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## **The primary and essential role of psychodynamic factors and psychological economics in the development of narcissism and its quantitative energy complexities as explained by psychoanalysis.**

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### **Abstract**

Psychoanalytic studies have provided the most comprehensive descriptions and understanding of the complexities of narcissism and narcissistic personality functioning. The interplay between analytic treatment, theory, and conceptualization—essential for developing theories closely related to human internal experiences—has led to significant advances in the approach to narcissism over the past century. Particularly in the last fifty years, theories of narcissism have considerably influenced not only the diagnostic portrayal but also the dynamic understanding and treatment of narcissistic patients. Major trends and focal points in evolving psychoanalytic theories, from drive and psychic structure theory to ego psychology, object relations, self-psychology, and more recent schools like interpersonal and intersubjectivity, have added diverse facets to the conceptualization and clinical application of narcissism. Additionally, several authors, from their theoretical perspectives, have focused on central characteristics of narcissism, such as shame, envy, and



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perfectionism. While our understanding of narcissism and narcissistic personality functioning has evolved with these theoretical developments and accompanying treatment strategies, significant common denominators have also emerged. Some are central to psychoanalytic theory in general, while others are specific to the conceptualization of narcissism. This chapter reviews theoretical perspectives on narcissism, focusing on Freud's original observations of its central functions and their development, the impact on our clinical understanding of narcissistic personality functioning, and implications for treatment.

## Keywords

Object libido, narcissism libido, melancholia, psychodynamic, psychosexual,

## Introduction

Freud described narcissism as a strategy, a libidinal stance taken, for instance, when a person experiences physical pain. A severe toothache can make anyone narcissistic because their drives focus on the painful area. Classical neurotic suffering, which Kohut would call "structural," brings narcissism along, as being neurotic in Freudian terms means being uncertain about one's desires. This uncertainty, or the perplexing state of unfulfilled desire, leads to narcissistic tendencies. A neurotic condition predisposes an individual to narcissistic disorders, much like how socially marginalized individuals are more likely to commit crimes. This does not imply that criminal personalities tend to become homeless, just as Latin analysts do not suggest that narcissistic personalities tend to develop a specific type of neurosis. The ambiguity of Freudian narcissism is



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evident from Freud's first use of the term in 1910: "[Homosexuals] identify themselves with a woman and take themselves as their sexual object (...) they proceed from a narcissistic basis and look for a young man who resembles themselves and whom they may love as their mother loved them." From the outset, Freud does not exclusively associate narcissism with self-love. Instead, he views narcissism as the self (das Ich) being loved by the individual in the same way it was loved by the mother or father—by the Other, in Lacanian terms. Narcissism, according to Freud, is "I love my own image as the object loved by the Other." Therefore, our narcissistic self-love is never natural or primary. Freud sometimes describes narcissism as an automatic reaction rooted in a primitive libidinal position, where we revert to a selfish, infantile state when experiencing physical pain. However, from the beginning, Freud also characterizes this narcissistic response as an alienation within the love and desire of the Other. We do not love ourselves merely to protect our bodies from harm; rather, we are "corrupted" by the love of the Other, who does not wish us to be harmed. We care for ourselves because an "other" loves us. The concept becomes even more complex when considering what it means to be the Other's love object. The object of love, interest, or desire is never identical to the real external thing, according to Freud and many philosophers. To the question of why the other loves us, according to Freud's theory, the answer is: "Because the Other, the parent, loves their own mirror image in the children." The narcissistic individual loves themselves to the same extent that their parent loves them, but the parent, in loving their child, is actually loving themselves. Narcissism is always a second-degree narcissism, a narcissism of narcissism, and never primary (except in the speculative myth of primary narcissism). Narcissism is more of a social relation than a personality type. This is why Freud often describes as narcissistic those who are attracted to narcissists or, conversely, those who are loved narcissistically by others. The Freudian concept of narcissism is problematic because it constantly shifts from the logical subject to the logical object, from the lover to the beloved. Among post-Freudians, Freud's



