therefore *does* not deal with what the baby is, but with what it does, by means of the different ways of doing that goes from the more primitive to the more sophisticated. Likewise, the study of projective and introjective identifications have as its object the “experience of the already mixed male and female elements”, not of the pure elements. These “identification experiences” are secondary, based on mental mechanisms of projection and introjections brought about in the non-initial stages of the maturation process, and like any other form of identification they presuppose primary identification.

The essence of Winnicott's criticism lies in two points. First, it says that the traditional psychoanalytic theory of sexuality traditional is partial, since it is based at best on only one aspect of human nature – the (pure) male element.⁴⁷ Second, it says that that theory ignores its own presuppositions, since it uses the drive aspect without considering that due to the essential structure of human nature, human beings in order to be driven and capable of doing things need first to create

⁴⁶ Those who assume that it is obvious that traditional psychoanalysts knew nothing about the existence of a pure male element will say that this is just another instance of Winnicott mitigating his views so as not to be too incisive.

⁴⁷ This can be clearly seen when one looks at the fact that in Freud women are defined negatively, as castrated males.

the capacity for being and come to personal identity, becoming objective subjects. According to that view – which is part of the ontological model of Winnicott's paradigm – a baby becomes a real subject only insofar as it resolves the basic initial tasks: that of having a personal identity, that of being inserted in space and time, placed in a body, and capable of relating to other human beings and to the things in the world he lives. It all happens as if the traditional psychoanalytic theory of sexuality had a twofold dependency with respect to Winnicott's theory, needing it in order to be complete and to get to know its foundations.

11. From sexual conflicts to the conflict between being and doing

In a fragment from 1968-9, Winnicott drew the comparison between being and doing to its ultimate consequences:

At the extreme I discovered myself looking at an *essential conflict* of human beings, one which must be operative at a very early date; that between *being the object* which also has the property of being, and by contrast a confrontation with the object which involves activity and object-relating that is backed by instinct or drive. (1989a/1989, p. 191; my italics)

The novelty contained here is the idea that the contrast between being and doing reflects not only the difference between two types of object-relating, but denotes a conflict that happens in the passage from relating in the sense of being to relating in the sense of doing.

Such an idea was not completely new to Winnicott's own prior work, but, as he says, "a new statement of what I have tried to describe in terms of the subjective object and the object that is objectively perceived" (p. 191). However, by characterizing as *essential* the conflict between being the object and confronting the object, Winnicott added weight to the transition from the stage in which the environment identified with the baby facilitates "surfing" on the wave of instinctual tensions, to the stage in which the baby has to begin to act on outside objects that are separate from him and made up due to effective drives to destroy subjective objects.

Indeed, the main contribution of the 1968-9 remarks lies in the radicalization of the following problem: growth towards the acknowledgment of reality happens on the basis of what? One thing was certain for Winnicott: the word "narcissism" from traditional psychoanalysis could not be used to determine the starting point of this growth nor to exhibit the nature of the experienced changes. This was because "the whole concept of narcissism leaves out the tremendous differences that result

from the general attitude and behavior of the mother" (p. 191).⁴⁸ The only way out that he was left with was that of making "an attempt to state in extreme form the contrast between being and doing" (1989a/1989, p. 191).

The statement he came up with took on the form of a "basic dilemma". The first horn of the dilemma says:

The baby is the breast (or object, or mother, etc.); the breast is the baby. This is at the extreme end of the baby's initial lack of establishment of an object as non-me, at the place where the object is 100 percent subjective, where (if the mother adapts well enough, but not otherwise) the baby experiences omnipotence. (1989a/1989, p. 191)

The second horn of the dilemma states:

The baby is confronted by an object (breast, etc.) and needs to come to terms with it, with limited (immature) powers of the kind that are based on the mental mechanisms of projective and introjective identifications. (1989a/1989, p. 191)

