

# Playing and Reality

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question, and I said that the answer to the question could take us to a long and interesting discussion, but it was the *question* that interested me. I said: 'You had the idea to ask that question.'

After this she said the very words that I need in order to express my meaning. She said, slowly, with deep feeling: 'Yes, I see, one could postulate the existence of a ME from the question, as from the searching.'

She had now made the essential interpretation in that the question arose out of what can only be called her creativity, creativity that was a coming together after relaxation, which is the opposite of integration.

## COMMENT

The searching can come only from desultory formless functioning, or perhaps from rudimentary playing, as if in a neutral zone. It is only here, in this unintegrated state of the personality, that that which we describe as creative can appear. This if reflected back, *but only if reflected back*, becomes part of the organized individual personality, and eventually this in summation makes the individual to be, to be found; and eventually enables himself or herself to postulate the existence of the self.

This gives us our indication for therapeutic procedure - to afford opportunity for formless experience, and for creative impulses, motor and sensory, which are the stuff of playing. And on the basis of playing is built the whole of man's experiential existence. No longer are we either introvert or extrovert. We experience life in the area of transitional phenomena, in the exciting interweave of subjectivity and objective observation, and in an area that is intermediate between the inner reality of the individual and the shared reality of the world that is external to individuals.

## 5 Creativity and its Origins

### THE IDEA OF CREATIVITY

I am hoping that the reader will accept a general reference to creativity, not letting the word get lost in the successful or acclaimed creation but keeping it to the meaning that refers to a colouring of the whole attitude to external reality.

It is creative apperception more than anything else that makes the individual feel that life is worth living. Contrasted with this is a relationship to external reality which is one of compliance, the world and its details being recognized but only as something to be fitted in with or demanding adaptation. Compliance carries with it a sense of futility for the individual and is associated with the idea that nothing matters and that life is not worth living. In a tantalizing way many individuals have experienced just enough of creative living to recognize that for most of their time they are living uncreatively, as if caught up in the creativity of someone else, or of a machine.

This second way of living in the world is recognized as illness in psychiatric terms.<sup>1</sup> In some way or other our theory includes a belief that living creatively is a healthy state, and that compliance is a sick basis for life. There is little doubt that the general attitude of our society and the philosophic atmosphere of the age in which we happen to live contribute to this view, the view that we hold here and that we hold at the present time. We might not have held this view elsewhere and in another age.

These two alternatives of living creatively or uncreatively can be very sharply contrasted. My theory would be much simpler than it is if one or other extreme could be expected to be found in any one case or situation. The problem is made obscure because the degree of objectivity we count on when we talk about external reality in terms of

<sup>1</sup> I have discussed this issue in detail in my paper 'Classification: Is there a Psychoanalytic Contribution to Psychiatric Classification?' (1959-64), and the interested reader can pursue this theme there.

an individual is variable. To some extent objectivity is a relative term because what is objectively perceived is by definition to some extent subjectively conceived of.<sup>1</sup>

While this is the exact area under examination in this book we have to take note that for many individuals external reality remains to some extent a subjective phenomenon. In the extreme case the individual hallucinates either at certain specific moments, or perhaps in a generalized way. There exist all sorts of expressions for this state ('fey', 'not all there', 'feet off the ground', 'unreal') and psychiatrically we refer to such individuals as schizoid. We know that such persons can have value as persons in the community and that they may be happy, but we note that there are certain disadvantages for them and especially for those who live with them. They may see the world subjectively and be easily deluded, or else while being firmly based in most areas they accept a delusional system in other areas, or they may be not firmly structured in respect of the psychosomatic partnership so that they are said to have poor coordination. Sometimes a physical disability such as defective sight or hearing plays into this state of affairs making a confused picture in which one cannot clearly distinguish between a hallucinating state and a disability based ultimately on a physical abnormality. In the extreme of this state of affairs the person being described is a patient in a mental hospital, either temporarily or permanently, and is labelled schizophrenic.

It is important for us that we find clinically *no sharp line* between health and the schizoid state or even between health and full-blown schizophrenia. While we recognize the hereditary factor in schizophrenia and while we are willing to see the contributions made in individual cases by physical disorders we look with suspicion on any theory of schizophrenia that divorces the subject from the problems of ordinary living and the universals of individual development in a given environment. We do see the vital importance of the environmental provision especially at the very beginning of the individual's infantile life, and for this reason we make a special study of the facilitating environment in human terms, and in terms of human growth in so far as dependence has meaning (cf. Winnicott, 1963b, 1965).

People may be leading satisfactory lives and may do work that is even of exceptional value and yet may be schizoid or schizophrenic. They may be ill in a psychiatric sense because of a weak reality sense. To balance this one would have to state that there are others who are

<sup>1</sup> See *The Edge of Objectivity* (Gillespie, 1960), among many works that deal with the creative element in science.

so firmly anchored in objectively perceived reality that they are ill in the opposite direction of being out of touch with the subjective world and with the creative approach to fact.

