# Adolescent Masochism

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# **Adolescent Masochism**

Latency-age masochistic fantasies persist into adolescence. They acquire a manifest form dictated by progressions and regressions in object relations and cognitions that are specific to the phase of adolescence. To understand the nature of the manifestations of masochism in adolescence, it is necessary that one understand their origins in the previous phases from which they have emerged. The manifestations are masochistic braggadocio, masochistic perversions, adolescent shyness, aspects of prepubescent schizophrenia, incipient masochistic character traits, and the misuse of free association during psychoanalytically oriented psychotherapy sessions. The genetic complexes of origin that give structure to the forms of adolescent masochism may be studied through a review of the life phases of masochism.

#### The Life Phases of Masochism

Masochism, the passive experience of aggression accompanied by painful and excited affects, appears in all of the stages of human life and development. Its manifestations change with each age. Variations of intensity and modifications of the form of masochism result from phase-related alterations in object relations and cognition. Each developmental period contributes a unique step in the march of manifest masochism. A description of the steps follows.

#### Primary Masochism (The First Months of Life)

In the very earliest months of life, there is objectless, unbridled aggression. This takes the form of screaming, crying, and thrashing about, which only hurt the crying child, who alone suffers whatever discomfort there is to feel and is exhausted in the end. Parents, as witnesses, may feel pain at the sight of the pained child. Their pain does not intrude upon the psychic reality of the child and does not take part in the interaction.

The masochism of this age is called *primary* (as in primary narcissism), for in his world of feebly perceived boundaries, there is no concept of an object and the child is limited to himself as persecutor. In

later years, regression to this level of pre-object relations colors those clinical states in which there is little relatedness to the therapist and in which symbols are used to evoke moods rather than to communicate.

#### Protosymbols (The End of the First Year of Life)

The introduction of the parents as primitive persecutors awaits the development of *protosymbols*, which consist of bodily sensations (affects) or organs of the child's body, which symbolically represent other affects or organs. As cognition matures, they may be used to represent parts of the parents. Through such protosymbols, aggression aimed at the parent can be experienced as turned upon the self.

With the development of self-object differentiation, the fused libidinal and aggressive energies of the child can be perceived by the child as directed outward, toward an object. Should the parent withdraw from contact or from view, the child can persist in contact with the parent through an internalized memory of the parent. This internalized image is called the *introject*. The aggression that had been directed toward the object accompanies the introject. It, too, is directed inward toward the self of the child. This produces a paradigm for the experience of self-directed aggression. It is called *secondary masochism*. This becomes the basis for the patterning of relationships in which masochism involves objects. Intensification of the secondary masochistic experience by actual aggression on the part of the parents enhances the masochistic fantasies that will color the relationships of adult life. The resulting heightened tolerance for such relationships permits people to enter them without challenge.

A protosymbol creates, in psychic representation, a synthesis of self and parent. The child's aggression, directed toward the protosymbol, is experienced as directed toward the self (i.e., masochistically).

Since the parent is the only reality object of which the child is aware, the parent is fantasized to be the source of the pain. Actual parental aggression, either spontaneous or stimulated by the child, can be adapted by the child as an actualization (i.e., appearance in reality) of these fantasies. In this way, a real event can be recruited to serve as a fantasy derivative. This activity intensifies between 15 and 26 months, and gives a provocative character to children's behavior during this period. This gives rise to its name, the "terrible twos." In adolescence, the child's response to the passivity that is felt when strivings

for independence clash with parental power is often a derivative of the experiences of this earlier phase.

#### Psychoanalytic Symbols (26 Months)

At 26 months, there is the development of repression and its concomitant in thought content, psychoanalytic symbols. There is some lessening of the actualization. This is the result of the use of fantasy to drain off some of the child's aggression. Sadomasochistic (anal-sadistic) fantasies persist (Blanchard 1939). They tend to be expressed with siblings and peers in place of parents. At this point, children begin to experience masochism as the sadism of symbolized whole objects that has been directed at the sufferer. This step in cognitive development produces changes during the prelatency period.

#### The Prelatency Period (26 Months to 6 Years)

The considerable use of symbols to interpret the environment causes the child's relation to actualities to be primarily intuitive. Memory emphasizes the use of affect and sensation. This produces recalls of totalities. External characteristics, rather than the abstract, intrinsic nature of things and situations, are used to recall the past and interpret the present. As a result, logic is not brought to bear to correct misapprehensions, such as those produced by regressions to the cognitive world of primary masochism.

