

LOST — AND FOUND — IN TRANSLATION: DO RONALD FAIRBAIRN’S IDEAS STILL SPEAK USEFULLY TO 21ST CENTURY COUPLE THERAPISTS?

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Introduction

An alternative choice of title for this article might have been “The Contribution of Ronald Fairbairn’s Ideas to 21st Century Object Relations Couple Psychotherapy.” In some circles, Fairbairn is known as the Father, and Melanie Klein as the Mother, of Object Relations Therapy. Interestingly, however, in these days of single parenting, with mothers, in particular, going it alone, Klein is often identified as if she is the single-handed mother of Object Relations, while Fairbairn’s role as father, especially in Kleinian circles, is completely forgotten or ignored. The desire to honour Fairbairn explains, in part, some of the reasoning behind choosing the title, “Lost — and Found — in Translation.” I also want to emphasise the difficulties there have been in understanding Fairbairn’s language, alongside the “translation” and recognition of his ideas, that have enabled them to be used as a secure base from which to develop psychoanalytic thinking. Here, my particular focus is on the fundamental role his concepts have played in developing couple psychoanalytic psychotherapy.

The difficulties Fairbairn’s work has encountered in being taken in and acknowledged raise questions about what it is that gets in the way when we try to convey our thoughts. Native English speakers in Britain and the U.S. are often said to be divided by a common language, making the potential for misunderstanding ever present. In Britain there is a saying: “What counts is not what you say, but the way that you say it.” Psychotherapists know, of course, that *both* matter. *What* you say and *how* you say it affect not only how you are understood, but whether you are taken seriously. Certainly, this was Fairbairn’s experience. Like many other psychoanalytic thinkers, he created his own language, but, in doing so, he struggled to find terms that his peers would readily adopt as useful and authoritative. As a result, many of the ideas of this unassuming Scot did get “lost” in the London-centred, psychoanalytic world of his day.

Fairbairn, like all great psychoanalytic theorists, was both visionary in his

thinking and limited by his own experience. A brief introduction to the man and his time will serve to place him in context.

Brief Biography

An only child, Ronald Fairbairn was born in 1889 into a well-to-do, and strictly Calvinist, Edinburgh family. He was well-educated; his first degree at Edinburgh University in “Mental Philosophy” gave him a good grounding in the Classics, and Aristotelian and Hegelian philosophy. His first ambition was to go into the Church, but he was diverted into military service by the First World War. During that time, he was very impressed by visiting William Rivers, who was treating shell-shocked patients at Craiglockhart War Hospital in Edinburgh. Pat Barker’s trilogy, *Regeneration* (Barker, 1996) recounts Rivers’s work. When the war ended, Fairbairn felt he could best help his fellow man as a psychoanalyst. After two periods of analysis in London and Edinburgh, he trained as a medical doctor, specialising in psychiatry. He considered completing his training at the Tavistock Clinic in London, but, being now married and with a family, he decided to stay in Edinburgh, where he developed a private psychotherapy practice. His university teaching post in psychology also involved him in clinical work with adults, and with children at a Child Guidance Clinic.

Fairbairn was an avid reader of psychoanalytic literature, reading Freud in German, as well as in translation, and thanks to the links he had cultivated with London colleagues, in 1931, he presented a clinical paper to the British Psycho-Analytical Society and was elected an Associate member (Fairbairn, 1931). That meant he was eligible to attend its London meetings, so that he became familiar with Melanie Klein’s work, and she with his. For example, Fairbairn introduced the idea of the schizoid position to Klein. Their mutual respect and awareness probably helped each of them to develop their own distinctive voice. Practising in Edinburgh, 400 miles north of London, risked being a lonely and professionally isolating experience for Fairbairn, although it may have fitted well with his independent mindedness. Being an outsider fostered a freedom to question orthodoxies. It also helped Fairbairn keep his distance from the acrimony of the Controversial Discussions of 1942-1944 between Melanie Klein and her followers and Anna Freud and her supporters. He found all of that conflict, and the consequent rift in the British Psycho-Analytical Society, distasteful and unnecessary. Reflecting on this, we should not be surprised that, in the context of the war, splitting,

and an interest in splitting, came into the heart of a society of practitioners dedicated to understanding the conflicts and tensions that afflicted their patients.

