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Freud and His Followers

Psychology of the Self and the Treatment of Narcissism

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from *Psychology of the Self and the Treatment of Narcissism* Richard D. Chessick, M.D.

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We turn now to some of the attempts made by psychoanalysts to understand the phenomena of narcissism in depth. Freud (1914) began the in-depth study of the subject in "On Narcissism" (see Giovacchini 1982, Chessick 1980). By the time he wrote this work, Freud had already outlined the importance of narcissism in the formulation of the psychodynamics of paranoid psychoses (Freud 1911). In 1909, Freud told Ernest Jones that he considered narcissism to be a normal stage of development between autoerotism and object relationships (Giovacchini 1982). This notion of a single line of libidinal development from autoerotism to narcissism to more or less mature and genital object relationships was assumed to be almost self-evident by earlier Freudian psychoanalysts and ego psychologists; it was challenged, however, by the so-called British school of clinicians, especially Michael Balint and others, but remained the prevailing view in American psychoanalysis until Kohut. Although Freud's view seems to be consonant with common sense, it leads to certain problems since Freud was never clear about his distinction between the state of autoerotism and primary narcissism (Abend et al. 1983, p. 102).

His paper on narcissism is of great importance in the evolution of Freud's views. It sums up his ideas on the subject of narcissism and introduces the concepts of the ego ideal and the self-observing agency related to it. The paper also occupies a transitional point in the development of the structural theory; Strachey (in Freud 1914) points out that the meaning which Freud attached to *das Ich*—which Strachey translates by the word "ego"—underwent a gradual modification: "At first he used the term without any great precision as we might speak of the 'self; but in his latest writings he gave it a very much more definite and narrow meaning" (p. 71). Bettelheim (1982) devotes a controversial book to a discussion of problems inherent in the translation and mistranslation of Freud's words such as *das Ich*; for example, he claims that to translate this word as "ego," or *das Es* as "id," is to misrepresent Freud's language in an effort to make it sound more "scientific." Ornston (1985) also examines this problem in detail.

There is an inherent confusion in Freud's vocabulary. *Das Ich* could be thought of either a) as a technical structure with certain assigned functions in the mental apparatus or b) as more loosely representing the self. Freud thought of the ego in an increasingly technical structural sense as his work continued; he tended to

anthropomorphize it as a “little man within the man” as he grew older.

The year 1913 was one of the low points in Freud’s professional life. This period marked the breakup, due to the defection of Jung and Adler, of the growing international psychoanalytic movement. The debates which led to this defection forced Freud’s attention to the inexactitude of certain prior statements and definitions he had introduced and motivated him to define them precisely in order to demarcate his psychoanalysis from that of Jung and Adler. Admittedly “fuming with rage” (Jones 1955, p. 304), he wrote the polemical “On the History of the Psychoanalytic Movement” (1914a) and “On Narcissism” (1914). The latter work, which is condensed, complicated, and one of the most famous of Freud’s writings, had a revolutionary impact on his followers because it revised old ideas and introduced some new concepts. At the same time, it also introduced some serious new confusions and difficulties.

Freud’s “On Narcissism”

Freud’s main goal in this paper was to restrict the meaning of the term libido to sexual energy; Adler regarded it as a force or striving for

power and Jung widened it to mean the energy behind all life processes. In order to keep his original conception of libido, Freud had to make important theoretical revisions, the most fundamental of which was a change in his theory of instincts.

Freud's famous U-tube analogy of the flow of libido is presented in "On Narcissism." At first, all libido is developmentally collected in (cathected to) the ego, a situation Freud called primary narcissism. He defines its outward flow as representing the situation of object love—love for objects other than the self (or ego), a capacity that developmentally appears in the second year of life after an autoerotic phase (where no ego has yet formed) in the first two or three months of life, and then a primary narcissistic phase where, as stated, most of the libido is attached to the ego (self). However, the libido can flow back again or be withdrawn into the ego (not differentiated from self here) under various situations such as mental or physical disease, life threatening traumata or accidents, or old age, where this tendency toward self-preoccupation and self-love is especially obvious.

Whenever libido is mostly attached to the ego, we have the phenomenological situation defined as narcissism. In the early phase

of life, this situation is normal, according to Freud, and is called a state of primary narcissism; in later stages of life when the libido is withdrawn again to the ego, the state is defined as secondary narcissism.

