

Play and Symbolism in Lowenfeld and Winnicott

By Madeleine Davis

1932 – 1991

In her biography of Margaret Lowenfeld which appears as the introduction to the book of Lowenfeld's selected papers entitled *Child Psychotherapy, War and the Normal Child* (1988), and which is reproduced in this journal in shortened form, Cathy Urwin has brought splendidly to life not only Lowenfeld herself but also the social context, including the prevailing attitudes to child health, that formed the background to her work. It was a content shared by Donald Winnicott, who was Lowenfeld's exact contemporary; and this, together with the fact that each brought to child psychiatry a training in the medicine of childhood, does much to explain how the two came so close together in their ideas about the play of children and its therapeutic value. In fact, they interwove with each other over a period of many years: their association goes back to at least 1928, when Winnicott was for a time on the board of Lowenfeld's Clinic for Nervous and Difficult Children, which later became the Institute of Child Psychology (ICP).

When looking at play in the work of Lowenfeld and Winnicott it is necessary first of all to follow Winnicott's admonition to 'make a distinction between the noun 'play' and the verbal noun 'playing'. He made this distinction, he said, because child psychoanalysts had been 'too busy using play *content* to look at the playing child, and to write about playing as a thing in itself. Thus, it seemed to him that there was a 'lack of a useful statement on the subject of play' in psychoanalytic literature, and he suggested that such a statement could be found in the work of Lowenfeld (1968a). He himself, especially in the last years of his life, set about making up for this omission within the body of psychoanalytic thought, and playing and its development in the child and adult became integral, and indeed central, to his theory of emotional development.

For him this meant that it was central also to the practice of psychotherapy. Just as Freud developed the idea of free association in psychoanalysis and made it into a *rule*,

and Ferenczi later (1927) expressed the view that free association was an ideal to be achieved only at the end of an analysis - in other words that it is an *aim* in analysis - so for Winnicott an aim in psychotherapy of any sort whether play was used as part of the therapeutic technique or not, was to facilitate and enlarge in the patient a capacity for playing. 'Psychotherapy', he wrote, 'has to do with two people playing together. The corollary of this is that where playing is not possible then the work done by the therapist is directed towards bringing the patient from a state of not being able to play into a state of being able to play' (1968a).

On a broader scale, playing for Winnicott meant nothing less than that which gives quality to life. It covers the whole of an individual's contact with the phenomena of external reality, and is manifest in the whole history of our cultural evolution. The theory of playing, as developed especially in his book *Playing and Reality*, is well known, but as it is truly complex it can be useful to remind oneself of some of its salient points.

First then, how, according to Winnicott, does playing develop? At the beginning the mother, by adapting to the needs of her baby through her capacity to identify with him or her, makes actual what the baby is prepared to hallucinate, create or find out of need. The baby experiences omnipotence: the omnipotence is actual for the baby even if illusory from the point of view of the observer.

At first the baby and the mother are not separate in the baby's mind, but moments of separation occur in which the mother is repudiated as something internal or subjective, then re-accepted and perceived objectively. "This means that the mother (or part of the mother) is in a 'to and fro' between being that which the baby has a capacity to find and (alternatively) being herself waiting to be found" (1968a).

After some weeks there appears in the baby an increasing ability to signal his needs, and the mother begins to lessen her exact adaptation, thus facilitating the separating-out process that is a part of the baby's development. Somewhere here - anywhere about four months to perhaps a year old - the baby may be observed to have found an object, or any one of a number of phenomena, whose use is called 'transitional'

by Winnicott. He specifies “a bundle of wool or the corner of a blanket or eiderdown, or a word or tune, or a mannerism” (1951). These things become ‘vitaly important to the infant’, and the parents recognize their importance.

Transitional phenomena have the essential quality that they partake for the infant of a world that is both ‘me’ and ‘not-me’, which repeats the to-and-fro movement of the mother being perceived as now me and now not-me. The transitional object is considered by Winnicott to be at the root of symbolism, and, in so far as it can be called symbolic, it symbolizes the initial union of the baby and the mother, now being repudiated and therefore lost (1967a).

As the range of the child’s interests gradually widens through the forward processes of emotional and cognitive development, so the qualities attached to transitional phenomena are absorbed into the playing of the infant and small child, and a stage is reached which corresponds pretty well to what is called by Piaget the stage of “symbolic play”. Piaget characterized this play as the primacy of assimilation over accommodation (1951), and I think Winnicott was saying something like this when he wrote that in playing ‘the child manipulates external phenomena in the service of the dream and invests chosen external phenomena with dream meaning and feeling’ (1968a), though it is also crucial in Winnicott’s theory that the child who is investing external phenomena with meaning from within is at the same time coming to terms with a world that is outside of and different from the self.

Another essential element at this stage is that the child should ‘be alone in the presence of someone’. In Winnicott’s words ‘the child is now playing on the basis of the assumption that the person who loves and is therefore reliable is available and continues to be available when being remembered after being forgotten. This person is felt to reflect back what happens in the playing’ (1968a).