To some extent we are helped in these difficult matters by remembering that hallucinations are dream phenomena that have come forward into the waking life and that hallucinating is no more of an illness in itself than the corresponding fact that the day's events and the memories of real happenings are drawn across the barrier into sleep and into dream-formation.<sup>1</sup> In fact, if we look at our descriptions of schizoid persons we find we are using words that we use to describe little children and babies, and there we actually expect to find the phenomena that characterize our schizoid and schizophrenic patients.

The problems outlined in this chapter are examined in this book at the point of their origin, that is in the early stages of individual growth and development. In fact, I am concerned with a study of the exact spot at which a baby is 'schizoid' except that this term is not used because of the baby's immaturity and special state relative to the development of personality and the role of the environment.

Schizoid people are not satisfied with themselves any more than are extroverts who cannot get into touch with dream. These two groups of people come to us for psychotherapy because in the one case they do not want to spend their lives irrevocably out of touch with the facts of life, and in the other case because they feel estranged from dream. They have a sense that something is wrong and that there is a dissociation in their personalities, and they would like to be helped to achieve unit status (Winnicott, 1960b) or a state of time-space integration in which there is one self containing everything instead of dissociated elements that exist in compartments,<sup>2</sup> or are scattered around and left lying about.

In order to look into the theory that analysts use in their work to see where creativeness has a place it is necessary, as I have already stated, to separate the idea of the creation from works of art. It is true that a creation can be a picture or a house or a garden or a costume or a hairstyle or a symphony or a sculpture; anything from a meal cooked at home. It would perhaps be better to say that these things could be creations. The creativity that concerns me here is a universal. It belongs to being alive. Presumably it belongs to the aliveness of some animals

<sup>1</sup> Though this is inherent in Freud's hypothesis of dream-formation, it is a fact that has often been overlooked (cf. Freud, 1900).

<sup>2</sup> I have discussed a specific instance of this elsewhere (1966), in terms of obsessional neurosis.

as well as of human beings, but it must be less strikingly significant in terms of animals or of human beings with low intellectual capacity<sup>1</sup> than it is with human beings who have near-average, average, or high intellectual capacity. The creativity that we are studying belongs to the approach of the individual to external reality. Assuming reasonable brain capacity, enough intelligence to enable the individual to become a person living and taking part in the life of the community, everything that happens is creative except in so far as the individual is ill, or is hampered by ongoing environmental factors which stifle his creative processes.

In regard to the second of these two alternatives it is probably wrong to think of creativity as something that can be destroyed utterly. But when one reads of individuals dominated at home, or spending their lives in concentration camps or under lifelong persecution because of a cruel political régime, one first of all feels that it is only a few of the victims who remain creative. These, of course, are the ones that suffer (see Winnicott, 1968b). It appears at first as if all the others who exist (not live) in such pathological communities have so far given up hope that they no longer suffer, and they must have lost the characteristic that makes them human, so that they no longer see the world creatively. These circumstances concern the negative of civilization. This is looking at the destruction of creativity in individuals by environmental factors acting at a late date in personal growth (cf. Bettelheim, 1960).

What is being attempted here is to find a way of studying the loss by individuals of the creative entry into life or of the initial creative approach to external phenomena. I am concerned with aetiology. In the extreme case there is a relative failure *ab initio* in the establishment of a personal capacity for creative living.

As I have already indicated, one has to allow for the possibility that there cannot be a complete destruction of a human individual's capacity for creative living and that, even in the most extreme case of compliance and the establishment of a false personality, hidden away somewhere there exists a secret life that is satisfactory because of its being creative or original to that human being. Its unsatisfactoriness must be measured in terms of its being hidden, its lack of enrichment through living experience (Winnicott, 1968b).

Let us say that in the severe case all that is real and all that matters and all that is personal and original and creative is hidden, and gives no sign of its existence. The individual in such an extreme case would

<sup>1</sup> A distinction must be made between primary mental defect and clinical defect secondary to schizophrenia of childhood and autism, etc.

not really mind whether he or she were alive or dead. Suicide is of small importance when such a state of affairs is powerfully organized in an individual, and even the individual himself or herself has no awareness of what might have been or of what has been lost or is missing (Winnicott, 1960a).

The creative impulse is therefore something that can be looked at as a thing in itself, something that of course is necessary if an artist is to produce a work of art, but also as something that is present when *anyone* – baby, child, adolescent, adult, old man or woman – looks in a healthy way at anything or does anything deliberately, such as making a mess with faeces or prolonging the act of crying to enjoy a musical sound. It is present as much in the moment-by-moment living of a backward child who is enjoying breathing as it is in the inspiration of an architect who suddenly knows what it is that he wishes to construct, and who is thinking in terms of material that can actually be used so that his creative impulse may take form and shape, and the world may witness.