Jones finds the "disagreeable" aspect of this theory in the fact that it was difficult for Freud to demonstrate non-narcissistic components of the ego. To say there is reason to suppose the ego is strongly invested with libido is not the same as saying it is composed of nothing else, writes Jones (1955, p. 303). "Something else" is difficult to pin down and opens Freud's theory to the criticism of being a monistic libidinal conception of the mind. Freud's metapsychological conception of narcissism is still not adequately clarified and resolved.

Current controversy is due to the ambiguity of Freud's position. For example Kohut (1977) refers to Freud's (1911) "most profound contributions to the area of archaic narcissism" in which Freud "shifted confusingly between the recognition of the importance of the regressive narcissistic position, on the one hand, and conflict issues on much higher developmental levels, namely, conflict concerning homosexuality, on the other" (p. 296).

At this point in "On Narcissism," Freud conceived of two kinds of ego drives, the libidinal and non-libidinal. This theory was meant to precede a complete restructuring of psychoanalytic theory which was intended originally to be a book consisting of 12 essays entitled "Introduction to Metapsychology" that Freud proposed in 1915. Only five of these essays were published; Freud destroyed the rest.

"On Narcissism" merits careful study because it is so rich in clinical material, for example, discussion of narcissistic and anaclitic object choices and its introduction of the concept of "ego ideal." Furthermore, Freud's paper is the agreed-upon starting point for all psychodynamic studies of narcissistic personality disorders and borderline patients. The reader should note here that Freud's U-tube analogy implies that, at least after the developmental phase of primary narcissism, there is *always* some residual primary narcissism, some secondary narcissism, and some libido directed toward objects; only the quantitative amounts of libido cathexes fluctuate, accounting for the varying clinical or phenomenological picture over a person's life.

Freud begins by stating that narcissism is not a perversion but rather "the libidinal complement to the egoism of the instinct of self-

preservation, a measure of which may justifiably be attributed to every living creature" (pp. 73-74). The U-tube theory is then introduced. Freud also offers the analogy of the body of an amoeba related to the pseudopodia which it puts out and withdraws. Thus, just as the pseudopodia are extended and withdrawn, libido can either flow out to objects or flow back to the ego. This phenomenon of ego-libido spoils the neat dualistic, early instinct theory of Freud that divides all drives into sexual or egoistic (self-preservative).

Freud immediately employs the concept of narcissism in understanding schizophrenic phenomena; the megalomaniac aspect of schizophrenic patients is explained as a consequence of secondary narcissism. Most of the libido is withdrawn from objects and directed to the self, seen clinically and most dramatically in paranoid grandiosity. The converse phenomenon, where the most libido possible is directed to an object, appears as the state of being in love.

Freud goes on to postulate a phase of autoerotism at the very beginning of life, even before the nuclei of the ego have coalesced. Once the ego has begun to develop, the libido is invested in it; this is the phase of primary narcissism.

The second section of the paper begins with a discussion of hypochondria, in which the clinical phenomena of hypochondriasis are seen as the result of flooding the ego with libido that has been withdrawn from objects. Thus, the psychic expression of the flooding of the ego with libido appears in megalomania and an over flooding (or damming up) is felt as the disagreeable sensations of hypochondriacal anxiety. No explanation is available as to *why* the libido-flooded ego should feel these disagreeable sensations, but an analogy is drawn to the so-called "actual neuroses," where, Freud thought, dammed-up libido due to inadequate sexual discharge leads to the disagreeable sensations of neurasthenia. In the case of hypochondriasis the libido which floods the ego comes from outside objects to which it has previously been cathected and is now being withdrawn; in the case of the actual neuroses, the libido comes from inside the individual and has been inadequately discharged.

In concluding his subsequent discussion of schizophrenia, Freud distinguishes three groups of phenomena in the clinical picture: those representing what remains of the normal or neurotic state of the individual; those representing detachment of libido from its objects, leading to megalomania, hypochondriasis, and regression; and

restitutive symptoms in which an effort is made once again to attach the libido to objects or at least to their verbal representations. These distinctions form the foundation of Freud's theory of schizophrenia.

Another clinical application of the concept of narcissism—the distinction between anaclitic and narcissistic choices of love objects—concludes the second section of this paper. The anaclitic object choice attempts to bring back the lost mother and precedes developmentally the narcissistic object choice. The latter is a form of secondary narcissism in which the person chosen to love resembles one's own self. For example, in certain forms of homosexuality, the object chosen is the child-self who is then treated the way the homosexual wishes his mother to treat him. To avoid confusion, it is important to understand that in early development primary narcissism comes first; then, due to inevitable frustration, anaclitic object-choice occurs with the mother as the first object. Therefore, narcissistic object choice, when it appears, represents a form of *secondary* narcissism in which the person loves what he himself is or was, what he would like to be, or someone thought of as a part of himself.

