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8 Tuesdays: 1/24-3/14 from 1:40-3:15 PM  
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1 Credit

## **Clinical Treatment of Specific Disorders An Object Relations Approach to Personality Disorders II: Narcissistic Disorders**

This course will focus on theory and treatment of narcissistic disorders from a contemporary object relations perspective. Clinicians from a variety of theoretical persuasions agree that individuals with pathological narcissism and narcissistic personality disorder pose formidable clinical challenges that make them among the most difficult to treat of those in the personality disorder spectrum. Their devaluation of therapy and their therapists, alternating with extreme idealization, their sense of entitlement and expectation of special treatment, alternating with extreme narcissistic vulnerability tax the skills of even the most experienced clinicians. Consequently, individuals with narcissistic disorders can engender powerful countertransferential feelings of being incompetent, bored, disparaged, and dismissed, or, at the other extreme, massively and unnervingly idealized. Adding to the difficulties in diagnosing and treating patients with narcissistic disorders is the fact that they can manifest themselves in multiple presentations depending on the level of personality organization, vulnerable or grandiose presentation or activated mental state.

The focus of the course will be on specific techniques to address the special challenges posed by patients with pathological narcissism from the initial to advanced stages of treatment including: 1) specific challenges at different stages of the therapeutic process from alliance building to termination; 2) a step-wise interpretive process to bypass the narcissistic patient's allergic reactions to interpretation; 3) the characteristic transferences and countertransferences patterns and how to address them; 4) how to work with narcissistic resistances to dealing with loss, mourning and termination. Transference focused psychotherapy (TFP-N), a manualized evidence-based psychodynamic psychotherapy for patients with narcissistic disorders will be introduced and contrasted with psychoanalytic approaches. We will discuss variations in psychoanalytic approaches to these patients in the light of clinical experience. The course time will be divided between discussion of readings and case presentations.

Course objectives: Candidates will identify and describe the contributions of five major vectors that lead to narcissistic disorders including: specific distortions in mental representations, insecure/disorganized internal working models of attachment, neuro-cognitive deficits, patterns of parenting and early experiences of trauma, and socio-cultural factors. Candidates will demonstrate the relative contributions of each both in the readings and in class discussion of case presentations. Candidates will be able to understand and describe the contemporary object relations perspectives on understanding and treating narcissistic disorders, including its origins in the work of Freud and Klein, as well as elaborations by contemporary Freudians and neo-Kleinians. Candidates will be able to describe the two major presentations of narcissistic disorders (vulnerable and grandiose) and how to tailor psychoanalytic approaches appropriate for different presentations. Candidates will also describe the way narcissistic pathology manifests itself at different levels of organization (from neurotic to borderline to psychotic) and the modes of treatment appropriate for different levels (psychoanalysis or psychoanalytic psychotherapy). Candidates will demonstrate through presentation of their own clinical case material, and understanding of the major transferences and countertransferences, and resistances that emerge with narcissistic patients in the clinical situation.

## Syllabus

### **Week 1: Overview of a Contemporary Object Relations Approach to Narcissistic Disorders**

Freud, S. (1914). On narcissism: An introduction. *Standard edition*, 14(67), 102.

Segal, H., & Bell, D. (1991). The theory of narcissism in the work of Freud and Klein. In J. Sandler, P. Fonagy and E. Person, Eds. *Freud's On Narcissism: An Introduction»* New Haven: Yale University Press, pp149-174.

Echo and Narcissus. In T. Hughes, trans. *Tales from Ovid*. New York: Farrar, Strauss & Giroux, 1997.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy*. Guilford Press. Preface and Chapter 1.

Learning Objective: Candidates will describe the origins of contemporary object relations perspectives on understanding and treating narcissistic disorders in the work of Freud and Klein.

Recommended:

Klein, M. (1946). Notes on some schizoid mechanisms. *The International Journal of Psychoanalysis*. 27, 99- 110.