During this period, masochistic fantasy may undergo three vicissitudes:

- Aggression and cruelty from parents, caretakers, or peers in actuality may reinforce the aggression that fuels it.
- Mastery through fantasy may dissipate it. Fantasies that use psychoanalytic symbols can effectively dissipate latent fantasy and drive. These symbols populate persecutory fantasies, animal phobias, and fears of amorphous attackers in the dark experienced when going to sleep.
- 3. Whether masochistic fantasy is reinforced or dissipated, it is subject to the modifying effects of the phallic phase. Progression through phallic-phase interests (competition, objectrelatedness, penetrative urges, oedipal concerns) and parentally encouraged progress in cognitive development that aids in the neutralization of drive energies (i.e.,

acquisition of verbal conceptual memory organizations) can modify the manifest strength of masochism. There may result a lessening of the anal-sadistic energy cathexes of the masochistic fantasies to the benefit of more mature functions.

#### Latency (6 to 12 Years of Age)

As the child passes through the sixth year of life, the threatening nature of oedipal concerns calls regression into action as a defense. As a result, anal-sadistic drive energies are recathected.

This does not result in manifest masochism. Ego mechanisms of restraint mask it during this period. Provocative aggressive stimuli from the environment are buffered by the fantasizing function of the ego, which produces defensive play fantasies, and these discharge drive and master conflict on a symbolic level (see Sarnoff 1976). As a result, the child appears to be calm, cooperative, and educable. These clinically observable traits dominate behavior from 6 to 12 years of age, the latency period.

Play fantasies routinely contain highly symbolized sadomasochistic content. Cops and robbers, war stories, kidnappings, and cruel elements in fairy tales are examples of this. Manifestations of masochism during this age period are primarily in the form of fantasy experienced internally or projected into an interpretation of relations with peers. The older the child, the more realistic is the source of the symbols called upon to represent the masochistic fantasy.

Failure of the ego structures of latency permits the appearance of manifest derivatives of masochism. Foremost among these are playground teasing, night fears, and paranoid accusations of peers during periods of stress.

### Adolescence (Adolescent Masochism in Manifest Pathology)

The *onset* of adolescence is heralded by an intensification of the anal-sadistic drive organizations which have been blunted by the defenses of latency. For the most part, the defense structures of latency hold masochistic fantasies and trends in check rather than process them. Therefore, children enter adolescence with latent masochistic fantasy content little changed from what it had been in the phallic phase. In early adolescence, the fantasies are manifested in thinly masked derivatives which use reality elements rather than toys as symbolic representations.

One of the clinical characteristics of the psychological shift to adolescence is the loss of potency of toys and other play symbols to serve as substitute objects and tools for the discharge of drives and the mastery of conflict. There is thus an increased use of parts of the body, and of people and peers, to express, experience, and manifest masochistic fantasies. Manifest fantasy fails to serve this need; the world of reality and its parts are then recruited to provide an arena in which masochistic fantasies can be lived out. In this way, the masochistic fantasies that had fueled the play fantasies of latency are carried over to become the foundations for masochistic character formation.

One of the tasks of adolescence is disengagement of the drives from anal-sadistic discharge patterns and from character traits derived from them. This is done either through removal (Katan 1937) or the resolution of the oedipal conflicts, which, as we have noted, motivated the regressions that intensified masochistic drive activity during the latency years. This process of resolution can often be recognized in the masochistic derivatives seen in adolescence.

In early adolescence, the thinly masked masochistic derivatives can be seen for the most part in masochistic braggadocio, masochistic perversions, and prepubescent schizophrenia. In later adolescence, the failure of resolution of masochistic trends can be followed through the clinical study of such derivatives of masochism as incipient masochistic character traits and through an explication of the way masochism intrudes upon the use of free association during psychoanalytic sessions.

#### Causative Factors in Adolescent Masochism

Traumatic and painful experiences are common in early childhood. Early trauma and persistent masochistic fantasy make a child vulnerable to the development of masochistic traits in adolescence. This sets the stage for the appearance of similar character traits in adulthood.

There are other determining factors in addition to early life trauma and masochistic fantasy—which, after all, are universal—that have clinical significance for manifest masochism. These other elements lead to specific forms of masochism and, in some cases, even determine whether masochistic elements will dominate lives. Patients in general have tales to tell of pain at the hands of the parents. Parental behavior that is interpreted as cruel does not account for those who are free of symptoms

although they have the same parents as those who are afflicted. Among the additional determining factors that encourage manifest masochism during adolescence, developmental variants in the cognitive organization of the mind stand out.

