CHANGING IDEAS IN A CHANGING WORLD

The Revolution in Psychoanalysis

Essays in Honour of Arnold Cooper

Edited by
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KARNAC BOOKS

Normal and Pathological Narcissism in Women

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Since Freud's 1914 original essay "On Narcissism: An Introduction", narcissistic issues, narcissistic love and object choice, narcissistic pathology, and, ultimately, the very essence of narcissism have been the subject of extensive writings in the psychoanalytic and the psychiatric literature. Furthermore, the terms *narcissism* and *narcissistic* have invaded everyday language. By becoming such an over-inclusive concept, narcissism is in danger of losing its theoretical and clinical specificity (Taylor, 1992).

This brief essay will examine the question of normal and pathological female narcissism, as well as the differences between the type of object choice among men and women as proposed by Freud in view of subsequent developments on gender and on the earliest stages of object relations. Freud himself was aware of the many unanswered questions his monograph raised. As quoted by Jones (see the Editor's Notes for Freud, 1914c), Freud wrote to Abraham, "The Narcissism had a difficult labour and bears all the marks of a corresponding deformation" (p. 70).

THE CONCEPT OF PRIMARY NARCISSISM

Long before infant observations had established that the human infant is equipped from birth to enter the world of human objects and to interact with such a world, M. Klein (1946a) was observing: "The analysis of very young children has taught me that there is no instinctual urge, no anxiety

situation, no mental process which does not involve objects, external or internal; in other words, object relations are the centre of emotional life. Furthermore, love and hatred, fantasies, anxieties and defences are ab initio invisibly linked with object relations" (p. 52–53).

In recent decades, and on the strength of accumulating evidence from infant observations, Freud's original postulates of primary narcissism, autoerotism, and primary undifferentiation have drawn critical comments from several quarters. It is tempting to speculate that Freud's theory of primary undifferentiation in neonatal life was partly related to his relative lack of interest in, and opportunity for, controlled observation of infants and infant—mother interactions in infancy and early childhood. Thus, when Freud (1914c) remarked, "The highest phase of development of which libido is capable is seen in the state of being in love, when the subject seems to give up his own personality in favour of an object cathexis" (p. 76), he neglected to mention the other "highest phase", that is, the investing of the infant with object love by the mother in the average, "good enough", infant—mother dyad.

Infant observations in the last few decades have established that infants are equipped with a perceptual apparatus functioning ahead of the infant's motor development (Meltzoff & Moore, 1992). The young infant's large repertoire of behaviours points to the existence of a type of non-representational, evocative memory. The infant's considerable capacity for intermodal exchanges at birth, long before mental representations are established, allows for a complex interaction with the object from the beginning of postnatal life. What is internalized in postnatal life is not action itself but interaction. Stern's (1985) interiorized interaction patterns, RIGs, ("Representations of Interaction that have been Generalized", p. 97) include actions, perceptions, cognition, affect, and proprioceptive experience.

As the concept of primary narcissism elaborated by Freud is being questioned by developmentalists, the content, validity, and relevance of the term itself are equally questioned. Kernberg (1991) states, "In other words, I regard as highly questionable both the concept of autoerotism and that of a self and ego predating the psychic experience of the actual relation of the infant with the primary object" (p. 133).

Within this developmental frame of reference we may postulate that narcissistic libido, the self love of the mother, becomes object libido as it is invested in the infant. The foetus during pregnancy (Lester & Notman, 1988) and, later, the infant itself, through its needs and helplessness, arouses in the mother a strong empathic potential and the urge to protect and nurture. Mother's narcissistic libido, that is, her own investment in her-

self, diminishes as libido is being invested in the growing child. Such affective investment in the child by the parent allows the development of the child's grandiose self; eventually, and under normal circumstances, this grandiose self will be transformed into the child's Ego Ideal. Parts of the original affective investment, from mother to child, returns to the object as object cathexis of the mother – the first love object of the infant during the period of attachment (Bowlby, 1969). Primary narcissism can thus be seen as the earliest affective investment of the emerging self of the infant by the mother. Object love, in turn, represents not only mother's affective investment in the child, but also the child's love for the maternal object, first observed during the attachment period.

