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**From Instinct to Self:  
A Psychoanalytic Exploration into a Fairbairnian  
Understanding of Depression through a Dialogue  
with My Imaginary Virginia Woolf**

*A thesis submitted in partial fulfilment of the requirements for the degree of Doctor of  
Psychotherapy and Counselling*

By: Ni-ni FANG

S1111019

Doctor of Psychotherapy and Counselling

University of Edinburgh

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## Declaration

This is to certify that that the work contained within has been composed by me and is entirely my own work. No part of this thesis has been submitted for any other degree or professional qualification.

Signed:

A handwritten signature in black ink, appearing to be 'Z. S.', written over a horizontal dotted line.

## **Abstract**

This thesis explores a psychoanalytic understanding of depression from the perspective of Fairbairn's object relations theory, something Fairbairn did not himself undertake. Highlighting the historical and political contexts of the development of psychoanalysis in Fairbairn's time, I underline the marginalization of Fairbairn's theory, which I attribute primarily to his lifelong endeavour to challenge the orthodoxy of the time: instinct theory. I chart a theoretical trajectory from the instinct theory (Freud, Klein) to object relations theory (Fairbairn), to contextualise my argument for the potential of Fairbairn's theory. My argument aligns with Rubens' (1994, 1998) view that an extension of Fairbairn's theory beyond what Fairbairn himself originally proposed on the subject of depression is not only advantageous but also necessary.

The Fairbairnian understanding of depression at the heart of this inquiry is illustrated through my personal engagement with psychoanalytic theory and framed by my subjective experiences and interpretations. Contending that theory requires personal voices to make sense and be relevant, I engage creatively and personally using the method of letter-writing to an imaginary companion - Virginia Woolf. The Virginia Woolf I construct and with whom I engaged in the research process is based on factual information about Virginia Woolf along with her published texts. In this process I blur the boundary between the real Woolf and my imaginary Woolf. Troubling the edge of reality and fantasy, I use the Woolf of my imagination to stage a process of getting to know Woolf personally, working to develop a trusting relationship and engaging her in a conversation about theory. My letters to Virginia Woolf trace an unfolding dialogue in

which we tell and hear each other's most intimate stories, once unthinkable and unsayable. The letters trace the transformation of my own understanding of the nature of depression, and through them I seek to establish a line of theoretical argument about depression running through the claims of Freud and Klein before turning to the Fairbairnian version of object relations theory. In so doing this thesis complicates psychoanalytic knowledge of the nature of depression, and argues that, framed in Fairbairn's system, depression can be understood as an actively organised psychic manoeuvre to defend against changes to the endopsychic structure. In other words, and as elaborated through the letters constructed in this thesis, I argue that depression can be understood as a defence against the disintegration of a particular sense of self sponsored by internal object relationships.

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## Chapter One, an Introduction

This doctoral thesis is rooted in psychoanalytic thinking. It is about theories that enable a close understanding of depression with an unconscious origin. Through making personal engagements with the psychoanalytic perspectives developed into the distinctive Freudian, Kleinian, and Fairbairnian lines of thought, I bring into focus the limitations of the Freudian and Kleinian theories, and the potential of Fairbairnian object relations theory in reconceptualising the nature of depression. The theoretical trajectory takes off from Freud, to Klein, and finally culminates with Fairbairn. I agree with Ogden (1989), who points out that it is not only impossible to appreciate Klein's work without having understood Freud's work, but it is also impossible to understand Freud without having read Klein's work because Klein's theory expands and realizes some of the potentials that were latent in the Freudian theory. Following Ogden's argument, I contend that the same could be said of Fairbairn; that it is impossible to understand the full implications of what he has achieved, the potential for understanding human psychology his theory brings, without first looking into what Freudian-Kleinian instinct theory has established.

Ronald Fairbairn (1889-1964) spent his life working in the geographically remote position of Edinburgh from the then central psychoanalytical community in London. This geographical isolation enabled him to stand against the mainstream Freudian formulations and form his own unique thinking (Pereira & Scharff, 2002: 1-2). Fairbairn was a rare psychoanalytical theorist who radically rethought and extended Freudian theory beyond what the dominant psychoanalytical climate of the time could

allow. For almost half a century Fairbairn remained relatively unknown (Birtles & Scharff, 1952: xi)

On the subject of depression, Fairbairn initially took his theoretical departure from Melanie Klein, and inherited Klein's ideas of "positions"(paranoid-schizoid, depressive) and internalized objects (Rubens, 1994: 151). This influence from the classical Kleinian thinking gradually became faint in the face of increasingly irreconcilable divergences. Even though Fairbairn had not devoted himself to developing his own theory of depression I believe that his original theoretical formulations, such as "object-relatedness" (1946) and "endopsychic structure" (1944), have the potential to grow into a unique line of thought on depression, as they have proved to be important and crucial in contemporary psychoanalytic thinking on psychic process and defence. Rubens (1994, 1998), who was the first scholar to extend Fairbairn's theory in reconceptualising the phenomenon of depression, puts forward a Fairbairnian understanding of depression that was never taken further by Fairbairn himself. In this thesis I largely draw from contributions made by Rubens (1994, 1998). Even though Rubens gives a new theoretical take on depression from a Fairbairnian perspective, he did not provide illustrations via case examples, subjective accounts or applications that demonstrated how this extension could be highly valuable. In addition, he did not contextualize this extension of Fairbairnian depression with the core arguments developed by Freud and Klein, which I believe is important both in arguing for the uniqueness and strength of a Fairbairnian lens into depression as well as calling into question the Freudian and Kleinian frameworks. In addressing these issues, my thesis seeks to produce knowledge by answering the questions: what can an extended

Fairbairnian understanding offer to the psychoanalytic knowledge of depression that contests the Freudian and Kleinian understanding, and what would a Fairbairnian understanding of depression look like?

Drawing attention to the place of depression in the theoretical understanding developed by Freud, Klein, and Fairbairn, I present the visions they each have of depression and establish a coherent thread of theoretical arguments by elucidating controversies within the psychoanalytic knowledge of depression. Within the historical context I emphasise the divergences there have been in the development of their theories and shine light on the Fairbairnian way of thinking on human psyche. Seeing psychoanalytic theory as inseparable from the subjective practice of meaning making (Ogden, 1990; Schafer, 1992; Bondi, 2013), the theoretical explorations in the research process encompass a subjective engagement with the theory through which I explored the full meanings of the theoretical implications of the Freudian, Kleinian, and Fairbairnian depression in the context of my life experiences. To bring theory to life I use a personal voice, contextualising the theory through my own lived experiences and witnessing how personal meanings and self-knowledge evolve in the course of living the theory. Arthur Frank's (2013) statement that "theory awaits further living and the stories of those lives" (xxi) underlines how I use, and relate to, the theory in this thesis.

A significant element of my personalising of theory is represented by the process of 'constructing' an imaginary Virginia Woolf as my companion in inquiry. The purpose of this is two fold: firstly, it enables a creative imaginative dialogue through which to undertake a psychoanalytic exploration with another person, a 'sister soul' with whom I empathised, valuing the resemblances between our life experiences, position in our

families as daughters, and the shared experiences of depression. Secondly, it is to enliven the historical context of the marginalisation of Fairbairn in the time of Woolf and Fairbairn. Woolf's highly ambivalent attitude towards psychoanalysis, compounded by a personal distaste of Freud and Freudian psychoanalysis, lent poignancy to my recognition of her attempts to probe into her past and her depression, as it signified a potentiality that she was searching beyond Freud. Woolf's intimate yet troubled relationship with psychoanalysis is examined to foreground what kindled a desire within me for an imaginative dialogue with her.

Drawing from Woolf's written texts, her novels, autobiographical work, diaries and personal letters, and the biographies of her life, I construct a version of Virginia Woolf using imagination founded on factual information about Virginia Woolf. I intentionally blur the boundary of the real Woolf and my imaginary Woolf, troubling the edge of reality and fantasy of what is constructed internally. In the theoretical dialogue with my imaginary Woolf, we explore theory in the contexts of personal experiences, subjectively re-examining what the Freudian, Kleinian, and Fairbairnian theory contended as the nature of depression. Re-stating the research aim, I seek to illustrate a subjective vision of the Fairbairnian depression as personally relevant distinct from the Freudian and Kleinian systems. Beyond that, the more general aim I have in mind is to establish a place for Fairbairn in on-going psychoanalytic debates on depression. By looking to explore the potential of Fairbairn's work I do not wish to privilege Fairbairn's theory. Rather I wish to illustrate that his theory can provide invaluable insights and an alternative understanding to Freud and Klein's much better known theories in understanding depression. The intrinsic originality of this thesis lies in the juxtaposition

of my performative evocation of Fairbairn's theory and the personal reflexive voice with which the theoretical implications are illustrated. Moreover, it is also in my creative construction of an imaginary Virginia Woolf as my partner in inquiry with whom I embodied a relational approach to allow expressions of subjectivity and personal agencies, as opposed to positioning Woolf as an object of study.

The origin of the interest in this research sprouts from a personal desire to search for a psychoanalytic understanding of my depression. The knowledge that I sought to produce in this thesis was highly subjective, as I engaged with psychoanalytic theory through self-reflection. Reflecting alongside psychoanalytic theory opened up for me a deep interest in the psyche, synchronizing with an interest to read Virginia Woolf, who explored the complexities of the inner world through her fictional creations. From reading her novels, I recognized the inner horrors brought about by familial, historical and personal distress intertwined with the issues of selfhood and identity. Like Lily Briscoe, in *To The Lighthouse*, who gravitated towards the Madonna of the maternity Mrs Ramsey, yet was conflicted also by a need to protect her individuality and not be lured onto the same path. Like Rachel Vinrace in *The Voyage Out*, who came to meet the world for the first time and develop her opinions through the people she met on the voyage out to South America, only to find her voice constantly shut out from the male-dominated world in which her untimely death at the end, perhaps, communicated an impossibility for her to go on existing. Like Septimus Warren Smith in *Mrs Dalloway*, a severely damaged veteran who despaired in isolation, chose death as his final destiny to

protect the ownership and dignity of his life. Woolf's novels provided me with a doorway into the inner lives hidden underneath the symptoms.

As a reader I participated in these stories and enriched the un-written by projecting my own thoughts and feelings onto the characters in a transference manner. As a psychotherapist, I found the characters profoundly moving and could not help but be absorbed in their maddening chaos, helpless confusion about lives, and a search for ultimate resolutions to their struggles. Intrigued as I was by her characters, I went on to read about Woolf's life, and the strangest feeling dawned on me: Woolf and I, across generations, have orbited around a similar inner universe, that we were different yet the same, each burdened by the vicissitudes of loss, of being a daughter, of an extreme difficulty of finding a place of one's own. Reading Woolf, I found myself also recollecting what I had lost, the memories that I have long forgotten, the multiple selves in the past that encountered the similar dilemmas engendered by the uncertainties between self and others, between love and hate, and, to put it psychoanalytically, how our old horrors were integrated into present wanting and shadowed future hope.

Although my life experience is not identical to that of Woolf there are thematic similarities that lend themselves to being examined together, inasmuch as she and her characters seek to probe into, to work through, the unresolved sense of loss situated in the tapestry of their most intimate relationships. Woolf's life stories put mine in perspective, and I realized that reading others' lives helps us to see aspects of our own that we had not noticed or previously considered. So I am aware that my transference feelings in reading Woolf derive not only from purely an aesthetic experience, but from several personal identifications with her. In the process of becoming emotionally

immersed in my study of Virginia Woolf's life and engaging her as an imaginative partner in this inquiry, a sense of there being an empathetic bond between us permeated into the imaginative dialogue. Within this empathetic bond, albeit imaginative, the deep-seated insecurity in writing about my depression was alleviated by a sense of participating in something shared with Virginia Woolf.

Using what we have in common in terms of life history, I weave together a theoretical study of Woolf's depression with a study of mine, in a reflexive and personal way. Attending to history, I address our differing responses to the psychoanalytic theory, which unnerved and, at times, anguished Woolf but stimulated insights for me and helped me in making sense of my depression. Valuing her knowledge of herself and her personal agency, I do not seek to "analyse" or "examine" her as a subject of study from a third person perspective or an authoritative stance, but to relate to her and to engage her, using what we have in common to enable resonance and mutual identification. I engage with Virginia Woolf, in order to engage readers who might already know Freud and Klein, but are interested to know what Fairbairn can offer our thinking of depression.

The structure of this thesis is as follows. The second chapter, entitled "Constructing a Psychoanalytic Dialogue with My Imaginary Virginia Woolf", explains how I came to make my methodological choices for examining and contextualizing the issues that this thesis raises and engages. I also seek to justify why I think that the performative methodology, that of writing letters to a fictionalized Woolf, was the best means of evoking the theory.

The third chapter titled “Depression Within Psychoanalytic Perspectives: From Freud, Klein, to Fairbairn”, presents a close reading of the Freudian, Kleinian and Fairbairnian frameworks of depression. I start with Freud in the spirit of establishing the context for subsequent debates. For this reason I present a Kleinian account next, then turn to Fairbairn’s contributions, drawing attention to differences from what Freud and Klein had proposed.

In the fourth chapter I introduce Virginia Woolf and her depression and provide a brief biography to give some insights into her lifelong experience of depression, her relationship with her depression, and my understanding of it. I also introduce the historical scenes of Woolf’s relationship with psychoanalysis, which in her time was the heyday of Freudian and Kleinian psychoanalysis in London, with Fairbairn far away in Scotland. This is important not only for the historical context it provides for her relationship with psychoanalysis but also for understanding the progression of the letters that I write to her. The purpose of this is to enable me to further strengthen the rationale and the aim of my doctoral thesis within the literature of psychoanalysis.

The fifth chapter, “Letters to Virginia Woolf” consists of four letters I write to Virginia Woolf. Before every letter I provide a short introduction that gives a historical context to what she has gone through in a specific phase of life. The historical contexts I provide also set the theme for the letters. My first letter, “For They Know Not What They Have Lost”, engages with Freudian concepts of depression where my analysis of Woolf and personal reflections are made through the Freudian theory of depression. The second letter, “For We Think Back Through Our Mother” explores the Kleinian account of depression whilst looking into the hidden themes in Woolf’s most autobiographical

novel, *To The Lighthouse*. In this letter I present explorations around the theoretical divergence between Klein and Freud. The third letter, “Thinking Back Through My Mother” foregrounds my personal reflections on Kleinian theory and the theoretical insights I gain from it. I conclude this letter by arguing that my narratives cannot be contained within the Freudian-Kleinian drive theory and my search must continue. The fourth and final letter, “From Instinct to Self”, centres Fairbairn’s theory whilst I present the controversies between instinct theory and object relations theory. In this letter I let Fairbairn’s theory impact my understanding of what I have come to learn about my past and depression through Freud and Klein’s work. Herein I expand and enrich the context of how I have come to find Fairbairn’s object relations theory as the most helpful framework for understanding my depression and that of Woolf’s.

The sixth chapter, “From Freud to Klein to Fairbairn, a Conclusion”, provides a summary where I review what I have learned from Freud, Klein and Fairbairn in relation to depression. This chapter reaffirms the arguments I have made about the necessity to reframe depression from the Fairbairnian object relations theory and to understand it as an organized defence against loss and change. I use an extract of Virginia Woolf’s suicide note to her husband to further support my argument. Finally I recount what I believe doing this research has led me to see, and helped me to gain, personally.

## **Chapter Two**

### **Constructing a Psychoanalytic Dialogue with My Imaginary Virginia Woolf**

In the first part of this chapter I explain how I came to settle on a performative presentation of my theoretical engagement in this thesis. In the second part I clarify my position as a researcher in relation to psychoanalytic theory and to Woolf in my making use of them. I explain the methodological rationale for dialoguing with the imaginary Woolf in addressing the research questions, and elaborate on the process of constructing my imaginary Woolf. I also explain how the letters were composed within which specific theoretical perspectives were integrated. The third part of this chapter gives further information regarding the particular phase of Woolf's life that I chose for the task of engaging her in a psychoanalytic dialogue. The final part discusses ethical considerations informing this thesis.

### **Performing Psychoanalytic Theory**

As I outlined in the previous chapter, this doctoral thesis seeks to explore a Fairbairnian understanding of depression in the contested territory of psychoanalytic knowledge. Through the process of surveying relevant psychoanalytic literature, I recognized the limited amount of engagement with Fairbairn compared to Freud and Klein (which I will elaborate in chapter three). I came to see that in the realm of psychoanalysis, some views and theorists tended to be more referenced and engaged in addressing a certain psychological reality, for example depression, than others. Compared with Freud and Klein, Fairbairn's theory suffered a marginalization on the

subject of depression, leading to a minimal application and consideration in practice. This influence has persisted beyond his time. It would not be truthful if this part of the history was left out of the discussions, nor would it be plausible to justify my rationale of promoting a Fairbairnian understanding of depression without giving the background on why Fairbairn had less of an audience. So in my research I sought to shine light on how and why Fairbairn became less known and the consequences of it since his time.

But even though I found Fairbairn's work useful in self-reflection, I also kept in mind to not make the same mistake that Fairbairn himself made, some half a century ago, when he had presented his theory in an arcane and tedious writing style that partly contributed to the lack of appreciation or understanding of his ideas (this was a point raised by Mitchell, 2000: 80; re-iterated by Celani, 2010: 210). The presentation of a theory can determine how well it is engaged with. Difficult or obtuse writing can prevent understanding and so impede a wider diffusion. This was the case with Fairbairn, who was not an accomplished writer like Freud (Whelan, 2014), or a celebrated writer like Virginia Woolf. Musing on ways that could allow me to transform the dry prose of Fairbairn's theory into a more engaging piece of writing, I considered the possibility of a more performative way of evoking the theory. My wish is to beckon a confluence of theoretical and emotional engagements in my readers, rather than being stifled by Fairbairn's writing. Psychoanalytic theory, which acknowledges 'the unconscious', abounds with potential for a performative expression of 'exposing, challenging, and performing the repressed and suppressed experience' (Garoian, 1999: 101). I contend that Fairbairn's theory is particularly imbued with the performative potential, as his original theory of the endopsychic structures (Fairbairn, 1944) conjure the psychological drama

of the interplay of internalised objects and repressed aspects of self. However, to its great disadvantage, it was not realised or fulfilled by Fairbairn himself in his presentation of his theory. Performing theory through a theoretical dialogue with my imaginary Virginia Woolf in the format of letters became my strategy to evoke the theory.

I was drawn towards a method of performative presentation of theoretical engagement by my reading of Sophie Tamas' (2011), *Life After Leaving: The Remains of Spousal Abuse*, where Tamas brings her personal narratives into imaginative conversations with various authors and researchers and so constructs the meanings of the spousal abuse she experienced. Aligning with the advantage of such a method, I presented theory in a performative style and in a reflexive voice, as if the letters to Virginia Woolf were constructed after my theoretical dialogues with Freud, Klein, and Fairbairn. The letters became "a site of transformation" (Clandinin & Connelly, 2000: 41), tracing how my understanding of depression evolved, and through them I established a line of theoretical argument about depression by treading through the claims of Freud and Klein before turning to the Fairbairnian version of object relations theory. Although, unlike Tamas (2011), I did not present the theories in a flow of conversations, out of a consideration that some discourse carried more power than the others, and in the case of my selection of the theorists, I felt Freud, the father of psychoanalysis, would most certainly overpower Fairbairn. This underrepresenting Fairbairn's work would then defy the purpose of my promoting Fairbairn from his neglect. Engaging with Fairbairn in a dialogue, I made space for his theoretical comments to flow unrestrainedly as I attentively considered them. This could be seen as

my way of paying tribute to Fairbairn, to prevent, in this thesis, his theory from falling victim to the hierarchy of power within the psychoanalytic community.

Coming to understand the historical context of the lack of engagement with Fairbairn's work, I considered how I could animate this part of the history in my inquiry in a truthful and engaging way. The possibilities of inviting Virginia Woolf (who witnessed the climate of the psychoanalytic politics at the time), into my theoretical dialogues felt like an effective way to do so. As I outlined in the introduction, I recognized that on top of the shared experience of depression, the differences between Woolf and myself remained that her own theoretical engagement did not go beyond the instinct theory proposed by Freud and Klein, whilst I take issue with instinct theory and find Fairbairnian object relations theory more personally relevant and helpful in reflecting my depression. Furthermore, Woolf's own accounts of her psychoanalytic encounter enabled me to glimpse into what it was like to speak to Freud in person, to sit next to Klein and hear her talk (this part of the context will be provided in chapter four). It also helped me understand why psychoanalytic engagement had been a wounding experience for her. The possibilities of engaging Woolf creatively in a psychoanalytic dialogue appealed to me as I imagined a different story if I could transport Fairbairn's work to Woolf, which she had never engaged with or possibly heard of. I embraced the idea, through my reading of Tamas' (2011), that dialogues could be imaginative, but still remain truthful, where "private musings become more alive and relevant" (Lake, 2008: 112).

## **The Wounded Storyteller and Story-listener**

Psychoanalytic theory is embedded in the interpretations of intimate personal experiences and should not be treated as generalised truth claims (Guntrip, 1971; Bondi & Fewell: 2016). Psychoanalytic theory finds its relevance through personal contexts that were once lived through, embodied and experienced subjectively and intimately. In this thesis, theory provides a way of thinking, and a language of telling, the most complex of all stories about the internal world alienated from the self once “unsayable and unavailable for the telling” (Speedy, 2008: xiv). What could not immediately be made sense of, such as depression, found a home in psychoanalysis, where it could be understood, contained, and transformed.

As mentioned in the introduction, my motives for undertaking this research about depression and my motives for taking issue with the lack of engagement with Fairbairn, were deeply rooted in a personal reflection catalysed by psychoanalytic theory. Exploring theory *experientially* through story-telling and narration was my way of addressing the research questions, which seek to explore an extended Fairbairnian understanding of depression and the unique perspective it could provide. Interpreting my depression in the theoretical threads Freud, Klein, and Fairbairn orchestrated, I traced the transformation of my own understanding of the nature of depression and established a line of theoretical argument about depression.

This works in the same spirit as Frank’s (2013) argument in *The Wounded Storyteller: Body, Illness, and Ethics*, that theory not only affords elaborations of personal stories, but also in turn being shaped and lived by personal lives. This thesis’ relationship with theory takes a similar approach in that it uses theory to elaborate the

personal experiences of depression that did not immediately make sense, enlivening the theoretical implications through personal reflections. I echo Frank (2013) that, “theory awaits further living and the stories of those lives” (ibid: xxi). In addition, Frank (2013) offered a reassuring validation for me of the difficulties in recapturing one’s emotional landscape through theory, which I came face to face with in the process of authoring a subjective account of depression. Mainly this was because my experience of depression bore limited distance from my current position of telling it, as it happened only a few years ago. Approaching it still made palpable a certain sense of rawness of my psychological wound. Theory may have offered me a theoretical language with which I could begin to describe; it did not promise emotional security in my giving voices to some of the messiest feelings and chaos intrinsic in my lived experience of depression. Theory allowed me to make meanings out of the chaos, but it did not promise the safe distance that I needed to re-claim chaos and the emotional turbulence in the wake of the “ontological instability of subjecthood” (Stanley, 2013: 11) aroused by the researcher’s position of enacting both the analytical self and the story-telling self.

Depression harbours a space for what Frank (2013: 98) terms, “anti-narrative”, in that it brought about an ontological impasse because its indissoluble complexities of unconscious origin suspended the coherence in the telling of a psychoanalytic tale about depression. Writing about depression is an excruciating demand on the emotional level. It entailed the process of juggling the tasks of interpreting the subjective truth and research ethics of avoiding demonizing the significant relationships inseparable from the dynamics of inner life. Consequently I felt prohibited by the internal censor going over every sentence I had written about my significant others. Despite being guided by Freud,

Klein and Fairbairn in understanding depression, the universe of theoretical logic and reasoning alone did not provide me with emotional “holding” (Winnicott, 1990[1960]). I realised then I needed a different kind of reassurance beyond the help of theoretical knowledge.

In order to explore the territory of my inner life mapped by the theoretical trajectory I have drawn from engaging with Freud, Klein, and Fairbairn, to ‘*walk the talk*’ as a “wounded story-teller” (ibid: 98), I needed the reassurance of there being someone who could share my experiences and receive me to feel “less alone” (Frank, 2013: xi). “To tell one’s stories, one needs others’ stories”, as Frank puts it (ibid). Searching for “others’ stories” (ibid) became necessary for me to feel less alienated and isolated so I could gather the strength to bring myself out of the insecurity of my own story waiting to be told through theory. Searching for others’ stories led to the encounter with Virginia Woolf, who had never spoken publicly about her depression but only found the freedom to do so through her fictional creations or in the private space of her diary. In reading Virginia Woolf’s life I became a witness to the durability of Virginia Woolf’s early traumatic relationships. In deep resonance, I found myself wanting to get to know Woolf as a person, to talk to her, and to share with her the theoretical insights I have gained through reflecting alongside psychoanalytic theory especially Fairbairn’s work, which she had never encountered. I let that desire take over me and constructed an imaginary Virginia Woolf, as it was not realistic to meet Woolf, to be my companion in inquiry with whom I entered into a dialogical relationship. This allowed a dialogical interplay with my imaginary Woolf in which I shared my theoretical reflections with her as a way

of evoking the emotional depth of theory and painting a subjective illustration of a Fairbairnian depression.

In the course of this research, I came to know, identify and empathise with my imaginary Woolf and formed an empathetic bond with her. Therefore, to make it clear, the Virginia Woolf that I engaged with was the Virginia Woolf of my mental creation whom I had access to and who I brought to life through a reflective grasp of Woolf's published texts that remained available for the subjective interpretation in the wake of "the death of the author" (Barthes, 1967; cited in Gallop, 2011), combined with the biographical information that I felt relevant to this study. My engagement with Woolf's published texts embraced the poststructuralist premise, which Barthes (1967) proposed, that it is not the author who speaks to the readers, but the text itself. The possibility of turning the author, Virginia Woolf in this case, from the non-fictional figure who belongs to the past, to a fictional figure who lives in the present, was liberated by the death of the author. In addition, by 'creating' my imaginary Woolf I do not mean make up things that cannot be located in a historical context. My construction of Woolf was based in a blurring of the boundary between the real Woolf and my imaginary Woolf, who would still be the Virginia Woolf that was born in the post-Victorian time of 1882, and died in the midst of the Second World War and the possibilities of changes in 1941.

My approach of creating an imaginary Virginia Woolf for a theoretical dialogue aligned with Susie Orbach's (1999) method in *The Impossibility of Sex*, where Orbach offered engaging psychoanalytic tales of her therapeutic encounters with the 'imaginary clients' that she fictionalised using materials of her real clients. Those encounters may not have happened, but the "emotional truths" (Orbach, 1999: 196-7) and theoretical

reflections arising from the process of engaging with her fictional clients, nonetheless, represents an authentic experience of her being a psychotherapist that she seeks to convey to her readers. Troubling the edge of reality and fantasy, the process of my ongoing engagement with my imaginary Virginia Woolf in a dialogue opened up, as Harris (1992: 131) conceptualised in a Winnicottian sense, a ‘potential space’ in which self and the not-me subject object (transitional object) could be *creatively* explored in the holding presence of another person (Harris, 1992: 131; italics added). In order for the theoretical dialogue to progress, I imagined it to be a dialogical collaboration founded on trust and relationship where my imaginary Virginia Woolf resonated with my experience and reflections. My creation of the imaginary Woolf was inevitably ‘omnipotent’, essentially motivated by my “wishes, needs, defences, assumptions, biases, and everything else” (Coen, 1982: 12) as a researcher.

As a psychotherapist I am highly sceptical of how far an onlooker can explore into the inner tensions of the person who lived through the despair of depression. I believe, on the contrary, that it is relational intimacy and empathy rather than a distant, authoritarian stance that can eventually open up a close understanding of the unresolved relational conflicts the person has been through and the present paradox experienced by the person. This informed the way I engaged with my imaginary Virginia Woolf which was by positioning myself as an intimate, a close other who was ready to relate to her, to hear attentively what she had left out unsaid, and to also reciprocate with her by telling her my own experiences of depression and life stories, as someone who knew enough about the strains of depression on the person and their relationships. Bearing in mind that relationships matter from Fairbairn’s view, I took a first person perspective in my

dialogue with Woolf that would allow me to *relationally* engage her, rather than analysing her in an authoritarian way, hence risk intruding into her understanding of the self. Also, based on my knowledge of Woolf, I was aware that an authoritative voice wouldn't have allowed my comments to reach her heart but only to cause further resistance towards psychoanalysis.