There may be inadequate shift from evocative to communicative symbols; and in the developmental march of symbols, the choice of objects for representation—which shifts away from fantasy objects toward the self briefly before it goes on to enlist peers in the roles of persecutors and lovers—may remain fixated on the self as object. Projection undergoes many and marked vicissitudes, providing a multitude of variants in the defenses used to express aggression (Sarnoff 1972). Furthermore, there are remarkable variations in the characteristic way of dealing with introjects in early adolescence. These changes in the cognitive styles of defense organizations contribute to the characteristic appearances of masochism in adolescence.

#### Masochistic Derivatives in Early Adolescence

#### Masochistic Braggadocio

Early in this century, and late in the last, there existed at the University of Heidelberg in Germany highly regarded social organizations known as dueling clubs. Ostensibly they served those who wished to learn fencing. In the broader social context, they served to identify the elite. Since the end of a duel was reached with the inflicting of a wound that drew blood, members of these clubs could be easily identified through the permanent scars on their faces, which proclaimed proudly to the world that they had been cut and had bled. Even in our own day, such a culturally adapted proclamation of borne pain is seen in fraternity pins that identify those who have undergone hazing.

This late-adolescent expression of masochism (a tendency to brag of suffering) finds a parallel in early adolescence. It is at this younger age that there is an attempt to process and master painful and traumatic experiences through re-evocation through words. A verbal context is used which makes the person's suffering seem heroic. I call this behavior masochistic braggadocio. There is a kind of Heidelberg scar mentality to this reaction. The image of manliness or courage is generated by this pseudo-strength display.

One child, upon returning to analysis after the summer break, said, "In camp we really had it tough. We walked for miles without stopping. I got blisters so big that they bled." The affect was pride. He sought to evoke and to awe. There was nothing here that would serve the search for insight. I wondered as he spoke if the child was complaining or bragging.

Looking more deeply into the psychology of the youngster who told of the blisters, there could be found a characterological context in which any form of pain or discomfort (experienced or remembered) was avoided rather than confronted. Experienced pain was bragged of as a counterphobic means of mastering this fear of pain. Painful future activities were evoked prospectively. Placing himself in future danger was a form of advanced bragging rather than future planning.

He once called an end to his treatment (with his father's consent) so that he could join the high school football team. Both he and his father agreed that participation in sports would affirm his masculinity and counter doubts about his gender identity. He planned to miss many, sessions and possibly to interrupt treatment. He missed but one session in the process. On the day of the second session to be missed, he arrived unannounced in my waiting room at his usual time. When I asked him what had happened, he told me that he realized when the first few plays were run right through his position that it hurt to be a football hero. He was interested in glory but not discomfort.

One of the elements that potentiate adolescent vulnerability to masochistic conflict resolutions is a failure in the development of the symbolizing function. There is a failure in negotiating the developmental shift from evocative to communicative symbols in expressing drive manifestations. The more primitive evocative symbols continue to evoke feelings and memory of trauma in the service of discharge without mastery. They are not used for communication, or for reparative mastery. They are not viewed from a therapeutic distance. For therapists who have worked with adult cases, such activity is familiar: it occurs in repetitive traumatic anxiety dreams.

The person in late latency-early adolescence who repeats masochistic patterns endlessly exhibits clinical failure of mastery through repetition. The cause of this is attributable to a regression to the objectless "primary" masochism of the earliest days of childhood.

This works together with the fact that for these people the symbolizing function has not matured to the point that symbols can be used for communication.

A communicative level of symbol use supports the discharge of drives and the mastery of trauma in a corrective reality context. It also reinforces the guarantees of the autonomous functioning of the ego in

relation to the id. Failure to achieve a communicative level in symbol formation results in symbols (evocative) that can only evoke inner moods and past events over and over again.

In adolescence, evocative-mode symbols used during free association in psychotherapy attempt to draw sympathy from the therapist and evoke prior painful affect and ego states instead of serving psychotherapeutic goals. A form of repetition compulsion is produced. In the psychotherapy situation the therapist is converted from a helper, aiming his skills at adjustment and the future, to a witness to past pain that the patient proudly shares. What does the patient derive from this situation? Narcissistic injury is overcome. The masochist's narcissism is served when he can present his pain as an experience without equal. The pain of recent experience is thus mastered at the expense of the long-range goals of the therapy.

#### Masochistic Perversion

The following case (presented in Sarnoff 1975) illustrates variations in masochism associated with developmental changes in the symbolizing function. There is a march of symbols used as the protagonists in persecutory fantasies and their derivatives that accompanies the transition through latency and adolescence. These are:

In early latency

Persecutory symbols experienced in fantasy

At the end of latency

Parts of the body used as symbols to express masochistic fantasy

In early adolescence

Enlistment of real people as symbols to express masochistic fantasy

**During** maturity

Using symbols to communicate reality

As the presentation unfolds, consider the effect on the psychopathology of the adult should the

source of symbols be fixed at one of the above points in the developmental line, rather than progress.

