Freud’s ‘On narcissism: an introduction’

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Abstract  The author reviews Freud’s (1914) seminal paper ‘On narcissism: an introduction’. Freud’s paper is briefly set in the historical context of the evolution of psychoanalysis and psychoanalytic theories, and Freud’s metapsychology up to the publication of his Narcissism paper is outlined. A detailed and comprehensive description of the content of the paper is given, accompanied by commentary on, and critical analysis of, Freud’s ideas. Freud’s applications of his ideas about narcissism in relation to homosexuality, hypochondria and psychosis are elucidated and discussed. The author concludes by considering some of the influences of Freud’s ideas about narcissism on Kleinian and post-Kleinian developments in psychoanalytic theory.

Keywords  Primary narcissism; secondary narcissism; ego and object libido; the ego ideal; homosexuality; hypochondria; psychosis; destructive narcissism.

Artemis made Narcissus fall in love, though denying him love’s consummation. At Donacon in Thespia he came upon a spring, clear as silver, and never yet disturbed by cattle, birds, wild beasts, or even by branches dropping off the trees that shaded it; as he cast himself down, exhausted on the grassy verge to slake his thirst, he fell in love with his reflection. At first he tried to embrace and kiss the beautiful boy who confronted him, but presently recognised himself, and lay gazing enraptured into the pool, hour after hour.

(Graves, 1960: 287)

Introduction

Freud’s (1914) ‘On narcissism: an introduction’ is a seminal, but complex work. The paper contains fresh ideas, which still influence modern psychoanalysis as well as provisional formulations that have been left behind by later developments. By 1914, Freud had emerged from his early isolation and was working with an expanding group of colleagues to widen the scope of psychoanalysis. In the clinical field, psychoanalytic accounts of the major psychoneuroses were all but complete and attention now focussed on the phenomenon of psychosis. Jung, Abraham, Ferenczi and Freud himself, in his study of the Schreber case, were struck by the puzzling unreachability of psychotic
patients who seemed trapped, like Narcissus, in a subjective world of their own. Their collaborative efforts to understand these patients raised serious difficulties for Freud’s current model of the mind and theory of the development of libido. The working out of these problems involved a revision of psychoanalytic theory, leading Freud into an increasingly close relationship with Abraham, but also into disagreements with Jung, Ferenczi and Adler. The confrontation with the intractability of narcissistic states in psychotic patients led also to a blunting of the early optimism about psychoanalysis as a form of therapy. Freud’s paper addresses issues and problems arising in all these areas.

In the trajectory of Freud’s thinking, ‘On narcissism’ is a pivotal, but transitional work. The limitations of the new concepts presented in the paper led him eventually to develop the structural theory of the ego, id and super ego, and the theory of the life and death instincts, his final metapsychological statements. Nevertheless, in a work of only 30 pages there is a wealth of new ideas. He suggests for the first time a narcissistic stage of development, which he calls primary narcissism. He establishes the distinction between ‘anaclitic’ and narcissistic object relationships, which has subsequently become a central focus of psychoanalytic work. The new ideas about narcissism are applied to psychoanalytic theories of psychosis, hypochondria and homosexuality. Libido theory is modified to include ‘ego libido’. He describes the ‘ego ideal’, linked to the conscience, and self observing capacities of the mind, in a passage which contains the first description of what we would now describe as an ‘internal object’. He offers novel, if controversial, ideas about the working of narcissism in the sexual relations of men and women and about the narcissism of parents in relation to their children. The concept of identification is linked with object choice. In this review, I will focus on the changes in metapsychology announced in the paper and their applications to theories of homosexuality, hypochondria and psychosis commenting briefly on the fate of these ideas in the light of modern developments. I suggest, finally, that the narcissism paper was influential in the development of two key elements of modern Kleinian and post-Kleinian thinking, the dynamic relationship between the paranoid–schizoid and depressive positions, and the concept of projective identification.

**Freud’s metapsychology up to 1914**

Up until 1914, Freud’s model of the mind involved a straightforward conflict between the demands of sexual libido and the survival ‘instincts’ or ‘interest’ of the ego. Thus, for example, the little boy’s sexual wishes toward the mother threaten the child with castration anxiety and with the loss of the love of his parents, and so are repressed. Libido is seen as always directed to people in the outside world, it seeks objects external to the self. By now, however, Freud had realised that a person’s own body and self could become an object of sexual libido. He refers to Nacke’s 1899 clinical description of ‘narcissism’ as a sexual perversions,

the attitude of a person who treats his own body in the way in which the body of the sexual object is ordinarily treated – who looks at it, strokes it, fondles it till he obtains complete satisfaction from these activities.

