The main objective of this paper is to present a unified view of Winnicott’s contribution to psychoanalysis. Part I (Sections 1-4) starts off by recalling that, according to some important commentators, Winnicott introduced a change in paradigms in psychoanalysis. In order to show that this change can be viewed as an overall “switch in paradigms”, in the sense given by T. S. Kuhn, this paper presents an account of the Kuhn’s view of science and offers a reconstruction of Freud’s Oedipal, Triangular or “Toddler-in-the-Mother’s-Bed” Paradigm. Part II (Sections 5-13) shows that as early as the 1920’s Winnicott encountered insurmountable anomalies in the Oedipal paradigm and, for that reason, started what can be called revolutionary research for a new framework of psychoanalysis. This research led Winnicott, especially during the last period of his life, to produce an alternative dual or “Baby-on-the-Mother’s-Lap” Paradigm. This new paradigm is described in some detail, especially the paradigmatic dual mother-baby relation and Winnicott’s dominant theory of maturation. Final remarks are made regarding Winnicott’s heritage and the future of psychoanalysis.

Key words: Paradigm, Freud, Oedipal Paradigm, Winnicott, “Baby-on-the-Mother’s-Lap” Paradigm

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1. Introduction

The main purpose of this paper is to present a unified view on Winnicott’s contribution to psychoanalysis. For some time now, Winnicott has been recognised as one of the great figures in the history of this discipline. There are even those who go as far as to declare him “the greatest mind of psychoanalysis after Freud” (André Green). In spite of his growing prestige among specialists, Winnicott is very little known outside psychoanalytic circles. Even within Psychoanalytic Societies his work is far from receiving due attention. In particular, systematic philological, historical and conceptual studies of his writings are very rare, and the research that is done today on Winnicott in any country can hardly be compared with current Freudian scholarship. This situation has changed, recently, particularly in Latin America, where Winnicott has become the most quoted psychoanalytic author after Freud. Unfortunately, being quoted does not necessarily mean being truly studied and understood.

My emphasis in this paper will not be on one or another of Winnicott’s many contributions to psychoanalysis, but on the very nature of his contribution. I shall try to achieve this by conceptual analysis largely based on a study of the historical development of Winnicott’s ideas. Winnicott himself recommended a historical approach to the understanding of his views. In Human Nature, after explaining some of his ideas on imaginative elaboration of body functioning, he added: “The reader must form a personal opinion of these matters, after learning what is thought as far as possible in the historical manner, which is the only way that the theory of any one moment [in personal development] becomes intelligible and interesting” (1988, p. 42, my italics).

Here “interesting” means, I believe, both personally appealing and theoretically important. The same applies, of course, to any attempt

1. Cf. Abadi, S. and Outeiral, J. (eds.). Introduction. 1997.
to understand other parts of Winnicott’s theory and indeed psychoanalysis in
general:

Readers of analytic literature may easily become impatient if they take some
statement of analytic theory and treat it as if it were a final pronouncement, never
to be modified. Psycho-analytic theory is all the time developing, and it must develop
by natural process rather like the emotional condition of the human being that is
under study. (1988, p. 46)

It would be very tempting to try to develop this Winnicottian “natural process”
view of the origin of scientific attitude and of the growth of scientific knowledge. 2
I shall not follow this track of thought because it would lead me away from the main
purpose of the present paper. Instead, I shall limit myself to applying an already
existing model of natural growth of science, that of Th. S. Kuhn. 3

There is one straightforward reason to appeal to Kuhn in the present context:
both, Winnicott and Kuhn, were strongly influenced by Darwin. Winnicott is indebted
to Darwin for his view that “living things could be studied scientifically, with the
corollary that gaps in knowledge need not scare” us (1996, p. 7). Kuhn in turn learned
from the British biologist how to see the growth of science as a struggle among rival
paradigms for survival in scientific communities, the aim of that struggle not being
something like the final truth, but the temporarily greater problem-solving efficiency
of scientific knowledge. 4 This shaky goal is achieved by dramatic changes in
established scientific worldviews or, more technically, by Gestalt switches in scientific
paradigms commonly called “scientific revolutions”.

Following Kuhn, I shall therefore be speaking about the paradigm switch
introduced by Winnicott into the psychoanalytic discipline. This will oblige me to
explain the previous Freudian paradigm which made possible an initial period of
“normal research” in psychoanalysis, as well as the emergence of anomalies which
subsequently brought out a crisis and triggered Winnicott’s revolutionary research.
This research ended – which is my main thesis – by Winnicott introducing a new
paradigm for psychoanalysis, i.e. new guiding problems and a new conceptual
framework which, he hoped, would enable him to solve the anomalies he was worried

2. This possibility is hinted at in Winnicott, 1986, Chap. 1.
3. As is well known, Kuhn himself leaned heavily on psychology and sociology (especially on L.
Fleck’s theory of scientific communities) as well as on some philosophical sources (Wittgenstein’s
philosophy of language) in framing his view of science and scientific research. It could be a
rewarding exercise to reexamine and even to complete Kuhn’s theory of science by taking into
account Winnicott’s views on the genesis and the function of intellectual and other mental
processes in human life.
4. In 1990, Kuhn characterized his position as “a sort of post-Darwinian Kantianism” (1990,
p. 12).
about, and would open broader perspectives on psychoanalytic research as a whole. I shall ultimately be confronted with the question whether we can speak of something like a Winnicottian revolution in psychoanalysis. My conclusion will be that Winnicott was indeed a revolutionary thinker, that he paved a new way for scientific research and practice in psychoanalysis, and that he even did a great deal of such research, without ever intending that his alternative framework or his results were “final pronouncements”.

I am not the first one to speak of Winnicott’s paradigm. In 1989, Judith Hughes put herself to the task of sorting out “the paradigms which constitute psychoanalytic theory” by describing the “Freudian paradigms” and scrutinising their “transformation” in the work of Klein, Fairbairn and Winnicott.

A year before, in 1988, Adam Phillips approached Winnicott in the same perspective. He admitted, without the ambiguities which spoil so many other accounts, that Winnicott introduced “important innovations” in psychoanalytic practice and technique which represent, despite Winnicott’s “disingenuous” disguises, “radical departures from Freud”. The main departure consists in that Winnicott “would derive everything in his work, including a theory of origins of scientific objectivity and a revision of psychoanalysis, from this paradigm of the developing mother-infant relationship” (1988, p. 5, my italics). For Winnicott, says Phillips, the mother-infant relationship was becoming “the primary model for the psychoanalytic situation” and the main “source of analogy in his work” (1988, p. 87, my italics). Let me point to an example among many given by Phillips: “But whereas for Freud psychoanalysis was essentially a ‘talking cure’, for Winnicott the mother-infant relationship, in which communication was relatively non-verbal, had become the paradigm for the analytic process, and this changed the role of interpretation in psychoanalytic treatment” (1988, p. 138).

Guided by the mother-baby paradigm, Winnicott was lead to new questions and thus to new results. Examples of such questions “rarely addressed in psychoanalytic theory” are the following: What do we depend on to make us feel alive or real? And: Where does our sense come from, when we have it, that our lives are worth living? Winnicott approached these issues, continues Phillips, by linking the “observation of mothers and infants” with “insights derived from psychoanalysis” (1988, p. 5-6). Not just that. Winnicott also enriched psychoanalysis with essential new insights which turned out to be incompatible with those of Freud, since they were “rarely linked by him [Winnicott] with the place of the erotic in adult life”. For Winnicott, the “crux of psychoanalysis” was the “infant’s early dependent vulnerability” in a two-person relationship.  

5. Winnicott criticized in very strong terms a similar claim of Riviere as regards the Kleinian psychoanalysis (Winnicott, 1987, p. 35 and 97).
relationship with the mother, not “the Oedipus complex – a three-person relationship”. Whereas Freud, starting from the Oedipus situation, was interested “in the adult’s struggle with incompatible and unacceptable desires”, which put in danger their “possibilities for satisfaction”, Winnicott, starting with the relationship of (almost) total dependence, treated these possibilities as “part of a larger issue of the individual’s possibilities for personal authenticity, what he [Winnicott] will call ‘feeling real’” (1988, p. 7). Working in that manner, and “neglecting Freud’s metapsychology” (1993, p. 43), Winnicott has evolved, during the 1940s, “a powerful rival developmental theory to those of both Freud and Klein” (1988, p. 97).

I essentially agree with the approach of Hughes and even more so with that of Phillips, whose book is indeed the most insightful general review of Winnicott’s ideas in English that I know of. What I have to add is, firstly, a more systematic and precise account of essential constitutive elements of Winnicott’s paradigm and, secondly, an analysis of the process Winnicott went through in searching for these elements. In substance, I hope to produce a more accurate picture of Winnicott’s contribution, its relation to positions of his great predecessors and a blueprint for further research on this topic.

To that end, I shall use, as previously stated, the word “paradigm” not just in the common sense meaning of a model to be followed, as Hughes and Phillips appear to do, but in the more technical sense defined by Th. S. Kuhn in his book *The Structure of Scientific Revolutions* (2d. ed. 1970). I shall also borrow Kuhn’s general view on scientific research and on growth of science.

6. For other accounts of the development of Winnicott’s ideas cf. Greenberg and Mitchel, 1983, and Jacobs, 1995.

7. The later book by Dodi Goldman compares badly with the clarity of Phillips.

8. In 1989, Holton and his collaborators introduced the concept of “solace paradigm” in an attempt to solve the problem of the human need for “consolation”, particularly urgent in our epoch which is “overwhelmingly nihilistic”. In this context, Winnicott’s concept of transitional object is treated as a “very important subclass of solacing objects” (Holton et al., eds., p. 62), the elements of “transitional relatedness” being “no less ubiquitous in life than are elements of the Oedipus complex” (ibid., p. 88). Though I agree that Winnicott’s transitional objects are an important component of his new paradigm and that this paradigm is no longer based on the Oedipus complex, I cannot follow Holton and his group in the attempt to embed this concept in the solace paradigm of their own. This paradigm is presented as an “enlargement” of the scientific world view by a “multiperspective” strategy, which combines scientific, philosophical and even theological backgrounds. There is little doubt that philosophy and theology have been and continue to be influential in framing of the scientific world views, but I cannot see any value, just as Freud and Winnicott did not, in mixing up science with these two disciplines. Holton’s concept of paradigm does not square with what we know about paradigms in scientific disciplines, but rather portrays what happens in philosophical and theological disputes about fundamentals.
2. The Kuhnian view of empirical science

According to Kuhn, normal, everyday science is a problem-solving activity guided by a paradigm. Scientific problems resemble puzzles in so far as they are thought of as having an assured solution within the adopted theoretical framework (1970, p. 37). Socially important problems become scientific only after they have been reduced to puzzles, their solution depending exclusively on the ingenuity of practitioners trained in a paradigm. Scientists do not intend and even refuse to cope with each and every problem. “Scientism”, the idea that science can solve all questions important for the human kind is a peculiar philosophical stance on science and not at all part of the what scientists actually are aiming at.

