CASE SEMINAR: USING WINNICOTT IN THE CLINICAL SETTING
PDPSA 4581. FALL 2023

The course will draw on case presentations and clinically focused readings to study aspects of therapeutic process developed in the work of D. W. Winnicott. This will include Winnicott’s understanding of:

- Holding in early development and the analytic setting
- Fostering a sense of being and feeling real vs. a sense of futility and feeling unreal
- Working with primary anxieties (falling to pieces, falling forever) and early defenses (splitting of the ego, false-self, premature ego-development)
- Regression to dependence
- Relating to subjective objects and problems in the transition to external reality

We will learn about these and related aspects of therapeutic process directly as they come up in continuous case presentations by candidates and other examples from our clinical work. We will emphasize raising questions and open discussion of clinical experience. Winnicott’s approach involved spontaneity, intuition, and discovery, making his work relevant and accessible at all levels of clinical experience.

* Additional readings suggested but not required

1. INTRODUCTION AND HISTORICAL OVERVIEW
Conceptions of early development, schizoid phenomena, and the role of the environment in the clinical theories of Winnicott and Klein.

2. PRIMARY UN-INTEGRATION, HOLDING, AND CONTINUITY OF BEING

3. PRIMARY UN-INTEGRATION, HOLDING, AND PRIMARY ANXieties
Psychiatry, pp. 64-88.
*Winnicott, D.W. (1957). The child, the family, and the outside world, (pp. 69-74).
Perseus Publishing.

4. ENVIRONMENTAL FAILURES, SPLITTING OF THE EGO, PREMATURE EGO
DEVELOPMENT
setting. The Maturational Processes and the Facilitating Environment: Studies in the
Winnicott, D. W. (1967). The concept of clinical regression compared with that of
defence organisation. In: C. Winnicott, R. Shepherd, & M. Davis (Eds.), D.W. Winnicott:
Psycho-Analytic Explorations (pp. 193-199). Cambridge: Harvard University Press,
1989.

5. REGRESSION TO DEPENDENCE
Winnicott, D. W. (1955). Metapsychological and clinical aspects of regression within the
psycho-analytical set-up. In: Through Paediatrics to Psycho-Analysis. London: The
Hogarth Press and the Institute of Psycho-Analysis. (Also published: International
Journal of Psycho-Analysis, 36:16-26.)
C. Winnicott, R. Shepherd, & M. Davis (Eds.), D.W. Winnicott: Psycho-Analytic
*Winnicott, D.W. (1964). The importance of the setting in meeting regression in psycho-
analysis. In: C. Winnicott, R. Shepherd, & M. Davis (Eds.), D.W. Winnicott: Psycho-

6. RELIVING PRIMARY ANXITIES
1:103-107. (Also in Psycho-Analytic Explorations. Harvard, 1989.)
Druck, A., Ellman, C., Freedman, B., and Thaler, A. (eds.), A New Freudian Synthesis:

7. **OMNIPOTENCE, ILLUSION, AND FINDING EXTERNAL REALITY 1**

8. **OMNIPOTENCE, ILLUSION, AND FINDING EXTERNAL REALITY 2**

**OTHER SUGGESTED READINGS**

Course Objectives

1. Candidates will learn about Winnicott’s conceptions of early developmental processes
and their relationship to therapeutic processes in the psychoanalytic setting.
2. Candidates will learn about holding and ego integration in early development and psychoanalytic treatment.
3. Candidates will become familiar with the role of the environment and the nature of dependence in childhood development and psychoanalytic treatment.
4. Candidates will learn about the development of personal continuity and a sense of going on being and feeling real.
5. Candidates will understand Winnicott’s ideas about disturbances of early development, including conceptions of environmental failure, primary anxieties, and primitive defenses associated with a sense of unreality and futility.
6. Candidates will learn about the clinical transference phenomenon of regression to dependence in the analytic setting.
7. Candidates will understand Winnicott's ideas about transitional phenomena and transitional experience in relating to both subjective objects and to external reality.
8. Candidates will become familiar with Winnicott’s concept of the use of an object, including the developmental and clinical processes involved in relating to external reality.