(Freud, 1914: 73)
Moreover, Freud (1910) himself, in his biographical study of Leonardo da Vinci, had been struck by Leonardo’s latent homosexuality, expressed in his pattern of relationships with beautiful young men whom he both adored and was adored by. He suggests this form of homosexual attachment was a recreation of Leonardo’s experience of being mothered by two women in the absence of an effective father, a template of this early relationship being provided by Leonardo’s cartoon ‘St Anne with the Madonna and Child’. He suggests that in loving the young men Leonardo identifies with his mother and adores himself as his mother adored him as a child:

the boys whom he now loves as he grows up are after all only the substitutive figures and revival of himself in childhood.

(Freud, 1910: 100)

Narcissism is also at the centre of Freud’s first case study of a psychotic patient. In his study of Schreber’s autobiographical account of his mental illness, Freud (1911) suggested Schreber’s homosexuality was at the root of his paranoia, and that this involved a regression to a narcissistic relationship. Schreber’s megalomania also implies a withdrawal of libido from objects onto his ego resulting in an ‘aggrandisement’ of the ego. A return is thus made to the stage of narcissism in which a person’s only object is his own ego.

‘On narcissism’: the paper

_Ego libido_

These clinical observations now led Freud to posit for the first time the existence of what he called ‘ego libido’. He suggests that ego and object libido are inversely related and contrasts two mental states, that of being in love and the psychotic state. In the former libido is totally object related, and the self nearly non-existent. The lover invests everything into his idealised love and feels himself to be nothing. In the psychotic state libido has been withdrawn from objects onto the ego to such an extent that the outside world and its internal representation cease to exist. This internal catastrophe is projected leading, for example, to Schreber’s terrifying experience of the end of the world.

The new concept of ego libido helped to throw light onto these clinical phenomena, but raised, however, a host of theoretical difficulties which are not resolved in the paper. Thus, Freud’s focus on the conflict between the ego and sexual libido – the duality which forms the kernel of his dynamic model of the mind – is blurred by the introduction of two forms of libido, which now apparently have a common origin. The precise differentiation of ego and object libido, and the relationships between ego libido, autoerotism and the ego instincts, remain unclear. Freud suggests that ego libido can be dammed up, leading to hypochondria, but if and how this relates to repression of object libido remains obscure. Why, for example, does dammed up ego libido not result in pleasurable feelings? And if it does where is the motive for repression and displacement? Laplanche and Pontalis (1973) note that Freud himself never tackled these problems,
which were simply left behind as he developed his later theory of the centrality of conflict between the life and the death instincts, published in his paper ‘Beyond the pleasure principle’ in 1920. In the new theory, both ego and object libido become conjoined as part of the ‘life instinct’, in conflict with the ‘death instinct’, and hence their differentiation loses significance. The concept of ‘ego libido’ is an example of an idea which had transitional importance and led on to other ideas, but which itself faded out of Freud’s thought and has been discarded by modern developments.

**The narcissistic phase of development and primary narcissism**

The idea of a narcissistic phase of development has had a longer run and is still debated in contemporary psychoanalysis. In the ‘Three essays on the theory of sexuality’, published in 1905, Freud laid out a two-stage theory of the development of the libido and of object relationships. The initial stage is that of ‘autoerotism,’ in which the libido finds satisfaction in discharge through the erotogenic zones of the body, the mouth, the anus and the genitals. In the autoerotic phase, there is no awareness of the self or of another person. The libidinal satisfactions of being handled, nursed and fed by the mother lead the child to look toward contact with the mother as a source of pleasure. Repetition and regular contact lead to a cathexis, a libidinal attachment to the mother, felt initially to be only a source of libidinal pleasure, but gradually affection grows for the mother as a person, and, thus leads to the second phase of development, that of ‘object relationship’. This is Freud’s model of development until the present paper.

Freud now takes the step of placing a narcissistic stage of relationship as an intermediate step between autoerotism and true object love. Building on his analysis of Leonardo da Vinci, he suggests that out of the mother–child relationship grows an awareness which is added gradually to autoerotism. This developing awareness grows into the infant’s mental conception of the mother, the self and of their relationship. In the course of nursing and feeding, the child first senses the mother’s love towards the self. Freud’s suggestion is that the first form of object relationship is not love for the mother, but self-love. The self is taken as the first object of the libido by means of an identification with the mother. Out of autoerotism grows, therefore, what he terms a ‘primary narcissism’. This primary, narcissistic phase is part of the normal development of every child. Libido is at this stage totally directed to the ego. The infant’s object libido, forming the base of the relationship with the mother, is a subsequent achievement. To clarify the narcissistic starting point of all relationships Freud brings forward his famous ‘amoeba’ metaphor. He suggests,

> an original libidinal cathexis of the ego, from which some is later given off to objects, but which fundamentally persists and is related to the object cathexes, much as the body of an amoeba is related to the pseudopodia which it puts out.