Paradigms presupposed in scientific puzzle solving are of two kinds. Firstly, there are accepted examples of actual scientific practice which provide “models from which spring particular coherent traditions of scientific research” (1970, p. 10, my italics). In the Postscript to the second edition of his book, Kuhn calls these accepted models “exemplars”, by which he means “the concrete problem-solutions that students encounter from the start in their scientific education” (p. 187). Secondly, paradigms are “conceptual, theoretical, instrumental and methodological commitments that guide the scientific research” (p. 42). In the Postscript, Kuhn offered a more detailed analysis of this second concept of paradigm and specified that its main components are guiding empirical generalizations, ontological models of the subject matter, authorised heuristic procedures (preferred or permissible analogies and metaphors) and, finally, values or norms which define the science practised by specific groups and provide their members with a sense of community (1970, p. 182-5). Exemplars and constellations of commitments, taken together, constitute the “disciplinary matrix” of a scientific discipline.

Exemplars are the more important of the two. To start with, a science is not learned by becoming acquainted with verbal statements of laws or rules, but by being taught how to see new problems in the light of exemplars: “That [scientific] sort of learning is not acquired by exclusively verbal means. Rather it comes as one is given words together with concrete examples of how they function in use, nature and words, are learned together” (1970, p. 191). By saying that we learn “nature and words” together, Kuhn implies that scientific groups with different paradigms live, in some sense, in different worlds and that they use the language in essentially different ways. This in turn accounts for the incommensurability of theoretic statements and the absence of supraparadigmatic criteria of truth and interpretation.

9. Kuhn’s term for this component is “symbolic generalizations”, which covers empirical laws and definitions of empirical phenomena.
Indeed, in order to be able to interpret a statement we must first be able to see a case of it, and that requires that we have a paradigm for seeing that which is the case. The verbal interpretation, being “a deliberative process by which we choose among alternatives as we do not in perception itself” (p. 194), comes always second. The knowledge learned from paradigmatic examples is not “explicit”, but rather “tacit”.

The change of paradigms for seeing the world is initially also a tacit, unintentional and even unconscious process. It resembles Gestalt switches, which happen “suddenly” and “involuntarily”, and “over which we have no control” (p. 111, 194). The central aspect of Gestalt switches which are at the “heart of the revolutionary process” (p. 202) is “that some of the similarity relations change” (p. 200), which again implies the changes in the use of language. Kuhn writes:

Objects that were grouped in the same set before are grouped in different ones afterward and vice versa. [...] Since most objects within even the altered sets continue to be grouped together, the names of the sets are usually preserved. Nevertheless, even the transfer of a subset is ordinarily part of a critical change in the network relations among them. [...] Not surprisingly, therefore, when such redistributions occur, two men whose discourse had previously proceeded with apparently full understanding may suddenly find themselves responding to the same stimulus with incompatible descriptions and generalizations. (1970, p. 200-1)

Differences in responses to the same stimuli do not only mean that our worldview has modified, they also reveal that the world itself has suffered a change. These disagreements cannot be eliminated “simply by stipulating definitions for troublesome terms”, nor can we resort to a “neutral language”, for no paradigm-independent language exists. A paradigm change is, therefore, necessarily followed by a “communication breakdown”. In such cases, translation from one scientific idiom to the other is a resource of dialogue, but not of consensus, moreover “it is threatening and is entirely foreign to normal science” (p. 203). The reasons are clear: having different paradigms, scientists usually disagree on at least three points: on the list of problems that any candidate for entering a paradigm must be able to resolve, on the list of criteria for acceptable solutions, and on what there is, since, when paradigm changes some things simply cease to exist and others start to exist. For instance, what was previously seen as a duck, was called, and has been a duck is now seen as, is called, and has become a rabbit (1970, p. 111). Under such circumstances, the procedure of translating does not lead us very far, because, according to the context, being a duck might indeed have a very different meaning from being a rabbit.  

10. Cf., for instance, the very special personal significance of the duck figure in the squiggle game of Winnicott with Iiro, as specified in Winnicott, 1971b, Chapter 1, which would go completely lost if this figure were seen as a rabbit.
The other important point is that science does not make progress in solving problems by applying theories and rules, but by seeing new problem situations in the light of exemplars: “Scientists solve puzzles”, writes Kuhn, “by modelling them on previous puzzle situations, often with minimal recourses to symbolic generalizations” (p. 190). That brings us back to the thesis that scientific knowledge is embedded in shared exemplars rather than in rules, laws, or criteria of identification.

Guided by a way of seeing the world, scientists attempt “to force nature into the pre-formed and relatively inflexible box which the paradigm supplies” (p. 24). Kuhn adds:

No part of the aim of normal science is to call forth new sorts of phenomena; indeed those that will not fit the box are often not seen at all. Nor do scientists normally aim to invent new theories, and they are often intolerant of those invented by others. Instead, normal scientific research is directed to the articulation of those phenomena and theories that the paradigm already supplies. (1970, p. 24)

Summing up, in normal science, scientists restrict their efforts to solving three kinds of problems: those of determining significant facts, of matching facts with theory and of articulating existing theories (p. 34).

Why then do paradigmatic changes occur at all? When there exists a feeling of crisis, that is, “a pronounced failure” of the old theory “in the problem-solving activity” (p. 74-5). Now, every paradigm is constantly confronted with anomalies, recalcitrant problems which should have been solved but were not. Usually, scientists leave such problems provisionally to the side and do not reject the paradigm because of this kind of failure. However, it also happens that some persistent anomalies may oblige a scientist to interrupt his normal research and pause over them. His reasons may vary. He may become concerned about absence of guiding generalizations, or about impossibility to solve a particularly important social problem or a problem felt to be significant for technical and technological reasons (p. 82). When anything like this happens, “an anomaly comes to seem like more than just another puzzle of normal science” and the transition to crisis and to extraordinary science or to revolutionary research has begun. Kuhn describes the emergence of a crisis in the following way:

More and more of the field’s most eminent men devote more and more attention to it. If it still continues to resist, as it usually does not, many of them may come to view its resolution as the subject matter of their discipline. For them the field does no longer look quite the same as it had earlier. [...] An [...] important source of change is the divergent nature of the numerous partial solutions that concerted attention to the problem has made available. [...] Through this proliferation of divergent articulations (more and more frequently they will come to be described as ad hoc adjustments), the rules of normal science become increasingly blurred. Though there is still a paradigm, few practitioners prove to be entirely agreed about what it is. Even formerly standard solutions of solved questions are called in question. (1970, p. 82-3)
Finally, how are we to describe the progress achieved through scientific revolutions? Not as an approximation to the truth. Whereas normal science is cumulative, revolutions introduce new problem fields and incommensurable worldviews. We have therefore to “relinquish the notion, explicit or implicit, that changes in paradigm carry scientists and those who learn from them closer and closer to the truth” (p. 170). Scientific growth is not a process of evolution in the direction of an ultimate goal at all. In what terms then can we then speak about the progress of science? In terms of an analogy inspired in Darwin: just as the evolution of species is a result of natural selection of organisms “more adapted” to the environment and has no final goal set by God or by Nature, the evolution of scientific theories is a product of “the selection by conflict within scientific communities of the fittest way to practise future science” (p. 172) and has no final goal either.

Not all sciences are mature enough to be able “to work from a single paradigm or from a closely related set” (p. 162). This kind of maturity is rather rare. Even in highly developed sciences we encounter competing paradigms at any time (p. 209). Moreover, one has to distinguish between scientific communities which have achieved the mature paradigm stage from schools which are still in the “pre-paradigm” period. During such a period individuals may very well be said to practise science, but “the results of their enterprise do not add up to science as we know it” (p. 163). Fact gathering, for instance, may occur, “but it is far more nearly at random than the one subsequent scientific development makes familiar” (p. 15): some data may be obtained from observation, others from experiments and still others “from established crafts like medicine”, which is “one readily accessible source of facts that could not have been casually discovered” (p. 15). When the “fundamental tenets of a field are once more at issue” and “doubts are continually expressed about the very possibility of continued progress if one or another of the opposed paradigms are adopted”, that is, during periods of revolution, scientific fact gathering usually regresses to a situation very similar to the pre-paradigmatic one. Cumulative scientific progress seems both obvious and assured only during periods of normal science (p. 163).

3. Some objections against using Kuhn in discussing the history and structure of psychoanalysis

Before applying this view of science and of scientific progress to Winnicott’s contribution to psychoanalysis, I shall briefly address two possible objections to a Kuhnian reading of psychoanalysis in general. It might be said, in the first place, that Kuhn’s view only applies, if at all, to natural sciences and therefore not to psychoanalysis, which is a science of man. This way of reading Kuhn is not without difficulties. It is true that for Kuhn it remains an open question “what parts of social
... members of all scientific communities, including the schools of the “pre-paradigm” period, share the sorts of elements which I have collectively labelled “a paradigm”. What changes with the transition to maturity is not the presence of a paradigm but rather its nature. Only after that change is normal puzzle solving research possible. (1970, p. 179)

Nor are we prohibited to speak of progress in disciplines different form natural sciences, or even in areas very remote from empirical research, such as theology and philosophy: “The theologian who articulates dogma or the philosopher who refines Kantian imperatives contributes to progress, if only that of the group that shares his premises” (p. 162). The real issue for Kuhn in discussing psychoanalysis and social sciences in general is the problem of transition from pre-scientific or pre-paradigmatic kinds of question answering to the specifically scientific or paradigmatic way of problem solving. This process can be studied on its own right, since it is constantly going on in several fields of Western culture, current research “in parts of philosophy, psychology, linguistics, and even art history” suggesting, according to Kuhn, that these disciplines are looking for new paradigms (p. 121 and 162).

