

## On Narcissism: Psychological Theories and Therapeutic Interventions in the Narcissistic Disorders

### Introduction

#### Understanding the Narcissistic Phenomenon

The so called 'narcissistic personality disorder' is a complex and often misunderstood

disorder. The cardinal feature of the narcissistic personality is the grandiose sense of self

importance, but paradoxically underneath this grandiosity the narcissist suffers from a

chronically fragile low self esteem. The grandiosity of the narcissist, however, is often so

pervasive that we tend to dehumanize him or her. The narcissist conjures in us images of

the mythological character Narcissus who could only love himself, rebuffing anyone who

attempted to touch him. Nevertheless, it is the underlying sense of inferiority which is

the real problem of the narcissist, the grandiosity is just a facade used to cover the deep

feelings of inadequacy.

#### The Makeup of the Narcissistic Personality

The narcissist's grandiose behavior is designed to reaffirm his or her sense of

adequacy. Since the narcissist is incapable of asserting his or her own sense of adequacy,

the narcissist seeks to be admired by others. However, the narcissist's extremely fragile

sense of self worth does not allow him or her to risk any criticism. Therefore,

meaningful emotional interactions with others are avoided. By simultaneously seeking

the admiration of others and keeping them at a distance the narcissist is usually able to

maintain the illusion of grandiosity no matter how people respond. Thus, when people

praise the narcissist his or her grandiosity will increase, but when criticized the

grandiosity will usually remain unaffected because the narcissist will devalue the criticizing person.

Akhtar (1989) [as cited in Carson & Butcher, 1992; P. 271] discusses six areas of

pathological functioning which characterize the narcissist. In particular, four of these

narcissistic character traits best illustrate the pattern discussed above. " (1) a narcissistic

individual has a basic sense of inferiority, which underlies a preoccupation with fantasies

of outstanding achievement; (2) a narcissistic individual is unable to trust and rely on

others and thus develops numerous, shallow relationships to extract tributes from others;

(3) a narcissistic individual has a shifting morality-always ready to shift values to gain

favor; and (4) a narcissistic person is unable to remain in love, showing an impaired

capacity for a committed relationship".

#### The Therapeutic Essence of Treating Narcissism

The narcissist who enters therapy does not think that there is something wrong with

him or her. Typically, the narcissist seeks therapy because he or she is unable to maintain the grandiosity which protects him or her from the feelings of despair. The

narcissist views his or her situation arising not as a result of a personal maladjustment;

rather it is some factor in the environment which is beyond the narcissist's control

which has caused his or her present situation. Therefore, the narcissist expects the

therapist not to 'cure' him or her from a problem which he or she does not perceive to

exist, rather the narcissist expects the therapist to restore the protective feeling of

grandiosity. It is therefore essential for the therapist to be alert to the narcissist's attempts

to steer therapy towards healing the injured grandiose part, rather than exploring the underlying feelings of inferiority and despair.

#### Differential Psychological Views of Narcissism

The use of the term narcissism in relation to psychological phenomena was first made

by Ellis in 1898. Ellis described a special state of auto-erotism as Narcissus like, in

which the sexual feelings become absorbed in self admiration (Goldberg, 1980). The

term was later incorporated into Freud's psychoanalytic theory in 1914 in his essay 'On

Narcissism'. Freud conceptualized narcissism as a as a sexual perversion involving a

pathological sexual love to one's own body (Sandler & Person, 1991). Henceforth,

several psychological theories have attempted to explain and treat the narcissistic

phenomenon. Specifically, the most comprehensive psychological theories have been

advanced by the psychodynamic perspective and to a lesser extent the Jungian

(analytical) perspective. Essentially, both theories cite developmental problems in

childhood as leading to the development of the narcissistic disorder. The existential

school has also attempted to deal with the narcissistic problem, although the available

literature is much smaller. Existentialists postulate that society as a whole can be the

crucial factor in the development of narcissism. The final perspective to be discussed is

the humanistic approach which although lacking a specific theory on narcissism, can

nevertheless be applied to the narcissistic disorder. In many ways the humanistic

approach to narcissism echoes the sentiments of the psychodynamic approach.

#### The Psychodynamic Perspective of Narcissism

The psychodynamic model of narcissism is dominated by two overlapping schools of

thought, the self psychology school and the object relations school. The self psychology

school, represented by Kohut, posits that narcissism is a component of everyone's

psyche. We are all born as narcissists and gradually our infantile narcissism matures into

a healthy adult narcissism. A narcissistic disorder results when this process is somehow

disrupted. By contrast the object relations school, represented by Kernberg, argues that

narcissism does not result from the arrest of the normal maturation of infantile narcissism, rather a narcissism represents a fixation in one of the developmental periods

of childhood. Specifically, the narcissist is fixated at a developmental stage in which the

differentiation between the self and others is blurred.