(Freud, 1914: 75)

Freud himself struggles to justify this idea. He suggests, for example, that it is not immediately obvious what might spur the individual to develop out of narcissism. He
quotes Heine’s view that we need to create in order to be healthy, and suggests himself that mental health depends on the capacity to make sexual relationships and to develop sublimations of sexuality. Freud appears to rely on his own and Abraham’s (1924) ideas about the inherent, biological nature of the sexual instincts. The oral and early anal phases are narcissistic, the later anal and genital phase are object seeking. In the anal phase affection for the object, and the beginnings of a relationship with the parents felt as separate develop – for example, with the idea of faeces as a gift to the object. Likewise the pleasures of retention of faeces are experienced not only as a source of autoerotic pleasure but become a primitive model in the mind for the process of holding on to the increasingly loved object. With the onset of the genital phase, seen by Freud as constitutionally object seeking, comes increasing developmental pressure towards the emergence from narcissism into object relationship, and ultimately toward the complexities of the Oedipus complex and its resolution. Regression to the narcissistic phase always remains, however, a possibility.

Freud suggests, then, that in both the autoerotic and primary narcissistic stages there is no experience of the object, so that the infant starts off life as an isolate. Later theories – particularly those of Fairbairn and Klein, which led to the development of ‘object relations theory’ and empirical studies of child development – have challenged this view. Freud’s own text is ambiguous, however, as was noticed, for example, by Klein. Klein’s work with young children led her gradually to disagree with Freud’s idea of primary narcissism and to assert eventually that there is evidence of object relatedness from the start of life. She writes,

I shall briefly re-state my hypothesis: autoerotism and narcissism include the love for and relation with the internalised good object which in phantasy forms part of the loved body and self. It is to this internalised object that in autoerotic gratification and narcissistic states a withdrawal takes place. Concurrently, from birth onwards, a relation to objects, primarily the mother (her breast) is present. This hypothesis contradicts Freud’s concept of auto-erotic and narcissistic stages which preclude an object relation. However, the difference between Freud’s view and my own is less wide than appears at first sight, since Freud’s statements on this issue are not unequivocal. In various contexts he explicitly and implicitly expressed opinions which suggest a relation to an object, the mother’s breast, preceding autoerotism and narcissism.

(Klein, 1952: 51)

Object relatedness is also at the heart of the concept of unconscious phantasy, which Klein and her colleagues believed was present in primitive form as an ego function from the beginning of the infant’s life. Phantasy is both part of the stuff of – the mental corollary of – all instincts and is inherently object related. The experience of hunger, on this view, is not just pain, but essentially involves the phantasy of an absent good breast and the presence of a bad breast. The disagreement with Freud about a stage of primary narcissism was one of the central issues of the ‘controversial discussions’, which so nearly split the British Psychoanalytical society and led to the formation of the distinct Freudian, Kleinian and Independent schools of thought.
Debates on these issues have continued in psychoanalysis, but Kernberg (1991) suggests there is a convergence of the different theoretical currents which all point to a very early and simultaneous development of self and object representations and which now question the notion of a state of autoeroticism and of primary narcissism. Perelberg (2005) notes that various French psychoanalysts hold onto the theory of primary narcissism, but agrees with those who suggest that rather than prolong the debate about developmental stages it is more useful to define narcissistic and object related clinical configurations and to study their movements in clinical work. This view is similar to the post-Kleinian emphasis on charting the constant oscillation of the paranoid–schizoid and depressive ‘positions’, or ‘configurations’ of anxiety and defence, rather than emphasising the idea of a stately progression through the stages of development to maturity.

The studies of developmental psychologists have, nonetheless, provided supportive evidence for the psychoanalytic hypothesis of the initial object relatedness of the infant. The work of the ethologists in charting pre-programmed patterns of social behaviour in animals, imported into the psychoanalytic field in the attachment theories of John Bowlby, provides one influential example. Winnicott, who specialised in work with mothers and their children, suggested that an infant cannot be considered apart from the relationship with the mother. Mother and infant form one, interactive unit from the beginning. Empirical studies by psychologists of infants in interaction with their mothers have provided a wealth of detailed information about the complexities of early relatedness, mother and child co-ordinated at times in dance-like patterns of behaviour, which are in-built and observable from the early days of life. Hobson gives a lively account of much of this work before concluding,

Infants do not live in the blooming, buzzing confusion envisaged by the psychologist William James. Even very small infants have an organised mental life, and this mental life is expressed in behaviour that is innately fashioned to co-ordinate with the social behaviour of people.

(Hobson, 2002: 39)

Freud’s concept of primary narcissism, then, though questioned and effectively left behind by many subsequent developments, has been and continues to be a rich source of theoretical debate and thus has made a major contribution to psychoanalysis and to the understanding of child development.

**Parental love, the ideal ego and conscience**

Freud now tackles the question of what happens to ego libido and to primary narcissism when the individual has grown out of the narcissistic phase and developed mature object relationships. He makes two observations, the first a touching and timeless description of parental behaviour, the second leading to a radically new picture of the workings of the mind. Noting the tendency of parents to idealise and to overvalue the achievements of their children, he suggests that in this distorting parental love we see the remnants of
the parents’ narcissism. The affectionate parent sets his child up as ‘His Majesty the baby, as we once fancied ourselves’. He adds,

Parental love, which is so moving and at bottom so childish, is nothing but the parents’ narcissism born again, which, transformed into object love, unmistakably reveals its former nature.