## **Week 2: Overview of Contemporary Object Relations Approach to Narcissistic Disorders: Thick-skinned and Thin-skinned Narcissism**

Rosenfeld, H. R. (1987). *Impasse and Interpretation*. London: Routledge. Selections

Green, A. (2002). A dual conception of narcissism: Positive and negative organizations. *The Psychoanalytic quarterly*, 71(4), 631-649.

Joseph, B. (1959). An Aspect of the Repetition Compulsion. *Int. J. Psycho-Anal.*, 40:213-222.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy*. Guilford Press. Chapters 2 and 3.

### **Recommended:**

Bach, S. (1985). *Narcissistic States and Therapeutic Process*. Jason Aaronson.

Cain N.M., Pincus A.L., Ansell E.B. (2008). Narcissism at the crossroads: Phenotypic description of pathological narcissism across clinical theory, social/personality psychology, and psychiatric diagnosis. *Clinl Psychol Rev* 28:638-656.

Britton, R. (2000). *Hyper-Subjectivity and Hyper-Objectivity in Narcissistic Disorders*. *Fort Da*, 6:53-64. (2000). *Fort Da*, [6](#):53-64

Learning Objective: Candidates will describe the two major presentations of narcissistic pathology (vulnerable and grandiose) and will master how analytic technique ought to be tailored for each.

## **Week 3: Early and Mid-Stages of Treatment: Building an Alliance; Early Phases of interpretation, Dealing with Narcissistic Resistances.**

Bromberg, P. M. (1983). The mirror and the mask: On narcissism and psychoanalytic growth. *Contemporary Psychoanalysis*, 19:2, 359-387.

Kernberg, O. (2015). Narcissistic defenses in the distortion of free association and their underlying anxieties. *The Psychoanalytic Quarterly*, 84(3), 625-642.

Goldberg, S. H. (1988). Contemporary Psychoanalysis. XXII, 1986: The Wings of Icarus: Illusion and the Problem of Narcissism. Stephen A. Mitchell. Pp. *Psychoanalytic Quarterly*, 57, 465-465.

Steiner, J. (1994). Patient-Centered and Analyst-Centered Interpretations: Some Implications of Containment and countertransference. *Psychoanal. Inq.*, 14:406-422.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy*. Guilford Press. Chapters 4 and 7.

Recommended:

Ronningstam, E. (2012). Alliance building and narcissistic personality disorder. *Journal of clinical psychology*, 68(8), 943-953.

Steyn, L. (2013). Tactics and empathy: Defenses against projective identification. *The International Journal of Psychoanalysis*, 94(6), 1093-1113.

Learning Objective: Candidates will demonstrate the ability to engage the narcissistic patient in therapy via alliance building and technical modifications of the interpretative process in analysis and will demonstrate this understanding through clinical illustrations.

**Week 4: The Later Stages of Treatment: The Dissolution of Narcissistic Illusions, Mourning and Termination**

Symington, Neville. *Narcissism: A New Theory*, London: Karnac, 1993. Selections.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy*. Guilford Press. Chapter 8.

Chused, J. F. (2012). The analyst's narcissism. *Journal of the American Psychoanalytic Association* 60(5), 899-915.

Learning Objective: Candidates will demonstrate through presentation of their own clinical case material, the challenges in the later stages of treatment with narcissistic patients including: anxieties around the dissolution of the grandiose self and narcissistic illusions, defenses against mourning, loss and termination.

**Week 5: Narcissistic Resistances and Transferences**

Steiner, J. (2006). Seeing and being seen: narcissistic pride and narcissistic humiliation. *The International Journal of Psychoanalysis*, 87(4), 939-951

Steiner, J. (2008). Transference to the analyst as an excluded observer. *The International Journal of Psychoanalysis*, 89:1, 39-54.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy*. Guilford Press. Chapter 4.

Bradley, R., Heim, A. K., & Westen, D. (2005). Transference patterns in the psychotherapy of personality disorders: Empirical investigation. *The British Journal of Psychiatry*, 186(4), 342-349.