#### Kohut's Theory of Narcissism

Kohut believes that narcissism is a normal developmental milestone, and the healthy

person learns to transform his or her infantile narcissism into adult narcissism. This

transformation takes place through the process which Kohut terms transmuting internalizations. As the infant is transformed into an adult he or she will invariably

encounter various challenges resulting in some frustration. If this frustration exceeds the

coping abilities of the person only slightly the person experiences optimal frustration.

Optimal frustration leads the person to develop a strong internal structure (i.e., a strong

sense of the self) which is used to compensate for the lack of external structure (i.e.,

support from others). In the narcissist the process of transmuting internalizations is

arrested because the person experiences a level of frustration which exceeds optimal

frustration. The narcissist thus remains stuck at the infantile level, displaying many of

the characteristics of the omnipotent and invulnerable child (Kohut, 1977).

#### Kernberg's Theory of Narcissism

Kernberg's views on narcissism are based on Mahler's theory of the separation-

individuation process in infancy and early childhood. Mahler's model discusses how the

developing child gains a stable self concept by successfully mastering the two forerunner

phases (normal autism and normal symbiosis) and the four subphases (differentiation,

practicing, rapprochement, and consolidation) of separation-individuation. Kernberg

argues that the narcissist is unable to successfully master the rapprochement subphase

and is thus fixated at this level. It is essential, however, to understand the dynamics of

the practicing subphase before proceeding to tackle the narcissist's fixation at the

rapprochement subphase.

The practicing subphase (age 10 to 14 months) marks the developmental stage at which the child learns to walk. The ability to walk gives the child a whole new perspective of the world around him. This new ability endows the child with a sense of

grandiosity and omnipotence which closely resemble the narcissist's behavior. However,

reality soon catches up with the child as the child enters the rapprochement subphase

(age 14 to 24 months). At this stage the child discovers that he or she is not omnipotent,

that there are limits to what he or she can do. According to Kernberg if the child is

severely frustrated at this stage he or she can adapt by re-fusing or returning to the

practicing subphase, which affords him the security of grandiosity and omnipotence (Kernberg, 1976).

The Preferred Psychodynamic model

The Psychodynamic literature in general tends to lean towards the object relations

school because of the emphasis it places on a comprehensive developmental explanation

(i.e. the use of Mahler's individuation-separation model). Nevertheless, the theory of

Kohut has left a deep impression on Psychodynamic thinking as is evident by the utilization of many of his concepts in the literature (i.e. Johnson, 1987; Manfield, 1992;

and Masterson, 1981). Therefore in the remainder of the Psychodynamic section a similar approach will be taken, by emphasizing object relations concepts with the utilization of the occasional Kohutian idea.

#### The Emergence of the Narcissistic Personality

According to Kernberg and the object relations school the crisis of the rapprochement subphase is critical to the development of the narcissistic personality.

The individual who is unable to successfully master the challenges of this stage will

sustain a narcissistic injury. In essence the narcissistic injury will occur whenever the

environment (in particular significant others) needs the individual to be something which he or she is not. The narcissistically injured individual is thus told "Don't be who

you are, be who I need you to be. Who you are disappoints me, threatens me angers me,

overstimulates me. Be what I want and I will love you" (Johnson, 1987; P. 39).

The narcissistic injury devastates the individual's emerging self. Unable to be what

he or she truly is the narcissistically injured person adapts by splitting his personality into

what Kohut terms the nuclear (real) self and the false self. The real self becomes fragmented and repressed, whereas the false self takes over the individual. The narcissist

thus learns to reject himself or herself by hiding what has been rejected by others.

Subsequently, the narcissist will attempt to compensate for his or her 'deficiencies' by

trying to impress others through his or her grandiosity. The narcissist essentially decides

that "There is something wrong with me as I am. Therefore, I must be special" (Johnson,

1987; P. 53).

### The Narcissist's View of Others

Just as the individual becomes narcissistic because that is what the environment

'needed' him or her to be, so does the narcissist view others not as they are, but as what

he or she needs them to be. Others are thus perceived to exist only in relation to the

narcissist's needs. The term object relations thus takes on a special meaning with the

narcissist. "We are objects to him, and to the extent that we are narcissistic, others

are objects to us. He doesn't really see and hear and feel who we are and, to the extent

that we are narcissistic, we do not really see and hear and feel the true presence of others.