(Freud, 1914: 91)

Freud’s second suggestion about the fate of the narcissism of the mature individual is no less insightful, but he now brings forward a major development in his theory of the mind, describing the birth of the concept of the ‘ego-ideal’. He observes that repression proceeds from the ego, and operates when the demands of the libido are felt to conflict with the subject’s cultural and ethical ideas, these forming a standard for himself. This standard is a form of ‘ideal’ by which we measure our actual ego, and thus can be described as an ‘ideal ego’. He now suggests that in maturity this ‘ideal ego’ becomes the target of the self-love enjoyed in childhood by the actual ego and thus becomes the repository of the adult’s primary narcissism. He suggests, memorably,

As always where the libido is concerned man has here again shown himself incapable of giving up a satisfaction he had once enjoyed. He is unwilling to forego the narcissistic perfection of his childhood... 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.

(Freud, 1914: 94)

In a ground-breaking passage, he goes on to suppose a ‘special psychical agency’, which has the function of checking whether the actual ego and the ego ideal are in tune. He recognises this to be the ‘conscience’, the critical, self-observing agency of the mind. The delusion of being watched results, he suggests, from a projection of the self-observing agency onto others.

Though Freud’s main objective in this passage is to account for the way in which redundant ego-libido forms and maintains the narcissistic ‘ego-ideal,’ he is here giving a first description of what will become the ‘super-ego’, and its subdivision into ego-ideal and conscience. He goes on to suggest that the ego ideal is linked to the dream censor, in conflict not only with reality, but with unconscious, libidinal wishes that surface in dreams. In this passage, therefore, we have already a vivid sense of the complicated, tri-partite relationships between the actual ego, the ego ideal and conscience, and unconscious libidinal wishes. Freud conveys a pioneering grasp of the internal conflict between different parts of the mind as well as a flavour of what Klein would eventually describe as the internal world of object relationships. This is the moment of the conception of the structural theory of the mind, to be developed in the paper ‘The ego and the id’ published nine years later in 1923. Running through this passage is also a new sense of the ego and its functions, particularly the activities of projection, introjection and identification. The ideas developed here anticipate the fuller account of internal object relationships given in Freud’s (1915) paper ‘Mourning and Melancholia’, published one year after the narcissism paper, in which he portrays the relationship
between the super-ego and the ego, showing how the ‘shadow’ of the external object ‘falls upon the ego’. The lost external object is internalised and related to as though the other is the self. The ego now becomes not just a repressing force, negotiating the interface of the pleasure and reality principles, but becomes an active agency, projecting and introjecting, and forming identifications now described as ‘abandoned object cathexes’. Segal and Bell (1991) note that although Freud does not elaborate these concepts in the narcissism paper, they are implicit in the rich discussion of the ego ideal and provide the point of departure for Melanie Klein’s subsequent exploration of the interplay between projection and introjection in creating an inner world.

Narcissism and the erotic life of the sexes

Freud goes on to discuss narcissism in what he calls the ‘erotic life of the sexes’. As in the passage about the ego ideal, Freud gives a rich account of the complexity of identifications in loving relationships between men and women, which demonstrates an intuitive awareness of the internal world, but from a modern perspective the theory lags behind and is less convincing. Following his observations of narcissism as a perversion, as described by Nacke, and in homosexuality, Freud suggests that a human being has, originally, two sexual objects – himself and the woman who nurses him. A person in a loving relationship may make either a narcissistic object choice – essentially they love themselves in identification with their mother – or what he calls an ‘anaclitic’ object choice that is object related, a more dependent, attachment type of relationship, where the identification is with the self as a child and a relationship is sought with a representative of the mother. For both men and women primary narcissism is the starting point for the development of mature erotic attachments. He now suggests that there are fundamental differences in the constituents of more developed male and female erotic attachments, acknowledging, however, that there are men who follow the ‘female’ path and women who follow the ‘male’ path, as well as male and female elements in the mature attachments of both sexes. Men, he says, are, however, characterised by an erotic attachment in which there is complete object love. A man loves a woman as his infant self loved his mother. He is totally identified with himself as a baby, all his libido invested in an overvalued object with a consequent depletion of ego libido and hence an impoverishment of the ego and devaluation of the self. Women, on the other hand, as a result of the maturing of their sexual organs at puberty, experience an intensification of their original narcissism, which Freud suggests is unfavourable to the development of true object choice. Though he does not spell out the identifications, the text implies, I think, that a woman is both like the man in loving her mother, a woman, as she did as a baby, but additionally feels that she has become the loved mother by developing herself into a woman. Particularly if a woman is beautiful, Freud suggests, she will experience ‘self contentment’.

Strictly speaking it is only themselves that such women love with an intensity equal to that of the man’s love for them. Nor does their need lie in the direction of loving, but in being loved.