The playing of the little child widens out into shared playing, and eventually into cultural experiences and activities of all kinds. Also the child, and the adult, as separate human beings, become able to use playing in communication with others -

communication which takes place in 'the overlap of play areas'. This includes the assumption that individuals can accept and tolerate the introduction of ideas that are not their own. Psychotherapy takes place in this overlap of play areas (1968a).

Here we have arrived at the idea of a place for playing. It seems that spatial relationships were very important in Winnicott's personal organization of the world, and this led him to describe playing, and sometimes also the individual who is playing, as being 'in' an intermediate area, or potential space, which is neither the inner world nor external reality but which partakes of both. "[I]t shall exist as a resting-place", he wrote, "for the individual engaged in the perpetual human task of keeping inner and outer reality separate yet interrelated" (1951). The 'potential' or size of the potential space refers to the capacity in the individual to contain experience', which in turn depends upon the ego-supportive', or 'holding' function of the parents in relation to the small child and ultimately of the mother in relation to the baby. Thus the potential space is 'that which initially both joins and separates. the. baby and the mother, when the mother's love, displayed or made manifest as human reliability, does in fact give the baby a sense of trust or of confidence in the environmental factor" (1967a).

Something has now been said about the nature of playing in Winnicott's description, but it is germane here to add a few of the numerous details that he has given. First, he has talked about the 'preoccupation' that characterizes playing in the small child, "akin to the concentration of older children and adults" (1968a). Second, he has described playing as "relaxed self-realization", "deliberate, but without too much of the deliberateness of trying" (1970b). A third thing that could be mentioned is that in playing the individual surprises himself or herself; and a fourth is that while a child often deals with anxiety through play, playing is not possible if instinctual arousal is excessive or anxiety becomes unbearable (1968a). Finally, Winnicott indicated a two-sided function of playing in the lives of human beings when he said that in playing the individual is able to be creative, and in being creative is able to affect the environment and at the same time to discover the self (1970a). The feeling attached to this self- discovery, or to the alternation or coincidence of perception and apperception in relation to the external world and to other people is that of enjoyment and of a sense of reality as opposed to futility in

life. It is here especially that playing links with symbolism, and with the whole question of meaning.

There is no doubt that there was wide agreement between Winnicott and Lowenfeld about the nature and function of the playing of children and it seems certain that Winnicott learned from Lowenfeld in this area. His book *Playing and Reality* was not published until 1971, the year of his death and while it incorporated ideas that had been taking shape during many years of clinical work, and especially those foreshadowed in his paper on transitional objects of 1951, Lowenfeld's ideas on play had to a large extent crystallized in her book *Play in Childhood*, first published in 1935. It is interesting in this context that 1935 also saw the publication of *The Origins of Love and Hate* by the Scottish psychotherapist Ian Suttie: a book which consists for the most part in a series of lectures given shortly before at the ICP (reprinted by Free Association limits. WW), it contains in embryo a theory of play that has echoes in the work of both Lowenfeld and Winnicott.

Lowenfeld's experience in child therapy was vast: for her book *Play in Childhood* she was able to use Case material from the therapy of 299 children whose length of attendance at the ICP ranged from four to 180 sessions, and by the time she wrote the introduction to her book *The World Technique* in 1959 the number of patients who had been treated was over 2,000. Her work with the children at the ICP had a definitely stated dual purpose: it was designed so that the observation on what might be called a medical model could be carried out simultaneously with therapy. Because of this she and her co-workers, with whom she was in daily contact, became expert in making exact and detailed observations, and her writing is copiously illustrated and illuminated by reports of these observations of the playing child which have great value in themselves.

In *Play in Childhood*, Lowenfeld deals specifically with the meaning of play for the child and its function in the child's development. The book is for the most part set out in what she saw as a sequential order of types of children's play, as follows:

- Play as bodily activity
- Play as repetition of experience

- Play as the demonstration of phantasy
- Play as realization of environment
- Play as preparation for life
- Group games
- The comic element in play.

A few lines from the chapter entitled 'Play as realisation of the environment' give evidence of the similarity between some of her ideas and those that emerged in Winnicott's writing:

"Between the child as in person and [the] tangled, confused, exciting world into which he has come, there stand, as the bridges between his inner self and it, toys and play and later, if the school be wise, his work at school. Every healthy child is excited and interested by his experiences. If he has freedom for phantasy play, he will have gained much enjoyment and release of energy from it. But this is only half of the picture, for parallel with this enjoyment of phantasy expression of his inner life the healthy child is equally interested in the exploration of the world of fact." (1935c)

In her conclusion to the book Lowenfeld lists four purposes that the play of children serves, and here the similarity is even more in evidence:

1. It serves as the child's means of making contact with his environment... Such play in childhood partakes of the nature of, and fulfills, much of the same social purpose as work in adult life.
2. It makes the bridge between the child's consciousness and his emotional experience, and so fulfills the role that conversation, introspection, philosophy and religion fill for the adult.
3. It represents to the child the externalised expression of his emotional life, and therefore in this aspect serves for the child the function taken by art in adult life
4. It serves the child as relaxation and amusement, as enjoyment and as rest. (1935e)

