

Destruction reconceived: On Winnicott's 'The Use of an Object and Relating through Identifications'

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'The Use of an Object and Relating through Identifications' is a landmark contribution that I find very difficult to write about because so much of what lies at its core is merely suggested. It is necessary for the reader not only to read the paper, but also to write it. In my reading/writing of the paper, the mother becomes real for the infant in the process of his actually destroying her as an external object (destroying her sense of herself as an adequate mother), and his perceiving that destruction. She also becomes a real external object for the infant in the process of his experiencing the psychological work involved in surviving destruction, a form of work that does not occur in the world of fantasied objects. The analyst or mother may not be able to survive destruction. It is essential that the analyst be able to acknowledge to himself his inability to survive and, if necessary, to end the analysis because of the very damaging effects for both patient and analyst of prolonged experience of this sort. The author presents clinical discussions of analyses in which the analyst survives destruction and is unable to survive destruction.

Keywords: Winnicott, destruction, object-usage, object-relating, survival of object, destruction of object

'The Use of an Object and Relating through Identifications' is perhaps Winnicott's most difficult paper and most certainly one of his most important. There is a sad story associated with Winnicott's initial presentation of this paper to the New York Psychoanalytic Institute on the evening of November 12, 1968. To Winnicott's disappointment, the paper received a puzzled and skeptical response. Milrod, in the official minutes of the meeting, wrote: "In a charming and whimsical fashion Dr. Winnicott responded by saying his concept had been torn to pieces and that he would be happy to give it up" (Rodman, 2003, p. 328). Shortly after the meeting, Winnicott suffered a heart attack. A reworked version of the paper presented in New York was published the following year in the *International Journal of Psychoanalysis* (Winnicott, 1969a), and a slightly revised version of that paper was published posthumously in *Playing and Reality* (1971). Winnicott is said to have been "still revising the paper for publication in *Playing and Reality* on the day of his death, January 25, 1971" (Samuels, 2001, p. 38). I will be discussing the 1971 version of the paper.¹

So much is merely suggested in this paper that one must not only read it, one must also participate in writing it. The ideas I develop in this paper

¹Winnicott (1971).

represent my own reading and writing of Winnicott's paper – what I make of it, and more importantly, what I make *with* it.

The subject of this paper

Winnicott, in the opening paragraphs of the paper, speaks in an intimate, conversational way that sets the tone for the rest of the paper:

It appals me to think how much deep change I have prevented or delayed in patients *in a certain classification category* by my personal need to interpret. If only we can wait, the patient arrives at understanding creatively and with immense joy, and I now enjoy this joy more than I used to enjoy the sense of having been clever. I think I interpret mainly to let the patient know the limits of my understanding. The principle is that it is the patient and only the patient who has the answers.

(pp. 86–87)

While this passage strikes a chord of truth in me, I wonder what Winnicott has in mind when he says, “I interpret mainly to let the patient know the limits of my understanding.” He leaves the reader free to develop his or her own ‘answers’ to this question (as he tries to do with his patients). As we will see, Winnicott makes use of the reader's experience of reading this paper to *show* rather than *tell* the reader what he has in mind, for much of what he has in mind cannot be told or explained, it has to be experienced.

Winnicott immediately follows this statement about not interpreting with a statement about the importance of interpreting:

By contrast with this comes the interpretative work that the analyst must do, which distinguishes analysis from self-analysis. The interpreting by the analyst, if it is to have effect, must be related to the patient's ability *to place the analyst outside the area of subjective phenomena*. What is then involved is the patient's ability to use the analyst, which is the subject of this paper.

(p. 87)

Winnicott, in consecutive paragraphs, presents two *seemingly* contradictory ideas: one must not give in to a “need to interpret” *and* there is “the interpretive work that the analyst must do”. Winnicott does not explain the relationship between these ideas, but he offers some guidance when he says, “The interpreting by the analyst, if it is to have effect, must be related to the patient's ability *to place the analyst outside the area of subjective phenomena*.” Interpreting, if it is to “have effect” (if it is to have consequences in the *real* world) must be done only after the patient has developed the capacity to “*to place the analyst outside the area of subjective phenomena*.” Winnicott does not expand on what this sentence means, but says it is “the subject of this paper”. Interestingly, later in the paper, Winnicott returns, only in a single brief allusion, to these critically important ideas concerning the analyst's use (or refraining from use) of interpretation.

At this juncture in the paper, the reader is left hanging, not quite understanding what Winnicott has in mind regarding the place of interpretation in analysis, much less how he arrived at his ideas.

A theoretical statement

In the second section of the paper – the ‘sections’ are not named or numbered, but I view the paper as divided into four parts thematically – Winnicott clarifies the difference between the two types of relatedness to objects with which he is concerned in this paper: object-relating and object-usage.

When I speak of the use of an object, ... I take object-relating for granted, and add new features that involve the nature and the behaviour of the object. For instance, *the object, if it is to be used, must necessarily be real in the sense of being part of shared reality, not a bundle of projections.*

(p. 88, my italics)

Here, Winnicott reverses the conventional terminology of psychoanalysis by using the term ‘object-relating’ (usually used to refer to mature, whole-object relatedness) to refer to the more primitive (narcissistic) form of object relationship in which the object is ‘a bundle of projections’, an extension of the self; and he uses the term ‘use of an object’ (usually associated with exploitation of another person) to refer to mature object-relatedness in which the subject lives in the outside world of ‘shared reality’, and experiences objects as genuinely external to himself. This reversal causes the reader to loosen his grip on what he thought he knew and to open himself to not knowing.

Winnicott concludes his theoretical statement with a story:

two babies are feeding at the breast. One is feeding on the self, since the breast and the baby have not yet become (for the baby) separate phenomena. The other is feeding from an other-than-me source, or an object that can be given cavalier treatment without effect on the baby unless it retaliates. Mothers, like analysts, can be good or not good enough; some can and some cannot carry the baby over from relating to usage.

(p. 89)

There are two pieces of ‘unfinished business’ in these sentences that foreshadow the heart of the paper, which is contained in the succeeding section. One is the idea that the other-than-me source ‘can be given cavalier treatment’ by the baby. The other is the ominous qualifying phrase added to ‘cavalier treatment’: ‘unless it retaliates’. Once again, meanings are suggested, but only suggested.