INSTINCT THEORIES

In the first instinct theory, the instincts were divided into the sexual instincts—easily modified and changed, relatively speaking—and the ego instincts, such as hunger and thirst, which are more fixed. In the second instinct theory, certain ego instincts are thought of as non-libidinal or "ego interest," but some are thought of as ego-libido, that is, narcissism. In this theory the ego's integrity depends on how much ego-libido is available, and ego-libido represents the glue holding the ego together. Thus an anaclitic object relationship may be viewed as a combination of two elements: the libido is directed toward the object that has been responsible for survival, the nutritive object, the mother; but if all the libido goes toward this object, the ego becomes depleted and helpless and depends on the object. The concept of sexual energies flowing within the ego made it very difficult to separate the libidinal and non-libidinal ego instincts because the "alibidinous" part is not well defined. Hunger and thirst do not quantitatively balance the libidinal instinct, and this theoretical revision is generally agreed to be unsatisfactory.

A tentative effort to improve this situation was made by postulating sexual instincts on the one hand and aggressive instincts on the other; the latter would then represent the non-libidinal ego

instincts. The notion of aggression as an ego instinct strengthened Freud's idea of dividing instincts between sexual instincts and non-libidinal ego instincts and was determined through a discussion of sadism. Freud argued that if self-preservative instincts include aggressive instincts along with hunger and thirst, they must become dominant over sexual instincts so that the reality principle could prevail. Since sadism permeates every level of living and can ally itself to all instincts as shown in the impulses to assert and control and aggress upon, the aggressive or sadistic instincts are seen as distinct from libidinal impulses. This is not a valid argument since, if sadism is found at every level of sexual development, why should it not be considered a part of the sexual instincts? The attempt to find a place for the aggressive drives characterized all Freud's further attempts at instinct theory, including his final theory of the life and death instincts and still remains an important and meta-psychologically unresolved aspect, especially of any consideration of narcissism and the borderline personality disorders.

The final section of the essay begins: "The disturbances to which a child's original narcissism is exposed, the reactions with which he seeks to protect himself from them and the paths into which he is

forced in doing so—these are themes which I propose to leave on one side, as an important field of work which still awaits exploration" (p. 92). Kohut's work may be understood as emanating from this statement.

At this point, the aggressive instincts in Freud's formulation should not be considered purely as sadism since he conceived of them here primarily as the will to power, control, and dominance, which only in certain cases involve a secondary need to inflict pain. We may say, therefore, that when the ego instincts are flooded by a libidinal complement from the sexual instincts, we have the clinical state of narcissism; when the sexual instincts are infused by an aggressive component from the ego instincts, we have the clinical situation of sexual sadism.

Missing from this temporary revision is the structural theory involving the id, ego, and superego; a step in this direction is present in "On Narcissism," in the third part of which Freud introduces the notion of the ego ideal, which in the course of development becomes infused with the subject's primary narcissism. Thus "what he projects before him as his ideal is the substitute for the lost narcissism of his

childhood in which he was his own ideal" (p. 94). This substitution is differentiated from sublimation, in which the aim of the instinct is changed with an accent upon deflection from sexuality.

It follows that the ego becomes impoverished by either object love or ego ideal formation and enriched by the gratification of object love or the fulfilling of the aims of its ego ideal. Self-esteem arises out of either of these enrichments and contains three components: the leftover residue of primary infantile narcissism; the sense of omnipotence corroborated by experiencing the fulfillment of the ego ideal; and satisfaction of object-libido by an input of love from the love object. Thus loving, insofar as it involves longing and deprivation, lowers self-regard, "whereas being loved, having one's love returned, and possessing the loved object, raises it once more" (p. 99).

Besides explaining a variety of easily observable, everyday phenomena, these conceptions have an important bearing on the practice of psychoanalytic psychotherapy. If an individual is unable to love, that is, if there is a repression of the libidinal drive, only one source of self-regard is left: idealization or "fulfilling the ego ideal." As Freud says, such persons tend to attach themselves to individuals who

have achieved what the patient's ego ideal clamors for, persons who possess the excellences which the patient cannot attain. This represents a "cure by love" and is the kind of expectation that often directs patients into psychotherapy. Thus, an important unconscious motivation for seeking therapy is the development of an attachment to a "successful" person (the psychotherapist) who has achieved the aims of the patient's ego ideal. The patient is tempted to form a crippling and permanent dependence upon the psychotherapist; there is further danger that, when some capacity to love is developed through the psychotherapy, the patient will withdraw from the treatment and choose a love object still permeated by the patient's ego ideal. The crippling dependence is then transferred to this new love object, and we observe the clinical phenomena that Odier (1956) has called the neurosis of abandonment.