A middle group, later called the Independents, emerged in the mid 1940s. Although its members might have had much in common with the approach of both the Kleinian and Anna Freudian camps, the Independents preferred not to be allied with either of the adversaries. Along with Donald Winnicott, John Bowlby, Michael Balint, and others, Fairbairn came to be considered an Independent, and one who profoundly influenced that group's thinking. Indeed, the early 1940s proved a particularly creative time for him when he wrote four of his most important papers. They were later included in the 1952 major collection of his work *Psychoanalytic Studies of the Personality* (Fairbairn, 1952). Although he did not see himself as challenging Freud, this book significantly reframes psychoanalytic theory: "drive theory" and the "death instinct" are jettisoned and replaced by Fairbairn's own carefully constructed theory of internal object relations. Setting forth into new psychoanalytic territory, however, Fairbairn coined terms not previously used by other theorists: for example, "endopsychic structure," "central ego," "exciting object," "libidinal ego," "rejecting object," and "internal saboteur." His adoption of a new language unfortunately created barriers rather than bridges to understanding his creative, new theories. Consequently, his particular vocabulary has not found a place in common psychoanalytic discourse.

There are probably many explanations for the relative unfamiliarity with Fairbairn's theories compared with those of Klein. But how should we account for the fact that Winnicott, a fellow Independent, largely ignored him, despite the similarity in their approaches? Perhaps Fairbairn's implicit criticism of Freud made Winnicott and his contemporaries, after the recent bitter quarrelling, anxious about the risk of ostracism. While Heinz Kohut also clearly followed in Fairbairn's footsteps, curiously, he never cites him. We might wonder then whether Fairbairn's ideas were perhaps absorbed into the zeitgeist and reproduced without being attributed. Certainly, he was writing at a time when a number of psychoanalysts were seeking ways of using Object Relations to explain the uncharted intricacies of interpersonal relationships.

The distinction between the way in which Fairbairn, Klein, and Bion, three major contributing theorists to couple psychotherapy, respectively

viewed the object relations system can be summarised as follows: Fairbairn's concern centred on an inner (unconscious) world of internalised bad objects, and their function in affecting relationships and forming the personality's structure; Klein's emphasis was on the externalisation (through projection) of painful and unwanted feelings, leading to a lack of good objects to build a coherent personality structure; and Bion focused on the impact of an inner world devoid of an object, which he saw as more devastating than one made up of bad or insufficient good ones.

Towards the end of Fairbairn's life, two formidable women in London, Enid Balint and Lily Pincus (Pincus, 1960), also extended Object Relations thinking about couples, developing the notion of the "couple fit." Fairbairn had no direct involvement in this, although, indirectly, his influence through Jock Sutherland and Henry Dicks was considerable.

Since his death in 1964, however, Fairbairn has risked being pushed into the footnotes of psychoanalytic literature, something that appears strange given all that he contributed in the establishment of the Object Relations School. Sutherland hypothesises that he was ignored because some found his ideas too disturbing, but also largely because of the "hard intellectual work required" (Sutherland, 1989, p. 144). As Fairbairn's student, analysand, colleague, and biographer, Sutherland resolved to ensure that the canon of Fairbairn's work would not be forgotten. We have to thank him and other dedicated interpreters, including Dicks (1967), Harry Guntrip (1969), John Padel (1972), Jay Greenberg and Stephen Mitchell (1983), David Scharff and Jill Scharff (1987, 2004), Thomas Ogden (2010), and, most recently, Graham Clarke (Clarke & Scharff, 2014), for their persistence in this regard. Interestingly, the most recent authors are predominantly from North America; in the UK, Fairbairn is relatively unappreciated, like a "prophet in his own country."

Nevertheless, in considering the value of a modern-day application of Fairbairn's ideas, it is essential to question whether the theories of someone born in 1889, and who practised as a psychoanalyst with *individuals*, can possibly have continuing relevance for practitioners working with *couples*. David and Jill Scharff (2014, pp. 5-12), describing the theoretical components of psychodynamic couple therapy, put Fairbairn's model of psychic structure as a foundation stone. However, it may not necessarily be one which many practitioners can readily recall. Indeed, in order to assess the applicability of Fairbairn's ideas, it may be important to do so in the context

of considering the needs of a “real live” couple whom we can hold in mind as we evaluate the insights of his theories.