In the Postscript, Kuhn stresses once again that his main theses about the structure of science and of scientific revolutions are applicable to many other fields as well: “To the extent that the book portrays scientific development as a succession of tradition-bound periods punctuated by non-cumulative breaks, its theses are undoubtedly of wide applicability” (p. 208). And he explains why it is so:

But they should be [applicable], for they are borrowed from other fields. Historians of literature, of music, of the arts, of political development, and of many other human activities have long described their subjects in the same way. Periodisation in terms of revolutionary breaks in style, taste, and institutional structure have been among their standard tools. If I have been original with respect to concepts like these, it has mainly been by applying them to the sciences, fields which had been widely thought to develop in a different way. (Ibid., my italics)

As Kuhn says earlier in the text (p. 92), it was indeed politics which provided him with the initial idea of revolution. What Kuhn did is nothing other then isolate features of problem-solving activity “none necessarily unique to science” (p. 209). This is why he cannot but agree with those who feel the need “for comparative study of the corresponding communities in other fields”. The questions to be asked are:

How does one select and how is one elected to membership in a particular community, scientific or not? What is the process and what are the stages of socialization to the group? What does the group collectively see as its goals; what
deviations, individual or collective, will it tolerate; and how does it control the impermissible aberration? A fuller understanding of science will depend on answers to other sorts of questions as well, but there is no area in which more work is so badly needed. (p. 209-10)

Against my application of Kuhn’s theory of scientific problem solving to psychoanalysis it might be objected, in the second place, that Kuhn did not consider psychoanalysis as being a scientific activity at all, since, in an article written in 1970, he agreed with Karl Popper in saying that psychoanalysis “cannot now properly be labelled ‘science’” (Kuhn, 1970b, p. 7, my italics).

A careful reading of Kuhn’s article allows for several caveats against this objection. To start with, the very phrasing of Kuhn’s agreement with Popper indicates that it is restricted to the present, the implication being that though psychoanalysis is not a science now there is no reason for thinking that it could not become a science in the future. There is thus nothing intrinsically non-scientific in the project of psychoanalytic research.

This reading is confirmed by Kuhn’s comparison of “contemporary [sic] psychoanalysis” with “older medicine” and with crafts and practical arts in general, such as astrology as it was practised in the more remote past by famous astronomers, including Ptolemy, Kepler and Tycho Brahe, and even with engineering and meteorology, as they were “practised a little more than a century ago”. Kuhn writes: “In all these fields shared theory was adequate only to establish the plausibility of the discipline and to provide a rationale for the various craft-rules which governed practice. These rules had provided their use in the past, but no practitioner supposed they were sufficient to prevent recurrent failure”. (Ibid., p. 8)

All mentioned crafts were constantly searching for a more stable and effective paradigm. Indeed, writes Kuhn:

... a more articulated theory and more powerful rules were desired, but it would have been absurd to abandon a plausible and badly needed discipline with a tradition of limited success because these desiderata were not yet at hand. In their absence, however, neither the astrologer nor the doctor could do research. Though they had rules to apply, they have no puzzles to solve and therefore no science to practise. (Ibid., p. 9)

The main consequence concerning psychoanalysis which Kuhn extracts from this historical sketch is that, in our days, psychoanalysis is still unable to formulate puzzles of the kind which are currently being solved by normal science during normal research, its problem-situation being similar to that of medicine, engineering and meteorology in the recent past, and to that of astrology, in earlier periods of Western culture. If, for that reason, it can be said that psychoanalysis resembles astrology, this does not imply that it must have the same destiny and that it cannot possibly come to formulate its own full-pledged paradigms for solving puzzles.
Kuhn’s article contains an important remark about the similarity between the behaviour of scientists in pre-paradigmatic and revolutionary periods and that of philosophers in general. Kuhn understands that “the reasons for the choice between metaphysical systems”, as described for instance by Popper, “closely resemble” his own “description of the reasons for choosing between scientific theories”, that is, between paradigms, the main resemblance consisting in the fact that, in neither choice, “can testing play a quite decisive role” (Ibid., p. 7): just as there are no second level criteria for choosing between rival metaphysical systems, there are no metascientific criteria for choosing between sets of scientific test-criteria. The difference between science and philosophy is thus not a matter of decision procedures for networks of commitments. It is due to the capacity of science to produce exemplars, that is, commonly accepted solutions of shared empirical or factual problems. Whereas philosophers remain always so to speak in pre-scientific stage and never come down to “normal science”, scientists go through this same kind of process only in early phases of their disciplines or in periods of crisis. Since psychoanalysis is a new science which is still trying to produce its full paradigmatic frame, it is only natural – and this seems to be the position of Kuhn – that it goes on making choices which are more like those which are currently practised by philosophers than like those which characterise mature sciences and that it still lacks shared exemplars.

Now, Kuhn seems to be right as to the first point, but he is apparently wrong as to the second. It is simply not true that psychoanalysis does not have puzzles to solve. Psychoanalysis actually started (I shall come back to this point later on) by Freud’s formulation of specific puzzles and by solving them in a way which he himself and the psychoanalytic community in general considered to be extraordinary fruitful in current psychoanalytic research and practice. My difference with Kuhn here is not so much conceptual as it is factual, the implication being that Kuhn simply was not familiar enough with what was and what is going on in psychoanalysis.

I hope that the way is now free to start a description of the (natural) process by which Winnicott found his paradigm in Kuhnian terms. I shall proceed historically, by reconstructing, in the first place, the Freudian Oedipal, triangular or “three-body”

11. At this point, Kuhn agrees entirely with Heidegger who denies that there are independent criteria for choosing between competing metaphysical systems (cf. Heidegger, 1961, vol. 2, p. 258, 264 and 290).

12. This is an expression which Winnicott takes from J. Rickman, who introduced the distinction between “two-body” and “three-body relationships” (cf. Winnicott 1965, p. 29). I wonder whether Rickman’s usage was not inspired by the classical mechanics’ distinction between two and three particle problems.
paradigm, which Winnicott started from. I shall next study the crisis Winnicott fell into soon after he began learning psychoanalysis, explaining that is was motivated, firstly, as a result of his observations of very early infantile psychic disturbances which seemed to go against the Freudian theory of sexuality (that is, against the leading generalization of the Freudian paradigm); secondly, by the acknowledgement of the importance of problems of maladjusted children, which were not thought to be sexual and were, therefore, excluded from treatment by psychoanalysts, children being sent to other institutions; and, thirdly, by technical insufficiencies of the original Freudian setting. In short, Winnicott’s crisis was founded on all of the three main grounds stated and explained by Kuhn for the existence of a crisis. I shall continue by showing that, at first, Winnicott tried to find his way out of the crisis by making an alliance with M. Klein and that he came to the conclusion that Klein and the Kleinians (including Fairbairn) offer no solution to his problems. I shall next reconstruct the main steps of Winnicott’s own revolutionary research which led him to propose a new non-Oedipal, dual or “two-body” paradigm, based on the infant-mother dual relationship. According to this perspective, Winnicott’s main contributions to psychoanalytic theory and practice can be seen as an attempt to overcome a particular crisis of the psychoanalytic discipline by developing a new disciplinary matrix for psychoanalysis as a whole, capable of solving all problems which led him and others into a cul-de-sac, but without losing anything important achieved in the work of his predecessors.

4. Freud’s Oedipal paradigm

What are the main exemplars that orthodox psychoanalysts encounter in their formation and apply in their clinical practice? In a paper delivered in 1913 to a broad scientific audience, Freud characterised psychoanalysis by showing how it proceeds in explaining slips and dreams. Dreams, in particular, are to be regarded “as normal prototypes of all psychopathological structures”. Anyone who understands dreams “can also grasp the psychical mechanism of the neuroses and psychoses” (W 8, p. 172).

In this statement, no special significance is attributed to the sexuality. Freud comes to that topic later on in the same paper, by saying that: “... at an early stage of its researches psychoanalysis was driven to the conclusion that nervous illnesses are an expression of disturbance of the sexual function and it was thus led to devote its attention to an investigation of that function – one which had been far too long neglected”. (W 8, p. 180, my italics)

To that effect, it was necessary, in the first place, to enlarge the “unduly restricted concept of sexuality, an enlargement that was justified by reference to the
behaviour of children”. The final formula which psychoanalysis arrived at on the nature of neuroses was: “The primal conflict which leads to neuroses is the one between the sexual instincts and those which maintain the ego” (Ibid., p. 181).

The important question is: What was the clinical material regarding the primal conflict which this formula was related to? In Kuhnian terms, what were the concrete clinical problems which the theory of sexuality was supposed to make intelligible and to solve? The unequivocal answer is: not just slips or dreams, but all problems which arise for the child from what Freud called the Oedipus Complex. This is the meaning of Freud’s later statement, found in the a footnote added in 1920 to the 4th edition of Three Essays on the Theory of Sexuality, that: “… it has justly been said that the Oedipus complex is the nuclear complex of neurosis, and constitutes the essential part of their content. It represents the peak of infantile sexuality, which, through its after-effects, exercises a decisive influence on the sexuality of adults (W 7, p. 149, footnote).

A close study of Freud’s research on sexuality leads to the conclusion, firstly, that Freud’s theory of sexuality started simultaneously with the discovery, in the clinical material and in Freud’s self-analysis, of the existence of the Oedipus situation and of its importance for the theory of infantile sexuality, and, secondly, that it developed mainly by recognizing, to an ever-increasing extent, the importance of the Oedipus complex “as the central phenomenon of the sexual period of early childhood” (W 7, p. 317, my italics). In the same footnote which I have just quoted, Freud says: “With the progress of psychoanalytic studies the importance of the Oedipus complex has become more and more clearly evident”. And adds: “Its recognition has become the shibboleth that distinguishes the adherents of psychoanalysis from its opponents” (W 7, p. 149-50, my italics).