Where psychoanalysis has attempted to tackle the subject of creativity it has to a large extent lost sight of the main theme. The analytic writer has perhaps taken some outstanding personality in the creative arts and has tried to make secondary and tertiary observations, ignoring everything that one could call primary. It is possible to take Leonardo da Vinci and make very important and interesting comments on the relationship between his work and certain events that took place in his infancy. A great deal can be done interweaving the themes of his work with his homosexual trend. But these and other circumstances in the study of great men and women by-pass the theme that is at the centre of the idea of creativity. It is inevitable that such studies of great men tend to irritate artists and creative people in general. It could be that these studies that we are tempted to make are irritating because they look as if they are getting somewhere, as if they will soon be able to explain why this man was great and that woman achieved much, but the direction of inquiry is wrong. The main theme is being circumvented, that of the creative impulse itself. The creation stands between the observer and the artist's creativity.

It is not of course that anyone will ever be able to explain the creative impulse, and it is unlikely that anyone would ever want to do so; but the link can be made, and usefully made, between creative living and living itself, and the reasons can be studied why it is that creative living can be lost and why the individual's feeling that life is real or meaningful can disappear.

One could suppose that before a certain era, say a thousand years ago, only a very few people lived creatively (cf. Foucault, 1966). To explain this one would have to say that before a certain date it is possible that there was only very exceptionally a man or woman who achieved unit status in personal development. Before a certain date the vast millions of the world of human beings quite possibly never found or certainly soon lost at the end of infancy or childhood their sense of being individuals. This theme is developed a little in Freud's *Moses and Monotheism* (1939) and is referred to in a footnote which I consider to be a very important detail in Freud's writings: 'Breasted calls him "the first individual in human history"'. We cannot easily identify ourselves with men and women of early times who so identified themselves with the community and with nature and with unexplained phenomena such as the rising and setting of the sun, thunderbolts and earthquakes. A body of science was needed before men and women could become units integrated in terms of time and space, who could live creatively and exist as individuals. The subject of monotheism belongs to the arrival of this stage in human mental functioning.

A further contribution to the subject of creativity came from Melanie Klein (1957). This contribution results from Klein's recognition of aggressive impulses and destructive fantasy dating from very early in the life of the individual baby. Klein takes up the idea of the destructiveness of the baby and gives it proper emphasis, at the same time making a new and vital issue out of the idea of the fusion of erotic and destructive impulses as a sign of health. The Klein statement includes the concept of reparation and restitution. In my opinion, however, Klein's important work does not reach to the subject of creativity itself and therefore it could easily have the effect of further obscuring the main issue. We do need her work, however, on the central position of the guilt sense. Behind this is Freud's basic concept of ambivalence as an aspect of individual maturity.

Health can be looked at in terms of fusion (erotic and destructive drives) and this makes more urgent than ever the examination of the origin of aggression and of destructive fantasy. For many years in psychoanalytic metapsychology aggression seemed to be explained on the basis of anger.

I have put forward the idea that both Freud and Klein jumped over an obstacle at this point and took refuge in heredity. The concept of the death instinct could be described as a reassertion of the principle of original sin. I have tried to develop the theme that what both Freud and Klein avoided in so doing was the full implication of dependence

and therefore of the environmental factor (Winnicott, 1960b). If dependence really does mean dependence, then the history of an individual baby cannot be written in terms of the baby alone. It must be written in terms also of the environmental provision which either meets dependence needs or fails to meet them (Winnicott, 1945, 1948, 1952).

It is hoped that psychoanalysts will be able to use the theory of transitional phenomena in order to describe the way in which good-enough environmental provision at the very earliest stages makes it possible for the individual to cope with the immense shock of loss of omnipotence.<sup>1</sup> What I have called the 'subjective object' (Winnicott, 1962) becomes gradually related to objects that are objectively perceived, but this happens only when a good-enough environmental provision or 'average expectable environment' (Hartmann, 1939) enables the baby to be mad in one particular way that is conceded to babies. This madness only becomes true madness if it appears in later life. At the stage of infancy it is the same subject as that to which I referred when I talked about the acceptance of the paradox, as when a baby creates an object but the object would not have been created as such if it had not already been there.

We find either that individuals live creatively and feel that life is worth living or else that they cannot live creatively and are doubtful about the value of living. This variable in human beings is directly related to the quality and quantity of environmental provision at the beginning or in the early phases of each baby's living experience.

Whereas every effort is made by analysts to describe the psychology of the individual and the dynamic processes of development and defence organization, and to include impulse and drive in terms of the individual, here at this point where creativity either comes into being or does not come into being (or alternatively is lost) the theoretician must take the environment into account, and no statement that concerns the individual as an isolate can touch this central problem of the source of creativity.

It seems important here to refer to a special complication that arises out of the fact that while men and women have much in common they are nevertheless also unlike. Obviously creativity is one of the common denominators, one of the things that men and women share, or they share distress at the loss or absence of creative living. I now propose to examine this subject from another angle.

<sup>1</sup> This antedates the relief that comes from such mental mechanisms as cross-identification.

THE SPLIT-OFF MALE AND FEMALE ELEMENTS TO BE FOUND IN MEN AND WOMEN<sup>1</sup>

There is nothing new either inside or outside psychoanalysis in the idea that men and women have a 'predisposition towards bisexuality'.

