

Narcissism in the Interactive Matrix: Contemporary Perspectives on Technique

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Despite the prominence of two-person models in psychoanalytic theory and treatment, clinical dilemmas in work with narcissistic patients are frequently framed in outdated one-person dichotomies between active interpretation of narcissistic defenses (e.g., for “Kernberg’s narcissist”) and empathic support around narcissistic needs or vulnerabilities (for “Kohut’s narcissist”). While some prominent classical theorists have moved away from these models and toward a focus on representations of self and other in narcissistic states (e.g., Bach), the implications of these self-other configurations on the nature of therapeutic interaction and the analyst’s participation has not been in the foreground.

This course will draw on contemporary interpersonal/relational ideas to explore the challenges of working with narcissistic problems. It will focus on the use of theories to both alleviate and enact these problems, and the ways in which the analyst’s narcissism is inevitably implicated in the interactive field. Narcissism will be conceptualized as “a central dimension of psychopathology that cuts across the diagnostic spectrum” (Fiscalini, 1994, p. 749), that can be more or less rigid and severe. Throughout the course, we will draw on the seminal work of interpersonal/relational theorists such as Fiscalini (1993, 1994, 1995,) and Mitchell (1988) to address the challenges of working with narcissistic problems and the potential for flexibility and synthesis of seemingly incompatible technical stances. At the same time, we will explore the ways in which any theoretical position, including ones advocating pluralism, expresses the analyst’s subjectivity, countertransference, and self-interests.

Week 1: Theory Ensnared in Sado-masochistic Enactment: The Kohut/Kernberg Struggle

The first week lays out the Kohut/Kernberg debate that forms the backdrop to the interpersonal/relational critique of traditional, “one-person” approaches to narcissism. We will explore what it is about narcissistic problems that lend themselves to polarizing debates and polarized positions: conflict vs. deficit, interpretation vs. relationship; confrontation vs. support; vulnerability vs. aggression; and, sadism vs. masochism. How do our theoretical splits reflect our patients’, and our own, inabilities to sustain ambiguity and tension between opposing poles of experience?

Readings:

Kohut, H., Wolf, E.S. (1978). The Disorders of the Self and their Treatment: An Outline. *Int. J. of Psycho-Anal.*, 59: 413-425.

Kernberg, O.F. (1974). Further Contributions to the Treatment of Narcissistic Personalities. *Int. J. Psycho-Anal.*, 55:215-240.

Recommended:

Auerbach, J.S. (1990). Narcissism: Reflections on Others' Images of an Elusive Concept. *Psychoanalytic Psychology*, 7:545-564.

Week 2: Narcissistic Person or Narcissistic Problem?

Theorists in the interpersonal/relational tradition have been vocal critics of diagnostic and technical rigidity and proponents of flexibility and pluralism. This week we will explore the clinical implications of these positions with narcissistic patients, as well as the challenges of working without generalizations and "rules" regarding diagnosis or technical stances. Is this always preferable? Is it useful to think of specificity and commonality as another dichotomy that collapses necessary tension? Might this tension be of particular salience in working with narcissistic patients who, themselves, have difficulty holding simultaneously experiences of self as both unique and ordinary?

Readings:

Greenberg, J (1995) Psychoanalytic Technique and the Interactive Matrix. *Psychoanalytic Quarterly*, 64: 1-22.

Mitchell, S.A. (1991). Wishes, Needs, and Interpersonal Negotiations. *Psychoanalytic Inquiry*, 11:147-170.

Week 3: Varieties of Narcissistic Relating, Part I: The Shamed, Spoiled, and Special Child

This week we will begin to look at the vicissitudes of narcissistic relatedness and the ways that these patterns shape the transference-countertransference matrix. No interpersonal theorist has done more to elaborate the challenges of working with narcissistic problems than John Ficalini. While Ficalini argues that narcissistic relating characterizes all patients to some degree, he also conceptualizes patterns that characterize core narcissistic constellations (e.g., the shamed, spoiled, and special child [Ficalini, 1993]). In discussing Ficalini's contributions, we will revisit the way in which analysts can invoke theoretical loyalties to rationalize participation in enactments of these relational configurations.