By making out of the Oedipus complex a “shibboleth”, that is, an identification sign, Freud was specifying what Kuhn would call the exemplar which serves to establish the community of psychoanalysts. Freud’s identity criterion for psychoanalysis is a problem-situation which in his opinion has been solved in an exemplary manner by the constellation of psychoanalytic theoretical commitments, that is, by the psychoanalytic theory of sexuality helped by metapsychology. It was not long before Freud started to use the Oedipus complex as a concrete rule for expelling dissident thinkers from the group. The most famous case is, of course, that of Jung. The following well known fact is important in the present context: Freud’s only text in which he makes an attempt at proving the historical and material existence of the primary scene, that is, of the Oedipal situation, is “The Wolf Man”, a text directed explicitly to the refutation of Jung.14

14. Freud’s coolness as to M. Klein can be explained in the same way. Moreover, the essential points of the debate between A. Freud and M. Klein can be summed up as turning around the
We have thus identified the main exemplar and the most important guiding generalization which constitute a central part of the new “constellation of commitments” by which Freud produced his revolution in the scientific research on sexuality and psycho-neurosis and created psychoanalysis: the Oedipal conflict and its solution by means of the theory of sexuality. \(^{15}\) Other elements of the constellation of commitments of Freud’s disciplinary matrix which I have to account for are his ontological model of man, his heuristic rules and his values. Very briefly, Freud’s ontology includes a number of suppositions, more precisely, speculations about psychic forces and energies as well as those of innate constitution of mental apparatus. \(^{16}\) As to Freud’s methodology and heuristics, they are based on the transference relation, specific to psychoanalysis, combined with methods common to all scientific research: fact gathering, and formulation and testing of hypothesis (empirical generalizations). Freud also believed, as did all other members of the Helmholz School in natural sciences, in some methodological tenets which, in essence, go back to Kant, namely that no empirical science can be complete without “auxiliary constructions”, that all explanations have to be dynamic explanations based on quantifiable forces, and that in the case of human individuals the interplay of forces takes place in an apparatus, inherited and further developed. This methodological stance allowed for bold speculations, which, in the case of Freud, were based on a vast range of metaphors, taken mainly from biology and from both psychological and philosophical theories of consciousness.

Finally, there is a set of values contained explicitly or implicitly in the Freudian paradigm. As any other inquiry guided by the scientific method, psychoanalysis is a never-ending search for empirical truth about clinical phenomena. As in all other sciences, the results achieved by psychoanalysis are essentially revisable in the sense that there is no final truth, no absolutely true belief, since in science we can have only question of how far back are we allowed to displace Oedipal elements of the mental apparatus (cf. Phillips, 1988, p. 43).

\(^{15}\) Freud’s theory of sexuality is a result of a continuous, both empirical and metapsychological research, which extended over decades. At the beginning, it payed much attention to the problem of perversions – since Freud was standing still under the influence of Krafft-Ebing –, and to the differences between adult and infantile sexuality, including puberty. Yet, with time, questions related directly and specifically to infantile sexuality became predominant. Some of this work appears in additions to later publications of *Three Essays*. Particularly noteworthy are sections 5 and 6 of the Second Essay, which deal with infantile sexual theories and phases of development of sexual organization (the erogenous zones), as well as the section 3 of the *Third Essay*, which deals with the libido theory. Among significant developments in sexuality theory present in other writings of Freud’s, we can mention the theory of libidinal types and of female sexuality.

\(^{16}\) I have discussed some of these speculations in Loparic 1999a.
provisional beliefs, subject to correction. Although he assumes a positivistic view of science, Freud sees himself as obliged to work with heuristic speculations which are metaphysical in character, proceeding thus as a Kantian. Nevertheless, psychoanalysis, as a science, remains different from philosophy – in so far as it does not offer a general and final world view but rather a way of attempting, step by step, to enlarge objective knowledge – as well as from arts and, particularly, from religion. As to the social utility of psychoanalysis, it is concerned with relieving the unpleasant and pain caused by a excessive repression of desire (i.e. by the censured libido).

It was within this disciplinary matrix that Freud produced a clinical psychology and a metapsychology. The first one is an empirical science which studies four main areas: sexuality, neurosis, psychic structures and social order. The second is a “speculative superstructure” of the first. Whereas the theory of sexuality and other parts of clinical psychology may lay claims to empirical truth, metapsychological parts of psychoanalysis are introduced as mere conventions. For instance, instincts (Triebe) are conventions. Accordingly, metapsychology cannot be used as a foundation of clinical psychology, the only possible foundation of this kind of knowledge being clinical experience itself. Nevertheless, metapsychology was viewed by Freud as having great heuristic value through providing guide-lines for empirical (clinical) research and schemes for organising results already obtained. To that effect, metapsychological hypothesis and speculations must be coherent with clinical experience and with conscious experience in general, as well with each other.

Freud’s metapsychology is a vast and sophisticated construction of speculations about an unconscious scene of mental life, which is thought to be inhabited by entities analogous to conscious mental entities, for instance representations, impulses and desires. Mental processes which govern these entities, though not obeying the same laws as those which govern conscious mental processes, are conceived as resulting from psychic forces which act in agreement with the principle of universal determinism. In that manner, Freud transferred to the unconscious domain the general

17. Winnicott thinks the same way since he praises Freud’s openness to criticism and his readiness to abandon his ideas, he criticizes as not scientific the dogmatism of M. Klein and of the Kleinians (cf., for instance, 1989a, p. 460).
18. In 1911, Freud signed, together with Einstein and several other first rate scientists of the epoch, a manifest in favor of the foundation of a “Society for Positivistic Philosophy”. This document is now published in Natureza humana, v. 2, n. 2, 2000.
19. Klein was concerned about “psychic pain”. Winnicott, as we shall see, about real failures in human relations (which are not just “social”, but personal, at any stage).
20. A non-coherent theory is a false theory. Since ex falso sequitur quodlibet, inconsistency has to be avoided.
empirical as well as metaphysical properties of conscious states. Most of these elements, well known to the empirical psychology of his time,\textsuperscript{21} are taken from the Kantian theory of subjectivity, which, as it is well known to philosophers, was founded on a dynamic view of nature, included the two basic forces of attraction and repulsion, and a theory of psychic structure. The Freudian dualism of forces appears to be nothing other than an adaptation of the Kantian metaphysical dualism, and the main elements of his psychic apparatus are the Kantian faculties, now called agencies or instances for the purposes of psychoanalytic research.\textsuperscript{22} Influenced by his medical training, Freud \textit{naturalized} all these ingredients of the unconscious and even tried to speculatively construct a \textit{machine} capable of producing the same effects as those which are observed in clinical practice and everyday life. In the initial version of metapsychology, the machine was a biological one (cf. the so called \textit{Project of a Scientific Psychology}). In the later more mature version, formulated around 1915, the prevailing metapsychological model of the human being is a psychological machine, inherited from Leibniz, Kant and others. At that period, Freud was speaking exclusively of \textit{psychic} forces and of \textit{mental} apparatus.

There are several reasons that Freud’s metapsychological speculations have to be carefully distinguished from his exemplar (the Oedipus complex) and his guiding generalizations (which belong to the sexuality theory and its extensions). Firstly, exemplars are different from other commitments and, moreover, by far are the most important elements of a disciplinary matrix. Secondly, empirical commitments should not be mixed up with ontological ones. Thirdly, these differences are important for the understanding of the history of psychoanalysis. As we shall see later, Winnicott’s crisis was not triggered, in the first place, by problems related to Freudian metapsychology, but by the sterility of the Oedipus exemplar and of the sexuality theory in disposing of clinical problems which he happened to find important in his medical and psychoanalytic practice.

5. Winnicott’s crisis

The Oedipal paradigm revealed itself extremely successful in dealing with a number of new problems, the theory of sexuality serving as the starting point for

\textsuperscript{21} As we know, one of the sources used by Freud in elaborating his metapsychology was the article by Theodor Lipps, a philosopher of psychology, entitled: “The Concept of the Unconscious in Psychology”, from 1897.

\textsuperscript{22} As Heidegger noticed (1987, p. 220), Freud’s id is a new scientific name for unconscious \textit{sensibility} and passions, ego for unconscious \textit{understanding}, and super-ego for unconscious \textit{reason}, in particular, practical reason.
various extensions and applications of psychoanalysis. Firstly, and most significantly for psychoanalysis itself, it served to develop the theory of neuroses and of psychic disturbances in general (paranoia, homosexuality, fetishism). Secondly, it helped in the elaborating the theory of the psychic development and of the structure of psychic apparatus. Thirdly, it served as a starting point in the theory of society, religion and morals. Let me note that Freud ventured a very bold assertion about morals, namely, that “Kant’s categorical imperative is the direct heir of the Oedipus complex” (W 11, p. 422), which implies that the very essence of traditional morality was a derivative of human sexual life.

But the Oedipal paradigm was also confronted very soon with serious anomalies. Freud himself found one of them: the early pre-Oedipal relation of female children with their mothers. Klein came next, making a case for anxieties previous to the fully developed phallic or genital Oedipus complex. In the 40s, Fairbairn added new criticism to the Oedipal paradigm and indeed to the whole of Freud’s libido theory. However, as far as I know, the first real challenge to Freud’s Oedipal paradigm within psychoanalysis came from Winnicott. While still undergoing psychoanalytic training, Winnicott became “astounded both by the insight psychoanalysis gave into the lives of children and by a certain deficiency in psychoanalytic theory” (1965, p. 172). He describes this deficiency in the following way:

At that time, in the 1920s, *everything had the Oedipus complex at its core*. The analysis of the psycho-neurosis led the analysts over and over again to the anxieties belonging to the instinctual life at the 4-5 year period in the child relationship with two persons. Earlier disturbances that came to light were treated in analysis as regressions to pregenital fixation points, but the dynamics came from the conflict at the full-blown genital Oedipus complex of the toddler or late toddler age [...]. (Ibid., my italics)

Winnicott makes the same point in a later autobiographical report about his learning process of psychoanalysis, phrased almost directly in Kuhnian terms: “When I came to try and to learn what here was to be learned about psychoanalysis, I found that in those days we were being taught about everything on terms of the 2-, 3-, and 4-years-old Oedipus complex and regression from it (1989, p. 574-5).