As psychotherapists, we are continually challenged to say whether the theories we favour are evidence-based. Recently, many have looked instead for *practice-based evidence*. Sutherland liked to quote Kurt Lewin’s aphorism that “There is nothing more practical than a good theory” (Lewin, 1952, p. 169). Certainly we know that Fairbairn’s theories were constructed out of closely observed clinical work; for him, the orthodoxy of Freud’s thinking about drives was insufficient to account for the continuing effects of trauma experienced by his patients.

Putting practice first, therefore, I shall set out the main features of a case study, the identifying details of which are disguised, of a couple whom I shall call John and Simon. I will then summarise key Fairbairnian concepts most applicable to couple therapy before considering how they might be useful in understanding this couple’s relationship.

John and Simon

John and Simon have come at John’s instigation to “sort out” Simon’s request for some “time out” of their relationship. All previous discussions about it have ended in stalemate. We have agreed to a consultation process of three meetings, the second of which is now awaited. At our first meeting, I learn that John (aged 39 years) and Simon (aged 27 years) have been together for seven years and that John is keen, now that it is permitted, to get married. John is perplexed and hurt to hear that Simon feels stifled and claustrophobic in the relationship and wants a “breathing space” to “be myself.” How can this be, he reasons, because he has fully supported Simon to get a degree and to have therapy when he was depressed? Simon accepts this, saying that it is all his fault, but that he has sometimes felt afraid to stand up to John. John looks baffled. He describes himself as a “self-made man,” with a successful IT business. Simon, recently qualified as an art therapist, is currently unemployed.

John is the only child of separated parents. He has lost touch with his father, who was always emotionally distant, and who dismissed him when he came out at aged 19. His mother, chronically depressed for much of her life, is now in residential care with Alzheimer’s disease. John says he and Simon regard Simon’s family as their family, and that they socialise a lot

with one another.

Simon's father died when he was five years old; his mother is a nurse. He has two older sisters, both married with families. It emerges in the discussion that Simon felt vulnerable to bullying as he grew up, and that when he was "small" there was "a big upset" for which he blames himself. This was when his mother broke up with a boyfriend to whom Simon had felt very close.

Asking them what first drew them together, I learn that John admired Simon's youthful tenacity to overcome challenges. And he could dance! Simon found John strong and confident; he knew where he was going.

My impression of John is of a charming business-like man, used to getting his way. He is somewhat impatient with the expression of feelings that he does not understand. Simon, by contrast, is much quieter, somewhat boyish, and quite watchful of others' reactions, especially John's. He is much less certain and even fearful of speaking his mind. I find them both likeable, anxious to be accepted, but am left with a sense of underlying tensions and something "forced" about their presentation. I register some anxiety in myself about the risk of my own plain speaking, of asking leading questions, although I am puzzled about what it is that Simon is afraid of and that cannot be thought about or talked through.

Key Fairbairnian Concepts Applicable in Couple Psychotherapy

Ronald Fairbairn was remarkable in the extraordinary scope of his thinking. As well as making a special study of the schizoid personality, he wrote about trauma and its impact through early neglect, sexual and physical abuse, and through war; the structure of the personality and the stages of its development; the repression and return of bad objects; the significance of the family group in development; open and closed systems; the arts; and the treatment and rehabilitation of sexual offenders. For the purposes of this article, I have grouped under five headings the concepts I consider most relevant for thinking about couple therapy.

1. The Endopsychic Structure of the Personality

This constitutes an essential starting point, because most of Fairbairn's theories stem from this premise, so much so, that near the very end of his

life in 1963, “in response to many requests,” he published *An Object Relations Theory of the Personality* (Fairbairn, 1963) as a clarifying “brief synopsis” of his theoretical position. Its 17 points are listed like a credo, beginning with: “1. An ego is present from birth” and “2. Libido is a function of the ego.” Fairbairn goes on to say that both the ego and the libido that is attached to it are fundamentally *object seeking* — from the very start of life the infant self is seeking a relationship with another. This simple assertion seems now to be uncontroversial, but at the time it was a departure from Freud’s drive theory and from Klein’s ideas about infant development. Thus, the infant self in relation with another was to be the foundation stone of Fairbairn’s new complex personality structure.

