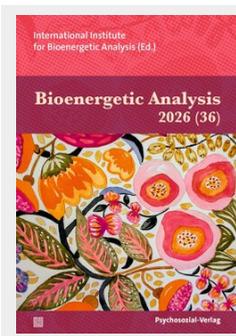


*John Conger*

## Winnicott's translation of Reich



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# Winnicott's translation of Reich

## Orgastic potency and the depressive position

*John Conger*

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### Abstracts

This paper argues that Winnicott, without crediting his source, used Wilhelm Reich's concepts: of orgastic potency, his concept of neurotic and genital character and the correlation of sexual anxiety to heart disease to formulate his sexual orgasm theory regarding the mother-child relationship, his concept of the false and true self and his correlation of sexual anxiety and heart disease. This paper raises and answers three questions: Why does Winnicott fail to acknowledge his debt to Reich; what motivated Winnicott to understand "orgastic potency" in such depth; and in what ways did Winnicott uniquely transform Reich's concepts to a shape more at home in British object relations?

As a preliminary discussion this paper suggests that present-day Psychoanalysis treats the body as a subset of the psyche, as a "symbolic" body. Winnicott, on the other hand, like Freud and Reich, tended to hold psyche and soma as independent of each other, not unlike the concept of the parallax view, a concept borrowed from Slavoj Zizek, a Lacanian philosopher. Winnicott states that psyche and soma share no inherent identity. The parallax view states that there is an illusion of a common language; however, they (in this case psyche and soma) can only be grasped by shifting back and forth, from one to the other.

*Keywords:* psyche-soma, parallax view, orgastic potency, depressive position

### A tradução de Winnicott sobre Reich

#### Potência orgástica e a posição depressiva (Portuguese)

Este artigo argumenta que Winnicott, sem citar sua fonte, utilizou os conceitos de Wilhelm Reich: de potência orgástica, seu conceito de caráter neurótico e genital e a correlação entre ansiedade sexual e doenças cardíacas para formular sua teoria do

orgasmo sexual no contexto da relação mãe-filho, seu conceito de falso e verdadeiro eu e sua correlação entre ansiedade sexual e doenças cardíacas. Este artigo levanta e responde a três questões: Por que Winnicott não reconhece sua dívida para com Reich? O que motivou Winnicott a compreender a “potência orgástica” com tanta profundidade? E de que maneiras Winnicott transformou os conceitos de Reich de forma singular, adaptando-os ao contexto das relações objetais britânicas?

Como discussão preliminar, este artigo sugere que a psicanálise contemporânea trata o corpo como um subconjunto da psique, como um corpo “simbólico”. Winnicott, por outro lado, assim como Freud e Reich, tendia a considerar psique e soma como independentes um do outro, de forma semelhante ao conceito de visão paralaxe, um conceito emprestado de Slavoj Žižek, filósofo lacaniano. Winnicott afirma que psique e soma não compartilham uma identidade inerente. A visão paralaxe afirma que existe a ilusão de uma linguagem comum; no entanto, elas (neste caso, psique e soma) só podem ser apreendidas alternando entre uma e outra.

### La traduction de Reich par Winnicott

#### La puissance orgastique et la position dépressive (French)

Cet article soutient que Winnicott, sans citer ses sources, a utilisé les concepts de Wilhelm Reich: la puissance orgastique, son concept de caractère névrotique et génital, et la corrélation entre l’anxiété sexuelle et les maladies cardiaques, pour formuler sa théorie de l’orgasme sexuel dans le contexte de la relation mère-enfant, son concept du faux et du vrai soi, et sa corrélation entre l’anxiété sexuelle et les maladies cardiaques. Cet article soulève et répond à trois questions: pourquoi Winnicott omet-il de reconnaître sa dette envers Reich? Qu’est-ce qu’a motivé Winnicott à approfondir sa compréhension de la “puissance orgastique”? Et de quelle manière Winnicott a-t-il transformé de façon singulière les concepts de Reich pour les adapter au contexte britannique des relations d’objet?

En guise de réflexion préliminaire, cet article suggère que la psychanalyse contemporaine considère le corps comme un sous-ensemble de la psyché, comme un corps “symbolique”. Winnicott, à l’instar de Freud et Reich, tendait à considérer le psychisme et le soma comme indépendants l’un de l’autre, une conception proche de celle de la théorie de la parallaxe, empruntée à Slavoj Žižek, philosophe lacanien. Winnicott affirme que le psychisme et le soma ne partagent aucune identité intrinsèque. La théorie de la parallaxe postule l’illusion d’un langage commun; or, le psychisme et le soma ne peuvent être appréhendés qu’en passant de l’un à l’autre.

## Come Winnicott traduce Reich

### Potenza orgasmica e posizione depressiva (Italian)

Questo articolo sostiene che Winnicott, senza citare la fonte, abbia utilizzato il concetto di Wilhelm Reich di potenza orgasmica, il suo concetto di carattere nevrotico e genitale e la correlazione tra ansia sessuale e cardiopatia per formulare la sua teoria dell'orgasmo sessuale riguardante la relazione madre-bambino, il suo concetto di falso e vero sé e la sua correlazione tra ansia sessuale e cardiopatia. Questo articolo solleva e risponde a tre domande: perché Winnicott non riconosce il suo debito nei confronti di Reich; cosa lo ha spinto a comprendere la "potenza orgasmica" in modo così approfondito; e in che modo Winnicott ha trasformato in modo unico i concetti di Reich in una forma più congeniale alle relazioni oggettuali britanniche?

