Narcissism: Its Relation to Personality Disorders and Church Marriage Annulments

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In late 1976, a paper entitled "Tribunal Explosion," which appeared in the Jesuit weekly, "America," reviewed certain important developments in the approaches to and processing of cases presented to the Church's matrimonial courts. The author of the article, Professor L. Mason Knox, observed that a deepened study of the nature of marriage had prompted tribunals to direct their attention to the capacity of a man and woman maturely to decide whether to marry and, once married, of their capacity to sustain the intimate relationship which marriage creates. As a result of the tribunals' new approach, the psychiatric theory known as Personality Disorder has become an important consideration in the disposition of marital problems. The purpose of this essay is to examine this development. The essay will commence with a description of tribunal approaches to research, investigation and evaluation of cases and judicial decision. This description will be followed by an analysis of how an individual becomes afflicted with Personality Disorder, suggesting that this condition is caused by the failure of parents properly to guide their children through an early stage of development known as "primary narcissism." Finally, the relationship of Personality Disorder to primary narcissism will be clarified through a discussion of the theories of Kohut.

Following World War II, there occurred a gradual but steady development of matrimonial case law, resulting in a substantial shift of emphasis respecting the grounds on which an annulment could be granted. Rotal decisions began making reference to an enlarging concept of the essence
and nature of marriage and its existential reality. These decisions also contained more penetrating analyses of and deeper searchings for this reality. Gradually, the idea emerged that the capacity for conjugal community of life entails the presence of a constellation of certain psychic features, correlated with certain specific dimensions of behavior, in order for the existential reality consubstantial with and obligatory for conjugal life to be carried out. Anné, for example, theorized that a sound internal, intrapsychic and interpsychic integrity or balance is necessary in each party for a healthy, integrated and interpersonal orientation of two marital partners to occur. Anné also believed this integrity to be necessary in order for the individual parties intelligently to decide whether to marry. Elucidations such as these assumed a "criterional" quality and, combined with other related "obiter dicta," took on greater cogency when it became clear that they exist in congruence with well-known principles of canonical jurisprudence. One such principle is that one cannot be obliged to do the impossible, whether psychic or physical. Similarly, in order to enter a valid marriage, one must be able to choose freely and for reasonable motives whether to marry and, if so, to whom. Finally, any anomalies of personality which seriously interfere with one's power of judgment can render valid choice impossible.

Psychiatrists were consulted and psychiatric theory appealed to for scientific verification to support the propriety of tribunal decisions. Among the responses generated by such pleas were Sullivanian formulations that an individual's intrapsychic imbalances cause mental disorder and that an individual's unconscious transformation of his object-relations from person-relationship to thing-relationship constitutes mental disorder. The Marriage Tribunal of the Diocese of Brooklyn looked to psychiatric theory for clarification when it began to examine more deeply interpersonal relationships. This Tribunal was innovative, both in instituting an organized procedure for acting on cases brought before it and in striving to comprehend and uncover the behavioral phenomena adduced as psychological factors affecting the validity of marital bonds.

Shortly before 1970, the Tribunal initiated a project to find scientific proof that "nullity" is rooted in the phenomenon of what it then termed "essential" or "constitutional" incompatibility. This condition had been conceptualized as a type of permanent incapacity in the parties to bring one or more of the essential elements to marriage because of flawed personality structures in both parties, resulting from adverse environmental elements influencing their personality development. The Tribunal also speculated that such "incompatibles," while lacking the capacity to fulfill the essential terms of a marriage contract, might still possess sufficient judgmental discretion to bind themselves to the marital contract—an anomaly in itself, if true. This latter theory highlighted the subtlety and ambiguity that cases of personality disorder present.

