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Note on Where we live creatively **Z. Loparic** IBPW/IWA

Winnicott established a clear contrast between his concept of creative living, whereby the individual builds a life that, whatever the suffering, is worth living, and the Freudian concept of adaptive living for the sake of maximizing sexual pleasure in the face of the restrictions imposed by society (repression) or by reason (sublimation). Repression burdens genital-based object relations and, for Freud, generates conflicts in one's internal reality, that is, between the instances of the psychic apparatus, resulting in the inhibition of impulses, impoverished living experiences (except in disembodied fantasies) and various defensive mechanisms that characterize individual and collective neurosis. Sublimation, in turn, forces a transition from the maternal area of sensuality to the domains of the father and of reason, populated by loftier objects, through subjection to the law of the father (social impositions) or to the ideals of practical reason. These ideals are unintegrated mental configurations and should be seen, Winnicott suggests, as forms of the false self – a complacent personality that lives *stereotypically* in and through the mind, with no intimate relationship with body functions or even with the imagination.

The Winnicottian life worth living comprises a series of achievements over the course of maturation, a process that extends from birth to death. The aggregate of achievements of this maturational saga is the creative life, i.e., the fulfillment of the potential one inherits from human nature itself, always depending on a facilitating environment. This potential includes innate capacities for accomplishment (primary creativity, talents etc.) as well as innate tendencies for physical growth, emotional and mental development, and socialization. Above all, it includes the tendency to integrate all acquisitions in a united and autonomous personality, contingent on the existence of a spontaneous, true self endowed with primary creativity. All the details of life, all the things that baby, child and adult may come across, everything that is found, every usable material – a bit of cloth, a piece of wood, one of Beethoven's later quartets – acquires personal meaning. Everything that is found is created, that is, made or remade, in one way or another. But where exactly does this process of creative integration and creative doing

begin? What are the levels and main stages of this process? More: where exactly is the person when making his or her own life?

Infants do not start out by living creatively, acting on their own. They begin alone, with no external relationships, unable to do anything in the first person, or even getting in touch with someone, whether the mother or whoever takes her place, because they depend on her to emerge out of their aloneness, start becoming and continue to be. Here, the verb "to be" does not mean to be this or be that, but to be identical to, in the sense of primary identification, as Winnicott calls it, whereby the baby is the mother. And the mother is the baby, or part of the baby – the part of him/herself that it placed in her. In other terms, as its subjective object and the first manifestation of its primary creativity. Thus, in this initial merging, the baby and the mother are one and the same, so to speak, a two-in-one. The mother takes everything upon herself: it is she who maintains the constancy of contact and of the state of being, and it is she who ensures the duration, the monotonous continuity of time and the unimpeded contiguity of space. There is no waiting for, no distance to overcome. The mother fulfills, without the baby knowing, the needs of its body. The baby sucks on itself. The mother protects the baby from intrusions from the outside world. In this simple, undifferentiated, peaceful and secure state of contact and merging with the mother, the baby begins to feel like someone, i.e., a unit self and an omnipotent operator of spontaneous acts, with absolute control over everything it encounters. Every facet of being in the mother's lap obeys the baby's magic. The baby lives in a state of illusion, in an illusion of omnipotence, in a bell jar of pure subjectivity and projections still lacking an external object, in a life that is not yet a life with someone, alongside things. To be sure, all this assumes the mother is in the state of primary maternal preoccupation, that her lap is a setting absolutely adapted to the baby's needs, that she is doing everything for her child.

But this simple state of being – in steady, cushiony contact – cannot last. The mother eventually comes out of the state of primary maternal preoccupation and begins to fail to adapt. The relationship of dependence changes and the two-in-one begins to decouple. The mother is absent for longer periods, stays further away, is no longer the same person the baby once projected. Time ceases to be mere duration and takes on the dimensions of the past, of what is no longer, and of the future, of what is being waited for. Space, in turn, is already three-dimensional and distances now have to be overcome. The body grows and makes itself noticed in the excited states that emerge from its needs. The details of each situation are experienced as strange. As all this happens, the baby senses it is no longer in total control and becomes aware of its earlier dependence. It experiences dis-illusionment, which can be accompanied by distress, anguish, fear and impotence, and even anger and hatred.

