

The Use of the Object: From Omnipotence to Symbolization

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Winnicott's paper entitled, "The Use of the Object and Relating through Identifications" is based on a paper read to the New York Psychoanalytic Society in 1968 and subsequently published in the *International Journal of Psycho-Analysis*, Vol 50, in 1969. It also appears as one of the chapters in *Playing and Reality*, (1971).

Winnicott begins his paper with a consideration of the place it has in the sequence of his development as an analyst. He admits that, when involved in an analysis, it is only recently that he has come to wait for the evolution of the transference and to recognize that making interpretations can delay or prevent change at a deep level in the patient. He writes that he now enjoys the patient's arriving at his or her own understanding more than having been clever. This is particularly the case when he finds himself responding to a patient's attack on him. In this case most interpretations can be construed by the patient as some form of retaliation so he advises us to wait. He argues that if interpretations should have an effect they must be related to the patient's ability to place the analyst outside the area of subjective phenomena. This implies that interpretations can be useful only when the analyst has achieved a separate existence in the patient's mind.

In this presentation I plan to critically review Winnicott's paper so that we may understand why it has not been fully appreciated. Our Joe Aguayo has written an interesting paper published in the *IJPA* regarding Winnicott's contributions and his relationship with the Kleinians (2002). He examines the reasons, mostly political, why Winnicott is seldom mentioned within the Kleinian literature. After I read Joe's paper I was glad to have chosen one of Winnicott's papers for this presentation and perhaps to contribute in small measure

to its appreciation. Since Winnicott initially developed within the Kleinian tradition I will mostly link his views to Klein's theory. I will also be relating some of his ideas to Matte Bianco's work, not that well known yet. His understanding of the different logic of our conscious and unconscious mind accounts for various pathological manifestations, among them the transference. Finally I will address the emergence of symbolization from primitive states of mind. I will briefly review a paper (Lowenstein, 1991) in which a patient is able to dream only late in her analysis. Throughout I will be highlighting similarities and differences between other analysts' views and Winnicott's.

In his paper on the use of the object Winnicott establishes a difference between object *relating* and object *usage*. In object *relating*, the object/analyst has become meaningful but the subject/patient has become depleted to the extent that projective mechanisms into the object/analyst have been operating. As he writes, something of the subject/patient is found in the object/analyst. In other words, object relating is an experience of the subject/patient as an isolate wherein he is not able to perceive the reality of the object/analyst as separate from him. When one *uses* the object, on the other hand, some additional features have to be added that involve the nature and the behavior of the object/analyst, e.g., the object has to be real, not only a bundle of projections. For Winnicott, psychoanalysis up to his time had been concerned only with object relating and it ignored all environmental factors. This meant that psychoanalysis had been concerned mainly with the nature of the subject/patient and his projections into the object/analyst. He argues that in examining object *usage* the ^{patient} analyst has to take into account the nature of the object, not as a projection, but as a thing in itself. In object use the subject recognizes the object's independent existence.

For Winnicott change from object relating to object use does not come about automatically through maturational process alone. The subject must develop a capacity to use objects. This is part of the change toward accepting the reality principle but is something that

depends as well on a facilitating environment. Between object relating and object use is the subject's placing of the object/analyst outside the area of the subject's omnipotent control. Only when the subject/patient destroys the object/analyst does he come to perceive it as an external phenomenon, not a projective entity. In other words, the patient destroys the object of his projections, to allow it to have a life of its own. But this entails a special capacity of the object to withstand and survive the patient's attacks. According to Winnicott, the sequence goes like this: patient relates to object/analyst, patient destroys object/analyst, object/analyst survives destruction by the patient. Patient says, "Hello object! I destroyed you, I love you. You have value for me because of your survival of my destruction of you. While I am loving you I am at the same time destroying you in (unconscious) fantasy" (p. 90). According to Winnicott the patient can now use an object/analyst which has survived. The subject/patient then starts a new life in a world of objects and stands to gain immensurably. But the price is an acceptance by the subject/patient and the object/analyst of the ongoing destruction in unconscious phantasy.

Does this mean that projections into the object are completely undesirable obstacles to perceiving the reality of the object? For Winnicott this is not so. He argues that what happens now with the projective mechanisms is that they assist in the noticing of what is there, even though the projections are not the reason the object is there. In projecting an unwanted feeling or part of the self the patient has to notice something similar in the object/analyst. This is because most projections are, even in limited measure, projections into reality. Thus, Winnicott concludes that projective mechanisms, even when overblown and distorting the reality of the object, still help in its recognition. However, as Winnicott points out, his views constitute a departure from a conception of external reality as viewed only in terms of the individual's projective mechanisms.