I try here to use what I have learned about bisexuality from analyses that have gone step by step towards a certain point and have focused on one detail. No attempt will be made here to trace the steps by which an analysis comes to this kind of material. It can be said that a great deal of work usually has had to be done before this type of material has become significant and calls for priority. It is difficult to see how all this preliminary work can be avoided. The slowness of the analytic process is a manifestation of a defence the analyst must respect, as we respect all defences. While it is the patient who is all the time teaching the analyst, the analyst should be able to know, theoretically, about the matters that concern the deepest or most central features of personality, else he may fail to recognize and to meet new demands on his understanding and technique when at long last the patient is able to bring deeply buried matters into the content of the transference, thereby affording opportunity for mutative interpretation. The analyst, by interpreting, shows how much and how little of the patient's communication he is able to receive.

As a basis for the idea that I wish to give in this chapter I suggest that creativity is one of the common denominators of men and women. In another language, however, creativity is the prerogative of women, and in yet another language it is a masculine feature. It is this last of the three that concerns me in what follows here.

## CLINICAL DATA

*Illustrative Case*

I propose to start with a clinical example. This concerns the treatment of a man of middle age, a married man with a family, and successful in one of the professions. The analysis has proceeded along classical lines. This man has had a long analysis and I am not by any means his first psychotherapist. A great deal of work has been done by him and by each of us therapists and analysts in turn, and much change has been brought about in his personality. But there is still something he avers that makes it impossible for him to stop. He knows that what

<sup>1</sup> Paper read to the British Psycho-Analytical Society, 2 February 1966, and revised for publication in *Forum*.

he came for he has not reached. If he cuts his losses the sacrifice is too great.

In the present phase of this analysis something has been reached which is new *for me*. It has to do with the way I am dealing with the non-masculine element in his personality.

On a Friday the patient came and reported much as usual. The thing that struck me on this Friday was that the patient was talking about *penis envy*. I use this term advisedly, and I must invite acceptance of the fact that this term was appropriate here in view of the material, and of its presentation. Obviously this term, penis envy, is not usually applied in the description of a man.

The change that belongs to this particular phase is shown in the way I handled this. On this particular occasion I said to him: 'I am listening to a girl. I know perfectly well that you are a man but I am listening to a girl, and I am talking to a girl. I am telling this girl: "You are talking about penis envy."' "

I wish to emphasize that this has nothing to do with homosexuality.

(It has been pointed out to me that my interpretation in each of its two parts could be thought of as related to playing, and as far as possible removed from authoritative interpretation that is next door to indoctrination.)

It was clear to me, by the profound effect of this interpretation, that my remark was in some way apposite, and indeed I would not be reporting this incident in this context were it not for the fact that the work that started on this Friday did in fact break into a vicious circle. I had grown accustomed to a routine of good work, good interpretations, good immediate results, and then destruction and disillusionment that followed each time because of the patient's gradual recognition that something fundamental had remained unchanged; there was this unknown factor which had kept this man working at his own analysis for a quarter of a century. Would his work with me suffer the same fate as his work with the other therapists?

On this occasion there was an immediate effect in the form of intellectual acceptance, and relief, and then there were more remote effects. After a pause the patient said: 'If I were to tell someone about this girl I would be called mad.'

The matter could have been left there, but I am glad, in view of subsequent events, that I went further. It was my next remark that surprised me, and it clinched the matter. I said: 'It was not that *you*

told this to anyone; it is *I* who see the girl and hear a girl talking, when actually there is a man on my couch. The mad person is *myself*.'

I did not have to elaborate this point because it went home. The patient said that he now felt sane in a mad environment. In other words he was now released from a dilemma. As he said, subsequently, 'I myself could never say (knowing myself to be a man) "I am a girl". I am not mad that way. But you said it, and you have spoken to both parts of me.'

This madness which was mine enabled him to see himself as a girl *from my position*. He knows himself to be a man, and never doubts that he is a man.

Is it obvious what was happening here? For my part, I have needed to live through a deep personal experience in order to arrive at the understanding I feel I now have reached.

This complex state of affairs has a special reality for this man because he and I have been driven to the conclusion (though unable to prove it) that his mother (who is not alive now) saw a girl baby when she saw him as a baby before she came round to thinking of him as a boy. In other words this man had to fit into her idea that her baby would be and was a girl. (He was the second child, the first being a boy.) We have very good evidence from inside the analysis that in her early management of him the mother held him and dealt with him in all sorts of physical ways as if she failed to see him as a male. On the basis of this pattern he later arranged his defences, but it was the mother's 'madness' that saw a girl where there was a boy, and this was brought right into the present by my having said 'It is I who am mad'. On this Friday he went away profoundly moved and feeling that this was the first significant shift in the analysis for a long time (although, as I have said, there had always been continuous progress in the sense of good work being done).<sup>1</sup>

I would like to give further details relative to this Friday incident. When he came on the following Monday he told me that he was ill. It was quite clear to me that he had an infection and I reminded him that his wife would have it the next day, which in fact happened. Nevertheless, he was inviting me to *interpret* this illness, which started on the Saturday, as if it were psychosomatic. What he tried to tell me was that on the Friday night he had had a satisfactory sexual intercourse with his wife, and so he *ought* to have felt better on the Saturday, but instead of feeling better he had become ill and had

<sup>1</sup> For a detailed discussion of the mirror-role of mother in child development see Chapter 9.

felt ill. I was able to leave aside the physical disorder and talk about the incongruity of his feeling ill after the intercourse that he felt ought to have been a healing experience. (He might, indeed, have said: 'I have 'flu, but in spite of that I feel better in myself.')