Come discussione preliminare, questo articolo suggerisce che la psicoanalisi odierna tratta il corpo come un sottoinsieme della psiche, come un corpo "simbolico". Winnicott, d'altra parte, come Freud e Reich, tendeva a considerare psiche e soma indipendenti l'uno dall'altro, non diversamente dal concetto di parallasse, un concetto preso in prestito da Slavoj Žižek, un filosofo lacaniano. Winnicott afferma che psiche e soma non condividono alcuna identità intrinseca. La parallasse afferma che esiste l'illusione di un linguaggio comune; tuttavia, essi (in questo caso psiche e soma) possono essere compresi solo passando avanti e indietro, dall'uno all'altro.

## Winnicotts Übersetzung von Reich

### Orgasmuspotenz und die depressive Position (German)

Diese Arbeit argumentiert, dass Winnicott, ohne seine Quelle anzugeben, Wilhelm Reichs Konzepte der Orgasmuspotenz, des neurotischen und genitalen Charakters sowie des Zusammenhangs zwischen sexueller Angst und Herzerkrankungen nutzte, um seine Theorie des sexuellen Orgasmus in Bezug auf die Mutter-Kind-Beziehung, sein Konzept des falschen und wahren Selbst und seinen Zusammenhang zwischen sexueller Angst und Herzerkrankungen zu formulieren. Die Arbeit wirft drei Fragen auf und beantwortet sie: Warum verschweigt Winnicott seine Verbindung zu Reich? Was motivierte Winnicott, die "Orgasmuspotenz" so tiefgründig zu verstehen? Und inwiefern transformierte Winnicott Reichs Konzepte auf einzigartige Weise, um sie an die britische Objektbeziehungstheorie anzupassen? Vorab wird diskutiert, dass die heutige Psychoanalyse den Körper als Teil der Psyche, als "symbolischen" Körper, betrachtet. Winnicott hingegen, ähnlich wie Freud und Reich, betrachtete Psyche und Soma als voneinander unabhängig, nicht unähnlich dem Parallaxenmodell, einem Konzept des Lacan'schen

Philosophen Slavoj Žižek. Winnicott argumentiert, dass Psyche und Soma keine inhärente Identität besitzen. Das Parallaxenmodell besagt, dass eine Illusion einer gemeinsamen Sprache existiert; Psyche und Soma lassen sich jedoch nur erfassen, indem man zwischen ihnen hin- und herwechselt.

### Перевод Райха Винникоттом

#### Оргастическая потенция и депрессивная позиция (Russian)

В данной статье утверждается, что Винникотт, не ссылаясь на источник, использовал концепции Вильгельма Райха: оргастической потенции, невротического и генитального характера и корреляции сексуальной тревоги с заболеваниями сердца, чтобы сформулировать свою теорию сексуального оргазма, касающуюся отношений матери и ребёнка, свою концепцию ложного и истинного “я” и взаимосвязь сексуальной тревожности и сердечных заболеваний. В данной статье поднимаются и даются ответы на три вопроса: почему Винникотт не признаёт своего долга перед Райхом; что побудило Винникотта так глубоко понять “оргастическую потенцию”; и каким образом Винникотт уникальным образом преобразовал концепции Райха, придав им форму, более подходящую для британских объектных отношений?

В качестве предварительного обсуждения в данной статье предполагается, что современный психоанализ рассматривает тело как часть психики, как “символическое” тело. Винникотт, с другой стороны, подобно Фрейд и Райху, был склонен считать психику и сому независимыми друг от друга, что мало чем отличается от концепции паралакса, заимствованной у Славоя Жижека, философа-лаканиста. Винникотт утверждает, что психика и сома не имеют неотъемлемой идентичности. С точки зрения паралакса утверждается, что существует иллюзия общего языка; однако их (в данном случае психику и сому) можно постичь, только переходя от одного к другому.

### La reinterpretación de Reich en Winnicott

#### Potencia orgástica y posición depresiva (Spanish)

Este artículo examina cómo Winnicott, sin reconocer explícitamente su fuente, incorporó conceptos fundamentales de Wilhelm Reich, como la potencia orgástica, las nociones de carácter neurótico y carácter genital, y la correlación entre ansiedad sexual y enfermedad cardíaca, para elaborar su propia teoría sobre el orgasmo sexual en la relación madre-hijo, su formulación del falso y verdadero self, y su asociación entre ansiedad sexual y patología cardíaca. El texto plantea y aborda tres interrogantes centrales: ¿por qué Winnicott no reconoce su deuda intelectual con

Reich?, ¿qué lo llevó a explorar con tanta profundidad el concepto de “potencia orgástica”, y ¿de qué manera transformó estos conceptos reichianos para integrarlos en el marco de las relaciones objetales británicas?