A revolutionary set of ideas

Having defined his terms, Winnicott begins this third and most radical portion of the paper in a surprising way:

I am now ready to go straight to the statement of my thesis. It seems I am afraid to get there, as I fear that once the thesis is stated the purpose of my communication is at an end, because it is so very simple.

(p. 89)

This way of addressing the reader is unique to Winnicott. No other psychoanalyst writes this way. Here, I believe, Winnicott is showing us *what it feels like* to use objects. He is 'ready' to state the main theme of the paper, but finds himself afraid to do so because once he states it to the reader, it falls into the hands of other people (the reader), people who are real, and because they are real and separate people with minds of their own, they are free to do what they will with his ideas, regardless of what he might wish them to do. This is the 'thesis' of Winnicott's paper brought to life for the reader in the experience of reading.

His main theme is not at all simple:

To use an object the subject must have developed a *capacity* to use objects. This is part of the change to the reality principle.

(p. 89)

The first of these two sentences may seem absurdly self-evident: "To use an object the subject must have developed a *capacity* to use objects." And yet, what Winnicott is referring to is anything but self-evident. In fact, this may be the first time any analyst has explored *the process of developing a capacity to use objects* ("it may not even have been specifically studied [before]", p. 86). Winnicott suggests in the second of these sentences that his conception of the process of developing that capacity alters our conception of how the individual develops the ability to face the real world (how the reality principle becomes a dimension of human consciousness).

In fleshing out this 'main theme', Winnicott begins by saying that the movement from object-relating to use of an object is an inborn maturational process that depends on real people ("a facilitating environment", p. 89) for its successful development.

At this point, Winnicott makes a striking statement about the implications of his 'main theme':

In the sequence [under discussion] one can say that first there is object-relating, then in the end there is object-use; in between, however, is the most difficult thing, perhaps, in human development; or the most irksome of all the early failures that come for mending. This thing that there is in between relating and use is the subject's placing of the object outside the area of the subject's omnipotent control; that is, the subject's perception of the object as an external phenomenon, not as a projective entity, in fact recognition of it as an entity in its own right.

(p. 89)

The stage has now been set for what I find to be the three most difficult, most enigmatic, and most richly evocative paragraphs in the paper. These paragraphs are also some of the most unusual in the analytic literature in

terms of their literary form: an imaginary 'conversation' between a preverbal infant and his mother.

The first sentence of these three paragraphs throws down the gauntlet:

This change (from relating to usage) means that the subject destroys the object.

(p. 89)

Winnicott anticipates objection to this statement by "an armchair philosopher" who holds that "if the object is external, the object will be destroyed by the subject" (pp. 89-90). In other words, if the external object is destroyed by the subject, there can be no such thing as an external object.

Winnicott replies by saying that if the armchair philosopher were to "sit on the floor with his patient" [live an analytic experience with his patient], "he will find that there is an intermediate position" (p. 90):

after 'subject relates to object' comes 'subject destroys object' (as it becomes external)

(p. 90)

I am stopped in my tracks by these words. I genuinely do not know what it means for the subject to destroy the object as it becomes external. (I am experiencing here something that only very gradually becomes clear to me, as I read and reread this paper: the word 'destroy' is being remade in these sentences. It has a meaning no one has ever before given it, and I am only beginning, at this point in the paper, to learn something of what that word means.)

The sentence ends with the words:

and then [after 'subject destroys object'] may come 'object survives destruction by the subject.'

(p. 90)

Winnicott is in effect saying that to move from relating to an object as 'a bundle of projections' to relating to an object as a separate person, the subject must destroy the object. I wonder, is Winnicott talking about the fantasy of destroying the object or the subject's *really* destroying the object as a separate entity? And what would it mean to *actually* destroy the external object? If the destruction is simply a fantasy, how is this different from the projections entailed in object-relating? And what does it mean for the object to 'survive' if the destruction is the real destruction of the external object, not a fantasied destruction?

It is here that the paper comes most electrifyingly alive:

A new feature thus arrives in the theory of object-relating [as it evolves into object-usage]. The subject says to the object: 'I destroyed you', and the object is there to receive the communication. From now on the subject says: 'Hullo object!' 'I destroyed you.' 'I love you.' 'You have value for me because of your survival of

my destruction of you.' 'While I am loving you I am all the time destroying you in (unconscious) *fantasy*.'

(p. 90)

For decades, I have read the words "'Hullo object!' 'I destroyed you.' 'I love you.' 'You have value for me because of your survival of my destruction of you.'" as the infant's experience of destroying (renouncing his dependence upon) the *omnipotent internal object mother* (Ogden, 1983). I thought that the renunciation (fantasied destruction) of the internal object mother cleared the way for the infant's emerging capacity to experience the realness of the external object mother.

This reading of the 'destruction' of the object is at odds with the way I now understand what is occurring when 'subject destroys object'. It seems to me now that my earlier understanding of the destruction of the object did not include the key element of Winnicott's conception of 'subject destroys object': it is the *real* external object (*not* an internal object) that is destroyed in the developmental process of moving from object-relating to object-usage. My misreading, as I see it now, resulted from my inability to understand what it meant for the real external object, a real person, to be destroyed.

After the infant 'says' to his mother, "'I destroyed you' and the subject is there to receive the communication", what the infant says to his mother is put in an unforgettable way: "From now on the subject says, 'Hullo object!'" – how better to create in words the relief and the joy in the greeting the infant gives his mother who has survived and whom he loves (and by whom he feels loved) in a way he never before experienced because it can only be experienced with a mother who is a person separate from him? The exclamation point is important stage direction here.

The infant then proudly and jubilantly re-exclaims his achievement, this time with more confidence and pride: "'I destroyed you.' 'I love you.' 'You have value to me because of your survival of my destruction of you.'"