George was 16 ½ years old when seen. He was the son of divorced parents. His mother had left the marriage when she learned that his father had teased, beaten, and tortured the child for no apparent reason whenever he was left alone with the boy. The patient could recall these incidents as occurring when he was but 2 years old. The boy lived with his mother after the divorce. His latency period was characterized by unexceptional evening fears early on and a strong capacity to develop states of latency (see Sarnoff 1987a). When the boy reached the age of 11, he developed erections every time he saw himself or another boy without a shirt on. He could produce an erection by standing nude before a mirror. He responded to these erections by making cuts into the skin of his back with a knife. The appearance and flow of blood was accompanied by a release of feelings similar to orgasm. When he had achieved physiological ejaculation and orgasm readiness, he found that it was possible for him to masturbate successfully with a fantasy about a girl. He reported no cruelty in this fantasy. When he began dating at the age of 16, he sought to hide his relationship with the girls whom he had chosen for their common characteristic of full, voluptuous figures. These characteristics, as he viewed it, lowered him and caused him to feel embarrassed in public.

This pattern is not unusual. It has been described elsewhere in the literature (Werner and Levin 1967). The pattern starts with early exposure to a sadistic parent. This reinforces anal-sadistic fantasies, which are maintained in repression after 6 years of age by latency defenses. At age 11, as the latency defenses weaken, a masochistic masturbation fantasy becomes consciously manifest. In it there is actively and passively relived masochistic submission to the sadistic parent of infancy. The fantasy is not confined to mental expression. The representations chosen as symbols are not fantastic or distorted images. They are real, of the same sex as the child, and acted out with real objects (knife and self). With the onset of ejaculation, the representations become real people, who serve as sadistic heterosexual objects.

In consonance with the developmental march of symbols, the manifestations of masochism change with growth, demonstrating for each stage their own characteristics, and varying degrees of visibility and implied degree of pathology. The developmental events of adolescence can uncover previously undetected fantasy structures, such as those that produce masochistic behavior, and can make visible structural weaknesses and aberrations in ego formation. These weaknesses and aberrations, in turn, often persist when adolescent development is blocked, or they may become less virulent when normal development causes their expressions to be clothed in less distressing guises.

#### Adolescent Shyness and Prepubescent Schizophrenia (Pathological Relationships with Introjects)

In both adolescent shyness and prepubescent schizophrenia, adolescent masochism appears to be a manifestation of the persistence in memory of parental introjects.

Adolescent shyness is a common condition, occurring primarily in early adolescence. It is characterized by an avoidance reaction to contacts with peers or adults in authority on account of false beliefs. The contents of these false beliefs are feelings of inferiority or defect, which the child feels would become known to, or recognized by, others and would result in the child's rejection.

Prepubescent schizophrenia is a rare condition, with onset usually after 11 years of age. It is a variety of childhood schizophrenia, of relatively late onset. The cardinal signs of this condition are delusional thinking involving pain and aggression directed toward self or others, poor peer relations, and an absent history of projected introjects (night fears or phobias) during early latency.

#### Introjects and Adolescent Masochism

The paradigmatic model of a masochistic relationship can be seen in the context of a punishing parent confronting and disciplining a defenseless child. The conduit that carries this context from early childhood through latency and then into adolescence and beyond is the introject. The introject refers here to the product of the human tendency to respond to loss by re-evoking the memory of a departed loved one. Departure can refer to brief partings, deaths, or loss of the *sense* of the presence of the object if engendered by cognitive maturation that changes the way things are seen. This last type results in apparent changes and losses in the environment. The memory of the lost one becomes a source of replacement. If the lost one was primarily experienced in the context of a masochistic relationship, then duplicates of such relationships may be sought as a means to recapture that which was lost. Thus, remembrance of things past can be experienced in newly generated words and experiences. The persistence in memory of parental introjects in the context of early traumatic situations becomes the source of multiple actualizations patterned after the original. When these actualizations place the adolescent in the passive role of the child, the situation is called masochism.

When the child internalizes a relationship, the seed of an introject is produced. Such an introject may grow to become the raw material of fantasy. Thenceforth, the youngster will have a pattern after which to fashion his relationships with later significant, and sometimes loved, objects.