To carry out its project, the Brooklyn Tribunal requested all petitioners pleading that they could not maintain a common conjugal life to undergo extensive psychological testing the type of which usually is used for
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Evaluating psychiatric disorders. The results of the project prompted the Tribunal to alter its inquiry from searching for the possible incapacity of both spouses to fulfill an "essential" of marriage. Rather, the examination was shifted to the actual judgmental capacity of either or both parties to enter the marriage under review. Instead of seeking to determine why "incompatibles" were not adjusting or could not adjust to each other, the Tribunal strove to discover why "incompatibles" had proceeded to marry each other in the first place and, what might be considered to be the same thing, whether there did in fact exist a recognizable type of mental or affective disorder seriously interfering with one or both spouses' powers of due discretionary judgment. Prior to this testing enterprise, the Tribunal's own psychiatrists had formulated the proposition that a marriage marked by long term incompatibility indicates that the individual parties, one or both, necessarily lacks a sufficient power of discriminatory judgment both prior to and at the time of the wedding.

Consistent with the psychiatrists' predictions, the tests revealed that in approximately two-thirds of the cases there existed a type of psychic disorder which could prevent the spouses from recognizing certain essential characteristics of each other and preclude either of them from making a prudent judgment on the advisability of marriage. The type of disorder isolated in these cases was Personality Disorder, an abnormality officially recognized by the psychiatric community. In both official testimony and informal discussions with judges, the Brooklyn Tribunal discussed their theory of Personality Disorder concerning its nullifying effect on the contractual ability of prospective marital partners. The psychiatrists explained that the defect known as Personality Disorder is manifested in the individual's habitual preoccupation with his or her own self-importance to such a great degree that he or she is unable to sustain a close interpersonal relationship, especially one requiring the overall intimate sharing demanded in marriage. An individual suffering from Personality Disorder, they explained further, is unconsciously unaware that whatever love he or she feels is self-love with none available to direct toward his or her spouse.

General characteristics of Personality Disorder were cited by the psychiatrists. An individual with this affliction, for example, is unresponsive to the value system of society, has a chronic disregard for the consequences of his or her behavior and attributes the blame for damage caused by his or her acts to other individuals or society in general. Such a person experiences none of the feelings or emotions which ordinarily make people responsive to accepted norms of behavior. As a result of this indifference, he or she is impressed neither with rewards for good behavior nor with punishment for bad behavior. All such people eschew ruminations on the objective value of alternatives and with unreflective spontaneity direct their activity toward personal aggrandizement. A particularly striking characteristic of this affliction is that those suffering from it rarely perceive their thoughts and actions as unreasonable, incommensurate with reality or emotionally inappropriate and, instead, perceive themselves as mature
and normal. The data gathered during the Court's interrogation of the partners uncovered concrete experiences of behavioral tendencies and specimens of ideational formulations accurately expressing Personality Disorder. The interrogations also revealed that the parties themselves were oblivious to the essential deviancy and subtle aberrational quality of their acts.

The scheme of interrogation applied to the partners in unstable marital situations was predicated on the postulates constituting the psychoanalytic theory of object-relationships: relationships specifically involving persons or personalities. Inasmuch as it pertained to object-relations involving personalities, the theory necessarily evolved its own definition of the phenomenon of love. Thus, a full development of object-relationship impelled by love necessitates comprehension of the object together with the object's own capacities for joy and satisfaction. This theory requires one to make trial identifications with the object in order to experience the object's feelings, because subsequent awareness of one's own feelings is based on the quality of this identification. Identification, which essentially is a probing for empathy, is therefore the first step of interpersonal object-relationship. Empathy consists of an identification with the other person (the object) and an awareness of one's own feelings after the identification. Only where one is aware of one's own feelings may one appreciate those of his or her partner and develop fully an object-relationship in which solicitude, tenderness and sensuality neither conflict with nor exclude each other.