Como punto de partida, se propone que el psicoanálisis contemporáneo tiende a concebir el cuerpo como un subconjunto simbólico de la psique, es decir, como un “cuerpo representado”. Winnicott, en cambio, al igual que Freud y Reich, sostenía que psique y soma constituyen dominios relativamente autónomos. Esta relación puede compararse con el concepto de “visión en paralaje”, tomado del filósofo lacaniano Slavoj Žižek, según el cual no existe una identidad intrínseca entre ambas dimensiones. La visión en paralaje plantea que la aparente existencia de un lenguaje común entre psique y soma es ilusoria: sólo pueden ser comprendidos mediante un movimiento constante de desplazamiento de uno hacia el otro.

### 温尼科特对赖希的“性高潮潜能与抑郁位”概念的转译 (Chinese)

本文认为，温尼科特在未注明来源的情况下，使用了威廉·赖希的理论框架：包括性高潮潜能、他的神经症与生殖器特征的概念，以及性焦虑与心脏病的相关性，进而构建了关于母子关系的性高潮理论体系，提出了虚假自我与真实自我的概念，并揭示了性焦虑与心脏病的相关性。本文提出并回答了三个问题：为何温尼科特未公开承认其学术渊源；是什么使得温尼科特对“性高潮潜能”这个概念理解如此至深；以及温尼科特以哪些方式独特地将赖希的概念转化为英国客体关系理论体系中更合适的形式？作为初步探讨，本文指出当代精神分析将身体视为精神的子集，即一种“象征性”的身体。另一方面，温尼科特与弗洛伊德、赖希类似，倾向于将精神和躯体视为是彼此独立的，这与拉康学派哲学家斯拉沃伊·齐泽克提出的“视差观”概念颇为相似。温尼科特强调精神躯体并无内在同一性。视差观认为存在一种共同语言的错觉，但正如文中所述，精神躯体只能通过两者间来回切换才能被真正理解。

### Tłumaczenie Reicha przez Winnicotta

#### Potencja orgastyczna i pozycja depresyjna (Polish)

Artykuł dowodzi, że Winnicott, nie przypisując zasług swojemu źródłu, wykorzystał koncepcje Wilhelma Reicha: potencję orgastyczną, jego pojęcie charakteru neurotycznego i genitalnego oraz korelację lęku seksualnego z chorobami serca – aby sformułować swoją teorię orgazmu seksualnego dotyczącą relacji matka-dziecko, swoją koncepcję fałszywego i prawdziwego self oraz korelację lęku seksualnego i chorób serca. Artykuł stawia i odpowiada na trzy pytania: dlaczego Winnicott nie przyznaje się do swojej inspiracji Reichem; co motywoowało Winni-

cotta do tak pogłębionego rozumienia “potencji orgastycznej”; oraz w jaki sposób Winnicott w unikalny sposób przekształcił koncepcje Reicha w formę bardziej osadzoną w brytyjskiej teorii relacji z obiektem?

W ramach wstępnej dyskusji artykuł sugeruje, że współczesna psychoanaliza traktuje ciało jako podzbiór psychiki, jako “symboliczne” ciało. Winnicott natomiast, podobnie jak Freud i Reich, skłaniał się ku postrzeganiu psychiki i soma jako niezależnych od siebie, w sposób przypominający koncepcję widoku paralaktycznego – termin zapożyczony od Slavoj Žižka, filozofa lacanowskiego. Winnicott stwierdza, że psychika i soma nie dzielą żadnej wewnętrznej tożsamości. Widok paralaktyczny głosi, że istnieje iluzja wspólnego języka; jednak mogą one (w tym przypadku psychika i soma) być uchwycone jedynie poprzez przesuwanie perspektywy tam i z powrotem – z jednej na drugą.

## Introduction

“We always have to consider what is the result of the relationship in terms of contact, bodily contact, and on the other hand, what we phantasize about a person who is there.”

*(André Green; quoted from Kohon, 2001, p. 56)*

In this paper, I am going to use some terms that have not been adequately addressed in Winnicott’s writing. I am going to talk about how Winnicott took Reich’s idea of orgasmic potency, which developed from Reich’s work with adults, and applied it to his work with children. I will suggest that Winnicott’s own sexual dysfunction pushed him to understand the importance of sexual desire in the child/mother relationship. But let me tell you how I began my journey.

Some time ago in reading *Psychoanalytic Explorations*, I stumbled across a previously unpublished, undated entry utilizing language uncharacteristic of Winnicott. More than that, the language sounded uniquely the property of Wilhelm Reich. No one but Reich has ever talked of ‘orgasmic potency’ or ‘orgasmic functioning’ except as an echo or in response to Reich. Like Reich, Winnicott states that the analytic treatment must relate the body to the psyche, the libidinal body to the patient’s psychic fantasy. With the psyche split from the body (soma), the patient remains untethered from the world, not quite real, depersonalized. It seems to be fundamental to our

human nature and experience to ask, what is the relation of our mind and spirit to our body? In addressing the mind/body relationship, Winnicott echoes Reich. Winnicott writes:

“A Point in Technique

When the fantasy that is represented in the transference material is revealed, I ask myself: what and where is the accompanying orgasmic bodily functioning. And, per contra, when in the analytic situation there is orgasmic bodily functioning I ask myself: what fantasy material is the patient telling me about by this functioning [...] I had found the hidden orgasmic bodily functioning hidden from me in the analysis, but without which the fantasy material, though intensely felt, could never become quite real or personal.” (Winnicott, 1989, pp. 26–27)

Winnicott's comparison to Reich is not based on a few misplaced words. Rather, it seems important to point out that for those acquainted with Reich's work, his concepts are abundant and immediately recognizable in Winnicott's writing (Hilton, 1999, pp. 44–60): the centrality of the body-psyche relationship; the true and false self replacing Reich's genital and neurotic character; the adoption of orgasmic potency and the sequence leading to orgasm, the impact of sexual anxiety on heart disease; the use of touch in body interventions; and the dismissal of the death instinct.