My interpretation continued along the line started up on the Friday. I said: 'You feel as if you ought to be pleased that here was an interpretation of mine that had released masculine behaviour. *The girl that I was talking to, however, does not want the man released*, and indeed she is not interested in him. What she wants is full acknowledgement of herself and of her own rights over your body. Her penis envy especially includes envy of you as a male.' I went on: 'The feeling ill is a protest from the female self, this girl, because she has always hoped that the analysis would in fact find out that this man, yourself, is and always has been a girl (and "being ill" is a pregenital pregnancy). The only end to the analysis that this girl can look for is the discovery that in fact you are a girl.' Out of this one could begin to understand his conviction that the analysis could never end.<sup>1</sup>

In the subsequent weeks there was a great deal of material confirming the validity of my interpretation and my attitude, and the patient felt that he could see now that his analysis had ceased to be under doom of interminability.

Later I was able to see that the patient's resistance had now shifted to a denial of the importance of my having said 'It is I who am mad'. He tried to pass this off as just my way of putting things – a figure of speech that could be forgotten. I found, however, that here is one of those examples of delusional transference that puzzle patients and analysts alike, and the crux of the problem of management is just here in this interpretation, which I confess I nearly did not allow myself to make.

When I gave myself time to think over what had happened I was puzzled. Here was no new theoretical concept, here was no new principle of technique. In fact, I and my patient had been over this ground before. Yet we had here something new, new in my own attitude and new in his capacity to make use of my interpretative work. I decided to surrender myself to whatever this might mean in myself, and the result is to be found in this paper that I am presenting.

<sup>1</sup> It will be understood, I hope, that I am not suggesting that this man's very real physical illness, 'flu, was brought about by the emotional trends that coexisted with the physical.

*Dissociation*

The first thing I noticed was that I had never before fully accepted the complete dissociation between the man (or woman) and the aspect of the personality that has the opposite sex. In the case of this man patient the dissociation was nearly complete.

Here, then, I found myself with a new edge to an old weapon, and I wondered how this would or could affect the work I was doing with other patients, both men and women, or boys and girls. I decided, therefore, to study this type of dissociation, leaving aside but not forgetting all the other types of splitting.

*Male and Female Elements in Men and Women<sup>1</sup>*

There was in this case a dissociation that was on the point of breaking down. The dissociation defence was giving way to an acceptance of bisexuality as a quality of the unit or total self. I saw that I was dealing with what could be called a *pure female element*. At first it surprised me that I could reach this only by looking at the material presented by a male patient.<sup>2</sup>

A further clinical observation belongs to this case. Some of the relief that followed our arrival at the new platform for our work together came from the fact that we now could explain why my interpretations, made on good grounds, in respect of use of objects, oral erotic satisfactions in the transference, oral sadistic ideas in respect of the patient's interest in the analyst as part-object or as a person with breast or penis – why such interpretations were never mutative. They were accepted, but: so what? Now that the new position had been reached the patient felt a sense of relationship with me, and this was extremely vivid.

<sup>1</sup> I shall continue to use this terminology (male and female elements) for the time being, since I know of no other suitable descriptive terms. Certainly 'active' and 'passive' are not correct terms, and I must continue the argument using the terms that are available.

<sup>2</sup> It would be logical here to follow up the work this man and I did together with a similar piece of work involving a girl or a woman patient. For instance, a young woman reminds me of old material belonging to her early latency when she longed to be a boy. She spent much time and energy willing herself a penis. She needed, however, a special piece of understanding, which was that she, an obvious girl, happy to be a girl, at the same time (with a 10 per cent dissociated part) knew and always had known that she was a boy. Associated with this was a certainty of having been castrated and so deprived of destructive potential, and along with this was murder of mother and the whole of her masochistic defence organization which was central in her personality structure.

Giving clinical examples here involves me in a risk of distracting the reader's attention from my main theme; also, if my ideas are true and universal, then each reader will have personal cases illustrating the place of dissociation rather than of repression related to male and female elements in men and women.

It had to do with identity. The pure female split-off element found a primary unity with me as analyst, and this gave the man a feeling of having started to live. I have been affected by this detail, as will appear in my application to theory of what I have found in this case.

*Addendum to the Clinical Section*

It is rewarding to review one's current clinical material keeping in mind this one example of dissociation, the split-off girl element in a male patient. The subject can quickly become vast and complex, so that a few observations must be chosen for special mention.

(a) One may, to one's surprise, find that one is dealing with and attempting to analyse the split-off part, while the main functioning person appears only in projected form. This is like treating a child only to find that one is treating one or other parent by proxy. Every possible variation on this theme may come one's way.