This dilemma makes it clear that the identity 'baby = breast' is a matter of being, whereas the confrontation between the baby and the breast involves doing.⁴⁹ It also allows us to understand why the opposition between being and doing comprises a "universal human problem" that stems from the incompatibility between the tendency for *integration by primary identification* that defines human nature and is inherent to the experience of being, and the tendency for disintegration by objectification – loss of the integration resulting primary identification which is equally present in human nature and is an essential trait of doing.⁴⁹ Much more than the tearing down, what hurts the human being is the need to acknowledge that due to the temporal structure of his existence, after experiencing total identity with the real, the initial basis of his capacity to exist, in order to keep on existing he *will have to go through* the experience of total difference.⁵⁰ In other words, his basic dilemma is *insoluble*.

⁴⁸ In earlier works, Winnicott uses the phrase "primary narcissism" as synonymous with "absolute dependency" (see, for example, his 1958a/1958, p. 262). If we take into account that the absolute dependency "relation" is not libidinal and precedes the existence of an I, we are forced to conclude that the meaning of the expression "primary narcissism" in Winnicott is radically different from that of the Freudian meta-psychology.

⁴⁹ What I here call "disintegration by objectification" is a way of being different from disintegration as a psychotic defense.

⁵⁰ Contact with the real is an illusion that only bothers us when we are tired or when the illusion has not actually been set up.

There being no way it can be solved, it can be forgotten, or else *taken on* and upheld, that is, *tolerated*.⁵¹

Although constitutive of the opposition between “sophisticated” sexual aspects (pure male and female elements, *sexual* cross-identifications, etc.), the essential conflict just mentioned can no longer be seen as sexual in the instinctual sense or in the relational sense, that is, in neither of the senses distinguished by Winnicott: “I cannot avoid it, but just at this stage I seem to have abandoned the ladder (*male and female elements*) by which I climbed to the place where I experienced this vision” (p. 192; my italics). The context indicates that the male and female elements mentioned in this passage must be understood to be pure. As in a *ladder*, the theory of the opposition between these elements allowed Winnicott to find an even more fundamental opposition, between being the object and doing something to the object, or suffering something done to him by the object. This opposition belongs to the very structure of maturation, to the *happening character* of human nature as such, and can be exacerbated at each moment and, as we will see shortly, lead to the emergence of pathologies when the environment (the parents) suddenly or untimely go from the state of being-the-baby or child to the doing confrontation with him or her. Winnicott thus comes to conceive, though not to elaborate, a *non-sexual* theory of the roots of sexuality, both instinctive and relational – one that deals with masculinity and femininity in the light of two fundamental types of human *coexistence*: identification and objectification.

12. Theoretical and clinical relevance of the conflict between being and doing

One cannot but conclude that the theory of the basic dilemma of the human individual in its relation to the world, still little studied in the secondary literature, has a key-place within Winnicott's paradigm. By taking up central aspects of human nature, this theory can certainly serve as a starting point for the elaboration of a Winnicottian conception of cultural forms.⁵² But it is also important for

⁵¹ It is useful to connect this point with the Winnicottian theory of aggressiveness. In this experiential psychology without meta-psychology, the role of the death drive – a concept thrown away as senseless, because inapplicable to a description of the phenomena of aggressiveness – is played by the primitive love drive, which according to Winnicott would be in itself destructive (see, for example, 1988, p. 79n). Hence, destruction is inherent to the object relation as such (1986b/1986, p. 206). This thesis takes us to the statement that refers to a moment just past the initial stages where the destructive drive “creates the quality of externality” (1988, p. 110), that is, the possibility that objects be perceived as external.

