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## TACTICS AND TECHNIQUES IN PSYCHOANALYTIC THERAPY

Volume III: The Implications of Winnicott's Contributions

edited by *Peter L. Giovacchini*

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"Irene is a name for a city in the distance, and if you approach, it changes" (p. 99). Thus does Italo Calvino (1974) muse on the question of desire, not necessarily desire in the sense of sensual gratification but desire for the "known" object—the end-quest of learning, the mastery of what was once hidden. Just so does this collection of essays attempt to explore new routes in the psychoanalytic journey, using as a guide the work and thought of Donald Winnicott. The city of thought that Winnicott stumbled on, and likewise built, is approached with varying degrees of accuracy. And still we can ask, can there be accuracy in psychoanalytic discourse? Or can there be only stagnation or creativity, both cloaked in the language we have been taught to speak? Winnicott used that language and yet added to it. He kept it alive. And he kept himself and the therapy he practiced from stagnation.

In this volume, Clare Winnicott's "Reflections" help us appreciate Winnicott as a playful man, uninterested, consequently, in merely being sane; overly influenced, perhaps, by women—a person both distracted and yet attached; comfortable with what we call the unconscious. A man unassuming in manner yet bold in speculations.

Robert Rodman's chapter, "Insistence On Being Himself," is a sophisticated reading of Winnicott's major innovative concepts. Winnicott "hated" the dogmatic, since it issues into the stereotypical, which guarantees that individual therapeutic creativity is lost. He spoke of the need for clinicians to find their own language even for "old" concepts. All this followed from his sense of the sacredness of each person's inner core, what he called their true self. This idea, of course, applies to both patient and therapist. Therapy,

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Winnicott believed, must help the patient to play, meaning, I believe, to reach that sacred inner core in such a way that the world becomes enjoyable and the self valuable. Rodman's essay explores these points interestingly and helps place Winnicott in perspective for his Kleinian readers and critics. But Winnicott is more the poet of the "play-space" of mind than a diagnostician of its hypothetical functions.

"A Splash of Pain in His Style," by Anne Clancier and Jeannine Kalmanovitch is a suggestive (one is tempted to say epigrammatical) encounter of these writers with Winnicott's work. Winnicott, in his reflections on himself, comes through sprightly in this essay. Peter Giovacchini's chapter, "Interpretations, An Obscure Technical Area," is a clear and lucid reading of Winnicott's interactive manner of relating to patients, which broadens the standard notion of interpretation from individual to contextual.

Thomas Ogden's essay, "On Potential Space," is a sophisticated exploration of the process of projective identification. Those familiar with Ogden's work will recognize this chapter, yet a rereading of his perceptive thoughts is still rewarding. "Interpersonally," Ogden notes, "projective identification is the negative of playing; it is a coercive enlistment of another person to perform a role in the projector's externalized unconscious fantasy" (p. 107). I was reminded of the work of François Roustang and his paradoxical observations on the necessity of theory models and their simultaneous danger: that is, the patient is fitted to a preformed pattern and the analyst is confirmed in his preformed convictions. One finds what one already knew was there.

Arnold Modell writes about creativity and the use of the object. He gives substance to Winnicott's thoughts on the experience that the world is much more waiting to be created, by each individual, than it is waiting to be acknowledged, a knowable thing-in-itself. "Thus," Modell writes, "the core of creativity that arises in infancy and extends into adult life depends upon the shared interplay of the world view of others" (p. 123). Creativity depends, as Winnicott often noted, on the patient's finding life worthwhile and not simply instinctually gratifying; it depends on one's not

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merely coming to terms with reality but loving it because one feels one's own hand in its creation.

Martin Weich's chapter, "The Good Enough Analyst," suffers from brevity and is consequently too general. Weich does substantiate his reading of Winnicott in his insistence that treatment is to follow the patient, and not the other way around. Masterfully presented, Philip Giovacchini's chapter, "Absolute and Not Quite Absolute Dependence," is one of the most insightful essays of this collection. It is a perceptive and sensitive exploration of what he calls the "not quite" zone. "A not quite zone is a space that is constructed within the treatment frame...it involves the dissolution through play, of the patient's rigid perception of reality..." (p. 158). Philip Giovacchini spells out in this chapter some of the detail that Winnicott did not supply in his concept of therapeutic play, that is, the psychoanalytic journey from absolute, or near so, dependence, to less dependence, and on to playful interactive distance. His clinical vignettes are focused and helpful, and his understanding of the "not quite" zone, as a precursor to the transitional zone, gives a reading to Winnicott's concept that clarifies its clinical applicability productively.

Charles Turk's chapter speaks in a sound, if somewhat uninspiring way, to the understanding of the holding environment and the concept of transference. The essay would have benefited significantly had the author been able to reveal more of his personality and personal reactions in his clinical discussions.

The final three chapters are by Renata De Benedetti Gaddini, L. Bryce Boyer, and Peter Giovacchini. I found Gaddini's the most disappointing essay of this collection. Her presentation is disjointed; she fails to develop her thesis, which is "Regression and Its Uses in Treatment"; and she seems oddly captivated by so many other authors that the essay is burdened by excessive quotations.

Boyer's chapter on regression is both learned and helpful. Examining the precursors of transitional objects, those earliest of interactive experiences of the baby and the holding environment, enables the reader to appreciate the delicacy of working with

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severely regressed patients. Boyer correctly notes, "To a degree that has been under recognized...the optimal availability of the analyst is based on his emotional sensitivity and security and his responsiveness to a wide range of emotions" (p. 208). Boyer complements his theoretical observations with case material; I would have liked more elaborated discussions. Such case discussions indicate Boyer's success in understanding this most crucial aspect of our work, that is, our personal availability to the patients and to the therapeutic personal space in which analysis takes place.

Peter Giovacchini ends this collection with a chapter on "Regression Reconstruction and Resolution." This is a superb study clearly differentiating the role of the object mother (analyst) of needs and the environmental mother (analyst), who supports and fosters ego integration. Speaking of the regressed patient, the author spells out in graphic and pervasive detail the demands of the regressed patient for understanding, for constant attentiveness, for listening to their unending bodily complaints, and their need for love. Both the patient's demands and the analyst's emotional intellectual responses are spoken to, and, as such, the chapter deserves a careful and reflective reading.

These essays can be read at various times and in varying order. I am tempted to say that they might best be read that way. There is much that is informative and evocative in these pages that deserves sensible reflection and attentive application.

#### REFERENCE

Calvino, I. (1974). *Invisible cities*. New York: Harcourt Brace Jovanovich.