Readings:

Fiscalini, (1994). Narcissism and Coparticipant Inquiry: Explorations in Contemporary Interpersonal Psychoanalysis. *Contemporary Psychoanalysis*, 30:747-776.

Aron, L. (1999). Clinical Choices and the Relational Matrix. *Psychoanalytic Dialogues*, 9:1-29.

Recommended:

Hirsch, I (2003). Psychoanalytic Theory as a Form of Countertransference. *J. of the Amer. Psychoanal. Assn.* 51S: 181-201

Levenson, E (1989). Whatever Happened to the Cat? – Interpersonal Perspectives on the Self. *Contemporary Psychoanalysis*, 25: 537-553.

Week 4: Varieties of Narcissistic Relating Part II: Working Inside and Outside of Narcissistic Integrations

In attending to the centrality of parent-child interactions in the origins of narcissistic problems, interpersonal/relational theorists draw attention to particularity of these relationships and of the expression of narcissistic issues. This week we will explore some of the most clinically useful features Sheldon Bach's extensive work in formulating narcissistically configured object relations with a focus on varieties of therapeutic interaction. The particularity and specificity of developmental and therapeutic dyads complicates the adoption of a single technical "stance." Further, if both the growth enhancing and the defensive, constricting functions of narcissistic relatedness are present at the same time, how do we orient ourselves with our patients? How do we pay attention to the fluidity in our patients' shifts in relatedness, while also attending to their needs for consistency and reliability in their experience of their analyst's presence?

Readings:

Bach, S. (1994). Problems of Narcissistic Love. In *The Language of Perversion and The Language of Love*, pp. 29-49, New York: Jason Aronson.

Mitchell, S.A. (1986) The Wings of Icarus: --Illusion and the Problem of Narcissism. *Contemporary Psychoanalysis*, 22: 107-132.

Seligman, S. (2018) Illusion as a Basic Psychic Principle: Winnicott, Freud, Oedipus, and Trump. *Journal of the American Psychoanalytic Association*, 66: 263-288.

Recommended:

Bach, S., Grossmark, C & Kandall, E. (2014). The Empty Self and the Perils of Attachment. *Psychoanalytic Review*, 101(3): 321-340.

Week 5: Varieties of Narcissistic Relating Part III: Inflated and Deflated Narcissistic States

Following our study last week of how Bach's conceptualization of the inflated narcissist, who idealizes him/herself and denigrate others, and the deflated narcissist, who idealizes others, while denigrating him/herself can influence therapeutic interaction, this week we will further explore the ways in which clinical work with narcissistic patients involves bringing to light the patient's identification with *both parts of an internalized interaction* (e.g., the inflated narcissist's deep feelings of vulnerability and dependence or the depleted narcissist's hidden grandiosity and superiority). In this class, we will explore common transference/countertransference paradigms and binds in working with narcissistic issues. For example, the depleted patient and the inflated analyst, the inflated patient and the depleted analyst, the mutually admiring/idealizing dyad, the mutually depleted/inadequate dyad and we will address how these self-experiences are usefully understood through the lenses of subjective and objective self-awareness. Particular attention will be paid to the degree of differentiation in these relational configurations, as well as to challenges in identifying the analyst's participation in the configuration when his/her "role" conforms seamlessly to his/her preferred self-concept, technical proclivities, or defensive adaptations.

Readings:

Bach, S. (1998). Two Ways of Being. *Psychoanalytic Dialogues*, 8(5): 657-673.

Schoen, S. (2018). *Psychoanalysis in Real Time: Temporal Troubles in the Clinical Dyad*. Manuscript submitted for publication.

Recommended:

Slochower, J. (1996). Holding and the Fate of the Analyst's Subjectivity. *Psychoanalytic Dialogues*, 6:323-353.

