The Unwanted Child’s Narcissistic Defense

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Abstract

In this article, the narcissistic defense is presented from the perspective of Spotnitz’s (1985) modern psychoanalysis followed by a description of its second-order structural analysis correlate and a discussion of transactional analysis as a treatment to resolve this defense.

Clients suffering from disorders originating in infancy usually do not process their aggressive impulses properly. This problem is referred to in psychoanalytic writings as the narcissistic defense. A recent school of psychoanalysis, pioneered by Hyman Spotnitz, M.D. (1969/1985), and his associates in the 1950s and called “modern psychoanalysis,” considers the narcissistic defense to be the cause of, and its resolution the key to the cure of, the full range of preoedipal disorders, including schizophrenia.

Freud (1913/1958) stipulated that in narcissistic disorders the fixed hostility that develops makes analysis impossible. Exasperated by their ability to thwart his therapeutic efforts, he once remarked, “Psychotics are a nuisance to psychoanalysis” (Freud cited in Federn, 1952, p. 136). Indeed, until the early 1940s there was no effective treatment for schizophrenia and other disturbances originating in infancy.

However, it has been increasingly recognized (Klein, 1935/1975; Rinsley, 1989) that many clients arrive at therapy with unresolved narcissistic fixations of varying degrees. Fairbairn (1944/1952), for example, wrote that “a sufficiently deep analysis of the oedipus situation invariably reveals that it is built up around the figures of an internal exciting mother and an internal rejecting mother” (p. 142), a state that developmentally precedes the depressive position in later infancy (Klein, 1935/1975).

In spite of Freud’s comment about psychotics, psychoanalytic theories and treatment for preoedipal disorders have been developing since the early 1940s. These developments evolved into three schools: object relations, ego psychology, and self psychology. Another psychoanalytic approach, so-called “modern psychoanalysis” (Spotnitz, 1969/1985), has been growing in a manner reminiscent of the rapid early expansion of transactional analysis and is, at present, being taught in institutes in major cities around the country. Interest in modern psychoanalysis is seen in other countries as well.

Central to modern psychoanalytic theory is the concept of the narcissistic defense. In this article, the narcissistic defense is presented from the modern psychoanalytic perspective. Then its structural analysis correlate is outlined, and illustrations from sessions are provided. It is then proposed that the narcissistic defense is carried out by a part of the Child ego state the infant splits off in its quest to survive its unfavorable environment, and that the narcissistic defense is but a specialized function of that split part. That split, the process that leads to it, and its consequences are described in my article “The Unwanted Child” (Lederer, 1996). In that article, transactional analysis treatment is proposed to correct the structural distortions the infant effected by the splitting, a correction that also resolves the narcissistic defense.

The Narcissistic Defense

The narcissistic defense concerns the proclivity of the client to attack his or her own self to spare others. Spotnitz (1969/1985) stated that as early as 1948 Nunberg wrote about such a patient: “In a similar situation the patient said, ‘It seems to me that I am to hit somebody, to tear out somebody’s hair.’ Thereupon he struck his own head with his fist and started to pull out his hair” (p. 48). Margolis (1994) defined the narcissistic defense as follows:
A defense organized in the narcissistic phase of development by the deprived and frustrated child against his open expression of aggression, by turning the aggression inward upon himself. He protects his mother but sacrifices his own ego in the process. (p. 180)

The consequence to the patient, Margolis wrote, is that “his entire character structure and his way of functioning have been organized around the need to maintain this position” (p. 180). And, “the narcissistic defense . . . is at the root of the narcissistic disorder, in whatever form” (p. 150).

According to Spotnitz (1976/1987):

The child who tends to discharge frustration-aggression into his body, for example, is a likely candidate for psychosomatic illness later in life. The highway to depression is paved with frustration-aggression poured characteristically into the superego, which then attacks the ego. If the child does not discharge his impulsivity at all, but lets it accumulate in an emotionally impoverished ego, the corrosive effects of the mobilized frustration-aggression may fragment his ego and push him over the threshold into schizophrenia. This particular pattern of response to unfavorable environmental pressures is what I mean by the narcissistic defense. (p. 101)

Accordingly, “Resolving the narcissistic defense and enabling the patient to express his aggressive feelings are major concerns of modern analysis” (p. 181). On the outcome of resolving the narcissistic defense, Spotnitz and Meadow (1976) wrote:

When a patient is able to feel his hate impulses rather than his anxiety about them, and when his resistance to discharging them is resolved, it is not the persons for whom he originally felt these destructive urges, but the person conducting treatment who is in the direct line of fire. . . . The key to effective and mutually safe treatment is the activation of these emotional forces in the therapy situation. . . .