Before addressing the main thesis of this paper, Winnicott's use of Reich and his placement of orgasmic potency in the Depressive Position, I introduce a necessary if brief background concerning the relation of body and psyche.

As a paediatrician and a psychoanalyst, Winnicott, more than any other British theorist, attempted to sustain an active dialogue between psyche and soma, which he describes as unrelated to each other. He writes, “There is no inherent identity of body and psyche [...] From the point of view of the developing individual [...] the self and the body are not inherently superimposed.” (Winnicott, 1988, p. 123) “The whole person is physical if viewed from one angle, psychological if viewed from another.” (Winnicott, 1988, p. 11) Present-day Psychoanalysis, on the other hand, tends to consider the body solely as a subset of psyche, that is, the body symbolically represented rather than as a physical construct. Even Joyce McDougall, who has paid particular attention to the body's relation to the psyche, states:

“Apart from the experience of corporeal suffering (and even this can be totally excluded from conscious recognition), it is clear that the body we live in, the body of which we are consciously aware, is essentially a psychological construct. Those aspects of the body and its somatic functioning that do not achieve psychic representation do not exist for us. This applies also to emotions.” (McDougall, 1995, p. 166)

In contrast, therapists who specialize in somatic psychology and medically trained practitioners, (and more recently the neuroscientists), are likely to assume that the psyche is a subset of soma. While psyche/soma appears to influence each other, what is not so immediately clear is how incomplete our knowledge of that correspondence remains, after over 100 years of study. The predisposition of our mind is radically different from our body, with little in common. While dependent on the body for survival, the mind imagines itself exempt from the constrictions of materiality. At least two extensive, separate vocabularies, developed over centuries, have elaborated our thinking about body and psyche. With one a subset of the other, we collapse one into the other, I think, because faced off, body against psyche, they don't slide comfortably together the way we think they should. It is more a stand-off, very awkward because it's about ourselves. The body/psyche suffers from the blindness of familiarity.

Not all psychoanalysts are comfortable with this reduction. In a recent article, Ricardo Lombardi, in a call to arms, supports a more earthy body-link, with reference to Winnicott. Lombardi concludes:

“Thus the question seems to be whether the absence of a clear theoretical status for the body in contemporary psychoanalysis should now claim our attention, so that we can correct the misunderstanding by which the body is mistaken for its potential symbolic meanings, while its basic quality as a concrete object is quite neglected – whereas it is not a symbol but something real.” (Lombardi, 2008, p. 105)

Perhaps then, instead of taking for granted a certain easy consonance between psyche and soma, we should consider the reverse for a moment, a resistant incompatibility, a dysfunctional marriage we would do better to face realistically. For instance, there is something compelling about subjecting the psyche/soma relationship to the concept of The Parallax View, the brain-child of the Lacanian philosopher Slavoj Žižek. In this model,

psyche and soma fool us into believing in a compatibility that isn't possible. There is "the illusion of being able to use the same language for phenomena which are mutually untranslatable and can be grasped only in a kind of parallax view, constantly shifting perspective between two points between which no synthesis or mediation is possible." (Zizek, 2006, p. 4)

Challenged by this unresolved perspective, we can understand why psychoanalysis might reduce the body to a symbolic fantasy. At the same time we may appreciate the work of Freud, Reich and Winnicott that held psyche and soma distinct and separate without the dominance of one over the other. From the beginning, Freud saw the sexual instinct as on the frontier between psyche and soma. The exact manner of the shift of instinct from body to psyche evaded him. (Green, 1999, p. 169)

"Now [...] an 'instinct' appears to us as a concept on the frontier between the mental and the somatic as the psychological representative of the stimuli originating from within the organism and reaching the mind" (Freud, 1915, pp. 121–122)

"Although instincts are wholly determined by their origin in a somatic source, in mental life we know them only by their aims." (Freud, 1915, p. 123)

Remarkably Freud never collapsed the body into a subset of psyche. He held the disjunction of body and psyche unresolved. When Freud shifted from the topographical to the structural theory in 1923, a shift from a more body oriented to a psyche oriented theory, he never dismissed his earlier convictions. He was able to sustain two contradictory theories without the renunciation of his past views. In both his *An Autobiographical Study*, 1925, and in *Inhibitions, Symptoms and Anxiety*, 1926, Freud doubles back in his arguments to embrace his old views. "If I look back today at my early findings" Freud says in 1925 "[...] on the whole they seem to me still to hold good." (p. 26) and in 1926 concerning anxiety, he says:

"We see, then, that it is not so much a question of taking back our earlier findings as of bringing them in line with more recent discoveries. It is still an undeniable fact that in sexual abstinence, [...], anxiety arises directly out of libido; [...] it is very possible that what finds discharge in the generating of anxiety is precisely the surplus of unutilized libido" (p. 141).