Dialogue embedded in the context of psychoanalytic theory relies primarily on the “*capacity* for interpretation” (Ogden, 1990: 3; italics added). Ogden (ibid) sees interpretation as a transformative process of creating new meanings in the retrieval of the alienated self-experiences or thoughts. In this thesis, the dialogue transpired in two ways; firstly, in dialoguing theoretically between instinct theory (Freud, Klein) and object relations theory (Fairbairn) on the nature of depression, I closely examined their arguments in constructing my own reflective comments by virtue of personal interpretations of their theory. This, then, enabled me to establish a line of theoretical argument I was to illustrate through an intersubjective dialogue with Virginia Woolf. I explored the meanings and the truthfulness of my theoretical interpretations in the frames of life experiences shared between us, and my private, yet alienated, psychic reality could come to light and be re-claimed into self-knowledge.

The process of dialogue also helped me to recognize the importance of dialogue itself, in that it generated a venue where personal voice can be empowered and a sense of participation strengthened (Phillips, 2011: 11). The sense of participation with my imaginary Woolf enabled a reflective distance for the practice of “I observe me” (Ogden, 1990: 128), as the dialogue was composed out of a joined reality, albeit fictional, where two narratives merged, two subjectivities intersected. Engaging in a theoretical dialogue

with my imaginary Woolf from a place of intersubjectivity created an atmosphere of safety and intimacy that led me to recapturing the internal dimension of the lost and found where lodges the estranging pieces of self transiently but not irretrievably lost touch with through repression. The felt sense of relationship that I was able to feel with my imaginary Woolf lifted temporarily “the veil of repression” (Lomas, 2000: 97) from the obscure resistance of externalizing the innermost struggles by virtue of what that process might bring.

Katie Gentile’s (2013) work *Creating Bodies: Eating Disorders as Self-Destructive Survival*, takes off in a similar direction: through the course of her interpreting the diaries of her subject, Hannah, she became aware that her own narratives became subsumed by Hannah’s penetrating narratives. She realized in Hannah’s text she was encountering herself, the unexamined selves residing in the unconscious. The emotional impact from engaging with her subject led her to make autobiographical disclosure of her past,

Both Hannah’s texts and my texts provided a space within which to create transitional bodies that were neither inner or outer, self nor other, mind nor body. [...] As I watched her create time, I learned to create it by theorizing it in the analysis. She literally pulled me along (pp. 7)

In Gentile’s work, I saw enrichment to both stories as they relied on each other to give rise to a greater transparency, by means of bringing together the subject’s diaries, Gentile’s subjective interpretations of them, and her own reconceptualization of her personal narrative as she was ‘pulled along’ by Hannah into a joint reality where she greatly let her guard, censorship, and prohibition down. This made it possible for Gentile

to look into, start telling and analysing the shared dimension of their life experiences. Embodying intersubjectivity in the dialogical process with my imaginary Woolf, “I claimed to know something about Virginia Woolf, and in this knowing I take her over, claiming to “know” what happened in the diaries, to know what was best for her at times”<sup>1</sup>.

Furthermore, my appreciation of Virginia Woolf’s in novels offered me an interpretive glimpse into what could be said of her most hidden emotions around her significant relationships through her fictional creations. Woolf’s writing style of stream of consciousness exemplifies that fictions can provide a doorway into the writer’s inner landscape, an argument several others have made (c.f. Abel, 1989; Panken, 1987; Briggs, 2005). As such, I decided to integrate one of her novels in my letters to my imaginary Virginia Woolf. I chose *To The Lighthouse* with which to make in-depth engagement not only because it exemplifies Woolf’s writing style but it also represents an important work for Woolf, which she acknowledged as having the greatest personal meanings to her (Wolf & Wolf, 1979: 37). As a semi-autobiographical novel, it captured an unfolding series of moments and transitions in the drama of Woolf’s family life and provided a rich text for the psychoanalytic retelling to accentuate their psychological significances. Moreover, my reading experience of the novel was emotional, as I found my feelings entangled in the process of getting to know Lily Briscoe’s life, whose

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<sup>1</sup> This sentence is adapted from Gentile (2007: 12), as it captured perfectly what I wanted to say about my own connection with Virginia Woolf. The original passage refers to her subject, Hannah.

narratives called back to my mind some very primitive mental contents that were self-alienated and made them available to reflect upon. Being shaken by Lily's psychological turbulence was messy but it was reciprocal. My third letter to Virginia Woolf, which explored my relationship with my mother, was composed after I had looked into Woolf's relationship with her mother through inspecting the relevant themes in her novel, *To The Lighthouse*.

Compositionally I structured my story to mirror Woolf's and let our stories run in parallel and unfold together in order to create a sense of shared dimension of space and time. This furthered a sense of co-existence and co-construction in this imaginative dialogical collaboration. I divided Woolf's life into three phases marked by significant events of losses, which changed her immediate relational landscapes – losses of her mother then of the mother figure. The latter compounded the loss of the mother. The last phase was the loss of the father. I then composed a series of letters tailored to these specific times in her life that accorded best with thematic elements of the Freudian, Kleinian, and Fairbairnian theories that were addressed in each letter. These three phases, although all interconnected, were chosen as they provided contexts to show how Virginia Woolf responded psychologically to them through intense episodes of depression. Those phases witnessed her “living the chaos” (Frank, 2013: 98) and foregrounded the letters that I wrote to Woolf in addressing the internal landscape psychoanalytically.

Rose (1978) titled her study of Woolf, *Woman of Letters*, signifying the importance of letters in Woolf's life. My decision to present the fictional dialogue in the

format of letters was out of respect for Woolf and was in keeping with her time and how a communication with her would have likely been received. The advantage of letters as a means of communication is that it allows space for reflection. There is time for reflections and for the narratives to develop between sender and recipient. Moreover, the space the letters created in time allowed for a negotiation with Virginia Woolf in discussing theories of psychoanalysis, something that she was hesitant about. This ties in with some of the themes of this thesis, which revolve around the need for theoretical retrospection on our inner lives.

My letters to my imaginary Virginia Woolf were written to relate one-side of the dialogue so the readers only see my part where I discuss things that she has said or parts of her life experiences. The reason for this was to ensure that I did not rob Woolf of agency; if I were to give her lines, or reply on her behalf, they would not be her letters but rather my suppositions about what she would have said. Instead, I wanted to allow the space for the other half of the dialogue to come into life in my readers' own private musing in response to reading the letters. Wherever relevant to the themes, passages of Woolf's work were quoted in the letters in order to make space for her own voices reflecting what she has said, in her own account, giving her a voice in the dialogue even though only my letters to her were presented.

## **Sketch of The Past**

The imaginary Woolf that I engaged has just finished her autobiographical writings *Sketch of The Past* (1939) at the age of 57. *Sketch of The Past* (1939) was permeated with an attempt to make the absence of her intimate others (through losses/deaths) present, by composing and recounting the autobiographical accounts of her early experiences, emotions, and her selfhood in relation to others. She put into words her vivid memory of her childhood, took it as a chance to ponder the possible connections between her past and the present, in a way similar to the psychoanalytic approach of self-analysis. This evidenced that she had some understanding of how psychoanalysis works and was attempting to treat herself despite maintaining her objection to being analysed by someone else.

*Sketch of The Past* led me to believe that at that time she had become intensely aware of the significance of the early events and an acute desire to understand them, to work through them, and to finally lay them to rest. As it was written and completed late in her life, two years before her suicide, the timing of it invited my curiosity that perhaps under her well-composed authorial identity laid the pressing force of the unthought known (Bollas, 1987) - emotional experiences that have registered and been known existentially, but have not yet been cognitively mentalised and linguistically represented. Furthermore, in contrast to her early intense objection to Freud's work, Woolf, at this time, showed some appreciation of Freud's work as she reflected on her early relationships. It was not in her nature to position herself as someone needing help or dependent on others for rescue. She resorted to her capacity for self-reflection without going into psychotherapy throughout her lifetime, yet *Sketch of The Past* conveyed as

much her longing to be heard, seen, and understood as her need to preserve her narratives from intrusion. I chose this phase of Woolf's life with a belief that she would be less resistant and most ready to go into a theoretical dialogue with me than any earlier time. *Sketch of the Past* was not merely a recollection of her important memories but it also marked, as Rose (1978) puts it, "a beginning" (p. 17) of framing the narratives of the past psychologically.

### **Ethical Considerations**

Thinking in terms of the ethical concerns this study might invite, as it will be open to public scrutiny, I bear in mind that there can be potential harm, albeit not to a significant degree, for myself and my close family due to my act of self-disclosure that this study relies on. I believe I have sufficiently considered the potential harm this study might bring and ways to keep myself, and my close others, safe. This includes making sure that all information shared about my life in the thesis are responsibly selected, and that I always locate myself in the centre of analysis wherever others are concerned, whilst speaking of them with minimum negation of their characters. I am prepared to address any concerns my family would have about my thesis due to my disclosure of them. I do believe, however, that it is not necessary for me to inform my father, with whom I had lost contact, as my thesis accentuates my own psychological experience and engage theoretically with 'the internalised father' and my psychic interplay with it, and not any on-going relationship with my father.

As the thesis draws from both the published texts and biographical information of Virginia Woolf and involves my own interpretations of them, I am aware that her

surviving family or estates might have concerns over my use of her materials and my interpretations of the events. I am careful to state that this is the Virginia Woolf of my imagination, although using real historical materials to inform my views that to the best of my knowledge are accurate.

## Chapter Three

### **Depression Within Psychoanalytic Perspectives: From Freud, to Klein, to Fairbairn**

This thesis joins the psychoanalytic debates that have been going since the beginning of the 20<sup>th</sup> century on the theoretical perspectives introduced by Freud, Klein, and Fairbairn, and the divergences between them. Acknowledging that the strength of the Fairbairnian understanding of depression cannot be thoroughly appreciated without first recognizing Freudian and Kleinian thinking, I instigate theoretical discussions in this chapter by comparing and considering the multiple psychoanalytic interpretations of the nature of depression proposed by instinct theory and Fairbairn's object relations theory. I chose Freud, Klein, and Fairbairn as the focus of my theoretical debates, and presented them in an order of progression, as I believed Klein opened up and extended from what Freud has started, as did Fairbairn from Klein. Their original and influential insights into human unconscious and psychopathology continue to be debated and much extended.

Through my survey of the literature, I have become convinced that Freud represented the all-powerful Father's view, Klein the all-powerful Mother's, and Fairbairn, the Child's view (Grotstein & Ramsay, 1994). I anchor my inquiry with their works, as collectively, they provide a frame to locate my inquiry in the constellation of family. Containing my narratives within their theoretical frameworks enabled me to examine the interpersonal matrix webbed between the self, as a child, and the parents, in relation to how depression comes into being. It is, however, impossible to include all of

the theorists who have offered some helpful thoughts on the subject due to the limitation of space and the coherence in the arguments I wish to maintain.

I will now proceed to outline the detailed abstract of Freud, Klein, and Fairbairn's theory of the psyche and the psychopathology of depression.

### **Depression in a Freudian System**

Freud's earliest theoretical input on the psychogenesis of melancholia dates back to his 1917 paper, *Mourning and Melancholia*. In this important, Abraham-inspired<sup>2</sup> paper, he compares the general mental features of mourning and melancholia, leading to a central argument that both are psychological responses to an object loss, despite one being normal and the other pathological. He observes that the pathology of depression shares some of the traits of mourning; from there he pursues a compelling proposition that there had to be a loss that is suffered by the patient at an unconscious level that sets the ground for depression.

Mourning is the reaction to the loss of a loved person, a loved object; the person is consciously aware of what he has lost. The pain of loss is comprehensible to the mourning person and the people in their lives. Usually it can easily elicit validation and understanding for the emotional reactions triggered by the loss, aiding the person to

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<sup>2</sup> Freud's authorship of "Mourning and Melancholia" in many ways owed due credits to Karl Abraham, who made invaluable suggestions to Freud in his writing of the paper. Abraham was also the first psychoanalyst to treat manic-depressive patients and provided an initial framework for understanding it. Evidence also abounds in their correspondence of letters regarding the draft of the paper that Abraham had raised questions that proved to be influential to Freud's thinking on depression (Sánchez-Pardo, 2003: 28-9; Quinodoz, 2009: 179-180).

mourn. However, in melancholia “one cannot see clearly what he has lost” (ibid: 245). This is to say, in melancholia there is an unconscious mourning process undergone in response to an unknown loss. At the first sight, it can appear that there is not necessarily a logical explanation for the onset of melancholia for it is not clear as to what has been lost. It can be said that the loss and death experienced by the melancholic are of metaphorical nature, belonging to the realm of an unconscious internal world, rather than an actual one. In Leader's (2009) words, "if the melancholic does have an idea of whom he has lost, he does not know, and perhaps it is this difficulty to see the distinction that the mourning process is inhibited" (p. 34). In Freud's conceptualization, melancholia portrays a clinical picture in which a person undergoes psychical mourning for what has been unconsciously lost. However, as the loss is of unconscious nature, the real mourning cannot take place. It is clear that Freud, up to this point, retained a stark and absolute opinion that mourning is either successful or unsuccessful. In a normal case mourning comes to a definite termination when the cathartic exhaustion eventually liberates the person from the emotional attachment with the lost objects; whereas in unsuccessful mourning, the ego's cathexis on the lost object has been interrupted, resulting in a stagnation of the melancholic state (Clewell, 2004).

If, in the constellation of melancholia, the internal reality and pain of loss does not necessarily correspond with the external circumstances, then where can they come from? This was the question Freud sought to explain by turning to the repressed internal world to theorize what the melancholic has really lost and subsequently mourned for unconsciously. He drew the distinction between the mourned object as 'what one has lost in them' from 'what one has lost', clarifying that it is the object-tie, or the internal

attachment with the object, that has been lost but cannot be mourned.

His *Mourning and Melancholia* significantly extends as well as draws from some theoretical concepts that he had raised in his earlier paper, *On Narcissism: An Introduction* (1914). I believe a brief recapitulation of *On Narcissism* can aid the understanding of some critical points in *Mourning and Melancholia*. In *On Narcissism* Freud demonstrated an adherence to the doctrine of instinct theory, resorting to a mechanical metaphor to describe the human mind as a “mental apparatus” that seeks to channel libidinal energy into a range of outlets, the operation of which is akin to a machine seeking to release the pent-up tension. The release of the pressure brings about an immediate pleasure and relief. And if the mental energy gets clogged up in the system, psychopathology is the end result.

He spelt out the differentiation between “ego-libido”, an inward investment of libido on the ego, and “object-libido”, an outward investment of libido on outside objects. Freud suggested that every infant starts in the state of primary narcissism (1914: 100). Primary narcissism refers to the earliest time of life, during which the infant cannot distinguish between her own ego and the external object as they are both perceived by the ego as its sole object. Therefore, in the state of primary narcissism, all the emotional investment takes the form of ego-libido, directing at oneself. At a later developmental stage, the child comes to correctly perceive the object as outside of herself and the object-libido can be realistically directed outside at the external object. The investment of the ego-libido therefore precedes object-libido.

In *On Narcissism*, Freud also brought into discussion a new concept - “the ego-ideal”, an idea that was to be taken further as the precursor to “super-ego” in his later

work<sup>3</sup>. The ego-ideal is formed through the direct and immediate identification with the need-satisfying object, such as a mother's breasts. In short, it represents the ideal image of self that one seeks to become (Freud, 1923: 31; Akhtar, 2009: 89). Engulfed in the bliss of primary narcissism, the infant cannot perceive the boundary between ego and ego-ideal. What exists within oneself is a symbiotic fusion between the ego and ego-ideal: the ego-ideal satisfies the ego's narcissistic desire for perfection, nourishing an illusion that the need-satisfying ego-ideal co-exists within itself, as part of herself. That is, "I am the source of the nourishment I need". All the libidinal investment at the stage therefore is of ego-libido nature.

The overcoming of primary narcissism, in terms of developmental progression, lies in the gradual recognition and acceptance that the need-satisfying object in fact exists independently of the needy self. Mature object-love requires recognition of the reality of separation between the loved-object and the self and of a clearly differentiated boundary between the ego and the ego ideal (Treurniet, 2009: 79). Whilst Freud undoubtedly considered primary narcissism as a normal developmental trajectory, he believed that secondary narcissism held the key to the clinical picture of psychopathology. Secondary narcissism concerns the failure in overcoming the terrifying task of attaining the recognition of the separation between the ego and the ego-ideal, being unwilling to let go of the omnipotent insistence that one has within oneself all one needs and desires. In short, it is a failure to negotiate narcissism into object love.

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<sup>3</sup> As Grunberger (2009) argues, there is still confusion as to whether the concept of "ego-ideal" Freud presented in *On Narcissism* is interchangeable with his later conception of "superego". In his later works they seemed to be used indiscriminately, however in this paper ego-ideal did not represent a moral agency as did super-ego (p. 217-8).

Whereas primary narcissism is carried out in the form of non-object relatedness as a state to be overcome developmentally; secondary narcissism involves a process of the ego shifting away from the object-relatedness, which may be too painful or futile, in a neurotic attempt to return to a state of primary narcissism. Freud underlined the narcissistic quality of the object relationships in his depressive patients as particularly fundamental. In the face of severe disappointments by the loved object, the ego is now confronted with the conflict of ambivalence between love and hate towards the same loved-object. To Freud, it is the loss of the narcissistically-loved object, the perfection of the un-differentiated good object and the ego dyad that lays the mental path for depression. He views secondary narcissism as a maneuver of desperation to recover the primary narcissism in order to reinvest libidinally in the internalized objects.

In depression, the loss of the loved object cannot be and should not be compensated by the displacement onto a new object, but by resurrecting the loved-object inside the ego (Freud, 1923: 29). Through the narcissistic identification with the loved object, the loved object becomes introjected into the ego, residing within the melancholic. By becoming her loved object, she will never lose them again. She denies the otherness of, and the separation from, the loved-object. At the same time she refuses to expose herself again to the external risk of more disappointments from the actual loved object, whom she loved ambivalently. She withdraws the libidinal investment formerly directed towards the external objects and re-invested in the ego, which has now stored the perfection of the loved object she desired. In melancholia, the shift from object-libido to ego-libido often manifests in the form of a defensive withdrawal from people, from the external world.

In *Mourning and Melancholia*, Freud takes an important step in using his idea of secondary narcissism in seeking to unravel the logical impasse of the contradictory feature of lowering of self-esteem, or impoverishment of the ego, in depression. This gives the concept of narcissism a new significance in his studies of psychopathology, as well as an important reiteration that narcissism does not equate to self-esteem but marks a defensive measure. The introjection of the loved object, however, means that both the goodness and the badness of the loved-object are now taken in to the ego. The loss of the narcissistically-loved object may have been denied, but the ego is still constantly being haunted by the internalized persecutory side of the loved object. Hence, “the shadow of the object fell upon the ego” (Freud, 1917: 249). The melancholic’s endless self-reproaches therefore are, in fact, aimed at the disappointing loved object.

During his late years, Freud’s theory of depression went through a period of revision as he encountered a series of personal tragedies (Lubbe, 2011: 103-5). Several years after the completion of *Mourning and Melancholia*, he returned to the discussion of melancholia in *The Ego and the Id* (1923), where he paid due attention to the concept of ‘superego’ in the context of melancholia. Superego, in Freud’s formation, represents the critical agency, and he believed that the introjection of the mother during the first year of life enters into the formation of the superego (Rosenfeld, 1959: 107). The relationship between the ego and the superego resembles the tension of the child under the compulsion to obey the parents while in a state of dependence and helplessness (Freud, 1923: 48). Freud recognizes that in melancholia, there exists an “excessively strong super-ego which has obtained a hold upon consciousness rages against the ego with merciless violence” (ibid: 53) In *The Ego and the Id*, he relates the destructive

component entrenched in the superego to the working of the “death instinct”. The super-ego’s endless condemnation of the ego, in his view, stems from “a pure culture of the death instinct, and in fact it often enough succeeds in driving the ego into death” (ibid). Freud sought to unravel the question, “how is it then that in melancholia the super-ego can become a kind of gathering-place for the death instincts?” (ibid: 54). Freud’s answer was that in attempting to control the aggressiveness towards the external world, it becomes redirected internally towards the ego. By this Freud means that a transition must have happened to cause a more severe expression of what their ego-ideal should be in the person, coercing a severe self-critical tone with regard to what their own behaviour should be but fails to be. This failure to become the ego-ideal is what brings the super-ego in. In effect, the super-ego rules the ego as a higher-being, a punishing figure that channels the aggression against the ego for failing to become the idealised version of the self. In Freud’s thinking, there are always some elements of hatred involved in the relationship with the caregivers. Transferred into the tripartite model, the ego keeps secret its hatred towards the superego due to the fear of its higher power. At the deeper level, this suggests that what we hate and envy is the same object that we love and with whom we identify. This internal conflict between love and hate, which cannot be resolved, and is therefore repressed, configures the climate of depression.

British psychoanalyst Darian Leader (2009), in his book *The New Black*, largely uses Freudian thinking in his clinical work with depressed clients, contending that in today’s Britain depression is overly medicalized (pp. 15-7). Leader urges readers to think beyond the psychiatric label of depression and to explore its unconscious origin. He believes that the phenomenon of depression is intertwined with the psychological

structure that influences how the individual responds to the external change. It is therefore more of a psychological condition, rather than, as the medical model seeks to address, a biochemical disturbance. Grounding himself in the Freudian theory of depression, Leader argues that depression is the phenomenon caused by the haunting of the unconscious loss, and the symptoms of it are the evidence that the experience of loss has been *registered* psychically, and yet remains unspeakable and unexplored. As the experience of loss remains repressed, the actual mourning, which is necessary for the working through of the experience, cannot take place. He sees this as the key element in the prolonged stagnation of the depressive state. He also maintains the perspective, as Freud did, that the loss is not necessarily caused by an actual death, but more often a symbolic loss via the cessation of the relationship through estrangement, absence, or separation (p. 28). On a deeper level, the cohesion of the sense of self relies on the attachment to the lost-object. The internal conflicts between love and hate towards the object complicates the meaning of loss to the individual. Leader's argument is consistent to the psychoanalytic view of the human psyche that we are feeling entities even though the origin of the unacceptable feelings lies in the unconscious.

Aggression, or hatred, for instance, is often repressed in the case of depression; however, in the economical solution Freud proposed, the blockage of the outlet of the aggressive libido due to repression would trigger a misplacement of the aggressive libido to reduce the tension felt biologically (pp. 42-4). Leader believes the re-direction of the aggressive libido from the lost loved-object towards the ego to be the origin of self-reproach (ibid). Leader portrays a Freudian understanding of depression through a case: a man has lost his mother, yet is unable to mourn for her death due to the duration

and intensity of his unconscious anger towards her. Once he has lost his mother through her death, he re-directed the anger at himself with an excuse of his inability to mourn for her death. Anger was kept alive in him. His subsequent compulsive weeping was interpreted to be the psychical reaction to the loss that could not be acknowledged and processed (pp. 48-9). In this case, a traditionally Freudian account of the interplay between repression, ambivalence, and displacement of anger from lost-object to self is at the core of the interpretation. With reference to the Freudian concepts, Leader argues that the difficulties in mourning often do not stem from love but hatred. He believes that the main task in recovery from depression lies in transforming the unknown into known by a gradual recognition of *what has been lost in the person*. This would then open up possibilities for real mourning to take place.

To sum up, the Freudian notion of depression is fundamentally a manifestation of psychopathology that has to be understood in terms of the libidinal cathexis of both narcissistic and aggressive qualities towards the narcissistically identified loved-object. In many ways Freudian depression embraces systematic and economic explanations in solving the puzzle of melancholia. Loss is central in Freudian depression. To Freud, there are three hidden catalysts that propel towards the mental pathway for depression: loss of the loved-object, ambivalence, and narcissistic pathology, i.e. a regression into primary narcissism. In his building up of the structural picture of the mind, the functioning of the unconscious was deemed as the source of mental disturbances. Freud's *Mourning and Melancholia* proposed an important psychoanalytic understanding of the unconscious mourning entailed in depression. It is undoubtedly a landmark for the later blossoming of object-relations theory(ies) in the understanding of

depression (Ogden, 2002). In addition, his articulation of the notion of the “death instinct” and the redirection of aggression towards the ego presented a way of understanding the relentless expression of self-reproach in depression as the presence of a hyper-punitive super-ego. Many of Freud’s works have shown a beginning kernel of the idea of object relations theory, however it has been argued that Freud never fully developed a theory of object relations in his subsequent papers (Bergmann, 2009: 4). What Freud had started, yet was unable to take further, later theorists like Klein and Fairbairn expanded.

## **Depression in a Kleinian System**

In developing her theoretical explanation for depression, Klein largely embraced Karl Abraham's conceptions of it (1911, 1924). In his 1924 paper, Abraham was keen to separate different types of mental disorders by locating their fixation points in relation to the libidinal development. In Abraham's view, depression primarily concerns regression to the primitive mechanism of the oral-anal sadistic phase in the early libidinal development - a point that was assimilated by Freud into his own work, i.e. introjection. Abraham compared the clinical features of depression to the infantile management with the loved-object in the oral-anal sadistic stage. Insofar as what the child receives from the loved-object is gratifying, the sadistic impulse is triggered in order to introject the loved-object, symbolizing a cannibalistic impulse of 'devouring'. However the discomfort caused by the loved-object, such as the delay of the gratification, triggered the anal-sadistic impulse to expel the loved-object; metaphorically this is done by expulsing it anally like faeces.

Abraham agreed with Freud on the importance of ambivalence towards the loved-object in depression. The hostility towards the loved-object is repressed due to ambivalence. The repressed hostility generates anxiety and paralyzes the person's capacity for love. Guilt, arisen from the repressed hostility, for the first time came to the fore as the leading factor for self-reproach in depression (Rosenfeld, 1959: 105-6). Many of Abraham's ideas had set the theoretical foundation for Klein's thinking. Furthermore, Klein adopted Abraham's hypothesis that the *primal depression of infancy was a*

*precursor to depression in adulthood.* Whereas Abraham was unable to further prove this hypothesis, Klein provided a fuller clinical demonstration for it (Quinodoz, 2009: 180).

Based on her observation of early psychic life, Melanie Klein conceived of depression less as a pathological debility than as a normal psychological development with its origin in the earliest situation of loss, i.e. weaning, which symbolises the loss of mother's breast. She observed that right from the beginning the infant's psychic life is full of annihilating anxiety and powerful phantasies (Klein, 1923). In Kleinian terms, phantasy<sup>4</sup>, as opposed to fantasy, broadly suggests the unconscious mental processes of the inner world. The production of the phantasy is strongly linked to the infant's bodily experience. Infantile phantasy includes every form of thought present in rudimentary form, however they are more imaginative and less rational than the word 'thought' might suggest (Klein, 1923; Isaacs, 1952). Understanding the phantastic nature of the infant's inner world, the mental contents encompass the experience of reality. As much importance was given to the concept of phantasy in the core of her analysis of the human mental conditions, Kleinian depression is concerned primarily with the role of phantasy with internal objects, which are part of the internal world that forms part of the identity but differing from what the individual feels that she is (Likierman, 2001: 110).

Klein argues that the *capacity* for depression is innate, inevitable even in the case of the normal limitations of maternal care. It takes departure from the infant's first

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<sup>4</sup> For a more detailed comparison between Freudian and Kleinian usages of the term, see Spillus (2001).

awareness of separation from the mother's breast, culminating at the primitive sense of loss in the process of weaning. The mother's breast, which is the source of nourishment and goodness, provides the infant a centre that grounds her in the infantile phantasy life. Klein observes that the sudden loss of the connection with the mother's breast triggers in the child a powerful anxiety and destructive phantasies. However, the phantasy to sadistically attack the loved-object, namely the mother, also gives rise to the annihilating fear of forever losing the goodness of the breast. To Klein, this is the developmental root for the sense of guilt<sup>5</sup> (Klein, 1940: 125). Klein (1946) regards guilt as a milestone for the child's emotional development (p. 100).