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assertion that the narcissist loves the object loved by his mother is typically seen as a prompt to delve deeper into the early relationship between mother and infant. This is why much of the post-Freudian debate has focused on the development of child sexuality or personality. However, these theorists often overlook that Freud's discussions of early childhood stages are based on assumptions derived from adult analysis. When Freud says, "My analysand regressed to an oral phase, when he was fed by his mother," it is misleading to interpret this as a literal historical hypothesis. Freud often misunderstood his own concept, suggesting that the analyst needed to reconstruct historical realities—early traumas, the primal scene, and other dramatic events—but this presumes the most tenuous aspect of psychoanalysis: its claim to narrate true stories. When Freud discusses early childhood, he is talking about a narrative (in Lyotard's terms), a myth intended to help the subject move away from an obsession with the self. Freud is not presenting a scientific hypothesis when he tells his homosexual analysand, "When you are attracted to this young man, you love the beautiful child you were for your mother." Instead, he is offering a myth that might be meaningful to the analysand, but holds no relevance for behavioral scientists. This is a hermeneutic, rather than causal, psychological explanation. The analysand often says, "This is just who I am; how can you change that?" However, the astute analyst responds, "What you consider your 'self' is actually the object of your father, your mother—your Other." Yet, when the insightful analyst begins to theorize, he often finds himself like Achilles in the endless chase after the tortoise. By entering the interminable and tedious debate between Self-Psychology and Object-Relations Psychology, the analyst acts as though he is telling the analysand, "I truly know—scientifically, rigorously, medically—what you are, your Self." In doing so, the theorizing analyst makes the same error as his client, who says, "I am just that, something, just my... self." The analyst believes that a subject is something definable. Thus, psychological theory, or the psychological interpretation of Freud's theory, becomes the narcissism of the psychoanalyst. The real challenge



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in Freud's text is not the ingenious way he connects various phenomena within the framework of narcissism—such as organic pain, sleep, hypochondria, schizophrenia, humor, great criminals, homosexuality, fascination with beautiful women, predators, cats, children, self-esteem, and being in love. The difficulty lies in the fact that his various notions of narcissism do not align or overlap in a logically consistent manner. My goal is not to make Freud's theory consistent, complete, or respectable, as a typical disciple might aim to do. Instead, my work aims at deconstruction. I intend to highlight Freud's continuous efforts, inconsistencies, and contradictions, as well as the inherent tensions in his work. In my attempt to complete the puzzle of Freudian theory, I used some simple mathematical functions. In mathematics, a function is when the semantic dimension of one term varies proportionally with the variations of the semantic dimension of a connected term. A functional concept is not an absolute identity but a variable: something that changes as its complementary variable changes. In Latin Europe, many prefer structural descriptions over developmental or historical ones. Reconstructions of childhood, where humans shift step by step from one position to another, lend coherence to Freud's peculiar conception of the mind. Genetic descriptions are like narratives or myths; they obscure the logical puzzles of theory behind a captivating story of stages. According to anthropologist Claude Lévi-Strauss, myths and tales, like mathematical structures, attempt to resolve contradictions. However, myths and developmental explanations conceal, in an origin narrative, problems that could be addressed in a clear, mathematical form. History and myth dress these bare mathematical forms in seductive attire. In Europe, some of us prefer the nudity. In Freud's conception, there is an ambiguity surrounding the "Ich" or "I": it represents both the whole subject and a part of it simultaneously. Even before introducing the second topography (the Ego/Superego/Id triad), Freud's "I" is both a collection of instances and one of these instances. The development of the concept of Self in English-speaking psychoanalysis is an attempt to resolve this ambiguity. However, to truly understand Freud, we



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must acknowledge and respect this ambiguity. Conversely, by Object-Libido, Freud refers to a functional relationship between the "I" and my Objects. Naturally, there is also a connection between my Ideal and my Object: the more I idealize my object, the less it remains merely an object. Similarly, the more my ideal becomes objectified, the less it remains an ideal. The arrows indicating both directions suggest that this relationship is always reciprocal and contrary. Thus, I-Libido can mean "I love myself," but also "My Self loves me." Similarly, Object-libido can mean both "I love it" and "It loves me." What is puzzling in Freud's work is his placement of narcissism within the I-libido space, in the relationships between I and Ideal. However, elsewhere he defines narcissism as not specific to the I-libido, describing it as the passive mode of Libido, even of Object-Libido. Narcissism is essentially "The Ideal loves me" and "It loves me," always placing the "I" in a passive position, as my-Self. In English, we never say "I-self loves me," but always "I love myself." The "self" is never in the "I" position; it is always a reflection, an image, of the I. The term narcissism originates from clinical descriptions and was selected by Paul Näcke in 1899 to describe the attitude of a person who treats their own body as they would a sexual object. This involves looking at, stroking, and fondling their body until they achieve complete satisfaction through these activities. When narcissism reaches this level, it represents a perversion that encompasses the entire sexual life of the individual, displaying characteristics typical of all perversions. Psychoanalytic observers later noticed that individual traits of the narcissistic attitude appear in many people with other disorders—for example, as Sadger pointed out, in homosexuals. This led to the hypothesis that a form of libido allocation deserving to be called narcissism might be much more widespread and could be considered a regular part of human sexual development. Challenges in psychoanalytic work with neurotics reinforced this idea, as their narcissistic attitude seemed to limit their susceptibility to influence. In this context, narcissism would not be classified as a perversion, but as a libidinal configuration A compelling reason for examining the concept of