Each time I read these exuberant words, I remember vividly one of my own children – who must have been about six months old – sitting in his high chair like a king with his food tray in front of him. I recall the wide grin on his face as he looked at me straight in the eyes and picked up the small bit of a frankfurter that I had placed on the tray, and I remember his exhilaration as he used his full muscle strength to hurl it to the ground as he screamed with delight. I would pick up the frankfurter and place it back on the tray, never losing eye contact with him, and he would grin, hurl, and jubilantly scream with joy again as he threw it to the ground again. (He had begun playing a kindred game, the peek-a-boo game, a few months earlier, but that game lacked the jubilation of the dropping game.)

But this happy picture is not the picture of the "intermediate position" (p. 90) between object-relating and use of an object. Rather, it is a picture of the great relief and joy felt by the infant on finding that his primary objects are sturdy and can be treated thoughtlessly, dismissively, casually, insouciantly, playfully, scornfully, ragefully, cavalierly, and all the while the

object can be counted on to survive. "The subject can now *use* the object that has survived" (p. 90). I would add that it is also a picture of the achievement of object permanence, object constancy, and a good deal of capacity for symbolization, the differentiation of the internal and external world (if there is an external object, there must be a separate internal self to feel its externality), and separation of the conscious and unconscious aspects of mind. "Here fantasy begins for the individual" (p. 90).

Before this stage of object-usage, there is the 'intermediate position', which is the 'main theme' of Winnicott's paper. In that intermediate position 'subject destroys object'. And "there is a price that has to be paid" (p. 90) by the subject (the infant) in the ongoing destruction of the object in unconscious fantasy. But what is the price paid by 'the object', the *real* mother, an actual human being, who, unlike an internal-object mother (a fantasied mother), feels the pain of being destroyed as a mother?

Winnicott does not 'answer' this question, but he says something that I believe has direct bearing on it. He does so in a sentence that I find to be pivotal to an understanding of the paper as a whole:

This is a position [the intermediate position between object-relating and object-use] that can be arrived at by the individual in early stages of emotional growth only through the actual survival of the cathected objects that are at the time in process of becoming destroyed because real, becoming real because destroyed (being destructible and expendable).

(p. 90)

This sentence is complex both in syntactical structure and in the structure of the paradox it creates. The first part of the sentence might be paraphrased as follows: object usage can be achieved early in emotional development only through the survival of the person with whom the infant or child has an emotional tie (a 'cathected' object). This is a deceptively simple thought in that it seems to be a repetition of what has already been said: object usage can be achieved only through the survival of the object. However, the words that stand out for me in this part of the sentence are 'actual survival'. Winnicott is not speaking metaphorically: the object is liable to *in fact (in reality) not survive emotionally (and perhaps also physically)*.

The sentence continues with a set of ideas that I find to be the most original in the paper: the actual survival of the object is critical at this moment when the mother is "in process of *becoming destroyed because real, becoming real because destroyed*" (italics added). My mind reels, even now, when I read these words. I have spent many hours trying to do something with – come to my own understanding of – this pair of ideas. What does it mean to say that the object is 'becoming destroyed because [it is] real'? Here, one has no choice but to 'write' Winnicott's paper because he leaves critically important ideas in a highly elusive form – ideas not explained, merely suggested.

I would 'write' this part of the paper by saying that the object – the actual living, breathing, emotionally responsive external object mother – is (inevitably, inescapably) 'becoming destroyed' in the developmental process leading to the infant's achievement of object-usage. What I mean when I say that the

actual mother is becoming destroyed is that her experience of herself as a good enough mother to her infant is under severe attack and is in the process of 'becoming destroyed'. Winnicott at times in this paper uses the phrase 'becoming destroyed' and at other times uses the stronger single word 'destroyed' to describe 'the object' (the mother) at this moment in the development of the mother-infant relationship. I believe both wordings are accurate in that the mother and the infant at different points in this process feel as if the mother is being destroyed and at other times feel she has been destroyed.

Winnicott leaves unspoken *the reality that something important about the mother's experience of herself (and the infant's experience of her) as a mother is actually destroyed in the course of the movement from object-relating to object-usage*. What mother has not had the very painful experience of feeling that she has utterly failed as a mother, and what's more, she has ceased to be the person she was before she had the baby? The destruction of the mother's experience of herself as a mother may take innumerable forms, for instance, by her coming to feel that she is not fit to be a mother because she is unable to console her baby when he is in terrible distress, or is not sufficiently loving for the infant to nurse at the breast, or unable to help her infant sleep when he is so desperately in need of sleep, or hating her baby for keeping her from all of the pleasures and sources of pride and competence and creativity that she had had in her life before the baby was born, or any of a thousand other ways an infant or child may actually destroy his mother's belief in her adequacy as a mother (and, at times, her adequacy as a worthwhile person of any sort). The baby does not do this in an effort to attack his mother or destroy her; he does so simply by being the infant he is – an infant who places relentless physical and emotional demands on the mother, demands that no mother can meet. The mother's feeling of becoming destroyed is simply a part of the experience of being a mother to an infant or child, an experience that is at once mundane and unimaginably intense, painful, draining, gratifying, terrifying, and blissful.

The mother's feeling of 'becoming destroyed' as a mother is not restricted to the early months of the life of the mother and infant. It occurs throughout the life of the mother and child (and later, the father and child), often more visible during 'the terrible two's' and more violent during the child's adolescence.

The way I am conceiving of *the actual destruction of the mother* is akin to Loewald's (1979) idea of the killing of the oedipal parents, a killing that is not simply a symbolic killing:

If we do not shrink from blunt language, in our role as children of our parents, by genuine emancipation [genuinely becoming independent adults] we do kill something vital in them – not all in one blow and not in all respects, but contributing to their dying.

(p. 395)

As parents, we must allow ourselves to be killed (psychically and physically) by our children, "lest we diminish them" (Loewald, 1979, p. 395) by interfering with their achievement of autonomy. The stage of development that

Loewald is addressing is much later than that involving the achievement of object-usage. Nonetheless, I believe that Loewald's conception of the realness of the destruction of the object ("we do kill something vital in them") is also true of the destruction of the mother in the ongoing process of developing the capacity for object-usage. The mother is not simply a facilitator of the infant's developing a sense of her externality (and his own internal world), she is a sacrifice to it. She must do nothing less than allow herself to be destroyed.