Klein thinks that an infant is born with readiness to develop object relations and to differentiate between good and bad experiences (Klein, 1946: 99). She suggests that the nature of an infant's maternal care, that is the extent of the mother's presence and absence, nurture and privation, builds up an inner world populated with good and bad beings in the infant's psyche (Likierman, 2001: 101). She also believes that, right from birth, the infant suffers a great deal of anxiety, mainly concerned with the survival of the self. Klein placed anxiety at the central place in her theory, and saw anxiety, or the fear of annihilation, as deriving from the working of the death instinct that exists from the very beginning of life. Klein uses the term "paranoid-schizoid position" (1946) to refer to this state of mind in the infantile psychic life. Initially the mother's breasts were felt to be two separate part-objects - the feeding breast and the content infant constitutes

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<sup>5</sup> Diverging from Freudian Oedipus triangle conceptualization, Klein considered the earliest experience of guilt in infancy as the significant Oedipus situation that sets path for the moral development, This is much earlier than Freud's precondition in which recognition of a 'third-person' develops first.

good experience, the good, gratifying object; on the other hand, the withdrawn breast and the hungry baby is experienced as the bad, persecuting object in infantile reality. This process is termed “splitting” by Klein, and is seen as the central defence mechanism that characterizes the paranoid-schizoid position. During the infantile paranoid-schizoid position, mothering is critical in determining whether or not the infant can gradually give up the paranoid-schizoid anxieties and defences, and proceed normally to the next developmental task, working through of the depressive position.

If mothering is consistently received, the partially recognized good object and the bad object will have a chance to gradually come together and “synthesize” (Klein, 1946). This leads the infant to a painful recognition that both the good object of unlimited satisfaction and the bad object of deprivation are in reality the same object, the mother. Such recognition marks the transition to the depressive state. The recognition of the whole mother brings not only the loss of the perfection of the loved-object, but also insufferable psychic pain in the wake of knowing the previously resented bad object was the same as the loved-object. This leaves the infant with an unresolved aggression, her impotent rage, towards the unforgivable bad object that is now found to be the loved-object, which gives rise to the depressive position (Klein 1935, 1940). In other words, the infant loses both the bad-object, a justifiable target of hostility, and the good-object, the perfection of complete goodness. In *Notes on Some Schizoid Mechanisms* (1946) Klein describes the fluctuation in the ambivalence between love and hate as a normal phenomenon and precursor for the depressive state. When the hate prevails, the phantasy of destructive attacks on the loved-object fulfils the wish to punish the bad persecutory object, and to eliminate it (paranoid-schizoid position); however the subsequent fear of

losing the object that she relies on and loves brings about a strong guilt that she has hurt the loved-object, triggering an impulse for reparation, to restore the loved-object (depressive position). Notably, in the same paper Klein, borrowing Winnicott's idea of optimal environment, also suggests that a consistent experience of mother's love and care is essential to help the child to work into the depressive state by helping her to retain a love-hate balance. It should be sufficient to enable her to gradually overcome her persecutory fear and establishing a sense of security where the good-object is reliably present despite having its limitations (pp. 100-1). It is hence apparent that Klein believed in the importance of early mothering as influential to the predisposition to adult depression.

It is clear that Klein (1946) not only suggests that depressive functioning is part of every individual's earliest mental event, but also links the unresolved infantile depressive state to depression in later life. The contemporary understanding of Klein's organizations of both schizoid-paranoid position and the depressive position are that they both play an important part in the mental constellation as an attempt to cope throughout life. It is evident in her writings that Klein, in her making use of the insights around ambivalence, introjection, separation of bad and good object, and loss of loved-object, was influenced by Abraham, particularly his idea of oral fixation and sadistic impulses, and by Freud's formulation of depression in *Mourning and Melancholia*. Where her originality lies, however, is her proposition of the depressive state from the angle of the 'phantasy with the internal objects', as the central task to overcome during the child's development.

Despite her efforts to establish a position as a loyal disciple to Freud, Klein demonstrated in her thinking a more Abrahamian line of thought. Her thinking on depression suggests that a Freudian understanding of the human psyche as a mental apparatus and libidinal principles is far from enough. As Waddel (2002) points out, although Klein largely draws from Freud's instinct theory in developing her own theory, her thinking distinctively centres on *the states of mind* that are characterized by anxieties, aggression, and defences (p. 2).

## Depression in a Fairbairnian System

As mentioned in the introduction, Fairbairn drew on the ideas of Melanie Klein, and inherited Klein's ideas of paranoid-schizoid and depressive positions and of internalized objects in his theory of depression. Over time, however, this influence became faint as the divergences between their thinking became irreconcilable. This is mainly due to Klein's lingering adherence to the instinct theory that focuses on the libidinal impulses and on the survival of the self, particularly in the terms of the internal phantasy, as the end goal. Comparing the differences between Fairbairn and Klein, Ogden (2010) notes that Fairbairn consistently emphasizes the primacy of external reality and gives the unconscious phantasy a secondary role, whereas for Klein it is the opposite<sup>6</sup> (p. 103). Fairbairn did not resonate with Klein's emphasis on the importance of the depressive position in her thinking. Rather, he gave the schizoid state much more weight in his theory and argued that many diagnosed depressives were in fact misdiagnosed schizoids (Fairbairn, 1941: 91).

One of the significant differences between Klein and Fairbairn's theory is that Fairbairn sees relationships as the basic innate need from birth, and sees object relationships as fundamentally interpersonal, and not libidinal (Grotstein & Rinsley, 1994: 4-5). By putting forward a *relational-structure model*, which reformed psychoanalytical thinking on primal needs of personhood, Fairbairn challenged the long-

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<sup>6</sup> Although this contrast appears irreconcilable, Ogden does not see their differences as contradictory, but complimentary, in the way that they enable what Bion (1962) refers to as a "binocular vision" in evaluating an individual's clinical presentation (2010: 103).

established Freudian drive-structure model, which emphasizes the gratification of biologically driven desires (Greenberg & Mitchell, 1983: 151; Rubens, 1998: 215-6). It is fair to say that Fairbairn was the first to systematically conceive the concept of the development of personality based on a relational-structural model in which the internal world is in constant interplay with the external relationships.

He contends,

What is meant by *pleasure-seeking* in the classic theory is really *relief of libidinal tension*; but my point is that such tension is inherently the tension of object-seeking needs. ... The real libidinal aim is the establishment of satisfactory relationships with objects; and it is objects that constitute the true libidinal goals. (1946: 30-31, italics in original)

Based on this fundamentally different thinking, Fairbairn (1946) understands the primal need of the individual as relationship-seeking, or “object-seeking” in Fairbairn’s own terms, rather than pleasure-seeking as classical drive theory argues. Moreover it has been argued that Fairbairn’s term “object-seeking” is an elusive one. Mitchell (1998), in response to Greenberg’s (1991) argument on the subject, suggests that the term object-seeking does not have any signification understood on its own, as all the psychoanalytical theories since Freud depicting human needs as seeking an object. Therefore, Mitchell (1998) thinks the question to be addressed should be “what are they seeking objects for?”, as it is obvious that the meaning of the term ‘object’ differed for each of them in essence (pp. 116). It is therefore necessary to compare the paradigms of Freud and Fairbairn on the subject of why an individual seeks objects, and more fundamentally, what is the nature of the internalized objects.

For Freud, the objects are sought for in order to lessen the libidinal tension through discharge or withholding, otherwise understood in the terms of the id driven by the pleasure principle. The clinical picture of an individual that Freud portrays is an intrinsically impulsive being, seeking immediacy of gratification, as deferred gratification brings about insufferable pain and tension. Within Freud's formulations of the economic explanation of the psychic processes, objects are primarily seen as the targets towards which the instinct seeks fulfilment, rather than representing the real or imaginary relational other<sup>7</sup>. For Fairbairn, the objects are sought for in order to meet the child's need to establish and maintain relatedness with others (Mitchell, 1998: 66-80). Therefore, in Fairbairn's formulation, objects need to be engaged in a personally meaningful way in the relational context. The social dimension of the self and the need for relationships with real external objects, was seen as the most crucial need in the development of the self in psychoanalytic thinking for the first time. Furthermore, this striving for relational contact with others, to Fairbairn, does not equate a libido-driven demand, as he does not see pleasure, or gratification of the libidinal demand as the end goal, but rather the need to be in relational contacts with others. In this sense a child's emotional life and personality development need to be examined within a wider picture of the family, with the central focus being the child's primary relationships with the caretakers. It is in this regard that Fairbairn's work marks the critical re-orientation of

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<sup>7</sup> Although some Freudian theory takes into account of the concepts of "others" or "the other persons", either real or imaginary, it has been argued that Freud had never fully recognized the impact of the external others on the human psychological development; his lack or inconsistent mention of the concepts make it seem like his uses of the terms were merely an accident, rather than being intrinsically significant in his theory (Mitchell, 1998: 67; Orbach, 2008: 32).

the psychoanalytical perspectives on the basic human nature and its ultimate motivations<sup>8</sup>. It is, hence, quite clear that Fairbairn's development of the self differs fundamentally to that of Freud, or even Klein. Fairbairn's natural emotional maturation of the self requires essentially the quality and the complexities of the relationships with the objects.

Selfhood should be understood as being constituted and defined by the relationships it has, remembers, desires, and creates (Rubens, 1994: 153). Although Fairbairn kept the term 'ego' in his writing, his meaning of the term should be seen as referring to the *entirety of the psychic self* that is inseparable from its impulses, desires, and on-going experiencing of reality. "Ego", in the Fairbairnian system, shapes and interacts with external relationships at all developmental levels, actively defining and expressing itself through the relationships with which it engages. It has been argued that Fairbairn's 'ego' is closer to the contemporary use of the term "self" in self-psychology by definition (Greenberg & Mitchell, 1983: 163).

With regard to psychopathology, Fairbairn agrees with Abraham on the earliest oral stage characterized by sucking and later oral stage characterized by biting. His disagreement with Abraham relates to Abraham's view that psychopathology is primarily based on the maturation of the bodily zones and the satisfaction of its corresponding impulses. Instead, Fairbairn sees living experience with others in life as central to the child's emotional development, and believes that it is the parent's adequate

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<sup>8</sup> There are debates around whether Fairbairn's work should be seen as an re-orientation of Freud's drive theory, as his notion of the relation-seeking individual can also be interpreted as intrinsically an impulsive being but with different motivational aims. However the debate seems be out of the scope of this project and therefore is left unaddressed here.

responsiveness to the child's relational needs that predispose her to later mental stability. His understanding of the self as inseparable from relationships enables him to understand the nature of psychopathology from the object-relations perspective.

In his paper *Endopsychic Structure Considered in Terms of Object-Relationships* (1944), he suggests that the origin of the endopsychic structure of the person is formed universally under the unavoidable circumstances of the early experience with the outer objects. In a normal case of infancy, the mother is felt to be satisfying as well as frustrating, depending on the immediacy of the infant's needs being met or not. The infant's subjective experience of the mother being both the satisfying and the frustrating object creates an *intolerable* tension in the psychic reality of the infant, who is in a state of "absolute dependence" (1944) on the mother. Fairbairn's view is that this infantile dependence subjects the infant to the most acute internal conflicts and the corresponding defences. As the infant is unable to cope with the unsatisfying aspect of the experience, she therefore, within her limited capacity, resorts to the defence of splitting the mother into two objects, good and bad, and proceeds to internalize the bad object of the mother. Splitting, essentially, helps the child to cope with the pain of the ambivalence of the mother being both satisfying and frustrating.

As splitting takes place in the face of the intolerable aspects of the experience, it is pushed out of the conscious awareness, and therefore, repressed. Splitting and repression are intrinsically inseparable in operation, and they are the key elements to the establishment of the endopsychic structure. Fairbairn believes that internalization happens as an unconscious effort to control the bad object that represents the unyielding outer reality that fails to fulfil the infant's needs. Internalization serves as a defensive

measure, aiding the child to cope with the malicious external circumstances that are otherwise intolerably annihilating. By taking the badness inside her, she has control over it. In other words, the child preserves the external security, albeit illusory, at the cost of his or her internal security (Greenberg & Mitchell, 1983: 171). Fairbairn terms this mechanism of internalization “moral defence” (1943: 65).

He famously said that,

It is better to be a sinner in a world ruled by God than to live in a world ruled by the Devil. A sinner in a world ruled by God may be bad; but there is always a certain sense of security to be derived from the fact that the world around is good (1943: 66-67)

Initially, Fairbairn (1943) suggested that it was the bad/unsatisfying object that was subject to internalisation into one’s psychic territory. However in his later work (1951), he revised his theory so that not only the bad objects, but also the aspects of the ego that yearns for relatedness with those internalized objects, and the aspects that expect sadistic deprivation are split-off and repressed too (pp. 168). In other words, not only is the exciting part, which arouses intense needs without being able to satisfy the ego, and the rejecting part of the objects internalized and repressed, but so too are the parts of the self that respond to them. Fairbairn termed these ‘subsidiary selves’, split-off from the central self. At its core, what is internalized are not solely ‘objects’, but a series of ‘object-relations’ corresponding to the child’s subjective experience of the relationships.

On the account of internalization, Fairbairn openly and repeatedly disagrees with Klein's view on two grounds. The first is Klein's view that internalization stems from the phantastic impulses to incorporate the object orally; the second is Klein's propositions that both the good and the bad objects are internalized. Fairbairn's argument is that if the internalization happens with the good objects too, then there can be no account for why repression should happen (1944: 134; 1949: 154-5). Although, notably, Fairbairn did write about the internalization of good objects elsewhere, he sees the internalized good object as becoming part of "the central ego", which is comprised of conscious or preconscious elements. This is consistent with his view that the internalization of bad objects is always bound to repression (Rubens, 1994: 165).

As mentioned earlier, Fairbairn sees internal conflicts as inevitable; hence the endopsychic situation is a universal phenomenon from the beginning of life. In other words, he sees the splitting of the ego as a common psychic organization; however, he also sees the repressed endopsychic structure as the root to a realm of psychopathology that can develop later in life, depending on the severity of the fixation on, and withdrawal into, it (Rubens, 1994:163). The child cannot survive without objects, whether good or bad, and this need for others carries on throughout life. Based on the view that we are all dependent on objects, Fairbairn (1949) regards separation anxiety as the most significant insecurity that exists universally. Separation anxiety derives from the state of infantile dependence where the child actively identifies with the objects, on whom she depends on and with whom she shares emotional closeness (pp. 266). Therefore, it can be said that the child's need to preserve the object relations internally is to avoid the otherwise traumatic experience of separation anxiety. In the attempt to

preserve the attachment to the objects, she preserves the bond between the aspects of self, or the subsidiary selves in Fairbairn's term, and their exciting and rejecting counterparts. If the external others continue to be experienced as unloving and unsatisfying, the need to protect and control the bad objects persists and intensifies, leading to a repetitive circle of splitting and repression.

Although the psychological function of splitting and repression serves as a protective measure in emotional crisis, it may crystalize the self's perception of the external world through the filter of the established internal object relations; hence preventing the individual from experiencing the depth of ever-changing external reality. Fairbairn (1958) calls this maintenance of the internal stasis a "closed system". Drawing from his own clinical practice, he proposes that the unconscious conservation of the closed-system is the ultimate source of resistance to the possibility of change and growth in the psychotherapeutic sense (pp. 378). Hence it becomes pathological as opposed to a healthy way of coping. The endopsychic structure is at the heart of Fairbairn's object relations theory.

Rubens (1998) puts forward a revision of Fairbairn's original view on depression. He draws from Fairbairn's theory of endopsychic structure to argue that at the heart of depression is a neurotic manoeuvre of denial, or avoidance, of change, through the very primitive defence of retreating into the endopsychic situation formed through the early interactions with others. That way she can continue to live out the internal relationships, rather than facing the on-going interaction with the external world. The underlying logic is simple: if nothing has changed, nothing could have been lost. However as the person with depression organizes her subjective world on the ground of her internal object-

relations, the self can only express and define itself in the patterns of interactions established in the closed system. To understand depression, and its psychic functioning, it is therefore essential to understand the person's past relationships between the self and her external and internal objects.

As noted previously, Fairbairn's developmental theory sees separation anxiety as the most primal and detrimental form of anxiety. The separation anxiety derives from the infantile dependence, and it intensifies the need to preserve the internalised objects. Simply put, the child can bear the bad objects being bad, but not the separation from them, or worse, losing them. The person with depression cannot let go of her existing endopsychic structure that provides the shelter for her subsidiary selves and the objects, as they are internalized exactly out of the fear of losing them in the first place. The purpose of depression is therefore to preserve the attachments with the internalized objects whilst resisting change, or anything that threatens a sense of change. So it is with Fairbairn's view on other psychopathological states, depression should be studied with the relationships between the central self, subsidiary selves and the internalized objects.

Fairbairn (1944) described a sense of "futility", and although he saw it as distinct from depression<sup>9</sup>, it has been argued that the sense of futility is what would be recognised as the clinical presentations of depression in the cotemporary sense (Rubens, 1998). Fairbairn explained the phenomenon of futility from his perspective of the internalization, that is, of the bad objects, and the inevitable burden this creates on the

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<sup>9</sup> Rubens (1998) argues that, in actual fact, Fairbairn's differentiation between the sense of futility and depression is a result of his own definitional issues; Fairbairn cannot label it as depression having assigned depression to a different category. According to Rubens this distinction should be revised and the sense of futility should be incorporated into the term depression.

psychic functioning. His view is that, due to the identification with the internalized objects, which made the internalization possible in the first instance, the inferiority the individual experienced with the bad objects is covered up by the illusory superiority derived from the identification with the internalized objects. The clash between the illusory superiority due to identification, and the ever-present inferiority experienced in the central ego from the burden of the bad objects, in Fairbairn's view, damages the integrity of the ego (Fairbairn, 1941: 50-51). This leads to a sense of futility, which was described by Fairbairn as

[...] a complete impasse, which reduces the ego to a state of utter impotence. The ego becomes quite incapable of expressing itself; and in so far as this is so, its very existence becomes compromised (ibid).

It seems that what Fairbairn described as sense of futility, encompassing feelings of helplessness, emptiness, and immobilization are commonly associated with what is today called depression. It is also obvious that, in his theoretical context, such a sense of futility is not a result of aggression towards the loved-object, as Klein suggested, but it comes from a paralyzing frustration in which one fails to reconcile one's unconscious inner reality and the outside world,. It is important to note that, Fairbairn (1944) did not approve of Freud and Klein's emphasis on aggression/death instinct as the primary agent that contributes to the depressive or melancholic functioning. Rather, he marks down aggression and gives it a secondary role, seeing it mainly as a reaction to the frustration caused by the objects, rather than the other way round. This is critically different to what Klein proposed on the depressive position that it is guilt-triggered in the wake of aggressive impulses towards the loved object. It can therefore be postulated that, guilt, in

Fairbairn's view, does not generate as a result to one's own aggression, but it arises from a moral defence of seeing oneself as irredeemably bad (Rubens, 1998).

Hyperactive self-criticism, as also recognized by Freud, and its related phenomenon such as low self-esteem or self-depreciation, has been deemed as a common trait underlying the depressive phenomenon. I believe that Fairbairn's account of the internalization of the bad object, or moral defence, as a consequence to inadequate parenting, provides one way of explaining self-derogatory thinking and behaviours in depression. As noted earlier, Fairbairn sees the endopsychic structure as a defence against the intolerable anxiety in the face of one's needs not being met and the helplessness that derives from dependence on others whose behaviour is out of one's control. As Fairbairn wrote (1943), through internalization, the individual "take[s] upon the burden of badness which appears to reside in his loved objects" (pp. 66); by taking on the badness from the objects, the bad objects can be made good again. It provides a false justification for the deprivation and the inadequate treatments on the child's side, 'I am treated this way because I am bad'. However, the internalization of the bad objects that originally serves to preserve the relational bond also distorts self-identity and diminishes self-importance; the person, thus, experiences herself as fundamentally bad. The idealization and excessive investment in the loved-object, as located outside of the central ego, inevitably leads to the devaluation of the self. If the mind of a melancholic does suffer an engulfment in a harassing sense of injustice, as Freud observed, then it is the injustice she inflicts on the self. It seems to me then that to Freud, what the melancholic has lost is the narcissistically loved-object, either symbocially or

environmentally. However to Fairbairn, what the melancholic has really lost, or more accurately, ‘surrendered’, are the elements of self that feel lovable.

To sum up, like Klein, Fairbairn began his theory of endopsychic structure from the limitation of the mothering being both satisfying and frustrating, and upon which the baby has no choice but to rely on for survival. The intolerable tension created by maternal presence and absence fuels ambivalence with which the infant copes through the primal defence of splitting and repression. The purpose of this is two-fold. First of all, the infant seeks to control the frustrating object through internalizing it, taking upon the badness from the object. Secondly, the infant seeks to preserve the object, either good or bad, so as to avoid annihilating separation anxiety. Such psychic functioning, albeit defensive by nature, is what Fairbairn sees as the root to a range of psychopathologies, including depression. The Fairbairnian baby is essentially one that is wired for relatedness with objects, rather than merely seeking the gratification of the libidinal drive. The development of the personality and expression of selfhood relies on the relationships one has with one’s internal and external objects. On the other hand, if the deprivation of love is frequently experienced in the relationships, this results in an internal world populated with the bad objects in the service of preserving the emotional ties with the objects that needs to be kept as good.

To Fairbairn, the inability to step out of the closed system of experiencing is the greatest resistance to change of all. Such resistance to change certainly marks the key element in depressive functioning. Living inevitably involves losing and changing. However in the case of depression, change is petrifying as it threatens one with the

primal sense of separation anxiety. The reality or possibility of loss is painful, therefore the depressive encapsulates herself in her internal world, where her internalized objects, the object-relationships, the snippets of the memory of her attachment figures are preserved in an effort to deny any separation and loss. Fairbairnian depression is essentially a collapse of the integrity of the self, as a result of the desire to maintain stasis in a closed system whilst the reality of the external world has changed and now comes in conflict with one's internal world i.e. the original bad/unsatisfying objects are no longer there.

As mentioned previously, there had been a marginalization of Fairbairn's work in his day. Fairbairn himself acknowledged this with great disappointment (Scharff & Birtles, 1952: xvii). Moreover, the disappointment was magnified by the fact that the misinterpretation and dismissal of his work was contributed to by leading figures such as Winnicott and Khan (ibid). The lack of acknowledgement and appreciation he experienced in his professional life, combined with the years-long unhappiness in his married life, must have exacerbated his own sense of isolation as an already solitary existence (Rubens, 1998). And that, perhaps, was why his work concerned itself more with the schizoid way of coping, which basically was a psychic organization in which an individual resorts to internal rupture, i.e. splitting, as a result of the traumatic experience of the primitive need to relate to others not being sufficiently met (ibid), rather than depression, or the depressive state.

Many contemporary authors have drawn from object-relations theory in writing about depression (c.f. Goldberg, 1975; Gaylin, 1983; Summers, 1994; Lubbe, 2011).

However as far as I know, most of these literatures have not given Fairbairn much consideration due to his lack of a distinctive theory of depression. I am also aware of the fact that Fairbairnian concepts were often neglected in the case illustrations provided. Lubbe (2011), for example, in his book *Object Relations in Depression: A Return to Theory*, devoted only a few pages in discussing Fairbairn, whilst the classical theories, such as Freudian and Kleinian, enjoy more theoretical engagement. Summers's (1994) work engages with Fairbairn's theory more. In his book *Object Relations Theories and Psychopathology: A Comprehensive Text*, he made Fairbairn's theory his first chapter and provided a clear account of the Fairbairnian conception of psychopathology. However he adopted Fairbairn's own distinction between schizoid pathology and depressive pathology and this is reflected in an imbalance in the amount of discussion in his chapter. The minimal amount of a Fairbairnian illustration of depression in the existing psychoanalytic literature can be seen as a result of Fairbairn's dampened interest in depression. Notably Fairbairn's mentions of depression/depressive personality in his 1940 and 1941 papers were all he had to say about depression (Rubens, 1998). It was unclear why Fairbairn lost interest in depression. His vague differentiation between schizoid pathology and depressive pathology was another factor that contributed much to the difficulties for later scholars in engaging with a Fairbairnian account of depression.

## **Chapter Four**

### **Virginia Woolf and Depression**

In this chapter, I elaborate on the aspects of Virginia Woolf's life essential to my construction of my imaginary Woolf, with whom I will be dialoguing. The chapter is divided into two sections: the first will cover Woolf and her relationship with depression, looking at her early and later years and drawing on her diary entries and biographical information. In the second section I will discuss her relationship with psychoanalysis, covering her experience with Freud and Klein, her reflections on psychoanalytic work and the absence of an engagement with Fairbairn's work.

#### **Virginia Woolf and Depression**

In the opening line of the chapter "Madness" in her biography of Virginia Woolf, Hermione Lee writes:

Virginia Woolf was a sane woman who had an illness. She was often a patient, but she was not a victim. She was not weak, or hysterical, or self-deluding, or guilty, or oppressed. On the contrary, she was a person of exceptional courage, intelligence and stoicism, who made the best use she could, and came to the deepest understanding possible to her, of her own condition. She endured, periodically, great agony of mind and severe physical pain, with remarkably little self-pity. Her illness is attributable to genetic, environmental and biological factors. It was periodic and recurrent (Lee, 1997: 175)

It has been known that Virginia Woolf's infamous periodic "great agony of mind" with which she struggled her whole life was one of many different faces of depression –

a debilitating psychological condition, compounded by the physical strains. Woolf herself acknowledged her depression and recorded the insufferable depressive episodes in her diary, c.f. diary entries 1924 May 26<sup>th</sup>, 1926 Jan 26<sup>th</sup>, 1937 Apr 9<sup>th</sup> in Woolf, 2003 [1953]. Several writers have adopted a psychoanalytic language in seeking to understand Woolf's mental life (c.f. Panken, 1987; DeSalvo, 1989; Bond, 2000). For example, in relating Woolf's life to her literary creation and the composite of autobiography and biography, Panken concurrently detects a daughter in Woolf that desperately longs for maternal intimacy and protection, in parallel to her life history in which her mother was portrayed as emotionally unavailable. Panken, adopting Baudry's (1984) approach to psychoanalytic literary criticism, argues that the author exists not only in the autobiographical accounts of themselves, or in the biographical accounts, but lives also in the fictional world of novels, as the extension of their fictional characters that have their own 'conflicts, defences, and attitudes of the real people' that even the author is not aware of (ibid: 8). In her analysis of Woolf's novels, Panken notices the recurrent themes in Woolf's characters: helplessness and powerlessness, with an undercurrent of hostility that seems to be misunderstood and easily dismissed by others. Coming from a psychotherapeutic point of view, the repetition of a certain type of character could be read as a sign that Woolf sought to work through unconscious conflicts.

However, Panken and other psychoanalytic writers I have studied, commit to a third person perspective in their studies of Virginia Woolf, leaving themselves out to maintain an objective perspective. These accounts, which position Virginia Woolf as a subject of study, risk losing touch with the true character of Virginia Woolf – she rejected being psychoanalysed. A sense of unease in reading those studies alerted me to

my own identification with Virginia Woolf in that we both chose a solipsistic route of self-analysis as a way to prevent our narratives from being intruded upon. This unease made me realize I could not be that omniscient narrator that simply tells the story of others, of Virginia Woolf. I found myself, empathetically, calling to mind Woolf's own words that conveyed a strong opposition to the practice of studying a person by coercing evidence into some simplistic interpretations, common in the writing of biography or psychobiography,

[Those who] write what they call 'lives' of other people; that is, they collect a number of events, and leave the person to whom it happened unknown"(Woolf, 2002 [1939]: 83).

I also oppose reducing Virginia Woolf to her depression, as though her depression was simply a result of her being on the receiving end of tragic events; as though her life was merely a sum of what had happened to her and she had no choice and power in being who she was. Letting my Fairbairnian passion guide me in my inquiry, I see Virginia Woolf as nothing less than a complete person "of exceptional courage, intelligence and stoicism", as Lee (1997: 175) describes her, who lived through her life in the best way she could, who did not claim victimhood but, as an adaptive person, always resorted to her psychical resourcefulness in coping with all that imposed upon her experiential reality. Depression was a real psychological condition from which Woolf suffered, yet I agreed with Lee that "[s]he was often a patient, but she was not a victim." (ibid)

Virginia Woolf was vulnerable to recurrent episodes of depression throughout her life that never went away but only varied in intensity and, for the most part, interfered with her daily functioning and impacted her close relationships (Lee, 1997: 175). However, her references to depression, or of being depressed, were often interchangeable with the more problematic naming of it as “madness” or “mad”, c.f. 1926 Nov 23<sup>rd</sup>, 1929 Sep 10<sup>th</sup> in Woolf, 2003 [1953]. Reading into her view of depression as madness alerted me to her fragile edge of self-identity. It communicated a sense of alienation between self and others, rather than empathy towards her lived experiences of depression. The medical explanations and treatments imposed on her also interfered with how she viewed her depression<sup>10</sup>. This was also a potential consequence from having her personhood and psychological experience constantly subsumed under the repetitive, derogatory convictions of her depression as a case of “madness” and “insanity” by her close others (e.g. Bell, 1972; Glendinning, 2006). In those accounts, the intensity of Woolf’s depressive episodes was either described as a result of genetic disposition, her writer’s blocks, or a response to the ‘unfortunate’ events that occurred to her, whilst leaving the unspoken, psychological side of her narratives largely unaddressed. I agree with Lee (1997) that their choice of language (“madness”, “insanity”) largely reflected the attitudes of Woolf’s relational circle with regard to her depression. It reflected also a self-protective position they adopted in order to safeguard

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<sup>10</sup> Looking into Virginia Woolf’s medical history, she had consulted at least twelve doctors for her mental states, and hardly any of them showed sympathetic attitudes towards her suffering. The unsympathetic approach culminated at Dr Savage with his violent treatments on Virginia Woolf with force-feeding and strict rules of rest in the confinement of bed that severely impacted Virginia Woolf’s outlook on depression for life (Lee, 1997: 182-3).

their own life narratives and shield themselves from Woolf's painful reality (pp. 180). And yet Woolf, on her side, often used a protective and suppressed tone when speaking about her close others, such as her family and husband.