(Freud, 1914: 89)
The road to true object love is, for women, provided by the birth of children. A part of
the woman’s body develops a separate existence and this enables a woman, finally, to
have a true object relationship with a person separate from herself.

Freud anticipates accusations of what we would now call ‘sexism’ arising from this
passage, and indeed some of his remarks leave him vulnerable to this criticism. Freud
later acknowledged that he did not understand the psychology of the ‘dark continent’ of
women and it was left to later, mainly female, psychoanalysts to provide a more
convincing account of female sexuality. As in many of his papers, however, Freud
oscillates between a position in which he seems to be dogmatically asserting
fundamental differences between the sexes, and a more complex view in which he
takes bisexuality for granted, and, therefore, asserts that both male and female
identifications are possible in both sexes. As in the earlier discussions about stages of
development, I think that whilst we can quarrel about the implication of rigid sexual
differences we can see also that Freud delineates clearly different ‘male’ and ‘female’
constellations of feeling and emotion, which are recognisable, but which can apply to
both sexes. Kernberg puts this point succinctly:

For example, a woman who loves a man because he loves her is also choosing an
anaclitic object because the man she chooses feeds her narcissism and protects her,
so that her object choice complements her narcissism. Or the man who
anaclitically idealises a woman whose sexual attractiveness he overvalues is also
projecting his narcissistic overvaluation of himself onto her.

(Kernberg, 1991: 138)

Once again, though the ideas Freud put forward in the narcissism paper have been
superseded by subsequent developments they have at the same time provoked rich
debates within psychoanalysis and in the wider culture, which have led to a deeper
understanding of relationships between men and women.

Narcissism in homosexuality, hypochondria and psychosis

Having reviewed the innovations in the narcissism paper of Freud the metapsychologist,
I now turn to Freud’s use of the new ideas about narcissism in explaining
psychopathology.

Homosexuality

Freud’s study of Leonardo da Vinci’s homosexuality led him to the insight that
narcissism is central to homosexuality. In his ‘Three essays on the theory of sexuality’,
Freud (1905) had conceived of homosexuality as a perversion of the object of the sexual
instinct. Instead of attaching to a person of the opposite sex, the sexual libido is diverted
to the body of someone of the same sex, someone like oneself. At the same, time he
suggested that all normal development encompasses both homo- and heterosexual
feelings so that homosexuality, though a perversion, is not an abnormality, but a
universal experience. This view stems partly from his opinion that all people have a
fundamentally bisexual constitution, and so experience pressure toward libidinal relations with both sexes. The underlying bisexuality of human sexual relationships is also evident in Freud’s views of the Oedipal situation. The Oedipus complex involves not only heterosexual rivalry with the same-sex parent for possession of the opposite-sex parent, the positive Oedipus complex, but also homosexual rivalry with the opposite-sex parent for possession of the same-sex parent. Human sexuality is complicated, therefore. There are many possible routes towards an ultimate sexual identification, and competing identifications persist. A final identification is based on the workings out of constitutional factors, such as quantity of desire and of anxiety, in interaction with early experiences of relationships. Homosexual object choice is seen, therefore, as one of several possible outcomes of an inherently complicated situation.

Before the narcissism paper, Freud had treated homosexual object choice as a move from the autoerotic phase toward a true object choice, a libidinal relationship with someone other than the self. He now asserts that in at least one form of male homosexuality the homosexual chooses an object not only like himself, but one that that actually represents himself. In loving young boys, Leonardo da Vinci loves himself, as discussed above. Here, Freud suggests there is a regression from true object choice to narcissistic object choice – that is, to a sexual relationship with the self. What differentiates this stage from autoerotism is the identification with the mother in loving her boy child, implying a primitive, self-centred awareness of the mother—child relationship. Homosexuality, then, according to Freud, can be a regression to primary narcissism.

This analysis of male homosexuality has proved to be very influential, producing rich discussion, but also controversial. There is still great debate about these issues, within the psychoanalytic community, the homosexual community and culture as a whole. I think that here again Freud’s text alternates between moments when he appears to be implying, in a narrow way, that women and homosexual men are more narcissistic, and therefore, less able to relate to the external world and people than heterosexual men, and a more complex view in which he is describing a clearly recognisable homosexual constellation of feeling and emotion and potential for identification that is present in both men and women, and in both homosexual and heterosexual people. The other side of this more complex view of sexuality acknowledges that in people who make what appear to be narcissistic object choices are many other potential object related identifications. Thus Leonardo’s genius, quite obviously, epitomises an extraordinary object relatedness, which coexisted with the narcissism Freud discovers in his pattern of personal relationship.