NARCISSISTIC WOUNDING

A final important hint leading to the work of Kohut is presented at the end of "On Narcissism," in which it is noted that an injury to self-esteem or self-regard—what today we would call a narcissistic wound—is often found as the precipitating cause of paranoia. Any falling

short of the ego ideal, or any disappointment or depletion in the libidinal complement of the ego, would cause a withdrawal of libido from objects, with the subsequent clinical phenomena of hypochondriasis and megalomania.

Davis (1976) has presented an approach to depression based on similar considerations. He sees the core of depression as a feeling of uneasy helplessness, caused by psychic emptiness, coupled with a pressure to accomplish. He writes, "When we observe the sequence of depressive phenomena, we see that depressive emptiness is brought on by an acute diminution in self-esteem, what Freud called 'a narcissistic wound," (p. 417). Chronically depressed persons may have suffered repeated narcissistic wounds due to psychodynamic factors; their disorder is not only due to biological or constitutional factors. In this view, the requirements for therapy of at least chronic characterological depression are the need for alteration and modification of the self-esteem system of the patient.

OBSCURITIES IN FREUD'S THEORY

Freud points out, "A unity comparable to the ego cannot exist in

the individual from the start" (p. 77). Thus, during the autoerotic stage Freud thinks of the psyche as having very little structure. From this amorphous psyche, as the formation of a rudimentary ego takes place, the component instincts become directed towards it; Freud defines the attachment or cathexis of the libido to this rudimentary ego as primary narcissism; he distinguishes it from the energy of the ego-(or self-preservative) instincts. This original libidinal cathexis of the ego, from which some is later given off to objects but which fundamentally persists, would imply that a certain amount of primary narcissism remains as what Freud calls a "reservoir" throughout life; in that sense, narcissism to a certain extent is seen as normal and has no pejorative connotation.

In addition to a certain unclarity as to whether Freud regarded the persistence of primary narcissism in adult life as pathological, there is an inherent confusion in this essay because the locus of repression and idealization are placed within the same psychic structure. The ego ideal becomes the focus of self-love and contains all the perfections of infantile narcissism, but it also contains prohibitions since it is the instigator of repression. Giovacchini (1982) writes that today the standard Freudian viewpoint separates these factors and

thinks of violation of the prohibitions as causing fear and guilt, whereas shame results from not meeting the standards of the ego ideal. Thus, there are two ego substructures, with the superego responsible for repression and the ego responsible for regulating self-esteem. Later followers of Freud elaborate on this considerably.

Finally, the essay on narcissism contains some curious statements. For example, Freud insists that men are much more capable of complete object love than women, and implies that there is always a substantial narcissistic component in female love object choice. Here he reverts to the more pejorative use of narcissism as part of his well-known prejudice against women. Even his disclaimer (p. 89) that he has no "tendentious desire . . . to depreciate women" contains a backhanded slap implying the superiority of the masculine type of love. Parental love, Freud writes, "is nothing but" the parents' narcissism born again. The famous phrase "his majesty the baby" is introduced, referring to a picture showing two London policemen stopping heavy traffic to allow a nursery maid to wheel a perambulator across the street. Of course, the great problem with this is the assumption that the baby is aware of what is going on and has the capacity to appreciate the royal situation in which it has been

placed. Giovacchini's (1982) greatest objection to the various theories of narcissism of Freud, Melanie Klein, and Kohut is that they are adultomorphizing, assuming the recognition of external objects and the capacity to introject and identify as being present in the infant. Are these capacities present, or are they far beyond the abilities of the embryonic ego at the stage of primary narcissism? Kohut's answer to this will be discussed later.

In addition, there are two obscure paragraphs (pp. 96-97) in which Freud takes up self-observation. The "self-criticism of conscience" in "paranoics [sic]," says Freud, "coincides with the self-observations on which it is based." He sees this as a form of internal research "which furnishes philosophy with the material for its intellectual operations." Apparently, Freud had in mind such works as Kant's *Critique of Pure Reason.* According to Freud, "This may have some bearing on the characteristic tendency of paranoics [sic] to construct speculative systems." There is a pejorative implication here concerning the speculative systems of philosophers, but Freud's view, of importance to both psychologists and philosophers, is that the activity of the critically observing agency in the mind can become heightened into conscience or philosophical introspection. Freud then

adds an astonishing statement implying that he is not a person who is gifted philosophically or accustomed to such introspection!