The diminishing of Woolf's self-esteem and the weakening of hope which resounds in her written texts ran in parallel with a lack of a consistently empathetic presence who could be there to receive her attentively and non-judgementally. This lack was largely manifested in the self-depreciative tone she used, intense and unmistakable in her letters and diaries, especially towards the end of her life. Even though she was deemed 'mad', she did not shy away from seeing herself as mad. She owned and internalized, to the core of her being, those depreciative external judgements. In my clinical experience, such insistence of one's fault, of one's badness, whilst preserving the external others as the good and kind is often seen in the case of depression. This idealization of the external others endangers the ability to tell a truthful relational story about oneself. Despite her writing talents being widely recognized, Virginia Woolf, ironically, deemed herself a failure throughout her life (Cunningham & Lackey, 2014: 93).

I quoted Lee (1997) at the opening of this chapter because what she says resonates with my view of Woolf's depression. Even though she had suffered from it for most of her life, it was never the case that she yielded to depression, even in her deepest despair. That being said, I, in agreement with Panken (1987: 268), believe that the motivation behind Woolf's suicide was complex, and should never be read as sign of her final succumbing to depression. Such a conclusion could not justify the fact that, throughout her life, she had never ceased to make active attempts to understand the

complexity of her depression, resorting to all the resources within her reach. In her own words, she “tried to analyse [her] depression” (D4: 103), to make the best sense of it that she possibly could.

A diary entry on 1926 Feb 27<sup>th</sup>, following the publication of *Mrs Dalloway*, captured a clear, intense striving to come to a perspective on her life:

“I enjoy almost everything. Yet I have some restless searcher in me. Why is there not a discovery in life? Something one can lay hands on and say “This is it”? My depression is a harassed feeling. I’m looking: but that’s not it — that’s not it. What is it? And shall I die before I find it (Woolf, 2003 [1953]: 85)

It seems to me that Woolf could be more at ease with expressing her intimate feelings only in the privacy of her own diary, and that this now provides us with a privileged entrance into her private thoughts. Reading into this diary entry, what she was striving to know but could not gain an absolute answer to could be seen as an urgent epistemological quest, which was, unmistakably, also a frustrating one for her. Although, due to the vagueness of the language, it is not possible to say for certain what exactly the nature of her quest was, it is apparent that the quest was intensified, if not triggered, by depression. As the purpose of keeping a diary is a means of recording one’s own private feelings from moment to moment, and never for public inspection, I can only interpret that her quest was evoked by her depression for which she could not identify a particular cause (“that’s not it, that’s not it” (ibid))” in the face of the un-answerability of depression.

She went on to remark, in the same diary entry,

[...] a great astonishing sense of something there, which is 'it'. [...] A sense of my own strangeness, walking on the earth is there too: of the infinite oddity of the human position. [...] Who am I, what am I, & so on: these questions are always floating about in me (ibid)

What may seem as a general questioning about the essence of personhood, “who am I, and what am I” (ibid), in my view, should not be seen just as a broad philosophical contemplation about the meaning of life (as e.g. Warner, 1987: 31 did). Connecting it with the earlier quest she was making in relation to depression, the questions she raised would intertwine with the personally meaningful explorations in relation to her selfhood and the sense of alienation that depression had forced between self and others, exacerbating “the sense of [her] own strangeness” (Woolf, 2003 [1953]: 85). Reflecting alongside Bollas’ (1987) concept, “the un-thought known”, Woolf’s existential yet dissociative enquiry into life could be a sign that there was an intensity of “the un-thought known” haunting her in the psychic space, like “a deep spell of the uncanny” (ibid: 37). With its emotional, pre-verbal origin long forgotten, the existential knowing of the “mute, unknown child self” (ibid: 101) does not have the capacity to articulate or symbolize her experience in language. The pain remains there, like a fever of unknown origin. As the child grows into an adult, who can think, but who has lost touch with her child-self’s emotional reality, she can only attribute this intensity of the experiential crisis of suffering, to an existential disorientation of the meaning of life itself. The unsettling emotional pains of unknown origin thus find expression in the form of a pressing concern with “the nature of [her] being or of life itself” (pp. 281). Using Bollas’ idea to elicit the theme relevant to the subject of my study, Woolf’s existential question about life, self-identity and personhood “always floating about” (Woolf, 2003 [1953]: 85) in her would come into better perspective if understood in terms of the unthought known.

As a writer, writing would seem the most natural way for Virginia Woolf to evoke the moments of being, known experientially, but insufficiently acknowledged and processed at the emotional level. As Abel (1989) argues, looking at the relationship between Woolf's novels and her personal history, Woolf's novels were often laden with the plots about lives in the past (pp. 1). The explicit argument Abel made, that the fictional works were fashioned in a complex way by Woolf's own past (ibid), was met by an implicit acknowledgement by Woolf (Woolf, 2002[1939]) herself. In Woolf's own words, "I find that scene-making [in novels] is my natural way of marking the past. Always a scene has arranged itself: representative; enduring." (pp. 122) Following this strand, what Woolf herself referred to as the "restless searcher" (Woolf, 2003 [1953]: 85) in her, would then actually signify her on-going search into her past where her personal history and emotional memories were located, in an effort to make sense of the present reality of life. Her intense desire to know life and discover meaning, as recorded here, would make more sense if gravitated backwards into her past, into the significant emotional impacts carried forward from the past, which she lived through and shaped who she was in the present. I believed that underneath her consistent desires to understand life was a recurrent, harassing presence of the unthought known. My belief remains that it was her need to "mark the past" (Woolf, 2002[1939]): 122) that piqued her interest in Freud, whose work she had read but never fully agreed with (Bahun, 2013: 99-100).

Virginia Woolf's connection with psychoanalysis was as complex as it was ambivalent. She read and grasped psychoanalytic theory, but never without a certain caginess in using it to understand human psychology, including her own. In the next

section, her attitude towards psychoanalysis will be further explained as I introduce the context of Woolf's relationships with psychoanalysis (i.e. Freud and Klein), highlighting the rationale of this doctoral thesis by making a case for Fairbairn's object relations theory within the frame of depression.

### **Virginia Woolf in the Context of Psychoanalysis**

As mentioned in Chapter One, I chose Virginia Woolf as the subject of my thesis not only because of her intimate experience of depression, which I personally identified with, but also, and most importantly, because of her relationship with psychoanalysis. She was surrounded by psychoanalysis for most her life due to her social involvement in the Bloomsbury circle. Many of her intimates were passionate about psychoanalysis (Bahun, 2013). Her brother, Adrian, and Adrian's wife, Karin, both trained and practiced as psychoanalysts (ibid). The Hogarth Press, founded and owned by Virginia Woolf and her husband, Leonard Woolf, published psychoanalytic works, largely those of Freud (Bahun, 2013: 93-4). However, despite being exposed to the psychoanalytic discussions both in personal life and literary engagements, she was never fully converted to psychoanalytic thinking, nor had she ever sought psychoanalysis as a treatment for her depression (Wolf & Wolf, 1979: 38).

Several factors have been suggested as explaining why Woolf shunned receiving psychoanalysis despite it being readily available. These include her need to preserve her creativity as a writer, to protect her own narratives of her illness from intrusive psychoanalytic interpretation, which, as Freudian, over-valued sexuality. Her perception was that psychoanalytic language was essentially patricentric, and disregarded her

femininity (Pankens, 1987; Abel, 1989; Caramagno, 1992; Bahun, 2013). Her dignity as a woman and a writer was reflected in her resistance against analytic intrusion; against passing the power to a psychoanalyst, an authoritative other; against risking her own autonomous accounts being dismissed, of being force-fed the male-oriented knowledge engendered by the psychoanalytic theory of that period.

Taking into account Woolf's family history, I also pondered that she must have felt the dread of re-enacting the "legacy of [emotional] dependency" (Woolf, 2002 [1908]: 114) that her father had played out in the family. She was witness to how her father subsequently burdened and exhausted her mother and Stella, her substitute mother figure, to death. Her resistance to psychoanalysis therefore might signify her need, either consciously or unconsciously, to avoid re-enacting this neediness and dependency that was imbued with a destructive potential. Perhaps, for Woolf, it was necessary to keep the needy part of her personality in check, for it would have been too intimidating to come in touch with what had, in the past, brought the death of her beloved ones. The therapeutic setting, which invites a full range of emotions including neediness and fears, could have been too painful.

When Virginia Woolf and Freud finally met, in late January in 1939, shortly after Freud had escaped from Nazi-occupied Vienna and settled in London (Meisel, 2013: 332), the impression Freud made on her did not redeem psychoanalysis from her criticism. The meeting took place at Freud's residence. She and Leonard Woolf had come to pay their respect to Freud for his acclaimed, revolutionary contribution of psychoanalysis (ibid). Notably, this meeting was arranged in the same year she had finished writing her autobiographical essay, *Sketch of The Past* (1939), in which she

explored some of her earliest life experiences and memories in more depth than she had previously. Moreover, it was the year before her suicide at the age of 57. The timing of the meeting made me wonder whether behind Woolf's motivation to meet Freud, there might have been an intensifying need to understand her past from a psychoanalytic perspective as she was probing into some of her earliest life moments through the writing of her auto-biography. My own speculation is that she had attempted a final cry for help in the presence of "the un-thought known" (Bollas, 1987), which was pressing and urging her to look into her psyche as her unconscious conflicts and emotional tension grew in intensity. Woolf, however, experienced her encounter with Freud, as nothing like a celebratory salute that she had expected, but close to an unnerving "interview" on her side (D5: 202). During this "difficult talk" (ibid) with Freud, she found herself feeling more like a patient than a guest, and curiously, brought home with her a flower of "narcissus" Freud had given her that day (ibid). Why he "gave [her] narcissus" (ibid) was left unexplained by Virginia Woolf, but the symbolic meaning of it was to unsettle her for days to come. A diary entry written the following day captured a sharp edge in the first encounter that had stirred up uneasiness, anger, and a mocking pity against Freud as she recollected details of the meeting.

The meeting did not warm her up to Freud as a person and perhaps fuelled further resistance to being psychoanalysed. But Virginia Woolf's engagement with psychoanalysis did not stop there. The meeting with Freud was to prepare her to make a more intellectual, and less psychological, engagement with Freud's work. After Freud's death in September in 1939, Virginia Woolf found herself in a highly inquisitive mood once again with regard to Freud's work. Once again the desire sprang up in her for

“gulping up” (D5: 249) Freud’s work. However, we do have to bear in mind how much Virginia Woolf had actually read Freud, what papers she had read. How well she, as a non-professional, grasped them remains disputed. This dispute is compounded by the inconsistency in Woolf’s claim, as late as 1932, that she had never read Freud, when it was evident that she had, on several occasions prior to this, made comments about Freudian concepts and psychoanalysis (Zwerdling, 1986: 296). Moreover there is no evidence to suggest that Virginia Woolf had read Freud’s *Mourning and Melancholia* (1917). We could not be certain what motivated Woolf to take up Freud again after his death, but what we can see is that this time her reading of Freud was to be much more in depth and extensive compared to her prior engagement, which was limited and narrower in subject matter (Bahun, 2013). At this stage of her engagement with Freud’s work, she was impressed by some of the insights Freud had made in relation to the two World Wars (Zwerdling, 1986: 296), but it was Freud’s views on the matter of human nature that she found “upsetting” (D5: 250).

In her diary, she recorded her disagreement with Freud’s understanding of human psychology on the ground of desires and needs,

Reducing one to whirlpool; & I daresay truly. If we are all instinct, the unconscious, what’s this all about civilisation, the whole man, freedom &c? His savage against God good. The falseness of loving one’s neighbour. The conscience as censor. Hate. [...] But I’m too mixed. (ibid)

Here her disapproval of Freud’s instinct theory was evident, but was hardly new. One of her earlier essays, *Freudian Fiction* (1920), readily expressed her objection towards Freudianism in a similar vein. Coming from a literary perspective, she argued in *Freudian Fiction* (1920) that the practice of psychoanalysis demolishes the aesthetic

values of the characters by reducing their complexities to clinical cases. In Woolf's view this was compounded by the psychoanalyst's authoritarian application of the doctrinal 'key', such as Oedipus, which "simplifies rather than complicates, detracts rather than enriches" (pp. 197). This thesis aims to complicate and enrich personal meanings, rather than to simplify and detract from the intricacy of our psychological world by making them generalized principles. It is clear, then, that psychoanalytic theory held a different meaning for Woolf. Furthermore, as a woman, Woolf's perspective of how human beings respond to the world differed greatly from that of Freud's, which was a male-orientated worldview. For Woolf, in a society dominated by men and their masculinity, what Freud described as the aggressive instinct was more of the male's habitual mode than females (Zwerdling, 1986: 297); Woolf believed instead that the basic elements of masculinity were aggressiveness and possessiveness, and that these elements disturbed the peace, caused wars and separated us from each other (ibid). She argued that such qualities in men were not prominent in femininity, and that the difference between sexes, was left out of Freud's theory (ibid). It is apparent that, as a woman, her way of looking at human nature was different to that of Freud. Her feminine perspective was hardly considered in Freudian thought, and so could not be legitimized in Freud's theory. This led to an irreversible resistance to further exploration of herself in Freudian terms.

Despite her difficulty in accepting Freud's ideas, Woolf's relationship with psychoanalysis was not one-way. Notably, her reproach against psychoanalysis was directed mainly at Freud and his followers, and it did not apply to the theoretical views proposed by Melanie Klein, who as a woman, de-emphasizes sexuality, credits aesthetic

values, and most importantly, in her work calls into question the dominant hierarchy of power caused by gender differences (Abel, 1989: 19). Woolf's intimate, yet troublesome association with psychoanalysis caught my attention, as someone who has found psychoanalytic theories profoundly helpful in personal reflection and clinical practice. I found myself imagining the possibility of a different story. If Woolf was born at a time when psychoanalysis had transcended the patricentric and authoritarian Freudianism to embrace the more contemporary, humanistic kind of practice that values relationships, individuality, personal power and knowledge to which I was fortunate to be introduced during my training. If, for example, she had met Klein first, rather than Freud, could she have possibly considered making more personal use of psychoanalysis? Klein, as a woman, celebrated femininity and worked towards a matricentric framework, who earned Woolf's admiration as a "woman of character & force" (quoted in Bahun, 2013: 97). And lastly, could there be a different story to be told, if she had had the chance to meet Fairbairn, who emphasized the importance of relational meanings and values? Would it appeal to her and entice her to make more in-depth theoretical engagements than her partial and prejudiced reading of Freud's work (Bahun, 2013: 97)? We know that Freudian theory, and Freud in person, had anguished her, but what we cannot know is what her response would have been if she had had the chance to read Fairbairn. Perhaps Fairbairn could have changed her mind about psychoanalytic theory and could have helped her, as it has helped me to understand the obscured communications of the symptoms that hold keys to unravelling the nature of my depression (Philips, 2013: 42). Perhaps it would have enabled her to see herself in a better light, not as mad, but as

someone who was intensely burdened by the vicissitudes of the unresolved conflicts in her inner life?

Woolf's personal association with Freud and Klein, whom she had met in person, and with whose work she had familiarised herself, led me to anchor my inquiry by using their work in my fictional dialogue with her. I introduced Fairbairn after Freud and Klein as I believe his work transcends Freud and Klein, yet his work had not had a chance to reach Woolf. This is mainly because the psychoanalytic society of Woolf's time was not a welcoming climate for Fairbairn's work. Being in the central location of London where the British Psychoanalytic Society was based, and from which Fairbairn was remote, meant that Woolf could not possibly have been introduced to him or his work. Fairbairn's biographer, John Sutherland, has also confirmed the fact that Fairbairn could not maintain regular contact with the British Psychoanalytic Group, albeit having attended a few meetings, due to this geographical isolation (Sutherland, 1989). Further to this fact is that, in my research into the existing literature, I have not been able to come across any association between Virginia Woolf and Fairbairn.

## Chapter Five

### Letters to My Imaginary Virginia Woolf

“Have patience with everything unresolved in your heart and try to love the questions themselves as if they were locked rooms in a foreign language.

Live the questions now.

Some day you will live your way into the answers.”

~ *Letters to a Young Poet* by Rainer Maria Rilke, pp. 31.

## **The First Letter**

Woolf's nephew, Quentin Bell who is best known for his biography of Virginia Woolf (Bell 1972), recorded four major mental breakdowns throughout his aunt's lifetime. My starting place is her first mental breakdown into depression, at the age of 13, soon after her mother, Julia Prinsep Stephan, died in 1895 from a rheumatic fever (pp. 44).

In the aftermath of her mother's death,

[She] became painfully excitable and nervous and then intolerably depressed. ... She went through a period of morbid self-criticism, blamed herself for being vain and egotistical, compared herself unfavourably to Vanessa [her sister] and was at the same time intensely irritable (ibid: 45)

My first letter to the imaginary Woolf will be addressed to this period of her life, which marked an acute transition point in her life and mental state, and during which she can be seen as being in a state of depression. As the psychological difficulties arose from the loss of her mother, I believe that this provides possibilities in which the Freudian/Abrahamian formulation of depression can be effectively reflected upon. The first letter revolves around the Freudian concept of melancholia (these days called 'depression').

## **Letter One – ‘For They Know Not What They Have Lost’**

Dear Virginia,

Recently I found myself thinking about what you told me about the untimely loss of your mother when you were only 13 years old. How she had been an important presence in your life, and how her sudden death was extremely difficult to make sense of and to mourn for at such a young age. To some extent it was almost like you could not believe the loss had really happened.

You recounted the moment after her death, “Stella [Virginia’s half-sister] took us in, to laugh, secretly, at the nurse crying. She’s pretending, I said, aged 13, and was afraid I was not feeling enough” (1983 [1934]: 242). The death did not feel real to you, even when seeing the deceased body of your mother. There was an absence of grief as the sense of loss could not register in you. This understandably led to difficulties in mourning. Yet the loss haunted you after that day, repeatedly and relentlessly. As you once said to me, “until I was in my 40’s ... the presence of my mother obsessed me. I could hear her voice, see her, imagine what she would do or say as I went about my day's doings” (Woolf, 1939: 80-1). The presence of her absence permeated so deeply into the on-going experience of your life. Her voice resounded and her image crept into so many of the fictional creations you went on to write.

Grief remained inaccessible for you for a long time, as it was immediately masked by the exalted fantasy of liberation from the critical glance once cast upon you by your mother, who modelled and reinforced the strict Victorian values of proper womanhood to which you could not live up. It was not until much later that you realized that her death was in fact “the greatest disaster it could happen” (Woolf, 2002 [1908]) to you, and to the family.

From my own personal experience, I can understand why the loss of your mother was not one that could be easily mourned. I pondered whether what you experienced as a paradoxical mismatch between the experience of loss and your feelings could be understood psychoanalytically? Your experience called to my mind what I have learned from reflecting upon Freud in understanding a similar emotional response in the aftermath of my own loss. Perhaps this might be of interest to you?

I am aware that you have read some of Freud’s work but avoided any kind of Freudian analysis due to your distrust of him and disapproval of his view of human psychology. But to my surprise, you have still found some of his ideas, for instance the concept of ‘ambivalence’, helpful for you to make sense of your personal experiences (Goldstein, 1974: 448-9).

I recalled what you shared with me in reflections of your feelings about your father,

But in me, ... rage alternated with love. It was only the other day when I read Freud, for the first time, that I discovered that this violently disturbing conflict of love and hate is a common feeling; and is called ambivalence (Woolf, 2002 [1939]: 116)

Although the object of ambivalence that you spoke of here was unmistakably your father, I found myself wondering whether that could be referring to your mother as well? I say this because from what I have read in your fictional stories, for example in *A Room of One's Own*, *Mrs Dalloway*, and *To The Lighthouse*, the theme was that of ambivalent relationships that were manifested between child and mother, and not the father (Hirsch, 1989: 109). Personally I had not previously known you to openly acknowledge your mother as an object of ambivalence for you. I assumed this has to do with her dying whilst you were still young? If there was a sense of ambivalence it would have been more difficult to reflect on, as it could be marked by a powerful longing for her in the aftermath of loss. I think that your ambivalence touched upon something tremendously important in understanding the unspoken difficulties you had with your parents. This also suggested to me that, by reflecting the Freudian idea, you had made a change with regards to your attitudes towards Freud? You did not say anything further but I have some hope, at this point, that you would be willing to suspend your judgement upon reading this, and consider my further contemplations on it and the possibility of the connections I am going to make here.

It seems important to me to start with Freud's paper *Mourning and Melancholia* (1917) in which he talks about why, in some cases, loss develops into depression. I should leave aside the problematic view he has that mourning is either normal or pathological (with the latter being linked to depression), and focus instead on what I think would be relevant for you, particularly the concepts concerning 'the unconscious loss' and the 'incorporation of the lost-object'. You have not previously mentioned these two concepts before, so I thought you might be interested to know more?

Freud (1917) suggests the absence of grief in the person who has suffered loss and their inability to mourn needs to be comprehended with the concept of ‘ambivalence’ – the conflictual polarities of love and hate towards the object that has been lost (pp. 256). In your case, although it was not apparent to you, the ambivalently loved and hated object would be Mrs Stephen, your mother, to whom part of you yearned for attachment, from whom another part of you sought detachment. But where did the hate come from? How could you possibly have hated her, you would ask. She was by nature the most caring and attentive person, with that astonishing beauty that made people hold their breath in admiration.

You remembered her to be,

intensely sympathetic. She was immensely charming. She was utterly unselfish. She excelled in the difficult arts of family life. She sacrificed herself daily. If there was chicken, she took the leg; if there was a draught she sat in it--in short she was so constituted that she never had a mind or a wish of her own, but preferred to sympathize always with the minds and wishes of others (Woolf, 1931a: 236-8).

She was what you referred to as “the angel of the house” (Woolf, 1931a) in motherly form. Yet her motherly care and love was a luxury to which you had only a tiny share, being amongst eight children and not her favourite, whilst her idealized femininity and nursing talent brought to her the constant burden of demands and exploitation by the more needy others, such as sick relatives or your father. Ultimately she weakened into physical collapse. “Can I remember ever being alone with her for more than a few minutes” (Woolf, 2002 [1939]: 93), I heard you murmur to yourself once. She was almost always absent in your childhood, and even when she was around, she felt distant and emotionally unavailable. “She was sharp; she disliked affection”

(ibid: 94), as you recalled. I did not say this to you at the time but I sensed that you had wished to be closer to her and to have her respond to your longing for her more generously, but those desires had never been met sufficiently. And that look on her face, as you remembered it by her deathbed, when you came to say your final good-bye to her, the face that was frozen with severity, iron-cold. You could neither love nor hate her fully as a child caught in the paradox of a desire for more of her and being intimidated by her reserved presence of discipline and severity. But she was your mother, highly praised for being a good woman and mother. I believe that, for a child, just the thought of hating one's mother, even at the age of 13, would indeed be unthinkable. Hate must be repressed, in Freud's thinking, to help keep the intense hateful feelings towards the mother at bay. My thought as to why "rage alternated with love" in you in relation to your mother centres on her emotional unavailability and frequent absence in your childhood. I was dubious when Freud suggested to me that a daughter's hate towards the mother had its origin from the eroticized desires for the father during the oedipal phase<sup>11</sup>. I hope you would agree with me on this.

For you what seemed to trigger the depressive state was the loss of your mother, a good object. Your inability to mourn suggests that her death was not as simple as a loss of a loved object. Had it been this simple, the mourning would, in your own opinion and that of everyone else been straightforward. But I am assuming that what led to the inability to mourn was that underneath there were also an immense ambivalence and an

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<sup>11</sup> Freud's original view on the origins of 'repression' was one-sided and emerged during the onset of oedipal phase, where the sexual instincts towards the parent of opposite sex and the hostile instincts towards the parent of same sex were met with anxieties in acute form: penis envy and castration anxiety. As in the case of *Little Hans* (Freud, 1909)

unconscious loss, that something was lost altogether with actual loss of your mother. The loss of an object, either loved or hated one, is catastrophic and the pain insufferable, as Freud emphasized, because it not only deprived you of an on-going external relationship with her whom you undoubtedly loved, but also because it threatened the internal attachment, the object-tie, to her by which the ego came to define itself. The meaning of your loss was entangled and complicated in the face of ambivalence. Freud (1917) believes that in melancholia there is an unconscious mourning for the unconscious. He believes that the great problem lying behind depression is that the melancholic ‘knows *whom* he has lost, but not *what* he has lost in him’ (pp. 254, italics original). In this sense the important question to explore would be what was lost *in* you, at an unconscious level, with your mother’s death. Reflecting Freud, I wondered whether what you suffered was not only the loss of your mother, but also an object at which the hate, the aggressive libido, could be accurately directed. The hostile impulses thus became aimless. You could not expend your fury, as the object that originated hate was no longer there. Object-cathexis, as Freud (1917) called it, is a necessary part of the normal mourning process so that the ego can finally be freed from the lost-object through gradually loosening the libidinal tie to the lost-object (pp. 249). And what inhibits this process of cathexis results in a stagnation of the depressive state.

Freud suggested to me that in the case of depression, apart from losing an object where instinctual aims could be directed, there is something else, something more profound. This stems from his observation of the depressive’s total withdrawal of libido from external reality, and their inability to re-invest their libido beyond the ego, i.e. the objects outside of themselves. This commonly finds expressions in the loss of

motivation and aims, and a complete retreat from the outside world. I have begun to ponder Freud's views in thinking about your initial numbness to your mother's death. Perhaps it signified a psychological mechanism operating under the surface, and if that could be the case, then the psychological meaning of it would be far more complicated than what appeared to be shock, or a denial of the death.

When I consulted Freud on this, he referred to his paper, *On Narcissism* (1914), and pointed out to me that the essential nature of the object-loss in depression is the loss of part of the ego due to a narcissistic identification with the lost-object. In other words, the danger of losing someone with whom the ego narcissistically identified, through death, separation or estrangement etc., is not just the loss of that person, but it also is a loss of an aspect of the ego which merged with the narcissistically-identified object whose existence depends on the experience of the on-going attachment to the person. And, "if the love for the object—a love which cannot be given up though the object itself is given up [i.e. due to severe disappointments by the object] - takes refuge in narcissistic identification" (Freud, 1917: 251). Through narcissistic identification, the ego re-enacts its desire to be the object that one loves and desires (Butler, 1999: 80-2), hence avoiding the consequences of a loss of the object. The re-creation of the internal object-tie resembling the real object-relations is the melancholic solution to cope with this pain of losing the object in reality.

In depression, there is a regressive attempt to return to the ego-cathexis – libidinal investment inside the ego, which characterizes the phase of primary

narcissism<sup>12</sup> It is through incorporation, a mechanism akin to what Freud described as an oral-sadistic impulses of devouring the object, (Freud, 1917: 249-50), that the ego reinstates and re-establishes the lost object internally, and can once again maintain the internal connection to the lost object. If this was the case for you in the aftermath of the death of your mother, the introjected lost loved-object would live on as the ‘forsaken object’ (Freud, 1917: 249) in you. The process of incorporating your mother would conjure a process of becoming her, the lost object, through an intense identification with her. The ego, then, is convinced of nothing ever being lost, or that it can be lost, and the unbearable pain of object-loss is obviated.