Seemingly agreeing with Klein on the death instinct, Winnicott claims that the first impulse in the patient's relation to the object is destructive. But even when the subject does not attempt to destroy the subjective object (projection material), destruction *turns up* and becomes a central feature. One of the obscurities in Winnicott's paper is in expressions such as *destruction turns up*, which contradicts his rejection of Klein's view of envy as a manifestation of the death instinct. His view of destruction reminds one of Sabina Spielrein's paper on destruction and creativity published in 1912, eight years before Freud wrote about the death instinct in "Beyond the Pleasure Principle." She argues that destructiveness is an intrinsic part of the creative process: the artist needs to destroy in order to give life to the work in progress. Likewise, Winnicott's thesis is that the destruction is not just reactive to external reality but that it plays a part in the making reality, placing the object outside the self. In this way the patient creates an internal map of the real, external object. The patient's experience, however, depends on the object/analyst's capacity to "survive" the destruction which, to him means, "not to retaliate." He writes, "If it is in an analysis that these matters are taking place, then the analyst, the analytic technique, and the analytic setting all come in as surviving or not surviving the patient's destructive attacks" (p.90). He makes the point that this survival does not depend so much on interpretive work but on the absence of a quality of retaliation in the analyst's attitude. In fact, interpretations over the patient's attacks can spoil the process since for the patient they can seem like a kind of self-defense, the analyst's parrying of the patient's attack. Winnicott suggests that the analyst wait till after the attack and then discuss with the patient what has been happening. "Without the experience of maximum destructiveness (object not protected) the subject never places the analyst outside and therefore can never do more than experience a kind of self-analysis, using the analyst as a projection of a part of the self....The patient can feed only on the self and cannot use the breast for getting fat."(p. 91). Under these circumstances the patient may even enjoy the analytic experience but, according to Winnicott, will not fundamentally change.

If we now contrast Winnicott and Klein, his ideas challenge Klein's view of aggression. He doesn't believe that a baby of a few days envies the breast. He doesn't think it is necessary to give inborn aggression more than its due in comparison with everything else that is inborn. But he claims that when the baby allows the breast an external position (away from the area of projection), destruction of the breast *has become a feature*, just as earlier he claims that destruction *turns up*. It is unclear from his writing whether he means actual aggression or unconscious aggressive phantasy because he qualifies, "I mean *the actual impulse to destroy*" (my italics). He contends that it is easy for a mother to react moralistically when her baby bites and hurts. If the object/mother manages to survive, however, destruction remains potential. He attempts to explain, "The word 'destruction' is needed not because of the baby's impulse to destroy, but because of the object/mother's liability not to survive, which also means to suffer change in quality, in attitude" (p. 93). In other words, for Winnicott the word "destruction" is needed because the object is vulnerable and conceivably might not survive in the mind of the baby. His reasoning seems to go like this: if the object/mother changes attitude and becomes vindictive toward the baby, this "good" object must have been destroyed by the actions of the baby and such actions can be considered "destructive." If the "good enough mother" stops behaving like one toward the baby, one would have to ask, what did the baby do to provoke that change? The answer is that the baby must have attacked the mother. Winnicott's reasoning places the emphasis on a mother who does not retaliate – the environmental position – but still gives the baby enormous power to change the object/mother in his mind – Klein's view.

Winnicott continues to write about aggression. Whereas inborn aggression may be variable in quality, the variations that arise out of the differences in the experiences of newborn babies are great. These variations depend on whether these babies are *carried through* (my italics) this very difficult phase. Winnicott argues that these babies are likely to be more

aggressive clinically than the ones that have not been *carried through* the phase well. Here he makes a complicated statement: for the babies for whom aggression is something that cannot be encompassed, this aggression becomes something that can be retained only in the form of a liability to become an object of attack. His is an interesting idea suggesting that babies whose mothers don't survive their attacks can become the victims of other people's attacks. This by virtue of the fact that the baby's own aggression has become inhibited or repressed and it thus tends to be projected onto the object. In relating to this now aggressive object they are likely to become their victim. This applies as well to envious attacks. If the person's own envy of an object remains unconscious, it will be projected and he is likely to become the victim of other people's envious attacks. This may be because of the unconscious guilt regarding the person's own unconscious envy. This guilt demands a punishment as a form of expiation. What could be more satisfying and fair to the subject's guilt regarding his unconscious envy than being the object of an object's envious attacks? A few years ago I wrote a paper entitled "Victims of Envy", (Safán-Gerard, 1991). In it I examined at greater length Winnicott's point about how the person who can't experience conscious envy and its pains can retain a liability to become a victim of other people's envious attacks.