The last chapter of *Play in Childhood* contains a description of 'Children who cannot play', and here Lowenfeld shows her deep understanding of how pent-up aggression can inhibit playing and lead to a sense of futility and boredom in the child: 'Hostile emotions are felt by the individual to be so dangerous in quality that no form of expression is possible or permissible.' Here is an example from her clinic records:

"R. A., Girl, aged 3. She began playing with rabbits, and buried them one by one - father, mother, and little girl and baby rabbit - and, when asked why, she said because they had spilt something over the tortoise. She then became wildly excited and destructive, and these two moods alternated. She buried figures symbolizing other people, and seemed to be possessed of a kind of demonic energy to destroy the work of other children. Careful and persistent following-up of aggressive themes results in a steady loosening of the inhibition to play and a frank expression of aggression in action." For example:

"R. A., *on another occasion*. I went to fetch water for her, and she knocked down everyone else's things. When I had to write and could not play with her, she knocked me and said I was naughty, and she went on being as destructive as possible towards other people's things. She then went 'mad dog' through the Institute. She knocked down her own blocks and also those of a boy, which amused him, and then the two played at throwing things about. There was a great deal of noise, R. A. being the ringleader." (R. A. later developed into a charming and friendly little girl with an excellent play sense). (1935d)

This seems close to Winnicott's idea of 'anxiety that is "unbearable" 'inhibiting playing; and this aspect of an inability to play must have figured largely in his mind when he said of patients in psychotherapy, 'If the patient cannot play, then something needs to be done to enable the patient to play, after which psychotherapy may begin' (1968_a) Indeed, it is possible to see this idea emerging, much earlier in his career, in his interpretation of the playing of infants with the meta] spatulas that were on his desk in his medical out-patients clinic, which he called the 'Spatula Game'. In this game he found a common sequence, which included an initial period of hesitation on the part of

the baby, followed by the grasping and whole-hearted mouthing of the spatula. After this the baby became able to play with the spatula in a surprising variety of ways (1941). It is interesting that Winnicott chose to bring forward to his 1968 paper 'Playing: a theoretical statement' an example of the Spatula Game dating from 1931, in which a twelve-month-old baby girl overcame a serious physical symptom (fits) at the same time as, with his help, she resolved her difficulties with playing. Here is part of his description:

“At one consultation I had the child on my knee observing her. She made a furtive attempt to bite my knuckle. Three days later I had her again on my knee, and waited to see what she would do. She bit my knuckle so severely that the skin was nearly torn. She then played at throwing spatulas on the floor incessantly for fifteen minutes. All the time she cried as if really unhappy. Two days later I had her on my knee for half an hour. She had had four convulsions in the previous two days. At first she cried as usual. She again bit my knuckle very severely, this time without showing guilt feelings, and then played the game of biting and throwing away spatulas; *while on my knee she became able to enjoy play*. After a while she began to finger her toes, and so I had her shoes and socks removed. The result of this was a period of experimentation, which absorbed her whole interest. It looked as if she was discovering and proving over and over again, to her great satisfaction, that whereas spatulas can be put to the mouth, thrown away and lost, toes cannot be pulled off.

“Four days later the mother came and said that since the last consultation the baby had been ‘a different child’. She had not only had no fits, but had been sleeping well at night - happy all day, taking no bromide. Eleven days later the improvement had been maintained, without medicine; there had been no fits for fourteen days, and the mother asked to be discharged.” (1968a)

There were of course differences in orientation and emphasis between Lowenfeld and Winnicott, exemplified especially in the relationship of each to psychoanalysis. Winnicott became, as a medical student, a committed Freudian, and remained one for the rest of his life. Lowenfeld, on the other hand, while she undoubtedly made use of

psychoanalytic theory, was unable in the long run to accept it as the basis for her approach to child psychotherapy. There was something unacceptable to her in the idea of a theory of psychic development in the child, which she saw as relying for its verification on the psychoanalysis of adults. Furthermore, she believed the theory (at least as it was in the 1920s and 1930s) too limited when applied to the play of children: she wrote that Freud's ideas had been developed, primarily by Melanie Klein, into 'a theory by which play is regarded exclusively as the representation in symbolic form of wishes, ideas and thoughts related to the theory of infantile sexuality'; and that 'while... play of the kind described by the psychoanalytic school does certainly exist, this conception cannot be taken to cover more than a certain part of the total field of children's play' (1935a). It seems that she saw psychoanalytic theory, at least as applied to the therapy of children, as something essentially static: in a paper she gave in 1938 about the 'World Technique' (which I will come back to later) she said 'the child analyst brings to her work with children an already formed outline of a doctrine concerning the structure of the mental and emotional life of children which is implicitly accepted'.