I recollected a line you read to me once from your novel *The Waves* (1931b), “Our separate drops are dissolved. [...] lost in the abysses of time” (pp. 165). The symbolic imaginary you conjured coincides theoretically with the desire for psychical merging, which Freud (1914) described as a state of “secondary narcissism”, of the ego and its lost loved object. Perhaps, like the way ‘two separate drops are dissolved’, your deepest longing was to return to a non-differentiation state where you could re-unite with your mother as one and inseparable wholeness. By transferring the external relationship into the intra-psychic realm and continuing the investment in the forsaken object of your mother, the reality of the loss and of the differentiation could be deterred. Mourning could not happen. Freud argued that this constitutes a common psychic defence that diminishes the emotional impact of significant loss.

Depression as a psychical phenomenon in Freud’s view would resemble

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<sup>12</sup> Both of Freud’s conception of ‘introjection’ and ‘incorporation’ are intertwined with the idea of ‘identification’. As Sánchez-Pardo (2003) points out, his ambiguous use of these terms in his writing makes it hard to further differentiate them (p. 33).

an open wound, a black hole, an abyss of dereliction. There is no real object loss in melancholia, no mourning; rather there is a pseudo-mourning, which threatens the object. The lost object leaves its psychic trace inside - introjection and incorporation - and there is a disavowal of object loss. (Sánchez-Pardo, 2003: 51)

However incorporation as triggered by loss has its downside. As it happens, the ego reinstates not only the loved aspects of your mother, but also “the shadow of the object” (Freud, 1917: 249) as characterised by its destructive aspects that comes to burden the ego (ibid). The state of the ego becomes altered by the incorporation and ‘impoverished’ as a result. By keeping the lost object alive internally, the ego pays the price of surrendering unconditionally to the demands by the incorporated object. “[H]ate comes into operation on this substitutive object, abusing it, debasing it, making it suffer and deriving sadistic satisfaction” (Freud, 1917: 251). The idealized femininity of your mother became your ego-ideal (superego), and that “intensely sympathetic, charming, utterly unselfish” maternal object she represented became an unattainable ‘oppressive phantom’ (Woolf, 1931a). The oppressive restraint of the forsaken object, your mother, was reincarnated inside you, and found expression in your relentless self-criticism when in an acute state of melancholia not long after her death.

How little use I am in the world! Selfish, vain, egoistical and incompetent. Will you think out a training to make me less selfish? It is pathetic to see Adrian [Woolf’s younger brother] develops virtues, as my faults grow. (Woolf, 1975 [1909]: 411)

What struck me was that the very things which you accused of yourself, “selfish, vain, egoistical and incompetent” (ibid) paint a completely contrary picture to ‘the angel of the house’ (Woolf, 1931a), the ideal of womanhood you describe as being embodied by your mother. I believe that your choice of words was not random, but the

doing of the unresolved ambivalence between love and hate that was being internally evoked towards your mother. The sense of “vain” and “incompetent” could be the ego’s helpless protest in the grip of the potent destructiveness of the introjected mother. Whilst the sense of “selfish” and “egoistical” could be the ego’s surrender to a narcissistic love for the introjected mother through an on-going libidinal re-investment. You would notice that those accusations you had against yourself sharply contrasted to your description of your mother as “utterly unselfish” and self-sacrificial, the opposite of egoistical.

You could not escape your self-criticism and insisted on seeing yourself as faulty, as you could not fulfil what the ego-ideal demanded of you. What charmed you before now tormented you, restraining and oppressing your ego’s expression of being its self (Kristeva, 1989: 5), which is so characteristic of depression. Therefore incorporation transforms the loss of the lost-object into ego-loss - loss of the integrity of ego (Freud, 1917: 249). The fundamental problem at the heart of Freudian depression is thus essentially “not knowing how to lose” (Kristeva, 1989: 5).

Early on, I said that your difficulties in mourning after your mother’s death did not seem odd to me because I personally experienced a similar scenario. I would like to share this with you, and hopefully make Freud’s theory more relevant to both of us.

My first encounter with depression was after the divorce of my parents, when I was twenty-one. After that any contact with my father ceased completely. Like you, I was unable to mourn for the loss of an on-going contact with my father or for the loss of our integrity as a family, whilst everyone else continued to suggest that I should be

heartbroken, devastated, needing some help to get through it. They thought that my emotional numbness was only pretence and found it frustrating when I could not display some appropriate emotions to confirm their worries. Deep down, apart from a wish that people would stop consoling me for the pain they imagined I should be suffering; I was genuinely unable to feel even a minute amount of sadness. The conventions of grieving repulsed me. God knows how much I could relate to you saying you felt ridiculed by the nurses crying by your mother's deathbed that day (Woolf, 1983 [1934]: 242).

I could not say it out loud at that time that I had willed it, the divorce, since the day I realized what was behind my mother's failing health. The paternal tyranny that my father inflicted on the family was suffocating, and manifested as both incessant financial control and emotional oppression. During the years of growing up divorce had seemed to me the only way to break free from the paternal control he had on me and on the family. I pictured a happier family without him (perhaps mother would stop being ill with depression?). Sensing that it was considered inappropriate to celebrate parents' divorce, I could not admit that I found myself feeling an immense relief after the divorce as I thought my dream of the Independence Day had come true. And to break the tie completely I adopted my mother's maiden surname instead. I could not meet the expectations of my concerned relatives who had defined for me what I should be feeling, so I only wished that they would leave me alone and let my life return to normal. I thought I was coping fine with being fatherless, so when depression landed its first impact on me shortly after, I could not work out a possible cause for it. I had finally got what I wished for, hadn't I?

It was not until I consulted Freud that I realized what could have happened to me on a psychological level. He thought that my relationship with my father contained highly ambivalent feelings of love and hate, in the sense that I had invested both sexual and the aggressive energy in my father. The outward symptoms of depression I had were explained as sign of an undercurrent of psychic mourning in the unconscious. I hardly agreed initially; in contrast to your feelings for your mother where hate was hard to justify, my struggle was to figure out how I could love my father in any way. How could I mourn, either consciously or unconsciously, for something I wished gone?

Freud, drawing from his views on *Femininity* (1933), suggested to me that my ambivalence towards my father derived largely from an un-resolved Oedipal complex,<sup>13</sup> and had little to do with my father's actual behaviours. His explanation was that the daughter's channelling the sexual instincts, or 'eros', towards their father happens as a natural occurrence in the itinerary of heterosexual psychosexual development in women. A daughter's desire to have a penis, which she does not possess, is transformed into a desire for the father<sup>14</sup>. He further explained that my bitterness and resentment, symbolizing the feelings of hate, were an unconscious psychological defence at work with the purpose of masking my inhibited feelings of love towards my father as the

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<sup>13</sup> Further to this is Freud's (1933) view of the femininity that the female body is a representation of as biological deficiency, i.e. a lack of a penis. This felt incompleteness reaches its climax around the Oedipal phase, which spans from the age of 3 to 6 years, where the daughter is driven by penis envy, and subsequently she has to give up the primary, pre-oedipal bond with the mother in order to achieve heterosexuality.

<sup>14</sup> Jouve (2000) points out that, in Woolf's time, Freud had abandoned his seduction theory, in which he initially thought that the child's sexual desires were caused by parental seduction, and replaced it with his drive theory, in which he believed sexual desires derived from the child's own unconscious drive towards the parents which led to the delusion of seduction. Woolf's close relative, her sister-in-law Karin Stephen held this view too (pp. 247).

desired Oedipal object. He wanted me to see that my hate had its origin in the face of unfulfilled desires for love from my father, and that the more passionate my love is, the more the hate there will be.

He sees my unconscious conflicts between love and hate starting in the Oedipal phase. The realization that the love is one-sided, and therefore cannot be fulfilled, brings about not only tremendous pain but also a regressive return to the pre-oedipal bond with the mother, whom he deems the universal first sexual object. The shift from the Oedipal object to the first sexual object was a psychological manoeuvre to avoid the pain of rejection by my father. Love, given its Oedipal roots, has to be repressed, leaving hate a conscious and dominating feeling towards my father. He reasoned that my loyalty to my mother and the on-going psychological bond I had with her was an evidence of my re-directing the sexual instinct from my father to my mother. My attachment towards my mother and aggression towards my father was seen as a result of an unsuccessful negotiation of the triangular dynamics in which the repressed love was replaced with hatred (1920: 384).

However I found this both an unsatisfactory explanation and a distressingly offensive manoeuvring of my femininity by placing the blame on me for being unable to resolve the conflicts of desires, rivalries, and loyalty in the face of Oedipal tension between mother and father. His explanation, with an implied accusation that it was my problem, deriving from my innate instinctual wishes, and not something caused by the environmental others, also re-provoked my anger towards the paternal authority exercised by the father(s). However, similar to your experience with Freud, my protests on this matter were futile. Freud showed no concession to my disagreements. As we could not reach an agreement on what really caused my ambivalence (the unconscious

conflicts of love and hate) towards my father, I decided to suspend my disagreement on the matter and proceed with a request to have my question answered: why I should become depressed at the time of my life when I thought I had finally achieved what I always wanted - to live as my own person by breaking from my father, which had remained a dream, and a conscious longing all my life?

Freud corrected me by saying that the loss of my father was only a conscious knowing, and what I was really unconsciously mourning for was the invisible loss in me. And the loss, he suggested, must have been great so as to cause such a disruption in my being. But what could it be? The question left me in confusion as I left Freud. It was not until much later when you told me your own experience that I could start putting his words to use. Although I remained sceptical about Freud's emphasis on sexuality in shaping our motives (Jacobs, 1992: 42), I found some truth in what he said about the unconscious loss.

I thought about what supported me through all those years in the father's reign, what made me strong enough to survive in my deepest despair. It was not my mother who was in her constant battle with depression; it was not the relatives who thought we owed our comfortable life to my father and I was only being ungrateful to have any complaints; it was not my friends who, well, knew little about my family situation. I believe what saved me was *my hatred for the father*. The hate that was lived through in a revengeful fantasy of defeating my father's tyranny one day, of having him pay the price for what he had done wrong, of envisaging the failures being his final fate. It was hate, and an intense one, that had kept me vigorous and alive.

On recalling what depression did to me, the first thing that came to my mind was a sense of purpose, or a motivation to go on living disappearing until living itself seemed meaningless. I felt that I was dying inside, a slow death as depression consumed my sense of being, and of "being itself" (Kristeva, 1989: 5) until I could only see my being as a vice, with an ego too 'impoverished', to borrow Freud's term, to feel any self worth. To Freud, a loss of interest in life could be translated as a loss of instinctual life. He was right. The loss was great indeed in that I lost what I had been holding onto to live. I lost a reason for hate to exist, a hate bound to my father, when I made the conscious decision to eliminate him from my external reality. To this Freud would argue that I had not lost him for real, for he had continued to live as 'a forsaken object' in my internal world to allow me to maintain the emotional tie and go on hating. And I did, in a form of an intense self-hatred that preserved my passionate hatred. This would be, in Freud's explanation, because of the hate being re-directed at the ego that has now incorporated the lost object. On the surface it seemed I had achieved what I longed for, an eternal break of the external object-tie, but in fact I was only imprisoned with the forsaken object resurrected in myself. My relentless attacks directed at it also put myself at the risk of being destroyed by my own cruel hatred.

Virginia, it has seemed that for a long time we have been both haunted by the phantoms of the lost objects that could not be put to rest. But mourning only becomes possible when we come to see what we have really lost internally. If Freud was right, then the unconscious loss must be brought to the open to instigate mourning for what has been lost. To admit the loss it must entail the necessary process of 'killing the dead' (Leader, 2009: 124).

I hope that this letter could offer some Freudian insights consistent to what you shared with me on the matter of 'ambivalence'.

Yours,

Nini

### **The Second and Third Letter**

The unresolved feelings towards the death of Woolf's mother became reinforced by the sequential death of her half-sister Stella, two years after in 1897 (Rose, 1978: 16-7). After her mother's death, Stella, who inherited many of the characteristics of her mother, had slipped into the role of a substitute mother for the Stephen children. She brought relief to them by enacting the mother figure for them, making it possible for them to attend to their daily lives without being crippled by the lack of a mother (Lee, 1997: 134). Understandably, Stella's sudden death was to re-evoked an emotional turmoil that had been hidden in Virginia after losing her mother. Similar to her mother's death, Stella's death was linked to her failing health, exacerbated by an over-exhaustion of running the household, taking care of the little Stephen children, and most of all, accommodating the neediness of the father who, as a wifeless widower, became increasingly demanding of empathetic attention and attentive company from her. A tremendous number of domestic duties were imposed upon Stella as the substitute mother. At the same time, she enacted those inherited characteristics from the mother as a nurturing and self-less carer that Virginia Woolf herself much depended on for company and comfort (Lee, 1997: 139).

Indeed, Stella's fate was much akin to that of her mother's, as she gave in to the demands made upon Victorian women. Her own happiness, even as a newlywed, was prohibited by her father, who was too concerned with his own misfortune (Rose, 1978: 20-1). Lee (1997) argues that, being a witness to the troubling relationship between her

submissive mother, and then later on, her half-sister Stella, and her demanding father must have fuelled Woolf's intense re-evaluation of the "tyranny and hypocrisy" of Victorian fatherhood during her establishment of a feministic frameworks in her writings and personal values (pp. 138).

Stella was buried next to her mother, Julia Stephen, in Highgate, but none of the Stephen children attended the funeral (Lee, 1997: 140). Despite the scarcity of outward expressions of her feelings, Woolf preserved in her diary those emotional difficulties brought about by Stella's death in a fragmented and desolate way (ibid),

Things are all in a tangle ... It is hopeless and strange ... Very strange and unhappy ... Everything is strange & unhappy... Everything is miserable & lonely ... One day is so like another that I never write about them ... And another & another & another yet to come. Oh dear they are very long, & I seem cowardly throughout when I look at them. Still, courage & plod on. (Woolf, 1990 [1987]: 115-34)

The passage unquestionably conveys much of the hopelessness experienced by Woolf, at only fifteen and a half years old. The death must have been a catastrophe indeed, for it was Stella who once relieved the Stephen children "from the conventions of sorrow" (Woolf, 2002[1939]: 105), only to re-ignite with her own tragic death "the haze of heavy emotion" (ibid: 104) that the mother's death had left. The death of Stella was a second blow to young Virginia, forcing her to acknowledge the tragic loss that she previously ignored. The gloomy air in the house of losses and grieving persisted in shadowing her early life.

It was not until nearly three decades later that Woolf could fit these early experiences of losses into an artistic whole in *To the Lighthouse* (Woolf, 2004[1927]). During the time of working on *To the Lighthouse*, her mind was drawn to the earliest

moments with her mother, as exclusively to herself as a mother-daughter couple could be (Woolf, 2002[1939]: 93). Woolf acknowledged *To the Lighthouse* as her most autobiographical novel as the characters were based on the actual people in her life<sup>15</sup>. The death of Mrs Ramsay and Prue, one of the Ramsay children, in the story, most likely represented the death of her own mother and Stella. Notably, the process of working on *To the Lighthouse* took her to as close to experiencing psychoanalysis as she would ever allow herself,

As she described,

I wrote the book [To the Lighthouse] very quickly; and when it was written, I ceased to be obsessed by my mother. I no longer hear her voice; I do not see her. I suppose that I did for myself what psycho-analysts do for their patients. I expressed some very long felt and deeply felt emotion. And in expressing it I explained it and then laid it out to rest. (2002 [1939]: 81)

Woolf compared the psychological meaning of *To the Lighthouse* for her to an “elegy” (Woolf 1980 [1925]: 33) Bearing in mind the significance the novel has to her, my second letter will address *To the Lighthouse*, seeking a Kleinian language to reconstruct Virginia Woolf’s past and the origin of her depression. I will attend to the narratives of Lily Briscoe as my main interpretive subject<sup>16</sup>, and situate in the letter the controversy between Freud and Klein on the subject of depression.

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<sup>15</sup> As Woolf (1953) herself acknowledges in her writer’s diary, her motivation for the novel is “to have father’s characters done complete in it; and mother’s; and St. Ives; and childhood, and all the usual things I try to put in— life, death, etc. But the centre is father’s character, sitting in a boat, reciting “We perished each alone”, while he crushes a dying mackerel (pp. 75)

<sup>16</sup>The reason of my focusing on Lily has to do with the historical context. During the writing of the novel, Virginia Woolf’s brother, Adrian, a trained psychoanalyst who just

## Letter Two – ‘For We Think Back Through Our Mother’

Dear Virginia

I have recently finished *To the Lighthouse*, and would like to discuss with you some thoughts that were evoked in me from my reading and re-reading of it, in a psychoanalytic light.

The centre of the novel revolves around the character of the father figure, Mr Ramsay. (Woolf, 1953: 75). Indeed his character is the most vigorous amongst all; his tyrannical presence and the unrestrained emotionalism with which he bears down on the family, coupled by his need to dominate those around him (who struggle but comply) conjures up a surge of resentment in me as a reader. As I read, I could feel him commanding me to attend to him, and quite forcefully so, that it should be him and not somebody else who is the thematic focus of the novel and controls the emotional tides of my reading experience.

On my first reading of *To the Lighthouse* it seemed to me, from the way you constructed the patricentric narratives and began the story through a conventional Freudian plot of the Oedipal rage in James (the youngest Ramsay child) towards his father, Mr Ramsay, that you had finally given into the Freudian theory of patriarchal

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completed Klein’s London lecture series, visited her, and this, as recorded in Woolf’s diary, brought about her creation of Lily Briscoe, (Abel, 1989: 68).

dominance. Seemingly the novel was written to affirm the Freudian theory by positioning the father at the centre, and perhaps also to cater to an increasingly popular trend, concurrent a growing recognition of Freud, that imbues fiction with psychoanalytic plots (Dever, 1998: 3). Indeed Leonard (Woolf's husband) received *To the Lighthouse* with great contentment and pleasure as the result of your explicit use of Freudian thought<sup>17</sup>.

However, on my re-reading of it I have come to realize that my first impression was most likely inaccurate. Could it be your intention, Virginia, to trick us to an incorrect conclusion via the Freudian surface plots, whilst blinding us to your real arguments? You said to me once that "being read [is] superficial" (Woolf, 1985[1953]: 75). Were you already hinting to me not to take everything you write at the face value? By withholding much of the explanations of your real feelings about psychoanalysis and the purpose of your narrative designs, you leave much space for my speculations, and now I wish to see if any of it could be closer to your true intention.

My reading of the novel led me to an impression that Mr Ramsay, the father of the Ramsay children, occupies the centre of the plot in the overt narrative. Knowing your personal experience with Freud, I wondered whether your portrayal of Mr Ramsay in the novel represents not only your father but also, on a deeper level, Freud, the father of psychoanalysis, with whose thoughts you disagree but found it futile to openly criticise.

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<sup>17</sup> Woolf recorded in her diary that she felt an immense relief after Leonard Woolf read *To the Lighthouse*, praised highly of it and called it a "psychological poem" (Woolf, 1985[1953]: 102).

What he said was true. It was always true. He was incapable of untruth ... never altered a disagreeable word to suit the pleasure or convenience of any mortal being, least of his own children ... should be aware from childhood that life is difficult; facts uncompromising; and the passage to that fabled land where our brightest hopes are extinguished (Woolf, 2004[1927]: 10)

I read this passage as your camouflaged criticism of Freud's psychoanalytic paradigm, which centralised the father and his authoritarian stance, which arrested his capacity to consider your feminine perspectives. Freud's theoretical claims are un-negotiable; his theory stands for truth, disregarding therefore a subjective account of reality. In your case it is a feminine reality that is at the core of your psychological narratives as a daughter. His theory of psychosexual development tasks woman to grow out of the necessity of separation from the primary loved-object - the mother. Freud is uncompromising in how we should develop psychosexually as a daughter, how we should overcome the primary bond with the mother and to mature through the Oedipal dynamics of implicit prohibitions and eroticized longings (Hirsch, 1989: 99). Freud sees female identity as only emerging fully-grown in the wake of her sexuality. To be a Freudian daughter is to surrender to the intervention of the father as a third person who breaks up the bond between mother and daughter. This is the only way to be on a 'normal' developmental path. Women have a less evolved super-ego; women are not as good as men therefore they should submit themselves to men's rule. Freud's judgements of woman reflect the reality of the gender prejudices of the post-Victorian era you lived in. In his eyes what woman lack is "the super-ego ... so independent of its emotional origins as we require it to be in men (Freud, 1925: 257-8)".

Reading *To The Lighthouse* through a Kleinian lens, I became convinced that the “emotional origins” from which Freud believed that men were required to break out, is what you hoped to return to - the “fabled land” (Woolf, 2004[1927]: 10) that is fertilised by the maternal provision that wraps the baby to the breast of milk, of warmth. The access to that fabled land, the soothing pre-oedipal encapsulation with the mother, is extinguished from the Freudian theory, as it can only be found outside of the patricentric construction of ethics, morality, and rationality. On the surface level, *To The Lighthouse* conforms to Freudian theory (perhaps to avoid criticism that could distract the aesthetics of the work?), but underneath you skilfully construct an alternative narrative, and arguably a Kleinian one, through Lily Briscoe’s symbolic representations in painting. Whilst Mr Ramsay occupies the centre of the novel’s narrative texts, Lily’s painting gives the centrality to Mrs Ramsay, the mother, indicating the latent theme of the novel.

By creating a gap between the novel’s overt narrative and the symbolic space of Lily’s painting, you allow a transitional space (Winnicott, 1971) where the boundary between the objective reality and the internal phantasy is blurred. It seems that Lily Briscoe, the un-married woman artist, serves as your vehicle in creating a transitional space within the novel and allows you to bridge the external reality of what is happening as you portrayed in words, and the internal perception of what is being felt psychically and subjectively as captured on Lily’s canvas. By oscillating between the narrative presentation and Lily’s painting as the psychic space of the novel, you conserve what could not be put to words and so have been left unsaid. In this in-between space, the fractured incongruities of thoughts and primitive sense of emotional experiences become

open to mediation. This enables you to unburden yourself of the incongruities of what is thought and what is felt, and to unhurriedly move forward the story.

By transferring expression onto Lily's canvas, you reconfigure a different language to give expression for what could not be spoken. What Lily's painting expresses through symbolic language through brush-strokes and colours, is neither clear nor absolute. When Lily brings herself to paint, "[s]he was not inventing; she was only trying to smooth out something she had been given years ago folded up; something she had seen" (Woolf, 2004[1927]: 228) If "folded up" could imply repression, Lily's act of painting would imply her searching for the memory underneath the consciousness. Rather than creating something new, Lily's canvas tracks the emotional clues into the past, into the primitive registers of those sensory and emotional experiences happened in the *pre-oedipal attachment with the mother* long before language becomes available (Abel, 1989: 47). When asked what she was painting, "in that corner, it was bright, here, in this, she [Lily] felt the need of darkness. [...] Mother and child then - objects of universal veneration" (Woolf, 2004[1927]: 64).

Through painting, Lily silently withdraws from the condescending paternal censorship that is represented through the character of Charles Tansley, who whispered in Lily's ear, "woman can't write, woman can't paint"<sup>18</sup> (Woolf, 2004[1927]: 60). Through painting Lily escapes into the reminiscence of the "fabled land" where her "brightest hopes" (Woolf, 2004[1927]: 10) once flourished, and beckon us into the

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<sup>18</sup> Non-coincidentally, Charles Tansley's critical voice against women closely mimics that of Freud's judgement of women, and it was to continually echo in Lily's mind throughout the novel. The interrupting self-doubt and insecurity in Lily's asserting her identity as a painter is a result of, what I would argue to be, an internalization of the critical paternal censor in the face of gender prejudices.

maternal universe where Lily's longing for Mrs Ramsay, the surrogate mother, and her searching for reunion with Mrs Ramsay in the aftermath of her death, shadows the story being told.

Lily's attempt to paint comes to symbolise her recognition and tracing of the roots of her emotions. This, I believe could be best described in Kleinian term of the psychological "phantasy" (1923) that is situated in internal object relations, powered by the subjective experience of the presence and absence of the maternal provision. You find expressions through Lily Briscoe's painting to recollect the pre-linguistic experience of mother-infant fusion. In a way, Lily's abstract art echoes your own language of symbolic layers (of sea, storm, rock... etc) in conjuring the emotive rhythms of the novel. By resorting to a language "not known to men" (Woolf, 2004[1927]: 241), you strive to keep Lily's subjective yet elusive experience from falling into the father-centred ideology Freudian theory enforced. This, perhaps, is your Kleinian challenge to the Freudian condescension to the mother-child bond, the essence of which lies outside the logical terms (Abel, 1989: 47).

As Lily ponders,

"For how could one express in words these emotions of the body? Express that emptiness there? ... It was one's body feeling, not one's mind. ... To want and not to have sent all up her body a hardness, a hollowness, a strain. And then to want and not to have - to want and want - how that wrung the heart, and wrung it again and again." (Woolf, 2004[1927]: 241)

What one is aware of, the "emotions of the body" (ibid) that cannot be conveyed through words, holds a central space in the Kleinian theory on the infantile experience. To Klein, at the beginning of life there is no differentiation between the bodily

experience and the psychic experience, as the psychic space is dominated by the somatic events of the body, such as the satisfaction and deprivation through the availability of the mother's breast, crucial to its survival. As you aptly put it, "it was one's body feeling, not one's mind", the very origin of our emotional life is founded on how we feel on the bodily level, whether one's bodily needs are satisfied or not. Further to this is that Klein (1946) believes that we are born with a readiness to develop object relations through differentiating good experience ("want and have") from the bad experience ("want and not to have") during the primary relationship with the mother. Through the psychical mechanism of splitting, we built up a mental constellation of part-object world populating itself with the good and the bad objects, symbolizing the gratifying breast and the frustrating breast (Klein, 1946: 99). The mother's breasts sustain the phantasy life of the infant; in the same way Mrs Ramsay grounds the novel's psychic space as separate from its overt configuration foregrounding the father.

In Lily there are intense longings for intimacy and a fantasy of merging with Mrs Ramsay, as she recollects the moments with her:

"Could love, as people called it, make her and Mrs Ramsay one? For it was not knowledge, but *unity* that she desired, not inscriptions on tablets, nothing that could be written in any language known to men, but intimacy itself, which is knowledge, she had thought leaning her head on Mrs Ramsay's knee. Nothing happened! Nothing! Nothing!, as she leant her head against Mrs Ramsay's knee" (Woolf, 2004[1927]: 63; italics added)

Lily's act of leaning her head on Mrs Ramsay's knee is an open display of her emotional dependence on Mrs Ramsay, thus rendering her an all-powerful mother. But Lily's need for love and intimacy from Mrs Ramsay could not be fulfilled due to her

emotional unavailability you so vividly portrayed. The passage also brings to life a real sense of Lily's intense ambivalence towards Mrs Ramsay. As soon as Lily realizes her craving for intimacy with Mrs Ramsay, her lying against her knee, is not perceived and responded to, her longing is soon replaced by an intense destructive cry of rage towards Mrs Ramsay - "Nothing happened! Nothing! Nothing!" Lily's internal cry induced in me, as a reader, powerful sorrow and rage. Like the baby who perceives the mother's inability to understand and respond to her needs, Mrs Ramsay's emotional unavailability has now *felt* to be the withdrawn breast, the depriving bad-object that threatens the infant's survival. When maternal deprivation threatens, the wilfully destructive impulses in the baby are triggered for the purpose of destroying the bad object. She is now the hungry infant attacking the bad-breast through oral sadism in her phantasy. I would argue that this maternal deprivation so powerfully experienced by Lily was to be compounded by the fact of Mrs Ramsay's death, at which point her maternal nurture becomes forever unavailable. Her death would have abolished any humblest wish left in Lily for Mrs Ramsay to love her, show her loving affection, and hold her in a most motherly way. It must have been a painful realization that none of these could ever be granted again, of the access to the fabled land externally lost

Hirsch (1989) observes that Freudian critics often see the loss of Mrs Ramsay as an opportunity for Lily to grow from an infantile wish for a symbiosis with the mother and gradually coming to terms with the separation from the mother through the work of mourning; in Lily's case, the essential rupture with Mrs Ramsay is occasioned by her death (pp. 111). Thinking back through the mother, therefore, is against the Freudian tradition and therefore omitted from the Freudian narrative. Klein, however, initiated

mother-centred thinking in her psychoanalysis (Doane & Hodges, 1992: 7). The family romance that was once too painful is revisited and recounted, through Lily's feminine voice, in your construction of alternative familial narratives refigured and engulfed by the maternal presence and absence, connections and separations. What is deemed as pathologically immature to Freud then finds itself a valid ground to be keenly explored and validated in Kleinian theory in which you find the space to reverberate what you declared, in *The Room of One's Own*, that "we think back through our mothers if we are woman" (Woolf, 1929).