They, we, are objects... I am not real. You are not real. You are an object to me. I am

an object to you" (Johnson, 1987; P. 48). It is apparent that the narcissist maintains

the infantile illusion of being merged to the object. At a psychological level he or she

experiences difficulties in differentiating the self from others. It is the extent of this

inability to distinguish personal boundaries which determines the severity of the narcissistic disorder (Johnson, 1987).

### Levels of Narcissism

The most extreme form of narcissism involves the perception that no separation exists

between the self and the object. The object is viewed as an extension of the self, in the

sense that the narcissist considers others to be a merged part of him or her. Usually, the

objects which the narcissist chooses to merge with represent that aspect of the narcissist's

personality about which feelings of inferiority are perceived. For instance if a narcissist

feels unattractive he or she will seek to merge with someone who is perceived by the

narcissist to be attractive. At a slightly higher level exists the narcissist who acknowledges the separateness of the object, however, the narcissist views the object as similar to himself or herself in the sense that they share a similar psychological makeup.

In effect the narcissist perceives the object as 'just like me'. The most evolved narcissistic personality perceives the object to be both separate and psychologically

different, but is unable to appreciate the object as a unique and separate person. The

object is thus perceived as useful only to the extent of its ability to aggrandize the false

self (Manfield, 1992).

Types of narcissism

Pending the perceived needs of the environment a narcissist can develop in one of two

directions. The individual whose environment supports his or her grandiosity, and demands that he or she be more than possible will develop to be an exhibitionistic narcissist. Such an individual is told 'you are superior to others', but at the same time

his or her personal feelings are ignored. Thus, to restore his or her feelings of adequacy

the growing individual will attempt to coerce the environment into supporting his or her

grandiose claims of superiority and perfection. On the other hand, if the environment

feels threatened by the individual's grandiosity it will attempt to suppress the individual

from expressing this grandiosity. Such an individual learns to keep the grandiosity

hidden from others, and will develop to be a closet narcissist. The closet narcissist will

thus only reveal his or her feelings of grandiosity when he or she is convinced that such

revelations will be safe (Manfield, 1992)

Narcissistic Defense Mechanisms

Narcissistic defenses are present to some degree in all people, but are especially pervasive in narcissists. These defenses are used to protect the narcissist from experiencing the feelings of the narcissistic injury. The most pervasive defense mechanism is the grandiose defense. Its function is to restore the narcissist's inflated perception of himself or herself. Typically the defense is utilized when someone punctures the narcissist's grandiosity by saying something which interferes with the narcissist's inflated view of himself or herself. The narcissist will then experience a narcissistic injury similar to that experienced in childhood and will respond by expanding his or her grandiosity, thus restoring his or her wounded self concept. Devaluation is another common defense which is used in similar situations. When injured or disappointed the narcissist can respond by devaluing the 'offending' person. Devaluation thus restores the wounded ego by providing the narcissist with a feeling of superiority over the offender. There are two other defense mechanisms which the narcissist uses. The self-sufficiency defense is used to keep the narcissist emotionally isolated from others. By keeping himself or herself emotionally isolated the narcissist's grandiosity can continue to exist unchallenged. Finally, the manic defense is utilized when feelings of worthlessness begin to surface. To avoid experiencing these feelings the narcissist will attempt to occupy himself or herself with various activities, so that he or she has no time left to feel the feelings (Manfield, 1992).

#### Psychodynamic Treatment of the Narcissist

The central theme in the Psychodynamic treatment of the narcissist revolves around the transference relationship which emerges during treatment. In order for the

transference relationship to develop the therapist must be emphatic in understanding the

patient's narcissistic needs. By echoing the narcissist the therapist remains 'silent' and

'invisible' to the narcissist. In essence the therapist becomes a mirror to the narcissist to

the extent that the narcissist derives narcissistic pleasure from confronting his or her 'alter ego'. Grunberger's views are particularly helpful in clarifying this idea. According

to him "The patient should enjoy complete narcissistic freedom in the sense that he should always be the only active party. The analyst has no real existence of his own in

relation to the analysand. He doesn't have to be either good or bad-he doesn't even have

to be... Analysis is thus not a dialogue at all; at best it is a monologue for two voices,

one speaking and the other echoing, repeating, clarifying, interpreting correctly-a faithful

and untarnished mirror" (Grunberger, 1979; P. 49).