While learning to see each and every psychic disturbance in the light of the Oedipus complex, Winnicott, who at the same time was a practicing paediatrician, found himself in the following difficulty: “Now, innumerable case histories showed me that the children who became disturbed, whether psycho-neurotic, psychotic, psycho-somatic or anti-social, showed difficulties in their emotional development in

23. As we know, Freud was not very happy about the proposal made by Klein.
infancy, even as babies. [...] *Something was wrong somewhere*” (1965, p. 172, my italics).

What is described here are the clinical problems which triggered Winnicott’s revolutionary research, namely the disturbances which belong to the intended field of application of the Oedipal paradigm but which do not fit it. The Oedipal paradigm was not entirely wrong, it was even constantly confirmed, but it was insufficient, more precisely, it could not do all what Freud hoped it could do. Winnicott’s first and by far most important difficulty with the Freudian psychoanalysis was thus about its shibboleth, not about metapsychology. In Kuhnian terms, what happened to Winnicott during his learning process is that he found a serious anomaly in the framework of the paradigm he was trained in. What is more, he found an entire field of problems which resisted the “orthodox” psychoanalytic understanding and treatment.

After having made this discovery, Winnicott felt alone and excluded from the group. In the twenties and the thirties, he writes in “D.D.W. on D.W.W.” (1967), the very existence of something like obsessional neurosis in a 16-month baby, was simply denied as a fact. It was rebuffed with the objection: “But this can’t happen”. Winnicott comments:

> There wasn’t an audience for that, because of the fact that to have an obsessional neurosis one would have to have had a regression from the difficulties of the Oedipal stage at 3. I know that I overdo the point but that was something that gave me a line. I thought to myself, I’m going to show that infants are very ill early, and if the theory doesn’t fit it, it’s just got to adjust itself. So that was that. (1989, p. 575, my italics)

We have thus identified the exact point at which Winnicott started to depart from Freud and initiated his revolutionary research which ended by the substitution of Winnicott’s new mother-baby or two-body paradigm for the old Freudian Oedipal or three-body paradigm.

**6. The attempt to find a solution in the “learning area” of M. Klein**

Winnicott’s first movement, however, was to try to save the Oedipal paradigm. From the mid-twenties onward he gave “many tentative and frightened papers to his colleagues”, in which he described samples of cases histories of emotionally ill babies “that had to be reconciled somehow with the theory of the Oedipus complex as the point of origin of individual conflicts” (1965, p. 172). Yet, Winnicott very soon came to the conclusion that what he needed was a psychology of the new born infant which would not try to reduce all problems just to “castration anxiety and Oedipus complex” (1958, p. 34n). He felt “that the psychology of the small child and of the infant is not so simple as it would at first seem to be, and that
a quite complex mental structure may be allowed even in the new born infant” (1958, p. 34). But Winnicott did not know where to look for such a psychology. He stood quite alone, and without a guiding paradigm.

It was an important moment in Winnicott’s life when J. Strachey, his analyst at that time, sent him to M. Klein, who was also trying to apply psychoanalysis to small children. Winnicott took her a paper which presented an example of “pre-kleinian” child analysis which he realized on the basis of his own analysis with Strachey. “This was difficult for me”, remembers Winnicott, “because overnight I had changed from being a pioneer into being a student with a pioneer teacher” (1965, p. 173).

Winnicott discovered very soon, however, that the psychology of the new-born infant he was looking for could not be of the Kleinian type. In different writings, Winnicott spelled out his main reasons for rejecting the Kleinian line of approach. According to Klein, the relevant clinical material “either has to do with the child’s object relationships or with mechanisms of introjection and projection” (Ibid., p. 174). These were “deep” mechanisms, but, Winnicott felt, not “early” mechanisms. As he puts it in 1962, much of what Klein wrote in the last two decades of her fruitful life may have been “spoiled” by her tendency to push unwarrantedly the age at which deeper mental mechanisms appear further and further back. She made mistakes because “deeper in psychology does not always mean earlier”. Winnicott was convinced that “when you are going back to the deepest things you won’t get to the beginning” (1989, p. 581). For instance, the talion dread and splitting the object into “good” and “bad” are truly deep mechanisms. Yet, the capacity of using them is not established before the capacity of using projection and introjection mechanisms, and these capacities, in turn, are dependent upon previous good mothering which, by the way, is neither a mental mechanism nor a mental phenomenon at all. Moreover, Winnicott never accepted the Kleinian theory of nature and aetiology of psychosis, formulated in terms of hereditary mental mechanisms and conflicting instincts.

7. Winnicott and Fairbairn

One might think that Winnicott should have felt himself closer to Fairbairn, who was also critical of the Oedipus paradigm. Indeed, in 1941, Fairbairn complained about the misconception of regarding “the Oedipus situation as a psychological, in contrast to a sociological, phenomenon” (Fairbairn, 1952, p. 36-7). In 1944, he

24. It seems to me that the main reason why Winnicott remained entirely absent from the BPS controversies in 1943 and 1944 is in the fact that they were about hereditary instincts and mental mechanisms.
declared that the Oedipus situation is not “an explanatory concept”, but rather a “phenomenon to be explained” (Ibid, p. 121).

These remarks might seem to go in the direction favoured by Winnicott. However, a closer examination of Fairbairn’s position shows that this is not so. Fairbairn looked for causes of all pathological psychic conditions in disturbances of object relations (p. 82), in particular of relations with internalised objects. Schizoid disturbances, specifically, were thought of as results of the process of introjection. As such they were viewed not as a primary process but as a defence mechanism (1989, p. 418). The question is: Defence against what? Against ambiguity in object relations, which calls for the repression of the libido. The rationale for repression is not to be found in the (late) Freudian Oedipus situation, because the initial Oedipal situation “is not really an external situation at all, but an internal situation”. The fundamental difference from Klein is that the situation is not built around the symbolic mental equation “breast = penis” and the conflict between death and libido instincts, but “around the figures of an internal exciting mother and an internal rejecting mother” (1952, p. 123-4). Fairbairn sums up his position in the following way: “Thus, in my view, the triangular situation which provides the original conflict of the child is not the one constituted by three persons (the child, his mother and his father), but the one constituted essentially by the central ego, the exciting object and the rejecting object”. (1994, vol. I, p. 28; my italics)

Fairbairn’s aetiology of pathological conditions is thus still Oedipal, triangular, although the triangle is defined in a way different from Freud and Klein. It is no more the actually lived objective Oedipal situation, as it was originally in Freud, but an “internalised” condition, the internalisation implying the existence and the functioning of mental operations and mechanisms which Winnicott came to reject, as I said above, on the basis of his clinical observations.

In 1953, Winnicott wrote a devastating review of Fairbairn’s 1952 book of articles. What were his main critical points? Firstly, that Fairbairn “starts off with an infant that is a whole human being, one experiencing the relation to the breast as a separate object, an object that he has experienced and about which he has complicated ideas” (1989, p. 416). Second, that he explains the disturbances found in individuals displaying schizoid features as a regressive phenomenon determined by unsatisfactory emotional relations with parents, without making clear whether “the mother only ‘provokes the regression’ to this early state or is the creator of it”. In other words, Fairbairn does not decide “whether deprivation is the result of a deficiency in the mother’s care or inevitable in childcare”. It is therefore very difficult “to work out whether Fairbairn considers this maternal failure to be truly the mother’s failure or the child’s projection on her of his own fate” (1989, p. 417-8). If the two are held to be the same on account of the imperfect maturity of all persons (including mothers), then it must be said that Fairbairn did not “found the language that covers
both the normal and the abnormal” (p. 417, my italics). This faulty “theoretical structure” spoils what can be learned from Fairbairn’s valuable “flashes of clinical insight”.

This is essentially the same objection which Winnicott addressed to Klein, that of treating early disturbances as internal mental problems and not as an actual mother-baby relationship problem. This difference is all-important because, in the second case, one is confronted with the additional task of defining the good enough maternal care whereas, in the first case, no such question arises. 25

8. Winnicott’s revolutionary research

Winnicott did not want to abandon the efficient problem-solving procedures of orthodox psychoanalysis, even though they were embedded in metapsychological postulates (psychic forces and mental mechanisms) which he rejected. We have seen him saying that the existence of the Oedipus complex was well confirmed. He also recognized the Kleinian theory of depressive position as important and empirically founded, in which he saw a dual and not, as Klein herself, a triangular situation. 26

On the other hand, he needed, as I have said, a new and more powerful procedure for solving clinical problems which have their origin in very early actual mother-baby relationship. So, how did he get out of this predicament?

One important element of Winnicott’s solution came from his study of the environment. Beginning in 1923 he became increasingly aware of the fact that there is a relation between environment and psychic disease, and, he says, this “led to something in me” (1989, p. 576). In the 20s and the 30s no analyst was interested in this problem. Winnicott was even deterred from doing this sort of research by his analyst J. Strachey (1923-33), who was an orthodox Freudian, and later on by J. Riviere, his next analyst (1933-38). Riviere bluntly refused even to consider a planned paper of Winnicott’s on the classification of environments. At that time, psychoanalysts, writes Winnicott, “were the only people [...] who knew there was anything but environment” (1989, p. 577). Yet, Winnicott could not help but agree with those who were screaming out that a child might become ill by his father being drunk. He thus became confronted with the following: “How to get back to the

25. In 1953, Winnicott still thought that Fairbairn was trying to take his distances from Klein. In his autobiographical report of 1967 (1988, Postscript), he admitted however that Klein and Fairbairn had several important things in common, but that he “could not see that for years and years” (1989, p. 579).

26. On Winnicott’s interpretation of the depression position as a two-body situation, cf. 1965, p. 22, 30 and 176.
environment without losing all that was gained by studying inner factors” (1989, p. 577, my italics).

How did Winnicott solve this? He was helped very much by an accidental factor: the war, and probably also by Clare Britton, his future wife. By being involved in evacuation operations of small children in the London area, Winnicott was obliged, “at last”, he writes, to treat abandoned and maladjusted children. Until then, he avoided treating such cases, remaining in line with the official position that psychoanalysis has nothing to do with “real” situations. It is how Winnicott came to the “original idea” (it occurred to him during a trip to Paris, he thinks) of “anti-social tendency” and “hope”, which is one of the essential discoveries of his child psychology and “extremely important” for his clinical practice. The idea was that “the thing behind the anti-social tendency in any family, normal or not, is deprivation” and that hope has the meaning of “trying to reach back over the deprivation area to the lost object” (1989, p. 577).