I will now turn to the second of the pair of phrases (actually they are two collapsed sentences): "*becoming real because destroyed*" (p. 90). Here, the object is "real because [the infant perceives the way in which the mother is feeling] destroyed". In other words, simultaneously with the mother becoming destroyed because she is a real person is the infant's perceiving the mother's experience of being destroyed as a mother. The infant senses the pain that his mother (as a real person, not as his omnipotent creation) *actually feels* as she is becoming destroyed. This is a critical part of the period between object-relating and object-usage: the infant sees in his mother's eyes, hears in her voice, feels in the way she holds him the pain she is experiencing as she is 'becoming destroyed'.

Nothing is more important to an infant or child than his mother's conscious and unconscious emotional state to which he is exquisitely sensitive (Beebe and Lachmann, 2004; Fraiberg, 1980; Green, 1986; Winnicott, 1960, 1963). The infant's registering, and responding emotionally, to his mother's pain as she is 'becoming destroyed' (as she is coming to feel unfit to be a mother) is an essential part of the 'intermediate position' between object-relating and object-usage. The mother 'becom[es] real because destroyed' in that she becomes real to the infant because her feelings of 'becoming destroyed' are becoming real to him.

At the same time, the mother is 'in process' of *surviving because real*. She is able to survive destruction *because* she is a real person – an adult with mature (as well as primitive) emotions, ideas and psychological capacities of her own, which she is able to bring to bear on the experience of *actually being destroyed* as a mother and of *actually surviving* as she is becoming destroyed. In other words, she, as a mature subject separate from the infant, may be able to survive feeling she is a mother in name only; she does so by mobilizing her own (real) conscious and unconscious capacities to recover her sense of herself as a good enough mother, even as she is 'becoming destroyed' as a good enough mother.

If the mother and infant are to succeed in negotiating this emotional terrain, the mother must not only survive the pain of becoming destroyed, she must also communicate her survival. She makes this communication in the myriad ways in which she is genuinely alive and loving in her way of being with her baby – which the infant awaits anxiously (after he destroys her) and celebrates when he finds it.

Other people in the mother's life may be able to help her to survive becoming destroyed, for example, her husband, her mother, her grandmother, her analyst – who may be able to give her literal and/or figurative periods of rest or sleep during which "to dream" (Bion, 1962, p. 5) – to do

unconscious psychological work with – the experience of being destroyed by her infant, and the experience of surviving that destruction. The mother may also be helped to survive as she is being destroyed by the felt presence of unconscious internal objects derived from actual experience with people who look care of her when she was an infant and child, and who managed to survive all the while they were being destroyed by her.²

The sentence being discussed concludes with the parenthetical statement that the object that is becoming real in the process of becoming destroyed is also becoming 'destructible and expendable'. In other words, the mother's 'destruction' and survival of that destruction promotes the infant's feeling sufficiently secure to be able to experience her as expendable, superfluous unnecessary, beside the point. He knows she will survive the experience of becoming expendable.

Just as the mother's ability to stay alive for herself and for the infant while becoming destroyed is the lynchpin of the process of the infant developing the capacity to use objects, in the analytic setting, the analyst, the analytic technique, and the analytic setting all come in as surviving the patient's destructive attacks. The destructive activity is the patient's attempt to place the analyst outside the area of omnipotent control, that is, out in the world.

Without the experience of maximum destructiveness (object not protected) the subject never places the analyst outside and therefore can never do more than experience a kind of self-analysis, using the analyst as a projection of part of the self.

(p. 91)

Winnicott's language is stronger here. The analyst must survive "maximum destructiveness (object not protected)". In other words, the analyst must not impede the patient's destructive attacks, nor should he become defensive, for instance, by the defensive use of interpretations that attempt to defuse the intensity of the patient's feelings. (This is the allusion, to which I earlier referred, to the idea that: "It appals me to think how much deep change I have prevented or delayed in patients ... by my personal need to interpret". p. 86.) It is important not to equate destructiveness with anger in this passage. The patient need not feel angry as he is ignoring or dismissing the analyst or making him feel superfluous. The urge to retaliate on the part of the mother/analyst is fully understandable – we all, as parents and as analysts, have felt the impulse to retaliate in the face of repeated experiences of becoming destroyed as parents and as analysts. But there are periods in the process of moving from object-relating to object-usage during which retaliation of any sort is experienced by the infant or patient as an attack on his sanity (more accurately, his psyche-soma). Under these

²The syntax of the portion of the sentence under discussion – "in process of becoming destroyed because real, becoming real because destroyed" – is significant in that the verb to *destroy* is twice used in the passive voice (destroyed). By eliminating both the subject (the infant) and the active form of the verb (destroy), 'destruction', in the sentence, simply 'turns up' (p. 91). Implied is the idea that the infant does not intentionally destroy the object; rather, as Winnicott puts it much later in the paper, "destruction turns up and becomes a central feature so far as the object is objectively perceived" (p. 91). In this way, Winnicott subtly introduces an idea by means of syntactical structure, thus allowing the reader to live with it, before he puts it into more explanatory words.

circumstances, the mother's/analyst's actual retaliation sets in motion a pathogenic process that may be irreversible if not identified and addressed thoughtfully and cogently.

These attacks may be very difficult for the analyst to stand, especially when they are expressed in terms of delusion, or through manipulation which makes the analyst actually do things that are technically bad. (I refer to such a thing as being unreliable at moments when reliability is all that matters, as well as to survival in terms of keeping alive and of absence of the quality of retaliation.)

(p. 92)

In this passage, Winnicott addresses for the first time the actual pain the analyst (and by extension, the mother) feels in response to being destroyed as an analyst by the patient, but he stops short of identifying the patient's perception of, and response to, the analyst's pain as a principal medium through which the analyst/mother becomes real for the patient/infant. As I have discussed, I believe the patient's/infant's perception of, and response to, the pain of the analyst/mother are critical to the movement from object-relating to object-usage.