The Mirror Transference

Once the therapeutic relationship is established two transference like phenomena, the

mirror transference and the idealizing transference, collectively known as selfobject

transference emerge. The mirror transference will occur when the therapist provides a

strong sense of validation to the narcissist. Recall that the narcissistically injured child

failed to receive validation for what he or she was. The child thus concluded that there is

something wrong with his or her feelings, resulting in a severe damage to the child's self-

esteem. By reflecting back to the narcissist his or her accomplishments and grandeur the

narcissist's self esteem and internal cohesion are maintained (Manfield, 1992).

There are three types of the mirror transference phenomenon, each corresponding to a

different level of narcissism (as discussed previously). The merger transference

will

occur in those narcissists who are unable to distinguish between the object and the self.

Such narcissists will perceive the therapist to be a virtual extension of themselves. The

narcissist will expect the therapist to be perfectly resonant to him or her, as if the

therapist is an actual part of him or her. If the therapist should even slightly vary from

the narcissist's needs or opinions, the narcissist will experience a painful breach in the cohesive selfobject function provided by the therapist. Such patients will then likely feel

betrayed by the therapist and will respond by withdrawing themselves from the therapist

(Manfield, 1992).

In the second type of mirror transference, the twinship or alter-ego transference, the

narcissist perceives the therapist to be psychologically similar to himself or herself.

Conceptually the narcissist perceives the therapist and himself or herself to be twins,

separate but alike. In the twinship transference for the selfobject cohesion to be

maintained, it is necessary for the narcissist to view the therapist as 'just like me'

(Manfield, 1992).

The third type of mirror transference is again termed the mirror transference. In this

instance the narcissist is only interested in the therapist to the extent that the therapist can

reflect his or her grandiosity. In this transference relationship the function of the

therapist is to bolster the narcissist's insecure self (Manfield, 1992).

The Idealizing Transference

The second selfobject transference, the idealizing transference, involves the borrowing of strength from the object (the therapist) to maintain an internal sense of

cohesion. By idealizing the therapist to whom the narcissist feels connected, the

narcissist by association also uplifts himself or herself. It is helpful to conceptualize the

'idealizing' narcissist as an infant who draws strength from the omnipotence of the caregiver. Thus, in the idealizing transference the therapist symbolizes omnipotence and

this in turn makes the narcissist feel secure. The idealization of the object can become so

important to the narcissist that in many cases he or she will choose to fault himself or

herself, rather than blame the therapist (Manfield, 1992).

The idealizing transference is a more mature form of transference than the mirror

transference because idealization requires a certain amount of internal structure (i.e.,

separateness from the therapist). Oftentimes, the narcissist will first develop a mirror

transference, and only when his or her internal structure is sufficiently strong will the

idealizing transference develop (Manfield, 1992).

Utilizing the Transference Relationship in Therapy

The selfobject transference relationships provide a stabilizing effect for the narcissist.

The supportive therapist thus allows the narcissist to heal his or her current low self

esteem and reinstate the damaged grandiosity. However, healing the current narcissistic

injury does not address the underlying initial injury and in particular the issue of the false

self. To address these issues the therapist must skillfully take advantage of the situations

when the narcissist becomes uncharacteristically emotional; that is when the narcissist

feels injured. It thus becomes crucial that within the context of the transference

relationship, the therapist shift the narcissist's focus towards his or her inner feelings

(Manfield, 1992).

The prevailing opinion amongst Psychodynamic theorists is that the best way to

address the narcissist's present experience, is to utilize a hands-off type of approach.

This can be accomplished by letting the narcissist 'take control' of the sessions, processing the narcissist's injuries as they inevitably occur during the course of treatment. When a mirror transference develops injuries will occur when the therapist

improperly understands and/or reflects the narcissist's experiences. Similarly, when an

idealizing transference is formed injuries will take the form of some disappointment with

the therapist which then interferes with the narcissist's idealization of the therapist. In

either case, the narcissist is trying to cover up the injury so that the therapist will not

notice it. It remains up to the therapist to recognize the particular defense mechanisms

that the narcissist will use to defend against the pain of the injury, and work backwards

from there to discover the cause of the injury (Manfield, 1992).

