

Winnicott: An Introduction

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“Health is much more difficult to deal with than disease.”
D. W. Winnicott

In a talk given in 1945 to the sixth form of St Paul’s School, Donald Winnicott described his experience, as a schoolboy, of discovering Darwin’s *Origin of Species*:

“I could not leave off reading it. At the time I did not know why it was so important to me, but I see now that the main thing was that it showed that living things could be examined scientifically with the corollary that gaps in knowledge and understanding need not scare me. For me this idea meant a great lessening of tension and consequently a release of energy for work and play.” (Quoted in Davis & Wallbridge, 1983, p. 24.)

Darwin had examined living things to explain their relation to each other. He realised that gaps in the evolutionary record were merely interruptions in the historical evidence for the continuity of species. Just as Freud would later describe the repressed histories of the individuals he treated, Darwin had reconstructed the invisible histories of species. Gaps in the evidence were openings, and both Darwin and Freud had been able to tell persuasive, apparently coherent stories about them. Winnicott implies by his remarks that he needed to be able not to close the gaps, but to find a way of examining them. They could be potential spaces for the imagination. He was to be preoccupied, as we shall see, by the idea of gaps, those ‘spaces between’ where there was room for the play of speculation.

In the master-plot of human development that he worked on for over 40 years, Winnicott tried to explain how the individual grows, through dependence, towards a personal way of being, how he becomes at once ordinary and distinctive according to the sense he has of himself, and how the early environment makes this possible. Growth was this ongoing task of psychosomatic integration. He was to stress the need for continuity of care – “good-enough mothering” – to sustain what he called the “going on being”, the “life-line” of the infant, at the earliest stages of its life. He would talk,

enigmatically for a psychoanalyst, of instinctual life as a possible “complication” in the individual’s more fundamental needs for relationship. He would regard illness as the inhibition of that potential spontaneity that for him characterised the aliveness of a person. And he would come to think of psychopathology as originating from the breaks in continuity, the distractions in a person’s early development: gaps caused by the intrusions and deprivations and natural catastrophes of childhood, most of which he saw as resulting from failures of parental provision. There were things the child had experienced but could not make satisfying sense of, and so find a place for in himself. For the infant who waits too long for his mother, for example, “the only real thing is the gap; that is to say, the death or the absence, or the amnesia” (Winnicott, 1971a, p. 26).

In Winnicott’s view experience was traumatic for the child if it was incomprehensible, beyond the child’s grasp. The onus was on the mother, at first, to present the world to the infant in manageable doses. And the onus on those helping mothers and infants, Winnicott believed, was to protect this process. “If it be true, or even possible,” he writes, “that the mental health of every individual is founded by the mother in her living experience with her infant, doctors and nurses can make it their first duty not to interfere. Instead of trying to teach mothers how to do what in fact cannot be taught, paediatricians must come sooner or later to recognize a good mother when they see one and then make sure that she gets full opportunity to grow to her job” (Winnicott, 1958, p. 161).

Winnicott’s work was devoted to the recognition and description of the good mother, and the use of the mother–infant relationship as the model of psychoanalytic treatment. And he often took for granted that what mothers did naturally, “what in fact cannot be taught”, was a model for the skill of the psychoanalyst.

He examined, in particular, the paradox of traumatic experiences that were formative by virtue of their eluding the self, and the mother’s role in facilitating in her infant a self available for

personal experience. But Winnicott was to use the concept of the Self in an idiosyncratic and sometimes mystifying way that was not obviously compatible with traditional psychoanalytic theory. "A word like 'self'", he writes, "naturally knows more than we do; it uses us and can command us" (Winnicott, 1965, p. 158). We will gather from the contexts in which he was used by this powerful word that he was asserting the presence of something essential about a person that was bound up with bodily aliveness, yet remained inarticulate and ultimately unknowable: perhaps like an embodied soul. "At the centre of each person", Winnicott (1965, p. 187) writes, "is an incommunicado element, and this is sacred and most worthy of preservation." This Self that he will describe as "permanently non-communicating" fits uneasily, of course, with the notion of psychoanalysis as primarily an interpretative practice.