To summarize, the idea that the mother is *becoming destroyed because real* suggests to me that the mother can only become destroyed *because she is real* – a real person who is able to experience the pain of being destroyed as an adequate mother. And she is *becoming real because destroyed* in that the infant is able to sense the reality of the pain she experiences (as a separate person) in becoming destroyed (as a mother). Moreover, she *survives because real* in that only a real person living in the world external to the infant's subjectivity is able to be destroyed and at the same time survive as a living presence who continues to love her infant, and continues to be emotionally present for him, and able to dream (to do the necessary unconscious psychological work with) the experience of being destroyed and of surviving being destroyed.

Not quite finished: A theoretical point

Winnicott opens the final portion of the paper with a personal statement reminiscent of the writing in the opening section. He says:

I have ~~not~~ nearly made my whole statement. Not quite however, because it is not possible for me to take for granted an acceptance [on the part of the reader] that the first principle in the subject's relation to the object (objectively perceived, not subjective) is destructive [but that destructiveness is *not* an aggressive response to reality].

(p. 90)

And later, he elaborates:

The assumption is always there, in orthodox theory, that aggression is reactive to the encounter with the reality principle, whereas here [between object-relating and object usage] it is the destructive drive that creates the quality of externality. This is essential in the structure of my argument.

Winnicott is very concerned that his use of the term 'destruction' will lead the reader to believe that he views the infant as reacting to reality with aggression. For Winnicott, it is the other way round: destruction is not a response to reality, it 'creates' reality ("the quality of externality"):

(p. 93)

The central postulate in this [his own] thesis is that whereas the subject does not destroy the subjective object (projection material), destruction turns up and becomes a central feature so far as the object is objectively perceived, has autonomy, and belongs to 'shared reality.'

(p. 91)

As I mentioned earlier, I have come to realize something about Winnicott's paper that I have not until now quite named for myself: he is inventing a meaning for the word *destruction* that differs both from its meaning in general usage and from the way any other psychoanalyst has used it. But the meaning of the term is elusive because Winnicott never defines it; instead, he conveys its meaning only by the way he uses the term in the sentences he writes. Moreover, the term acquires different inflections of meaning as the paper unfolds.

What Winnicott does with the word *destruction* – reinventing it, defining it only through the way he uses it, and allowing it to accrue new meanings as he proceeds – contributes to making this paper extremely difficult to understand and impossible to paraphrase. Consequently, it is necessary for me to create my own understandings of the term *destruction*. The meanings I make will be different from those you, the reader, will make, and different from the ones I will make when reading Winnicott's paper tomorrow.

To return to the text, in the second of the passages just cited, Winnicott uses the phrase 'destruction turns up' (to which I referred earlier), which I view as an elegant way of expressing the idea that the infant destroys the mother without anger and without the intention of destroying her. Destruction 'turns up' because a healthy infant or child asks (demands!) a great deal from his or her mother, more than any mother can provide.

The reader must hold this use of the term *destruction* in mind when later Winnicott speaks of the "the patient's destructive attacks" (p. 91) that the analyst must survive. The two phrases – 'destruction turns up' and 'the patient's destructive attacks' – become, in Winnicott's hands, coexisting facets of 'destruction', both of which describe aspects of the process in which the infant or patient 'creates externality'. Destruction may take the form of attack when the patient (or infant) feels trapped in a solipsistic, confining world and feels "the drive" (p. 93) to battle his way into external reality. Even when engaging in "destructive attacks" (p. 91) "on the analyst, the analytic technique, and the analytic setting" (p. 91), Winnicott insists, "There is no anger in the destruction of the object" (p. 93). Destruction simply turns up in the mother-infant relationship as the infant is driven (in health) toward object-usage.

It will be seen that, although destruction is the word I am using, this actual destruction belongs to the object's failure to survive. Without this failure, destruction remains potential. The word 'destruction' is needed, not because of the baby's impulse to destroy, but because of the object's liability not to survive, which also means to suffer change in quality, in attitude.

(p. 93)

In the first two of these sentences, Winnicott uses the term "failure to survive"; in the third, he uses the term "liability not to survive". I find the phrase, 'liability not to survive', a description more accurate than 'failure to survive' (because of the judgmental connotations of the word *failure*) when referring to a breakdown in the relationship between mother and infant. I believe that it is crucial, that we, as analysts, not become judgmental about the mother's (or our own) liability not to survive destruction.

It is not easy being a mother or being an analyst, particularly when one is becoming destroyed. Winnicott, in his BBC radio broadcasts and in the books he wrote for the general public (Winnicott, 1969b), tried to help mothers and fathers become more accepting of themselves as parents (including their feelings of anger and defeat at the hands of their infant). In his paper, 'Hate in the Countertransference' (1947), Winnicott attempts to do something similar for analysts. Perhaps most analysts have the humility to admit that they are not able to be of help to every patient he or she accepts for analysis. What is more difficult to admit is that there are times when we, as analysts, are unable to survive destruction in an analysis we are conducting, and yet, to the detriment of the patient and ourselves, we continue to work with the patient (sometimes without seeking consultation or further personal analysis). I will discuss this aspect of analytic work in greater detail in the clinical portion of this paper.

Before turning to clinical work, I would like to make explicit a theoretical point that Winnicott does not address. The achievement of object-usage, as I understand it, does not only involve a state of mind that "creates the quality of externality" (p. 93), it also involves a state of mind that creates the unconscious mind itself (in the sense that the conscious mind becomes differentiated from the unconscious mind). When the infant is in the stage of object-relating, there is not yet a conscious and an unconscious mind: the infant cannot differentiate his thoughts and feelings from his perceptions of the world. With the achievement of object-use, unconscious fantasy comes into being ("Here fantasy begins for the individual", p. 90).