The infant’s search for a loving other is not always met sympathetically — he or she may be rejected. The mother or father (i.e., the object) may equally respond in an overly intrusive or tantalisingly seductive way. When the infant’s reaching out for love has not been met with acceptance, Fairbairn believed that the first experience of anxiety is thus separation anxiety. The infant experiences the object’s rejecting and confusing messages as *traumatic*. When the trauma is too painful and threatening, the infant deals defensively with the experience of unrequited love and resulting feelings of aggression and frustration by psychologically internalising the entire unsatisfactory experience. This means that aspects of the object (mother/father) *and* feelings about him or her are split off and repressed in the unconscious.

Because no infant-carer relationship is perfect, the experience of splitting of the ego in infancy is universal. Fairbairn saw it as the origin of schizoid phenomena. It follows that everyone is, in some degree, schizoid; the severity of this in the personality depends on how severely the infant has experienced rejection.

This can help us to understand John’s difficulties. Arguably more schizoid than Simon, due to the way in which he was held at a distance by his father’s rejection and from his mother’s unavailability, it has left John less emotionally intelligent than Simon. Separation anxiety is, however, significant for them both.

Fairbairn describes a process whereby the self, having split, is divided into three parts:

- A central (conscious) ego, attached to an ideal object or ego-ideal

- A repressed (unconscious) libidinal ego, attached to an exciting (or libidinal) object, and
- A repressed anti-libidinal ego, attached to a rejecting (or anti-libidinal) object. Fairbairn also called the “anti-libidinal ego” the “internal saboteur,” which stresses its undermining role.

In this “inner” (unconscious) world, these split-off, repressed parts develop a stable, but *alterable*, relationship with one another. Sutherland (1989) sees them as a (libidinal) primitive need-system that interacts with an (anti-libidinal) primitive control-system. The libidinal need system expresses the infant’s need to seek out his or her love object and is in constant tension with the anti-libidinal control system, which expresses the infant’s desire to distance him or herself from his or her object. The vital developmental task in growing up is whether the central ego can manage these two subsystems, to ensure that neither one overrules the other. If the need system dominates, the individual will idealise others in a continual, but unrealisable, search for satisfaction. But if the control system takes charge, the individual will avoid relationships and sabotage that part of him or her that longs to be in one.

We can see how Fairbairn’s description of the individual’s relationship with a dynamic inner world made up of three interrelating parts provides a model that readily lends itself to explaining how other human organisations interact, whether they are couples, families, or groups. To achieve what is sometimes termed “inner peace,” the individual growing up has to find — whether in parents or family or love relationships or through psychotherapy — a satisfactory balance between the libidinal and anti-libidinal systems, thus ensuring there is less need for repression and greater scope for the central ego to make relationships. In the case of John and Simon, they are each too caught up in managing what had to be repressed to respond with the full acceptance that each needs. Both have had good reason to doubt the safety of dependence. John’s multiple rejections compel him in a continual pursuit to be Simon’s dependable other; his libidinal ego seeks an unattainable lover. Simon, on the other hand, although longing for closeness to a father figure, mistrusts John’s attention. His need to escape — his anti-libidinal ego — sabotages him from committing.

Why have they come for help now? They are now legally permitted to marry. Might gay marriages face higher societal expectations in matching up to an ideal? Both men are now experiencing a disturbing return of what

has been repressed. External reality has brought to the surface John's awareness of how dependent this would-be self-made man is on a younger man; and how much he is drawn to and yearns for the love of someone who rejects him. It has also awakened Simon's awareness of his own fear of intimacy, particularly with a controlling adult.

The Moral Defence

The moral defence is formed in the process of repression. Fairbairn was struck by children's reluctance to remember experiences of abuse or neglect and concluded that this arose from a fear of reviving a relationship with a bad object that needed to be repressed. He noted that victims of maltreatment, whether by neglect, or physical or sexual abuse, preferred to see themselves as "bad" and those who had mistreated them as "good." He called this choice to keep them as good inner objects a "moral defence" because it was safer to be a "sinner in a world ruled by God than to live in a world ruled by the Devil" (Fairbairn, 1952, pp. 66-67). In essence, it was better to be guilty than helpless. We may conjecture also how this corresponds with Simon's need to see himself as the one responsible for everyone's unhappiness.

