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## BOOK REVIEW

*The Klein-Winnicott Dialectic: Transformative New Metapsychology and Interactive Clinical Theory*, By Susan Kavalier-Adler, London, Karnac, 2014, 290 pp., \$53.95. (ISBN 978-1-78049-124-0).

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This new book by Susan Kavalier-Adler takes on the timely project of transcending the longstanding divergence between the psychoanalytic approaches of Melanie Klein and D.W. Winnicott. With the possible exception of Wilfred Bion, these are arguably the two most influential intellectual descendants of Freud among North American analysts, and while their ideas spring from a common source, the differences between them (and their followers) continue to divide the field. Given the long history of this schism, Kavalier-Adler's project represents the height of ambition, as reflected in her subtitle, "Transformative New Metapsychology and Interactive Clinical Theory." In agreeing to review this book I became aware of anxiety about my anticipated disappointment—it seemed improbable that this book could measure up the scope of its ambition, and I was concerned about the kind of review I might end up writing.

So it is with relief that I can report that, by and large, this book lives up to its billing. Kavalier-Adler has achieved a rare feat; she has written a book that breaks intellectual ground in approaching the differences between Klein and Winnicott in a way that simultaneously preserves and overcomes those differences as she develops a position that benefits from both visions. Kavalier-Adler develops her ideas with refreshing clarity and

directness, simplicity without any apparent sacrifice of subtlety. This is a book that is sure to have a real and immediate impact on the reader's clinical work, not simply by the presentation of ideas about technique, but more importantly, through the articulation of a model of therapeutic action that reorients the reader to clinical process, particularly in relation to those patients who so perversely seem to prefer self-destruction to the possibility of emotional growth.

One novel aspect of Kavalier-Adler's approach involves the method by which she seeks to chart her middle path between Klein and Winnicott. Rather than either a strictly theoretical or clinical approach, she finds her way toward common ground by way of *biography*. Kavalier-Adler draws primarily on Grosskurth's (1986) well-known biography of Klein and (to a lesser extent) Rodman's (2004) book on Winnicott to show the way their personal backgrounds shaped the limits of their respective theories. As she announces at the outset, Kavalier-Adler sees the principal factor preventing the rapprochement of Klein and Winnicott in the former's insistence on the death instinct, which (in her view) is intrinsically related to Klein's systematic neglect of the external, environmental factor in development. Kavalier-Adler makes her case by showing, through a detailed consideration of Klein's relationship with her mother (Libussa), the extent to which Klein failed to emancipate herself emotionally. Kavalier-Adler describes Libussa as a malignant narcissist who "combined the idea of love with that of endless sadistic torture, to the point of murdering, the psyche of the other" (Kavalier-Adler, 2014, p. 50). Libussa is depicted as systematically undermining any attempt at having a separate life, including after the point that Klein married and left home. Because Klein could never adequately individuate from her own mother and undergo a healthy mourning process, she remained forever blind to

the central importance of the maternal relationship more generally. The crucial link in this equation is supplied by Kavalier-Adler's original concept of the "*demon-lover complex*."

### Klein and The Demon-Lover Complex

The "demon-lover complex" is a concept that Kavalier-Adler has used since the mid-1980's to describe an internal dynamic configuration evident in a number of women artists (e.g. Virginia Woolf, Diane Arbus, Anne Sexton, Emily Bronte, and others). Her writings on the subject are quite voluminous, and it appears that Kavalier-Adler may have assumed that readers would be at least somewhat familiar with this concept from the start.

Consequently, for the newcomer this pivotal idea remains somewhat enigmatic for the first forty pages or so, which contributes to some initial frustration. What follows is a brief primer for the uninitiated. According to Kavalier-Adler, the women artists whom she has written about all suffered from a similar type of early emotional disturbance, in which an initially attuned mother during the symbiotic period of infancy responds poorly to her toddler's individuation during the second year. Not only are these mothers misattuned, they are actively hostile to evidence of the child's emerging separateness. In order to maintain their crucial emotional tie to the mother, these children defensively identify with the latter's pathological response, which forms the basis of a split-off self-representation that becomes infused with the child's unexpressed rage. As with Fairbairn's (1952) tie to the bad object, this split-off maternal imago facilitates idealization of the external mother while also providing some form of inner companionship to serve as a bulwark against states of utter aloneness.