Having said that the discovery of externality allows for the differentiation of the conscious and unconscious aspects of mind, I must add that I disagree with Winnicott's notion that the destruction of the mother continues "all the time... in (unconscious) *fantasy*" (p. 90), an idea that he later states in slightly different words: "the object in *fantasy* is always being destroyed" (p. 93). By contrast, in my conception of the 'destruction of the mother' during the 'intermediate position' between object-relating and object-usage, the experience of the mother's destruction and her survival are not unconscious fantasies, they are realities that the mother experiences, and that the infant perceives and responds to. The infant's perception of the mother's destruction

In the early years of analysis, Mr B told me that his mother dressed bizarrely and would say nonsensical things while standing alone in the middle of a room. He numbed himself to see her through their eyes. He spent most of his time by himself either in his room or in the fields behind his house. His sister, three years younger, had "joined forces" with their mother, telling during these initial years, I felt I was learning "about the patient's life, but I did not really know him, and he did not really know me. I was patient with Mr B, always cognizant of his fear of revealing his mother's psychosis, and his own. The patient, one day, began the session by saying that there was something he had been wanting to tell me, but had been too ashamed to do so. He said that he and his sister had "played doctor" when he was 8 years old and she was 5. Mr B sobbed as he told me about looking at, but not touching, his sister's genitals. He was as frightened as he was curious. He said that he knew that he had caused her "lasting damage".

After Mr B told me his "shameful secret", I had the feeling that he was going to prematurely end the analysis, now that some of the weight of that secret was off his shoulders. Though he was experiencing some relief from his feelings of despair, I felt that in many ways he was absent from his own analysis. The two of us rarely talked in a way that felt alive to me. When I spoke, my voice often sounded to me strangely thin and insubstantial. Most of the time, during our sessions, I felt lost and directionless. Mr B had been a prolific dreamer in the early part of the analysis, and there had been, at times, a feeling of discovery that we shared as we talked about them, but he had not told me a dream in a very long time.

Although I did not connect this with my work with Mr B, I became alarmed when I began to feel, while consulting to analysts on their work with psychotic patients, that I used to do that kind of work, but no longer did. I was sailing along on reputation, rather than on genuine expertise. In short, I was a fraud. This was a profoundly disturbing feeling that carried over into other sectors of my life.

During this period Mr B arrived late for several sessions in a row, which was unprecedented for him. On each of these days, upon opening the door to the waiting room, I could feel the patient's gaze wash over my face in a scrutinizing way. He had almost always kept his eyes to the floor when I met him. I wondered if he sensed that something was upsetting me and that he was late to his sessions in an effort to help me by giving me "a rest" from dealing with him. At the beginning of one of these sessions, my mind returned to the patient's account of "playing doctor" with his sister. I began to think of it differently. It now seemed to me that the "lasting damage" to which the patient referred may have more to do with the damage he had suffered early on at the hands of his psychotic mother than it had to do with the damage he had done to his sister. I suspected that the patient had been trying to tell me something very personal and important to him, and I had not been able to fully hear it until now: his terrible secret about playing doctor was a disguised version, almost a dream image, of his attempt to be a doctor to his mother in an effort to cure her of her psychosis.

(his perception of her feeling that she is failing as a mother) and the infant's perception of her survival as his mother are both real, and are both critical to the process by which the infant "creates externally". Because these experiences of destruction and survival are real, they continue not in "unconscious fantasy", but in *unconscious memory elaborated in unconscious memory*, but in *unconscious memory elaborated in unconscious memory*, which is then elaborated in unconscious memory of an *actual* experience, which is then elaborated in unconscious fantasy and persists as a "backcloth" (p. 94) of "ongoing destruction [of the object] in unconscious fantasy" (p. 90). I also include in the psychic registrations of actual past events those past events that are *not experienced* at the time they occur because they are more than the individual can manage psychically. Those not yet experienced psychic registrations are "waiting" for circumstances (a holding, containing environment such as that created in the analytic setting) in which portions of one's "unlived life" (Ogden, 2014) might be lived/experienced (Winnicott, 1974; Faimberg, 2013 [1998]).

Two clinical discussions

Playing doctor

Mr B, a man in his late 40s, came to analysis saying that he "needed help" with problems in his life that now seemed "beyond repair". He could not be specific about what the problems were, but the feeling he mentioned most often was "despair". As if complying with what he thought I expected of him, he told me about his parents and siblings, but did so in a way that gave me almost no sense of who these people really were. The one exception was his description of his younger sister who was addicted to alcohol and drugs, had a small child, and was at times homeless. She refused help of any kind.

As Mr B told me about his sister, an image came to mind of a girl climbing over the railing of the Golden Gate Bridge in the process of killing herself. My mind drifted to the thought that the news media do not report the suicides committed by jumping from the bridge because, I imagined, to report these suicides would be to collide with the person's wish for a moment of recognition, evidence in print that this person had once existed, and due to terrible pain, had ended his or her life. I suspected that there was a form of recognition that Mr B needed with such intensity that he would give up his life (or mine) to attain it. I felt that to begin analysis with him was to take on a potentially suicidal (or homicidal) patient.

I said to Mr B, "I think that you want me to know that something went terribly wrong in your family and that the pain resulting from it has been unbearable."

Mr B said in a flat tone of voice, "I suppose that's true for my sister."

I later in the session said to the patient, "I suspect that coming to see me about beginning analysis is one of the most difficult things you've done in your life."

He paused and said, "Oh," in a way that made me feel, for the first time in the session, that he and I had made an emotional connection, albeit a very fragile one. It was only then that I decided to work with Mr B in analysis.

In this more deeply unconscious story/dream image of 'playing doctor' with his mother, he is curious and frightened as he looks into her psychotic internal world, but does not dare to enter, for if he does enter, he, like his sister, would never escape, and would become as lost as his sister was. I thought that despite 'knowing this', Mr B felt profound sadness and guilt regarding his failure to be a doctor to his mother (and his very disturbed sister), and it was these failures that were his terrible secret.

I recognized at this point that my own feelings of being a failure (what I would now call 'my feelings of being destroyed') as a doctor resonated with those of the patient. I was not (in feeling) a real doctor, I was a fraud – I was only 'playing doctor', as he had done with his sister and (in unconscious fantasy) with his mother. I felt considerable relief as I came to view my painful feelings of failure and fraudulence as a medium in which Mr B was trying to communicate something crucially important to him.

While with Mr B during this period, a memory came to me. A very close elderly friend had been in hospice care for a few months during which time she would awaken for only very short periods of time before falling back into a sleep that did not seem like ordinary sleep. During one of my visits, I asked her if she dreamt while she slept. After a long pause, she responded, "I don't dream, thank God."

Without planning to do so, I said to Mr B, "I miss your dreams."