David Scharff also draws attention to how this defence helps explain why partners opt to stay in abusive relationships (Scharff, 2013). And, we can see that it might have maintained the love-hate fit between Simon and John. Feeling guilty in preference to helplessness is triggered in Simon whenever there is a prospect of getting close to John, *and* every time he tries to break away. Simon's guilt was supposedly for having "caused" the break-up between his mother and her boyfriend. What is it about that experience that has had to be repressed? We may wonder whether it has been difficult to acknowledge that the boyfriend may have been sent away because he was grooming — perhaps abusing — Simon.

3. Repression and the Return of Bad Object

I want to explore further the potential for applying Fairbairn's ideas about repression in everyday work with couples. To do that it will first be important to acknowledge the work of Henry Dicks (1900-1977).

Working as a consultant psychiatrist at the Tavistock Clinic in London, Dicks was concerned to find a means of treating the epidemic in marriage

and family breakdown happening in the post-war Britain of the mid-20th century. He was inspired by Fairbairn's ideas, that our capacity to relate to others begins in infancy; that psychopathology originates in the frustration of making relationships; and that our need for others and to feel needed by them is the basis of group life. Dicks's genius was to recognise that if he melded together Fairbairn's theories with Klein's concept of projective identification, it would create a practical basis for thinking about couple relationships. Thus was founded a new branch of psychoanalytic therapy — couple psychotherapy. In his seminal work, *Marital Tensions* (1967), Dicks set out hypotheses about couple relationships, based on the dynamics of idealisation, which he systematically and clinically tested to assess their validity in understanding couple relationship breakdown. Dicks had intuited a natural fit between Fairbairn's concept of the inherently object-seeking whole person ego and the couple as a unit made up of two instinctively object-seeking people. He realised that the relationship the couple creates develops a dynamic personality all of its own — a “joint marital personality,” bound by “unconscious forces which flow between [them] forming bonds of a ‘positive’ and ‘negative’ kind, a love-hate involvement” (Dicks, 1967, p. 8). It is thanks to Dicks that in couple therapy the *relationship* is the patient — rather than one or each of the individual partners. Dicks's method was later elaborated by John Zinner (1976) and by David and Jill Scharff (1991).

Repression is a defensive act in which bad, unsatisfactory, and even unsatisfying objects (i.e., experiences and the people they relate to) are internalised and put out of reach of awareness into the unconscious. It follows that the more that is repressed, the more impoverished the central ego becomes. An adult who is unconsciously preoccupied with managing an internal world that is disturbed by a forbidden or threatening object is somewhat handicapped when it comes to making a loving relationship because what is left to offer that relationship in his or her central ego has been rather depleted. Repressed objects do return to consciousness, however, in delusions, in breakdowns (whether constructive or damaging), in dreams, or in self-created failures. When they emerge, we might allow them to be usefully tried out in reality testing, or we may, with further repression, re-consign them to oblivion. Dicks saw the falling apart of marriages as an inevitable consequence of reality testing, when the return of the repressed has the potential to cause catastrophic damage to mutual idealisations.

Using this notion of the breach of mutual idealisations with regard to Simon and John, we can see that the threat of relationship breakdown — and the potential loss to John of Simon's family as well as his own — may force each of them to see that the strengths they first admired in one another in fact mask vulnerability. That vulnerability did not need to be acknowledged when John was the strong provider and Simon the grateful dependent. Now Simon has had some therapy, and fear has also come to the surface. There may well be fear of a deeper vulnerability the on-going sequelae of the traumas of rejection, abuse, and loss, now marked by depression and loneliness. This fear is intolerable and cannot be spoken about.

4. Open and Closed Systems

In a late paper, Fairbairn (1958a) describes the

... struggle on the part of the patient to press-gang his relationship with the analyst into the closed system of the inner world through the agency of the transference, and [the] determination on the part of the analyst to effect a breach in this closed system and to provide conditions under which, in a setting of a therapeutic relationship, the patient may be induced to accept the open system of outer reality. (p. 385)

This idea illuminates for me the dynamics of working with couples who between them have created a closed system. Ostensibly, they ask for our help to address their difficulties, but all the while they resist attempts to allow an opening up to external realities. John and Simon had reported a situation of stalemate between them. My countertransference alerted me that asking probing questions might lead to unknown dangers and perhaps cause irreparable damage. Yet, if I were to go along with the strong message that we are there to get along well and please one another, I, too, would be drawn into their stuckness. My role is rather to tolerate being the outsider, offering an external view that opens up thinking and so tests their perceptions of reality.