The impact of such masochistic paradigms on later relationships is especially strong when there is

exaggeration of parental aggression. This can occur when the child projects his own aggression into his interpretation of the parent's behavior. For instance, if a child in the early-childhood situation projects his own anger onto the parent, the parent's aggression will be exaggerated in the memory of child, with the result that parental aggression in the model situation becomes more marked. At the least it will be remembered as such. Should the child then base his parental introject on this false image of the parent, he will acquire a distorted (fantasy) base upon which to draw when a need for re-evocation reshapes his world. This major factor in intensification of adolescent masochism is called *projective identification* (identifying with parents whose anger is perceived to be stronger than it really is as the result of projection of the child's own aggression onto the parent).

Distortions in early parental introjects can lead to a distortion of self-image as well. When the introjected parent is seen as hostile or cruel, self-image declines. This is especially so in those instances in which the child sees all the manifestations of thought or ideas within himself—even those derived solely from the image of the parent—as personal characteristics without origins external to himself. This psychic self-perception makes a child vulnerable to the occurrence of adolescent masochism, especially in the form of adolescent shyness. In that condition, the avoidance is the product of a projection of a low opinion of oneself into the thinking of peers.

Other factors can create vulnerability to masochism in early adolescence. Among these factors is cathexis of the internal fantasy in preference to reality. This leads to distortions in the perception of the world and impairs object relations. Another factor is ego impairment in the ability to differentiate self-image from the hostile internalized parental imago (Mahler 1955). Those factors lend power to the ability of the child to intensify introjects—colored by parental aggression—to the point that memory becomes strong enough to overwhelm the child's interpretation of reality, in later life.

## The Phenomenology of Adolescent Masochism

In conducting a psychotherapy that deals with masochism in adolescence, it is important that the therapist realize, and interpret to the patient, the fact that situations that are feared in advance or are repeatedly experienced subjectively as painful are interpretations of reality rather than reality itself. Although people and situations vary, the content of the fears and complaints of the patient are consistent,

and are marked by sameness. Latent fantasy, which takes its shape from internalization of a child's relationship to a hostile punishing parent, becomes the model for masochistic relationships. In adolescence, when the discharge of drives shifts from manifest fantasy formation to actualization (living out of fantasy), peers are recruited to serve as symbols of the punishing introject.

As symbols that are more human and real-appearing come to be tolerated better with the move into early-adolescent cognition, real people can be recruited to serve as manifest symbol representations. Reality interactions with others begin to take on the masochistic cast prescribed by the persistent child-introject relationships in latent fantasy content. Clinically, this may be seen in the preference for painful experiences in the presence of potential comfort that occurs in the real life of adolescents. The well-trodden paths of masochism give the security of familiar territory. The child tends not to stray far from the path. The devil that one knows feels safer than the angel who comes as a stranger. Should the pattern become fixed, the fantasy, now characterological, will influence the pattern of object relations in adult life.

Adolescent masochism may be viewed as a living out of the relationship that existed between the prelatency child and the hostile introject. What appears to be reality takes form from the ways of the introject (the parent remembered).

#### A Comparison of Adolescent Shyness and Prepubescent Schizophrenia

In adolescent shyness, a masochistic confrontation is feared and avoided. In prepubescent schizophrenia, the masochistic fantasy is experienced with psychotic intensity, while the sense of reality is strongly linked to fantasy at the same time that reality testing is suspended.

A third situation exists: In this situation, peers are interpreted to be, or induced to be, cruel. (This is *masochistic characterological behavior*). In reality situations, cathexis of inner fantasy diminishes, permitting a certain amount of cathexis of reality. Relationships develop with real objects. The relationship is colored by the same driven need to relive the past through interactions with new objects that occurs in the peer relationships of prepubescent schizophrenics, who complain of being treated badly. Again, peers are interpreted to be or induced to be cruel. In the child with masochistic character

traits, delusions are not present. The impact of the model role of the introjected hostile parent who punishes in fantasy is the same. The pattern of behavior is lived out with real objects rather than experienced as fear fantasies. (Notice in this regard that among the cases to be presented, J.D. contains elements of both and may be considered a transitional case, whereas L.L.L. is dominated by an aspect of activity that is confined to his inner world.) However, in adolescent shyness there is fear of pain at the hands of real objects. In adolescent shyness, there is a nearly delusional fear that entails real people.

#### **Adolescent Shyness**

Adolescent shyness is characterized by an avoidance reaction to contacts with peers or adults in authority. This avoidance is related to feelings of inferiority or defect. The child feels these would be known or recognized by others, and rejection would result. Although object relationship is avoided, real objects are recruited to serve in the child's fear fantasies. A shift to a real object in the outside world as the symbolic representation of that which appeared as the persecutor in the typical latency-age persecutory fantasy occurs in early adolescence. This sets the stage for turning the manifest form taken by drive derivatives from persecutory fantasies to masochistic character activity. Adolescent shyness as reflected in the following case is an early manifestation of this dynamic.