**Hypochondria**

Freud also presents a new theory of hypochondria in the paper. Hypochondria is characterised by a preoccupation with illness, invariably often focussed on a particular bodily organ, in the absence of any measurable organic deficit. Freud’s new suggestion is that hypochondriacal anxiety emanates from a variation of narcissism. Libido has been withdrawn from people and from external objects, thus becoming ego libido. At this point, it cathects not the whole ego, as in psychosis (to be discussed below), but only a part of the ego, a body organ. This diversion happens because there is a damming up of
ego libido, some sort of ‘repression’ of ego libido, producing a displacement onto a body organ, which thus becomes erotised. This process has a concrete, physical quality. Freud links the erotised organ of the hypochondriac with the idea of an erotogenic zone. There are no actual changes in the basic structure and function of the body organ, but it is psychically equated with a sexual organ, and thus becomes a source and location of sexual sensation. Effectively there is a projection onto a body organ of the narcissistic, erotic relationship with the self.

Freud made no further contribution to the problem of hypochondria after this discussion in the narcissism paper of 1914. The close link between hypochondria, narcissism and psychotic states has, however, been supported by later psychoanalytic work, even though, as described above, modern views of narcissism have changed. Klein’s view of narcissism, for example, led to the view that even in apparently narcissistic, hypochondriacal states, love and hate remain attached to good and bad objects within the ego. Rosenfeld (1964) reviews the psychoanalytic literature on hypochondria and offers his own, new theory in which he starts from Freud’s observation that the hypochondriac is fixated in the narcissistic phase. Rosenfeld suggests that infantile confusional states, based on a failure of normal splitting – a phenomenon of the paranoid–schizoid position – are at the heart of hypochondria. He sees his new theory as a further exploration of the meaning of Freud’s assertion that hypochondria is a narcissistic illness, thus confirming the value of and extending Freud’s observations in the narcissism paper.

**Psychosis**

As has been already mentioned the main impetus to the writing of the paper on narcissism was the collaborative attempt of the early analysts to grapple with the phenomenon of psychosis. In 1908, Abraham had suggested that in the psychotic patients he treated libido was irrevocably withdrawn from objects. Using Freud’s two-stage model of the development of object relationships he stated,

> The psycho-sexual characteristic of dementia praecox is the return of the patient to autoerotism, and the symptoms of his illness are a form of autoerotic activity.
> (Abraham, 1908: 73)

One year later, Ferenczi suggested that in paranoia there is a ‘projection’ of libido, and, like Abraham, that in the more withdrawn state of dementia praecox there is a withdrawal of libido from the object. Freud notes in the present paper that psychotic patients demonstrate megalomania, omnipotence of thoughts, and a diversion of libido from the external world of people and things. He agrees with Abraham and Ferenczi that, in contrast to neurotic patients who replace relationships with external objects by phantasies, psychotic patients withdraw their libido from true object relationships. In psychosis, however, Freud now suggests that,

the libido that has been withdrawn from the external world has been directed to the ego and this gives rise to an attitude which may be described as narcissism.
(Freud, 1914: 75)
Freud’s radical suggestion is that in psychosis there is a regression from true object relationship to his newly formulated stage of narcissism, emphasising that this is secondary narcissism, which implies that the psychotic has at some point emerged from primary narcissism to form object relationships of the anaclitic type. Under the pressure of his illness, however, the psychotic patient slips back developmentally to the narcissistic stage, but not all the way back to autoeroticism. Freud goes on to suggest that the root of Schreber’s psychosis is the transformation of repressed homosexual wishes directed toward his physician and to God. He has regressed, therefore, to the narcissistic, passive homosexual phase of development.

Freud’s central observation of the psychotic patient’s withdrawal from relationships with people and the world into a narcissistic state remains as true today as in 1914. Freud suggested, however, in some writings, that the psychotic is so withdrawn that a transference is not formed and so psychoanalysis was not possible. The early psychoanalysts did not try to treat psychotic patients. As described above, however, the persistence of object relations in narcissistic states was asserted by later theorists, notably the object relations schools of psychoanalysis. In the early 1950s, this theory was applied to clinical practice, and psychoanalysts in America and the UK began to treat psychotic patients with intensive psychoanalysis. In America, Searles and Fromm-Reichman, working at Chestnut Lodge hospital, demonstrated that their psychotic inpatients did form a transference and thus were amenable to psychoanalysis, provided certain modifications were made to psychoanalytic technique. In the United Kingdom at the same time, using Klein’s new theory of the paranoid-schizoid position, Bion, Rosenfeld and Segal treated psychotic patients in inpatient and outpatient settings using classical psychoanalytic technique and demonstrated that work with what they termed the ‘psychotic transference’ was possible. Whilst this work has demonstrated that psychotic patients do form a transference and that their psychotic symptoms are unconscious communications and thus are object related, it is probably fair to say that the early analysts’ pessimism about the treatability of psychotic patients, owing to the massive withdrawal into predominantly narcissistic states, was well founded. Work with such patients has only proved possible if intensive and long-term. Therapeutic change is often limited, and when attempted, is nowadays usually combined with medication.