(b) The other-sex element may be completely split off so that, for instance, a man may not be able to make any link at all with the split-off part. This applies especially when the personality is otherwise sane and integrated. Where the functioning personality is already organized into multiple splits there is less accent on 'I am sane', and therefore less resistance against the idea 'I am a girl' (in the case of a man) or 'I am a boy' (in the case of a girl).

(c) There may be found clinically a near-complete other-sex dissociation, organized in relation to external factors at a very early date, mixed in with later dissociations organized as a defence, based more or less on cross-identifications. The reality of this later organized defence may militate against the patient's revival in the analysis of the earlier reactive split.

(There is an axiom here, that a patient will always cling to the full exploitation of personal and *internal* factors, which give him or her a measure of omnipotent control, rather than allow the idea of a crude reaction to an environmental factor, whether distortion or failure. Environmental influence, bad or even good, comes into our work as a traumatic idea, intolerable because not operating within the area of the patient's omnipotence. Compare the melancholic's claim to be responsible for *all evil*.)

(d) The split-off other-sex part of the personality tends to remain of one age, or to grow but slowly. As compared with this, the truly imaginative figures of the person's inner psychic reality mature, interrelate, grow old, and die. For instance, a man who depends on younger



girls for keeping his split-off girl-self alive may gradually become able to employ for his special purpose girls of marriageable age. But should he live to ninety it is unlikely that the girls so employed will reach thirty. Yet in a man patient the girl (hiding the pure girl element of earlier formation) may have girl characteristics, may be breast-proud, experience penis envy, become pregnant, be equipped with no male external genitalia and even possess female sexual equipment and enjoy female sexual experience.

(e) An important issue here is the assessment of all this in terms of psychiatric health. The man who initiates girls into sexual experience may well be one who is more identified with the girl than with himself. This gives him the capacity to go all out to wake up the girl's sex and to satisfy her. He pays for this by getting but little male satisfaction himself, and he pays also in terms of his need to seek always a new girl, this being the opposite of object-constancy.

At the other extreme is the illness of impotence. In between the two lies the whole range of relative potency mixed with dependence of various types and degrees. What is normal depends on the social expectation of any one social group at any one particular time. Could it not be said that at the patriarchal extreme of society sexual intercourse is rape, and at the matriarchal extreme the man with a split-off female element who must satisfy many women is at a premium even if in doing so he annihilates himself?

In between the extremes is bisexuality and an expectation of sexual experience which is less than optimal. This goes along with the idea that social health is mildly depressive - except for holidays.

It is interesting that the existence of this split-off female element actually prevents homosexual practice. In the case of my patient he always fled from homosexual advances at the critical moment because (as he came to see and to tell me) putting homosexuality into practice would establish his maleness which (from the split-off female element self) he never wanted to know for certain.

(In the normal, where bisexuality is a fact, homosexual ideas do not conflict in this way largely because the anal factor (which is a secondary matter) has not attained supremacy over fellatio, and in the fantasy of a fellatio union the matter of the person's biological sex is not significant.)

(f) It seems that in the evolution of Greek myth the first homosexuals were men who imitated women so as to get into as close as possible a relationship with the supreme goddess. This belonged to a matriarchal

era out of which a patriarchal god system appeared with Zeus as head. Zeus (symbol of the patriarchal system) initiated the idea of the boy loved sexually by man, and along with this went the relegation of women to a lower status. If this is a true statement of the history of the development of ideas, it gives the link that I need if I am to be able to join my clinical observations about the split-off female element in the case of men patients with the theory of object-relating. (The split-off male element in women patients is of equal importance in our work, but what I have to say about object-relating can be said in terms of one only of the two possible examples of dissociation.)

#### SUMMARY OF PRELIMINARY OBSERVATIONS

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

I have made some observations on the first of these two, the clinical effects; now I wish to examine what I am calling the distilled male and female elements (not male and female persons).

#### PURE MALE AND PURE FEMALE ELEMENTS

##### *Speculation about Contrast in Kinds of Object-relating*

Let us compare and contrast the unalloyed male and female elements in the context of object-relating.

I wish to say that the element that I am calling 'male' does traffic in terms of active relating or passive being related to, each being backed by instinct. It is in the development of this idea that we speak of instinct drive in the baby's relation to the breast and to feeding, and subsequently in relation to all the experiences involving the main erotogenic zones, and to subsidiary drives and satisfactions. My suggestion is that, by contrast, the pure female element relates to the breast (or to the mother) in the sense of *the baby becoming the breast (or mother)*, in the sense that *the object is the subject*. I can see no instinct drive in this.

(There is also to be remembered the use of the word instinct that comes from ethology; however, I doubt very much whether imprinting is a matter that affects the newborn human infant at all. I will say here and now that I believe the whole subject of imprinting is irrelevant to the study of the early object-relating of human infants. It certainly has

nothing to do with the trauma of separation at two years, the very place where its prime importance has been assumed.)