It was in this context that she rejected, at least in theory, both 'transference' and 'interpretation' (1937, 1938); for, in so far as she saw 'transference' as transference of 'id' relationships, and in so far as she saw 'interpretation' as interpretation of (a) the transference or (b) symbols according to 'a doctrine' about their meaning, they constituted for her an interference not only in the kind of objective study of a child's mental state that she wished to make but also in the therapy itself. She spoke of interpretation of symbols by the Kleinian theory as 'a very strong explosive to the mind of the child' (1931, 1938). She believed that in play therapy the 'tangles' of the child's relationships were transferred on to the material provided for play (1959a), and she incorporated into her training for child therapists the caveat that there should be 'no question of a specialised form of interpersonal relationship with the therapist with whom what develops is a normal atmosphere of trusted fellowship' (1959c). Actually one gets the impression from her clinical records that she and her co-workers did in fact interpret quite a lot along explanatory or educative lines, though only after the child had first had the chance to describe what he or she had produced with the material available.

By contrast, Winnicott practised within a psychoanalytic context, and instinct theory remained a cornerstone of his work. Moreover, whatever differences with the Kleinian school may later have appeared, he was to say near the end of his life that Klein had ‘taught him that Without which he could not do the psychoanalysis of children at all’ (1967b). On the other hand, like Lowenfeld, he saw self-revelation as the key to playing and hence also to therapy; and this led him more and more to the view that, especially where illness resulted in the blocking of the capacity to play, interpretation should be used sparingly: as he put it in his by now famous statement, ‘It appalls me to think how much deep change I have prevented or delayed in patients *in a certain classification category* by my personal need to interpret. If only we can wait, the patient arrives at understanding with immense joy, and I now enjoy this joy more than I used to enjoy the sense of being clever’ (1968b).

The only public record Winnicott has left of the analytic treatment of a child extending to more than a very few sessions is the case history published under the title of *The Piggie*. While this undoubtedly owes much to Klein, it is perhaps possible to see a contrast to her work in the exploratory way that he interprets within the transference, as though to enable self-revelation: one does indeed find ‘two people playing together’. Here is an example:

Gabrielle [now aged two and three quarters] put the two big soft animals together and said: “They are together and are fond of each other.’ She was also joining two carriages of a train.”

D.W.W.: “And they are making babies.”

Gabrielle: “No, they are making friends.” (1977)

Winnicott has duly written in the annotations in the margin ‘Concept of ego-relatedness’. He goes on to say:

“She was still joining up bits of trains and I said: ‘You could be joining up all the different times that you have seen me.’ Her reply: “Yes.”

Obviously, there are many interpretations to do with the joining of parts of trains, and one can use this according to the way one feels is most appropriate at the moment, or to convey one's own feelings. (1977)

Winnicott's term 'ego-relatedness' suggests another important area of similarity and dissimilarity between himself and Lowenfeld. In Lowenfeld's work ego-relatedness turns up as the idea of 'trusted fellowship' between child patient and therapist, and this was certainly seen as an essential in play therapy by both writers. But what Lowenfeld did not do, as far as I know, was to enquire into the origin in the child of a capacity for such a relationship, or into the origin of the capacity to do the thing called 'playing' itself, which Winnicott saw as two aspects of the same thing. When Lowenfeld talks about the origins of play it is generally within a social and historical context, and attention is especially drawn to the universality of the activity. The universality of playing was emphasized by Winnicott as well, but his own particular orientation within the psychoanalytic tradition led him irrevocably to a consideration of the universals in the child's earliest experiences that might account for it. What he attempted was a theory of play which elucidated nothing less than the fact that there actually is in human affairs a continuous and changing social and historical context: a theory based on the fact, inseparable from the human condition, of the relatively long period of actual dependence of the infant and child on the adults who are and who shape his environment.

Margaret Mead described Lowenfeld's orientation to child development in these words:

"She believed that the child's relation to himself and to the universe provided as important a key to human development as the exploration of interpersonal relationships within the family, which she learned from psychoanalysis." (1973)

But for Winnicott there was no such thing as a relationship to the self or to the universe that did not have as its basis the earliest relationships, and especially that built upon the reliability of the mother. If the child was able to play alone in the presence of someone else, and to transfer on to the material available for playing something of the

emotions he was feeling, then this was a result of the quality of those early relationships made manifest and reinforced in the person of the therapist. Furthermore, as it was his view that the quality of the first relationships depended upon the individuals who made up the child's environment being themselves, he saw the actual person of the therapist, and a personal technique, as essential ingredients in therapy.

The difference in Lowenfeld's attitude in this respect was not due only to her theoretical position. I have already mentioned that her insistence that there should be 'no specialised form of interpersonal relationship' in play therapy between child and therapist was partly to facilitate the kind of observational studies that she wished to make of children's play. She was very much aware of the influence of the observer on what was observed, and she believed that a truer picture of a child's play and therefore state of mind could be obtained when more than one worker had charge of the child at different times; and this was a practice that she found quite compatible with the progress of therapy itself (1935b, 1959b). Thus, while Lowenfeld saw the variability that might accrue from the person of an individual worker as being to some extent avoidable, Winnicott came more and more to regard the individuality of the therapist as a part of the setting needed if playing was to take place. In fact he wrote in the Introduction to his book *Therapeutic Consultations in Child Psychiatry* that what would emerge from reading the book would be 'a feeling that I as the psychiatrist am the constant factor and that nothing else can be predicted' (1971).