Having discovered the connection between maturational process and facilitating environment, between nature and nurture, as he puts it, Winnicott found himself confronted with a new task, that of formulating “a sort of theoretical basis of environmental provision starting at the beginning with 100 percent adaptation and quickly lessening according to the ability of the child to make use of failure of adaptation” (1989, p. 579, my italics). This task, in turn, required elaboration of “dependence and adaptation theories” in a developmental and historical perspective (Ibid., p. 579).

9. Winnicott’s exemplar: the baby on the mother’s lap

While working on the theory of the individual’s relation to the environment in such a perspective, Winnicott came to two decisive results. Firstly, that it is “impossible to talk about the individual without talking about the mother”, because, speaking the language of late Winnicott, the mother “is a subjective object [...] and therefore how the mother behaves is really part of the infant” (p. 580). Secondly, that the initial mother-baby relationship is not a triangular internal (mental)

27. It is interesting to notice that the First World War triggered a similar need for further articulation in the orthodox psychoanalysis. The discovery of the “war neurosis” opened the way to a series of clinical developments and to the metapsychology of the death instinct.

28. The same is true of transitional phenomena and has, according to Winnicott, “quite a lot of philosophical importance”. I have tried to spell out a possible philosophical meaning of the environment as a part of the individual by approximating this idea to Heidegger’s concept of man as having the structure of “being-in-the-world”, cf. Loparic, 1995.
relationship, but a very special kind of dual external (not mental) relationship. In 1958, Winnicott put this point in the following terms:

Any attempt to describe the Oedipus complex in terms of two people must fail. Nevertheless two-body relationships do exist, and they belong to relatively earlier stages in the history of the individual. The original two-body relationship is that of the infant and the mother or mother-substitute, before any property of the mother has been sorted out and moulded into the idea of a father. (1965, p. 29-30; my italics)

In the beginning the father may or may not have been a mother-substitute. If he has, he was not there as father, as somebody endowed with properties or roles different from the mother’s. In the initial two-body relationship, the mother can be said to start “as a part object or as a conglomeration of part objects”. The same is true of her surrogates and thus of the father as the mother-substitute.

Yet, “at some time”, the father does begin “to be felt to be there in a different role”. The time comes at which the individual is likely to use the father for very specific purpose, namely “... as a blueprint for his or her own integration when just becoming at times a unit. If the father is not there the baby must make the same development but more arduously, or using other fairly stable relationship to a whole person” (1989, p. 243).

This being so, the main initial role of the father with respect to the developing child who is no more a baby is not at all that of a partial object, but rather to “be the first glimpse [...] of integration and of personal wholeness”. In favourable cases, the father “as father, not as a mother surrogate” starts off “as whole person”, “as an integrate in the ego’s organization and in the mental conceptualisation of the baby” (1989, p. 243). It is only later that he “becomes endowed with a significant part object” (the penis), which then plays a very important role in the child’s three-body relationships.

This conception of the initial dual mother-baby relationship allowed Winnicott to come to a clear-cut formulation of his paradigmatic problem which he started from: babies suffer from anxieties which are not to be conceived as products of putative innate mental forces and mechanisms, but as consequences of an external factor, the early maternal failure to provide good enough environment. 29 In a late text, Winnicott wrote:

29. It might not be beyond the point to notice that Peter Sloterdijk, a German philosopher influenced by Heidegger and interested in psychoanalytic theory, also defends in his recent writings (cf. Sloterdijk, 1998, for instance) the thesis that our original relationship to the external world is dual, not triangular. However, he does not conceive this relationship as the one between the baby and his mother, obtaining in the “subjective” world, but as a pattern which is realized in couples found in very different fields of study, such as theology (relation between soul and God or the soul and the Guardian Angel) or adult sexuality (Romeo and Juliet).
To make progress towards a workable theory of psychosis, analysts must abandon the whole idea of schizophrenia and paranoia as seen in terms of regression from the Oedipus complex. The aetiology of these disorders takes us inevitably to stages that precede the three-body relationship. The strange corollary is that there is at the root of psychosis an external factor. (1989, p. 246)

Winnicott ends this passage with a remark on the Kleinians, by noticing that it is “difficult for psychoanalysts to admit this after all the work they have done drawing attention to the internal factors in examining the aetiology of psycho-neurosis” (p. 246).

By turning to real factors as causes of psychotic illness Winnicott in a way reversed the then prevalent tendency in psychoanalytic theory to formulate clinical problems in terms of mental mechanisms and still more radically in terms of innate symbolic equations (breast = penis) or of Lacanian symbolic castration. Psychosis became a “natural” process, having its causes in actual external human relations, not in inner, or still less symbolic, relations and processes. In opposition to Freud, Winnicott did not define external relations as sexual, social nor even as psychological, but rather as “personal”, based on special forms of mutuality and intimacy between mothers and their babies. In that way, he switched to his new dual or, as I propose to call it, “baby-on-the-mother’s-lap” paradigm.

For that new point of view on clinical experience, situations causing schizophrenia cannot be seen as triangular:

Just as a study of psycho-neurosis leads the student to the Oedipus complex and to the triangular situations that reach their height in the child at the toddler age and again in adolescence, so the study of psychosis leads the research worker to the earliest stages of infant life. This implies the infant-mother relationship since no infant develops outside such a relationship. (It involves the idea of dependence prior to the establishment of the operation of mental mechanisms of projection and introjection). (1965, p. 131)

What Winnicott is rejecting in this and many other texts is the very idea that early infantile schizophrenia and paranoia have anything to do with triangular or three-body relationships. The only facts that can possibly be potential causes of psychic disturbances of the kind mentioned are events which can have a meaning in a baby’s

30. This tendency started with Freud’s rejection of his first seduction theory.
31. This image, obvious in itself, is based in particular on a particular remark of Winnicott’s that the relation of a child to his mother must be such that he can feel comfortable “on her lap” (1964, p. 133).
experience, and there is no and cannot be any third or father element experienced in an infant’s relationship with his mother.32

Here we come to the crux of the matter: the psychology of a new born is to be conceived as being essentially different from the psychology of adults and even from that of young children. Not only does the sexuality theory not apply, but also the Freudian metapsychological approach cannot be accepted. A baby’s life and his “unconsciousness”, if there is something like that at all in a baby, cannot be described in terms of mental forces and processes. In particular, his needs have to be distinguished from desires, which are mental states, as well as from drives or instincts, which are putative or actual biological entities, with or without a mental, “psychological” or conscious-like counterpart. Such mental states and processes are not there at the beginning. An individual’s life develops out of something else, namely, out of an early psycho-somatic partnership established by the imaginative elaboration of body functions, instincts, sensations and feelings, which requires maternal care in order to succeed. In Winnicott, the binomial nature and nurture has taken the place of the orthodox polarity between an instinct driven subject and its objects.

Yet, in a way, Winnicott was going back to Freud, since he saw no meaning in talking about Oedipus in terms of partial and internal objects. In Human Nature, Winnicott treats Freud’s Oedipus complex as part of the problem of “management of the first triangular relationship, with the child power-driven by newly established instincts of genital quality characteristics of the 2-5 year period” (1988, p. 49). There is thus no substance in the frequently repeated statements that Winnicott is fleeing from the erotic into infancy (cf. P HILLIPS, 1988, p. 152). Winnicott does not seem to be fleeing from anything, to the contrary, he is confronting the problem traditional psychoanalysis is trying to escape, namely the fact that Freud’s theory of sexual problems, implied in the Oedipal situation, does not account for disturbances which arise in dual relationship between mothers and their babies. None of the later efforts to extend the Oedipal situation and the sexual theory related to it (theories rejected by Freud himself, O. Fenichel and A. Freud, among others) produced the desired results. These extensions were theoretically degenerative, if not meaningless:

I think something is lost is the term “Oedipus complex” is applied to the earlier stages, in which there are only two persons involved and the third person or part object is internalised, a phenomenon of inner reality. I cannot see any value in the

32. This argument is parallel to the one used by Winnicott in criticizing Klein’s theory of envy. Envy cannot be attributed to a new-born baby because the word “envy” refers to an attitude, something maintained over a period of time, and to several other mental states which imply “a degree of ego organization in the subject which is not present at the beginning of life” (1989, p. 444).
uses if the term “Oedipus complex” where one or more of the trio is a part object. In the Oedipus complex, for me at least, each of the three of the triangle is a whole person, not only for the observer but also and especially for the child. (1988, p. 49)

Winnicott did not just retain Freud’s late Oedipus complex, he even developed it further, by introducing, for instance, a new explanation of the origin of the fear of castration. This fear, says Winnicott, “becomes welcome as an alternative to the agony of impotence” which characterizes the genital phase of sexual development where “the child’s performance is deficient, and the child must wait (till puberty as we know) for the ability to act out the dream” of genital relation with the mother (1988, p. 44). It is, I repeat, a serious though widespread error to think that Winnicott flies from sexuality to early infancy. What he demonstrably does is to put each of these moments into the correct place in the process of personal growth and make it clear and precise which disturbances are due to each of them.

10. Winnicott’s main guiding generalization: theory of maturation

The guideline of Winnicott’s treatment of psychosis is his theory of emotional or personal development: “To examine the theory of schizophrenia one must have a working theory of the emotional growth of the personality. [...] What we must do is to assume a general theory of continuity, of an inborn tendency towards growth and personal evolution, and to the theory of mental illness as a hold up in development” (1989, p. 194).

Winnicott is here describing two things: his main scientific problem – infantile schizophrenia –, and the theoretical tool he uses to solve it – his theory of maturation or of personal growth. In the study of schizophrenia, this theory has the same paradigmatic role as that held by the theory of sexuality in the study and treatment of psycho-neurosis within Freud’s three-body paradigm:

Also, I can say that the statement of infantile and child development in terms of a progression of erotogenic zone, that has served us well in our treatment of psycho-neurosis, is not do useful in the context of schizophrenia as is the idea of a progression from dependence (at first near-absolute) towards independence [...]. (1989, p. 194)

Like Freud’s sexuality theory, Winnicott’s theory of progression from dependence towards independence is an empirical generalization and not a metapsychological speculation. It was initially constituted from clinical material relative to deprived children and developed by application to the study of two-body relationships.