The individual's Self was endangered, above all, Winnicott believed, by precocious adaptation to the environment. In *The Origin of Species* Darwin had noted what he called the "intermediate" or "transitional gradations" in the development of species, and the role of the environment in this process. He had realised the value, for survival, of individual diversity and variation, but also the need for the organism to comply with the demands of its environment. Organisms had to conform and adapt but also individuate prolifically in order to increase their chances of survival. Innovation and adaptation were mutually necessary, as those who were finally unable to adapt to their environment would not survive. In Winnicott's theory of human development it is the mother, as the first environment, who "actively adapts" to the needs of her infant. In Winnicott's terms the child has a natural right, initially, to use the mother ruthlessly for the recognition and gratification that his development requires. "Without someone specifically orientated to his needs," he writes, "the infant cannot find a working relation to external reality" (1984, p. 58). In time the mother will gradually limit her availability and so "disillusion" the child, and the child will become concerned about the consequences of his ruthlessness. But Winnicott, as we shall see, is committed to an idea of "natural" processes of development – derived from Darwinian biology – that the mother can adapt to and foster by her responsive attention. The word 'natural', as we shall also see, does a lot of devious work in Winnicott's writing. It could betray him sometimes – when he refers, for example, to "the part the woman plays in nature's comic opera" (Winnicott, 1964b, p. 110) – into a sentimentality that he was otherwise fiercely suspicious of.

The first relationship, in Winnicott's account, was one of reciprocity rather than overwhelming conflict or submission. But if the mother was unable, for reasons to do with her own development, to adapt to her infant's needs and was, herself, intrusively demanding, she would foster a precocious compliance in the child. To manage the demands of the mother, and to protect the True Self of personal need and preoccupation, the child would construct what Winnicott called a False Self. By introducing a language of reciprocity into the story of early human development Winnicott revised part of Darwin's account. He reverses the Darwinian equation by suggesting that human development was an often ruthless struggle against compliance with the environment. And this struggle was enacted in his writing where we find innovations in psychoanalytic theory and technique followed by explicit assertions of the continuity of his work with a more orthodox psychoanalytic tradition. We will see, in fact, a certain disingenuousness in the way Winnicott disguises his radical departures from Freud. "Mature adults", he wrote, "bring vitality to that which is ancient, old and orthodox, by recreating it after destroying it" (Winnicott, 1964b, p. 94). With blithe defiance Winnicott recreated, often beyond recognition, the work of everyone who influenced him.

Compliance was a crucial issue for Winnicott because of the fact of dependence. The infant relies on the mother's firm attentiveness for his survival. And the mother in turn depends upon the people around her that she needs. There is, as Winnicott once famously said, no such thing as a baby: "If you show me a baby you certainly show me also someone caring for a baby, or at least a pram with someone's eyes and ears glued to it. One sees a 'nursing couple'" (1964a, p. 88). Winnicott would derive everything in his work, including a theory of the origins of scientific objectivity and a revision of psychoanalysis, from this paradigm of the developing mother–infant relationship. He would elaborate what it was in the mother that the child depended upon, and this would lead him to questions that were rarely addressed in psychoanalytic theory: what do we depend on to make us feel alive, or real? Where does our sense come from, when we have it, that our lives are worth living? Winnicott approached these issues through the observation – one of his favourite words – of mothers and infants, and what became in time the "transitional space" between them. And he would be committed to linking these observations with insights derived from psychoanalysis. As the first paediatrician in England to train as a psychoanalyst, he was uniquely placed to compare his observations

with the always reconstructed, retrospective histories of psychoanalytic treatment.

What went on between the mother and her infant was to be the source of Winnicott's most striking and characteristic insights. But it would be part of his incompatibility with Freud that these insights – the connection, for example, between infantile ruthlessness and adult sexuality – were rarely linked up by him with the place of the erotic in adult life. Fathers tend to turn up in his writing in brackets or parentheses. His most important theoretical contributions to psychoanalysis – transitional phenomena, primary creativity, ruthlessness, the antisocial tendency, the True and False Self – are never described in terms of the difference between the sexes.

Freud, though, had paid little attention in his work to the nursing couple or the details of infant care. He had invented a setting and treatment that were unwittingly reminiscent of early maternal care and he had also, of course, written of the dependent relationship recreated in psychoanalytic treatment. While he had acknowledged the significance, for later development, of the helplessness of the human infant and its precocious immaturity at birth, he had not given this helplessness the centrality it was later to assume for child analysts and the object-relations theorists who thought of themselves as continuing his work. It was the Oedipus complex – the three-person relationship – not the infant's early dependent vulnerability, that Freud saw as the crux of psychoanalysis. Though he worked out an essential pre-Oedipal schema of development, he put relatively little emphasis on the first relationship with the mother. And he tended to assume a certain developmental achievement in his patients that Winnicott would have questioned. From his case histories it seems that Freud believed his patients had more or less successfully negotiated the "long period" of helplessness and entered into the disappointing rigours of incestuous desire.