Lowenfeld's explicit purpose in her objective study of the play of children was to make a contribution to the theory of child development on the basis of what the children themselves produced with the material available for play. Her method involved the making and comparing of records of these productions, and because of this the material that the workers and the children used was standardized. It was chosen with care, 'partly through the observation of children at play in natural conditions and partly by a process of trial and error in suiting this material to actual children's needs at the ICP' (1935b). The scope of the material was indeed formidable: it ranged from the primitive in the shape of earth and water to the sophisticated in the shape of Meccano and tools and wood for carpentry. She classified her equipment under the headings of:

- Phantasy material (inchoate and choate)
- Construction material
- House or miniature adult material
- Materials giving scope for movement and destruction.

Among this equipment were certain specific sets of toys that Lowenfeld developed and used in observation and in therapy. The most famous of these is the set that comprised the material for the making of 'Worlds'. In 1938 she read a paper to the Medical Section of the British Psychological Society about 'The world pictures of children', which was later incorporated into her book *The World Technique*. Here is her description of the world material taken from the paper:

"The apparatus consists of a big metal tray on a table of medium height; it is painted black outside and blue in. It contains sand (three sorts of sand are provided, fine and coarse brown sand and silver sand): also as much water, as the child desires. Silver sand is used for snow on mountains. The tray can also be used empty of sand. Some children use quite dry sand, some wet enough to be mouldable, some a great deal of water in which sand is a negligible factor. Some Worlds are made almost or entirely without the addition of any toy objects, the relation between water and sand fully satisfying the child...

Standing beside the tray is a cabinet: it contains small objects of every kind as varied and accurate as the manufacturers will give us, of all the things commonly to be found in a World: houses, trees, people, both ordinary and military, animals, wild and tame: transport of all sorts, ice-cream men, fences, lamp posts, garden chairs, etc., and with it are used coloured paper, coloured and plain sticks, plasticine and glitter-Wax, and anything else the ingenuity of the observer can suggest to supply the need of any particular child." (1938)

With this material before him the child was 'invited to make whatever came into his head', without intervention from the therapist. 'In Worlds', Lowenfeld said, 'the child is confronted by a piece of his own feeling, thinking, remembering - life set out by himself

for his own study' (1938). She emphasized the 'unexpectedness' of the way that children often used the material, 'once the first strangeness... has worn off' (1959a). Once the World was finished the child was asked for an explanation of its elements (if indeed this had not already been supplied in a running commentary), and it was recorded by means of a written description which included what the child had said, and often also by a drawing. With the help of these records Lowenfeld hoped 'to make a collection of symbols which constantly recur, to estimate their frequency of appearance, and the mental conditions with which they correlate' (1931).

I think that this approach to the child's use of symbols had the effect of widening the conception of the basis for symbolism ~ of that which can be said to be symbolized in the child's play - if we compare it to the early formulations of psychoanalysis. The Freudian concept of symbolism was fairly restricted (though Freud, as always, left doors open): symbolism in Freud's writing seems especially to have been linked to the repressed unconscious. This is brought out in Ernest Jones's classic exposition of the subject written in 1916. Jones begins by expressing the view that 'if the word "symbolism" is taken in its widest sense, the subject is seen to comprise almost the whole development of civilisation. For what is this other than a never—ending series of evolutionary substitutions, a ceaseless replacement of one idea, interest, capacity or tendency by another?' But he concludes that in the Psychoanalytical theory of symbolism 'only what is repressed is symbolized; only what is repressed needs to be symbolized.' The range of things symbolized, moreover, though comprehensive from the point of view of Freudian theory as it had up to then developed, is narrow: 'All symbols represent ideas of the self and the immediate blood relatives, or of the phenomena of birth, love, and death.' Jones explains that by 'the self' he means the bodily self, 'not the mind', and that by 'love' he means 'more strictly sexuality'.

If we consider the theory of the development of the child's mind that Lowenfeld has told us (1938) that she derived from 'looking at the Worlds that the children themselves make', it is possible to see how a broadening of the range of things symbolized became incorporated into it. From her experience she postulated a primary system, which she called the 'protosystem'. Though she would have wished to qualify such a statement,

the protosystem corresponds roughly to the Freudian unconscious (not, however, the repressed Unconscious) in that the primary processes of displacement, condensation and sensorial or preverbal representation are inherent in it, as is timelessness. Also it cannot be known directly, but only through dream, play and artistic creation. The protosystem includes various 'clusters': these are groupings of sensorial experiences, which accompany an event or gather round a figure of emotional significance'. Where the clusters are pathogenic' the child's relation to the world is disturbed. It is these clusters in the protosystem that form the basis for symbolization, and Lowenfeld wrote about them that 'the number and variety depend upon two factors; the sensitivity and the intellectual quality of the child, and the variety of its experience. Clusters are of all sizes and complexity and composed of very various material' (1948).