When Winnicott attempts to outline the features of his theory of aggression, he argues that in orthodox theory aggression is reactive to the encounter with the reality principle, whereas for him the destructive drive creates the quality of externality. It is unclear from his writing whether he is talking about the aggressive impulse, aggressive action, or simply an unconscious, ongoing, destructive phantasy because at various times he seems to be referring to a variety of forms this aggression can take. He argues, for example, that there is no anger in the destruction of the object; in fact, there can be joy at the object's survival. This again brings to mind Spielrein's concept of aggression in the service of creative work. The artist is delighted to find that his or her aggression has given birth to the work. Klein

had expanded this notion by adding the reparative work that is carried out after the destruction, for her, unconscious. For Klein destructiveness and reparation are both necessary during creative work. For Winnicott, destruction seems to be enough to give a separate life to the art work. One might say that Winnicott views aggression as a pure impulse that gives rise to the object's external reality, and this aggression is not contaminated by what the object does or doesn't do. Like Klein, he argues that the object is always being destroyed in phantasy but his new idea – after Spielrein - is that this destruction makes the quality of the external object more real and contributes to object-constancy. Reactive aggression to the frustrations or attacks by the object is, for him, a more sophisticated concept.

In summary, Winnicott presents the view that some patients come to us and can use analysis after having used parents, siblings, teachers.. Others need us, analysts and therapists, to give them the capacity to use us. For these patients this is the analytic task. (In this regard this corresponds to a prevailing interest among analysts to track the fate of an interpretation. Was it used? Was it gone over and dismissed?) Winnicott keeps repeating that the object is always being destroyed. This destruction becomes the unconscious background for the patient's love of a real object/analyst, that is, an object outside the area of the patient's omnipotent control. A world of shared reality is created by a patient's unconscious attacks on the object and by the object/analyst that does not retaliate. This is an object which the patient can use and which can feed back other-than-me substance into the subject/patient. Unlike Klein who posits reparation as an expression of the patient's love toward the object, Winnicott seems to assume love for the object as a given, as part of our love/hate experiences. He writes that the patient says, "Hello object! I destroyed you, I love you...", placing love and hate side by side. After that statement, love toward the object seems to be only implied in the rest of his paper.

Winnicott's ideas can also be related to Klein's notion of the paranoid position and depressive position. In the paranoid position there is no separation between subject and object. Destructive impulses are projected into the object and the subject/patient expects to be attacked by the object, thus the persecution and paranoia. Klein also believes that in order to get help from an analyst the patient has to move to the depressive position, which allows him to feel separate from the analyst. Much of an analysis is spent distinguishing the features of the paranoid and depressive positions as revealed in the transference. Along with Freud, Klein's aim is always to move the patient to a more realistic view of the analyst. In this case, projections into the analyst have lessened and, with them, the identity confusion that results from projecting and losing parts of the self into the object/analyst. One of the differences with Winnicott's views is that whereas Klein stresses the emergence of love and concern when the object has gained a life of its own, Winnicott stresses the capacity of the subject to use the object. It is ironic that while Klein's views are criticized for her emphasis on aggression, it is she who stresses love and concern for the object, not Winnicott. In this regard he is more preoccupied with the subject/patient using the object/analyst and, for him, it is the object/analyst that needs to overcome his aggression and maintain love and concern for the subject/patient. The emergence of love and concern in the subject/patient seems is Klein's emphasis; the emergence of love in the object/analyst, Winnicott's.