Freud was interested in the adult's struggle with incompatible and unacceptable desires which he saw as the transformed derivatives of the child's desire for his parents. This desire, that Freud referred to as infantile sexuality, was the precursor of and paradigm for adult sexuality. Out of a profound ambivalence, in Freud's view, the individual constructed an always precarious sexual identity, whereas for Winnicott, out of an always paradoxical involvement with others, the individual gathers the sense of a self he was born with as a potential. Where Freud was concerned with the individual's compromised possibilities for satisfaction, for Winnicott this is only part of a larger issue of the individual's possibilities for personal authenticity, what he will

call "feeling real". In Winnicott's writing culture can facilitate growth, like the mother; for Freud it prohibits and frustrates, like the father. In Freud's view man is divided and driven, by the contradictions of his desire, into frustrating involvement with others. In Winnicott man can only find himself in relation with others, and in the independence gained through acknowledgement of dependence. For Freud, in short, man was the ambivalent animal; for Winnicott he would be the dependent animal, for whom development – the only 'given' of his existence – was the attempt to become "isolated without being insulated". Prior to sexuality as the unacceptable there was helplessness. Dependence was the first thing, before good and evil.

In the *Three Essays on Sexuality* (1905) Freud gives his account of the child's earliest developmental needs, the blueprint for all the competing psychoanalytic stories of human development that were to follow. In the first essay he makes a simple distinction that was to be important in the psychoanalysis of children. "Let us", he writes, "call the person from whom sexual attraction proceeds the sexual object and the act towards which the instinct tends the sexual aim." The first object of desire, Freud goes on to say, is for both sexes the mother. But the object, who is at first the mother, Freud claims is merely "soldered on" to the instinct. That is to say – and this is more obviously true of adult sexuality – there is for Freud no necessary connection between the instinct and its object, for which substitutes can easily be found. In this view the child's, and later the adult's, primary commitment is to the instinct and its satisfaction, not to a specific relationship. In fact, in Freud's view, the infant turns to the mother almost grudgingly out of the inability to be self-satisfied. In other words, dependence was imagined by Freud as a concession on the part of the infant. He comes, in a state verging on disappointment, to a belated awareness of the mother, who is literally an object to relieve the tension born of desire. The infant is conceived of as originally an omnipotent, exploitative hedonist (see Safouan, 1983).

With the advent of child analysis, and in particular with the work of Melanie Klein, the earliest stages of this object-relation with the mother came into focus in psychoanalysis for the first time. Instead of the discrete separation of subject and object, of the infant and its mother, the relational matrix became the object of attention. Different accounts of the child's emotional life began to emerge and more specific questions were asked about the place of the mother in the infant's world. Considering children's play as analogous to the free associations of adults,

Klein applied her version of the classic psychoanalytic technique to the treatment of very young children. She interpreted their play and constructed unprecedented and revealing pictures of what she called the child's internal world. Stressing one aspect in particular of infantile sexuality, the infant's sadism, she was the first to formulate, though often in a dense psychoanalytic language of her own, the passionate intensity of early emotional life. As we shall see, her theories of primitive emotional development, and the significance of the child's destructiveness in the process, were to be crucial for Winnicott. His work, in fact, cannot be understood without reference to Klein. It is a continuous, and sometimes inexplicit, commentary on and critique of her work. The importance of the internal world and its objects, the elaborate and pervasive power of fantasy, the central notion of primitive greed – all these ideas Winnicott takes over from Klein and uses in his own way. As we shall see, they evolved different narratives of the developmental process and the mother's contribution to it. But her stringent theoretical positions, and the collusive devotion of her followers, provoked him without dispelling his own idiosyncratic approach.

