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Fifty years after "good enough" Donald Woods Winnicott (1896-1971)

Cinquenta anos após o "suficientemente bom" Donald Woods Winnicott (1896-1971)

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Donald Woods Winnicott (Figure 1) was born in Plymouth, England, on April 7th, 1896, and died fifty years ago, on January 25th, 1971, in London, at the age 74. He is best known for his studies on children psychological development, but he was an adult psychoanalyst as well. He was the youngest of three children. His mother had a tendency towards depression and this experience had a major influence on Winnicott's work[1]. After serving as a medical officer during World War I, he completed his medical training at St Bartholomew's Hospital. In 1922, he became a full member of the Royal College of Physicians and chose pediatrics as his specialty[2]. The interest in psychoanalysis came after reading Freud's *The Interpretation of Dreams*. He starts his psychoanalytic training in 1929, having Melanie Klein as a supervisor. But instead of following Kleinian's unconscious fantasies or even Anna Freud's focus on the ego, Winnicott chooses non-alignment with these two groups and becomes part of the Middle Group of the British Psycho-Analytic Institute, a so-called independent branch. John Bowlby, who worked on attachment theory, was also part of this group.

Winnicott presented several new concepts on children development, mainly involving the mother-child bond and the environmental influence. He claimed that "the foundations of health are laid down by the ordinary mother in her ordinary loving care of her own baby"[3], central to which was the mother's attentive holding of her child. Mother, to Winnicott, can be the biological mother, an adoptive mother, as well as the father or any other primary caregiver. By "good enough" mother, Winnicott means a caregiver who recognizes how fragile a baby can be and who is aware of his necessities while meeting only part of them. They fail and, by failing, they allow their baby to find his way of doing things. Also, she allows her baby to be angry, not being mad or moralistic about this behavior.

Figure 1. Donald Woods Winnicott (1896-1971). Courtesy of Winnicott Trust/Welcome Collection, London.

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Yet, "good enough" mothers make sure their children are not too compliant. Winnicott was very scared of the so-called "good children", the ones that followed all the rules. He saw them as children of parents unable to tolerate bad behavior, who imposed rules in an early and strict way. This would lead to the emergence of a false self – a persona that would be outwardly compliant, outwardly good, but was suppressing its vital instincts. The primordial act of parental health for Winnicott is simply to be able to tune out of oneself for a time in the name of empathizing with the ways and needs of a small, mysterious, beautiful, fragile person whose unique otherness must be acknowledged and respected in full measure. Good enough parents are aware of the utmost importance of their jobs as parents. Winnicott called parenting "the only real basis for a healthy society, and the only factory for the democratic tendency in a country's social system".

In the last decade, research findings on the importance of a "good enough" mother have accumulated, mainly about the deleterious effects of the exposure to early life stress (ELS). Studies have found that children exposed to abuse and neglect had an increased risk for psychiatric diseases, such as mood and anxiety disorders, with a worse prognosis. They were also at greater risk for clinical diseases as well, such as diabetes and asthma. ELS is associated with changes in neuroendocrine and neurotransmitter systems, alterations in brain areas such as the hippocampus and increase in pro-inflammatory cytokines[4].

For Winnicott, the psychotherapy setting would be a substitute holding environment based on the mother/infant bond[2]. "A correct and well-timed interpretation in an analytic treatment gives a sense of being held physically that is more real than if a real holding or nursing had taken place. Understanding goes deeper"[5]. Winnicott was very aware of the analyst's role. For him, the analyst must work "toward resolution of his psychic challenges to create a place inside himself from which to receive the patient's experience"[6]. He was also very aware of the patients' needs, even to recognize that a specific patient would not benefit from standard psychoanalysis at a given moment. He would adapt his therapeutic process to be what the patient needed him to be. To Winnicott, "changes come in an analysis when the traumatic factors enter the psychoanalytic material in the patient's way, and within the patient's omnipotence"[7]. On interpretation, he stated: "I think I interpret mainly to let the patient know the limits of my understanding. The principle is that it is the patient and only the patient who has the answers"[3]. He said analysts should be aware of their personal needs to interpret as well as allow a natural process to occur to not be traumatic to the patient[6].

Winnicott's unique views on treating patients and on children's emotional development may help not only psychoanalysts but every psychotherapist and psychiatrist. The final analysis is that Winnicott's work is much about two imperfect people creating a transitional holding space that allows care to take place. Mental health care providers need to acknowledge that although all patients, as children, have necessities, these are different from person to person. They must be aware of the necessities of every patient towards him, not to meet them all, since it is not desirable or even possible, but to meet enough part of them.

INDIVIDUAL CONTRIBUTIONS

Mariana C. Cabo – Contributed by drafting the editorial and writing the final version of the manuscript; submitted the manuscript.
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CONFLICTS OF INTEREST

The authors have no conflicts of interest to declare.

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