"Mourning and Melancholia"

Written in 1915, "Mourning and Melancholia" is regarded by Strachey (in Freud 1917, p. 240) as an extension of the essay on narcissism which Freud wrote a year earlier. Freud's concept of identification is presented here; it precedes object cathexis and is distinct from it, often taking place on the model of cannibalistic incorporation or introjection. Three terms—incorporation, introjection, and identification—are used very loosely by Freud (and will be discussed in Chapter 5). It is most important to understand the process by which, in melancholia, an object-cathexis is replaced by an identification. These "identifications" are the basis of what we describe as a person's character, and the very earliest of these "identifications" form the nucleus of the superego.

Freud (1917) begins with a caveat sometimes overlooked by his critics: depression or melancholia "whose definition fluctuates even in descriptive psychiatry, takes on various clinical forms the grouping

together of which into a single unity does not seem to be established with certainty; and some of these forms suggest somatic rather than psychogenic affections" (p. 243). He thus drops all claim to general validity for his statements about melancholia and acknowledges he may be speaking only of a small subgroup within what might be called the group of melancholias.

Freud offers a general clinical distinction between mourning and melancholia based on the fact that the features are the same, except for the profound disturbance of self-esteem which Freud says is characteristic of melancholia and is absent in mourning. Since mourning is a reaction to the loss of a loved person, Freud suspects that a similar kind of influence may be at work in the production of melancholia if there is a "pathological predisposition," and he sets out to investigate this "pathological predisposition."

The cornerstone of Freud's reasoning is his clinical impression that the various self-accusations of the melancholic usually fit someone whom the patient loves, or has loved, or should love. Thus, Freud considers the key to the clinical picture his perception that the self-reproaches are reproaches against a loved object, reproaches

which have been shifted from the object onto the patient's own ego. He adds that in both obsessive compulsive disorders and melancholia such patients succeed by the circuitous path of self-punishment "in taking revenge on the original object and in tormenting their loved one through their illness, having resorted to it in order to avoid the need to express their hostility to him openly" (p. 251). He mentions that the person who precipitated the patient's emotional disorder is usually to be found in the patient's immediate environment.

This reasoning led to many later psychoanalytic investigations of the psychodynamics of depression and also led Freud to the issue of narcissistic object choice and narcissism. Goldberg (1975) reviews the history of psychoanalytic concepts of depression and points out that certain key concepts seem to occur over and over. These are the persistent connection of depression with the mother-child unit in the oral phase of development; narcissistic issues are always raised in the description of object relations of the depressed patient, centering upon identification and the regulation of self-esteem; and a regular association of depression with aggression or hostility, superego, and resultant guilt. Goldberg utilizes the definition of narcissism as psychologic investment in the self and points out:

> The “regression of object cathexis to narcissism” indicates an increase of feeling or interest in the self: what we would call a heightened self-centeredness. This follows upon object loss and may result in the object being internalized. Therefore, the lost object can be replaced by another one or replaced through an identification. Depending on how such a loss is handled, one may experience depression or merely a shift in object interest, (p. 127)

Melancholia is a pathological state “involving narcissistic blows to the ego experienced as losses and involving more wholesale or traumatic internalization of the offending object” (Goldberg 1975, p. 128). As Freud (1917) reasons, the predisposition to fall ill of melancholia lies in the predominance of the narcissistic type of object choice in the patient’s psychic functioning.

The fundamental process in which, due to a loss “the shadow of the object fell upon the ego” (p. 249), is Freud’s metaphorical way of describing an identification of the ego with the abandoned object, vital in the formation of character and of the superego. This narcissistic identification with the object forms a regression from adult erotic object choice to narcissistic object choice, as it has been defined in Freud’s paper on narcissism.

Freud carefully differentiates this from identification with the object in the transference neuroses. In narcissistic identification the object cathexis is abandoned, but in hysterical identification it persists and manifests its influence. Freud suggests that also in melancholics the original object choice has been of a narcissistic type, or at least there is a tendency for the predominance of the narcissistic type of object choice required in the disposition to fall ill of melancholia.

Most importantly, he raises the issue of whether a purely narcissistic blow to the ego (p. 253) may not be sufficient to produce the picture of melancholia, regardless of any realistic object loss. He mentions that the complex of melancholia "behaves like an open wound, drawing to itself cathectic energies . . . from all directions, and emptying the ego until it is totally impoverished" (p. 253).