NARCISSISM AND OBJECT CHOICE

Reading the chapter on object choice in the 1914 monograph more than three quarters of a century later, one cannot but notice how historical, intellectual, and cultural positions are clearly reflected in Freud's propositions. Makari (1991) points out that Freud's views on women were strongly influenced by post-Kantian German subjective epistemologists, particularly by Schopenhauer and Nietzsche. He quotes Rieff (1959): "In the nineteenth century, strong links, the forging of which have not yet been closely studied, existed between irrationalism, philosophy and misogyny. Freud's views echo those of Schopenhauer and Nietzsche. . . . To varying degrees, Schopenhauer, Nietzsche and Freud, employed an idea of 'woman' that they equated with human sexuality and irrational truth" (p. 187). Although to some extent an empiricist, Freud went along with Schopenhauer's beliefs of woman dominated by irrational and sexual beliefs. As Makari points out, Freud's later writings on women were seriously hampered by his realization of how his own precarious and subjective position as a man trying to know woman, that is, his unresolved countertransference, was interfering with his understanding of women.

Freud's statement that "Complete object-love of the attachment type is, properly speaking, characteristic of the male" (p. 88) further suggests his middle-class, mid-European, nineteenth-century social environment with its strict ethical code and chivalrous overtones (Mill, 1869). The young woman's "narcissistic self absorption" leading to a narcissistic-anaclitic object choice, represented a historically and culturally determined behaviour of a certain group of women whose overriding preoccupation

would be their attachment to a male. Freud's fascination with this particular female personality, generalized to include almost all females, is clearly seen in the following sentence: "Nor does their need lie in the direction of loving, but of being loved: and the man who fulfils this condition is the one who finds favour with them. The importance of this type of woman for the erotic life of mankind is to be rated very high. . . . For it seems very evident that another person's narcissism has a great attraction for those who have renounced part of their own narcissism and are in search of a love object" (p. 89). Reading the following paragraph, one wonders whether Freud was aware of the unfounded generalizations implied in his statements: "Perhaps it is not out of place here to give assurance that this description of the feminine form of erotic life is not due to any tendentious desire on my part to depreciate women" (p. 89).

GENDER AND NARCISSISTIC PATHOLOGY

It is being firmly established that gender represents an important variable in the development and treatment of psychological pathology. As Russo (1991) observed, "Gender differences in the rate and patterns of diagnosis are so dramatic that a basic test of any theory purporting to explain the aetiology of mental disorders must be the ability to account for these differences" (p. 44).

Although narcissistic traits are readily observed during analysis, structured narcissistic pathology of the Narcissistic Personality Disorder (NPD) type presents problems of categorization and differentiation. Kernberg (1988) points out that the presence of a variety of clinical pictures, overlapping, blending into each other, and usually lacking firm features to support definite categorization, make nosological classification difficult. Plakun (1989) maintains that, although the phenomenology of Borderline Personality Disorder (BPD) has more or less been studied and established. there are few available empirical data for NPD. Furthermore, the relationship of BPD to NPD remains unclear. Whether BPD represents the basic broad cluster of character pathology, the NPD being a subtype, or whether narcissistic personality pathology represents a completely separate diagnostic entity, is being debated. Kernberg (1988), among others, sees narcissism at the clinical level as referring "to the normal or pathological regulation of self-esteem or self-regard. Such regulation of self-esteem depends on the strictness and pressure of internalized norms and the internalization of positively invested objects" (ch. 18, p. 7).

Based on a well-designed study, Gunderson and Ronningstam (1991) conclude that "... it is possible to reliably identify patients with NPD and discriminate them with high accuracy from a mixed group of patients with related personality disorders and other psychiatric disturbances" (p. 116). Furthermore, "... grandiose self-experience, i.e., an unrealistic overvaluation of their own talents, invulnerability, uniqueness and superiority" (p. 117) were found to be the most pathognomonic characteristic of patients with NPD.

Although reliable epidemiological studies concerning the gender specificity of BPD and NPD are lacking, several authors have commented on such specificity. Thus Stone (1986; 1993) echoes several clinicians when he observes that BPD is, predominantly, seen in women. In their overview on NPD, Akhtar and Thompson (1982) state, "One of our observations, not in the literature, is that most of the patients who have been reported on are men" (p. 19). The authors question whether this is an accident of reporting, a diagnostic bias resulting from the "ambivalently special" attitude towards male children that places them at particular risk, or whether "the predominance of men [is] evidence that the development of the narcissistic personality is somewhat intertwined with male psychosexual development" (p. 19).