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primary and normal narcissism emerged when attempts were made to incorporate our understanding of dementia praecox (Kraepelin) or schizophrenia (Bleuler) into the framework of the libido theory. Patients with these conditions, whom I have suggested calling paraphrenic, exhibit two key characteristics: megalomania and a withdrawal of interest from the external world—both from people and things. Due to this withdrawal, they become inaccessible to psychoanalytic influence and cannot be cured by our methods. However, the paraphrenia's withdrawal from the external world requires further clarification. A patient with hysteria or obsessional neurosis also withdraws from reality to some extent due to their illness. Yet, analysis reveals that they have not entirely severed their erotic connections to people and things. They retain these connections in their fantasies by either substituting real objects with imaginary ones from memory or mixing the two, and by refraining from initiating actions to achieve their aims related to these objects. Only this condition of the libido can we properly describe as 'introversion' of the libido, a term Jung uses broadly. In contrast, the paraphrenic appears to have genuinely withdrawn their libido from external people and things, without replacing them with fantasy substitutes. When such replacements do occur, it seems to be a secondary process, part of an attempt at recovery, aimed at redirecting the libido back to objects the question arises: What happens to the libido withdrawn from external objects in schizophrenia? The characteristic megalomania of these states provides a clue. This megalomania has undoubtedly developed at the expense of object-libido. The libido withdrawn from the external world is redirected to the ego, resulting in an attitude that can be called narcissism. However, the megalomania itself is not a new creation; it is, as we know, an amplification and clearer manifestation of a previously existing condition. This leads us to view the narcissism that arises from the withdrawal of object-cathexes as secondary, superimposed on a primary narcissism that is hidden by various influences. This extension of the libido theory, which I believe is a valid one, is further supported by our observations and insights into the mental life of children and primitive peoples. Among these



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groups, we find traits that, if they appeared in isolation, could be attributed to megalomania: an overestimation of the power of their wishes and mental acts, the 'omnipotence of thoughts', a belief in the magical power of words, and a technique for interacting with the external world—'magic'—which seems to be a logical application of these grandiose premises. In today's children, whose development is less clear to us, we expect to find a similar attitude towards the external world. Thus, we conceive of an original libidinal investment in the ego, from which some is later diverted to objects, but which fundamentally persists and relates to object-investments much like the body of an amoeba relates to the pseudopodia it extends. In our research, which initially focused on neurotic symptoms, this aspect of libido allocation remained hidden. All we noticed were the emanations of this libido—the object-investments, which can be extended and retracted. We also observe a broad opposition between ego-libido and object-libido: the more one is used, the more the other is depleted. The highest development of object-libido is seen in the state of being in love, where the subject appears to give up their own personality in favor of an object-investment; conversely, in the paranoid fantasy (or self-perception) of the 'end of the world', we see the opposite condition. Regarding the differentiation of psychic energies, we conclude that during the state of narcissism, they exist together and our analysis is too coarse to distinguish between them. It is only when there is an object-investment that it becomes possible to differentiate a sexual energy—the libido—from an energy of the ego-instincts

### **the study and its questions**

1-what are the psychodynamics of the narcissism libido?

2-how can we recognize the complex relationship between objects and ego?

3-what are the differences between primary narcissism and secondary narcissism?





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## Research problem

Studies on narcissistic personality traits have contributed to a deeper comprehension of the pathological aspects associated with grandiosity, vulnerability, and interpersonal hostility. Recent research has shed light on the interpersonal consequences for individuals closely involved with those exhibiting such traits, yet qualitative investigations in this area are lacking. Given that individuals with pathological narcissism often manifest challenges related to identity and emotional regulation within significant interpersonal relationships, there is a need to explore the effects of these dynamics on others

## Significance of the Study

The significance of this study lies in illuminating the energetic factors contributing to the development of narcissism. This study's significance rests in elucidating the intricacies of narcissism through a deeper examination within the framework of psych economic theory. The significance of this study lies in its objective to comprehend the psychodynamic intricacies of narcissism.

## Research Methodology

The research methodology is based on the theoretical and clinical frameworks of narcissism and its disorders. We requested individuals who scored above a predetermined threshold on a narcissism screening measure to have their relatives provide descriptions of their relationships (N = 436), including current romantic partners (56.2%), former romantic partners (19.7%), and family



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members (21.3%). Participants were instructed to outline their relative's characteristics and interactions with them. Verbatim responses underwent thematic analysis.