The style of interrogation in cases before the Brooklyn Tribunal was diversified to suit the needs of each situation. The goal always was to extract clear evidence of non-congeniality in the couple and gain an adequate sense of the intellectual and emotional content of a given interpersonal relationship, both before and during the marriage, and evaluate the individual factors contributing to it. Thus, questioning was directed first at determining the facets of attraction between the sub judice marital partners. After this was discerned, inquiries were geared toward discovering whether these facets were representative of the partners' personalities and, therefore, whether appreciating them could give each partner genuine understanding of the other. More precisely, the questions sought to determine whether understandings reached during interrogation were the result of trial-like mental identifications of the parties with their own feelings. An attempt also was made to see whether pleasure and satisfaction experienced by a party under examination was associated with similar feelings of pleasure and satisfaction in his or her partner. The last inquiry was whether satisfaction experienced by both partners occurred in the context of mutual feelings. If so, it would be clear that the partners were aware of their mutual attraction to each other by virtue of the knowledge that each loved the other for what each loved about oneself. It was this kind of outward directed, or "other" directed, self-possession on the part of the individual partners which was looked for in order to see whether states of self-love and self-interest did or did not preempt appropriate object-love.
The Tribunal’s personality screenings resulted in a good picture of what constitutes an acceptable, obligate content and a valid, authentic marital “conjungo.” Where this content was lacking in an individual, the Tribunal scarcely could avoid positing the absence of a valid marriage, since, in such a case, there must have existed before the screening a void in the individual’s orientation toward an authentic “conjungo” and in his or her premarital contemplation thereof. Deprivation of this kind of orientation and reflection necessarily precluded the exercise of appropriate discretionary judgment regarding marital consent—both about marriage itself and the proposed partner. The screenings evolved the new intuition that marriage is essentially a community of life, motivated by love, and that this community cannot be established and maintained by anyone who is incapable of showing concern for another person in the same introspective, empathic sense in which the individual regards his or her own self. Tribunal examinations repeatedly have suggested that the incapacity to appreciate or love is at the core of psychic inability to decide maturely whether to enter a particular marriage. Determining the severity of this incapacity can provide the truest indication of the validity of any troubled marriage.

Notwithstanding the innovative approach taken by the Brooklyn Tribunal, other tribunals often have been uncomfortable with the theory of Personality Disorder. The haunting speculation has been that the theory labels as abnormal behavioral phenomena that are no more than extreme instances of deficiencies associated with ordinary human fallibility or imperfection. For example, Monsignor Egan, a Rotal Judge, concludes a discourse on Personality Disorder by warning that it “is a very complex and fluid phenomenon and one that has tenaciously resisted facile analysis on the part of psychologists and psychiatrists. It is to be hoped that lawyers and judges keep this in mind as they discuss and decide cases concerning psychopathy and its legal implication.” Fears such as those of Monsignor Egan persist despite attempts by many psychiatrists to explain the theory and despite its growing recognition. Personality Disorder has again been placed in the American Psychiatric Association’s Manual of Mental Disorders—the DSM III. Similarly, the theory appears in the International Code of Disease.

Perhaps Personality Disorder has not achieved full recognition by Tribunals because some figures of psychiatric authority doubt its scientific legitimacy as a mental affliction comparable to schizophrenia, hysterical neurosis, obsessive neurosis and manic depression. Louis, for example, concluded in a 1974 publication that the theory of psychopathic personality remains “a notoriously unsatisfactory diagnostic category.” Similar opinions were reached by participants in an international seminar held by the World Health Organization on the standardization of psychiatric diagnosis classification and statistics of personality disorders and drug dependents. Its recommendations included “a more precise delineation of how personality disorders may be differentiated from normal variance of personality” and consideration of the “possibility of introducing a multi-axial
or multi-dimensional system of recording personality disorders." Snyder, another theorist, posited a typology of personality disorder which is essentially empirical and does not rest on explicit theoretical assumptions, even though he declared it constitutional and "built into" the make-up of the individual and, therefore, conceived as a structural disorder—a faulty interrelationship of the personality's intellect, will and affect, the latter being most severely touched by the disease.

RELATIONSHIP OF NARCISSISM TO PERSONALITY DISORDER AS FORMULATED BY KOHUT

Kohut's explorations and findings in the psychoanalytic mode of clinical investigation and their therapeutic exploitation have helped to establish the genuine character of psychopathology inherent in the phenomenon of Personality Disorder. These findings have given the theory of Personality Disorder a new academic prestige and scientific status. More importantly, however, they have provided many helpful insights into the vicissitudes of the human psyche. The alleged indeterminacy of the phenomenon has been dispelled, its nature clarified and its reality concretely described, both in theory and in practice. What follows is a description of Kohut's exposition of the phenomenon of narcissism and its relationship to Personality Disorder. Kohut's own verbalizations are used as often as the writer's paraphrasing.