Once the cause of the injury is discovered the therapist must carefully explore the

issue with the narcissist, such that the patient does not feel threatened. The following

case provides a good example of the patience and skill that the therapist must possess in

dealing with a narcissistic patient. "...a female patient in her mid-thirties came into a

session feeling elated about having gotten a new job. All she could talk about is how

perfect this job was; there was no hint of introspection or of any dysphoric affect. The

therapist could find no opening and made no intervention the entire session except to

acknowledge the patient's obvious excitement about her new job. Then, as the patient

was leaving, the therapist noticed that she had left her eyeglasses on the table. He said,

"you forgot your glasses," to which she responded with an expression of surprise and

embarrassment saying, "Oh, how clumsy of me." This response presented the therapist

with a slight seem in the grandiose armor and offered the opportunity for him to intervene. He commented, "You are so excited about the things that are happening to

you that this is all you have been able to think about; in the process you seem to have

forgotten a part of yourself." The patient smiled with a mixture of amusement

and recognition. In this example the patient is defending throughout the session and in a

moment of surprise she is embarrassed and labels herself "clumsy", giving the therapist

the opportunity to interpret the defense (her focus on the excitement of the external

world) and how it takes her away from herself" (Manfield, 1992; PP. 168-169).

The cure of the narcissist than does not come from the selfobject transference relationships per se. Rather, the selfobject transference function of the therapist is

curative only to the extent that it provides an external source of support which enables

the narcissist to maintain his or her internal cohesion. For the narcissist to be cured, it is

necessary for him or her to create their own structure (the true self). The healing process

is thus lengthy, and occurs in small increments whenever the structure supplied by the

therapist is inadvertently interrupted. In this context it is useful to recall Kohut's concept

of optimal frustration. "If the interruptions to the therapist's selfobject function are not

so severe as to overwhelm the patient's deficient internal structure, they function as

optimal frustrations, and lead to the patient's development of his own internal structure

to make up for the interrupted selfobject function" (Manfield, 1992; P. 167).

The Jungian (Analytical) Perspective of Narcissism

Analytical psychology views narcissism as a disorder of Self-estrangement,

which

arises out of inadequate maternal care. However, prior to tackling narcissism it is useful

to grasp the essence of analytical thought.

The Ego and the Self in Analytical Psychology

It is important to understand that the Self in analytical psychology takes on a different

meaning than in psychodynamic thought (Self is thus capitalized in analytical writings to

distinguish it from the psychodynamic concept of the self). In psychodynamic theory the

self is always ego oriented, that is the self is taken to be a content of the ego. By

contrast, in analytical psychology the Self is the totality of the psyche, it is the archetype

of wholeness and the regulating center of personality. Moreover, the Self is also the

image of God in the psyche, and as such it is experienced as a transpersonal power which

transcends the ego. The Self therefore exists before the ego, and the ego subsequently

emerges from the Self (Monte, 1991).

Within the Self we perceive our collective unconscious, which is made up of primordial images, that have been common to all members of the human race from the beginning of life. These primordial images are termed archetypes, and play a significant

role in the shaping of the ego. Therefore, "When the ego looks into the mirror of the

Self, what it sees is always 'unrealistic' because it sees its archetypal image which can

never be fit into the ego" (Schwartz-Salant, 1982; P. 19).

Narcissism as an Expression of Self-Estrangement

In the case of the narcissist, it is the shattering of the archetypal image of the mother

which leads to the narcissistic manifestation. The primordial image of the mother symbolizes paradise, to the extent that the environment of the child is perfectly designed

to meet his or her needs. No mother, however, can realistically fulfill the child's

archetypal expectations. Nevertheless, so long as the mother reasonably fulfills the

child's needs he or she will develop 'normally'. It is only when the mother fails to be a

'good enough mother', that the narcissistic condition will occur (Asper, 1993).

When the mother-child relationship is damaged the child's ego does not develop in an

optimal way. Rather than form a secure 'ego-Self axis' bond, the child's ego experiences

estrangement from the Self. This Self-estrangement negatively affects the child's ego,

and thus the narcissist is said to have a 'negativized ego'. The negativized ego than

proceeds to compensate for the Self-estrangement by suppressing the personal needs

which are inherent in the Self; thus "the negativized ego of the narcissistically

disturbed person is characterized by strong defense mechanisms and ego rigidity. A

person with this disturbance has distanced himself from the painful emotions of negative

experiences and has become egoistic, egocentric, and narcissistic" (Asper, 1993; P. 82).

#### Analytical Treatment of Narcissism

Since the narcissistic condition is a manifestation of Self-estrangement, the analytical

therapist attempts to heal the rupture in the ego-Self axis bond, which was created by the

lack of good enough mothering. To heal this rupture the therapist must convey to the

narcissist through emphatic means that others do care about him or her; that is the

therapist must repair the archetype of the good mother through a maternally caring approach (Asper, 1993).

A maternal approach involves being attentive to the narcissist's needs. Just as a

mother can intuitively sense her baby's needs so must the therapist feel and observe what

is not verbally e