The more the patient feels his aggressive impulses and expresses them in words charged with genuine emotion, the more aware he becomes of his love impulses and the easier it is for him to act on them unobstructedly in healthful and socially constructive ways. (p. 42)

Spotnitz and Meadow added, “He also has to be helped to develop new patterns for controlling and regulating the discharge of these impulses” (p. 43). Finally, “We need to recognize that the problem is not hate itself, but its expression in harmful ways” (p. 44).

From the preceding it is apparent that self-hatred and self-attack, rather than self-love, are considered by the modern analyst to be the nuclear problem requiring attention in the treatment of narcissistic disorders. Modern analysts assume that most patients arrive at treatment with some leftover narcissistic fixations, and treatment with most patients begins with this assumption in mind. As with the three schools mentioned earlier, modern psychoanalytic treatment usually requires many years.

Structural Analysis Correlate

The structural characteristics of the narcissistic defense can be discerned by understanding the function of defense. Spotnitz (1976/1987, 1976) wrote that the purpose of defense in general is to “prevent the occurrence of some undesirable action through the self, by someone else, or by natural processes” (p. 103). Thus, by definition protective, a defense is parental in function, and its aim is to attend to the Child’s safety.

But since the narcissistic defense originates in infancy, before differentiation of the first-order Parent ego state, the parental function of that defense must reside within the Child ego state as a second-order P₁ (see Figure 1) and fulfill a protective function for the infant in the Child, C₁. That function is to save C₁ from consequences, perceived as catastrophic, of its impulse to attack the frustrating mother. The impulse is transferred, probably by the Adult in the Child (A₁), to a made-up Parent (P₁) that has been split off (C₁) and that, in turn, “safely”
discharges the impulse back on C1, thereby sparing the mother.

Because the split occurs before the differentiation of either P2 or A2, neither is involved, thereby making the narcissistic defense egosyntonic with the Child, outside Adult awareness or Parental influence.

Example 1

Keith is a 32-year-old college graduate, a manager at a financial services company. He was raised by an alcoholic, detached mother and a distant, angry father. He presented himself in treatment as polite, vaguely irritating, detached, and mechanical. He was terrified of closeness and had not had any close relationships up to the time he entered therapy. He revealed to that he had been calling himself names and occasionally hitting and punching his own head. There is no history of physical abuse in his family.

Th: You are telling me about a part that hits and a part that’s being hit. Which would you like to work with first?

Keith: The part that hits. My head hurts. I feel like I’m being hit.

Th: Put the hitting part on that chair and ask it to tell you about itself.

P1 (in a strong, angry voice): I’m so angry and upset. All I want to do is hit myself because that’s all I deserve. I want to punch myself and hit myself hard and call myself “stupid!” “jerk!” “idiot!” over and over again. I don’t deserve anything. I can’t do anything right. I’m just nothing. I wish someone would hit me over and over again. That’s what I’m all about. I’m so stupid. I can’t get it out how I hate myself. I’m doing stupid things and just want to stop myself. I want to take a baseball bat and smack my head. How nice it could be if I could do that.

Th: How did you get to where you want to hurt yourself?

P1: I get angry. When I wasn’t taken care of, as soon as I got angry, that’s it. Who would want to give to someone who is angry? I remember the anger I felt. The tense feelings. But I didn’t have a chance. I got angry and wanted to hit somebody and couldn’t hit them. So I hit myself. It’s easier to hate myself, turn on the anger at myself than to be angry at someone and risk losing them.

Th: Now move to that chair and be the part of you that’s being hit.

C1: I’m scared. It hurts. (cries). He hits me because I do things wrong. I don’t want to do anything, and he hits me. I’m just here, helpless, needy, very scared because I don’t feel protected. I don’t feel loved. I don’t feel I can be. I’m afraid. I feel empty and alone, uncared for, sad, and the only thing I want is someone to take care of me.

During the months of the treatment described later in this article, Keith entered into a relationship with a woman of good prospect. Problems surfaced in that relationship that paralleled treatment milestones and were resolved as treatment progressed. The couple recently married.

Example 2

Gary, a 35-year-old scientist of some achievement, has a manner that is careful and deliberate. His speech, sad sounding, is low in energy. His thinking tends to be circular. Although committed to therapy, he feels hopeless about it. His narcissistic defense revealed itself to be subtle, symbolic, and insidious.

Gary: I just feel... I want something, and
when I feel that, I feel like there is a vacuum cleaner inside me waiting to be filled that sucks me in and keeps me from doing anything. It's as though a life force is sucked into the vacuum cleaner. It sucks me in and all that will be left is a hollow shell at the bottom, completely hollow, with no energy at all. The vacuum cleaner sucks in every fragment of life, any spark of life that's left. There doesn't seem to be anything to change that.