In order to appreciate Personality Disorder as a bona fide clinical entity, three specific facets of the human reality must be considered. First, one must examine the notion of the phenomenon designated as narcissism. Second, one must take into account a particular era of the individual human's development—the span of time ranging from infancy through adolescence and into at least part of the post-adolescence. Third, one must study the special manner of interaction existing between parent and child, in which the mother identifies her thoughts and feelings with those of her child and postulates that the reactions she discerns in her child are complementary to, if not exactly identical with, her own. Since consideration of these things requires one to track the emergence and development of an individual's personality, it exposes the manner in which normal development may become impaired and provides data with which to appreciate Personality Disorder.

How early does the personality emerge? Although it is true that in normal conditions of gestation the physical functioning of the embryo is flawless up to and just beyond the parturient fetal moment, the newborn

† What follows is a description of what appears to the present writer to be Kohut's own exposition of the phenomenon of narcissism and its relationship to personality disorder. Kohut's words are not always indicated by quotation marks, even though the narrative flow is facilitated as often by his phraseology as by the paraphrasing of the present writer. At every essential point, however, the presentation explicitly attributes the substance of theoretical propositions to Kohut insofar as the present writer understands Kohut's thoughts to be.
infant is not considered capable of having any awareness of itself. Neuro-
physiologists maintain that unmatured neural equipment make it impossi-
ble for the neonate either to experience itself as a unit cohesive in space
and enduring in time or to be a recipient of impressions or a center of
initiative. Nevertheless, the adult human environment acts toward the
infant ab initio as if it does exhibit a “self” this early in life. The mother
addresses the infant in an exuberant mode of projective identification and
is eager to perceive or imagine the infant as already capable of responding
in kind, no matter how vague or inchoate its actual response may be. In
other words, no matter how primitive the psychological essence of the
neonate may be, or how slight its receptivity to its environment is, it
already subsists within the compass of, and already is part of, an interact-
ing dyad. At some early instant following the mother’s imposition of her
empathic mode of communication, a resonance is evoked in the child,
impelling its own energy toward object-relationship with the environment,
namely, with the mother. Within this matrix of at least partial reciprocal
empathy, a “self,” “in statu nascendi,” begins to emerge—a “virtual” self,
whose interacting presently may be reified. The process that lays down a
person’s self has its virtual beginning at the moment when the mother sees
her baby for the first time and feeds, carries, bathes and talks to it. A
juncture between the more individual potential of the infant and the ex-
pectations of the parent will occur at some later point in time. One may
comfortably, albeit pragmatically, consider this juncture to be the earliest
point of origin of the infant’s primal self. This empirical entity will become
increasingly individual and more fused with the adult environment. The
notion of fusion is not only descriptively apt, but also factually exigent,
since the relationship between child and parent evolves as one in which the
parent cognitively is understood as identical with, and immanent within,
the infant’s primal self. The infant experiences the parent as consubstan-
tially, ontologically one with itself. The parent’s operation, knowledge and
power accordingly are seen as emerging from the child’s own being.

Within this dyadic atmosphere, the infant originates and maintains a
solipsistic image of whatever comes to be the content of its perceptive
capacities. Its natural state of helplessness necessarily has elicited a type
of care from the parental environment which is ever alert and as total as
possible. As a result, every thrust of the infant’s energy is completed into
a satisfying, controlling perception. The fulfillment of want and need be-
comes the experiential substance of the infant’s self. The receptor-effector,
sensorimotor essence of the infant’s being becomes awareness, or, selfness.
Drives, objectives and awareness are a unity constituting the complacent
subjectivity of the infant’s being. From the vantage point of the infant, this
whole stage of development has the flavor of perfection, omnipotence and
admirability. Depth psychological theory discerns this period as the stage
of primary, subjective, reflexive affection or love, in which all attention is
directed at the infant’s own self. If the infant were to continue at this stage
of emotional self-absorption into adulthood, he or she would become much
like the mythological Greek youth who was entranced with the image of himself reflected in a meadowland pool. Mythology relates that the gods put an end to the fruitless gazing, endless pining and useless living of the youth by changing him into the flower still bearing his name, Narcissus.