Libido for Freud is understood not merely as a signal function of ego but as a real energy that can be dammed up like a river in the body causing neurotic symptoms.

Freud who loved jokes and irony, had a tolerance for contradiction. He was able to hold opposing truths. Freud remembered that before his marriage, he suffered from sexual frustration that he felt created neurotic traits of tiredness, physical discomfort, illness and futility. (Ferris, 1999, pp. 113–114) He was a young man with intense sexual desire and sex had to be at the core of everything. As an old man having suffered many losses, the mind was his refuge. Nevertheless, at the centre of his later redefinition of psychic structure, he leaves us a remnant of his earlier conviction. He tells us the ego is a “body ego.” (Freud, 1923, p. 27) Much has been made of this token. The most powerful statement concerning the body remains, however, the brilliant image of the horse and rider in which the horse, in some rough sense, represents the embodied unconscious. (Freud, 1923, p. 25) If we take the vitality of the horse and rider seriously, we may find it difficult to talk to a disembodied mind on the couch.

This transition from topographical to structural theory is the context in which to understand Wilhelm Reich’s psychoanalytic work in the 1920’s. Reich as a young man with sex on his mind picked up Freud’s earlier “medical” work where he left off, hoping to please Freud by clinically validating libido theory by establishing orgasmic potency as the key to curing neurosis.

Winnicott’s reference to “orgastic bodily functioning” that introduced this paper expresses a matter of the deepest personal concern for Winnicott. In addressing Winnicott’s orgasm theory, I raise three questions: Why does Winnicott fail to acknowledge his debt to Reich; what motivated Winnicott to understand “orgastic potency” in such depth; and in what ways did Winnicott mold Reich’s concepts to a shape more at home in British Object Relations?

I wish now to address the first question. If Winnicott borrowed so heavily from Reich, why is there no acknowledgement for so great a debt? In an interview with Paul Roazen (the gad fly of Psychoanalysis), Winnicott commented that once he had mentioned the name of Carl Jung in a British Psychoanalytic Society meeting “but the hush was so striking that he dared not repeat the exercise.” (Roazen, 2001, p. 176) Perhaps Winnicott was reluctant to risk a cold reception twice by speaking of another “He-who-must-not-be-named” “traitor” to psycho-analysis.

After all, in 1934 Reich had been hastily thrown out of the International. Brilliant and clear-headed as Reich was in Vienna in the 1920’s as

a member of Freud's inner circle; by 1934, Anna Freud arranged secretly through Ernest Jones for Reich to be thrown out, in the vain hope of escaping Hitler's wrath. Speaking for her father, she said that Psycho-Analysis was not political (Makari, 2008, p. 404). Reich, in integrating Marxist and Psycho-analytic thought, had become uncompromising and strident. Reich the outspoken militant communist, author of *The Mass Psychology of Fascism*, was on Hitler's hit list

As a further reason for not mentioning Reich, Winnicott was not in the habit of identifying his sources, a position he openly proclaims in *Primitive Emotional Development* (1945). Winnicott tells us:

“My mind does not work that way. What happens is that I gather this and that, here and there, settle down to clinical experience, form my own theories and then last of all interest myself in looking to see where I stole what. Perhaps this is as good a method as any.” (Winnicott, 1992, p. 145)

Not everyone was charmed by Winnicott's approach. Claire Winnicott, in discussing their life together (Winnicott, 1989, p. 2) states that Winnicott “could, and did, alienate some people by his lack of acknowledgement.” It may have been that Winnicott, who did not consider himself an intellectual, felt alienated from the bookish practices of academia. Roazen found that Winnicott “had a rather weak grasp of theory and the history of analytic concepts,” (Roazen, 2001, p. 174) With reconsideration 20 years later, in *Playing and Reality*, a book thoughtful in its attributions to others, Winnicott says that “no one in the line of cultural contributors repeats except as a deliberate quotation, and the unforgivable sin in the cultural field is plagiarism.” (Winnicott, 1967, p. 99) To his credit, Winnicott has successfully restructured Reich for his own purposes. Unlike Reich's focus on adults, Winnicott investigates the obstacles to arousal leading to orgasm between mother and child.

## **Winnicott's study of orgasmic potency**

As a second question, what then motivates Winnicott to study orgasmic potency with such persistence? In 1923, as a troubled, young doctor, newly married, Winnicott sought a consultation with Ernest Jones. Winnicott explains, “I went to him as a young man because I was ill” (Kahr, 1996, p. 44) We have a glimpse of the basis for his illness briefly appearing in letters

written between James Strachey, Freud's translator in England and Alix, his wife, who was in analysis with Abraham in Berlin in 1924–1925. Winnicott was in analysis with James Strachey at the time. Apparently, James Strachey shared some confidentiality from the couch with his wife. Alix in a letter to her husband mentions Winnicott in a phrase equivalent to “when hell freezes over”. She says when “Mr. Winnicott will die or f-ck his wife all of a sudden” (Strachey, 1924, p. 166) Linda Hopkins, Masud Khan's biographer, tells us that Masud Khan in the Spring of 1978, years after Winnicott's death, stood up at a meeting and declared that “Winnicott had been impotent throughout his life.” (Hopkins, 2006, p. 306) Rodman in his biography of Winnicott, considers “impotence [...] a major factor in his (Winnicott's) life, as were repeated instances of coronary thrombosis.” (Rodman, 2003, p. 144) Rodman imagines from indirect statements by Winnicott “That he may have been taught by his mother not to feel excitement,” (Rodman, 2003, p. 144) a disruption which led to life-long problems with impotence. Rodman wonders if Winnicott's brief paper, *Excitement in the Aetiology of Coronary Thrombosis 1957*, might very well be autobiographical.