Vicky went away to summer camp for the first time at the age of 12. She became quite depressed and frightened for fear that people would not like her or would find her boring. She spoke of herself as boring. She had projected her opinion of herself to others. When younger, she activated feelings of boredom when she needed to suppress memories of aggressive scolding on the part of her mother. In effect, her view of herself as boring was a defense against an aggressive identification with her mother. An introject had been formed that she could not differentiate from herself. A sense of being boring was substituted for aggression. In this way she defended against an activity which would have made her too much like her mother. Her attempt to individuate herself from her mother was furthered by her projection of her mother's aggression onto her peers, who were seen as aggressors.

Andrew, at the age of 11, clowned in school to hide his fears he would be rejected by peers as he was repeatedly rejected by his psychotic mother, who had beaten him and had yelled at him since he was a child. He shouted down and belittled teachers. Analysis revealed that this behavior mirrored his mother. He identified with her as the aggressor and then had great difficulty differentiating himself from this internalized image of his mother. He then projected this image of himself derived from the maternal introject into the minds of teachers and peers and clowned to defend himself against their criticism, which in reality was his own. His provocations often enlisted his teachers and peers in hostile activity in the mode of his mother. His sufferings cast his early adolescence in a masochistic light.

These youngsters tend to ascribe to others the view they have of themselves. In turn, they confuse

their self-image with the early hostile mother imago. The hostile mother imago is intensified by introjection during teenage separations, making the situation worse. Because of this dynamic, separations provoke crises. In this way there is created a masochistic context to accompany the sullen mood of loneliness that is part of teenage separation experiences.

# **Prepubescent Schizophrenia**

Perhaps the most striking clinical context in which to study the effects of the relation of introjects to adolescent masochism is found in prepubescent schizophrenia. In this late-onset form of childhood schizophrenia, poor peer relations, delusional thinking, and an absence of the normal neurosis of latency are characteristic. In contrast to normal children, who begin to project introjects by the age of 4, these youngsters begin to project introjects at the age of 11 (Bender 1947). Hallucinations in childhood schizophrenia are internal in apparent point of origin during latency and external in apparent point of origin in adolescence and adulthood. In those with this late-onset form, auditory hallucinations are experienced as coming from within their bodies, as is typical of younger childhood schizophrenics. They experience internal persecutory fantasy objects, which are derived from introjects; however, the symptomatology is often blurred by the presence of masochistic object relations. They begin to get into scrapes with others, since they are entering upon the age at which for them peers can first be used as symbols. In essence, at this age the memory of the introject can be evoked through employing a peer or other person in the environment whose characteristics allow him or her to be used as the armature around which the masochistic fantasy is shaped. This manner of dealing with objects characterizes masochistic object relations.

Typical of the type of prepubescent schizophrenic who is persecuted from within and without is J.D., aged 12. He suffered severe pain when he tried to walk because of an iron bar that pierced both of his heels and impeded walking. If he suppressed this hallucination, he suffered severe stomach cramps, which were attributed by his family to allergy to macaroni. He also had fugue states in which he dissociated himself from his classroom and found himself in a cave 150 feet below the surface of the earth. Here he sat before a devil and a crowd of accusers. The devil bore a strong resemblance to a girl in his class who picked on him in the school bus. His father rejected the "theory" that the boy's difficulties were emotional in origin and encouraged - his son to beat up the girl.

Note in this case the concurrent existence of painful body-oriented hallucination, persecutory fantasy, and masochistic relationship with a peer.

A pattern formed of the latter two symptoms is sometimes also seen in latency-age children when there has been a breakdown in the mechanisms of restraint.

LLL presents us with an example of a prepubescent schizophrenic child with a cruel commanding internal fantasy object, which he cannot separate from himself, but which he tries to externalize. No external persecutors were created. LLL, who was 12, was hospitalized in the children's unit in a hospital in Beijing, China when seen. His head, face, and nose were covered with scabs, scars, and abrasions. All were self-inflicted. A shy boy, with few friends and difficulty speaking because of a malformation of his palate, he began to show signs of behavioral change at the time of the exams which decide one's life course in China. He was heavily sedated. Antipsychotic drugs had been used to no avail. The current drug regimen was undertaken to keep him from injuring himself and those around him. He hit himself and others as the result of verbal commands that came from the "Monkey King" who resided in his stomach. He repeatedly went to the toilet where he attempted to expel the Monkey King. (The Monkey King is the main character in a Buddhist fairy tale, Journey to the West. He has prodigious skills, and in an animated film version available to children in China, "Havoc in Heaven," is a successful challenger of authority and passivity.)