Borrowing from this story, depth psychology terms the phase of the human development characterized by self-absorption as narcissism. Rather than considering primary narcissism undesirable, however, depth psychology believes it to be an indispensable component of the human entity, crucial to the normal development of an individual's personality.

Primary narcissism is the anlage, or template, of the conspicuous stage immediately following it. This next stage comes into prominence when the first inevitable occasions of delay, discomfort, disappointment or frustration are visited on the infant. The new circumstances which disturb the narcissistic equilibrium are the natural deficiencies and failures in the parent's effort to provide perfect care. In essence, the infant's initial state of bliss is diminished somewhat by the realization that one's wants, wishes and needs are not always immediately or completely satisfied in extra-uterine life.

Certain activities transpire within the psyche of the child in response to these disturbances, which are aimed at preserving the perfection which heretofore has characterized the world of the child. Depth theory postulates two psychological actions. With the first, the child attempts to save a part of the perfection by assigning it to an object: the caring parent. The child now glorifies and magnifies the parent into a perfect object separate from itself but at the same time identical with itself—a union of identity stubbornly maintained by the child because now all power and bliss reside in the idealized object, and the child feels lost when separated from it. With a second action, the child retains the omnipotence within itself. The child spontaneously decrees that all perfection and power are concentrated in its own self and turns away disdainfully from an outside world to which all imperfections have been assigned. One may imagine a child formulating these two psychological maneuvers in ideational terms such as these: "I am perfect"; "you are perfect, but I am part of you." These actions are antithetical but nevertheless collaborative within the psyche of the child. They also signal a step away from the solipsism of the original primal narcissism, since they involve a recognition of an entity other than the self. Another being must carry the all-powerful perfection for the self, even though this being's importance resides only in its serviceability for the child. In this stage of development, parent-objects must exist in order to recognize the self's omnipotence and confirm it. Self now explicitly declares global perfection to be its own creation, under its own control. It acknowledges the existence of an object outside itself as full of power but experiences the object as completely under its control—a self-object. The child also asserts itself as an all-powerful object, but seeks confirmation of this power by external objects.

The attribution to the child's psyche of the foregoing ratiocinations
and the mental postulated products thereof may appear fatuous and fanciful. While not all adult observers hold with this explanation of early psychological development, all will agree that certain features are manifested in all people in the course of their infant, childhood and adolescent development. Thus, for example, nearly all children boast about their parents. In addition, all children are to some degree exhibitionistic and flaunt a venturesomeness which is at times grandiose and daring. In these respects, children are prototypical. Children also typically display extremes of both dependence and independence. They often exhibit a self-centeredness and a sublime confidence that either they themselves or their parents will secure gratification of their wants. Paradoxically, however, children also often show great solicitude as to their parents' welfare and whereabouts.

Keeping the characteristics seen in all children in mind, both the troublesome and endearing variants of their behavior may be construed plausibly as falling on a continuum with the universal characteristics. Depth psychology conceptualizes variegated behavioral formations as manifestations of antecedent psychological constructions, germinating in some preverbal and precognitional way within the neonate's psyche. This formulation of behavioral evolution is more than a curious way of parading self-evident truisms of human psychological development. The adult world has always accepted as a given that all neonates begin their being with two predispositions: ignorance as to the laborious exigencies of human life and resistance to the imposition of behavioral schemata to help them cope with these exigencies. The adult world, therefore, has always known that the various types of motor and emotional activity, such as recalcitrance, impetuosity, withdrawal, inertia, shyness and extreme exuberance, require control, discipline and training. It would appear then that control, discipline and training are directed neither at innate negativism and defiance nor at inviting tractability and malleability. Rather, they are directed at a distinctive, unique component of the human essence: its narcissism. As stated previously, depth psychology sees narcissism as an essential élan of the human personality, coextensive with or the precursor to instinct. It sees this narcissism, not as an obnoxious extreme of human striving, but as the personality's intrinsic, preformed, existential justification—a bedrock of motivation. The depth psychologist believes, in summary, that a child's displays of narcissism are manifestations of something valuable and even intrinsic to the child's being. The child's drive for omnipotence, its complacency in having a sense of omnipotence and its endeavoring to structure its life so as constantly to experience omnipotence is what will, in adulthood, provide zest, ambition and confidence in effort and happiness in success.