Lily's continuous longing after Mrs Ramsay's death, her impossible desire to reunite with her intensifies and cannot cease; "Mrs Ramsay! Mrs Ramsay!" as she cried, feeling the old horror come back – *to want and want and not to have*. Could she inflict that still?" (p. 232, italics added). In Kleinian terms, the *old* horror Mrs Ramsay inflicts through her death, would symbolize the unnamed dread originating in the early infantile experience of maternal deprivation and abandonment that brings about the most annihilating sense of anxiety. Essentially Lily's relationship with Mrs Ramsay is an ambivalent one, with the ambivalence heightened after the death of Mrs Ramsay. Virginia, this perhaps parallels your own relational journey with your mother? What Klein would say is that Mrs Ramsay's death deprives Lily of the chance to reconcile love and hate, to reconcile the unresolved longing for Mrs Ramsay and an unresolved aggression (caused by the deprivation) towards the ambivalently loved and hated object. To experience the prolonged maternal deprivation of "want and want and not to have"

causes devastating and powerful anxieties in the infant, and the consequences are tragic indeed.

After Mrs Ramsay's death, Lily's longing for her resounds throughout the novel, "but nothing happened. The pain increased. [...] Heaven be praised, no one had heard her cry that ignominious cry, stop pain, stop! She had not obviously taken leave of her senses" (p. 208). Mrs Ramsay is now gone, leaving Lily in a state of sheer horror at her unfulfilled longings as they can now never gain true satisfaction. And yet, "no one had seen her step off her strip of board into the waters of *annihilation*" (ibid, italics added). The annihilation you spoke of here could be heard unmistakably in a Kleinian undertone, in my view, as a metaphorical recall of the strong desires tormented but unfulfilled by the mother. The annihilation that is compounded by the fact that it could not be articulated to others due to its unconscious nature, and would be incomprehensible to others should you try to put it into words. I see this passage as marking the transition of the state of mind.

Lily's aggression and hostility, derived from not getting what she desired from Mrs Ramsay, has noticeably subdued to give way to even more overpowering senses of *powerless vanity* and *grief*. It can be said that the loss of Mrs Ramsay, once it sets in the mind as an undeniable reality, alters the ego's relationship with the lost object of fluctuating love-hate ambivalence, from a dominance of hate to a prevalence of love. Loss brings about a realization of one's love for the lost object. As frequently observed in the child's reaction to the loss of an ambivalently loved object, the ego moderates its own relation to the lost object in order to psychologically justify the despair, remorse, and anxiety in the dissolution of the ambivalently loved object (Klein, 1935: 148). The

nature of Lily's anxiety has transformed. From perceiving the self-generated destructive impulses projected onto the bad object, as persecutory and dangerous, who has now been lost, to *owning*<sup>19</sup> her destructive impulses as coming from herself in a state of regret that it has done real harm to the loved object. In brief, the shift from paranoid anxiety to depressive anxiety comes in the wake of an awareness that the bad object and the good object are, in fact, the same person.

Providing an illustration of depressive anxiety, Klein describes, “[a] little child which believes, when its mother disappears, that it has eaten her up and destroyed her (whether from motives of love or of hate)” (pp. 150) In the same sense, if I could give voice to Lily's unconscious mind in a state of depressive anxiety, could her “ignominious cry” be actually crying a remorseful guilt that, “I have destroyed Mrs Ramsay by my sadistic, phantastic wishes of her destruction!”<sup>20</sup>. The psychological shift marked by this is a transition into melancholia, a progress of the mental state from the paranoid-schizoid position to the depressive position. This is marked by anxieties generated from within in relation to one's primary instincts of aggression, and *the feeling of guilt* as a result of the destruction of the loved object.

Through painting, Lily sinks to an unconscious depth, thus her figurative painting allows her to capture the most uncensored psychological phenomenon that she cannot consciously call to mind, a method mimicking the psychoanalytic method of free association. The origins of her emotions are repressed, as is evidenced in one scene

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<sup>19</sup> It is when the depressive position has been successfully achieved that the individual comes to take responsibility for their aggressive, sadistic impulses, and for the damage she has done to her objects, either external or internal one (Segal, 1952: 197)

<sup>20</sup> As Klein (1991[1944]) emphasized, the phantastic wishes and impulses are *felt to be omnipotent* in early minds.

where she could not answer sensibly to the question coming from the inspecting others about “the relations of masses, of lights and shadows” on her canvas because “she could not see it even herself” (Woolf, 2004[1927]: 65). It would not surprise Klein that Lily finds herself lost for words. Klein herself would say that what eludes language are the archaic mental contents, the complexities of which cannot be captured within the literary order (Likierman, 2001: 112).

Seeing the canvas as the space of the internal world, the relation of masses, of lights and of shadows would articulate the internal object relations repressed and unknown to the owner herself<sup>21</sup>. The contrast of the light and shadow could be the separate entities of the good and the bad objects internally created and differentiated by means of splitting. But how to bring together the good objects and the bad objects (Klein, 1935: 172)? As Lily ponders, “how to connect this mass on the right hand with that one the left”? Her awareness and anxiety about the danger that ensues in the process of connecting them, that “by doing that the unity of the whole might be broken” (Woolf, 2004[1927]: 65) speaks of a common and necessary anxiety that a Kleinian baby faces in the depressive position.

Re-phrasing Lily’s psychical paradox evoked by painting in Klein’s own words,

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<sup>21</sup> Abel’s argument is that Lily’s painting seeks to capture her struggle in the early negotiations of the ego-boundaries in the mother-baby dyad (1989: 69). I find this both an abstract account and potentially an underappreciation of Klein’s original view where the infant is only perceiving and relating to the mother as a part-object through her breasts. Further to this is the controversy between Freud and Klein where Freud believed the infancy is sheltered in primary narcissism, hence the differentiation between self and other is impossible, and did not agree with Klein that the infant could partly recognize the mother through her breasts (Likierman, 2001: 105).

[H]ow to put the bits together in the right way and at the right time; how to pick out the good bits and do away with the bad ones; how to bring the object to life when it has been put together; and there is the anxiety of being interfered with in this task by bad objects and by one's own hatred, etc. (Klein, 1935: 153)

Lily's concerns coincide with what Klein sees as the major challenge with which a depressive baby is confronted. The question of how to unite the split-off objects, the extremely bad and the extremely good, into a whole is essentially concerned with the issue of loss. The bad and the good are required to contrast one another, like shadow and light, which exist only in contrast to each other. The process of merging the good and the bad to a whole inevitably reduces the differentiation between them. The diminishing contrast between them conjures up in the infant a painful feeling of loss, from that of the absolute perfection of the loved object (Klein, 1935: 149). In this lies the psychological work of giving up an unrealistic perception of the ideal object to which one directs one's love, in order to gradually come to terms with the sense of the "real object" – a real object that represents the imperfections and the inevitable limitations of life (Likierman, 2001: 101). To acknowledge and accept the loss of the ideal object of unlimited gratification is what Klein sees as an essential step towards overcoming the depressive position.

Moreover, the loss of the ideal object is not the only loss a depressive infant has to bear. In Klein's view both the good and the bad objects are emotionally indispensable. The sharp division between them allows the infant to retain both the feeling of love and hate. The realization of the whole object therefore generates the psychical conflicts between love and hate, preservation and destruction, as it forces into the infant's awareness that the disappointing bad object is the same one as the good object that she

continues to need and rely upon. It is at this moment that she realizes she has lost not only a good object, but also a bad one; the bad object that is needed to validate the hostility and aggression so powerfully experienced in her phantasy. The original ambivalence felt towards the object therefore becomes difficult to maintain, threatened by this new gained realization, and the result is an emotional insecurity and the unresolved ambivalent tension.

A Kleinian formulation of the depressive position is one filled with painful fragility in the wake of a sense of guilt after several significant losses of part-objects felt to be caused by oneself. Instead of seeing separation from the mother as an essential task for psychological development, Klein believes instead in the importance of the consistency of the maternal provision. Mothering is necessary to aid the infant in overcoming the depressive position with its unique emotional difficulties, involving two central tasks: mourning and reparation (Klein, 1940, 1946). The losses need to be mourned for so that they can be fully acknowledged and accepted; and the good object that have been lost needs to be restored to enable a sense of emotional security that the goodness of the mother is still available. The mother, the external object, by repeatedly returning to the infant, reassures the infant that the wholeness of the mother is unharmed and that loss can be regained. The mother's continual provision of her presence and nurture to the baby reassures her that her rage and sadistic attacks are in fact tolerable, and that her wish for reparation should be granted.

With maternal reassurances of unfailing love, the external world will be perceived as less dangerous as the baby lessens her need to disown her rage and aggression through the primitive mechanism of projection. In Klein's view, the

importance of the external object lies in its neutralizing effect on the internally generated anxiety, either paranoid or depressive, so, powerfully experienced in the child (Mitchell, 1981: 379). This takes place through the process of the child's building up of the internalized goodness from the loved object that strengthens the child's ego capacity to adapt to the imperfect reality of life where frustrations and limitations are inevitable. The emotional security needed to be able to love and hate with greater ease is gained through successful reparation with the loved object, leading the infant to outgrow her depressive anxieties.

On the other hand, if, owing to the uncertainty of the good object, the split between the good and the bad object is too powerful for them to be brought together, to synthesize (Klein, 1946), the infant will not be able to *mediate* her hate with love, and the depressive position cannot be worked through (Klein, 1986[1956]: 217). This seems to be the case for Lily, as the on-going maternal deprivation that comes by way of the death of the mother. Mrs Ramsay was always preoccupied with something else, and was never fully present with her children. Lily's desperate and urgent needs for reparation echoes repetitively yet is unanswered throughout *To the Lighthouse*; lovingly or hatefully she was unable to elicit a response from Mrs Ramsay, not by lying against her knee like a hungry baby craving for the good breast, nor by crying out to her again and again in Mrs Ramsay's absence after death. No matter how intense her longing is for her, she could not revive Mrs Ramsay; the insufficiency of Mrs Ramsay's maternal provision disorients Lily in the labyrinth of the depressive state, only to re-evoke the trauma through her death. Mrs Ramsay lured her children into the push and pull between desire and fear for she was both "frightening" and "irresistible", but "always she [Mrs Ramsay]

got her own way at the end” (Woolf, 2004[1927]: 119), as Lily thought to herself, unconvinced of ever being loved.

It is apparent that Lily’s depressive anxiety is not merely a temporary struggle or artistic sentiment. She carries throughout the novel by thinking and by painting an inner catastrophe of rage and guilt bound up with the depressive position. It might appear that her depression is directly caused by Mrs Ramsay’s death, which is an actual and articulable event of loss. But Klein would disagree; she would argue that Lily’s depression existed long before Mrs Ramsay’s actual, physical death. She would say that Lily’s depression has an infantile origin from the earliest situations of loss, before language became available to her, before she could put her feeling of annihilation into words. Klein would suggest that Lily’s prolonged struggle with depression was a sign that she was overcome by the loss of the loved object and despair at their irreparability and that this was already experienced and established as her inner reality. Mrs Ramsay’s death tragically re-activated what has not been worked through earlier.

Like Freud, Klein sees loss also as a pre-condition to depression. However loss is more ubiquitous for Klein than for Freud. For her, loss encompasses several, inevitable losses such as temporary separation from the good breast, to the most significant event of weaning, where the good breast is felt as lost eternally. On the matter of depression, Klein makes a significant theoretical divergence from Freud by not only declining to see loss as merely a problem of the loss of a libidinal object and object-tie, but also by complicating the meanings of loss through elaborating the complex illustrations of “how loss follows from rage, and how rage threatens obliteration of the object field” (Butler, 1998: 180).

It was all Mrs Ramsay's doing. She was dead. Here was Lily, at forty-four, wasting her time, unable to do a thing ... it was all Mrs Ramsay's fault. She was dead. The step where she used to sit was empty. She was dead. (Woolf, 2004[1927]: 176-7)

A lighthouse, a symbol of hope, warmth and guidance, illuminates a path in the dark that brings the ship safely to port, closely resembles the importance of the mothering<sup>22</sup> that Klein describes in her theory of depression. Never dimming her light, the mother prevents the infant from drifting into the potential perils entailed in the dark abyss of the depressive state. But if Mrs Ramsay is the lighthouse, her light faded when she was irresponsive and diminished further when she was gone; she failed to be the lighthouse depended upon as the baby ventures into the fathomless ocean of melancholy. Without her, “[Lily] had lost herself and gone under” (Woolf, (2004[1927]: 173). Reading through *To The Lighthouse*, I witnessed a mother, who “with all her astonishing power” (Woolf, 2004[1927]: 203), repeatedly triumphed over the baby’s developmental needs even in her absence. From the Kleinian perspective, the depressive anxiety that could not be worked through without the sufficient assimilation of the external goodness in early life contributed to a later depressive tendency in adulthood. Perhaps Klein’s theory legitimises Lily at last voicing her inconsolable rage at Mrs Ramsay who had the chance, but missed it, of saving her from being lost to depression. Would you agree?

Yours,

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<sup>22</sup> It is important to note that the motherhood discussed in the Kleinian theory should not be seen as an actual “social experience” between the mother and the baby, rather it is how she is perceived, and reacted to in the baby’s phantasy life (Doane & Hodges, 1992: 7).

Nini

### **Letter Three – ‘Thinking Back Through My Mother’**

Dear Virginia,

The previous letter that I wrote you about depression from a Kleinian perspective shines a light on your early experience with your mother, the primary object with whom the contradictory impulses of love and hate, complicated your inner experience of her, as portrayed in Lily’s relationship to Mrs Ramsay in *To the Lighthouse*. However in the process of writing the letter, I found myself recollecting my own experience with my mother. Largely identifying myself with Lily Briscoe, my reading of *To The Lighthouse* foregrounded my emotional experience with the mother. Some feelings were stirred up, not in smooth waves, but violent tides, where at the centre there was painful sadness and anger that I had not realized I was carrying throughout all these years.

It brought back some of the earliest memories I had of us, mother and I, mother lying in her sick bed, which she did then most of the time, for a very long time, and how I was often by her side, feeling that intense need in me to revive her. Sometime I seemed to manage to do so by telling her how well I had done in school today, all the cheerful things that she liked to hear. She would brighten up momentarily in hearing that her daughter was a successful and well-liked child. However, her belief in my success was achieved by my hiding away the truth of some inevitable challenges in school. Another big part of my experience was of impossible dilemmas I was confronted with as a child

on overhearing my father speaking softly and sweetly in a lover's way, over the phone, whilst my mother was in her room, sick and listless. I knew at the time that this was what adults called 'affairs', but I also knew from experience that telling my mother about it, most of the time only made her worse. I had seen her working herself up to confront my father, yelling at him how could he, until in no time she collapsed into total despair for the next few days or weeks. And I would feel like I had made things worse, that if I had kept it to myself then she would have been all right. But Klein made me realize that underneath my worries and concerns of my natural daughterly love for my mother, there was anger, and one that must be intensely felt, towards her. Although I would argue, that my anger was, more precisely, towards her long-term illness, which was to be later understood as depression. Her being restricted to bed, absorbed by her losses and grief, and therefore absent in other areas of my life would represent her as the withdrawn breast unable to satisfy the needs of the baby. Indeed whilst she was occupied with her illness, my needs were hardly acknowledged and scarcely met. Other children had their mothers to watch them play, watch them doing their homework, to take care of them, to take them to and pick them up from school (whilst for me this was always done by the family's foreign maid, an experience I remember resenting). But why was my mother sick all the time?

And all those family holidays being cancelled, because she fell ill again. One instance rushes back to my memory now: we were going overseas for a holiday for the first time. Everything was planned, and I had been excited about it the whole summer. My worst fear was that the trip would be cancelled. It was – because my mother at the very last minute received a doctor's prescription to have regular injections at the hospital,

once a day for twelve days. With much disappointment and without much thinking, the red mist descended and I said to her, “why don't you just have twelve injections all together in one day then we can still go?” Then, of course, by saying that I made her very upset. She did not talk to me, a “selfish” child, for the next few days, leaving me feeling punished for wanting something for myself, guilty of hurting her feelings. But still the trip was cancelled and I knew not to complain about it again.

As I illustrated in my last letter, the implication of the Kleinian theory of depression is the primacy of the mother-child dyad, first of all on a biological basis, then transferred onto the psychic ground: how the mother is perceived and experienced by the child is what subsequently fuels the content of her internal phantasy world. Klein's focus is on the child's own phantastic wishes driven by her instinctual desires for, and aggressions towards, the maternal object.

Virginia, having read through my account in relation to my mother, did you notice a few similarities between our early experiences with the mothers? The withdrawn, preoccupied, and unfulfilling mother being the same one for whom one desires and longs. Reading it through the lens of Kleinian theory, could one not hear that it is the ego being entrapped with “the sorrow and concern about the feared loss of the ‘good’ objects” (Klein, 1940: 345), which so distinctively underlies the depressive position. The years of mother's passivity in caring for me, her affective withdrawal when her concerns for me were replaced by new sources in life's struggles would symbolize the unsatisfying feed. Her goodness, namely her milk, love, warmth, is felt to be lost by the baby as the result of her being too greedy and too aggressive against the

mother's breasts (Klein, 1940: 148). Her breasts are almighty, serving both as sources of greatest horrors, and deepest comfort; for they are what the baby depends on.

But her breasts are punitive too for they teach the baby not to want and want and want lest she should not have her wanting gratified. As I pondered what Klein said, I was reminded of when my mother said to me, 'you are being selfish' in response to my protest against not getting what I wished for. But her punitive silence and withdrawal from me, in my mind, "always fit the crime" (Klein, 1928: 203); the crime of asking too much and being ungrateful as a greedy baby. I could never find the emotional security to openly express my anger to her. Often that unresolved rage was replaced by powerful guilt. Klein would explain my guilt as coming from my fear of destroying the good breast completely. After all, mother is good when she is not bad (the good object being the same object as the bad object; whole object relating).

Klein's theory of depression changed my original thinking that my depression took place, as the timing suggests, as a consequence to my parents' divorce, and led me to think that perhaps it had been there all along, latent, waiting for a trigger, and that the divorce only brought it to the surface and I finally became aware of it. Klein cast a new light on the origin of my depression, which she believes has to be located in the earliest moments with my mother. However, it was not without resistance that I brought myself to believe that my depression was primarily my mother's doing, and my father's only secondarily<sup>23</sup>. When I brought to Klein that this seemed a bit unfair towards my mother,

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<sup>23</sup> Due to Klein's emphasis on depressive anxiety, characterized by love and hate and their consequences, over Freud's castration anxiety, characterized by lack and desire and their consequences, her theory implies the importance of the primary object, i.e. mother, over father, the secondary object (Doane & Hodges, 1992: 11).

who lived a huge part of her life as a victim too and who, at the very least, tried to care for me, Klein in response suggested that the need in me to protect my mother from being seen as bad, by myself and by others, came from a place of depressive anxiety where the unconscious effort aims towards protecting the good object as it is, from losing its goodness, from being under attack by one's internally derived destructive impulses. Could this, I wonder, share some similarities with your own experience where you never openly expressed your direct anger towards your mother, only grief and longing for her, in your memoir and autobiography, but did express through the voice of Lily Briscoe?

And yet as much as Klein's theory illuminated the importance of my experience of the mother, which makes some sense to me, I could not stop pondering, what my father's share in this is? If there was anyone to blame, surely most of all it must be father, it must be he who caused the family so much torment! But as I pursued further clarification, Klein became ambiguous and was unable to give me coherent accounts as to how the real external others interfere with the child's internal object world, whether the mother she meant was a real mother, or the internal object brought to life by one's instinctual wanting and the aggression that comes from a lack of needs fulfilment. On the matter of mothering, the ambiguity was compounded by the contradictions in her never fully resolved theorization of the origin and the nature of the object. She was, on one hand, emphasizing the real presence of the mother during the child's ego development, such as in one of her earliest papers *Infantile Anxiety-Situations Reflected in a Work of Art and in the Creative Impulses*, where she wrote: "*The presence of the real, loving mother* diminished the dread of the terrifying mother, whose image is introjected into the child's mind" (Klein, 1929: 442, italics added); however, on the

other hand, she openly and consistently refused Winnicottian notions of the environmental mother and the real mother in the baby's external reality<sup>24</sup> (Doane & Hodges, 1992: 16-17). Does 'the Kleinian mother' live only in a psychological reality, and not in social reality? Addressing my question, Klein went on to argue that internal objects are created as a result of the phantasied relationships, instead of the experience with the real people (Klein, 1933: 268). She believed the phantasied relationships with the internal objects are established at the beginning of life and they continue to shadow how we perceive and experience the external others throughout our lifetime (Mitchell, 1981: 383). What Klein seemed to be suggesting is that the way we interact with others is predetermined by our internal relationships founded in phantasy, rather than being shaped by the on-going, actual experience with the external others. Her views seem to create discrepancies between psychological and external worlds as though they could exist independently of each other.

It would then seem that,

Although in her case illustrations Klein occasionally mentions some more personal or character-logical feature of the parents (a mother's depression, lack of warmth, dislike for the child), these features never appear in Klein's formulations concerning internal object relations, where the cast of characters is always composed of universal images (Mitchell, 1981: 385).

In her theory, Klein often presents the picture of the family made up of universal parental imago without fully taking into account the contingent history of the child

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<sup>24</sup> Klein's ambiguity of what she meant by 'the mother' and 'the mothering' in her theory of ego development, her resistance to endow it with maternal responsibility could derive from her personal history where she found resistance to taking up the role of mother and being defined by it, and her troubled relationships with her own children (Doane & Hodges, 1992: 18).

located in the individual family. Whilst Klein, throughout her theory, tends to see the bad object as internally derived (projectively) from the child's own instinctual drives, whereas the good object as absorbed from the external others (introjectively) (Mitchell, 1981: 379), she minimized the pathogenic potential of the external bad object on the child's construction of self or sense of self. The unfortunate negation of real experience with real others proved unhelpful in my understanding of the place of the real object in the psychical shaping of internal reality. As Mitchell aptly described, and to my full agreement, Kleinian theory is one where the root of evil is placed "in the heart of man himself, in the instincts" (ibid: 385).

Things are yet unresolved in my heart, Virginia. I feel that I must search on and I beg for your patience for I have a feeling that things are getting clearer.

Yours,

Nini

### **The Fourth Letter**

Right after what Woolf herself described in her memoir as “the seven unhappy years” (Woolf, 2002[1895]: 140), between 1897 to 1904, brought about by the loss of Stella, was another long and incessant fight with an increasingly disturbing depression, with only temporary recoveries between despairing episodes. Coming to adulthood, the period of ten years between 1904 to 1913 proved to be another difficult and emotionally demanding stage of life for Virginia Woolf, with its beginning marked by the death of her father, Sir Leslie Stephen (Lee, 1989: 178). His death brought immense psychological difficulties for Virginia Woolf, who was twenty-two, triggering a severe breakdown into depression and her first attempt at suicide. The suicide attempt, by leaping from a window that was not high enough to cause her serious injury, was unsuccessful (Bell, 1972: 89).

Her father’s death, in effect, also transformed Virginia Woolf’s depression into what is categorized by today’s medical model as bipolar depression, as noted by Quentin Bell, “in the breakdown that followed [her father’s death], she entered into a period of nightmare in which the symptoms of the preceding months attained frantic intensity. Her mistrust of Vanessa, her grief for her father became maniacal, her nurses ... became fiends ” (ibid: 89-90) The manic side of her depression was revealed, coming to the surface.

In the context of her father’s death, several, mostly unfavourable, changes took place against which she was powerless and found hard to take. For one, her brother,

Thoby, died unexpectedly at a young age after the Stephen children came back from their holiday to Greece. Her sister, Vanessa, accepted a marriage proposal from Clive Bell, and the wedding took place the following year in 1907 when Vanessa moved out from the household, leaving in Virginia a sense of having been left behind by her (Briggs, 2005). At the same time, Virginia was imposed upon to take neuropsychiatric treatments whilst the family acted according to the doctor's prescription for her to be sent away from her closest others to be under nursing supervision (Lee, 1989: 184). In isolation, she was often enraged and distressed by those forceful treatments and arrangements, and by voicing her protests, often made those closely related to her anxious and wary of engaging with her (ibid). Her on-going torment during this period climaxed with another unsuccessful suicide attempt in 1913 (Lee, 1989: 178), the same year her first novel, *The Voyage Out*, which ends with the death of the heroine, was accepted for publications, and a year after she had got married to Leonard Woolf.

Leonard Woolf became her closest observer after their marriage, and made the documenting of her lifelong torments of mental illness one of his life's occupations. However, his accounts of her states of mind were often full of clinical narratives and mentioned nothing about the personally meaningful stories behind her suffering; he often assumed an observing position and an unemotional tone and dealt pragmatically with her outward behaviours, probable causes, and prescribed treatments, whilst making no effort in trying to understand what it must be like to be her (Lee, 1989: 180). However, Leonard Woolf was not alone in taking a self-protecting and distancing stance in relation to Virginia Woolf's depression; other close relatives of Virginia Woolf had at that time, such as her sister, often talked about her as a 'case' to be managed (ibid: 181).

## **Letter Four – ‘From Instinct to Self’**

Dear Virginia,

I have begun to think that this lack of understanding of it by others could have compounded the hardship of depression. You recalled the stressful time being sent away from home for medical treatments after your father’s passing. I could not conceive how on earth they would put you through those ‘treatments’. As though depression was not horrid enough, they had to double the torment! “[A]ll the eating and drinking and being shut in the dark (Woolf, 1975[1910]: 431-2). In isolation, what you craved was “intellectual conversations” (ibid), having someone to talk with and listen to.

Since I last wrote to you, I have at last met this person, Ronald Fairbairn, in Edinburgh where he lives and works. We have had a conversation regarding my depression; it was intellectual, and then became deeply emotional. This event felt significant as it enabled me to understand depression differently from the theories Freud and Klein proposed. Fairbairn’s work is “extraordinarily humanistic” (Grotstein, 2014: xxi) in outlook. It is unfortunate that Fairbairn is not that well known to psychoanalytic circles based in London, and in a way his theory is being pushed to the side for it proposes a radical revision to Freud’s theoretical claims. I would not be surprised if you have not previously heard of him, but I do believe you would find Fairbairn’s work more satisfactory than Freud and, hopefully, as valuable to you as to me in helping me re-

think my depression. It certainly is bizarre that sometimes what people have set out to find and search for afar is much closer to them than they think!

I told Fairbairn about my journey so far in search of psychoanalytical explanations for depression, and my discussions with Freud and Klein. He thought it was to be expected that I could not settle fully on either Freudian or Kleinian theory. In his view, the instinct theory that was made orthodox “has outworn its usefulness” (Fairbairn, 1944: 72). By the time we reached the end of our discussion, I became convinced Fairbairn made a valid point. It did not take me long to realize that Fairbairn’s work is unique and ground breaking. His work contributes towards “a theory of development based essentially upon object relations” (Fairbairn, 1941: 31). He insisted consistently that the motivation and the central needs of the developing child are that of “establishing desired relationships with his objects” (Fairbairn, 1946: 142). He steadily challenged the drive theory that emphasizes the instinctual gratification driven by the zonal desires (Scharff, 2005: 4). Following this, Fairbairn views psychopathology as developing from the disturbances and interferences in the building of the relationships with significant others, rather than from the conflicts over pleasure-seeking desires (Greenberg & Mitchell, 1983: 156) Fairbairn’s assertion is a fundamental challenge to Freudian theory’s centralizing of the instincts and the pleasure principle. I should wish to say more about how he differs from Freud on the theory of depression, and to an irreconcilable extent, from Klein, whose theory he largely assimilated whilst developing his own.

After consulting with Fairbairn, I have come to accept his view on how we, you and I both, could collapse into depression after we were finally freed from our father,

you through his death, I through a personal decision. The father is an object that we remembered resenting in those growing up years yet feeling so powerless to confront and make him stop. All those domestic tyrannies, merciless demands, and melodramatic display of emotions were abuses that so forcefully burdened and consumed our mothers, until they had both worn out and fallen, yours into an untimely death, mine a chronic mental debilitation. I understand all too well when you said the presence of your father was a “recurrent horror” (Woolf, 2002[1939]: 147), how your body tightened up in his presence, and that “unbounded contempt” (ibid) you had for him. Fathers were our first demonstration of human brutality (ibid: 149).