On the present account, the theory of emotional growth stands in the very centre of Winnicott’s theoretical matrix and represents one of his main contributions
to psychoanalysis. In a way, this thesis is quite trivial since it can be found stated more or less explicitly in almost every article of Winnicott’s. Again and again, Winnicott comes back to this same essential point, that his main problem was “quite simply the treatment of psychiatically ill children, and the construction of a better, more accurate and more serviceable theory of emotional development of the individual human being” (1986, p. 84). Curiously enough, in the secondary literature this theory as such has received little attention, being simply forgotten or viewed as trivial and reducible to psychoanalytic common sense.

11. Other components of Winnicott’s paradigm

In order to complete this very schematic reconstruction of Winnicott’s paradigm, I have to say something about his ontological model of man, his heuristics and the values he favoured, items which, according to Kuhn, must be present in the disciplinary matrix of any science.

As to **ontology**, Winnicott’s theory of personal growth is based on a new view of the human being. Winnicott goes as far as to define his psychoanalysis, in an unexpected and seemingly old-fashioned way, as “the study of human nature” (1988, p. 1). What Winnicott has in mind is the assumption that “fundamentally all individuals are essentially alike, and this in spite of the hereditary factors which make us what we are and make us individually distinct” (1964, p. 232-3). At its face value, this assumption seems to be more philosophical in kind then biological. This impression is strengthened by Winnicott’s commentary, added to it:

I mean, there are some features in human nature that can be found in all infants, and in all children, and in all people of whatever age, and a comprehensive statement of the development of the human personality from earliest infancy to adult independence would be applicable to all human beings whatever their sex, race, colour of skin, creed, or social setting.Appearances may vary, but there are common denominators in human affairs. (1964, p. 233)

The common denominators identified are of two kinds, structural and developmental. The first are mainly the needs of infants and small children which are not “variable”, but “inherent and alterable” (Ibid., p. 179). This same thesis is expressed in the following way: “The essential needs of the under-fives belong to the individuals concerned, and the basic principles does not change. This truth is applicable to human beings of the past, present, and future, anywhere in the world, and in any culture” (1964, p. 184). As to developmental common denominators, they

33. A splended brief account of this theory can be found in Winnicott, 1988, p. 8 and 101-2.
are obviously the invariant features of human personal growth. There is a straight connection between the two kinds of denominators, since needs are essentially related to the tendency towards integration, that is, to the growth.

It is no surprise that some commentators interpret Winnicott’s concept of human nature as a return to essentialism. But this point should not be overdone. Human nature is something which in spite of being invariable has a beginning, the only certain date of which is that of conception (1988, p. 29). It is not easy to ascertain the correct meaning of what Winnicott is saying here. One possible interpretation is that human nature is not a Platonic essence, but the invariant structure of a particular kind of *temporalization* which manifests itself as a human being, who, as Winnicott puts it, “is a time sample of human nature”. Just that. Where does this process of being start from? From not being, from nowhere, from aloneness (p. 131). Where does it go? Again, to not being, to nowhere, to initial loneliness. “The life of an individual is an interval between two states of unlikeness”, says Winnicott near the end of *Human Nature*. The important thing to notice here is that these two states of unlikeness, which are the extreme points of the human life interval, belong to the human nature and can even be experienced. The “experience of the first awakening”, which a human being makes at the start, gives him the idea “that there is a peaceful state of unlikeness that can be peacefully reached by an extreme regression” (p. 132). If it is so, human nature is, in itself, the negation of any fixed essence. The only thing a human being can have, as a time sample of human nature, is his history which happens due to the tendency “to begin to exist, to have experiences, to build a personal ego, to ride instincts, and [...] to have a self that can eventually even afford to sacrifice spontaneity, even to die”, the death being the “final seal of health”.

This is the main ontological hypothesis admitted by Winnicott. On other occasions I have tried to show that it stands in very close agreement with Heidegger’s concept of human being as happening-in-the-world of a being-to-death (cf. LOPARIĆ, 1995 and 1999b). Be it as it may, one thing is certain: there is a great difference between Winnicott’s concept of human nature and Freud’s naturalistic concept of mental apparatus driven by instinctual forces, concept taken, as I have said, from modern empirical psychology and, in the last resort, from the modern philosophical concept of a naturalized subjectivity.

34. Phillips, for instance, says that Winnicott was “a pragmatist with an essentialist theory” (1988, p. 97).
35. Thus not as in Freud, from an inorganic state.
36. Cf. Winnicott, 1958, p. 304.
37. This point is made in Winnicott, 1988, p. 12.
As to **heuristics**, Winnicott continues to accept the Freudian method of research, transference. But he modifies its meaning, by allowing for the occurrence, in the clinical setting, of the dependence relation. Moreover, Winnicott does not allow for any kind of speculation and prohibits going “behind” phenomena by means of metaphors. His view of human nature is based on a very general hypothesis concerning development of human capacity of experience, not a *metapsychological speculation* concerning structure and functioning of something like a “psychic apparatus”.

As to **values**, they can be divided into the theoretically and practically significant. Theoretically, Winnicott sees psychoanalysis as a science, which has to test its hypothesis and to obey the verdict of observed facts. As any science, the psychoanalysis must be formulated so that it can be submitted to public discussion by psychoanalysts, by other scientists in the related fields, such as child psychiatry and paediatrics, and by the educated public in general. In so far as practical values are concerned, Winnicott gives a place to unduly censured sexuality (Freud) and to intrapsychic pain caused by internal conflicts (Klein, Fairbairn). Yet he thinks that by far the most severe suffering is that which arises from unattended needs which originate out of the need of being. Paradigmatic examples of pains of this kind are Winnicott’s “unthinkable agonies”, unthinkable, because they are previous to any mental representation, and agonies, because they implying a struggle for the continuity-of-being. These troubles are “early” but not “deep”, because they originate in the two-body relationship, before the existence of any representation structure in the human baby.

12. **A comparison between Freud and Winnicott’s paradigms**

Both, Freud and Winnicott, agree that psychoanalysis is a science, not a craft, art, philosophy or religion. Neither classifies it together with “mixed disciplines”, like astrology or alchemy. Both conceive psychoanalysis as a problem-solving activity, guided by concrete clinical problem-situations and their solutions, completed by an additional theoretical framework. Whereas exemplary problem-solutions are considered to be beyond question in normal research, they are not viewed as having an unlimited heuristic power. It is conceded by both thinkers that new exemplars might be needed to complete the psychoanalytic picture of psychic diseases and to promote further research.

38. Cf., for instance, Winnicott, 1996, chapter 1.
39. This stance is taken by Winnicott in many texts, cf. Winnicott, 1986, p. 13ff. and 1996, chapters 1 and 29.
However, Freud and Winnicott disagree as to which problems are exemplary for psychoanalytic research and as to what empirical generalizations are to be taken as guiding lines. Freud made normal psychoanalytical research possible by converting a rather small group of people to seeing all psychopathological situations as similar to the Oedipal conflict and by interpreting this situation in terms of his sexuality theory. Winnicott, coming into psychoanalytic research in the 1920s, found that he could not see things that way. He ended by viewing the mother-baby situation as truly exemplary, a result which in turn forced him to develop a theory of emotional growth, that is, of nature and nurture. This is, in essence, the paradigm change which accounts for the difference between the Freudian Oedipal, triangular or three-body psychoanalysis – embraced by the British School (A. Freud, Klein, Fairbairn, Bion) and by most of French psychoanalytic groups (specially the Lancanians) –, and Winnicott’s mother-baby, dual or two-body psychoanalysis, favoured today by an increasing number of psychoanalysts from different countries.

As to theoretical commitments, there are also radical differences. Whereas Freud, following the Kantian tradition, admitted a number of speculative auxiliary suppositions, which he used to produce his metapsychology (psychology going “behind” the consciousness), Winnicott decidedly rejected such a mode of theorising and limited his explanatory hypothesis to those concerning possible experiences of persons treated, in particular of babies and young children. Winnicott does not allow for the reduction of personal, “subjective” phenomena to the point of view of the patients consciousness nor, even less, to that of an observer. He wants it the other way round: to make sure that these points of view, though external to the phenomena themselves, capture the patient’s way of being and experiencing, even if this patient is a new-born baby. This is not always possible. In such cases, the analyst must stop trying to know what is happening “behind the scene”, he must refrain from making metapsychology and from theorising, which in clinical terms means that he must give up interpreting and even saying anything whatsoever.

Thus, both Freud and Winnicott set limits on our possibility of actually knowing “unconscious phenomena”. But they deal with this fact differently. Freud feels that he needs and that he is allowed to speculate, that is, to project to the unconscious the properties, the dynamics and the structures of the conscious subjectivity. Based on experience with babies, Winnicott, on the contrary, understand that such a procedure is not legitimate, because it makes us think of babies as being adults and forget what happened during the process of emotional growth. Winnicott’s baby is a human being, yes, but not the one who can be thought of in terms of conscious mental phenomena. Seen from the vantage point of Winnicott’s theory of emotional growth, Freud’s theoretical errors come from the incorrect view that what is beyond consciousness may be conceived of as being similar to consciousness, as “unconscious”. What, in babies, is beyond consciousness are not just primary processes,
they have nothing to do with anything like conscious forces and mechanisms. The baby’s experience of continuity of being is something very different from any state of consciousness. Thus, the true philosophical difference between Freud and Winnicott is that whereas Freud still thinks in terms of the theory of subjectivity, initiated by the XVII Century’s philosophers and represented paradigmatically by Kant, Winnicott thinks of human beings in an entirely different theoretical key, which has much affinity, in my opinion, to Heidegger’s fundamental ontology, as presented in Being and Time (1927).

13. Winnicott’s heritage

Admitting that Winnicott has introduced a new paradigm, did he also produce a revolution? Kuhn distinguishes between “major revolutions” and “small scale” revolutions. A scientific revolution being “a special sort of change involving a certain sort of reconstruction of group commitments” it need not be “a large change, nor need it seem revolutionary to those outside the single community, consisting perhaps of fewer than twenty-five people” (1970, p. 181). It seems to me that there are more then just twenty-five psychoanalysts in the world who would be willing to declare themselves ready to do “normal science” within the two-body paradigm proposed by Winnicott. These persons could appropriately be called Winnicottians. We are thus in the position to say that a truly Winnicottian international community is beginning to arise, which could very well prove to make real contributions to present day psychoanalytic research and practice as a whole.