Th: Put the vacuum cleaner on that chair and ask it to tell you about itself.

VC: I'm a vacuum cleaner inside Gary. I move all around, sucking out every bit of life. These are little sparks I have to vacuum up, like weeds. I don't know what they are. It's very important not to let them grow wild, or all the brakes will be off, and then he'll be open to all kinds of disasters. If the growth gets too wild, it'll be inconceivable. I have to keep it very clean and spotless. Nothing is going to take hold or grow wild. That's what I do.

In its zeal to absorb all aggression, the split-off vacuum cleaner sweeps up indiscriminately any spark of impulsiveness or spontaneity. Further work with the vacuum cleaner showed that it does not just contain the accumulated impulsivity, but discharges it onto the other part through a stream of humiliating and contemptuous put-downs.

Transactional analysts, versed in ego state theory and treatment, can immediately recognize the benefit of understanding the second-order structure of the narcissistic defense.

**The Tough Kid**

In my article “The Unwanted Child” (Lederer, 1996), which considers transactional analysis treatment for disorders that originate in infancy, I cite research showing that infants whose mothers are excessively frustrating or rejecting detach themselves from their mothers if closure to the infants’ deprived environment cannot be obtained (Bowlby, 1969, 1973; Federn, 1952). I then stipulate that when such a detachment occurs, it is followed by an internal restructuring that begins with the infant’s excluding its internalized Mother (P₁). I call this exclusion a “basic flaw.” In the absence of a reliable internal representation of Mother, the infant then splits psychically to produce a made-up substitute.

I further describe how the split (not the same as the splitting defense of object relations theory) brings about unintended, disastrous consequences for the person’s life, not the least of which include stunting subsequent growth and making close, loving relationships impossible.

This P₁ substitute functions to protect C₁ from any possibility of disappointment that may repeat the original pain of separation. Functionally, it surrounds C₁, which I call the Dependent Child, and stands guard over it against any outside contact that has the potential for nurturing or intimacy. It assumes the executive and excludes not only significant others, but also the client’s own Adult from external and intrapsychic contact.

Behind various harmless guises, that protective part is as hard as a rock, resolute and resourceful in its deflecting maneuvers. I call this P₁ substitute part the Tough Kid. I show that both the Tough Kid (TK) and the Dependent Child (DC) (with TK’s permission) are available for contact through chair work. Studies of the narcissistic defense in sessions reveal that it is but one among several specialized protective functions of the Tough Kid (see Figure 2).

However, the Tough Kid encompasses more than just protective functions. While the Dependent Child is forever locked in desolate emptiness and loneliness, it is the Tough Kid that carries the intolerably painful emotional memories of the original loss, and it is the Tough Kid that must work these out in treatment.

**Treatment**

Understanding the narcissistic defense as a specialized protective function of the Tough Kid enlarges our perspective on treatment. The aim of treatment becomes the mending of the
"basic flaw." When that mending is accomplished, all the protective roles of the Tough Kid become superfluous. The Tough Kid then rejoins the Dependent Child to return the Child ego state to its original, integrated state. The client can then begin his or her voyage through the respective, previously incomplete, developmental stages toward healthy separation and individuation.

To bring about that mending, the Tough Kid must be helped to reenter the pain of the original separation and to give it full emotional and verbal expression. The mending is accomplished when the original devastating loss and the agonizing feelings that accompany it are fully recalled, verbalized, and mourned.

But in its protective blocking-off the Tough Kid makes it incredibly difficult for the therapist to work with it directly. To bypass this obstacle, the therapist uses a part of the client’s own Adult, designated as the Auxiliary Adult (Ax), to work with both split parts under the therapist’s supervision, making the treatment mostly intrapsychic. For a fuller understanding of the theory and treatment of the Tough Kid, the reader is urged to refer to my previous article (Lederer, 1996).

Soon after this treatment was initiated, Keith’s Tough Kid became aware of its role in the narcissistic defense:

TK: I didn’t know I was such a monster. I feel good it’s out. I didn’t understand it. I thought it was all [hitting myself] me. I feel like a monster. It’s so right though that he [the Dependent Child] wants to get attention for doing things right instead of wrong. I don’t know how to do that.

A few sessions later rage emerges directed first at the Auxiliary Adult:

TK (to Ax): I want to say you are wrong and to fight with you. I want to beat the shit out of you. I want to punch you, hit you, scream at you, and throw you out of the fucking window! I want to push, kick, scream, and punch. I don’t fucking trust you. I don’t trust anybody. Nobody gives a fuck about me. You don’t give a shit. Where were you then? Why are you concerned now? You don’t care, just like everybody else.