The foregoing account has examined details of narcissism pertaining to its genesis, early dominance of the neonate's psyche, persistent function as a vital factor in the young individual's awareness and constitutive and catalytic presence in the structuring of the normal personality. In order to define more precisely the theoretical substance of narcissism, it is neces-
sary to examine the theories propounded by Kohut. Specifically, reference must be made to the psychological mechanisms he postulates by which the neonate’s primary narcissism is enabled to function as a dynamic factor in personality formation. He cites two mechanisms: optimal frustration and transmuting reinternalization. The first refers to the inevitable shortcomings, delays, failures, perceptive misses and blunted intuitions which result in frustration of the neonate’s needs. If this frustration is not excessive or repetitive, nor overly long or disproportionate to the child’s needs, it should have a good effect on the child. Kohut designates this the kind of frustration which has a paradoxical good effect as “optimal.” This good effect is abetted and determined by the operation of the second mechanism—transmuting reinternalization. This concept refers to the child’s withdrawal of a small portion of the perfection initially transferred to the parent—the omnipotent self-object—back into the child, together with a proportionately small part of the omnipotent action that has been attributed to the perfect object but which the self-perfect-object has not executed to perfection. This repeated reappropriation to the self of parts of omnipotent action which initially have been attributed to the omnipotent object is equivalent to reinternalization of the omnipotence the child originally transferred from itself to the omnipotent self-object, the parent. Although the reinternalization somewhat resembles the retransfer of innumerable parts of a self-object or another self-person, it is also in the nature of a depersonalized function: hence, the transmuting reinternalization. It is important to note that the smooth, successful operation of these mechanisms absolutely requires that the optimal frustration be truly optimal. Therefore, delays, misunderstandings and empathic failures must be minimal and proportionate, rather than frequent or inveterate.

These psychological mechanisms apply with equal force to the two psychological operations previously imputed to the child as initial expressions of the postulated primary narcissism: omnipotent self-object (the parent) and grandiose self. The end state into which these two narcissistic configurations evolve is the normal personality, informed by a contented, even joyful, self-esteem, consonant with a realistic cognition of its endowment and worth and by hubris, which is appropriate to and condign with its human nature. It is possible to construe Kohut’s exposition as fanciful, pretentious scientific novelty, glibly ignoring human fallibility, if not attempting to obviate it with the aid of a substitute factitious entity—narcissism. While Kohut seems to impute the same entitative credentials to the notion of narcissism as one might expect him to confer on such mental functions as intellect, will and affect, the present writer hopes to provide a certain degree of rhetorical incandescence to the notion of narcissism, make it perceptible as something dissociated from will or conation and give it a “sui generis” status. Daring a certain philosophic temerity, one may speculate that Kohut might have agreed that narcissism is the attitudinal stance of a thing’s joyful, existential push toward continuous actualizing of its reified essence—the human being’s naturally destined,
Joyful hubris in the knowledge of its objectively true essence rather than a perversion of the will or a delinquency of motivation.

Be that as it may, a literal exposition of Kohut's theories may add clarification to what heretofore has been paraphrased by the writer. With regard to the idealized parent-object, Kohut states that under optimal developmental circumstances the idealized parent "image" becomes integrated into the adult personality as the idealized super-ego and becomes an important component of the psychic organization by holding up for the ego the guiding leadership of its ideals. This integration is exemplified by the child's changing perception of its mother. With each of the mother's minor empathic failures, misunderstandings and delays, the infant withdraws some of the idealization from the archaic image of unconditional perfection and acquires a particle of inner psychological structure which takes over the mother's functions in the maintenance of narcissistic equilibrium. The prime examples of a mother's functions to which a child looks less frequently as it matures are her basic soothing and calming activities which provide physical and emotional warmth and other kinds of narcissistic sustenance. Tolerable disappointment in the preexisting, externally sustained primary narcissistic equilibrium lead to the establishment of internal structures which provide the ability for self soothing, self stimulation and the acquisition of basic tension tolerance in the narcissistic realm. The child's evaluation of the maternal omnipotent self-object becomes increasingly realistic thereby, and, by virtue of the process of optimal frustration and transmuting reinternalization, the child acquires permanent psychological structures enabling it to exercise by itself the actions and functions or fulfillments which it had experienced as previously delayed by the omnipotent object.