There are some standard objections, frequently repeated but never really argued, against the possibility of creating a Winnicottian Research Community or a Winnicottian School in psychoanalysis. One of them says that Winnicott was not a man of institutions. This is simply not true, as can be seen from Winnicott’s many engagements in institutional matters. What Winnicott was against are psychoanalytic societies turned into propaganda machines and instruments of indoctrination. But he very much favoured psychoanalytic societies open to scientific research and discussion.

The second one, defended for instance by Charles Rycroft, says that Winnicott was “too idiosyncratic to be readily assimilated into the general body of any scientific theory” (Rycroft, 1985, p. 114). Phillips in a sense echoes Rycroft when he says

40. This idea is developed in Loparic, 1996 and 2001.
41. I would not dare to name the great Winnicottians of today. But I want to identify some psychoanalysts belonging to other groups who took the same direction. One of them is certainly H. Kohut.
that “Winnicott did not become systematically coherent at the cost of his own inventiveness” (1988, p. 99). Considering the reconstruction of Winnicott’s paradigm offered above, this objection is far from doing justice to Winnicott and reveals not so much Winnicott’s theoretical laziness as that of his objectors. Winnicott certainly did value his own inventiveness very highly, nevertheless his main task as a psychoanalyst and paediatrician was not to cultivate and develop his originality, but to help psychotics and deprived children. In order to do that he had to proceed in a methodical, coherent way, in other words, scientifically, and could not afford to just be creative. That would mean being intrusive. In many situations indeed he had just to wait, wait and wait, that is, to sacrifice his own creativity and let the patient be creative. Winnicott needed, of course, to use much of his inventiveness in order to give a scientific format to this simple conclusion, but after that he had to act according to it and help his patients invent their lives. As so many others, Phillips is confusing here different aspects of Winnicott’s work and personality, to the damage of understanding of both.

Thirdly, it is said that Winnicott did not want to become a “master”. He certainly did not want to master-mind people by telling them what to do and what to think. But he nevertheless developed an extraordinary activity of making his own ideas public by writing, talking and teaching. In *Therapeutic Consultations*, for instance, he explicitly addresses the problem of training psychoanalysts in his technique of squiggle games. The basis for this training is “a long term individual psychotherapy” (p. 270). If this condition is not available, the teacher has to consider whether the candidate possesses a certain number of “desirable qualities”, specified either by orthodox or Winnicott’s own psychoanalytic theory and practice. Once the choice of a good candidate is made, the teaching of the technique of therapeutic consultations can begin. To this purpose, the case histories described by Winnicott in considerable detail “may prove to be good teaching material” (p. 9). Winnicott thus assumes the teaching role, with, however, the following *caveat*:

> It would be from my point of view a satisfactory outcome is the material could be used for criticism and would much prefer this to the alternative whereby what I have described here might simply be imitated. As I have already stated, the work cannot be copied because the therapist is involved in every case as a person, and therefore no two interviews could be alike as they would be carried through by two psychiatrists. (1971b, p. 9)

In the same vein, Winnicott points out that his case descriptions reflect his own personality, without forgetting to point out that his personality is not the only “constant factor” in this kind of research, since in doing it he has had one constant companion:
The only companion that I have in exploring the unknown territory of the new case is the theory that I carry around with me and that has become part of me and that I do not even have to think about in a deliberate way. This is the theory of emotional development of the individual which includes for me the total history of the individual child’s relationship to the child’s specific environment. (1971b, p. 6)

Cases presented in Therapeutic Consultations are therefore neither just fruits of chance nor genial insights of a creative psychoanalyst, but essentially illustrations of theoretical perspectives developed by Winnicott during years of scientific work and of a personal technique based on this perspective (p. 215, 218 e 220).

Winnicott compares his own positions as a teacher of therapeutic consultations to that of the cellist “who first slogs away at technique and then actually becomes able to play music, taking technique for granted”, and who is moved by the wish “to communicate with those who are still slogging at technique, at the same time giving them the hope that will one day come from playing music” (p. 6). Winnicott hates the idea of being “simply copied”, but he does want to teach what he knows in order that other people might create their own capacity to acquire knowledge and to do psychotherapeutic work by themselves. It would be better, admits Winnicott, “if the student could gather the material for himself or herself from personal contact with children instead of reading my descriptions”. But he knows very well that this is not always possible, especially for students who are starting to learn (p. 11).

What we have here is a very subtle presentation of the learning process in squiggle games, which takes into account the personal dimension, but nevertheless recognises that teaching is founded on a pre-existing theory, in the present case, on the theory of emotional development of the individual, which is the “backbone of all the work described here”. Putting this in everyday language, Winnicott has written a textbook on the technique of therapeutic consultations, based on his theory of emotional development. Winnicott’s theory not only can be taught, he wants it to be taught to the beginning analysts. In essence, Winnicott subscribes to the general view that there is no other way to become a scientist other than within a scientific tradition.42

I have tried to show that there is in Winnicott a constant, long range and carefully conducted scientific effort to solve a clinical problem: that of nature and aetiology of psychotic disturbances. I am quite ready to admit that his solution to this problem has left many unanswered questions. But I understand that there can be no reasonable doubt about Winnicott’s commitment to scientific research conducted in agreement with methods of psychoanalysis and, to a lesser degree, of ordinary paediatrics and psychiatry. I would say that neither of these two disciplines is in much

42. The same is true, for instance, of his papers on the psychoanalytic technique itself.
better shape than psychoanalysis. In all of them rival theories are struggling for survival. All still remain in what Kuhn would term “pre-paradigmatic phase”, undergoing more or less frequently smaller or greater revolutions. Nevertheless, this kind of activity is generally called “scientific research”.

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Resumos

O objetivo principal do presente artigo é apresentar uma visão unificada da contribuição de Winnicott à psicanálise. A Parte I (seções 1-4) começa mostrando que, de acordo com certos comentadores renomados, Winnicott introduziu uma mudança...
paradigmática na psicanálise. A fim de mostrar que essa mudança pode ser interpretada como um Gestalt switch paradigmático no sentido de Th. S. Kuhn, faz-se uma apresentação panorâmica da teoria kuhniana da ciência e, em seguida, uma reconstrução do paradigma edipiano ou triangular de Freud (paradigma de “criança-na-cama-da-mãe”). Na segunda Parte (seções 5-13), é mostrado que, já nos anos 20, Winnicott constatou a existência de anomalias insuperáveis no paradigma edipiano e, por essa razão, iniciou a pesquisa que poderia ser chamada de revolucionária, no sentido de Kuhn, buscando um novo quadro geral para a psicanálise. Essa pesquisa terminou com a elaboração, especialmente na última parte da vida de Winnicott, do paradigma alternativo dual ou de “bebê-no-colo-da-mãe”. Essa matriz é descrita com certos detalhes, especialmente a relação paradigmática dual bebê-mãe e a teoria-guia de amadurecimento pessoal. As observações finais dizem respeito à herança winnicottiana e ao futuro da psicanálise.

Palavras-chave: Paradigmas, Freud, paradigma edipiano, Winnicott, paradigma “bebê-no-colo-da-mãe”

El objetivo principal del presente artículo es presentar una visión unificada de la contribución de Winnicott al psicoanálisis. La primera parte (secciones 1-4) comienza recordando que, de acuerdo con ciertos comentadores reconocidos, Winnicott introdujo un cambio de paradigma en el psicoanálisis. Con objeto de mostrar que ese cambio puede ser interpretado como un Gestalt switch paradigmático, en el sentido de Th. S. Kuhn, se realiza una presentación panorámica de la visión kuhniana de la ciencia y, a continuación, una reconstrucción del paradigma edípico o triangular de Freud (el del “niño-en-la-cama-de-la-madre”). En una segunda parte (secciones 5-13) se demuestra que, ya en los años ’20, Winnicott constató la existencia de anomalías insuperables del paradigma edípico y, por esa razón, inició lo que podría denominarse investigación revolucionaria para un nuevo marco disciplinal del psicoanálisis. Esa investigación culminó con la elaboración, especialmente en la última fase de su vida, de un paradigma alternativo madre-bébé o paradigma dual. Este nuevo paradigma es descrito con cierto detalle, especialmente la relación paradigmática dual madre-bébé y la teoría-guía de Winnicott de maduración personal. Los comentarios finales están dedicados a las cuestiones sobre la herencia winnicottiana y el futuro del psicoanálisis.

Palabras clave: Paradigma, Freud, paradigma edípico, Winnicott, paradigma “bebé-en-el-regazo-de-la-madre”

L’objectif principal de cet article est de présenter une vue unifiée de la contribution de Winnicott à la psychanalyse. Dans la première partie (sections 1-4), je montre que selon certains commentateurs renommés, Winnicott aurait introduit un changement paradigmique dans la psychanalyse. Dans le but de faire voir que ce changement peut être interprété comme un “paradigm switch” au sens de Th. S. Kuhn, je présente la conception kuhnienne de la science et, ensuite, je reconstruis le paradigme Oedipien ou
Triangulaire de Freud (de “l’enfant-au-lit-de-la-mère”). Dans le deuxième Partie (sections 5-13), je montre que déjà dans les années 20 Winnicott a découvert des anomalies insurmontables dans le paradigme Oedipien et, pour cette raison, a commencé une recherche révolutionnaire dans le but de trouver un cadre général alternatif pour la psychanalyse. Cette recherche a terminée par l’introduction, surtout dans la dernière période de la vie de Winnicott, du paradigme alternatif “bébé-au-giron-de-la-mère”. Ce nouveau paradigme est décrit dans ses traits généraux, l’attention spéciale étant donnée à la relation paradigmatique binaire entre le bébé et sa mère, aussi bien que la théorie-guide winnicottienne de maturation personnelle. Les remarques finales concernent les questions de l’héritage winnicottien et de l’avenir de la psychanalyse.

Mots clés: Paradigme, Freud, paradigme oedipien, Winnicott, paradigme binaire “bébé-au-giron-de-la-mère”.

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