More broadly speaking, perhaps the measure of the value of any psychoanalytic thinker is not to be found in the number of “truths” that they have nailed that stand for all time, but the degree to which they inspire new insights. It is as if when reading them they invite us into an open system.

This kind of sharing enables practitioners to continue thinking, especially when we feel we are under fire, as when patients try to dragoon us into their closed system.

5. The Development of Dependence

Fairbairn saw development as a journey of personal growth throughout which dependence on relationships with others is essential. Starting out from the complete dependence of the baby, the journey ideally culminates in an adult's mature dependence. He says that in mature dependence, the adult can appreciate "not that the libidinal attitude is essentially genital [as in infancy], but that the genital attitude is essentially libidinal" (Fairbairn, 1952, p. 32). To achieve a state of adult genitality, the individual has to have worked through the difficulties of loving and being loved in infancy, so that in adulthood it feels possible to let go of a relationship that proves unsatisfactory. "The more mature a relationship, the less it is characterised by primary identification ... in favour of relationships with differentiated objects" (p. 42). Dependence on parents is therefore gradually widened out to a point that it is ultimately rested in culture and society. It may be very instructive to think about how couple relationships fit into a picture of development towards mature dependence. Couples like John and Simon speak to us of many partners' resistance to allowing that kind of growth in one another.

Summary and Conclusion

In re-finding Fairbairn and weighing up his overall contribution, we can observe someone who strove hard to devise theories that would serve his patients. What comes across in reading him, in addition to his astute intellect, is his essential humanity and his enormous concern for people. He believed that the determining factor in the success of any treatment was the therapist's ability to make a relationship with his or her patient. He was also open to revising his ideas. While it is clear that Fairbairn did not have all the answers to the problems that he identified (social attitudes, notably those towards homosexuality, have since markedly changed), he pursued his work until his death, leaving a legacy that could be developed and applied by others.

In this exploration of the potential application of some of Fairbairn's key

concepts, my aim has been to refresh a familiarity with Fairbairn's work to assess whether it still offers couple therapists resources to face current therapeutic challenges. While Fairbairn was not writing directly about couple psychotherapy, in my view, his observations remain insightful because they are relationally based. Although his patients were all individuals, he saw them as members of social groups — families or couples. So if nowadays, when reading Fairbairn, we gain an insight into one partner's difficulties (e.g., moral defence), we are prompted to ask what part it plays in the couple fit. Today's couples present difficulties of ever-increasing complexity and intractability — they are not just the “worried well.” Marriage may be less common, but the desire to couple remains strong. Perhaps, compared with previous generations, today's couples have lower expectations that their relationship will outlive disillusionment. Can it really be the dependable container or medium in which together they might successfully work out the conflicts that were unresolved when growing up? Maybe it could, with the help of a therapist who can model open mindedness. Against the backdrop of hope vs. disillusionment, couples seeking help have often survived traumas; the trauma of childhood sexual, physical, and emotional abuse, or of military conflict, or of neglect and abandonment. They may also be burdened by the fallout from aggression, personality disorder, mental illness, and addictions. This has a 21st-century flavour, but sadly, as I have conveyed, it would have sounded depressingly *very* familiar to both Fairbairn and Dicks.

This paper has raised questions about the relationship between theory and practice. We may want to debate how our allegiance to a particular set of theories actually influences our practice. It might be claimed that surely our choice of theoretical stance affects our understanding of our countertransference and how we should frame our interpretations. We may still be uncertain, however, as to what is *mutative* when it comes to choosing the appropriate technique. When should we give voice to our countertransference? Are our interpretations really as significant as the relationship we create in the threesome? Reading Fairbairn, however, confirms for me that a good grounding in theory helps to contain the therapist, such that there is less temptation to respond to the countertransference through enactments and so perpetuate the couple's closed system. Furthermore, my clinical experience endorses that of Fairbairn, in suggesting that, ultimately, the degree to which we can hope to offer troubled couples containment is going to depend both

on our capacities to relate to them, and on our willingness to be open to new ways of thinking, some of which may need to be rediscovered from the past.

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