He replied, through choked tears, "I do too."

I will try not to destroy the clinical experience I have just described by offering explanations. The experience about which I wrote (more accurately, the experience I wrote) came to mind almost immediately in connection with Winnicott's ideas, my ideas, our ideas. What I wrote is not an illustration, much less evidence of, or proof of anything, but there are connections in my mind, and perhaps now in yours. Instead of an explanation, I will offer some impressions.

Psychosis appeared almost immediately in the first meeting in the form of the patient's sister. And with it, fear: his fear of his mother's deadly psychosis, my fear of his deadly psychosis, his fear of my deadly psychosis. And on its heels came failure: his failure to cure his mother, my failure to cure him, our failure to wake up. There was also a good deal of aloneness: his and mine; and there developed, along the way, loneliness: his, mine, ours. Tenderness appeared: his noticing my distress, my noticing his noticing, and his noticing my noticing his noticing. And there were words: "I miss your dreams," "I miss you, I love you," "I do too."

The analyst who is unable to survive being destroyed

I have had quite a number of analysts consult with me over the years about analyses in which they are having great difficulty surviving destruction. I must speak in general terms because I am unable to disguise these cases sufficiently to ensure the confidentiality of the patient and analyst. The analyst is almost always in a state of great distress about an analysis, which he says (and I usually come to concur) is not representative of his work as an analyst. I feel compassion for both patient and analyst who find themselves in

this situation and respect the analyst for bringing into consultation a situation that he almost always experiences as shameful.
Winnicott does not mince words regarding the difficulty of the analyst's task of helping the patient create "externality itself" (p. 91):

Without the experience of *maximum destructiveness* (*object not protected*) the subject never places the analyst outside and therefore can never experience more than a kind of self-analysis, using the analyst as a projection of part of the self.

(p. 91, emphasis added)

I enter into consultation to an analyst with humility. After all, the analyst knows the analysand far better than I do. If, after a series of consultation meetings, I feel that I may be able to be of some value to the analyst and his patient, we begin weekly consultation in which we focus on the analyst's *experience* (as opposed to his understanding) of what is happening between the patient and himself.

In these consultations concerning the analyst's experience of being unable to survive in the analytic relationship, I find that the analyst regularly feels under attack by the patient.

These attacks may be very difficult for the analyst to stand, especially when they are expressed in terms of delusion, or through manipulation which make the analyst actually do things that are technically bad.

(Winnicott, 1971, p. 92)

Highly significant is the footnote that Winnicott appends to the clause, "These attacks may be difficult to stand":

When the analyst knows that the patient carries a revolver, then, it seems to me, this work cannot be done.

(1971, p. 92, n. 1)

With Winnicott's words in mind, I am attentive to the possible psychic reality on the part of the analyst, that the patient carries a figurative revolver – that is, that the patient has the capacity to kill him not only psychically, but physically. For the purpose of further helping the analyst gain greater access to his own unconscious psychic reality, I strongly recommend that he resume his personal analysis while working out his difficulty in working with his patient.

In consulting to an analyst who is feeling destroyed, I pay close attention not only to the emotional state of the analyst and his patient, but also to their physical states. This, to my mind, is a critical measure of the degree of destruction occurring in the analysis. It has been my experience that the analyst's inability to survive destruction very often involves the analyst's development of physical illness, such as severe headaches, ectopic dermatitis, and chronic insomnia. The patient, too, frequently develops forms of physical illness and self-destructive behaviors.

If, upon careful consideration, over an extended period of time, I find that the emotional and physical damage to the patient and to the analyst are severe and chronic, and continue unabated despite the analyst's in-depth work in consultation (and in some cases, personal analysis), I recommend that the analyst end his work with this patient. Such a recommendation is an extreme measure and is a rare event in my experience as a consultant.

Considerable work is involved in the analyst's formulating for himself the way he will bring the analysis to a close. I have found in the course of taking part in these consultations that it is of the utmost importance that the analyst convey to the patient (and genuinely understand, himself) that his decision to end the analysis does not mean that the patient is 'unanalyzable' (unable to make use of psychoanalytic treatment); it means that *he*, the analyst, is unable to do productive analytic work with *this* patient. It is often possible for the patient to accept the analyst's help in finding another analyst with whom he or she may be able to do productive analytic work.

The idea of the patient's finding another analyst is often narcissistically wounding to patient and analyst. They both feel that they are failures – the patient imagines himself to be 'an untouchable' in the eyes of prospective analysts; and the analyst imagines that the patient and the new analyst will view him as incompetent, or worse, and that word about his inadequacy as an analyst will spread to the entire analytic community. While this process of ending the analysis is extremely painful for the analytic pair, I have found that both patient and analyst (unconsciously, and also usually consciously) experience a sense of relief in ending an analysis that has not been good for either of them for a long time.

I am saddened by the experience of consulting to an analyst who has come to the conclusion that he must end an analysis in which he has been unable to survive and has retaliated in response to what he experienced as the patient's effort to destroy him. But I find it equally disturbing to work with an analyst who is unable to acknowledge his inability to survive destruction as well as his overt and covert acts of retaliation.

I have come to believe that one of an analyst's most important responsibilities to his patient is that of being able to recognize when (to face the fact that) an analysis is unremittingly destructive to his patient, and to end the analysis if he is unable to repair the situation.

Concluding comments

In my reading of Winnicott's 'The Use of an Object and Relating through Identifications', I suggest that in the process in which the object is 'becoming destroyed because real, becoming real because destroyed', the object (initially, the mother) is becoming destroyed because she is able to feel she is becoming destroyed emotionally (as a real person capable of the feeling of becoming destroyed as a mother). At the same time, the object (the mother) is 'becoming real' for the infant in the process of his perceiving *the reality of his mother's feeling destroyed* as well as perceiving *the reality of her psychic survival of that destruction*. She is able to survive 'because [she

is] real' – because she is able to do unconscious psychological work with her feelings of being destroyed and surviving destruction.

I also suggest that the process of attaining object-usage involves not only the creation of "the quality of externality" (p. 93), but also the creation of the unconscious mind itself (the differentiation of the conscious and unconscious aspects of mind), and the creation of the self.