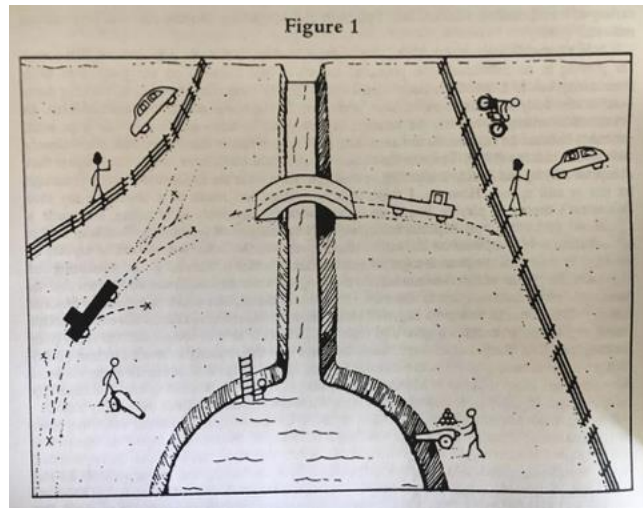
It is likely that Winnicott was saying something very close to this when he wrote that the area for playing in an individual (the potential space) is 'not founded on the pattern of body functioning but is founded on body *experiences*' (1967a) - experiences, that is, coming from outside the body and therefore variable according to the variations in the environment. In Winnicott's writing, however, the concept of symbolism is not easy to come to grips with, probably because he felt that its use according to Freudian theory did indeed link it too closely to body functioning (1958). Towards the end of his life, and especially in some of the papers that comprise *Playing and Reality*, it is perhaps possible to see a freer use of the word 'symbol', though its use is still sparse. However, I think it is not taking too much of a liberty to say that Winnicott's theory of playing, bound up as it is with the discovery of meaning, has made a significant (even if largely implicit) contribution to the subject of symbolism. Essential to this contribution is his emphasis on *loss* rather than repression: the actual loss of certain aspects of the mother, and then the parents together and the family, which is inherent in the separating out of the child from the early environment and the progress towards integration and autonomy. In favourable circumstances, that is when the reliability of the mother and of the parents ensures that the child does not become a deprived child, the early experiences remain alive in the inner world, and the loss becomes a gain. The child (and adult) is able to some extent to carry over the baby's earliest illusion of having created the world into that capacity to invest external reality with personal meaning, which is the essence of playing and of

symbolization. In many respects these ideas are close to those of Marion Milner, who, as is well known, did write more explicitly on symbolism (e.g. 1952,1956), and with whom Winnicott exchanged ideas over many years.

It seems that Lowenfeld, on the other hand, from the beginning simply used the term 'symbolization' to describe the means whereby a child might discover any aspect of experience contained in the inner world through his use of outside objects or material like those provided in the World apparatus. It is interesting that she often saw among the things symbolized the child's experience of the growth processes themselves, rather in the way that Jung (1946) or Fairbairn (1944), differing from Freud, saw in the dreams of their patients not so much the fulfilment of wishes as the representation in symbolic form of the state of the inner world. This seems to be bound up with the fact that for Lowenfeld the need of the infant or child to 'impose a pattern on his perceptions and experiences' was absolutely fundamental and primary, and that she saw the clusters in the protosystem as arising out of this need. There is a good example of this in one of the Worlds recorded in the case history of Charles Robinson, which forms a part of her book *The World Technique*.

Figure 1 is the production of a boy of eight years old who was living in a home for maladjusted children on account of an 'inability to make contact with his fellows accompanied by unmanageable outbreaks of violence on the one hand and an almost absolute inability to learn on the other'. Most of the Worlds made by this boy were 'realistic' Worlds; that is, Worlds where the combination of figures in relation to their actions, the setting and each other showed a strong sense of the shared reality of the external world. In fact, as often happens with antisocial children, there can be seen in the Worlds that Charles made a flight from inner to outer reality, and the dimension of depth is missing. The central portion of the World illustrated above, however, belongs to the protosystem. In it a bizarre piece of work is going on which is really pure invention. It is easy to see, and in fact Lowenfeld herself points out, that the shape of the river and lake, the cannon and the ammunition, the ladder at the side, and the proposed action of shooting into the lake can all be considered as sexual symbols. But Lowenfeld sees the work that is going on, with all the importance and seriousness attached to it, as an attempt

to get to the depth itself that is inside Charles - an admission that there are forces within which must be examined before they can be controlled. In other words, it represents the beginning of the end of a dissociation; but it represents it not only in theoretical form in the mind of the therapist but in symbolic form in the play of the child.