While this formulation is not original (the debt to Fairbairn is fully acknowledged), Kavalier-Adler applies it in novel form, both in accounting for certain of its dynamics and, most originally, as a way of explaining the origin and persistence of Klein's notion of the death instinct. In elaborating the development of the "demon-lover," Kavalier-Adler starts with Fairbairn's basic concept of the internalized bad object, but adds the developmental events of the Oedipal phase, wherein, because of inadequate individuation, the turn toward the alternate parent miscarries, and the two parents are merged into an idealized image, which is then eroticized. Splitting and projective identification ensue, with the depriving and enraging aspects disavowed and the eroticized and idealized parts projected onto an external object, who thereafter serves as a "muse" who inspires creativity. This idealized, inspirational muse figure is maintained via a split from the sadomasochistically charged internal demon-lover, which, when disappointment ensues, inevitably takes the place of the inspirational muse. "Filling the inner void with a fictitious idealized other, an all-knowing source of muse-like inspiration, is destined to result in the other eventually being perceived as a black and haunting demon" (Kavalier-Adler, 2014, p. 13). This demon-lover is a product of the early, traumatically frustrating experience with the mother, now both idealized and infused with dissociated rage. It is part of a closed internal system, unmodified by internal love connections, and is subjectively experienced as "sucking one irresistibly and terrifyingly into a dark, death-like void" (ibid, p. 13).

As the above-quoted passage illustrates, Kavalier-Adler sees the experiential basis of the concept of the death instinct—the pull toward nothingness, toward non-existence—as originating in the demon-lover complex described above. For her, the drive toward nothingness is a function of an eroticized and idealized bad internal object, a consequence

of inadequate maternal attunement and responsiveness during the separation-individuation process. This formulation is vital for Kavalier-Adler's central thesis regarding Klein and Winnicott. In her view, Klein maintained the idealization of this state by universalizing it, and by doing so continued the defensive denial of the obliterating effect of her own mother's tyrannical form of parenting.

To put this in different terms, Kavalier-Adler sees Klein as never able to recognize the impact of her mother's narcissistic pathology on her own development, and subsequently was never able to engage in a mourning process that might allow her to emancipate herself emotionally. She remained tied to her mother in the form of an internalized bad object, and the external image of mother—and mothers—remained idealized thenceforth. Consequently, she was never able to recognize more generally the role of mothers in engendering pathology in their children. The unmodified rage that Klein observed in her child patients was attributed to something purely internal, a 'death instinct,' rather than a natural reaction to the frustration of early emotional needs.

### The Dialectical Relation with Winnicott

In Kavalier-Adler's view, Klein's central contribution to what she terms the "Klein-Winnicott Dialectic" is her implicit notion of development taking place through a process of integration. This notion is rooted in Klein's perspective of the mind continually moving through two primary modes of organization—the paranoid-schizoid and depressive—with the former characterized by splitting, the latter by integration. For Klein, the crucial factor determining the potential for integration lies with the child's capacity to manage hatred and aggression. When destructive impulses are felt to be overwhelming to the child's

relation to a good object, splitting is predominant. When the child can begin to tolerate recognition of ambivalence, integration becomes a possibility, and with it, care, love, empathy, symbolic thought, self-reflection, creativity—in short, all the markers of psychic maturity and health.

In her attempt to put Klein's theory of integration on a more sound developmental footing (and setting the stage for the dialectic with Winnicott), Kavalier-Adler underlines the important link made by Klein between the depressive position and mourning. In Kavalier-Adler's words, "despite Melanie Klein's deficiencies in her own mourning process, she was the psychoanalytic theorist who discovered how intricately aggression was a part of the mourning process and of the experience of object loss" (Kavalier-Adler, 2014, p. 109). The link between mourning and depressive position integration was a growing area of concern for Klein beginning with her 1940 paper, "Mourning and its relation to the depressive position" and continuing through the 1950's. Somewhat ironically, it is in Klein's 1957 paper, "Envy and Gratitude" that Kavalier-Adler locates the critical point of agreement between Klein and Winnicott that sets the stage for her dialectical project. The irony rests in the fact that it was in this particular paper that Klein famously articulated her notion of innate envy in infancy, an idea that for Winnicott was a bridge too far. However, as the author points out, Klein also articulates in this paper, more clearly than before, the importance of internalizing the analyst as a good object in the psychoanalytic process. For Kavalier-Adler, this concession "opens the door to [the] broader view of internalization that Winnicott developed" (ibid, p. 90), in that it begins to envision the patient and analyst—and implicitly, the mother and infant—as an *open system*, rather than the closed system model