In this modified relationship of dependence, the baby is inevitably faced with a new and complex task: freeing itself from absolute dependence, integrating favorable developments as its own, and enabling itself to deal with the losses they entail. Here, as before, the environment can and should help. (The mother's sense of responsibility stems from the ethics of care, not from the ethics based on law.) And a period of transition begins, from the bell jar of subjective life to living in a shared, objectively perceived world – a journey that, in health, never ends and that essentially consists in replacing the initial merging, facilitated by the mother, with the integration produced gradually by the now-established, spontaneous and creative unit self, which navigates the body functions and establishes imaginative relationships with the world these functions seek to reach. During this period of dismantling the original two-in-one in the now-multidimensional space and time and in the object relationships of the external world, the innate tendency towards integration comes into play, bringing together what remains to be gathered and governing the entire maturational process. A whole person emerges, able to relate with the world beyond his or her reach, with its constant properties. The stable, integrated self begins sharing its external world, albeit subjectively tinted (colors that are lost in the extreme theoretical and practical objectification of the world brought by technology), with other people, and by contrast creates the personal world – "internal" in psychoanalytic jargon – a world that, to begin with, it brings along in its belly. The mind also develops along the way, sometimes as a mother substitute. More complex identifications, including cross-identifications, begin: very early on, when still suckling, the baby may have put its finger in the mother's mouth; now, it creates the fantasy and the active disposition to put itself in the mother's shoes, allowing – in fact, hoping - that she does the same or, rather, keeps doing the same. On that path, the child creates and assumes the sense of responsibility, the *foundation of the ethics of care*, another essential piece of the Winnicottian paradigm. It socializes. It creates a family and enters into a genital-based "three-body relationship". As an adult, he or she will work, diligently, perhaps on an assembly line or as a cook, and will marry, putting to good use the acquired capacity for cross-identification. And will make science, or philosophy, or participate in creating democracy, fighting for it and becoming involved in cultural activities. Eventually, he or she may into therapy.

Among all these achievements of creative living -a basic concept unique to the Winnicottian paradigm - one of the most important, from a maturational standpoint, is the capacity to play. Playing is a basic form of creative living not just for children but for every human being, which starts with the baby creating and using its first *non-me possessions*, which open the bell jar of the subjective world, and which are, by virtue of this, called *transitional*

objects. In play, the baby gathers objects or phenomena from external reality and uses them on behalf of some derivative sample of personal reality, without the influence of instinctual excitements. More precisely, the external phenomena, which are not yet the impersonal objects of science and technology, are manipulated in the service of dreaming and enwrapped with the meanings and feelings of dreams. These are not, as in Freud, cryptographic fulfillments of desire (metapsychologically: libido drive), a proxy for body instincts, but the infinitely rich imaginative elaboration of object relationships.

Direct outcomes of solitary play are shared play and cultural experiences. In the field of music, Winnicott observes, the child probably begins by screaming, banging cans, and blowing an old horn long before reaching, on the way to the maturational achievement – which has to be personal, creative and not something instilled – the capacity to appreciate or, perhaps, sing *Voi che sapete*. We have here another pillar of the Winnicottian paradigm, absent from the entire literature of orthodox psychoanalytic. As James Strachey observed, and Winnicott agrees, there is no place for cultural experiences in the topology of the mind or in Freud's theory of sublimation. Cultural experiences are a creative way of life that is neither dreaming nor object relations with external reality. Yet, at the same time, they are both. Dreams adjust themselves into object relationships in the real world and living in the real world adjusts into the dream world. In this case, the material of experience is the cultural background of humanity, preserved in myths, literature, religion, the arts, and also in the history of science and philosophy. In cultural life, as in healthy living in general, maturation takes the form of a creative interchange between internal and external reality, one enriching the other.

Where does this interchange take place, this process of reintegrating the two-in-one that no longer exists into a personally fulfilling life? Here we have Winnicott's central question for the last 20 years of his life. The interchange does not take place in the internal world, whether Freudian (that of neuroses, dominated by the mechanisms of displacement and condensation triggered by internal conflicts) or Winnicottian (that of spontaneous imaginative elaboration of body functions, free from instinctual tensions); nor does it take place in the world of external reality, whether Freudian (that of paternal, social or reason-driven impositions) or Winnicottian (that of objectively perceived reality subjectively set). What, then, is the area of living in which we identify with one another? Where did we roam when we went from the mother's lap to the double bed? Or to the concert hall? Where do we find ourselves when we cheer for a player at Rolland Garros? Where do the patient and the therapist meet?

Winnicott's answer, which is a challenge for commentators and philosophers, is: we are in a place of the space-time continuum called, for short, *potential space*. This is a space that allows us to shorten or even eliminate the distance of what we seek to achieve with something we have at hand. This a time that is no longer static, but *ecstatic* (to recall Heidegger), a duration articulated in past, present and future, which we can fill with an infinite variety of dreamt details, joining what no longer exists – the experienced past – and what we can only anticipate with something experienced now. Gradually, we acquire and maintain the freedom to "cover" every external event. Our perception becomes almost synonymous with free creation. Creative living, therefore, takes place in a *multidimensional opening* or *clearing* (Heidegger's terms, again) that is part of the acquired structure of one's personality, and allows us to populate the real world with exemplars of our personal life and to transform tradition, having in play and in cultural experiences its overriding sophistications. Therapy, which is one sophistication, takes place, says Winnicott, in the overlap of the patient's and the therapist's areas of play. Or we could say: in the superposition of each one's potential space and time, and, also, in interrelating in terms of cross-identification.

Here new questions arise: where precisely is the origin of the potential space, how is it developed and kept open until one's death?

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