Note the misinterpretation of his own anger. He could not differentiate his aggression from that of an introject and tried to expel it.

L.T.L. was 15. For two years, he had irregular school attendance. He experienced his flatus as offensive (contrary to the usual experience of sensing narcissistic extensions of oneself as above reproach). He felt that the odor remained about him, and interpreted movements of people away from him as signs of their rejection of his emunctory odor. He needed to see but a few people walk in a direction that took them away from him to confirm his negative image of himself.

L.T.L. presents us with an example of a transition step in the continuum of symptoms that starts with the internal persecutor of childhood and ends in the imagined external persecutor experienced in adolescent shyness. The internal persecutor is clearly delusional. In this transition step, a negative product of the rejected self is considered to be the object of a delusional rejection by the world. The symbol of self-degradation is bizarre and irrational. In this continuum the masochistic experience of adolescent shyness can be seen as the healthier pole. In that situation, the person who does the hurting is identifiable as someone known, and the reason for rejection ("I'm boring," "I'm not pretty enough," or "I deserve it. I'm hateful and bad.") is rationalized to the point that it can be understood and seems logical.

#### Placement of the Introject about the Margins of the Psychological Boundaries of the Self

These cases present in direct and exaggerated form the dynamics by which youngsters deal with introjects during early adolescence. This relates in turn to the dynamics of masochism. Adolescent masochism can be interpreted to be a manifestation of a placement of the persecutory introject outside

the self and materialized as a peer in the *location continuum* of persecutors developed in the child's psychic reality. What are the primary locations on this continuum? The introject can exist within the psychological boundaries of the self. It can exist in the interface between self and the object world. It can be assigned to feared fantasy objects. It can be interpreted into the actions of well-known peers. The variations in location of objects utilized as sadists in adolescent masochism are derived from these placements.

Within the psychological boundary of the self, introject placement takes four forms. In the first instance, the introject remains within the boundary of the self and takes the form of the demanding contents of the superego. These contents serve to find fault with self and provoke guilt.

In a second instance, the introject also remains within the boundary of the self. Despised portions of the self, which are experienced intensely in adolescence, generate low self-esteem. They can be recognized to be a misunderstood remnant of the hostile parental introject of early childhood. The part of the self that cannot be separated from the introject becomes the object of rejection. The remainder of the self rejects the introject. (In adolescent shyness, the rejected introject is projected onto fantasied persecutors beyond the boundaries of the self. See below.)

In a third instance, the hostile introject can be placed within the boundary of the self in the form of an angry delusional internal fantasy object. Such an object can be experienced as the source of insulting command hallucinations from within (e.g., the Monkey King).

In the fourth instance, the introject can serve as one of the hostile fantasy elements in the individual's latent fantasy life. (When the fantasy is actualized through placement in a person recruited from beyond the boundary of the self, the early-childhood relationship that contributed to the content of the introject becomes the basis for adolescent masochistic experiences involving peers.)

At the psychological boundary of the self, the introject can be represented by any body product that leaves the body. It should be noted that none of these objects need be the seat of an introject placement; however, they can be used. In fact, it is remarkable that there are so many examples that one can find of the use of body products as animistically endowed beings or part-beings, which can in turn be used in persecutory fantasies, wanderings, fantasies of vulnerability, and fantasies of the extension of power.

Hair trimmings, nail trimmings, excreta, flatus, "the soul," semen, and menstrual blood have all been used as vehicles to carry the power and the vulnerabilities of the self as shaped by parental introjects.

Beyond the psychological boundary of the self, the characteristics of introjects are invested in heard external voices, peers, persecutors, and lovers. When externalized, the voice of the conscience may become the voice heard in dreams and delusions as well as the voice of conscience and the sense of guilt felt by some when a policeman comes into view. Peers, persecutors, and lovers, when invested with the attributes of the hostile introject and related to in the context of a primordial paradigmatic painful relationship to the person introjected, become the protagonists in the life of the masochistic character.