## Object Libido

In his work "Beyond the Pleasure Principle" (1920g), Freud criticized those, like Jung, who hastily equated "libido" with instinctual force in general, cautioning against giving too much weight to critics who suggested that psychoanalysis excessively attributes everything to sexuality. In "On Narcissism: An Introduction," Freud proposed a theoretical response, suggesting that libido initially focuses on the ego, termed "primary narcissism," before being directed towards external objects and drives at a later stage. He likened this process to the original libidinal investment in the ego persisting while some is redirected towards external objects, akin to an amoeba's relationship with its pseudopodia. Freud also noted a contrast between ego-libido and object-libido. Additionally, he acknowledged that the hypothesis of separate ego-instincts and sexual instincts, known as the libido theory, has little psychological basis and mainly draws support from biology

## Ego Libido

In the subsequent years, Freud refined his depiction of ego-libido, later termed "narcissistic libido," by proposing the concept of "secondary narcissism," where libido could be redirected from an object towards an ego that becomes its own love object. He also differentiated between repression in transference neuroses, involving the withdrawal of libido from consciousness and the



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dissociation of thing and word representations, and repression in narcissistic neuroses, which involves withdrawing libido from unconscious thing representations, constituting a deeper disturbance.

## **The Interaction of the Id, Ego, and Superego**

When discussing the id, ego, and superego, it's crucial to recognize that these aren't distinct entities with rigid boundaries. Instead, they're dynamic elements constantly interacting to shape an individual's personality and actions. Given the multitude of competing influences, it's understandable how conflicts can emerge among the id, ego, and superego. Freud's work underscores that these conflicts are central, with the particular nature of these discrepancies dictating one's thoughts, emotions, behaviors, and overall personality.

## **The Mechanics and Dynamics of Narcissism**

According to Freud, the ego begins to form in infancy, particularly during the oral stage of psychosexual development. During this phase, the child's perspective is highly self-centered, perceiving themselves as the focal point of their world, likely due to the maternal fulfillment of their needs and desires. However, as the child matures, this egocentric viewpoint shifts. They come to realize that life doesn't always cater to their desires and that they are not the sole focus of attention. Consequently, their self-centeredness diminishes over time. Freud extrapolated from this



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observation that all individuals possess a degree of narcissism from birth, which is crucial for normal development. Yet, as we progress beyond early childhood, our excessive self-love diminishes, making way for a love for others. In terms of libido, narcissism can manifest in two forms. In infancy and early childhood, libidinal energy is predominantly directed inward towards the emerging ego. This inward focus of energy, termed ego-libido, is essential during this developmental phase and contributes to what Freud termed Primary Narcissism. However, as time passes, the ego becomes saturated with libidinal energy, prompting it to seek external objects for expression. This transition marks the separation of sex instincts from ego-instincts. This shift may explain why activities like eating and sexual intercourse, once intertwined during the primary narcissistic stage, become distinct experiences as we mature. Henceforth, libidinal energy is directed both inwardly and outwardly, striking a balance between autoerotism and object-love, now referred to as object libido.

## **Mourning and Melancholia**

This article critically assesses Freud's (1917) Mourning and Melancholia and challenges both the overly laudatory and overly critical perspectives that regard this essay as a historically detached and contextually isolated cornerstone of depression theory. Despite numerous biographies on Freud, little exploration has been done regarding potential influences on his thoughts concerning grief and depression. Additionally, there has been a lack of reviews examining Freud's comprehension of mourning and melancholia through the lens of his own encounters with these emotional challenges. After providing a concise overview of Freud's seminal paper, the historical psychiatric perspectives on depression and the factors shaping Freud's understanding of mourning and melancholia are briefly explored. Finally, an analysis is offered on the contextual relevance of Freud's model Sigmund Freud's impact is pervasive, and his insights into the distinctive features



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and underlying dynamics of mourning and melancholia have influenced numerous contemporary psychoanalytic and no psychoanalytic perspectives on depression. However, current assessments of Freud's depression theory often tend to either overly celebrate or react against it without considering its historical context. Some psychoanalytic theorists view Freud's Mourning and Melancholia as a foundational work, suggesting that subsequent models of depression have stemmed directly from Freud's ideas. Conversely, behavioral and cognitive theories have emerged partly in response to Freud's theory, suggesting that it lacks empirical support and is disconnected from real-world contexts. The aim of this article is to critically assess Freud's Mourning and Melancholia (1917/1971) and challenge the prevailing views that either overly celebrate or react against it, treating it as a foundational but detached cornerstone of depression theory. This evaluation aims to show that the distinction between mourning and melancholia predated Freud's paper and that many of his concepts were deeply rooted in the socio-political and historical context of his era. While Freud demonstrated innovation in applying his tripartite meta-psychological theory to this framework, he also delved beyond mere description to explore the latent processes involved in melancholia, acknowledging the limitations of his approach. Furthermore, this article will demonstrate that factors beyond simple observation influenced Freud's comprehension of depression. It will explore the contextual validity of Mourning and Melancholia, considering elements such as the sample used by Freud, his later reflections on the work, his personal experiences with grief and depression, and the reception of his model within psychoanalytic and no psychoanalytic circles around 1917. In 1917, Freud released his seminal work, Trauer und Melancholia (Mourning and Melancholia), a topic he had begun discussing as early as 1914 and eventually wrote in 1915. In this paper, Freud distinguished between the typical manifestations of sorrow associated with mourning and the atypical processes observed in melancholia. Additionally, Freud proposed a framework to explain the origins, persistence, and resolution of both states.