Several sessions later, the Tough Kid’s rage begins to flow toward the original sources of frustration:

TK: I’m furious. I want to tell my dad and my parents in general, “Why don’t you help me, fucking assholes!” All I want to do is punch somebody. They didn’t help me. They weren’t there . . . fucking punch them! . . . slug them. I hate everybody, my parents, my sister, my brother, my mother—drunk! Look what they fucking did! They weren’t there. Why didn’t they take care of me? I want to fucking punch somebody. They didn’t help me. This is a lot different from hitting myself. I have a headache. I’m still angry. I’m also sad.

Keith reports that he has stopped hitting himself but still attacks himself verbally. He experiences mounting sadness between sessions and frequent bouts of crying. In the sessions the Tough Kid’s own dependency needs have emerged:

TK: I feel so empty. I remember wanting to be held and acknowledged and taken care of.

Keith’s Tough Kid is now in the throes of grieving, and in one of the early grieving sessions it indicates that it wants to discuss ceasing its verbal attacks on the Dependent Child.

TK (to Ax): All I ever wanted was to be loved.

In the last two weeks I feel maybe you are the answer to that. I’m too afraid of it (cries). I also want to agree to not telling him [DC]
he's stupid; resist doing that. If I stop telling him he's stupid, we'll get better.

Ax: Should you discuss it with him directly?

TK: I'm scared to, but yes. (To DC): I can't help myself (cries). I just feel it's [attacking you] the way it should be.

DC: I just want to be better. I don't want it to be that way.

TK: (Cries) It's been four weeks that I haven't hit you. I try so hard to get better (cries). I want to get better too, but what's going to happen to me? If I can't be the angry, interfering, holding-in part, I'll crumble away. The things I do give me shape, form, substance. Without that, what am I going to be? I'll be nothing. I'm not supposed to give up these things. This is what I'm about. I'm what Keith is. I don't know how to be different and let go. How am I going to let go about my mother, my father, and my sister? I'd love to be free. I don't know... it terrifies me. I can see the end, but I don't know how to get there. I just want you to understand the struggle. It's a hard fight.

DC: I kind of don't know what to tell you. I just wish you'd stop calling me names and putting me down. I'm glad to see you are not going to call me names anymore. I'm sure it's going to cause you a lot of feelings. Our goals are the same. To make progress. I want to say I was proud of you (cries). I'm proud of all of us. We're making it... and that's good. We really are seeing the results. I can't imagine going back to not being real. I'm happy and real. I want you to keep coming here every week and talking it out. It's good. I want you to get better. We're getting help. It's a good thing. You just keep talking. It's good that you said all this stuff. I'm glad you don't want to call me names. It's hard for you. You are taking out all your anger at me, and you need to let it out by talking.

TK: You understand. You are smart and you know. You are that part that knows things. You are our feelers. I bet you can help.

DC: How do you think I can help you?

TK: I don't know how... just being there. You have good sense about things. You could help me say things. You are the confident part that knows. Everyone in the group seems to like us more. We'll talk again. I like that.

DC: Yah. I like it too. Thanks for the compliments. Nothing is going to get in our way.

Keith no longer attacks himself. His narcissistic defense is resolved. He is progressively getting better at expressing his dislikes directly to the sources. His work continues by investing his freed energies in furthering his mourning work.

Conclusions

The significance of the modern analytic view of the narcissistic defense and its implication for the etiology and treatment of the full range of narcissistic disorders should be noted and taken into account. The purpose of this article is to point the transactional analyst's attention toward the narcissistic defense, where his or her understanding in terms of ego state theory and treatment provides a considerable advantage.

The treatment considered in this article is not aimed directly at the narcissistic defense but is intended to correct the second-order structural distortions effected by the infant trying to survive its unfavorable environment. The narcissistic defense resolves naturally during the restructuring work.

In my cited article (Lederer, 1996) I call the method of treatment described here treatment of the unwanted child rather than treatment of particular diagnoses. I caution there that use of that treatment should be determined by the client's structural characteristics, not by the diagnosis. This treatment is considered intensive and best when provided at a frequency of one or more sessions a week. In addition, group membership is recommended to provide the client with a place to generalize the accomplishments obtained in individual sessions.

Finally, while the modern analyst sets his or her sights on the aggressive drive as the focus of treatment, the transactional analyst aims to facilitate the expression of mourning, toward which anger and hate are but a necessary step.
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REFERENCES

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