⁵² Several authors (see, for example, Yukawa, 1962) have pointed out the fact that various cultures of the far-East, in particular those based on Buddhism and Taoism, have sought to preserve the unity of man with nature as a whole, unlike Western cultures of Greek-Roman roots that have bet on man's victory in the conflict against nature (see Freud, 1930/1961). Although Winnicott claims for his psychology the status of a science, his language can be helpful in illuminating what has already been said or what might come to be said in other forms of writing (mythology, religion, or philosophy).

psychoanalysis itself. By restating the theory of sexuality on the basis of the distinction between being and doing, Winnicott inverts the order of reasoning of traditional psychoanalysis, abandoning the perspective of grounding the theory of human personality – from illness to clinical practice, of social and moral order – in terms of libidinal episodes, in favor of an approach centered on problems of the human being understood as temporal samples of internal difficulties inherent to human nature.

Although they have to do with the ontological structure of the human being, Winnicott's analyzes are not meta-psychological speculations, that is, they are not about a dispensable super-structure that is used only because it is useful in the search for and organization of clinical facts. One of his main merits, from the point of view of psychoanalysis as an "empirical" science, is precisely that of allowing for a universal problem such as that of human existence to be seen as a factual ingredient, constitutive if not of all then at least of a significant number of clinical problems:

In psychopathology some of the greatest blocks to instinctual – or drive – involvement come when patient = *object* violently changes into *patient confronts and is confronted by object*, involving a change from a cosy defence to a position of anxiety of high degree and a sudden awareness of immaturity. (1989a/1989, p. 192; my italics)

If a hold up of this nature is to be found in the patient of the FM case – and the clinical material gathered by Winnicott suggests that it is – then his pathology can neither be understood and treated within the framework of the Freudian theory of sexual drive nor within that of the Winnicott's doctrine of instinctual sexuality. We are obviously beyond the field of neuroses or even of reactive depressions. On second thought, not even Winnicott's concepts of cross-identification and of the pure male and female elements as such are applicable. We are here facing an environmental shortcoming of an even more fundamental kind, one that consists in not helping the patient to solve the fundamental problem of human existence as such, something Winnicott summarizes with the following words: "After being – doing and being done to. But first, being" (p. 182).

We can sum up the Winnicott's train of thought after the FM case as follows: the starting point for his theorizing was the fact that in the patient under treatment there was something like a pure female element – a female sexual identity not based on his biological provision – split-off from his male personality (established on the basis of his biological provision) and in conflict with it. The etiology of the situations lied in the fact that while still a baby – and therefore absolutely dependent on mother – the patient had been objectified by his mother, who, by her own doing, imposed on him a fake identity which was taken on by him as a defense against a possible loss of the mother. So as to understand the conflict between the two sexual identities thus created, one of which supported

biologically and the other merely relational, it was necessary to take into account the two basic modes by which a baby relates to the world, primary identification and objectification, each going both ways.⁵³ However, when fully thought through, these two modes of relating *lose* their sexual character. The conflict between being and doing, conceived as a tension between modes of existing of the human being that have to be borne throughout life, cannot be characterized in terms of a difference between male and female.⁵⁴ At the same time, however, this tension is decisive for the constitution of masculinity and femininity.⁵⁵

According to what has been presented, Winnicott's theory of both relational and instinctual sexuality rests upon his theory of maturation. For that reason the treatment of sexual disturbances sketched in the last phase of his work became part of his treatment of general maturation problems in general which is more comprehensive and more effective than the treatment of these disturbances within the framework of Freud's theory of sexuality and meta-psychology.

References^{*}

- Abraham, K. (1998). *Psychoanalytische Studien zur Charakterbildung*. In K. Abraham, *Psychoanalytische Studien* (pp. 184-226). Giessen: Psychosozial-Verlag. (Original work published 1925)
- Dias, E. O. (2003). *A teoria do amadurecimento de D. W. Winnicott*. Rio de Janeiro: Imago.
- Dias, M. de F. (2005). *Um estudo da teoria winnicottiana da sexualidade*. Doctoral thesis, Programa de Estudos Pós-Graduados em Psicologia Clínica, Pontifícia Universidade Católica, São Paulo.
- Freud, S. (1961). *Civilization and Its Discontents*. London: Norton. (Original work published 1930)
- Freud, S. (2000). *Three Essays on the Theory of Sexuality*. New York: Basic Books. (Original work published 1924[1905])

⁵³ The same kind of work could be done on the basis of cases that present the male element split off in female patients.