When the melancholic process is released there may be a rebound in which the liberated energy leads to a hypomanic state characterized by Freud as "seeking like a ravenously hungry man for new object-cathexes" (p. 255). Thus, Freud distinguishes between the slow and gradual work of normal mourning which, when it is finished, is not usually marked by any hypomanic phase, and the narcissistic

disorder of melancholia, which may be interrupted by a sudden liberation of energies in a hypomanic state. In the intensive psychotherapy of narcissistic and borderline disorders this fluctuation between melancholic states and hypomanic states can be observed, and the dynamics as described by Freud are still as useful in understanding these phenomena today even though the more extreme fluctuations of manic-depressive disorder need to be treated with psycho-pharmacologic agents and may have an important organic basis.

Freud's paper also contains a discussion of suicide, an ever-present problem in narcissistic, borderline, and schizophrenic patients. Freud explains that the ego kills itself, if, on regressing to narcissism, it gets rid of the object and treats itself as identified with the object. The ego then directs against itself the full fury of the hostility which was originally directed to the object in the external world.

"Group Psychology and the Analysis of the Ego "

In the monograph *Group Psychology and the Analysis of the Ego*

(1921), the separateness of the "conscience" and ego ideal from the ego began more specifically to appear in Freud's thinking. Here he conceives of the possibility of the ego ideal-conscience as coming into conflict with the rest of the ego and even raging with a critical cruelty against the ego. The extent of this cruelty, which can function unconsciously, was a major motivation for his development and final presentation of the structural theory in *The Ego and the Id* (1923).

Freud considered the development of the superego primarily as a consequence of the resolution of the Oedipus complex. He increasingly emphasized the punitive and cruel aspects of the superego rather than its benign, loving aspect. In *Inhibitions, Symptoms and Anxiety* (1926) he thought of the threat from the superego as an extension of the castration threat and finally, in *New Introductory Lectures on Psychoanalysis* (1933), he viewed the superego as an internalized parental authority dominating the ego through punishment and threats of withdrawal of love. The common paradox of the clinically observed contrast between the harshness of the superego's imitation of the parents and the actual gentleness of the parents in real life was explained through the borrowing by the superego of the child's own hostility to the prohibiting parent. Thus, the superego is always

thought of as having a direct connection to the id and as able to drain aggression from the id by turning it upon the ego.

Group Psychology and the Analysis of the Ego was inspired by the collapse of the Austro-Hungarian Empire at the end of 1918 and by the panic and distress that followed. It proposes the rudiments of a sociology that rejects the concept of an autonomous social instinct and is based instead on Freud's libido theory and his emerging notion of the ego ideal. In the latter sense it is a transitional work on the structural theory to be more completely realized in *The Ego and the Id* (1923).

Freud starts by accepting and recapitulating the theories of LeBon and McDougall on the group mind. The behavior of groups is like that of a primitive savage or child; emotions become extraordinarily labile and intensified, and intellect is reduced. Freud writes: "A group is impulsive, changeable and irritable. It is led almost exclusively by the unconscious. . . . Though it may desire things passionately, yet this is never so for long, for it is incapable of perseverance. It has a sense of omnipotence" (p. 77). He continues, "A group is extraordinarily credulous and open to influence. . . . It goes

directly to extremes; if a suspicion is expressed, it is instantly changed into an incontrovertible certainty; a trace of antipathy is turned into furious hatred" (p. 78).

As far as leadership is concerned, exaggeration and repetition affect the group far more than logic, because the group respects force and demands strength or even violence from its heroes. LeBon believed that a group wants to be ruled and oppressed and to fear its masters, and Freud seems to be in agreement. They also believe that the group seeks a strong-willed leader who has a fanatical belief in his ideas.

Groups tend always and naturally to behave toward each other as children or primitive savages; there is a collective lowering of intellectual ability of the group just by virtue of its being a group. This "regressive tendency," as Freud calls it, is inherent in the psychological nature of all groups, and it cries out continuously for a particular type of leader.

In what Freud calls the primary group, each member has put the leader in the place of the individual ego-ideal and the member has

consequently identified with the group. Group formation, argues Freud, is always a regressive phenomenon in itself, because it takes place through identification and thus is based on a more primitive level of human functioning than individual object-choice. Similarly, there is a tendency to pick the leader of the group not through intellectual or mature object-choice but through what would now be called a consensus process. The leader needs often to "only possess the typical qualities of the individuals in the group in a particularly clearly marked and pure form, and need only give an impression of greater force and of more freedom of libido; and in that case the need for a strong chief will often meet him half-way and invest in him a predominance to which he would otherwise have had no claim" (p. 129).