of the death instinct, in which the actuality of the environment appeared to count for so little.

It is in her chapters on Winnicott that the full scope of Kavalier-Adler's Dialectic comes into view. What she articulates there is what might be called an open system, developmental version of Kleinian thought, in which the holding and containing relationship with the mother initially facilitates basic self-regulatory process, then mediates unfolding psychic integration that is repeatedly punctuated (and potentiated) by a series of losses—most importantly loss of the mother of early symbiosis during the separation-individuation process. To varying degrees, these losses evoke aggression, as well as the primitive defenses described so well by Klein, i.e. splitting and projective identification. A critical issue is whether the mother-child dyad can absorb these forms of aggression, or whether instead the dyad “breaks down” and splitting processes result in a rupture of the “core cohesive self.” It is this latter outcome that leads to splitting as a stable aspect of character, resulting in various forms of borderline personality organization (cf. Kernberg, 1975).

Much of this reads as familiar, resonating with the earlier writings of Mahler, Masterson, and others<sup>1</sup>. Kavalier-Adler's more original contribution lies in her use of Winnicott, particularly his concept of transitional space, in finding the dialectical link (appropriately, the “connecting space”) with Klein. In a nutshell, Kavalier-Adler's view is that, emotionally healthy children make it through the emotional storms of separation-individuation without an overabundance of uncontainable aggression, which facilitates growing integration and an emerging capacity to tolerate affect, including mourning for the

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<sup>1</sup> These are authors who have arguably been eclipsed by modern Kleinian views in recent years.

symbiotic relationship with mother. Consequently boundaries become clearer and the child experiences growing psychic autonomy, which allows for the tolerance of a psychic gap between mother and child. This is Winnicott's transitional stage, in which the child begins to have the experience of being "alone in the presence of mother," and which only becomes possible with the achievement of depressive position experience, with the resulting modicum of psychic separation and self-regulatory capacities.

It is out of this ongoing transitional experience, supported by the mother's non-impinging but helpfully available presence that the child begins to internalize psychic space, so critically important for the development of a rich inner life, for creativity, and for the capacity to independently manage one's own emotional experiences. For Kavalier-Adler, as for others similarly influenced by Mahler and Winnicott (notably Bach, 1985, 1994), transitional experience is what we hope to provide through the psychoanalytic process, and it is what those familiar features of the psychoanalytic setting are so well-suited to—that peculiar combination of intimacy and separateness that our couches and emotionally-attuned neutrality provide.

In the remainder of the book Kavalier-Adler continues to build on these core theoretical ideas through the presentation of clinical vignettes as well the examples of Virginia Woolf and Sylvia Plath. Her clinical writing is richly detailed and her application of these ideas compelling. You get a sense of how Kavalier-Adler works, not just through her formulations or excerpts of her interpretive comments, but more importantly, through the overall clinical stance she demonstrates toward her patients, which is fitting. In perhaps its most distilled form, Kavalier-Adler's own distinctive version of psychoanalytic theory elevates above all else the importance of facing as fully and truthfully as possible the

sometimes unbearably painful losses that life inevitably brings. For her, the psychoanalytic process provides an emotionally engaged medium that offers the possibility for absorbing these inevitable losses, for healing fractured personalities and bolstering the capacity to bear responsibility and remorse, and for expanding and enriching inner psychic space. The clinical stance needed is one of emotionally engaged but non-intrusive presence, a dialectic not only of Klein and Winnicott, but also of interpretation and relationship, insight and empathy.

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