At this point one would want to ask what happens before object usage. We have already discussed that before the patient can *use* the analyst he projects unwanted feelings or parts of the self onto the analyst, which leads to identity confusion and establishes a paranoid response vis a vis the analyst. In unconscious phantasy, however, the patient not only project but seeks to control and take possession of the mother in the analyst. Winnicott's ideas about the use of the object can be related to the capacity to symbolize which also comes about when there is true separation from an object. Projections into an object lead to omnipotence in that the subject/patient strongly believes he or she knows the object. This

has some basis in reality insofar as the patient's projections into the object/analyst of feelings and parts of the self belong to the self and the subject/patient may be somewhat aware of what these feeling and parts of the self are. The object/analyst in this case is mainly a repository of aspects of the patient and has little external reality for the patient. The move from omnipotence to symbolization runs parallel to the move from the paranoid to the depressive position. This is the classical Kleinian view represented by Klein herself and by Hanna Segal and her work on symbolization. As of late there are various psychoanalysts, including our Jim Grotstein, who have begun to see the value of the paranoid position. This is especially the case after Bion emphasized the flux between Ps- D, the fact that we oscillate between paranoid schizoid and depressive functioning. He proposed a double arrow between Ps and D. An immersion in the paranoid schizoid position and in a confusion with the object is seen as a rich and necessary exercise that engages the mind in its different strata, from the deeply unconscious to consciousness.

Ever since Ernst Kris wrote about regression in the service of the ego (1952), there have been attempts to apply his ideas beyond the understanding of the artist at work. For instance, Matte-Blanco, in his book Thinking, Feeling and Being (1988) distinguishes thinking and the logic of the conscious mind from feeling and the logic of the unconscious mind. He argues that in the conscious mind the relationship between cause and effect is typically ordered and asymmetrical and follows an Aristotelian logic: cause always precedes effect. This logic also accepts and relies on the existence of opposites. In the unconscious mind, on the other hand, cause and effect and opposites are experienced as the same, or equivalent, and their relationship is thus symmetrical. As Matte Blanco points out, all transference manifestations result from the symmetrization characteristic of the unconscious mind. The use of metaphors in creative writing is similarly derived from this process of symmetrization; objects who only have a single feature in common become equivalent or the same. The analyst performing some of the functions of the mother *becomes* the mother.

I am linking Winnicott and Matte Blanco because, in spite of their using such different concepts, they both seem interested in the layers of the mind and in events taking place at these different levels. Matte Blanco's symmetrization becomes the large obstacle to object use if we take the strict view that object use can only happen when the object's separateness is clear. But for this to happen, the subject ought to be functioning at the higher levels of the mind, in consciousness or near it. If we think about it further, we realize that the reality of the object is greatly enriched by the subject's immersion in deeper strata of the mind where subject and object are equivalent. Unlike Klein, Winnicott and Bion, Matte Blanco seems to understand feelings to be the product of the structure of our mind and how it functions. In my understanding of Matte Blanco the subject is not trying to control or possess the object, for example. What happens between subject and object is the byproduct of the structure of the mind and its functions. Yet, for all the purity of Matte Blanco's views I sense a congruence between Matte Blanco and Winnicott in that they both seem to recognize, Matte Blanco with his theory and Winnicott with his intuition, that one can be simultaneously operating at different levels of mind. We are also back to Kris's regression in the service of the ego, written in 1952 from an ego psychological perspective. Kris considers the incursions into the deeper layers of the mind a necessary feature of creativity and I believe that the same applies to the capacity to establish intimate relationships. The on and off submersion in confusion with the object leads to a renewed emergence into the consciousness of its externality and separateness. We can now move to the notion of symbolization as it emerges from these deeper levels of the mind.

Isolated analysts such as Susan Deri (1984) in Los Angeles, some of the contemporary Kleinians, and child analysts working with autistic children have conceived of the analyst's task as helping the patient move from omnipotence to symbolization. This can be considered an alternative vertex to helping the patient move from Ps to D functioning. A

couple of years ago I discussed a paper that Dr. Era Loewenstein, a colleague from SF, presented at the 1999 Winter Meeting of the American Psychoanalytic entitled, "From omnipotent phantasy to symbolization: on developing the capacity to dream". She describes in some detail the sessions and circumstances that preceded her patient's first dream in the sixth year of analysis. Loewenstein was interested in the features of the analysis that can account for the patient's new capacity to dream and remember her dream. She focused quite a bit on her own counter transference reactions toward her ungratifying patient who certainly didn't have any interest in using her analyst. For the discussion of her paper I went back to one of Klein's seminal paper, "The importance of symbol formation in the development of the ego" (1930). Klein describes her work with Dick, a psychotic child, and outlines the steps that were necessary for symbolization to take place. Klein's paper helped me understand some of the steps Loewenstein had to take to help her patient make the transition from omnipotent thinking to symbolization. At times Loewenstein found herself feeling helpless and useless, the patient's feelings.