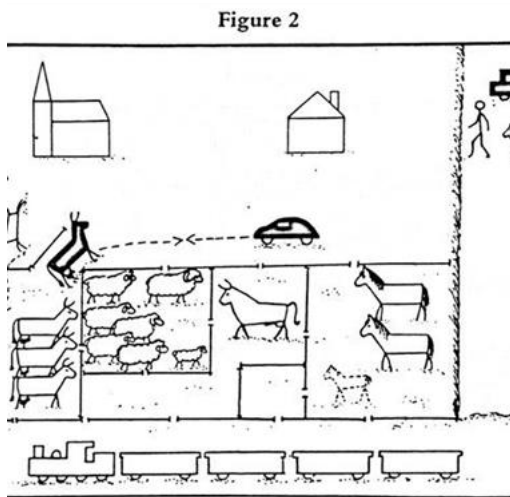
The important force that needed to be controlled in Charles was what Lowenfeld designated as 'E'. E could be said to be the life force that facilitates growth of the body and both emotional and cognitive development. When E becomes blocked in any one of these functions it can appear as an uncontrollable complication; and this is how Lowenfeld saw Charles's aggressive behaviour, and indeed how she explained it to him. In Charles's Worlds Lowenfeld saw E as particularly symbolized by trains.

Figure 2 shows the position of a train - the only object really out of place here - in an earlier World made by Charles. It represents only noise - it has not yet started to move; and these unmoving trains appeared in several of Charles's earlier Worlds. As Winnicott once said in talking about the dream of a patient, 'trains which start to move are liable to accidents'.

Figure 3 shows the World made by Charles immediately after the one in which the important work of plumbing the depths was going on. It can be seen that there is the same general outline of a pool and that trains are placed so that they repeat its semi circularity inversely. The trains are the bizarre item in this jungle scene, thus attracting

attention to themselves. The idea of movement and of danger of accident is conveyed by the spare engines at the side of each train 'to take over if anything goes wrong'.

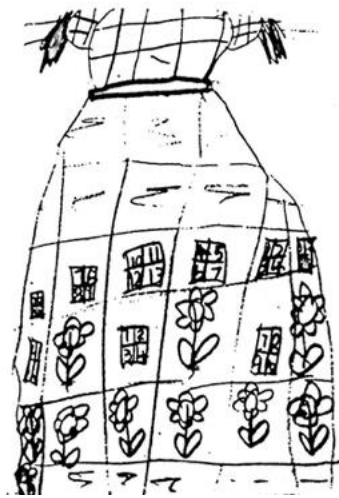
The next World made by Charles (Figure 4) was the first one in which he was able, in Lowenfeld's words. 'to mobilise trains into functional significance' (1959b).



These examples, I think, give some idea of the versatility of the World apparatus in revealing as much as was possible of the state of mind of the maker at any one time.

The second example is a drawing made by Ada, a girl of eight, at the end of a therapeutic consultation in which she had been in communication with Winnicott about becoming deprived when she was four. Figure 6 shows how she drew her mother's dress just as she was finding once more a lost relationship to her. It is the perspective in the drawing that is interesting, especially as there was no sense of perspective in the other drawings that Ada made. As Winnicott pointed out, 'It is so drawn that the child's eyes are about at the level of the mother's mid-thigh region' (1971).

Figure 6



When Lowenfeld gave her talk about 'The World pictures of children' in 1938, she was roundly, and at times severely, criticized by the child psychoanalysts who were in the audience. Winnicott was among those present, and I think one of the sentences from his comment is revealing: he said he felt 'a sense of constriction at the provision of a set apparatus'. Perhaps he was saying that more of the self and of the imagination must go into the use of material that is in itself simple, like the spatula that 'found' in his clinic and the pencil and paper with which he and his child patients played. Even when he describes small children playing with toys in therapy the feeling of the material is different, although he did at one stage have a set of toys like those used by Klein. Through the years these were dispersed, and other toys of all sizes were added to his collection, as well as odds and ends from around the house, which were less representational. By the time he wrote the case history of *The Piggle* he was describing the toy shelf in his consulting room as a jumble', and a look through this book reveals that among the objects used in the therapy (leaving aside the more conventional toys) were a stick, bits of wood, plastic strawberry boxes, two blue Optrex eye baths, a round toy with a perforated centre which came from goodness knows where', a spent electric light bulb with a face drawn on it, a little bottle, a red Indian 'which is blue plastic', a handle tied to some string, a tangled mass of string, a hook belonging to a carriage and a wooden cylindrical ruler left by another patient (1977). For Winnicott the finding of the thing by the child was of paramount importance.

In Lowenfeld's work by contrast the emphasis is on provision -provision of 'whatever the ingenuity of the observer can suggest to supply the need of any particular child'. It is as though one dimension of the variability of the potential space is being confined. This is not to say that Lowenfeld did not recognize the health that is to be seen in the richness and variety of a child's play, nor that an individual child cannot use symbols in a way that is unique: indeed this is something that one feels the two writers had in common. It is rather that in the finding of the thing (or symbol) in the external world, as well as in the use of it, Winnicott saw the way people use their imagination and the world moves on.