Freud makes a further, illuminating suggestion about the function of hallucinations and delusions in psychosis, based on his application of the new concept of ego libido to the analysis of Schreber. The ultimate catastrophe for Schreber was his experience of the end of the world, which he felt he had to save by adopting the feminine role in intercourse with his doctor and with God. In this psychotic world, all libidinal contact with both the objective and subjective world has been lost. The formation of the delusional system, a distorted version of inner and outer reality, represents, Freud suggests, an attempt at recovery, a secondary, reparative process designed to lead the libido back to the external world. This insight of Freud holds up well today being endorsed, for example, in Steiner’s (2004) contemporary analysis of the Schreber case.

A final striking, but not often stressed, aspect of Freud’s account of psychosis in the narcissism paper is his recognition of the complexity of psychosis as presented by patients in the clinical situation. Close analysis of Freud’s text reveals that different emphases co-exist. Whilst he sometimes describes the psychotic as locked into a
narcissistic state that renders him inaccessible to social contact and to psychoanalysis, as discussed above, he does also observe that in the psychotic patient there is often only a partial detachment of the libido from objects. More healthy parts of the patient can co-exist with the psychosis. Schreber, after all, though very psychotic at times, was also able to produce an autobiographical account of his illness, which contains an astonishing mix of high intellectual achievement and frank delusion. Schreber was also, at times, able to dine and to converse quite normally with his physician and his family, successfully hiding and containing his psychotic beliefs and paranoia. Freud suggests that there are three groups of phenomena in the clinical picture. First, the remains of a normal, neurotic state, where the libido becomes introverted, displaced onto fantasised rather than real objects. Secondly, there is the core psychotic process. This involves the libido being totally withdrawn from objects and displaced onto the ego, producing megalomania, hypochondria, affective distance and regression to narcissism. Finally, there is the restorative process, such as hallucinations, in which the libido is finding its way back to objects.

This passage is, to my mind, very close to modern psychoanalytic theories of psychosis, for example that of Bion (1967) in his description of the struggle between the psychotic and the non-psychotic parts of the mind evident in psychotic states. Freud here presents a more complex picture than often recognised which, I believe, is very contemporary in its emphasis on the different and shifting mental states which go to make up the psychotic experience. I think he does here suggest implicitly that at least partial contact can be made with psychotic patients whose psychosis is in dynamic interaction with non-psychotic elements.

Finally, it should be noted that though overall there is agreement nowadays that the psychotic is in a state of narcissistic withdrawal from reality, described, for example, by Steiner (1993) in contemporary terms as a ‘psychic retreat’, the idea that repressed homosexuality is at the root of psychosis has not been substantiated. Freud did not take into account the role of aggression until late in his life and work, and it was left to his descendants to work out the implications of the theory of the life and death instincts for clinical states. It now seems short-sighted to base understanding of the whole of psychopathology, particularly of psychosis, on the idea of repression of sexual feelings. Contemporary psychoanalytic theories, almost universally, rest on a conception of the struggle in the mind between loving and hating feelings in relationships with the first objects, whether or not the Freudian theory of the death instinct is held to in exactly the terms suggested by Freud. Psychotic experience is seen to based on an inability to deal with an imbalance in the personality between intense love and hatred, with fears of hatred and murderousness dominating the psychotic mind. Anxiety about hatred leads to abnormal and catastrophic defences involving severing of contact with the real world and attacks on the perceptual apparatus. This state of affairs is believed to be affected both by constitutional and environmental factors, such as the quality of parenting. Schreber’s paranoia, on this view, rather than resulting from anxieties about sexual feelings, stems from the splitting off and projection of hatred. His homosexual and perverse sexual modes of relating, from a modern point of view, are seen to be defences against paranoid anxiety, the reverse of Freud’s formulations. An example of the change in perspective provided by modern theories emphasising the role of aggression is
provided by Steiner’s (2004) re-analysis of the Schreber case. He sees Schreber’s illness as initially depressive, the delusional states being an attempt at recovery from a catastrophic depression. Steiner emphasises the problem of the management of hatred and aggression in Schreber’s depressive illness, using Klein’s theories of depression to understand Schreber’s symptoms. He links Schreber’s state of mind with the following situation:

The unavoidablity of hatred based on frustration, envy, jealousy and greed means that attacks on the breast cannot be prevented and lead to phantasies and images of a damaged, dying or dead object with which the infant comes to be identified, as a defence against guilt and loss. At these stages of development, the breast is felt to represent the whole world so that its destruction is experienced as the end of the world. At the same time identification with damaged or diseased internal objects are experienced in bodily terms as somatic, hypochondriacal symptoms.

(Steiner, 2004: 272)

Thus, while Freud’s ideas about narcissistic withdrawal in psychosis have made a fundamental and lasting contribution to modern psychoanalysis, the idea that psychosis is a defence against narcissistic, homosexual relationships has been replaced by theories which arise from his later work on aggression and the struggle between love and hate.

Concluding remarks

I will close with some brief notes on the significance of Freud’s paper on narcissism in relation to several concepts central to contemporary psychoanalytic work.