In the case of the narcissistic configuration of the grandiose self, the same salutary modifications and realistic scaling down occur. Gradually, the rampant exhibitionism and grandiosity of the archaic grandiose self are tamed. With appropriately selective parental response to grandiose fantasies, the child learns to accept his or her realistic limitations. Grandiose fantasies and crude exhibitionistic demands are given up and, pari-passu, internalized and replaced by egocentonic goals—goals naturally inviting the ego's aspirations, because they are congruent with the rational, intellectually apprehended convictions intrinsic to the ego's innate capacities. The fantasies and demands also are replaced by the child's experience of pleasure in his or her functions and activities and in the resultant self-esteem. Thus, the whole structure of the grandiose self ultimately becomes integrated into the adult personality and supplies the libidinal fuel for the egocentric ambitions and purposes, for the enjoyment of the self activities and for important aspects of the ego's self-esteem.

An explicit exposition of Kohut's theories gives rise to additional observations. For example, transmuting reinternalization also contains the individual imprints of the real parental objects through which the narcissistic configurations passed before they became internalized. Therefore,
the content of the internalized values of the oedipal figures and the ideals of the super-ego are equivalent. The specific mode of the drive discharge and drive control manifested by the omnipotent self-object are internalized by the child. The specific values and ideals held by the parents, that is, by the omnipotent objects, have influenced decisively these internalizations. Interestingly, the goals and purposes which determine or inspire the organization of an individual's life often are derived from identifications with the very figures who originally had been experienced as extensions of the grandiose self. The specific absolutarian flavor of the individual's idealized values and the almost unalterable condition of the ego's central armamentarium of drive controls and drive discharge are both consistent with the absolute perfection and power of the primary narcissism. The absoluteness of persistence and of the right to success are also consistent with the omnipotence of the primary narcissism.

Kohut's new view of narcissism through his study and treatment of certain complex mental states has made an important contribution to the identification of Personality Disorder. He has demonstrated it to be a bona fide disabling mental condition resulting from a defect in the psyche's narcissism, rather than from its will, affect or intellect. In his writings, Kohut applied the designation "complex mental states" to the condition of patients who, he believed, were examples neither of psychotic or borderline disorders nor of obviously neurotic disorders. In studying, managing and treating these patients in the mode of psychoanalytic transference, Kohut integrated certain observable features incident to the patients' psychological development into two operational concepts. The first is that primary narcissism is universally the first substantiation of both the self and the awareness which the notion of self implies. Second, the period of primary narcissism is a highly sensitive time where faulty parenting may exacerbate the evolving, disabling flaws in the formation of the structural and affective personality. Kohut designated these flaws as narcissistic personality disorders and offered a description of a typical patient so afflicted. According to Kohut, the typical patient suffering from a narcissistic personality disorder was an individual whose complaints were very often antithetical to each other within the overall clinical gestalt. Initially, the complaints were poorly defined and vague yet nearly always evincing great disappointment and frustration with ordinary everyday life. The patient would report a poor or diminished self-confidence, an absence of zest for work, a lack of initiative, fleeting but pervasive feelings of emptiness and depression, emotional dulling and an inability to form or maintain lasting relationships. Contemporaneously with these feelings, the patient would exhibit himself as vain, boastful, intemperately assertive, lacking in humor and susceptible to surges of poorly controlled rage. Kohut determined that each of these patients had great difficulty in establishing durable states of self-esteem and even more difficulty in reliably systematizing a capacity to preserve self-esteem against the exigencies of life, especially against those arising in interpersonal relationships. More specifically, he deduced
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this defect after having recognized the presence of an habitual narcissistic orientation operative in the object-relations conducted by patients in their everyday lives and in the orientation of the patients toward the therapist. A psychiatric treatment situation, whether psychoanalytic or not, is almost continuously awash in the recurring tide of associative memories and acute recollections in individuals who continue in therapy as long as it is vitalized by a transference relationship. Kohut’s creative perception, plus his elegant synthesis of the cumulative segments of anamnestic data, led him to grasp the relationship between appropriate self-esteem and optimally refined primary narcissism. He could observe the continuity of primary narcissism from antecedent childish grandiosity and infantile omnipotence, through its expansion and efflorescence into adolescent arrogance and defiance and through early and late adult rebelliousness, tantrum-like rage and solipsistic self-centeredness. Kohut also could discern its development into depression, apathy and withdrawal, resulting in an incapacity for self-satisfaction with even the most elementary experience of pleasure. In essence, Kohut began to see how all the variegated, bewildering symptomatology these patients presented was either a blatantly or subtly elaborated distortion of the esteem-producing function, which distortion was due to early parental mishandling of the patient’s primary narcissism. He realized that it was the narcissism which had been either insensitively stifled or ineptly promoted and therefore either deeply repressed or grossly expanded by the patient in a defiantly reactive way.