In that paper, Winnicott describes heart attacks as a psychosomatic disorder and in keeping with Reich, attributes the illness to a breakdown in the orgasm process. Winnicott asks: “What happens in the body when excitement ‘goes cold’, that is to say, does not reach a climax?” Winnicott's paper speaks of how a young person, unable to climax, suffers terribly both mentally and bodily. There should be no reason why excitement “should not build up into a climax, followed by relaxation.” In fact, “many excitements must remain unrequited, and must find a way of dying down.” (Rodman, 2003, pp. 143–144; Winnicott, 1989, p. 36) Winnicott says that sexual frustration is a key factor in coronary thrombosis, exactly the viewpoint of Wilhelm Reich. In *The Function of the Orgasm*, Reich describes working with two women in 1924, suffering from ‘cardiac neurosis’. “With them, whenever genital excitation appeared, cardiac anxiety subsided.” For Reich, the “seat of the sensation of anxiety [...] was the cardiac and diaphragmatic region.” (Reich, 1971, pp. 109–110) If we accept the evidence of Winnicott's painful dysfunction, then we can understand why he might turn to the earlier writings of Reich, who attempted to resolve the humiliating illness created by repressed and blocked sexual desire.

How then did Winnicott adapt Reichian theory to British Object Relations? Reich worked with the sexual dysfunction of adults; Winnicott, on the other hand, traced orgasmic impotence to the infant/mother engage-

ment. Winnicott's ten year classical analysis with James Strachey and his Kleinian analysis with Joan Riviere may not have successfully addressed his sexual dysfunction; whereas for Reich, sexual dysfunction was at the heart of neurosis. Reich's claim was absolute.

"Psychic health depends upon orgasmic potency, that is, on the capacity for surrender in the acme of sexual excitation in the natural sexual act. Its basis is the un-neurotic character attitude of capacity for love." (Reich, 1971, xviii)

Winnicott was not a linear thinker, and so his orgasm theory must be gathered from the mixed placements of brief deliveries, a few sentences here, a paragraph there, from a range of papers throughout his career. He speaks passionately, seriously, his sentences anchored and authoritative, suggesting a repeated observation that distils to a single statement. One can point to a developing understanding extending from 1941 in the paper "the Observation of infants in a Set Situation" until the more complete disclosures in "The Depressive Position in Normal Emotional Development." (1954–1955)

As early as 1941, Winnicott, in interviewing numbers of mothers and babies, develops a set procedure for evaluation. What goes unnamed in Winnicott's description and unmentioned by other commentators, is a baby's mouth orgasm.

We observe the infant's desire leading to the orgasm. The infant sitting on its mother's lap is within reach of a tongue depressor which instigates an action. A gestural dance begins, both charming and predictable.

"All the time, in 'the period of hesitation' (as I call it), the baby holds his body still (but not rigid). Gradually he becomes brave enough to let his feelings develop, and then the picture changes quite quickly. The moment at which this first phase changes into the second is evident, for the child's acceptance of the reality of desire for the spatula is heralded by a change in the inside of the mouth, which becomes flabby, while the tongue looks thick and soft, and saliva flows copiously. Before long he puts the spatula into his mouth and is chewing it with his gums, or seems to be copying father smoking a pipe. The change in the baby's behaviour is a striking feature. Instead of expectancy and stillness there now develops self-confidence, and there is free bodily movement, the latter related to manipulation of the spatula." (Winnicott, 1941, pp. 53–54)

At this early stage Winnicott describes the orgasm response in which the mouth becomes flabby and the saliva flows, even though his central purpose is to establish a reliable tool for evaluation. He created a measure for infant development in which orgasm held a place. Winnicott explains, “[...] many infants of five months grasp an object and put it to the mouth, it is not till six months that the average infant starts to follow this up by deliberately dropping the object as part of his play with it.” (Winnicott, 1945, p. 147) Concerning emotional development Winnicott says,

“We can say that at this stage a baby becomes able to in his play to show that he can understand he has an inside, and that things come from outside. [...] now the infant assumes that his mother also has an inside, one which may be rich or poor, good or bad, ordered or muddled. He is therefore starting to be concerned with the mother and her sanity and her moods.” (Winnicott, 1945, p. 147)

Once “well lodged in the body” the child begins to manage his inner world upon which the “management of the external world depends.” (Winnicott, 1950–1955, p. 207)