In his reign, we, as daughters, had been deeply conflicted between a wish to yield, to submit to him by virtue of daughterhood, knowing what pleased and how to ease things up, and a wish to “fight, to track down, stamp out – tyranny, despotism ... making people do what they did not want to do, cutting off their right to speak”<sup>25</sup> (Woolf, 2004[1927]: 212). When he lived, we were left little room to embody selfhood as daughters. But even at the height of rage, we could only seek rebellion in our own minds - “[to] take a knife and strike him to the heart” (ibid: 211). How we both imagined ending the brutality with brutality. Then when it finally came to his death, though mine a symbolic death, the fathers were finally gone from our lives for good, I was 21 and you 22, a transitional phase into adulthood. The tremendous rush of pleasure and relief dawned on us, which we knew was the taste of freedom. But pleasure and relief were

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<sup>25</sup> Woolf vividly described the child’s hatred of their father, Mr Ramsay in the form of James Ramsay’s inner voice. James’ recognizable longing for freedom from his father, as Bond (2000) suggests, portrayed not only Virginia Woolf’s brother, Adrian Stephen, who later became a psychoanalyst, and also herself (pp. 51).

short-lived. As soon as the exaltation wore away, we spiralled down into the dark abyss of depression, struggling to resurface; freedom did not break us free, as we went from being imprisoned in the father's reign, to being imprisoned in our own minds, and we could not understand why.

I told Fairbairn how Freud has attempted to solve for me this seemingly illogical link between the loss of the bad object and depression, using Freud's theory of the unconscious loss, of the forsaken object created by virtue of sustaining the aggressive instinct that lost its rightful target and is in need of a new one for its fulfilment. Propelled by the displaced hate, the knife that was supposed to strike into the father, was struck firmly instead into myself. I told Fairbairn how Freud led me to see that losing my father had been an unconscious loss of what had sponsored my purpose of living, to hate passionately and to overthrow the father the one day. Upon hearing this, Fairbairn disagreed.

He said, "[they're] always talking about [your] wanting this and that desire satisfied; but *what [you] want is a father*" (Fairbairn, 1946: 137; italics added).

He then went on to elaborate that the real problem of depression is not simply a problem of displaced instincts of hate and aggression that weigh the person down, but of the consequences of the *bad object relations* that the person is forced to manage psychically. He troubled the Freudian thinking that a human infant is born impulsively seeking tension-reduction (i.e. to actualize catharsis for sexual or aggressive instincts), and the objects are only needed in their utility to fulfil the infant's libidinal needs, with no regards to relationships with the objects. Whilst it is Freud's view that relationships are not what are primarily sought for, Fairbairn contends that it is the other way round.

Fairbairn did not deny that we have desires that need fulfilling by others, but they arise always in the context of what we need from relationships; desires come from a primary need to maintain in relational contact with the significant others (Greenberg & Mitchell, 1983: 156). From what he said, it sounded to me like he was actually saying that our desires are inseparable from our desired objects. They are always bound to a particular someone for whom we care and with whom we crave intimacy. By having our desires responded to by that person we come to affirm our sense of importance to that person, and to feel psychologically secure/safe with the person, to feel loved. The relationship becomes strengthened. What Freud and Klein took as the end goal then would be actually what Fairbairn saw as the means through which we meet our relational needs with our objects. Fairbairn agreed with this by concluding that, “it is not the libidinal attitude which determines the object relationship, but the *object relationship which determines the libidinal attitude*” (Fairbairn, 1941: 34, italics added). Fairbairn, in disagreement with Freud on his conceptualization of “id”, where wanting is directionless and structure-less, believes that any wanting and desires derive from the basic need for self-expression in relationship (Rubens, 1994: 163). Needs are, therefore, essentially object-related (Greenberg & Mitchell, 1983: 167).

But, could I really want a father that I had been so eager to rid of? Had I not been hating him all my life? After all, father to me is no more than a synonym to anticipated pangs of torture. Fairbairn said with conviction that my hatred of him, and aggression towards him could not have come from nowhere. He did not believe that aggression is an innate human instinct, as Freud and Klein did. Underneath hatred and aggression, there must have been a traumatically frustrated child who again and again experienced

her relationships with her significant others to be unsatisfactory and her love unreciprocated (Kernberg, 2002: 12). In other words, aggression develops secondarily as a result of the frustration by the others of the child's fundamental relational needs. From here we can also come to see that the more deprivation from which the child is suffering, the higher the need to repress her neediness and frustration, and higher the aggression generated in her. If Klein sees the root of evil as lying "in the heart of man himself, in the instincts" (Mitchell, 1981: 385), then Fairbairn, who believes that a child is born in the state of wholeness and innocence (Grotstein, 1994: 113), certainly would argue the real malign nature of humanity being located in the unsatisfactory relationships they have with others. So it would be fair to say that, if Freud championed the father, Klein the mother, Fairbairn championed the child (Grotstein & Ramsay, 1994: 10).

Love.

Could such feeling really ever exist in me for my father? I recounted to Fairbairn those insufferable school years when the children in the class were asked to make a card for their fathers to celebrate Father's Day, once a year, and I would dread it, not knowing what to say to him, finding it difficult to write down 'love'. As this memory came back I could still feel that old sensation making its presence known to my body, a cold pinch at my heart, tighter and tighter; a suffocating feeling in my chest. I got the words out and told Fairbairn, "I saw my card in the bin once". Why I never asked, and once a year I still made him a card. Love, if there had been any for him, it was unrequited. (At least mother always kept my cards!) Upon hearing this, Fairbairn suggested to me that, perhaps, on a deeper level my aggression towards my father had been an unconscious defense all along, to repress what felt to be even more painful, the

unrequited longings for his fatherly love, for closeness with him, and to repress the part of myself that felt so needy and dependent yet knowing my love could never be, and had not been, accepted and responded to the way I wished (Scharff, 2005: 10). After all, feeling contempt for him is much easier than feeling my love rejected by him.

As opposed to Klein's view where our psychological life starts in phantasy, Fairbairn believes that the human infant is reality-oriented right from the very beginning.

He criticized Klein's theory on the ground that

Melanie Klein has never satisfactorily explained how phantasies of incorporating objects orally can give rise to the establishment of internal objects as endopsychic structures - and, unless they are such structures, they cannot be properly spoken of as internal objects at all, since otherwise they will remain mere figments of phantasy (Fairbairn, 1949a: 154).

For Fairbairn, we are born straight into relationships from birth and the content of the internal objects are completely based on the real experience with the real external objects, albeit often fragmented in reconfiguration (Mitchell, 1981: 285; Greenberg & Mitchell, 1983: 157). Furthermore our psychological experience with our primary objects, commonly mother, can be divided into either "satisfactory" or "unsatisfactory" emotional terrains. The satisfactory experience comes from the sense of feeling loved, cared about and needs nurtured, contributing to the creation of the "ideal object"<sup>26</sup>. An

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<sup>26</sup> As Skolnick (2014) argues, albeit confusingly termed, Fairbairn's usage of the "ideal object" bears no resemblance to the term "idealized object" that often carries a pathological meaning in psychoanalytic thinking. Fairbairn's ideal object however is believed to be, by meaning, closer to Winnicott's "good-enough object" exempt from repression. (pp. 251).

ideal object is treated as an accepted object and thereafter assimilated<sup>27</sup> by the child into the Central Ego - the primary, dynamic agency of the “I” that instigates and constructs the sub-systems within the psyche based on its own subjective experience with the important others (Hoeft, 2009: 75). If the positive interactions are abundantly received in the child’s relationships with her caregivers, the positive relational memories of love, trust, empathy etc. associated with the ideal objects can develop into a constant source from which the Central Ego retrieves for self-soothing and self-reassurance. The progressive outcome is a powerful and stable central ego as is developmentally appropriate (Celani: 2007 124).

On the other hand, the unsatisfactory object-relationships are a direct source of splitting and repression because they are “too disruptive and threatening to the on-going relationship with the object to remain in awareness” (Celani, 2007: 123). Moreover, the unsatisfactory object can be split into “exciting” and “rejecting” part-objects (the essential part of the object that is recognized as a whole on its own), which are fundamentally “bad” objects in Fairbairn’s view. Exciting objects and rejecting objects each represent the *intolerable* elements of the over-exciting and over-rejecting aspects of the original object. The exciting object is the aspect of the object that is felt as teasing, promising, and alluring, however it over-excites the child without being able to fulfil the needs it powerfully aroused. The rejecting object, on the other hand, is the aspect of the

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<sup>27</sup> On the debates as to whether Fairbairnian good object is internalized or not, I adopt Rubens (1994) argument that good objects can be internalized but are never repressed nor structured into endopsychic structures as are the unsatisfactory bad objects.

object that relates to the child in a depriving, abusive, or neglectful manner (Celani, 2007: 123). Both objects are intolerably frustrating to the child so they are repressed<sup>28</sup>.

I particularly appreciate Fairbairn's pioneering contribution in introducing the concept of ego-splitting into psychoanalytic thinking (Padel, 1991: 593). This distinguished him from Klein on the matter of repression as Fairbairn believes that repression of the bad objects bring about repression of the aspects of the self that correspond to, and at the core of its pathological nature, allies with the internalized exciting and rejecting bad objects. Fairbairn terms them the "libidinal ego" and "anti-libidinal ego", the subsidiary selves split off from the central ego due to its libidinal attachment to the internalized bad objects. The libidinal ego is part of the self that identifies with and attaches to the exciting object, imprisoned therefore in the perpetually desperate pursuit of the exciting object for love, and the reciprocation it was once promised. The libidinal ego craves in dependency a painful longing for the exciting object, as Gomez (1997) describes, like someone waiting endlessly by the phone for the lover who had promised to call, but who they know from experience will not (pp. 62). On the other hand, the anti-libidinal ego is the part of the self that identifies with and is attached to the rejecting object, which represents the original aggressor, and becomes the repository of all the hatred and destructiveness accumulated and stored up as a result of the frustration of libidinal longing (Greenberg & Mitchell, 1983: 166). The anti-libidinal ego, due to identification with the depriving and withdrawing aspects of the rejecting object, berates the intensely needy libidinal ego as pathetic and a wimp, and rejects the

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<sup>28</sup> Repression, in Fairbairn's (1944) view, "originates primarily as a defense against "bad" internalized objects (and not against impulses ...)" (pp. 93)

seductive exciting object as worthless and undesirable. At the same time the anti-libidinal ego denies brazenly that she has any needs or desires for others, positioning herself as “the enemy to hope, particularly of hope for anything meaningful with other people” (ibid). Furthermore, the powerful hate and aggression within the bond of the rejecting object and anti-libidinal ego set off a further dynamite of repression, attacking the bond of the exciting object and libidinal ego. It is in essence a repression (commanded by the subsidiary configurations) on top of another repression (by the central ego) - a phenomenon Fairbairn (1944) termed as “secondary repression” (pp. 108).

Considering Fairbairn’s concept of “secondary repression”, it would then be overly reductionist to see depression as merely a case of anger directed at oneself, at the forsaken object inside, when in fact it is a case of aggression being internalized along with the bad object relationships into one’s psychic structure, *utilized necessarily* as a fuel towards further repressing the otherwise intolerable resurfacing of the bad objects and their corresponding subsidiary selves. The two repressed configurations, that of rejecting object paired up with anti-libidinal ego, and exciting object paired up with libidinal ego, come to constitute what Fairbairn (1944) termed “endopsychic structures”. Endopsychic structures begin as a psychic defence against the unsatisfactory experience with the mother that is inevitable due to her normal limitations. However it becomes ultimately a pathological process if it crystalizes into the personality and eventuates in a constant splitting of the ego in relation to its objects, and repression in keeping with the internally established endopsychic structures. As a result, the terror from the early object relationships continues to haunt and re-enact itself in every new relationship we form

and become involved in later in life, leading to what seems an illogical “repetition compulsion” (Fairbairn, 1944: 78), a neurotic attempt to re-create, in later life, earlier painful experiences..

Although Fairbairn used ‘mother’ as a starting point, he did not negate the importance of the father. A child, seeking object-relatedness with the mother, seeks it with the father too (Greenberg & Mitchell, 1983: 168). Fairbairn complicates the meaning of my relationship with my father, and, now seeing my hate only as a derivative from the continuous frustration, I began to recollect how I came to deny any needing of him as my father, how he could not make me feel like my love was worthy and my value outweighed his money, when my wanting this and that was only a child’s way of seeking from a rejecting father an alternative reassurance, “how much do you really love me”, “how much am I worth to you”.

Could you think of anything more painful than feeling one’s love deserted by the object of love? I agree with Fairbairn that it is one of “intense humiliation” (Fairbairn, 1944: 113) in the face of feeling unlovable with her loved object. Nevertheless, a humiliating connection is still better than no connection at all (Ogden, 2010: 115). But I pitied her, the libidinal ego with her love so overriding and unquenchable, till now still waiting in vain for her father to fulfil his promise to love her. Yet in me there was a presence ruled by fear, an anti-libidinal ego that condemned and controlled with rage the desperately needy libidinal ego, believing that devil dwells in wanting and needing and therefore she must want no one, and need no one. I pitied the anti-libidinal ego too, for I now see that she could only survive under the condition of full obedience to her rejecting sovereign reinstated in her internal world through internalization, to dominate

continually<sup>29</sup>. A child, after all, can never really reject her object, despite it being rejecting or neglecting, for what she fears the most is abandonment by the object, whom she knows is the same object she needs so helplessly and loves so unconditionally (Fairbairn, 1949b: 266). Losing the object, whether good or bad, is indeed unthinkable for the child who as a dependent has no choice but to ground herself in the relationships available to her.

Virginia, the way you related to your father, the conflicting emotions you portrayed having towards him, provided me with the hope that you would find some sense in Fairbairn's theory as well. What you called your father, "the old wretch, the dearest of creatures" (cited in Bond, 2000: 158) implied to me so striking a split between the conflicting emotions of reproach and love; emotions that were probably sparked by the contradictory qualities you experienced in your father's character. He lured a daughterly admiration and love, naturedly as a father, and perhaps as an acclaimed writer, a "genius" and of good reputation, an ideal you sought to become since you were young (Lee, 1997: 71-2). Would you recall preferring the father to mother, imitating him and his mannerism when you were a child? (Bell, 1956: 33-4; Lee, 1997: 71-2)

But what he so powerfully excited in you, he could not reciprocate; he was constantly preoccupied with his own work, demanding at all times narcissistic reassurances of his "genius" from his closest family, and after your mother's death,

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<sup>29</sup> For Fairbairn, internalization is one of the most primitive psychological defence. The child seeks to retain a sense of control and essential attachment to her objects; by containing them inside her she makes sure she does not lose touch with them, even when the real objects are unavailable (Fairbairn, 1943: 67).

indulging in a selfish grief that culminated in a multi-deprivation for the rest of you. Your mourning of the mother was suspended as you were restlessly called upon to satisfy his exasperating neediness (ibid: 73-4). As I mentioned earlier, Fairbairn's model of the internal world is one engendered by interpersonal conflicts. It seems to me then, that the overly exciting and the rejecting elements of your father would justifiably induce unconscious motives for repression and internalization. By so doing you could manage the on-going frustrating experience with him from which you had no escape, while retaining a sense of control and safety by burying what would feel unbearable underneath your conscious awareness and transferring those appalling conflicts, which you could not possibly resolve with your father, into the internal objects of your possession.

Here, following Fairbairn's thinking, we come to see a case (in both of us) of the *depressive impasse* (Matos, 2002: 63).

In the era of the catastrophe of affective deprivation, the self persists to live

in a state of nostalgia for the object of love – a unique, indispensable, irreplaceable object, but one that is, at the same time, *impossible*, ... It is also impossible because it is damaging – unlovable, captivating (of non-sacrificial love), guilty, and devaluating, narcissistic" (ibid: 66, italics added)

This *depressive impasse* depicts a dilemma resulting from the contradiction of the loved object that is simultaneously thought of as an ideal, but experienced as a malevolent presence. The dilemma which emerges as a consequence of the child's resistance to admitting that her deepest chords of love from her loved objects are in fact impossible, and to acknowledge the loved object as bad. This resistance comes from the

psychical maneuverer Fairbairn (1943) termed “moral defence”, which metaphorically resembles an act of trading with the devil, by “take[ing] upon the burden of badness” from the loved object, therefore preserving any residues of the goodness that seemed to reside in the loved object. The child needs attachment to her objects either good or bad as she needs to preserve her external security, even in the case of the predominance of painful and abusive contacts with her objects, albeit at the great expense of the integrity of the ego, of the self.

Virginia, when I read your *Between the Acts*, in one of the scenes you depicted I almost sensed a complex portrayal of what Fairbairn theorised as “moral defence” – “Each is part of the whole. ... We act different parts; but are the same. ... Love and hate – how they tore her asunder! ... *let us retain whatever made that harmony*” (Woolf, 1941a: 215, 196; italics added). Through a Fairbairnian lens, I heard almost the voice of the Central Ego, coercing the subsidiary selves that have split off from her, to keep intact what supports that much needed sense of surface harmony with her loved objects, through which the goodness of them could feel within reach, and hope, despite being illusory, obtained time and again.

For Fairbairn, all the potential for the psychopathological developments in later life befalls as the result of the bad object relationships rooted in the endopsychic structure. What I found particularly helpful in Fairbairn’s (1946) model of endopsychic structure was that he believed the internal object relationships should be considered in terms of a complex *dynamic* system; it is dynamic due to its being in continual

interaction with the person's external, relational situations<sup>30</sup> (pp. 148). Fairbairn criticized Freud's tripartite structure in that "they are not all inherently dynamic structures" (ibid). Depression, decoded in Fairbairn's dynamic endopsychic structure, would yield a much more complex, multi-dimensional clinical presentation beyond the Kleinian understanding of depression stipulated in terms of "position". The subsidiary selves always exist in dynamic relationship to their internalized objects. The exact form of depression that comes ashore is then determined by the interplay between the subsidiary selves and internalized objects under any given external circumstance<sup>31</sup>. The overpowering subsidiary selves or internalized objects achieve the momentum to "[sweep] away the central ego and become the dominant ego of the personality" (Celani, 2007: 124).

Perhaps, Virginia, the case of our psychological collapse into depression, precipitated by the loss of the fathers, could be seen as lending itself to that interpretation? When the fathers were there, the rejecting and exciting objects would have been more or less compensated by some redeeming goodness in the real person (Fairbairn, 1943: 71), realistic or illusory through the triumph of moral defense. This would render less power to the "sinister influence" (ibid) of the repressed bad objects on their corresponding subsidiary selves. But then the sudden loss of the father would bring about a reverse of the dynamic, mainly due to the subsidiary selves that have now

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<sup>30</sup> However it is to great disadvantage that Fairbairn did not generate further theory on the dynamic interactions between the subsidiary selves and internalized bad objects, nor did he expand upon how the endopsychic structures play out in dynamic interaction with social contexts.

<sup>31</sup> Here I agree with Celani's (2007: 124) view that the subsidiary selves do not always remain repressed, which contradicted Fairbairn's original view that they do.

become “panicky about the possibility of loss” (Celani, 2007: 124). Triggered by separation anxiety, the subsidiary selves fall into an urgent state of object seeking as their accompanying dependence needs and desires intensify. In desperation to revive the bad objects, the libidinal ego at once declares her undying love, and the anti-libidinal ego declares her loyalty to their commanding bad objects. The result is not only the attenuation of the central ego, but also an over empowerment of the endopsychic structures against the Central Ego.

From Fairbairn’s perspective, our depression, following the loss of fathers evidenced a most trenchant difficulty in parting with the bad objects because of the “loyalty to bad objects” (Grotstein, 1992: 72). Parting from the external fathers, “left us at the mercy of our internalized bad father [both the over-rejecting and over-exciting objects], whom we had either to embrace or else [the libidinal self and anti-libidinal self] remain objectless and deserted” (Fairbairn, 1943: 71-2). The loss of the bad object strikes the psyche with no less than the turmoil of abandonment, it is in nature “bad-object abandonment”, (Grotstein, 1992) directly energized by dependency needs left unmet. Subsequently, the loss of the bad father would stir up a powerful resistance in the subsidiary selves, the libidinal ego and anti-libidinal ego, against letting go of the rejecting and exciting objects, to which they remain unshakably attached and devoted, from whom the self is still yearning for a chance to have her dependency needs met (Celani, 2007: 128-9).

The subsidiary selves require all their bad object counterparts in order to maintain existences and survive. The loss of the bad objects would then effect a threat to the existence of the subsidiary selves, which identify and seek attachment with the

corresponding bad objects. In the aftermath of losing the bad object, the attempt to revive the relational tie with the object would then only be achievable by withdrawing into internal object relationships, clinging even more assiduously onto the strangling tie with internalized bad objects (Fairbairn, 1944: 84). This enables one to take shelter in the readily established ensopsychic structure, and any change is resisted. What ensues then is a forceful recapitulation of the relational patterns enforced in early relationships with the bad external objects which the self then reenacts on herself<sup>32</sup>. To preserve the relationship with her deserting/deserted object, the self becomes her own abuser, her own overly rejecting and exciting object, at the cost of her own relationship with herself. The consequence that follows then is the central ego being “reduced ... to a state of utter impotence. The [central] ego becomes quite incapable of expressing itself; and in so far as this is so, its very existence becomes compromised” (Fairbairn, 1941: 51).

Thinking through my depression alongside Fairbairn, what initially seemed irrational became eminently comprehensible. For a long time, Virginia, we fell into the malevolent grasp of depression, plunged into an in-between state of existence and obliteration of the selves after the loss of the father. For me, this was revealed in the most intimate form, in having trouble with eating. I now come to see that by embodying the powerful impulses between overfeeding and starving myself, as I alternated between states of desperate longing for food and rejecting the need for food, I was reenacting the exciting and rejecting elements of the bad father that I lost. In your case, could it

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<sup>32</sup> Fairbairn made the clinical observation that the child who grows up with abusive parents, is highly likely to repeat the abuse by being in abusive relationships once freed from the abusive parents. And even when she is not in an abusive relationship, she abuses herself (Seinfeld, 1993: 66).

possible have found expression in the swinging between two distinct states of extreme excitement when you talked incessantly, craved Leonard's company intensely, and of total despair where you became completely mute, stopped eating and resting, and, at the height of it, attempted to end your own life (Lee, 1997: 179)? What seems self-inflicted in terms of self-deprivation and over-excitement of one's needs, to Fairbairn, would be a sign that the bad object had made its return, controlling us from inside with a vengeance (Fairbairn, 1943: 77). The self-destructiveness that often prevails in depression, which Freud and Klein accounted for by using the concept of "death instinct"<sup>33</sup>, could only make sense to Fairbairn when understood as an expression of the powerful and uncontrollable attachment to the internalized bad objects persisting to dominate in the endopsychic structure.

Here I recall to my mind your novel, *The Voyage Out*. The heroine of which, the coming-of-age, shy and inarticulate Rachel Vinrace, in one scene finding herself, at the end of the day, unable to put up with people around her anymore. She exclaimed, "It's intolerable!" (Woolf, 1992[1915]: 300)

All day long she had been tantalized but put off. ... She had now reached one of those eminences, the result of some crisis, from which the world is finally displayed in its true proportions. She disliked the look of it immensely (ibid)

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<sup>33</sup> Unsurprisingly, Fairbairn disregarded the concept of death instinct seeing it as "based upon biological not psychological" (Fairbairn, 1930: 122), and in his view the concept presented in itself an "inner contraction" (ibid). He believed that all instincts are "essentially expressions of life", and in that sense, "'all instincts are "life-instincts" in the last resort.'" (ibid)

To be tantalized then put off is to be promised love, then betrayed. And if, as Fairbairn suggested, the sense of self does arise from the relational matrix in which one is engrossed (Rubens, 1994), the self would come to experience her needs and desires for relatedness with others as painful, her neediness for others as burdening. As much as she would feel anger, at her own naivety to have not stopped trusting others and anger at their maleficence to have even induced false hopes in her, she would also feel ashamed that her love was unworthy and unacceptable. And how did Rachel respond to the series of intolerable exploitations weighed upon her? With her eyes dazed by tears, Rachel “*indulged* herself at last in violent abuse of the entire day” (Woolf, 1992[1915]: 300; italics added). Such a reaction would make perfect sense only to Fairbairn who disagreed with Freud’s *Pleasure Principle* and instead proposed a *Reality Principle* (Fairbairn, 1944: 78). As it now seems to me, the symptoms of depression indeed manifest through such a *masochistic indulgence*, in the self-abuse of refusing nurturance, such as eating and resting; and in berating oneself as unlovable and unworthy whilst resisting letting go of the great strain we put on ourselves. I recognized in myself too that unshakeable convictions you placed on yourself, that everything is your own fault, that you have no one else to blame but yourself (Lee, 1997: 179). From the operation of moral defense comes the true nature of self-reproach and self-abasement that so characterizes depression. Devils must be kept and contained within oneself, so that hopes to be ruled by God, in a world of meaning and redemption, do not die (Fairbairn, 1943).

Fairbairn’s theory enables a compelling understanding that, on the deepest level, depression represents a defensive bid to preserve one’s existing endopsychic structures

within which early object relationships thrive and live on and, in essence, to avoid and resist any changes that do not fit into the endopsychic situation (Rubens, 1998: 221). From this viewpoint, it is understandable as to why the changes that have the potential to trigger an acute state of depression are often those that take place in the direction of growth (ibid), for instance, breaking from the bad object(s). As the need to continually reminisce early object relationships persists, changes are resisted at full force, and denied, as they are registered as a threat to the ties with the internal objects. In a psychopathological sense this then leads to a psychic immobilization (Rubens, 1998: 226), where the person persists living in the stasis of “closed system of the internal reality” (Fairbairn, 1958) and shut out the reality of a changing world.

Virginia, do you remember a short story you wrote, *Phyllis and Rosamond* (1906), not long after your father’s death. In the story, using 1904 as a transitional point, the two pairs of ladies in their mid-twenties encounter each other as if through a looking glass, judging each other’s strangeness. It was as if you encountered your own later self-representation from after your father’s death (Lee, 1997: 149-150). In the face of a new start where the old obligations at last evaporated (along with the bad object), Phyllis and Rosamond paradoxically, came to realize that the long fought-for victory in the end failed to stop their suffering but only accentuate it. They condemned themselves, “all efforts at freedom were in vain: long captivity had corrupted them both within and without” (Woolf, 2003[1906]: 26). In it I sensed a compelling account of a depressive maneuver in the Fairbairnian sense, that perhaps suitably describes you and I: the long captivity of the bad objects left us in the consequences of mental corruption - the strengthening of the endopsychic structure and attenuating of the central ego. Depression

carried us towards the entrapment of the endopsychic structure in order to re-enforce a sense of nothing being changed, no loss being occasioned, so that the split-off parts of the ego could maintain their attachments to the internalized bad objects.

I have begun to think, and hope you have too, that perhaps it was not that our efforts at freedom were in vain, but it was that the changes were simply denied by ourselves, as the real difficulty was in giving up the unconscious bonds with the bad father, and in perceiving and experiencing the world in the absence of him. After all, without him, what would I do with those painfully felt, shamed, underserving, needy, debased, rejected, angry and resentful aspects of myself that he so powerfully and intolerably aroused in me? Fairbairn was right to say I had never suspended my wanting of my father, for I have now come to see it was indeed to risk a shattering disintegration of my sense of self to lose touch with the bad father to whom I had remained engrossed for 21 years! As I mentioned earlier, the loss of the bad object could mean a threat to the obliteration of parts of the self, it seemed then that only by retreating into the fortified sanctuary of the internal world, the ultimate 'room of one's own' that is wholly private to oneself, we could protect the sense of self, to continue to perceive and respond to the world in the old fashion. Such would be the characteristic spirit of depression, which can best be voiced as, "If nothing can be changed, nothing will change; If I simply cannot tolerate what is happening to me, it will not happen ... I refuse to live this new experience as new" (Rubens, 1998: 226). The common manifestation of the depressive pessimism displayed in its inability to change would be a camouflage for its active, by nature neurotic, expression in the form of psychological defense against having to deal with changes and the possibility of loss accompanying changes.

Have I said enough to tempt you to engage with Fairbairn?