Notice again that in group formation Freud considers this substitution of identification for object choice to be a consequence of regression. The common emotional quality which stimulates identification in the case of group formation is due to having the leader as a common ego ideal: "Identification is the original form of emotional tie with an object; secondly, in a regressive way it becomes a substitute for a libidinal object-tie, as it were by means of introjection

of the object into the ego" (p. 108). Thus here as in "Mourning and Melancholia" when he discusses the shadow of the object falling upon the ego, Freud uses the concept of introjection of the object. In the situation of being in love, hypnosis, and group formation, the object is put in place of the ego ideal and the narcissistic libido flows from the individual's ego ideal onto the object. This will be reconsidered when we turn to aspects of the work of Kohut.

Ego Psychology

Many careful studies were made by subsequent authors of the substructures of the ego and the interrelationship between the ego, the id, and the superego. Direct communication is postulated between the id and the superego, based on Freud's (1923) contention that the ego forms the superego out of the id, and the relationship between the id and superego is further exemplified by the well-known paradoxical increase of superego harshness when the external discharge of id aggressive drives is inhibited. The function of the benign aspect of the superego was portrayed and considered to carry those internalizations originating from the mother's benign attitudes and certain internalizations originating in the relationship to the father.

The maternal benign superego was thought of as adjacent to the ego ideal because of the similarity between its origins in the maternal symbiotic relationship and the development of early narcissism into the ego ideal.

A conflict-free sphere of the ego was organized hierarchically by subsequent "ego psychologists." Beginning at the interface with the id were placed the primary autonomous functions such as control of motility, perception, anticipation, thinking, reality testing, memory, object comprehension, and language. Also included were the synthetic function, integrating function, the functions of judgment, intent, will, the self-observing functions, and the representations of the self and object. Independent traits of character were thought to form due to "change of function" among the secondary autonomous functions (which originally developed to deal with infantile drives), and ego interests such as social status, influence, power, professional status, and wealth arise from these. Inborn ego apparatuses were thought to exist, and the structural theory was elaborated at great length.

Hartmann (1950) distinguished from each other the libidinal cathexis to the ego, which represents a narcissistic ego cathexis; the

libidinal cathexis to the self (or self-representation), which represents narcissism; and the libidinal cathexis to the soma, or body, which is clinically manifest as hypochondriasis. Thus the focus in psychoanalytic theory shifted from the id (1897-1923), in which authoritative id interpretations were made to the patient, to the ego (1923 and thereafter), in which the emphasis was upon the interpretation of the ego as it functioned in defenses and resistances. A vast and detailed "ego psychology" literature arose on these topics, but it is beyond the scope of this book.

In this system, ambition was primarily conceived of in drive theory terminology. On the oral level, it was based on the wish to incorporate the world; on the anal level, to produce the biggest bowel movement—a productive orientation; and on the phallic level to have the biggest capacity and be the most outstanding. The ego ideal was approached by efforts to be magical and powerful in sublimated, socially acceptable ways and to get approval from one's self and others.

The ego contained defensive functions with which it had to mediate between its three harsh masters: the id, the superego, and

external reality; it contained primary and secondary autonomous functions, and it was thought to contain intrapsychic self and object representations and identifications. We will deal at greater length with these representations in Chapter 5.

Self-esteem, Regulation in Traditional Psychoanalytic Theory

Reich (1960) described self-esteem regulation based on the use of classical conceptions. For her, self-esteem depends "on the nature of the inner image against which we measure our own self, as well as on the ways and means at our disposal to live up to it" (p. 217); and "growing up" means to realistically evaluate our potentialities and accept our limitations.

Aggression is stressed in both the infantile demand for magical absolute perfection and control and in the negative state of fear of complete destruction. Due to the warded-off feelings of catastrophic annihilation that occur as infantile grandiosity is collapsed, the rage is turned on the self with the production of hypochondriacal anxieties, depression, and self-consciousness. Thus, for Reich, self-consciousness is a step towards the paranoid pattern: "I am not the one who wants to

exhibit himself aggressively, but other people aggressively observe and judge me" (p. 230). This fear of annihilation is followed by compensatory narcissistic self-inflation. In the narcissistic patient, "regressive abandonment of reality testing with respect to self-appreciation occurs frequently as an isolated lacuna in an otherwise well-coordinated personality" (p. 221).