Almond R. (2004). "I can do it (all) myself." Clinical technique with defensive narcissistic self-sufficiency. *Psychoanal Psychol.* 21:371–384.

Learning Objective: Candidates will describe the major narcissistic resistances and how they manifest themselves in the clinical situation. Candidates will demonstrate how to address such resistances through clinical illustrations. Candidates will demonstrate through presentation of their own clinical case material, the major transferences and countertransferences that emerge with narcissistic patients.

**Recommended:**

Chused, J. F. (2012). The analyst's narcissism. *Journal of the American Psychoanalytic Association* 60(5), 899-915.

Betan, E., Heim, A. K., Conklin, C. Z., & Westen, D. (2005). Countertransference phenomena and personality pathology in clinical practice: an empirical investigation. *American Journal of Psychiatry*, 162, 890-898.

Tanzilli, A., Colli, A., Muzi, L., & Lingiardi, V. (2015). Clinician emotional response Towards Narcissistic Patients: A preliminary report. *Research in Psychotherapy, Psychopathology, Process and Outcome.* 18, 1-9.

**Week 6: Love, Sexuality, and Oedipal Issues in narcissistic patients.**

Feldman, M. (2008). Grievance: The underlying Oedipal configuration. *Intl J. of Psychoanalysis.* 89: 743 – 758

Britton, R. (2004). Subjectivity, Objectivity, and Triangular Space. *Psychoanal Q.*, 73:47-61.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy.* Guilford Press. Chapter 11.

Maldonado, J. L. (2006). Vicissitudes in adult life resulting from traumatic experiences in adolescence. *The International Journal of Psychoanalysis*, 87(5), 1239-1257.

**Recommended:**

Faimberg, H. (2005). *The telescoping of generations: Listening to the narcissistic links between generations*. New York: *Rutledge: Taylor and Francis Group*. Chapter 5. The Narcissistic Dimension of the Oedipal Configuration.

Learning Objective: Candidates will describe the conflicts around love relations and sexuality for narcissistic patients. Candidates will define the manifestations of oedipal issues in narcissistic patients, and how these affect the transference relationship.

### **Week 7: Attachment, Mentalization, and Empathy in Narcissistic Pathology: Clinical, Theoretical and Empirical Perspectives**

Fonagy, P. and Target, M. (2006). The Mentalization-Focused Approach to Self Pathology. *Journal of Personality Disorders*: Vol. 20, 6: Special Feature on Self and Identity, pp. 544-576.

Diamond, D., Yeomans, F.E, Stern, B.L. & Kernberg, O.F. (2022). *Treating Pathological Narcissism with Transference Focused Psychotherapy*. Guilford Press. Chapter 9.

Baskin-Sommers, A., Krusemark, E., & Ronningstam, E. (2014). Empathy in Narcissistic Personality Disorder: From Clinical and Empirical Perspectives.

Learning Objective: Candidates will describe the major patterns of attachment that characterize patients with narcissistic pathology and their implications for analytic treatment. Candidates will describe the deficits in mentalization, cognitive and affective empathy in patients with narcissistic pathology, and demonstrate how these deficits complicate the treatment process.

### **Week 8: Malignant Narcissism as a Clinical and Social Phenomenon**

Diamond, Yeomans, Stern & Kernberg. *A Clinical Guide to Treating Narcissistic Personality Disorder: A Transference Focused Psychotherapy* (Guilford Press, 2021). Chapter 10.

Kernberg, O. F. (2007). The almost untreatable narcissistic patient. *Journal of the American Psychoanalytic Association*, 55(2), 503-539.

Kernberg, O. F. (2020). Malignant narcissism and large group regression. *The Psychoanalytic Quarterly*, 89(1), 1-24.

Learning Objective: Candidates will describe the major characteristics of malignant narcissism and demonstrate how these complicate the treatment process. Candidates will describe the impact of malignant narcissism in leaders on political, organizational and social life.