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Before delving into the distinctions between mourning and melancholia, and proposing his theory regarding their underlying factors and origins, Freud acknowledged the limitations of his approach. He particularly addressed the diverse nature of melancholia and the absence of a clear definition within psychiatry. Additionally, Freud noted that the small size of the sample on which his theory was based limited its generalizability: "Our material here is limited to a small number of cases the psychogenic nature of which was indisputable. Any claim to general validity for our conclusions shall be foregone at the outset" (Freud, 1917/1971, p. 152). Freud then proceeded to explore the connection between mourning and melancholia. He argued that the primary triggering factor for both of these distressing mental states is loss. Given that both conditions involve feelings of dejection, loss of interest, reduced ability to love, diminished activity, and intense preoccupation with the lost object, mourning and melancholia exhibit similarities in their symptomatology. While mourning and melancholia share similar symptoms, the key distinguishing feature of the latter is self-reproach: "This picture becomes a little more intelligible when we consider that, with one exception, the same traits are met with in grief. The fall in self-esteem is absent in grief" (p. 153). In mourning, the absence of the loved object leads to a sense of impoverishment and emptiness in the world; in melancholia, it is the ego itself that feels impoverished and empty, with one part of the ego (the conscience) beginning to critically judge the other part. Furthermore, grief and depression were proposed to differ in that the loss leading to mourning is external (e.g., death) and consciously dealt with, whereas the object-loss in depression is more symbolic and unconscious. Additionally, while grief may involve significant departures from normal life attitudes, it is considered a normal reaction to the loss of a loved one. Melancholia, on the other hand, is more challenging to explain, as its precipitating factors extend beyond death to include experiences such as being wounded, neglected, rejected, or disappointed, which can evoke conflicting feelings of love and hate or exacerbate existing ambivalence.



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## NARCISSISTIC NEUROSIS

Freud introduced the term "narcissistic neurosis" to describe manic-depressive psychosis, characterized by the retraction of libido onto the ego. At the end of the 19th century, German psychiatry distinguished between psychoses and neuroses, but while psychoses were well-defined, neuroses remained a mixed category. Gradually, through his drafts in letters to Wilhelm Fliess and a series of articles (1894a, 1895b, 1895c, 1896a, 1896b) written around the time of "Studies on Hysteria" (1895d), Freud differentiated between "actual neuroses," linked to somatic conditions, and "psycho-neuroses" (or "neuro-psychoses"), associated with mental conflicts. The Schreber case (1911c), where homosexuality was crucial, highlighted the significance of narcissism (1914c) in the origin of such disorders. Symptoms in these cases indicated a withdrawal of libido from external objects, redirecting it to the ego and resulting in delusions of grandeur. Freud subsequently categorized psychoneuroses into transference psychoneuroses and narcissistic psychoneuroses, with the latter corresponding to psychoses. It was only after his major theoretical overhaul, which introduced the concept of the death instinct (1920g) and provided a more detailed description of the mental personality (comprising the id, ego, and superego, 1923b), that Freud could simplify the distinction between neurosis and psychosis. Neurosis was then understood as a conflict between the ego and the id, whereas psychosis stemmed from a similar conflict between the ego and the external world. While recognizing that much was still unknown about the origin and role of the superego, Freud's theory of repression led him to explore conflicts between the ego and the id. He defined narcissistic neurosis as resulting from a struggle between the ego and the superego, with melancholia being a prime example. Freud categorized all pathologies arising from this conflict as "narcissistic psychoneuroses." Identifying this group of illnesses, which lay at the boundary between neuroses and psychoses, paved the way for later discussions on borderline