Perhaps, in the end, the two come closest in their attitude to playing in the records they have left of their clinical work. Especially this is true when Lowenfeld describes the cases where she herself was the therapist. In the history of Charles Robinson, quoted above, it can be seen from descriptions that are almost incidental to the main theme of the therapy using the World technique how a relationship that Winnicott would have called 'a kind of intimacy' grew up between this rather formidable woman and this small desperate boy. She understood what it was like to be withdrawn from human contact except when in a state of violent rage and destructiveness and he knew this. There are references to her showing Charles how to stamp on conkers and throw them at the door of the hut where the therapy took place 'as a way of discharging fury without causing damage', and of fights with boats in the sink between Charles and herself 'interspersed with hammering on tins'. He became eager for his sessions with Lowenfeld and for the discoveries that were made about himself; and though he was virtually enumerate and had the greatest difficulty with school work the area of communication between the two was such that Lowenfeld was able to interpret his difficulties to him in terms of the entirely abstract 'E'. His Worlds, and the stories that he took pleasure in telling about them, grew in their use of imagination, and the description of the treatment ends with the following:

"We discussed Charles' earlier relation to people and how he could not imagine that things that happened were not directed against himself, and he told of a time when his sister had stood upon his soldiers on the floor. When I acted out

grownups shooing children away, Charles laughed and for the first time became a merry boy.” (1959b)

Conclusion

It is clear that both Lowenfeld and Winnicott knew that there is ‘play’ and there is ‘playing’, and that one may or may not go over into the other. Both looked at the playing child, and saw that playing is in itself a kind of therapy. Lowenfeld’s meticulous descriptions of children playing, her understanding of the importance of playing to children and her study of the symbols that they used added breadth to the existing ideas of play, and I believe that these were instrumental in Winnicott’s conceptualization of the nature and function of playing within the body of psychoanalytic thought.

When the last of Winnicott’s papers were being sorted out, after the death of Clare Winnicott in 1984, a handwritten note was found among them. These words are taken from it.

“It is perhaps natural that as psychoanalysts we appreciate ourselves, and but seldom turn to look in a positive way at those who are our colleagues, and yet not strictly speaking entitled to the epithet psycho-analyst... I myself have a need, perhaps because of advancing years, to look at some of my friends and to make sure that I am not missing the chance to express appreciation. Even a good obituary notice is a poor thing as compared with recognition of value in a live person and the statement that can be read by the person while alive and active and able to feel enriched. As I start to put into practice the principle that appreciation is no bad thing I find I have three names in front of me...”

The first of the three names is Dr Margaret Lowenfeld. The sad thing is that she can never have seen what he wrote.

Acknowledgements

Figures 1-4 are reproduced by kind permission from Margaret Lowenfeld, *The World Technique*, London: Allen & Unwin, 1979.

Figures 5 and 6 from D.W. Winnicott, *Psychoanalytic Explorations*, Harvard University Press/Kamac, 1989, and *Deprivation and Delinquency*, Tavistock, 1984, are reproduced by permission of Mark Paterson for the Winnicott Trust.

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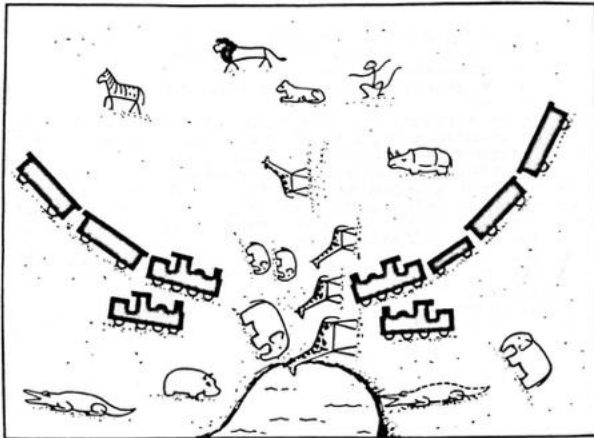
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Figure 3



Lowenfeld found that it eliminated the need to think either verbally or linearly, both of which she believed sophisticated and difficult for children. In children, she wrote, 'thought, feeling, sensations, concept and memory are all inextricably woven. A child's thought is fluid, and movement can take place on several planes at once' (1938). The three-dimensional World allows something of this to be expressed.

However, I think that Lowenfeld was perhaps too dismissive of other methods of play therapy with children. About drawing and painting, for instance (although the children at the ICP did draw, and paint), she said, 'To pencil, paint and paper children have a relation very really limited by skill' (1959a). Winnicott, as is well known, came more and more to use drawings and the 'Squiggle Game' as therapeutic tools with children of latency age and even with adolescents. In this game Winnicott made a movement with a pencil on paper, and the patient was asked to complete the resulting squiggle in any way that seemed appropriate. The process was then repeated the other way round. This had the advantage of enhancing from the beginning the state of relatedness between Winnicott and his patient, and of putting the child at ease. I have taken two examples from Winnicott's work to show how a child's emotions and states of mind can be revealed in these ways with conviction and economy.

The first is a squiggle from the case history of Patrick, a boy of eleven, who came for therapy after the death of his father. Among the squiggles made at the beginning of the interview was one by Winnicott, which looked like a cobra (Figure 5). It can easily be

seen how this boy (who incidentally was a talented draughtsman) was frightened of this, and dealt with his fear by putting the snake in a museum, on a plinth.

Figure 5