Discussing gender differences in narcissistic pathology, I will touch briefly on an issue that extends beyond psychosocial research. Ethnologists, according to Bach (1977a), have described a particular type of fantasy, the narcissistic fantasy, common to humans through the ages and across cultures. It is the fantasy of "exceptionality", which, because of its very nature, "assume[s] protean forms" (p. 288). Fantasies such as those of Godhead, of reincarnation, the Peter Pan fantasy, vampire and hermaphroditic fantasies, all contain the realization of the wish for extraordinariness. The various forms of the fantasy of exceptionality seem to refer, above all, to the wish for some unification of opposing states or concepts, a coincidentia oppositorum. "The wise baby, for example, joins 'young and unenlightened' with 'old and wise'; the double, companion or androgyne joins 'self with 'other' and 'male' with 'female'; whereas death of the self and rope to heaven join 'life' with 'death' and 'earth' with 'heaven'" (p. 291, italics in original). Bach quotes Eliade (1965): ". . . many beliefs implying the coincidentia oppositorum reveal a nostalgia for a lost Paradise, a nostalgia for a paradoxical state in which the contraries exist side by side without conflict, and the multiplications form aspects of a mysterious Unity" (p. 291, italics added).

Bach notes that the "bipolar conceptual grouping" (p. 291), characteristic of these narcissistic fantasies, first appears in infancy and early childhood, before concrete separation into opposites (self—other, young—old, etc.) forces such a unification wish into the realm of unconscious fantasy. "It may be that the 'unification of opposites' bespeaks either a developmental defect in the self-definitional framework, or a defensive or creative regression involving a dedifferentiation of the self and the surrender of the hard-won achievement for defining, limiting and objectivizing that self within the context of our cultural 'reality'" (p. 291–292).

It is here proposed that pregnancy and early infant care may represent a biologically determined and socially sanctioned partial gratification of the wish for the *mysterious unity* that lies at the basis of many narcissistic fantasies. Winnicott's aphorism that there is not such a thing as a baby, there is only a baby and mother; the myths and tales of child helplessness and maternal fortitude; and, in our own analytic experience, the ambivalent wish for separateness and fusion played out in the maternal transference during analysis, all point to the biological basis of the female's preparedness to enter into a specific form of relationship with the object. Such a relationship could be seen as the very prototype of the mysterious unity at the basis of all narcissistic wishes. It could be proposed that such preparedness and specificity of behaviours in the female may represent a measure of protection against the development of the grandiose self. In the male, on the other hand, the presence of the grandiose self can be seen as a *defensive overcompensation* of deficient parenting in early life (Kernberg, 1988).

Richman and Flaherty (1988), specifically addressing gender differences in the expression of narcissistic personality traits among a sample of first-year medical students, found evidence to support the hypothesis that males, "protecting a core of grandiose self-corrections" related to their early attempts to separate from the powerful primary object, show unusual sensitivity to criticism; females, on the other hand, react dysphorically to what they perceive as indifference, which, the authors believe, may symbolize the rejection of the female's basic need for merger with the powerful primary object. The authors state: "The sex differences involving the greater male prevalence of grandiosity, fantasies of unlimited success and lack of empathy, in contrast to the greater female experience of distress in response to the indifference of others, could be interpreted as consistent with the thesis that early object relations patterns give rise to exaggerated male needs for differentiation . . . and female needs for merger with objects" (p. 375–376).

The above confirms other research findings (Gilligan, 1982; Le Vine, 1991; Stoller, 1976; 1985) pointing to the female's greater need to maintain connection and communication within the existing object relations network, in contrast to the male's need for separation from the primary object, exploration of the material world, and, often, a tendency to establish dominance within the relational network.

Infant research based on direct observations seems to confirm gender-related difference in interpersonal relations. Notman and Nadelson (1991) state: "In sum, two different patterns emerge for girls and boys. Female neonates with their more stable state system, increased awareness of the outside world, and greater involvement in gazing and vocalization, show an increased potential for greater connectedness to the caregiver" (p. 32). Differences are also observed with regard to bonding and attachment, universal developmental steps in all infants. Thus, "The male's greater irritability and lessened responsiveness to calming and soothing make over stimulation a greater concern for the male neonate. The mother's animated face and her gazing, given the male's less stable state system, may be experienced as too arousing. An increase in fussiness, crying, or gaze aversion may follow from this arousal" (p. 32).

CONCLUSIONS

Rapidly accumulating data from infant developmental studies force us to reconsider earlier positions on primary and secondary narcissism, narcissistic object choice, and gender-related differences in these areas. Well-designed clinical studies provide the necessary empirical data for the description, categorization, and classification of NPD as a discrete clinical entity, the central dynamic feature of which appears to be the grandiose experience within the self-system.

Although narcissistic manifestations are not uncommon in women, the well-articulated NPD is, it seems likely, a male personality disorder. It is proposed that the interplay between biological and sociocultural factors may "protect" the female against the development of this personality disorder. Thus, the pregnancy itself, but mostly infant and child care, universally and through the ages entrusted to women, may represent a defensive compensation against "narcissistic self-absorption" as well as against the fantasy of the neglected baby.