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states, drug addiction, and the approach to psychosomatic illness advocated by the so-called Paris school. Melancholia exemplified narcissistic psychoneurosis, characterized by a "pure culture of the death instinct" that drives a superego in conflict with the ego. Karl Abraham described it as a state where "complete and unrestricted cannibalism" is driven by "unrestricted narcissism" (Abraham, 1924, p. 488). In this state, the melancholic disregards the interests of the object, relentlessly pursuing the destruction of the incorporated object without remorse. Melanie Klein likely had these ideas in mind later. Abraham also introduced the concept of a more restrained narcissism, where partial incorporation of the object shows some degree of respect, illustrating how the dynamics of having and being can merge in various ways. Francis Pasche (1965) aimed to clarify the concept of depression by contrasting anti-narcissism with narcissism, anchoring this opposition in the dualism of the life and death instincts. He described anti-narcissism as a "tendency whereby the subject renounces a part of himself." This idea arose from a feeling reported by patients, who perceived the object not only as destructive and destructible but also as a thief of vital forces and a drainer of energy, due to its presence in their emotional world. Pasche argued that both narcissism and anti-narcissism derive from Eros and Thanatos. Clinical experience with psychoses consistently showed that psychotic alienation was felt as submission to an external will. Reconstructing early mother-child relationships led to the conclusion that initial cathexes involved not only fusion and interpenetration but also distinction and separation. This resulted in the emergence of desires to reject, be absorbed by, and confirm the object in its rightful place. Thus, the infant who gazes at the mother or places her on a pedestal invests her with deserved authority.

## Schizophrenia

Sigmund Freud (1856-1936) maintained a keen interest in the evolutionary origins of the human mind and its neurotic and psychotic disorders (Young, 2006). Freud posited that the ego's





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alienation from reality could lead to psychosis. In 1924, he wrote that in psychosis, the ego is pulled away from reality. Additionally, Freud suggested that paranoid delusions are driven by unconscious homosexual impulses (Lester, 1975). Freud was interested in schizophrenia, which he referred to as dementia praecox. His fascination with psychosis was evident from the onset of his theoretical work. Motivated by his investigations into the etiology of neurosis, Freud compared the characteristics of neurosis to classic psychotic conditions such as melancholia and paranoia (de Oliveira Moreira & Drawin, 2015). Additionally, Freud examined the blood of psychotic patients for infectious agents like spirochetes. Initially considering schizophrenia as a non-psychotic extension of mental disorders, he later concluded that some aspects of schizophrenia could be understood from a psychological perspective. Freud accepted Kraepelin's classification system but did not agree with Kraepelin's views on the causes of schizophrenia (Dalzell, 2009). Freud believed schizophrenia was a form of attachment disorder, developing when a child failed to form a successful attachment with the parent of the opposite sex. He proposed that infants are born into a state of mutual adaptation with their mothers (Cohen, 2007). Freud attributed schizophrenia to disordered family dynamics, specifically blaming "schizophrenogenic mothers." From the late 1940s to the early 1970s, this concept was prevalent in psychiatric literature. However, subsequent research debunked the idea that a specific type of mother could cause schizophrenia in her children (Neill, 1990). Primary narcissism refers to the innate self-focus present in infants from around six months to approximately six years old, serving as a defense mechanism to safeguard against psychic harm during the formation of individual identity. Freud characterizes newborns as exhibiting primary narcissism, which he defines as the libidinal counterpart to the instinct of self-preservation. Essentially, this primary narcissism, predominant until the emergence of the Ego, represents an inherent instinctual behavior primarily driven by the newborn's desire and energy for survival, satisfying these instincts internally through autoeroticism (Perogamvros, 2012). In 1911, Freud examined the memoirs of Daniel Paul Schreber, a German judge diagnosed with Dementia



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Praecox. Employing his libido theory, Freud analyzed Schreber's illness, attributing it to two fixations of libidinal cathexis (Silber, 2014). Following his analysis, Freud concluded that psychoanalytic treatment was unsuitable for the disorder due to inherent deficiencies in object-relatedness, including the therapeutic necessity of developing transference to the therapist (McGlashan, 2009). However, around 1907 to 1908, some members of Freud's inner circle, such as Federn, Jung, and Abraham, began to advocate for the potential effectiveness of psychoanalysis in treating schizophrenia (Osborn, 2009).

## What is Narcissism: A Lacanian Perspective

In Jacques Lacan's psychoanalytic framework, narcissism transcends mere egotism, delving into a complex psychological landscape rooted in the concept of the 'Mirror Stage' during individual development. During this stage, individuals construct an idealized self-image, reflecting their perfect ego. This constructed image serves less as a manifestation of vanity and more as a defense mechanism—a shield erected to fend off feelings of vulnerability and fragmentation. Lacan's interpretation of narcissism offers a foundational insight into the psychology underlying the actions and motivations of narcissists. It unveils the intricate mechanisms that contribute to their distorted self-perception and subsequent behaviors. Understanding this Lacanian perspective on narcissism is a crucial initial step in grasping the multifaceted nature of narcissistic behavior, setting the stage for further exploration spanning from Lacan's theories to contemporary research in psychology.