Winnicott shared with Klein a fundamental belief in the decisive importance of the earliest stages of development. But from the very beginning, he claimed, the infant sought contact with a person, not simply instinctual gratification from an object. The infant starts life as a profoundly sociable being: he clamours for intimacy, not only for relief of tension – for relatedness, not simply for satisfaction. In fact satisfaction is only possible in a context of relatedness to the mother. "It is not instinctual satisfaction", he writes, "that makes a baby begin to be, to feel that life is real, to find life worth living" (Winnicott, 1971a, p. 116). It was maternal care, he believed, that made it possible for the infant self to be enriched, as opposed to overwhelmed, by instinctual experience. It was the mother's essential role to protect the self of her infant; instincts served the self, in Winnicott's view, they did not constitute it. It was "the self that must precede the self's use of instinct; the rider must ride the horse, not be run away with" (Winnicott, 1971a, p. 116). It was the "mother's job" to ensure that this happened.

Freud had said that the rider must guide the horse in the direction in which the horse wants to go. He was prescient in his sense that his insistence on the central and subversive importance of sexuality would threaten everyone's allegiance to psychoanalysis. Initiated by Klein, and reformulated by Winnicott, it was to be part of the contribution of what became known as the British school of object-relations

theorists, to translate psychoanalysis from a theory of sexual desire into a theory of emotional nurture. It was as though the adult had been usurped by the infant. With the arrival of Melanie Klein in England in 1926, with the work of John Bowlby and Winnicott himself with children evacuated during the war, and with the insights derived from Anna Freud's version of child analysis, a new picture emerged in psychoanalysis of the significance of early relationships for the individual's development. Just as women were being encouraged to stay at home again after their crucial work during the war, coercive and convincing theories about the importance for children of continuous mothering, of the potential dangers of separation, began to be published which could easily be used to persuade them to stay there (see Riley, 1983). In British psychoanalysis after the war there was not so much a return to Freud, as there had been in France with the work of Lacan, as a return to Mother.

II

Under the aegis, though not the leadership, of Winnicott, a Middle Group emerged within the British Psychoanalytical Society. Strongly influenced by child analysis, but not exclusively allied with the work of either Klein or Anna Freud, these analysts – of whom Masud Khan, Charles Rycroft, Marion Milner, John Klauber and Peter Lomas are the most distinguished – formed no school or training of their own. Committed to pluralism rather than hero worship, their work coheres around a more eclectic developmental model. Coming, broadly speaking, from an empirical rather than a dialectical tradition, their work is characterised by an interest in observation and empathy, a suspicion of abstraction and dogmatism, and a belief in people's ability to make themselves known and be understood. Their theoretical papers refer continually to clinical work; there are few dazzling feats of interpretation or knowingness, and concern for the patient is expressed without irony. Imagination was a necessary term in their more or less shared conceptual vocabulary. Although obliquely influenced by existentialism, the Middle Group tended to draw their redescrptions of Freud from biology, ethology and literature rather than from linguistics and continental philosophy. Darwin, rather than Hegel or Nietzsche, was a presiding spirit in their work. There was no radical intent in their theory making. In their writings they did not make comprehensive theoretical assertions, nor was the tone one of shrewd enlightened dismay about the human condition.

For Winnicott, and those who were influenced by his work, psychoanalytic treatment was not exclusively interpretative, but first and foremost the provision of a congenial milieu, a “holding environment” analogous to maternal care. What Paul Ricoeur has called the “hermeneutic of suspicion” in Freud’s work, is replaced by the attempt to establish an analytic setting in which the patient does not undergo authoritative translation – having his unconscious fed back to him, as it were – but is enabled by the analyst, as Winnicott wrote, “to reveal himself to himself”. To begin with, the analyst is a certain kind of host: psychoanalysis, he wrote, “is not just a matter of interpreting the repressed unconscious [but] . . . the provision of a professional setting for trust, in which such work may take place” (Winnicott, 1987, p. 114–115). Interpretation, as part of the setting, aims to recognise and reconstruct what was absent in the parental provision, what early developmental needs were unacknowledged. The risk was that interpretation in analysis would be formative in a way that actually pre-empted the patient’s own half-formed thoughts and feelings. Interpretation could be merely a way of hurrying – on the analyst’s behalf – and analysis, like development, was, for Winnicott, about people taking their own time.