Yours,

Nini

## **Chapter Six**

### **From Freud to Klein to Fairbairn, a Conclusion**

How we understand depression informs how we relate to it. Psychoanalytic theory, as it has done for me, provides ways of thinking and a language with which to speak about the unconscious, inner dynamics of depression. It does not produce a single interpretation but allows multiple lenses through which divergent articulations of meanings can be expressed. It would not be accurate to say that I had let psychoanalytic theory compose a story for me, or on behalf of me, but it was more like the theory, or theories, gave me a map and a compass to navigate into the forgotten reality of my past without getting lost. Psychoanalytic theory guided me to look into some of the most significant earliest moments of life buried under the conscious realm out of fear and unsettling vulnerability, directing me to what I should look for and into, and what to give importance to. But to travel through the formidable labyrinth of the past, I realized I needed a companion too, so that I could feel less alone and unsafe. I was fortunate to encounter Virginia Woolf through her published texts, whose needs to make sense of depression and familiarity with psychoanalytic language presented her as a suitable companion with whom I could dialogue in a psychoanalytic language. She felt real to me even though she was the Virginia Woolf of my mental creation brought to life through imagination.

The significant similarities in our life experiences and also in a familial position as a daughter, led to a sense of knowing Woolf, and an identification with her. This identification, especially in the shared dimensions of loss, either actual or symbolic loss, and severe hardship of depression we had lived through, brought about a feeling of genuine connection that deepened, as our dialogue unfolded, into an empathetic bond with her. The companionship and empathetic bond my imaginary Woolf offered to me in the process of research empowered my voice, so much so that I found the security to start looking at, capturing and narrating, the surfacing edge of the emotional turmoil that once eluded my thought and speech. Engaging Woolf in a fictional dialogue became a process of discovery of hidden aspects of my story as Woolf's voice strengthened my voice, and her story contextualized mine. The we-ness took shape between Woolf and I, and a feel of the "relationship" was developed. Unexpectedly, from where we were wounded psychologically, we opened up possibilities of storytelling and hearing, transforming the dialogue into an unfolding exchange of voices and a collaborative venture. We came together thinking about our depression, witnessing and hearing, and telling stories of our lives. This transformation from seeing Woolf as a partner in dialogue to experiencing a relationship with her was something I had not expected when I first embarked on this research. I may have had a sense of what my dialogue with Virginia Woolf would look like, but I never expected the actual 'experience' of an imaginative dialogue could conjure up so much emotional resonances in which healing took place. And I trust that the relational approach embodied in my endeavour to relate to Woolf as subject-to-subject, which I integrated in my letters to Woolf, emphasized the centrality of relationship that I so value in Fairbairn's work.

Theory affords elaborations of the personal story, as much as the personal story gives life to theory. In my case, theory enabled me to think through what I was experiencing and aiming to understand during the process of this research. In this thesis I portrayed and amplified the explorative processes of subjective interpretations through my creative *experiencing* of psychoanalytic theory. And in turn, I made theory ‘personal’ and evoked an emotional depth through the process of engaging with theoretical prose.

Returning to the research questions this thesis raised, which seeks to explore the therapeutic relevance of Fairbairn’s object relations theory in understanding depression, I would like to provide some conclusive comments on what Freud, Klein, and Fairbairn each contributed to my understanding of depression.

My theoretical dialogue started from Freud, who made the important contribution of linking psychopathology to unresolved conflicts in the unconscious inner world. Freud led me to see that, in the case of depression, the primary problem to be addressed is the unconscious loss occasioned by the object loss in reality. The lowering of the self-esteem in melancholia signifies that the ego has been impoverished as the result of the object loss. The loss of the narcissistically identified object spirals up an acute crisis of ambivalence between love and hate, propelling the ego to re-instate the lost object internally for the purpose of maintaining the libidinal activities. Underneath the victorious display, the loss of the father is a crisis of the unconscious loss of an object-tie, which had been sponsoring a libidinal connection where libidinal aims can be fulfilled. Through the internal resurrection of the father object I preserved a libidinal target within me, towards which I could continue to direct my aggrieved instinct, and to hate. My

relentless attack towards the forsaken object of the lost father, like a boomerang, always came back at me in the form of a severe self-criticism. Freud's later addition of the concept of super-ego opened up a new landscape that presented melancholia in the context of the topographical conflicts between ego, id, and super-ego. To Freud, psychic conflicts are fundamentally derived from a tug of war torn between the id and the super-ego, to which melancholia is particularly vulnerable, being in a state of crushed ego (Ogden, 2002: 772).

Freud offered me an engaging and innovative understanding of depression, but as much as I agreed with some aspects of Freud, and the later presentations of his work in a contemporary light, such as Leader's (2009) and Ogden's (2002), Freud's fixation on drive theory and insistence that psychopathology is always bound to some unmet desires from the instinctual energy became insufficient for me, as it provided limited lens into the complex interplay between the internalized objects and how such internal dynamics shape the expression of personhood. The insufficiency was mainly due to Freud's view of selfhood, which is fundamentally impulsive, and of the human psyche as a mental apparatus directed by the libidinal needs.

Furthermore, the ambiguity in Freud's concept of object-love that is blurred with his definition of the narcissistic-love proved unhelpful in the context of understanding internal object relationships, as it suggests that love is only possible where identification exists. Therefore there is no such thing as complete object-love in Freudian system, as what we love is always the extension of the self (Clewell, 2004: 47) and less the uniqueness of the other as a separate and distinct person. In the case of depression, as occasioned by the loss of the loved-object, in a Freudian account, marks, to an extent, a

signal of an internal disruption to the person's narcissistic need of the object, rather than a disruption to the unique attachment to the object for its uniqueness as a separate person experienced relationally. This was a disagreement that Virginia Woolf raised and spoke of strongly, as it reduced humans to impulsively driven beings, and so narrows what the objects are sought for in human relationships. And the disagreement was compounded by Freud's view of femininity that a daughterly love for the father took a departure from the Oedipal origin of sexual desires, depicting, therefore, only one particular type of object relationships (Eagle, 2000: 110), and not the whole picture of the internal constellation of object relationships. This highlights the main downside of the Freudian view in that it gives too much prominence to the libidinal needs of the self, too little importance to how these needs were shaped by relational contexts and expressed relationally.

My theoretical dialogue with Freud also provided a doorway into what it was like for Virginia Woolf when she first read his work, and later on, met him in person. Although his theory offered helpful insights on psychic mechanism, his highly authoritative stance limited the space for personal musings and debates, unwelcoming of the mutuality and personal agency essential for an unfolding dialogue between perspectives. Engaging with Freud, I also experienced a sense of intimidation by his language, a feeling that I was confined to being on the receiving end and not talking back. This was mainly due to his language, a highly patricentric tone, compounded by my transference of a father figure, that spoke in a determined and forceful manner with a noticeably significant amount of "must" and "insist", as if his theory presented the only truth (Ogden, 1999: 134). My voice, and in particular my feminine voice, was too feeble

to confront the patricentric logic woven in his perspective on femininity as defined by the lack of a phallus, and hence inferior. Ultimately his authoritative voice overpowered my personal voice as it sought to tell my own story of the intricacy of the psychological phenomenon as lived and experienced subjectively by myself. My experience of dialoguing with Freud became a helpful reference empathising with Woolf and understanding why she shunned receiving Freudian psychoanalysis. Despite my disagreements with some aspects of Freud's theory, reading Freud also started a process of reflective awareness that enable me to recognize why and how I disagreed, which propelled me to search on.

What was left uncontained by the Freudian theory drove me to Klein, whose view on femininity was not defined by the lack of phallus but the possession of breasts. Breasts gave life to Klein's work as much as it sponsored her original contribution – phantasy. Klein believed that the beginning of emotional life starts in infantile phantasy wherein dynamics are catalysed by the baby's direct experiencing of the feeding breast and the withdrawn breast as they are linked to comfort and distress, generating in the baby the contradictory feelings of love and hate. And unlike Freud, Klein saw the ambivalence of love and hate as a crucial part of the emotional development to be worked through, even though she recognized ambivalence brought psychic pain. And such pain brings about the primitive mechanism of splitting, which enables the baby to manage the excessive anxiety generated from the powerful yet contradictory feelings of love and hate, whilst she strives for survival.

Depression, or the depressive position in its primitive form, derives from the overcoming of intolerable ambivalence to 'achieve', conceptualized by Klein as an

psychic development as it were, recognizing the mother as a whole object who is both good and bad. To achieve the depressive position signals the capacity for the recognition of a whole object and the capacity for guilt. This then leads to a need for reparation with the loved object, to ensure that it has not been destroyed in phantasy. The emotional development marked by the depressive position is in parallel with what Winnicott terms “the capacity for concern” (1963). Even though Klein adheres to what Freud established as drive theory, her emphasis on the pre-oedipal phase as the centre of infantile anxieties, and early mothering in her theorizing of depression, legitimizes the importance of maternal function - a new insight that distinguishes her work from classical Freudian depression.

Virginia Woolf's *To The Lighthouse* portrayed Woolf's own position as a daughter in the family dominated by the father. It also portrays Klein's position as a woman in the then patricentric psychoanalytic climate in which, at the cost of underplaying some significant theoretical differences, she eagerly established herself as a follower to Freud in order to secure a place for her work and influence in the psychoanalytic community. Behind the dramas of a father-centred plot constructed in a traditional Freudian Oedipus thinking, Woolf preserves a marginal space to illustrate the influence of the maternal figure of Mrs Ramsay through the experience of Lily Briscoe, the matricentric narrative embodied by the mother-child bond.

My reading of *To The Lighthouse* brought about an immediate identification with Lily Briscoe, the daughter figure whose longings for Mrs Ramsay were never fully satisfied due to Mrs Ramsay's emotional unavailability that symbolized the breast withdrawn from the baby. By being always preoccupied with something else, she failed

to attend to the immediate needs of Lily, who in an urgent hunger for maternal provision, played out a destructive rage in phantasy. But when Mrs Ramsay disappeared through her death, we saw Lily Briscoe acutely collapsed into a melancholic catastrophe. She experienced powerful rage as a vengeful phantasy of destroying Mrs Ramsay, who had caused her so much pain. The loss of Mrs Ramsay reawakened Lily's love for her and a panicking attempt to bring her back to life for a chance of reparation, but nothing happened or could happen anymore. Mrs Ramsay's death was a final deprivation of Lily's need for reparation. Guilt resounded in Lily's searching for Mrs Ramsay's love, alternating with a recurrent state of unresolved hate. *To The Lighthouse* portrayed a Kleinian baby lost in the unfathomable abyss of the melancholic ocean, unable to navigate a safe way through without the guidance of a lighthouse. Klein's work provides me with a language to conceptualize depression from the perspective of a daughter under siege by a depriving mother whom she also loves unconditionally.

As much as Klein offers new insights to the understanding of depression, her insistent attempts to associate her work with Freud unfortunately restricted the potential of further going beyond the restraints of Freudian view on how the external environment interacts with the internal world in the shaping of our sense of self. In Kleinian theory, there is no clear differentiation between the world of internal objects and the real objects in reality, i.e. what the baby needs to manage is her own psychical creation of the bad object that represents an imaginary object which has emerged out of internal conflicts between love and hate, rather than a representation of the actual object in reality.

Problems of the innateness of the bad objects remain a terrain of dispute in Klein's work. Even though Klein acknowledges the importance of the quality of the

mothering, she emphasises phantasy driven by the instinctual impulses, suggesting that the psychic process did not necessarily coincide with the real picture of the mother. The internal world, in Klein's (1952) words, "is formed solely on the basis of the individual's own desires towards other persons and of his reactions to them as the objects of his desire" (pp. 162). She did not change this view. A philosophical undercurrent of idealism that, in brief, is the view that every thing exists only as a reflection of the mental representations (as defined by Mautner, 2005: 292) was omnipresent in her theory; the only real relationships are those constructed internally. The predominant idealist position in her theory curtailed a further development to encompass the social and relational aspects of experience in understanding and shaping of the inner world in interplay with internalized objects. Depression, examined in the Kleinian system, is derived primarily from internal conflicts rooted in one's inherent aggression, unresolved in the aftermath of loss, and less of a creation of the malicious external objects. It is apparent that both Freud and Klein's theories are rooted in the proposition of there being a common force of the instincts in the face of internal conflicts between love and hate, whilst giving little importance to the place of relational experiences between the self and the others. For this reason the nature of the object relationship they construed was much narrower than Fairbairn.

The divergence of relational psychoanalysis from classical psychoanalysis has, through a shift from instincts to relationships, clearly marked a different emphasis on *the aim of defence mechanisms* and *the main source of the psychic pain*. As Merton Gill (1995) concludes, "classical theory emphasizes defenses against drive, and relational theory emphasizes defenses against altering patterns of interpersonal relationships"

(cited in Layton, 2008: 2). Gill's differentiation between classical theory and relational theory on the source of psychic pain, i.e. what are the sources of psychic pain being defended against, illuminates a contrasting focus in the classical theory and the relational theory in psychoanalysis. In the Freud-Abraham view, psychopathology develops due to a fixation at certain libidinal developmental stage, for example schizophrenia at the oral sucking stage, manic-depression at the oral biting stage etc. Fairbairn, on the other hand, proposed a fundamentally different theory of psychopathology originating not from the nature of libidinal impulses, but from the difficulties experienced in the object relationships (Guntrip, 1952: 89).

Clearly in Gill's (1995) differentiation, Fairbairn's object relation theory fits into the latter paradigm. Fairbairn suggests that the most annihilating pain is the deprivation of the relatedness with the significant others, and what needs defended against is the edge of a threat that presses to alter the established patterns of the internal object relationships. Even though Fairbairn never developed a theory of depression himself, rather he took up a Kleinian conceptualization in terms of the positions, the main irreconcilabilities there have been in their systems of thinking opened up space for a Fairbairnian, as distinguished from a Kleinian understanding of depression to be further developed. The main irreconcilability in their theories is the very views they have on *the nature of the internalized objects*. For Klein, the internalized bad object is mainly seen as created inwardly through the child's own split off sadistic aggression; whereas for Fairbairn, who sees human beings as fundamentally relational, it is created as a realistic representation of the object in reality who could not provide a satisfactory relationship for the child, and is therefore internalized and repressed by the child as a way to control

the overwhelming badness of it. Internalization to Fairbairn happens as a defence mechanism ‘serving’ the child to manage the unbearable experience with the frustrating bad object. By manoeuvring unconsciously through identification with the bad object, the unbearable badness can be taken inside her, the external object can be preserved as good and worthy. The cost of affording, albeit illusory, a sense of safety, and most importantly, hope in the on-going relationships with others, is the integrity of the self.

Reflecting on Fairbairn, a deep resonance permeated my coming to know myself and Virginia Woolf. Fairbairn led me to feel a pain so great and so deep within me that I had not been able to attend to it, and he gave me a language to start describing the intricate yet traumatic relational scenes continually being replayed internally and interpersonally, behind the symptoms of depression. Reflecting upon Fairbairn brought a deep compassion, which emerged from this new knowing that perhaps it had not been me who was irredeemably bad. Perhaps I was only trying to cope with “a set of social and psychological circumstances” (Orbach, 2008: 31) that I was born into, desperately trying to alchemize chaos into a reality possible for living? And all I had was the invisible assets within me that could not be taken away from me - the psychological defence of idealization, splitting (and ego-splitting), and repression.

As I have demonstrated by using Virginia Woolf’s and my own life stories, the unsatisfactory relationships with our parents, especially the fathers in our lives as the most intolerably bad objects, needed to be transformed into the internal realm so that we can continue to take part in the on-going relationships with our fathers from which there is no escape as long as we are dependent upon them. Aggression, not seen as an innate phenomenon as Klein suggests, is a result of the disappointing relational experience, and

partly internalized through identifying with the aggressor in order to justify their failing to love. But that was not all. Fairbairn's view on aggression allowed me to see that aggression was turned inwards to sponsor what he called the "internal saboteur", which forcefully attacks the part of self that is still waiting for love to be returned. An internal saboteur, outwardly shown as self-hatred, that conspires with the internalized bad object to transform the traumatic rejections of not having our love returned into a self-shaming belief that our love was unworthy and so deserved desertion. The continual disappointment and deprivation (of love) crystalizes the inner world of endopsychic structures that preserve the traces of the most painful, therefore repressed, experiences of the object relationships.

It all worked fine until the change happened in a positive direction - the bad object in reality becomes lost permanently. The loss triggered an intense need to preserve the bond between the aspects of self, or the subsidiary selves in Fairbairn's terms, which have *realistically experienced* and *identified with* their intolerably exciting and rejecting counterparts of the bad object. Endopsychic structure provides a home for the repressed aspects of self that engage with the repressed internalized bad objects; all together they constitute a repressed part of the self, therefore any changes in the constellation of the object-relationships carry a threat to disintegrate the self-identity and the patterns of relating to others so deeply interwoven in the internal relational matrix. Following Fairbairn, the very nature of the selfhood no longer equates with a sole functional director that seeks to negotiate amongst id, ego, and superego in order to eliminate the inner tensions unbearably aroused by love and hate. But the self becomes an organizing autonomy that, within her own psychological capacity, seeks to negotiate

a sense of relational contacts with the internalized objects that she could not bear to lose in the condition of the parental and environmental insufficiency.

Fairbairnian depression essentially portrays a psychological crisis of a clash between the internal world and the external reality in the wake of changes; change alerts us to possibilities of loss and intensifies the unconscious desires to maintain the endopsychic structure as the way it is, whilst the reality of the external world comes into conflict with the internal relational constellations, i.e. the original bad/unsatisfying object is lost and can no longer sponsor the dynamics of endopsychic structure. Reframing depression from a Fairbairnian perspective, it is essential to validate the unconscious effort behind the surface manifestations of the symptoms that the person makes for the purpose of avoiding the psychic pain brought about by the loss of the object relations. If nothing has changed, nothing could have been lost. The person with depression is one who lives in “the stasis in the closed-system of experiencing the world” (Rubens, 1998: 222) out of a need to keep intact the inner constellation of internalized object relationships. By retreating into the sanctuary of the internal world peopled by the internalized objects, the on-going experiences of changes in life are denied and the internal object-relations can continue to sponsor the reminiscence of the emotional memory with significant others. Depression, therefore, should be understood as an *organized experience, actively and unconsciously by the person as a defence mechanism against changes to the internal object relationships, against disintegration of the sense of self and its subsequent psychic pain.* And the symptoms of it are of psychosomatic nature, which are an unconscious expression of the object relationships that have been repressed.

Fairbairn's theory pioneered a radical reformulation in psychoanalytical thinking on the fundamental need of selfhood. To understand the internal world and how the self relates to her internal objects requires a psychotherapeutic process of "idiosyncratic elaboration of actual relational experience" (Layton, 2009: 2). Although Fairbairn did not explicitly theorize the dimensions of the psychic growth, it could be postulated that the most important element for therapeutic change would lie in the gradual acceptance of the change(s) that has been unconsciously denied. It is not a simple task. To achieve the genuine acceptance of the changes would mean to gradually let go of the depressive defence of taking sanctuary in a closed-system of internalized object relationships. In Ogden's (2010) words, the therapeutic process would encompass "the work of coming to terms with the full range of aspects of oneself, including one's disturbing, infantile, split-off identification with one's unloving, unaccepting mother [or father]" (pp. 114) Insofar as Fairbairn provides a useful framework for how our internal object relationships guide the way we respond to the external world, he does not elaborate on psychic growth and how it can be facilitated in the course of psychotherapeutic process. In my view Fairbairn's theory is a theory of results; the significance of its unique formulation on the dynamic psychic structure prompts further research into the psychotherapeutic process in working with what transpires in the wake of therapeutic changes unconsciously defended against through depression. Although it is beyond the scope of this thesis to address such issues, it is my hope that further research can be done to provide a detailed account of the clinical relevance of a Fairbairnian understanding of depression and so make the theory of consequence to practice.

In this thesis I have explored the personal relevance of Fairbairn's object relations theory in understanding depression. His work as distinct from other psychoanalytic frameworks, such as the better-known Freudian and Kleinian lines of thought, provides invaluable insights into understanding the nature of depression as a psychic manoeuvring. Treading through the theoretical arguments made by Freud, Klein, and Fairbairn, engaging with them personally, subjectively and relationally with Virginia Woolf in the form of an imaginative dialogue where personal narratives are incorporated, I realized in both of my and Woolf's life stories Fairbairn was the key that made the picture of our depressions complete. My letters to Virginia Woolf were a way to illustrate my evolving perspective in my understanding of depression, evoking the theory and the uniqueness of Fairbairn's framework based on object relations theory.

Finally, in closing, I acknowledge the fact that my textual relationship with the imaginary Virginia Woolf, who I have come to know and so closely work with in this thesis, is undergoing a closure. On reading Virginia Woolf's last letter she left for the world, I wished still that my fictional encounter with her had been real.

[...] I can't fight any longer. I know that I am spoiling your life, that without me you could work. And you will I know. You see I can't even write this properly. I can't read. What I want to say is I owe all the happiness of my life to you. You have been entirely patient with me and *incredibly good*. I want to say that — everybody knows it. If anybody could have saved me it would have been you. Everything has gone from me but the certainty of your goodness. I can't go on spoiling your life any longer [...] (Woolf, 1941b; italics added).

The letter, which was addressed to her husband Leonard Woolf, underscored what it had been like for her in the depth of her depression towards the end of her life. It allows us to see that she did not change her narrative and insisted on continuing to believe that her depression was all her fault and all the badness came from her. This time she had made up her mind that she would not let her badness go on “spoiling” others’ goodness any more. She ended the letter with one last attempt to reassure herself and her husband of his grace, of her unworthiness. Three days later, on March 28, Virginia Woolf drowned herself in the River Ouse at the age of 59. In my view, it was the atmosphere within psychoanalytic circles where Fairbairn’s work was much marginalized that coincided with the incidence of Woolf’s death in her belief of her depression as self-generated, an innate sin. I hold an optimistic view that should she have read my letters, things would have been different, and she could have lived, possibly by realizing that she need not be the mad one, the bad one, anymore.

Working on this thesis, I witnessed my understanding being transformed by reflecting alongside psychoanalytic theories, and saw my life narratives restored to a realistic representation of my relational journey. Fairbairn enabled not only the deep, personal understanding of depression that I set out to find, and that I am finally at peace with, but a different relationship with my past. "Analysis leaves its scars; it cannot cure the past, but only lay it to rest in a forgivable way" (Lamm, 1997: 266).

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## Appendix

### Who is Virginia Woolf? A Short Biography

The biographical information below is taken from the *Virginia Woolf Society of Great Britain* (Clarke & *VWSGB*, 2000).

[...] Adeline Virginia Stephen was born on 25 January 1882 in London. Her father, Leslie Stephen (1832-1904), was a man of letters (and first editor of the *Dictionary of National Biography*) who came from a family distinguished for public service (part of the 'intellectual aristocracy' of Victorian England). Her mother, Julia (1846-95), from whom Virginia inherited her looks, was the daughter of one and niece of the other five beautiful Pattle sisters (Julia Margaret Cameron was the seventh: not beautiful but the only one remembered today). Both parents had been married before: her father to the daughter of the novelist, Thackeray, by whom he had a daughter Laura (1870-1945) who was intellectually backward; and her mother to a barrister, Herbert Duckworth (1833-70), by whom she had three children, George (1868-1934), Stella (1869-97), and Gerald (1870-1937). Julia and Leslie Stephen had four children: Vanessa (1879-1961), Thoby (1880-1906), Virginia (1882-1941), and Adrian (1883-1948). All eight children lived with the parents and a number of servants at 22 Hyde Park Gate, Kensington.

Long summer holidays were spent at Talland House in St Ives, Cornwall, and St Ives played a large part in Virginia's imagination. It was the setting for her novel *To the Lighthouse*, despite its ostensibly being placed on the Isle of Skye. London and/or St Ives provided the principal settings of most of her novels.

In 1895 her mother died unexpectedly, and Virginia suffered her first mental breakdown. Her half-sister Stella took over the running of the household as well as coping with Leslie's demands for sympathy and emotional support. Stella married Jack Hills in 1897, but she too died suddenly on her return from her honeymoon. The household burden then fell upon Vanessa.

Virginia was allowed uncensored access to her father's extensive library, and from an early age determined to be a writer. Her education was sketchy and she never went to school. Vanessa trained to become a painter. Their two brothers were sent to preparatory and public schools, and then to Cambridge. There Thoby made friends with Leonard Woolf, Clive Bell, Saxon Sydney-Turner, Lytton Strachey and Maynard Keynes. This was the nucleus of the Bloomsbury Group.

Leslie Stephen died in 1904, and Virginia had a second breakdown. While she was sick, Vanessa arranged for the four siblings to move from 22 Hyde Park Gate to 46 Gordon

Square, Bloomsbury. At the end of the year Virginia started reviewing with a clerical paper called the *Guardian*; in 1905 she started reviewing in the *Times Literary Supplement* and continued writing for that journal for many years. Following a trip to Greece in 1906, Thoby died of typhoid and in 1907 Vanessa married Clive Bell. Thoby had started 'Thursday evenings' for his friends to visit, and this kind of arrangement was continued after his death by Vanessa and then by Virginia and Adrian when they moved to 29 Fitzroy Square. In 1911 Virginia moved to 38 Brunswick Square. Leonard Woolf had joined the Ceylon Civil Service in 1904 and returned in 1911 on leave. He soon decided that he wanted to marry Virginia, and she eventually agreed. They were married in St Pancras Registry Office on 10 August 1912. They decided to earn money by writing and journalism.

Since about 1908 Virginia had been writing her first novel *The Voyage Out* (originally to be called *Melymbrosia*). It was finished by 1913 but, owing to another severe mental breakdown after her marriage, it was not published until 1915 by Duckworth & Co. (Gerald's publishing house). The novel was fairly conventional in form. She then began writing her second novel *Night and Day* - if anything even more conventional - which was published in 1919, also by Duckworth.

From 1911 Virginia had rented small houses near Lewes in Sussex, most notably Asheham House. Her sister Vanessa rented Charleston Farmhouse nearby from 1916 onwards. In 1919 the Woolfs bought Monks House in the village of Rodmell. This was a small weather-boarded house (now owned by the National Trust) which they used principally for summer holidays until they were bombed out of their flat in Mecklenburgh Square in 1940 when it became their home.

In 1917 the Woolfs had bought a small hand printing-press in order to take up printing as a hobby and as therapy for Virginia. By now they were living in Richmond (Surrey) and the Hogarth Press was named after their house. Virginia wrote, printed and published a couple of experimental short stories, 'The Mark on the Wall' and 'Kew Gardens'. The Woolfs continued handprinting until 1932, but in the meantime they increasingly became publishers rather than printers. By about 1922 the Hogarth Press had become a business. From 1921 Virginia always published with the Press, except for a few limited editions.

1921 saw Virginia's first collection of short stories *Monday or Tuesday*, most of which were experimental in nature. In 1922 her first experimental novel, *Jacob's Room*, appeared. In 1924 the Woolfs moved back to London, to 52 Tavistock Square. In 1925 *Mrs. Dalloway* was published, followed by *To the Lighthouse* in 1927, and *The Waves* in 1931. These three novels are generally considered to be her greatest claim to fame as a modernist writer. Her involvement with the aristocratic novelist and poet Vita Sackville-West led to *Orlando* (1928), a roman à clef inspired by Vita's life and ancestors at Knole in Kent. Two talks to women's colleges at Cambridge in 1928 led to *A Room of One's Own* (1929), a discussion of women's writing and its historical economic and social underpinning.

This biographical summary of Virginia Woolf's life is completed with the information below, which is taken from Frank Kermode's (1992) biographical preface to Virginia Woolf's *Flush*:

*The Waves* was written and rewritten in 1930 and 1931 (published in October of that year). She had already started on *Flush*, the story of Elizabeth Barrett Browning's pet dog – another success with the public – and in 1932 began work on what became *The Years*. This brief account of her work during the first twenty years of her marriage is of course incomplete; she had also written and published many shorter works. As well as both series of *The Common Reader*, and *A Room of One's Own*. There have been accounts of the marriage very hostile to Leonard Woolf, but he can hardly be accused of cramping her talent or hindering the development of her career.

*The Year* proved an agonizingly difficult book to finish, and was completely rewritten at least twice. Her friend Roger Fry having died in 1934, she planned to write a biography, but illnesses in 1936 delayed the project; towards the end of that year she began instead the polemical *Three Guineas*, published in 1938. *The Years* had meanwhile appeared in 1937, by which time she was again at work on the Fry biography, and already sketching in her head the book that was to be *Between the Acts*. Roger Fry was published in the terrifying Summer of 1940. By the Autumn of that year many of the familiar Bloomsbury houses had been destroyed or badly damaged by bombs. Back at Monk's house, she worked on *Between the Acts*, and finished it in February 1941. Thereafter her mental condition deteriorated alarmingly, and on 28 March, unable to face another bouts of insanity, she drowned herself in the River Ouse.