In the early infant development, Winnicott describes three developmental processes that establish the infant in the body with an inside and outside reality: integration, personalization and realization. (Winnicott, 1945, p. 149) Important as they are developmentally, they are mostly subsumed under the structures that implement desire. For the child to achieve orgasmic potency in the Depressive Position, Winnicott mentions three separate fusions that are necessary. First, the psyche, the elaboration of soma, needs to find a home in the body, What Winnicott calls “personalization”. (Winnicott, 1945, p. 149) Secondly, the aggressive and erotic instincts must fuse (Winnicott, 1950–1955, p. 214; Winnicott, 1971, p. 70; Winnicott, 1963b, p. 74); and third, the quiet and excited mother, representing need and desire, must come together as the same mother. To explain further, the infant does not at first realize that the mother that comforts her is the same mother that excites her. One measure for achieving the Depressive Position is the realization that the two mothers are really one mother.

Initially, through the support and attunement of the mother, the infant psyche is able to take on the body as its home. Secondly, Winnicott, like Reich, did not accept aggression as a function of a death instinct, which has been characterized by Klein as sadistic and destructive. Winnicott tells us that aggression functions to separate the “me” from the “not-me”. The

“not-me” lets the infant know where his body ends and his mother begins. Aggression helps to distinguish fantasy from “outside reality” (Winnicott, 1950–1955, p. 215). Winnicott tells us that the integration of aggression with instinctual desire is fundamental to a mature sexual intercourse.

“In adult and mature intercourse, it is perhaps true that it is not the purely erotic satisfactions that held a specific object. It is the aggressive or destructive element in the fused impulse that fixes the object and determines the need that is felt for the partner’s actual presence, satisfaction and survival.” (Winnicott, 1950–1955, p. 218)

An infant’s erotic desire at the mother’s breast calls for a response from the mother. But what if the mother is depressed and withdrawn from the excitement, unable to share? Andre Green describes the extensive injury of this neglect in his article “The Dead Mother” (Green, 1986). The mother is present to the child as if dead, provoking bewilderment, mourning, withdrawal, and anguished object loss. Rodman tells us (Rodman, 2003, p. 14) that “Marion Milner told me that Donald had said he was weaned early because his mother could not stand her own excitement during breast feeding” This breakdown of excitement, by Winnicott’s depressed mother (Rodman, 2003, p. 14) may have been sufficient cause for Winnicott’s reported life-long impotence.

Winnicott describes a further breakdown in the bringing together of aggressive and erotic drives. The infant’s ruthless desire is sometimes responded to as hunger and aggression only. In the efforts to feed, the excitement of arousal is ignored. In two separate articles, Winnicott, with terse anger, refers to this failure to respond to the infant’s excitement and arousal. He says, “The baby is fobbed off by the feed itself; instinct tension disappears and the baby is both satisfied and cheated [...]” (Winnicott, 1957, p. 268; see also Winnicott, 1963, p. 181).

Just as the psyche must find a home in the body as the first condition, and aggression must fuse with instinctual desire as the second condition; so, as the third condition for orgasmic potency, the quiet and excited mother must come together as one mother. (Winnicott, 1945, p. 151; Winnicott, 1954–1955, pp. 266–267).

The infant does not understand that the mother he destroys in his excitement is the same mother that comforts him. In response to need, the infant is “kept warm, handled and bathed and rocked and named” (Winn-

icott, 1945, p. 150) by the comforting, quiet mother. When the excited mother is able to root herself and the infant in instinctual desire (Winnicott, 1950–1955, p. 214) then these “acute instinctual experiences tend to gather the personality together from within.” (Winnicott, 1945, p. 150)

Winnicott expresses in an amused, exultant poetry the successful sharing of instinctual experience between mother and child that ultimately leads to the child’s joining of the two emotional states.

“The infant has instinctual urges and predatory ideas. The mother has a breast and the power to produce milk, and the idea that she would like to be attacked by a hungry baby.” (Winnicott, 1945, p. 152)

For Winnicott, the baby’s fantasy precedes the actual sucking at the breast. Winnicott states, “Fantasy is more primary than reality.” The excited infant at the breast hallucinates “something fit to be attacked. At that moment the actual nipple appears.” (Winnicott, 1945, 152–153) Winnicott has focused in on the delicacy of this encounter between mother and child, and its fragile nature. Hence the failure of the mother’s response to the infant’s desire splits the tenuous connection between inner fantasy and external reality, the psyche from soma. When the spontaneous gesture of need and desire is interrupted, a false self develops as a shell to hide the true self (Winnicott, 1950–1955, p. 212). Winnicott says, “[...] there comes into existence an individual that we call false because the personal impulsiveness is missing.” (Winnicott, 1950–1955, p. 217).

However, in *The Depressive Position*, the infant discovers the comforting, quiet and excited mother are the same woman. A good mother, Winnicott says, supports a child who stumbles into a deep orgasmic experience. The good-enough mother responds to the deeper arousal, willing to share in that intimate experience.