By utilizing tact and accepting the patient’s narcissistic orientation, Kohut was able in therapy to involve the patient in spontaneous recollections of repeated parent-child scenarios in which the normal narcissistic nature of the patient’s exhibitionistic and hubristic behavior had been grossly mishandled and the patient’s self-esteem badly traumatized. This gave Kohut the opportunity to give the patient insight into the injured narcissism and to reorient him or her to this primitive energy in a new, realistic way. In other words, Kohut sought to gear the narcissistic elan to the patient’s realistic, naturally endowed ego functions rather than to infantile grandiosity and omnipotence. Of course, the traumatisms experienced by the patient in childhood were not simple, single incidents. Rather, they occurred throughout the patient’s earliest years. The therapeutic processing of insight, which sought to accomplish what proper rearing should have accomplished contemporaneously with the individual’s chronological growth, sometimes required long periods of treatment. Treatment sometimes lasted for years, because it could progress only after the patient was able to develop an interpersonal relationship with the analyst. The therapeutic relationship provided the therapist image as substitute for an idealized parent, which image would become integrated into the patient’s psychic organization as an unfailing, authoritative representation of acceptable sustaining ideals. The most significant contribution of Kohut’s work is that it established the existence of a bona fide type of psychopathology, comprehensible as a maldevelopment of narcissism and
an impairment of the coherence of self, rather than as a kind of neurosis, psychosis, schizophrenia or borderline behavior. The validity of this type of psychopathology has been confirmed both by the psychoanalytic investigation and by its record of success when used in the treatment of patients.

CONCLUSION

This essay offers the thesis that the personality characteristic of the self-centered, solipsistic, unempathic individuals often seen in marriage annulment cases is congruent with that depicted in Kohut’s narcissistic, disabled patient group. Labeled by Kohut as the narcissistic personality disorder, it is similar to the variety of defect resulting from a mishandling of the grandiose self. A chronic self-centeredness, emotional solipsism and lack of empathy is present in individuals suffering from narcissistic personality disorder. While the disorder often emerges as a subtle observation in clinical appearances, it is, nevertheless operative. Only a rigorous, analytical rinsing may bring to attention the narcissistic failure of a marital partner. Though the individuals appearing before the Brooklyn Tribunal present themselves as petitioners rather than as patients, the personality traits and marital disabilities which have been observed by the Tribunal have been considered to be direct symptomatological derivatives of unseasoned, improperly reared narcissism. The grandiose, utterly self-centered sense of interpersonal awareness seen in petitioners has been considered to be a reaction to deficient narcissistic maturation. It is postulated here that, like Kohut’s patients, these petitioners have had a bona fide psychopathology: namely, a serious disturbance of their narcissistic beginnings.

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