The term subjective object has been used in describing the first object, the object *not yet repudiated as a not-me phenomenon*. Here in this relatedness of pure female element to 'breast' is a practical application of the idea of the subjective object, and the experience of this paves the way for the objective subject - that is, the idea of a self, and the feeling of real that springs from the sense of having an identity.

However complex the psychology of the sense of self and of the establishment of an identity eventually becomes as a baby grows, no sense of self emerges except on the basis of this relating in the sense of BEING. This sense of being is something that antedates the idea of being-at-one-with, because there has not yet been anything else except identity. Two separate persons can *feel* at one, but here at the place that I am examining the baby and the object *are* one. The term primary identification has perhaps been used for just this that I am describing and I am trying to show how vitally important this first experience is for the initiation of all subsequent experiences of identification.

Projective and introjective identifications both stem from this place where each is the same as the other.

In the growth of the human baby, as the ego begins to organize, this that I am calling the object-relating of the pure female element establishes what is perhaps the simplest of all experiences, the experience of *being*. Here one finds a true continuity of generations, being which is passed on from one generation to another, via the female element of men and women and of male and female infants. I think this has been said before, but always in terms of women and girls, which confuses the issue. It is a matter of the female elements in both males and females.

By contrast, the object-relating of the male element to the object presupposes separateness. As soon as there is the ego organization available, the baby allows the object the quality of being not-me or separate, and experiences its satisfactions that include anger relative to frustration. Drive satisfaction enhances the separation of the object from the baby, and leads to objectification of the object. Henceforth, on the male element side, identification needs to be based on complex mental mechanisms, mental mechanisms that must be given time to appear, to develop, and to become established as part of the new baby's equipment. On the female element side, however, identity requires so little mental structure that this primary identity can be a feature from very early, and the foundation for simple being can be laid (let us say) from

the birth date, or before, or soon after, or from whenever the mind has become free from the handicaps to its functioning due to immaturity and to brain damage associated with the birth process.

Psychoanalysts have perhaps given special attention to this male element or drive aspect of object-relating, and yet have neglected the subject-object identity to which I am drawing attention here, which is at the basis of the capacity to be. The male element *does* while the female element (in males and females) *is*. Here would come in those males in Greek myth who tried to be at one with the supreme goddess. Here also is a way of stating a male person's very deep-seated envy of women whose female element men take for granted, sometimes in error.

It seems that frustration belongs to satisfaction-seeking. To the experience of being belongs something else, not frustration, but maiming. I wish to study this specific detail.

#### *Identity: Child and Breast*

*It is not possible* to state what I am calling here the female element's relation to the breast without the concept of the good-enough and the not-good-enough mother.

(Such an observation is even more true in this area than it is in the comparable area covered by the terms transitional phenomena and transitional objects. The transitional object represents the mother's ability to present the world in such a way that the infant does not at first have to know that the object is not created by the infant. In our immediate context we may allow a total significance to the meaning of adaptation, the mother either giving the infant the opportunity to feel that the breast is the infant, or else not doing so. The breast here is a symbol not of doing but of being.)

This being a good-enough purveyor of female element must be a matter of very subtle details of handling, and in giving consideration to these matters one can draw on the writing of Margaret Mead and of Erik Erikson, who are able to describe the ways in which maternal care in various types of culture determines at a very early age the patterns of the defences of the individual, and also gives the blueprints for later sublimation. These are very subtle matters that we study in respect of *this* mother and *this* child.

#### *The Nature of the Environmental Factor*

I now return to the consideration of the very early stage in which the pattern is being laid down by the manner in which the mother in subtle ways handles her infant. I must refer in detail to this very special

example of the environmental factor. Either the mother has a breast that *is*, so that the baby can also *be* when the baby and mother are not yet separated out in the infant's rudimentary mind; or else the mother is incapable of making this contribution, in which case the baby has to develop without the capacity to be, or with a crippled capacity to be.

(Clinically one needs to deal with the case of the baby who has to make do with an identity with a breast that is active, which is a male element breast, but which is not satisfactory for the initial identity which needs a breast that *is*, not a breast that *does*. Instead of 'being like' this baby has to 'do like', or to be done to, which from our point of view here is the same thing.)

The mother who is able to do this very subtle thing that I am referring to does not produce a child whose 'pure female' self is envious of the breast, since for this child the breast is the self and the self is the breast. Envy is a term that might become applicable in the experience of a tantalizing failure of the breast as something that is.

#### *The Male and Female Elements Contrasted*

These considerations have involved me then in a curious statement about the pure male and the pure female aspects of the infant boy or girl. I have arrived at a position in which I say that object-relating in terms of *this pure female element has nothing to do with drive (or instinct)*. Object-relating backed by instinct drive belongs to the male element in the personality uncontaminated by the female element. This line of argument involves me in great difficulties, and yet it seems as if in a statement of the initial stages of the emotional development of the individual it is necessary to separate out (not boys from girls but) the uncontaminated boy element from the uncontaminated girl element. The classical statement in regard to finding, using, oral erotism, oral sadism, anal stages, etc., arises out of a consideration of the life of the pure male element. Studies of identification based on introjection or on incorporation are studies of the experience of the already mixed male and female elements. Study of the pure female element leads us elsewhere.