#### Masochistic Derivatives in Later Adolescence

Incipient Masochistic Character Traits— Psychotherapeutic Considerations

The selection of cases for psychoanalytically oriented psychotherapy in adolescence requires as a prerequisite the existence of an internalized conflict, coupled with a capacity for object relations. Thus the best candidates for such treatment are those who involve some real objects in the masochistic experiences they report. Children with adolescent shyness have a better prognosis than have the prepubescent schizophrenic children who maintain their introjects within or on the borders of the self. Where outside figures are recruited to play out the masochistic fantasy, the development of transference neuroses may be looked for and therapeutic gain expected. To the extent that outside figures are involved, the patient can be said to have incipient masochistic character traits. It is obvious that in the conduct of a psychotherapy with such people strategies should be devised to involve objects in the world in activities of the patient and in the patient's associations. It is necessary to encourage free associations that pursue insight to replace the misuse of free association through a self-oriented constant retelling of ominously similar masochistic adventures.

#### **Adolescent Misuses of Free Association**

Psychoanalysis and psychoanalytic psychotherapy will progress if free association can occur. A problem arises if the patient uses free association (an opportunity for unlimited communication with the

analyst) to serve purposes other than the search for insight. Often the patient seeks to relieve tension by communication aimed at the evocation and immediate mastery of a recent traumatic situation. Typical of this is a recounting of an accident or a recent fight. At times, the past is searched and recalled memories are used to justify, rather than modify, current behavior. Typical of this is the patient who says "I have a right to be mean, look how mean people were to me." All too many are primarily interested in drawing sympathy from the analyst or creating a sad mood through memories that will serve as a comforting evocation of a lost, albeit painful, relationship. The analyst may be turned into a witness to pain bravely borne rather than the person engaged to help the patient to understand and resolve the problem of masochism. The use of evocative symbols in free association is a manifestation of a predisposing tendency to repetition compulsion. Such behavior is a "more grown-up" form of masochistic braggadocio. Its clinical manifestation is the domination of one session after another with repeated tales of discomfort and apparent complaints. All this is achieved at the expense of pursuit of insight and long-range therapeutic gains. Therapeutic intervention requires a strategy that interprets this characterological "acting in" of repetition compulsion-based behavior.

#### Conclusions

Not all children exposed to cruelty while young or occupied with sadistic fantasies in early childhood are at risk for masochism during adolescence. There are a multitude of factors that determine this outcome. Foremost among these are: evidence of pathological placement and psychic representation of introjects; failures in progression along the developmental march of symbols; repetition compulsion, and narcissistic hypercathexis of the sensation of reality at the expense of reality testing.

Psychotherapeutic interventions must be aimed at the correction of these factors. The presence of these influences makes a person vulnerable to penetrations of the anal-sadistic phase memories that intrude upon and shape the relationships of late adolescent and adult life.

Masochistic fantasies themselves may be transmuted during the transition from latency to adolescence. These transmutations occur as the result of cognitive reorganizations that distort the memories of childhood. Such alterations of latent fantasy content affect the life experiences that are shaped in part or whole by fantasy.

The styles of recall of the memory of the actual infantile experiences and the infantile fantasies of the child are modified with the transition to adolescence. For instance, the various placements of the introject provide a variety of possible protagonists and plots for remembering the sadomasochistic past through the realities and experiences of the present. If there is a cognitive impairment of the ability to differentiate self from introject, or a limitation of the ability to assign the introject to a placement in the world beyond the self, the recall of the infantile experiences will take place with more emphasis on delusion and less on the creatures of the object world.

In latency, the capacity to reshape fantasy in the service of the discharge of drives was limited to the use of symbols as the organ for discharge. Within this limited mental activity, the child could create symbols to be used to represent the primary objects of fantasies. A remnant of the cathexis of symbols as the organ for the discharge of drives persists into adolescence. The sweep of objects available to be used as symbols is markedly enhanced. In those who can achieve normal object cathexes and can place introjects beyond the boundaries of self, the symbolizing function turns more toward the world. It increases the available representations that can be used as symbols. Peers, loved ones, and reality objects (such as houses, jewels, and money) that can be controlled and manipulated into scenarios, are enlisted in the service of the need of the fantasizing function of the ego to hide and distort original memories (repression). To the extent that these elements are compliant, the fantasies in which they participate adhere closely to original sources. Less flexible symbols cause shifts from passivity to activity or from object to subject for the protagonist. Thus a fantasy of being bullied may be lived out as a fantasy of bullying if the available objects are weak.

There weighs heavily in the balance of those elements that produce vulnerability an inability to turn attention cathexes away from memory and fantasy so that the child can invest reality with the right to call the tune. This source of vulnerability to masochism in adolescence must be pursued, understood, and analyzed if progress is to be made in psychotherapy.

#### Notes

1 This chapter is an expanded version of a paper presented in December 1983 to the "Vulnerable Child" Study Group of the American Psychoanalytic Association at the Association's midwinter meeting.