Cure, Winnicott wrote (1971*b*, p. 2), “at its root means care”, care in the service of personal development. The therapist must have “a capacity . . . to contain the conflicts of the patient, that is to say to contain them and to wait for their resolution in the patient instead of anxiously looking round for a cure”. Cure was not something that the therapist did to the patient. In his consultations with children Winnicott found that the significant moment was the one in which the patient surprised himself. In fact the development of a capacity to be surprised by oneself could be said to be one of the aims of Winnicottian analysis. A surprise, of course, eludes the expectations made possible by a body of theory. It is a release from compliance. From his case histories it is clear that Winnicott as an analyst was able to be convinced by his own surprises as well as the surprises of his patients (Winnicott, 1971*b*). Though psychoanalysts have written a lot about pleasure, Winnicott is one of the few that allows himself to be seen, in his writing, getting pleasure from what he does. And this, I think, is of a piece with one of his major contributions, which was to have evolved a genuinely collaborative model of psychoanalytic treatment in which the analyst creates a setting that also makes possible the patient’s self-interpretations. Health for Winnicott was to do with the mutuality of relationship:

“A sign of health in the mind is the ability of one individual to enter imaginatively and accurately into the thoughts and feelings and hopes and fears of another person; also to allow the other person to do the same to us . . . When we are face to face with a man, woman or child in our speciality, we are reduced to two human beings of equal status.” (Winnicott, 1987, p. 117)

Interestingly, Winnicott’s definition of health here echoes John Stuart Mill’s definition of the imagination as the ability to “enter the mind and circumstance of another being”. Though obviously prone to sentimental mystification, the idea of the reciprocity of the professional relationship was a new note in psychoanalysis, as were other of Winnicott’s controversial and apparently whimsical pronouncements. When he wrote, for example, that “we are poor indeed if we are only sane” (Winnicott, 1958, p. 150), or that “true neurosis is not necessarily an illness . . . we should think of it as a tribute to the fact that life is difficult” (1958, pp. 318–319), or that “even when our patients do not get cured they are grateful to us for seeing them as they are” (1971*a*, p. 138), he was, in his own blithe and unbeglamoured way, radically revising conventional psychoanalytic pieties. A certain arch honesty, an often wilfully benign astuteness is part of Winnicott’s distinctive style.

Although occasionally coy, his prose has none of the dreary earnestness or mystifying jargon that mars psychoanalytic writing after Freud and Ferenczi. His thought reflects, as André Green has written, “above all, a richly alive experiencing rather than an erudite schematizing”. Because his papers were presented to a wide range of audiences, and because he was intent on being understood rather than copied, there is little arcane language in his writing. Instead there is a handful of idiosyncratic terms – holding, using, playing, feeling real, illusion and disillusion, true and false self, transitional phenomena – that, as we shall see, make up his developmental theory. What he refers to continually as the developmental process is the idol around which his work is organised. And the prominence of verbal nouns reflects his preoccupation with process rather than conclusion (he was, Masud Khan has written, “always mobile”). The notorious ‘simplicity’ of his language, however, is problematic. Though acutely aware himself of the way words are mobile – “they have etymological roots, they have a history: like human beings they have a struggle sometimes to establish and maintain identity” (Winnicott, 1987, p. 112) – he uses certain key terms as though they had no history in psychoanalytic thought. And while he recommends simple interpretations in analysis – “I never use long sentences unless I am very tired” (1965, p. 167) – his interventions in

his case histories can be elaborate and surprisingly abstract.

The genre of simplicity in which Winnicott writes, a wry version of pastoral, is in fact a kind of elusiveness. But the shrewd ingenuousness of his writing, unprecedented in the psychoanalytic tradition, is consistent with one of his therapeutic aims: to protect the privacy of the self in the making of personal sense and, by the same token, personal nonsense. "In the relaxation that belongs to trust and to the acceptance of the professional reliability of the therapeutic setting . . . there is room for the idea of unrelated thought sequences which the analyst will do well to accept as such, not assuming the existence of a significant thread" (Winnicott, 1971a, p. 65). The need of the self to be both intelligible and hidden that he found in his patients is reflected in his style. There has never been a strong surrealist tradition in England but there has of course been a unique tradition of nonsense. And though Winnicott sounds like no one else writing in the psychoanalytic tradition, he can often sound curiously like Lewis Carroll. It is, in fact, part of his irreverence as a psychoanalyst to be entertaining. Only Winnicott (1971a, p. 108) could have written as a footnote to one of his most important papers: "When the analyst knows that the patient carries a revolver, then, it seems to me, this work cannot be done".