The study of the pure distilled uncontaminated female element leads us to BEING, and this forms the only basis for self-discovery and a sense of existing (and then on to the capacity to develop an inside, to be a container, to have a capacity to use the mechanisms of projection and introjection and to relate to the world in terms of introjection and projection).

At risk of being repetitious I wish to restate: when the girl element

in the boy or girl baby or patient finds the breast it is the self that has been found. If the question is asked, what does the girl baby do with the breast? – the answer must be that this girl element *is* the breast and shares the qualities of breast and mother and is desirable. In the course of time, desirable means edible and this means that the infant is in danger because of being desirable, or, in more sophisticated language, exciting. Exciting implies: liable to make someone's male element *do* something. In this way a man's penis may be an exciting female element generating male element activity in the girl. But (it must be made clear) no girl or woman is like this; in health, there is a variable amount of girl element in a girl, and in a boy. Also, hereditary factor elements enter in, so that it would easily be possible to find a boy with a stronger girl element than the girl standing next to him, who may have less pure female element potential. Add to this the variable capacity of mothers to hand on the desirability of the good breast or of that part of the maternal function that the good breast symbolizes, and it can be seen that some boys and girls are doomed to grow up with a lop-sided bisexuality, loaded on the wrong side of their biological provision.

I am reminded of the question: what is the nature of the communication Shakespeare offers in his delineation of Hamlet's personality and character?

*Hamlet* is mainly about the awful dilemma that Hamlet found himself in, and there was no solution for him because of the dissociation that was taking place in him as a defence mechanism. It would be rewarding to hear an actor play Hamlet with this in mind. This actor would have a special way of delivering the first line of the famous soliloquy: 'To be, or not to be . . .' He would say, as if trying to get to the bottom of something that cannot be fathomed, 'To be, . . . or . . .' and then he would pause, because in fact the character Hamlet does not know the alternative. At last he would come in with the rather banal alternative: '. . . or not to be'; and then he would be well away on a journey that can lead nowhere. 'Whether 'tis nobler in the mind to suffer / The slings and arrows of outrageous fortune, / Or to take arms against a sea of troubles, / And by opposing end them?' (Act III, Sc. 1). Here Hamlet has gone over into the sado-masochistic alternative, and he has left aside the theme he started with. The rest of the play is a long working-out of the statement of the problem. I mean: Hamlet is depicted at this stage as searching for an alternative to the idea 'To be'. He was searching for a way to state the dissociation that had taken place in his personality between his male and female elements, elements

## PLAYING AND REALITY

which had up to the time of the death of his father lived together in harmony, being but aspects of his richly endowed person. Yes, inevitably I write as if writing of a person, not a stage character.

As I see it, this difficult soliloquy is difficult because Hamlet had himself not got the clue to his dilemma – since it lay in his own changed state. Shakespeare had the clue, but Hamlet could not go to Shakespeare's play.

If the play is looked at in this way it seems possible to use Hamlet's altered attitude to Ophelia and his cruelty to her as a picture of his ruthless rejection of his own female element, now split off and handed over to her, with his unwelcome male element threatening to take over his whole personality. The cruelty to Ophelia can be a measure of his reluctance to abandon his split-off female element.

In this way it is *the play* (if Hamlet could have read it, or seen it acted) that could have shown him the nature of his dilemma. The play within the play failed to do this, and I would say that it was staged by him to bring to life his male element which was challenged to the full by the tragedy that had become interwoven with it.

It could be found that the same dilemma in Shakespeare himself provides the problem behind the content of the sonnets. But this is to ignore or even insult the main feature of the sonnets, namely, the poetry. Indeed, as Professor L. C. Knights (1946) specifically insists, it is only too easy to forget the poetry of the plays in writing of the *dramatis personae* as if they were historical persons.

## SUMMARY

1. I have examined the implications for me in my work of my new degree of recognition of the importance of dissociation in some men and women in respect of these male or female elements and the parts of their personalities that are built on these foundations.

2. I have looked at the artificially dissected male and female elements, and I have found that, for the time being, I associate impulse related to objects (also the passive voice of this) with the male element, whereas I find that the characteristic of the female element in the context of object-relating is identity, giving the child the basis for being, and then, later on, a basis for a sense of self. But I find that it is here, in the absolute dependence on maternal provision of that special quality by which the mother meets or fails to meet the earliest functioning of the female element, that we may seek the foundation for the experience of being.

## CREATIVITY AND ITS ORIGINS

I wrote: 'There is thus no sense in making use of the word "id" for phenomena that are not covered and catalogued and experienced and eventually interpreted by ego functioning' (Winnicott, 1962).

Now I want to say: 'After being – doing and being done to. But first, being.'

## ADDED NOTE ON THE SUBJECT OF STEALING

Stealing belongs to the male element in boys and girls. The question arises: what corresponds to this in terms of the female element in boys and girls? The answer can be that in respect of this element the individual usurps the mother's position and her seat or garments, in this way deriving desirability and seductiveness stolen from the mother.

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