“[...] the quiet mother holds the situation [...] so that the baby may experience ‘excited’ relationships and meet the consequences [...] The time comes for the infant to see that here are two completely different uses of the same mother. A new kind of need has arisen based on impulse and on instinct tension that seeks relief, and this involves a climax or orgasm. Where there is an orgasmic experience, there is necessarily an increase in pain and frustration. Once the excitement has started and tension has arisen, risk has entered in.” (Winnicott, 1954–1955, p. 267)

The infant is anxious about injury to the mother and himself. Has his unleashed desire created a hole in the mother where once before he had found fullness and richness? And inside, is there a badness that lingers, some loss, emptiness or fear? (Winnicott, 1954–1955, p. 268) The infant offers a gift gesture of repair which with luck, the mother intuitively understands. (Winnicott, 1954–1955, p. 270)

Winnicott did not build his sexual theory in isolation. Melanie Klein had deeply influenced his work, despite significant differences. Melanie Klein developed the concept of the Depressive Position as a time of new found guilt, intense anxiety and attempts at repair; a time of disturbing awareness concerning the sadistic fantasy attacks on the mother's body. Klein's concern was with the internal conflict in fantasy of Eros and Thanatos, not the external physical reality. How odd it feels then for Winnicott to drag in biology, the body aroused to orgasm. I am struck by the awkwardness of Winnicott's placement. It feels like he dumped the body, the orgasm experience, unexpectedly in the middle of Melanie Klein's private, internalized world, as if in retaliation against the childhood mother who withheld sensual response. I wonder about Winnicott's feelings, having been excluded as unorthodox by the Kleinian elite.

Klein has provided no lead-ins for the body. Winnicott has provided his own developmental support structures, the three fusions, to justify his placement. In part we may once more be visited by the incompatibility of body and psyche, that leads us to take refuge in the parallax view. As Winnicott has stated, "there is no inherent identity of body and psyche". (Winnicott, 1988, p. 123) Whatever our response, Winnicott has brought the body back to analysis without it becoming a subset of psyche, a symbolic body only. If, as analysts, we accept Winnicott's findings, what accommodations to the erotic must we consider during the clinical hour?

## Conclusion

Many analysts have not acquainted themselves with Reich's work because Reich was prematurely cut out of the fold. His absolute attitudes and later commitment to "orgone" as the universal energy, obscures his early powerful and valid contribution to the psychoanalytic community. Reich was able to anchor Freud's work on desire and the body by overstatement which was

Freud's tendency also. British Object Relations has shown brilliant technical achievements in working with the most obscure psychological states and as well has pried open the inaccessible psychosis to analytic intervention.

But the structural theory directed psychoanalysts away from desire, away from the visceral nature of our lives and away from the awkward constructions of psyche and soma. Winnicott's translation of Reich reintroduced the body and psyche as uneasy partners in the clinical hour. Whatever his motivation, Winnicott was driven to track desire from its earliest to its developed expression. He identified how the blocks to spontaneous expression creates a false self.

Winnicott differs from Reich in a few ways. Reich was promoting a orgasmic potency that was the accomplishment of a resolved Oedipal complex. Winnicott identified the orgasm experience as taking place earlier around the constellating of a separate primitive self. The infant is no longer entirely joined with the mother but has achieved a tiny gap of separation, across which flirtation, arousal and infant orgasm take place accompanied by new confidence and play.

Secondly, for Reich orgasmic potency is about the release of dammed up energy. Through attention to the body and sexual phantasy, the energy trapped in earlier developmental states is released. The full orgasm in adults depends on one's capacity to surrender to the experience. For Winnicott addressing early child states, orgasmic potency depends on the unhindered engagement of the mother and child and in particular, the mother's capacity to participate and support the infant's excitement. A successful mother/child engagement promotes three fusions: the indwelling of psyche in soma, the fusion of aggressive and sexual impulses, and the fusion of the quiet and excited states as one mother.

In "The Capacity to be Alone" (1958) Winnicott unexpectedly, in the simplest manner, closes the gap between Reich's orgasmic potency as an Oedipal achievement and potency in the depressive position. Winnicott agrees with Melanie Klein that the primal scene at a young age can be perceived and imagined. Winnicott writes:

"It could be said that an individual's capacity to be alone depends on his ability to deal with the feelings aroused by the primal scene. In the primal scene an excited relationship between the parents is perceived or imagined [...] To be able to be alone in these circumstances implies a maturity or erotic development, a genital potency."

Included in the article, in contradiction to Reich, Winnicott speculates about the possibility of an ego orgasm, a subject beyond the scope of this paper. Winnicott believes that “playing needs to be studied as a subject on its own, supplementary to the concept of the sublimation of instinct.” (Winnicott, 1971, p. 39) It should also be noted that he considers potency to describe emotional, fantasy and instinctual qualities. He says that “hope in regard to recovering from guilt over destructive ideas is a vitally important element in potency.” (Winnicott, 1988, pp. 73–74)

As a third issue, Winnicott actually does touch his clients in special circumstances he calls “regression to dependence.” To those of us acquainted with Reich, we observe him working with the energetic response of the body. But around this subject Winnicott maintains a silence. While Winnicott initially describes the psyche as developing out of soma, like Melanie Klein, he favors the psyche, asserting that fantasy precedes soma.

The mouth orgasm Winnicott described in establishing a set situation to evaluate infant development in 1941 blossomed into an original sexual theory. In these ways, following a unique path, creating new structures of understanding, Winnicott has brilliantly transformed Reich to British Object Relations.

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