Narcissism and the paranoid–schizoid position

Freud’s paper on narcissism was a watershed in the development of psychoanalysis. The distinction between narcissism and object relatedness, or ‘anaclitic’ relationships, as Freud puts it, was a seminal insight and is at the core of much of modern object relations theory. Thus, for example, Klein’s description of the paranoid–schizoid position emphasises the narcissistic nature of this early complex of anxieties and primitive defences. People and objects are experienced and perceived as split into different, good and bad elements, confused with the self, and the concept of a whole person has not yet developed. Effectively, then, the paranoid–schizoid position is a narcissistic position. Unlike Freud, however, as we have seen, Klein believes that even at this stage there is a primitive ego. Though the idea of a whole person has not yet developed there is a constant traffic via projection and introjection with the external object producing an inner world of at first distorted relationships, expressed in the idea of relationships with part objects. There is no autoerotism, or primary narcissistic stage, she suggests, as there is always a sense of something external, felt to be controllable by the self, effectively part of the mental world of the self.

With development, and the weakening of splitting and projection as primary defence mechanisms, comes the concept of the whole person and the experience of the joy, pain
and guilt of the depressive position. The achievement of the depressive position is effectively an emergence from a narcissistic position into the world of relationships with people. Modern post-Kleinian thinkers, such as Bion (1963) and Steiner (1993) emphasise that the paranoid—schizoid and depressive positions are not just stages of development, but are constantly alternating states of mind, operating in the present. The fluctuations of these states of mind, the movements from one position to the other, have become the focus of much psychoanalytic work, not only in thinking about the history and current relationship of patients in analysis, but also in charting changes in what Joseph (1989) terms the ‘fine grain’ of the analytic session. Such movements represent moves into and out of narcissistic and object related states, and are often precipitated in the psychoanalytic session when the analyst attempts to relate to his patient by making an interpretation.

**Narcissism and projective and introjective identification**

At several points in the narcissism paper, we experience the harbingers of contemporary accounts of projective and introjective identificatory processes. Freud makes succinct observations and gives clear descriptions of the complex, intersubjective mental processes that will later come to be termed ‘introjective’ and ‘projective’ identification. When, for example, he speaks of the parent’s idealisation of his child being based on the former narcissistic version of himself, projected onto the child, we would now describe this as a form of projective identification. Like Narcissus gazing into the pool, the parent sees only himself and treats his child as though it were himself. Leonardo’s location of his adored infant self in his adored young male companions is another example of the same phenomenon, wonderfully described by Freud. Simultaneously Freud implicitly describes the process of introjective identification in his description of Leonardo’s behaving to the young men as his two adoring mothers did to himself as a baby. Freud’s implicit awareness of these processes is also evident in his account of the erotic life of the sexes. It is also striking that his description of the feeling of impoverishment of the self that accompanies the man’s idealisation of his female love is very reminiscent of modern accounts of the depletion of the self, which arises when projective identification is massive.

**Destructive narcissism**

Finally, I will mention one modern development in the study of narcissism not anticipated by Freud, the study of destructive narcissism, initiated by Abraham (1919) in his study of narcissistic resistance, and continued by many later psychoanalysts, notably Rosenfeld (1971) and Steiner (1993). In destructive narcissism, destructive parts of the personality, structurally located in the super ego, rally to form what Rosenfeld describes as a ‘narcissistic gang’ and Steiner a ‘pathological organisation’, to attack and to destroy those parts of the personality aware of the need for and dependency on the external object. The narcissistic gang tries to persuade the ego that it is totally self-sufficient, and to obliterate from consciousness feelings of vulnerability, of love and jealousy, envy and gratitude, or of depressive pain or guilt. This development
of the theory of narcissism is a result of the understanding of the role of aggression in the personality, only acknowledged, as noted above, when Freud developed the theory of the life and death instincts. Freud’s ideas of the fundamental motive of narcissism being to obtain self-gratification is still alive in this modern conception, as the activities of the narcissistic gang involve libidinal gratification, but it is overshadowed by the idea that narcissism becomes the servant of the death instinct, of hatred of object relationships.

Kernberg (1991) notes how comprehensively Freud covers the subject of narcissism in this paper. Apart from destructive narcissism, the only other significant subject related to narcissism not dealt with directly in the text is that of narcissistic resistance in psychoanalytic treatment, but as Kernberg notes even both of these subjects are implicit in the paper. Though published in 1914, and relating to work of nearly a century ago, Freud’s paper on narcissism is still as good an introduction to the subject as can be found.

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Note

1 The author was trained in the Kleinian tradition and his commentary reflects this background. Other viewpoints can be found in a volume of 10 essays about Freud’s ‘On narcissism: an introduction’, published by the International Psychoanalytic Association and written by psychoanalysts from theoretically diverse and geographically dispersed backgrounds (Sandler et al., 1991). More recently, Perelberg (2005) gives a contemporary Freudian view of the paper and describes modern French views about narcissism.

References


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