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## Defining Lacan's mirror stage

Have you ever observed an infant's reaction upon seeing its reflection in a mirror? The child might respond with a smile, laughter, or a sense of curiosity. This experience lies at the heart of Lacan's mirror stage. The "mirror stage" (also known as the "mirror phase") is a developmental concept proposed by psychoanalyst Jacques Lacan. Occurring between six and eighteen months of age, the mirror stage is a pivotal period during which we begin to perceive ourselves as distinct individuals, separate from those around us, and start engaging with symbolic systems such as language, culture, and social norms. This stage marks the initiation of our journey into the realms of the Imaginary and the Symbolic, as well as the emergence of the ego and the Subject — the "I." Lacan's mirror stage draws inspiration from Henri Wallon's developmental psychology. Wallon observed that unlike other animals, human infants are born prematurely and require significant development before being able to stand, walk, manipulate objects, or comprehend their body in relation to its surroundings. When confronted with their reflections, young primates like chimpanzees typically lose interest or even attempt to attack the images, while human infants remain captivated. Lacan theorized that by perceiving an image of themselves and seeing themselves as others do, children develop a sense of their body and identity. The mirror stage was Lacan's inaugural contribution to psychoanalytic theory, and he revisited and expanded upon the concept throughout his career. Over time, Lacan infused the mirror stage with additional layers of meaning as he integrated it with his other theoretical constructs. Concepts such as the self and other, the ego and the Subject, and the different levels of existence (the Real, the Imaginary, and the Symbolic) all intersect with the mirror stage in Lacan's framework. Although the term "mirror stage" may imply a specific moment in development, Lacan later conceptualized it more metaphorically than literally. By the conclusion of his career, he viewed the mirror stage as a paradigm or structure of subjectivity



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rather than a discrete event in human growth and development. Lacan's reimagining of Freud's work, with a primary emphasis on language, ushered in a post-structuralist shift in psychoanalytic theory. In his seminal essay "Mirror Stage" (1949), Lacan elaborates on the concept of the mirror stage, which occurs between 6 and 18 months of a child's development. During this stage, the child begins to make basic distinctions between itself and others as it encounters its own reflection in a mirror. Prior to this stage, the child exists in what Lacan terms the Real stage, characterized by primal needs and a sense of unity with the mother. The mirror stage marks the child's initial awareness of bodily autonomy, initiating a lifelong process of self-identification in relation to others — such as man/woman, West/East, and so forth. According to Lacan, the reflection seen in the mirror represents the "Ideal I" — a version of the self that appears stable and autonomous, yet remains elusive to the child's direct experience, prompting a longing to become the other. This pursuit, Lacan suggests, is bound to remain unfulfilled and may result in feelings of anxiety, neurosis, or even psychosis. The child also becomes aware that before this stage, its body existed in a fragmented state, and it apprehends the risk of regressing to that condition. Moreover, the mirror stage signifies the onset of a gradual transition from the Imaginary phase, where the child lacks awareness of the boundary between itself and the external world, to the Symbolic stage of language acquisition. In the Imaginary phase, the Self is perceived as a unified entity, devoid of fragmentation or the influence of distinctions. However, upon recognizing the imminent presence of the Other, the Self undergoes division, signaling the breakdown of the comforting imaginary state and thrusting the child into the Symbolic realm — a domain characterized by predefined social roles, gender disparities, linguistic structures, and the differentiation between subjects and objects. The mirror phase typically occurs between the ages of six and 18 months and aligns with Freud's concept of primary narcissism, a stage in human development characterized by an intense fascination with one's own image and body, preceding the capacity for love towards others. During this period, infants begin to identify their reflection in a mirror (or any reflective surface, such as



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the mother's face), often experiencing pleasure in the process. The child becomes engrossed with its reflection, attempting to interact and manipulate it. Initially, the child may confuse the reflected image with reality, but eventually discerns that the image possesses distinct properties, ultimately realizing it as a reflection of themselves. During the mirror stage, the child experiences a profound realization upon seeing its reflection in the mirror—it becomes aware for the first time that its body possesses a cohesive form. By controlling the movements of its body, the infant can manipulate the image in the mirror, leading to a sense of pleasure and mastery. However, this perceived completeness and control contrast with the infant's actual experience of its body, which remains fragmented and lacks full motor coordination. Despite this, the mirror image provides a sense of unity and wholeness that the infant's physical body does not yet possess. Crucially, the infant identifies with this mirror image, viewing it as a representation of itself. This identification is essential for the infant's development of a cohesive self-perception. However, it also introduces a sense of alienation, as the image is perceived as separate from the self, yet occupies the place of the self. This duality results in the acquisition of a unified sense of self, albeit at the cost of the self being perceived as something other—the mirror image. Lacan elucidates this concept as follows:

The mirror stage unfolds as a narrative of progression, transitioning from a state of inadequacy to one of expectation. Within this framework, it constructs a series of fantasies for the subject, entangled in the allure of spatial recognition, spanning from an incomplete perception of the body to the emergence of a unified form, termed as orthopedic, and ultimately culminating in the adoption of an estranging identity. This identity, characterized by its rigid structure, leaves an indelible imprint on the entirety of the infant's mental growth. In Lacan's view, the ego comes into being during this phase of estrangement and fascination with one's own reflection. It is both shaped by and assumes the form of the image, deriving its identity from the organizing characteristics of this image. Essentially, the ego is a product of visual representations, constituting an aspect of the



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imaginary realm. Lacan contrasts this notion with Ego psychology, which tends to prioritize the ego over unconscious processes and often conflates the ego with the self. He contends that the ego is founded upon a false sense of completeness and control, tasked with perpetuating the illusion of unity and authority. Consequently, the ego functions through a process of misrecognition, resisting acknowledgment of the inherent fragmentation and disconnection within the self. According to Lacan, once the notion of unity is introduced in contrast to feelings of fragmentation, the individual becomes their own adversary. A tension arises between the infant's fragmented self-perception and the illusory autonomy associated with the formation of the ego in the imaginary realm. This internal conflict between identification with one's own image and the primal sense of rivalry with that image extends into future interactions with others. As Benvenuto and Kennedy articulate, this initial conflict between identification with and rivalry against the image of the other initiates a dialectical process that binds the ego to more intricate social dynamics. Existence necessitates recognition from another, implying that our self-image, which equates to our identity, is filtered through the perspective of others. Consequently, the other becomes the arbiter of our existence, simultaneously serving as both our reliance for validation and our adversary in this dynamic. Critics of Lacan's mirror stage contend that he fundamentally misconstrues the process. They argue that for a subject to identify with its mirror image and subsequently misinterpret itself, it must first possess a sense of self-awareness. The Lacanian notion of an alienated subject implies the existence of a prior state of non-alienation, without which there would be no meaningful basis for alienation. Therefore, the concept of a primary lack or absence presupposes a primary presence or unity. In this view, lack is considered a secondary, rather than primary, condition. Anthony Elliott asserts that Lacan's terminology regarding the mirror stage is flawed: mirror reflection, lack, and absence are not inherent phenomena but constructions of the subject and the imaginary realm. However, Lacan's interpretation of alienation differs from that of his critics. Through the mirror stage, the infant imagines gaining control over its body but perceives this mastery as external to



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itself. In Lacan's framework, alienation entails a "lack of being," whereby the infant's realization of self lies in an external realm. Thus, alienation is not a separation from something external but is instead intrinsic to the subject's existence. In psychoanalysis, individuals are not considered subjects from birth in the same way as infants, as they lack the capacity for abstract thought or the need for fulfillment or status. This is why animals do not qualify as subjects in Lacanian terms. The emergence of desire occurs through interaction with society and the acquisition of language during what is known as the mirror stage. This stage involves the child's initial recognition of itself as an "I" in relation to an image that it begins to associate with itself. The mirror stage, also referred to as the Imaginary, posits that infants can identify themselves in a mirror at around six months old. Human identity stems from a primary act of cognition, as the infant's realization of self involves translating an image into the concept of "me" or "self." This notion diverges from Descartes' famous dictum "I think, therefore I am," which Lacan opposed due to its philosophical implications. In the mirror stage, individuals perceive themselves as objects, although they are not truly objects. This fundamental misrecognition is central to Lacanian theory.

## Conclusion

Narcissism, as explored through the lens of psychoanalytic theory, particularly Lacanian psychoanalysis, reveals a complex interplay between self-perception, identity formation, and relational dynamics. Originating in early developmental stages, notably the mirror stage, narcissism involves the construction of a grandiose self-image that serves as a defense mechanism against feelings of fragmentation and vulnerability. This constructed self-image, or "Ideal I," fosters a sense of autonomy and mastery but simultaneously instigates an inherent conflict between the perceived wholeness and the underlying sense of fragmentation. Freud's insights into primary



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narcissism and its evolution into adult narcissistic behavior underscore the continuous struggle for validation and self-cohesion. Lacan's reinterpretation introduces the critical role of language and the symbolic order in shaping the ego, highlighting the illusory nature of the narcissistic self and its dependence on external recognition. Ultimately, understanding narcissism involves acknowledging its deep-rooted psychological mechanisms and its manifestations in behavior and relationships. It serves as a crucial concept in psychoanalysis, offering insights into the formation of identity, the nature of self-love and self-alienation, and the ongoing quest for self-coherence amidst the complexities of human development and social interaction. This comprehensive exploration of narcissism not only enriches psychoanalytic theory but also provides valuable perspectives for contemporary psychological practice and research.





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