Week 6: With Which Self do we Empathize? Implications of Multiple Self-State Models to Working with Narcissistic Problems

One influential strain of contemporary interpersonal/relational theorizing emphasizes the multiplicity of mental organization. In this model of mind "psychical

processes [are viewed] as a kind of confederation of multiple, dynamically interacting, but otherwise autonomous sub-organizations of internalized self and object representations which move in and out of conscious prominence depending upon the evocative potential of the current interpersonal moment” (Davies, 1999). In this class, we will examine some of the implications of this model for working with narcissistic problems. These include the way that technical choices may meet the needs of one of the patient’s “self-states,” while ignoring those of another. When we are trying to provide consistency, safety, or empathy, whose needs are we meeting and whose needs are we ignoring? And what, if anything, is lost in abdicating a view of a “core” or “unitary” self?

Readings:

Bromberg, P.M. the (2001) The Gorilla Did It: Some Thoughts on Dissociation, the Real, and the Really Real. *Psychoanalytic Dialogues*, 11: 385-404.

Davies, J. (1999). Getting Cold Feet, Defining “Safe-Enough” borders: Dissociation, multiplicity, and Integration in the Analyst’s Experience. *Psychoanalytic Quarterly*, 68: 184-208.

Goldman, D (2017). “A queer kind of truth”: Winnicott and the Uses of Dissociation. *A Beholder’s Share*, NY: Routledge.

Week 7: Tensions between Empathy and Recognition: the Contemporary Debate Between Self Psychological and Interpersonal/Relational Perspectives

The historical debate between self psychological and object relational perspectives about how best to work with narcissistic problems is alive and well in the contemporary literature. However, often lost in the arguments about the relative merits of challenging versus empathic interventions is a more nuanced elaboration of what “attunement” to the patient’s needs actually means. In this class we will explore the difficulties in maintaining an empathic stance, in which the therapist immerses themselves inside the patient’s perspective *and* a stance that honors the patient’s need to feel recognized by an outside other who can acknowledge their impact and their (in Sullivan’s terms) “bad-me” parts.

Readings:

Weisel-Barth, J (2003). The Case of Patient J. *Progress in Self Psychology*, 19: 199-207

Aron, L. (2003). A Ruthless Examination of an Empathic Clinical Presentation. *Progress in Self Psychology*, 19: 207-215

Weisel-Barth, J. (2003). Reply to the Discussions. *Progress in Self Psychology*, 19: 225-243

Benjamin, J. (1999) Afterward. In S. Mitchell & L. Aron (Eds), *Relational Psychoanalysis*, pp. 201-210. Hillsdale, NJ: Analytic Press.

Week 8: Whose Narcissistic States Are They Anyway? The Analyst's Narcissism in the Clinical Encounter

The contribution of the interpersonal/relational perspectives in recognizing the influence of the analyst's subjectivity, and thus the analyst's narcissism, on therapeutic interaction has been a theme throughout this course. Narcissistic patients can be "difficult," in part, because they confront the analyst with the more difficult parts of themselves. Calling the analyst's reactions in narcissistically informed enactments "countertransference" minimizes the extent to which the analyst's sense of self is on the line. These encounters can challenge the analyst's professional aspirations, desire for recognition, and capacity to self-regulate. In this class, we will explore how the narcissistic needs and defenses of the analyst can shape, make, or break the outcome of impasses with narcissistically vulnerable patients. We will use this to examine the role of the analyst's narcissism in structuring therapeutic outcome.

Readings:

Atwood, G.E., Stolorow, R.D., Trop, J.L. (1989). Impasses in psychoanalytic therapy: A royal road. *Contemporary Psychoanalysis*, 25: 554-573

Schoen, S. (2015). Afraid to Commit: Proposing Psychoanalysis and the Paradox of the Analyst's Desire. *Contemporary Psychoanalysis*, 51P 649-679.

Recommended:

Slavin, M. O. & Kriegman, D. (1998). Why the analyst needs to change: Toward a theory of conflict, negotiation, and mutual influence in the therapeutic process. *Psychoanalytic Dialogues*, 8 ; 247-284.

Hirsch, I. 2008. Coasting in the Countertransference: Analysts' Pursuit of Self-Interest. *Coasting in the Countertransference: Conflicts of Self Interest between Analyst and Patient*. New York: The Analytic Press.