⁵⁴ Indeed, this conflict escapes the field of psychoanalysis as such. Evidence for this is the close connection between doing and the technological objectification of the world, a process acknowledged by Winnicott as a potentially deadly threat for human civilization (1986b/1986, p. 208). I believe we would gain a lot in the understanding of Winnicott, a thinker of human nature, by translating this result to the language of Heidegger's "thought of the being", considering in particular Heidegger's search for the possibility of overcoming technique.

⁵⁵ Winnicott's thesis that the conflict between being and doing is the ground for sexual difference allows for, and at the same time demands that the theory of instincts be remade. Accomplishing this task would by far exceed the limits of the present paper.

* Works by Winnicott are quoted according to Knud Hjulmand's bibliography, published in *Natureza humana*, v. 1, n. 2, 1999, pp. 459-517.

- Jung, C. G. (1938). *Wandlungen und Symbole der Libido*. Leipzig: Deutke. (Original work published 1911-12)
- Kuhn, T. S. (1970). *The Structure of Scientific Revolutions*. 2nd ed. Chicago: University of Chicago Press.
- Kuhn, T. S. (2000). *The Road since Structure*. Chicago: University of Chicago Press.
- Lacan, J. (1975). *Séminaire*, book I. Paris: Seuil.
- Laplanche, J. & Pontalis, J.-B. (1971). *Vocabulário da psicanálise*. Lisbon: Moraes.
- Loparic, Z. (1995). Winnicott e o pensamento pós-metafísico. *Psicologia USP*, 6(2), 39-61.
- Loparic, Z. (1999). Heidegger and Winnicott. *Natureza humana*, 1(1), 103-135.
- Loparic, Z. (2000). O “animal humano”. *Natureza humana*, 2(2), 351-397.
- Loparic, Z. (2001a). Esboço do paradigma winnicottiano. *Cadernos de história e filosofia da ciência*, 11(2), 7-58.
- Loparic, Z. (2001b). Além do inconsciente: sobre a desconstrução heideggeriana da psicanálise. *Natureza humana*, 3(1), 91-140.
- Loparic, Z. (2003). *Sobre a responsabilidade*. Porto Alegre: EDIPUCRS.
- Loparic, Z. (2010). Winnicott clínico. *Natureza humana*, 12(2).
- McDougall, J. (1997). *As múltiplas faces de eros*. São Paulo: Martins Fontes.
- Moore, C. A. (Org.). (1962). *Philosophy and Culture East and West*. Honolulu: University of Hawaii Press.
- Yukawa, H. (1962). Modern Trend of Western Civilization and Cultural Peculiarities in Japan. In C. A. Moore (Org.), *Philosophy and Culture East and West* (pp. 188-195). Honolulu: University of Hawaii Press.
- Winnicott, D. W. (1958). *Collected Papers: Through Paediatrics to Psycho-Analysis*. London: Tavistock. (Original work published 1958a)
- Winnicott, D. W. (1965). *The Family and Individual Development*. London: Routledge. (Original work published 1965a)
- Winnicott, D. W. (1965). *The Maturation Processes and the Facilitating Environment*. London: Hogarth Press. (Original work published 1965b)
- Winnicott, D. W. (1971). *Playing and Reality*. London: Penguin Books. (Original work published 1971a)
- Winnicott, D. W. (1986). *Holding and Interpretation*. London: Hogarth. (Original work published 1986a[1972/55])

- Winnicott, D. W. (1986). *Home Is Where We Start From*. London: Penguin Books. (Original work published 1986b)
- Winnicott, D. W. (1988). *Human Nature*. London: Free Association Books. (Original work published 1988)
- Winnicott, D. W. (1989). *Psycho-Analytic Explorations*. London: Karnac. (Original work published 1989a)