Though we can hear something of E. M. Forster, or his near contemporary Stevie Smith, in Winnicott's writing, there are no comparable echoes of previous psychoanalytic writers. He struggles to conceal the fact that he often writes uneasily in the psychoanalytic tradition, against the grain of its prevailing forms of seriousness and its fantasies of methodical rigour. His writing has its roots in the English romanticism of Wordsworth, Coleridge and Lamb (and has illuminating parallels, odd though it may seem, with the essays of Emerson and the work of William James). Much of his own work deviates from Freudian metapsychology, and unlike Klein and Anna Freud his work does not derive from specifically identifiable Freudian texts. As previous commentators have remarked: "Winnicott preserves tradition in a curious fashion, largely by distorting it . . . [with] his elusive mode of presentation and his absorption yet transformation of theoretical predecessors" (Greenberg & Mitchell, 1983, p. 189). By recontextualising crucial terms, he will gloss over their theoretical history. He will describe psychotherapy as a form of playing – "it has to do with two people playing together" (1971a, p. 44) – and at the same time express a marked preference for open-ended games in which play is not circumscribed by agreed-upon rules. In the Squiggle game, his most

famous technical innovation, he invites a child to complete a rudimentary doodle that he does on a sheet of blank paper. By responding to the demand and turning the squiggle into something recognisable and shareable, the child offers a sample of his internal world. The repertoire of the child's possible responses is not circumscribed by the therapist. It cannot be calculated. In this reciprocal free association, this "game without rules", Winnicott saw the therapeutic potential of a traditional children's game, and adapted it to his psychoanalytic purposes. The charm and immediacy of his use of the technique described in his *Therapeutic Consultations in Child Psychiatry* could be as irresistible to the reader as it was to the child. It was Winnicott's vitality, his flair, that was unprecedented in psychoanalysis, and that created suspicion. By virtue of being new people, infants and young children can be difficult to understand. He could seem to embody a peculiarly modern but misleading ideal of perfect communication with children. There was something 'magical', his critics thought, in the fluency of his contact with the children he saw, as though all one could learn from his clinical accounts was that one was unable to be Winnicott. It will become clear that Winnicott had to be subtly pragmatic in his use of the psychoanalytic tradition. Sometimes he could allow himself to be idiosyncratic only by appearing to comply.

He was, however, explicit about his method of writing papers, which is, in the most interesting way, of a piece with his developmental theory. Introducing a radically innovative paper to the British Psychoanalytical Society in 1945, he said:

"I shall not first give an historical survey and show the development of my ideas from the theories of others, because my mind does not work that way. What happens is that I gather this and that, here and there, settle down to clinical experience, form my own theories, and then, last of all, interest myself to see where I stole what. Perhaps this is as good a method as any." (Winnicott, 1958, p. 145)

In the first sentence he refuses to comply with the way psychoanalytic papers are conventionally organised. He assumes influences are at work – "I gather this and that, here and there" – and he takes it for granted that in forming his own theories he will discover an indebtedness. He does not, it should be noted, refer to borrowing (on which subject psychoanalysis has always been silent) but to stealing. In his unique theory of delinquency, which he calls the antisocial tendency, Winnicott suggests, as we will see, that the child steals in symbolic form only what once belonged to him by right. The child is unwittingly trying to make up for a deprivation he experienced in the original commonwealth of his

relationship with the mother, and he is alerting the environment to this fact. For Winnicott the antisocial act, like a regression in psychoanalytic treatment, is a return to the point at which the environment failed the child. He returns to find where what he hasn't got has come from, to the gaps in himself. Winnicott's method of writing papers, so recognisably close to ordinary experience, enacts this process.

As we trace the development of Winnicott's work we will find his evolving description of the mother-infant relationship mirrored by his own relationship with the psychoanalytic tradition. Like the infant's benign exploitation of the mother, which he describes, he will use the tradition according to his needs in the making of his own personal sense. He will suggest in one of his most remarkable late (1969) papers, "The use of an object and relating through identification" (Winnicott, 1971a, pp. 101–112), that the object only becomes real by being hated; the infant can only find the world around him substantial through his ultimately unsuccessful attempts to destroy it. Winnicott will test the resilience of the body of psychoanalytic knowledge in the development of his most recondite concept, the personal Self. Perhaps in becoming himself the psychoanalytic writer will, of necessity, have a delinquent relationship to the tradition, using it as he needs it.

Winnicott, anyway, made it impossible for us to copy him: he is exemplary as a psychoanalyst, by being inimitable.

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