Loewenstein's patient often devalued her and the analysis which led her to a concerted effort to examine and metabolize her own counter transference feelings in order to prevent a "tit for tat" reaction of emotionally withdrawing from her patient. She writes, "...she was pushing me away, displacing and devaluing me, and moreover, depriving me of my 'rent payments' so to speak." On the other hand, one might see the patient's urgent action plan during the analyst's vacation "to move into a house with a roommate" as an acting out of her wish to get inside the mother in the transference, especially during her analyst's absence where she felt she had no control over her whereabouts. As we can see, this patient was simultaneously replacing the analyst and getting inside the analyst. I believe that both interpretations would be correct because both dynamics may be simultaneously present at different strata of the mind. Getting inside the analyst may take place at a deeper, unconscious and less differentiated level of mind whereas replacing the analyst implies a

certain awareness of the analyst's separateness more characteristic of higher functioning. Nevertheless, at this point in her analysis Loewenstein's patient was far from acknowledging consciously her own wish for closeness to her analyst. Wanting closeness could only happen if her patient was moving toward the depressive position, allowing the analyst her separateness, and coming to value her.

We can reassess the importance of Winnicott's paper on the use of the object and especially his emphasis on an analyst who does not retaliate for some of the many forms that an attack on the analyst can take, such as devaluation and dismissal. The week after being back from vacation Loewenstein saved her patient's Monday hour in spite of the fact that her patient had missed six Monday appointments and erased all memory of her sessions with her analyst during Loewenstein's vacation. This episode eventually helped her patient develop an awareness of her analyst as a separate person who does not retaliate. At the same time Loewenstein felt freer to present to the patient the necessary interpretation, namely, how the patient tried to control the analyst 'yanking her around', and how the patient attempted to penalize the analyst for not being under her patient's control. Now that Loewenstein could show concretely her commitment and devotion to her patient, she could also be firmer with her and this eventually proved to have a great impact on her patient. Winnicott would especially have appreciated Loewenstein's acknowledgement of her own achievement: "By avoiding a "tit for tat" enactment with her (patient) I was able to carve, almost to pry open, a space between us where symbols and meanings could begin to develop". (1999, p. 9).

After the saved hour the analyst came full circle to state to her patient, with authority, that her patient's actions represented feelings and thoughts she had about her analyst, something the patient had up until then dismissed or flatly rejected. She also came closer to the conviction that all of her patient's actions had to do with her, Loewenstein. In my discussion I

suggested that her conviction of being the most important person in her patient's mind was arrived at after she won her own battle with her destructive retaliatory feelings toward her patient. In turn, as her patient was moving away from idealization and denigration of her analyst she could also come to a fair assessment of her boyfriend. This could only happen because, as she was placing her analyst out of her omnipotent control she was also putting him out of her omnipotent control. The patient had, in her words, taken a 'truth serum' the night before when she had written down all her thoughts about their relationship, the ways in which her boyfriend was good to her, and the ways in which he was failing her. As Winnicott would say, she was on her way to "using" him.

The events of the weekend and the list about her boyfriend constituted the dream thoughts that led to the patient's dream of flying above the ground. Even though in her actions she seemed to be moving toward depressive functioning that involved object use, in the dream she symbolized in full force the omnipotent solution to separation and loss: control of the object. It is sometimes disconcerting that at any given point we can have evidence of psychological development and symbolic thinking while at the same time we have in a dream the expression of omnipotent phantasy that would make the dream appear "regressive." Facing these two discrepant sides of a patient's mind creates a state of dissonance in the analyst and the danger of changing one or the other to create a more integrated, consonant view of him or her. The analyst may miss an opportunity to make the patient aware of these discrepancies within herself, namely, between the she who wants to learn what is in her boyfriend's and analyst's mind and the she who can't tolerate her analyst's or her boyfriend's separation and wants to magically find and control what is in their minds. By the analyst's pointing out of these discrepancies, these splits can be brought closer together so that, in time, a more mature solution may prevail. In addition, and what is seldom given enough importance, the analyst can help the patient appreciate and value the

complexity of his or her mind. This is a goal for all patients because it may lead to their increased capacity to use themselves both in relationships with others and in creative work.

We need to thank Winnicott for his seminal contribution with his use of the object paper. I hope to have shown how it has paved the way for many of the new ideas in contemporary psychoanalysis and for the new interest in the understanding of introjection.

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