Her paper represents an example of the effort to understand narcissistic pathology on the basis of classical psychoanalytic drive theory. She writes, "What we loosely describe as 'narcissists' are people whose libido is mainly concentrated on themselves at the expense of object love" (p. 217). Two basic implications are found in this paper that are characteristic of the Freudian and post-Freudian traditional psychoanalytic attitude. The first is a relatively pejorative use of the description of narcissism, and the second is that, unfortunately, significant help for patient treatment does not arise from the metapsychology employed. In general, beginning with Freud, there was a sense of discouragement about the psychoanalytic possibilities for the treatment of schizophrenic, borderline, and narcissistic (including depressed) patients. The metapsychology employed, based on the concept that the libido is concentrated on the

ego of these patients themselves, implied the poor capacity of such individuals to form any object-related transference and therefore to be amenable to the method of psychoanalysis.

THE CASE OF DANIEL

One of the cases that Reich describes is a classic for the diagnosis of narcissism, and indicates that she was describing the same kinds of cases that are discussed by Kohut. Daniel K. was an accomplished writer who wrote one book after another with marked success, but did not feel gratified by it. He would look at a bookshelf and see all the books he wrote and edited and say, "There are about two and a half feet of Mr. K. on the shelf." Reich emphasizes the phallic meaning of this statement and sees it to mean that Daniel was reassuring himself that his phallus was not only there, but of extraordinary size, a standard psychoanalytic interpretation.

Daniel was constantly preoccupied with attempts to feel great and important; he was a man of considerable talent, but his writing was careless and superficial—not up to the level of his capacities—because he was driven to produce too fast. He could not wait for

results because he could not stand tension and unpleasure; he needed the immediate gratification of success. Reich explains:

> This need was so overwhelmingly strong that he had little control over it. He also was touchy, quick to take offense at the slightest provocation. He continually anticipated attack and danger, reacting with anger and fantasies of revenge when he felt frustrated in his need for constant admiration, (p. 218)

This is immediately followed by the dynamic interpretation that "his main aim was to increase his self-esteem and to ward off the underlying danger of passivity by incessant masculine activity" (p. 218).

Reich interprets what she calls "a bottomless need for grandiosity" as a compensatory striving under the impact of unbearable castration fears. In her view this is a narcissistic neurosis at the base of which is an Oedipus complex with castration anxiety. There is, however, the deeper conception that the castration threats contain the various fears from the pregenital phases of psychosexual development, so that the quest for phallic intactness also expresses the undoing of pregenital losses and injuries. In Freudian theory one

would hope that there was enough libido available even after this secondary or compensatory narcissism formation had taken place for the development of a transference and a working through of the patient's Oedipus complex, at which point compensatory secondary narcissism would no longer be necessary. The patient's personality would then change in the direction away from infantile narcissism and toward the realistic evaluation of the patient's potentialities and the acceptance of limitations. Above all, the patient would manifest greater capacity for object love. A study of Reich's paper and the use of her case of Daniel K. as a paradigmatic example is an excellent place to begin a course on the study of Kohut because it illustrates the point of view of psychoanalytic ego psychology at the time of Kohut's contributions.

SUMMARY OF TRADITIONAL PSYCHOANALYTIC THEORY

Teicholz (1978) presents a selective review of the psychoanalytic literature on theoretical conceptualizations of narcissism. She states that Freud's 1914 paper on narcissism held within it the seeds for almost all the subsequent theoretical developments of the concept. Freud's major contributions included a definition of secondary

narcissism as a withdrawal of libido from the outer world and redirection of it onto the ego; the designation of the ego ideal as the adult version of infantile narcissism; the delineation of narcissistic object choice, in which the person chooses someone as much like one's self as possible or as what one's self was or would like to be; and a recognition of the important connection of self-regard and narcissistic libido.

Teicholz points out that the major subsequent changes in Freud's theory were Hartmann's delineation in 1950 of the object or target of the libido in narcissism as the self rather than the ego; an elaboration of the concept of "self" as a set of representations included in the structure of the ego; increasing emphasis on a distinction between internalized object relations as opposed to relations between the self and objects in the external world; and elaboration of the concept of self-esteem regulation as in the paper by Reich. Teicholz cites Jacobson's (1964) important work on the elaboration of the process by which self and object representations become differentiated and internalized as stable, enduring structures: "According to Jacobson, the normal regulation of self-esteem is dependent on the normal maturation and development of, and on the optimal interaction

between several id, ego, and super-ego functions" (p. 847).

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