I differ from Winnicott when he says that the mother continues being destroyed "all the time ... in (unconscious) *fantasy*" (p. 90). I would say that the destruction of the mother and her survival persist not as unconscious *fantasy*, (p. 94), not as unconscious *fantasy*, but as unconscious *memory* (*elaborated in unconscious fantasy*) of the mother's actually becoming destroyed and actually surviving destruction.

Translations of summary

La destruction revisitée : à propos de l'article de Winnicott, « L'utilisation de l'objet et le mode de relation à l'objet au travers des identifications ». L'article de Winnicott, « L'utilisation de l'objet et le mode de relation à l'objet au travers des identifications » est une contribution majeure que je trouve très difficile de commenter dans la mesure où tout ce qui en constitue le noyau est simplement suggéré. Il est nécessaire que le lecteur non seulement lise l'article, mais également l'écrive. Ce que m'inspire ma lecture/écriture de l'article, c'est que la mère devient réelle pour le nourrisson au cours d'un processus où il la détruit réellement en tant qu'objet externe (détruisant le sentiment qu'elle a d'être une mère suffisamment bonne), tout en percevant cette destruction. Elle devient également un objet externe réel pour le nourrisson au cours d'un processus où il fait l'expérience du travail psychologique qu'implique le fait de survivre à la destruction, une forme de travail qui n'existe pas dans le monde des objets fantasmés. Il se peut que l'analyste ou la ne soient pas capables de survivre à la destruction. Il est essentiel que l'analyste puisse reconnaître son incapacité à survivre et, le cas échéant, qu'il décide de mettre fin à l'analyse en raison des effets dévastateurs qu'une expérience prolongée de ce type exerce sur le patient et l'analyste. L'auteur présente quelques exemples cliniques extraits de sa pratique d'analyste où l'analyste survit à la destruction ou, au contraire, est incapable de survivre à la destruction.

Noch einmal zur Zerstörung: über Winnicotts „Objektverwendung und Identifizierung“. „Objektverwendung und Identifizierung“ ist ein Beitrag, der sich als Meilenstein erwiesen hat und über den zu schreiben mir sehr schwer fällt, weil so vieles, das seinen Kern ausmacht, lediglich angedeutet wird. Der Leser muss den Beitrag nicht nur lesen, sondern er muss ihn auch selbst schreiben. In meiner Lesart/meinem Schreiben des Beitrags wird die Mutter für den Säugling in dem Prozess real, in dem er sie als äußeres Objekt tatsächlich zerstört (d.h. er zerstört ihr Gewahrsein ihrer selbst als adäquate Mutter) und diese Zerstörung wahrnimmt. Zu einem realen Objekt wird sie für den Säugling auch in dem Prozess, in dem er die psychische Arbeit wahrnimmt, die am Überleben der Zerstörung beteiligt ist. Diese Arbeit erfolgt nicht in der Welt phantasierter Objekte. Unter Umständen ist der Analytiker oder die Mutter nicht in der Lage, die Zerstörung zu überleben. Es ist von wesentlicher Bedeutung, dass der Analytiker sich seine Unfähigkeit zu überleben selbst eingestehen kann und dass er die Analyse, falls erforderlich, beendet, denn auf längere Sicht ist eine solche Erfahrung sowohl für den Patienten als auch für den Analytiker in hohem Maß schädigend. Der Autor stellt klinische Diskussionen von Analysen vor, in denen der Analytiker die Zerstörung überlebt bzw. nicht in der Lage ist, sie zu überleben.

Riconcettualizzazione della distruttività: a proposito di "L'uso di un oggetto e l'entrare in rapporto attraverso identificazioni" di Winnicott. "L'uso di un oggetto e l'entrare in rapporto attraverso identificazioni" è un contributo fondamentale, del quale faccio fatica a scrivere, poiché gran parte del suo nucleo essenziale è veicolato solamente tramite suggestioni. È necessario che il lettore non solo legga il testo, ma lo scriva anche. Nella mia lettura/scrittura di questo articolo la madre diventa reale per l'infante attraverso il processo di distruzione di questa come oggetto esterno (distruggendo il suo senso di essere una madre adeguata) e attraverso la percezione di tale distruzione. Inoltre, la madre diventa un oggetto esterno reale per l'infante attraverso il suo esperire il lavoro psicologico che la madre effettua nel sopravvivere a questa distruzione, un tipo di lavoro che non avviene nel mondo degli oggetti fantastici. L'analista e la madre, a volte, non sono in grado di sopravvivere a tale distruzione. È necessario che l'analista sia in grado di riconoscere con se stesso la sua incapacità di sopravvivere e, qualora sia

necessario, concluda l'analisi, a causa dell'effetto oltremodo nocivo che una prolungata esperienza di questo tipo può avere sia sul paziente che sull'analista. L'autore presenta resoconti clinici di casi in cui l'analista sopravvive alla distruzione e altri nei quali non sopravvive.

Volver a concebir la destrucción: Sobre "El uso de un objeto y la relación por medio de identificaciones" de Winnicott. "El uso de un objeto y la relación por medio de identificaciones" es un hito histórico sobre el cual encuentro muy difícil hablar, ya que tanto de lo medular solo está sugerido. El lector no solo tiene que leerlo, sino también escribirlo. En mi lectura/escritura del artículo, la madre se vuelve real para el bebé en el proceso en el cual él la destruye de manera efectiva como objeto externo (destruyendo el sentimiento que tiene de sí misma como madre adecuada), y en su percepción de aquella destrucción. La madre también se vuelve un objeto externo real para el bebé en el proceso de su experiencia del trabajo psicológico involucrado en sobrevivir a la destrucción, una forma de trabajo que no ocurre en el mundo de los objetos fantaseados. Es posible que el analista o la madre no sobrevivan. Es esencial que el analista pueda reconocer ante sí mismo su incapacidad de sobrevivir y, si es necesario, finalizar el análisis debido a los grandes efectos perjudiciales que genera una experiencia prolongada de este tipo, tanto en el paciente como en el analista. El autor presenta discusiones clínicas de análisis en los que el analista sobrevive a la destrucción y otros en los que no puede hacerlo.

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