

Self Psychology and Its Contributions to Psychoanalysis¹

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A schematic overview of the theory and practice of self psychology is presented with a particular focus on what the author believes to be the most important contributions to psychoanalysis. It is recognized that self psychology, as with all psychoanalytic approaches, is an evolving and non-unitary theory. Fundamental features of self psychology are: 1. the consistent use of the empathic mode of observation, that is, to listen and understand from within the vantage point of the patient; 2. the primary motivation which involves strivings to develop and maintain a positive cohesive sense of self; 3. that each person has unique pre-wired "givens" included in the concept of the nuclear self; 4. that each person has selfobject needs which refer to the use of the object for the development and regulation of a positive sense of self; 5. that selfobject needs include mirroring (acknowledgement and affirmation), idealizing (protection, safety, and admired qualities), and twinship (a feeling of essential likeness, of sharing) needs; 6. that development and maintenance of a positive cohesive sense of self requires a sufficient responsiveness to selfobject needs; 7. that insufficient responsiveness arrests normal development, creates pathological organizing patterns of self, others, and self with others, and causes unresolvable conflict; and 8. that psychoanalytic treatment involves the analysis of the selfobject and repetitive dimensions of the transference in order to facilitate expansion of awareness, symbolic reorganization and self-righting.

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While controversy in theory and technique has swirled since the beginning of psychoanalysis, today's psychoanalytic landscape reveals a wealth of different approaches. Through their presentation of alternatives in theory and technique these approaches are fostering the evolution of psychoanalytic thinking. Differences abound in conceptualizing motivational theory, central hypothetical constructs that delineate the psychological field, developmental theory, pathogenesis, transference, countertransference, theory of technique, and, lastly, theory of therapeutic action. Conferences, like the 1995 Prague Symposium, offer an opportunity for us to hear different approaches, to compare and contrast, and to learn from each other.

My task is to present a schematic overview of the theory and practice of self psychology, focusing particularly on what I deem to be its most important contributions to psychoanalysis. Self psychology as with all psychoanalytic approaches, continues to be an evolving and non-unitary

theory. While certain features are fundamental, self psychology includes a wide range of variations and differences. I will provide a brief overview of the development of self psychology. I will then organize my discussion around five central topics, namely, listening modes, selfobject experience, developmental model, transference and therapeutic action, emphasizing some of the current thinking on these topics.

Heinz Kohut (1913-1981) was the founder of what has become known as the self psychological approach in psychoanalysis. His first major paper, entitled "Introspection, Empathy, and Psychoanalysis," published in 1959 (1), presented his important formulation of the empathic mode of observation. The "empathic mode" represents an epistemological reframing of the analyst's data gathering activity necessitated by the paradigmatic shift from positivistic to relativistic science.

A breakthrough in Freud's work was the investigation of the patient's intrapsychic world. The positivistic science of the day, however, significantly influenced the investigation of the patient's inner life. The analyst's observations and interpretations tended to be, and often still are (particularly in clinical discussions), viewed as "objective". In

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contrast, relativistic science clarifies that: 1) the analyst's observations are not only shaped by the patient, but also by the analyst; and 2) there are essentially two perspectives in the analytic arena, neither of which is "objective". In response to this paradigmatic shift, Kohut (1, 2) formulated and proposed the consistent use of, what he called, the empathic mode of observation. The empathic mode designated a listening stance for data gathering wherein the analyst attempts to listen and understand from *within* the vantage point of the analysand. To listen empathically the analyst resonates with the patient's affect and vicariously introspects about the patient's experience. This stance was juxtaposed with listening from an external or the analyst's perspective.

Placing the analysand's perspective and experience in the foreground does not eliminate, but does militate against the imposition of the analyst's point of view onto the analysand. This listening stance is designed "to hear" as well as possible from within the vantage point of the analysand; yet, this is a relative matter, for what is heard is always variably shaped by the analyst. While all analysts variably use the empathic mode, in contrast to a more "outside" mode of listening, self psychologists attempt to listen consistently from the empathic vantage point.

"When the analyst's observations and interpretations are no longer viewed as 'objective' facts but as 'subjective' organizations, the analytic field shifts immeasurably as the analyst is 'dethroned' from the position of the 'objective' observer and becomes a coparticipant in perceiving and constructing the analytic process" (3, 23). Recognizing that analysis involves two persons, each with a "subjectively organized world of meaning" (4), transforms the analytic encounter from an authoritarian one to a more collaborative, co-participation.

In 1965 Kohut presented his emergent views of narcissism that deviated from classical theory in a paper, "Forms and Transformation of Narcissism" (5) followed by his first book, *The Analysis of the Self*, published in 1971 (6). In his clinical work Kohut found that certain patients were particularly sensitive to slights, were extremely labile in mood, and suffered generally from low self-esteem. He discovered that these patients were very sensitive and reactive to any perceived slight or misunderstanding on the part of the analyst. He

importantly observed that these patients also used the analyst to feel better about themselves, to restore and regulate their self-esteem. A patient used the analyst to provide certain intrapsychic functions, such as affirming, soothing and protective functions, that the patient was as yet unable to provide for himself. Kohut termed the need for acknowledgement and affirmation, mirroring needs, and the need for protection, security and safety, idealizing needs. While Kohut initially felt that the emergence of these needs in the analytic relationship were the hallmark of narcissistic personality disorders, he later decided that the emergence and analysis of these needs were central for all patients.

Kohut first referred to the emergence of these mirroring and idealizing needs within the analytic relationship as narcissistic "transference-like phenomena," for they did not fit comfortably under the rubric of transference. Whereas transference to that date had always been closely linked with the repetitions from the past, these narcissistic transference-like phenomena were involving the analyst in new developments, namely, the consolidation and regulation of a positive cohesive sense of self. Subsequently, Kohut placed these mirroring and idealizing phenomena under the rubric of transference. He came to call these phenomena "self-object transferences," wherein the patient did not relate to the analyst so much as a separate person with a distinct subjectivity, but made use of the analyst, that is, the object, as part of the self. While this placement stretched the concept of transference, it gave selfobject phenomena a status equal in importance to that of repetitive transferences. Transference for self psychologists, thus, includes both those experiences of the analyst that are based on repetitions from the past and those experiences that use the analyst to provide self-object functions requisite for development.

Freud posited that we are born into a state of primary narcissism in which the libido is cathected to the ego system. Developmentally the libido must be withdrawn from the ego system and redirected toward objects—thus enabling a person to outgrow his narcissism and to become object related. In contrast, Kohut became convinced of the importance of the development of the self, as well as the development of object relations, and posited a narcissistic line of development separate and distinct from an object relational line of

development. True to his classical roots, Kohut initially anchored his new theory in drive and energy theory, positing a narcissistic libido that corresponded with Freud's object-related libido. In *The Restoration of the Self* (7), Kohut, eschewing drive and energy theory, began to abandon his notion of two separate lines of development and posited, instead, a supraordinate theory of the self.

Based on his clinical work, Kohut came to believe that the consolidation and maintenance of a positive cohesive sense of self is the central developmental task for us all. Development of the self occurs within a "self-selfobject" relationship matrix. A child needs to be acknowledged and affirmed (mirroring needs) by a parent or parental surrogates to feel worthwhile and capable. To feel worthwhile and capable, in turn, establishes ambitions. A child wants to do that for which she is praised and feels competent. A child also needs from a parent a sense of protection, security and safety, and parents or parental surrogates who are people that a child admires and wants to be like (idealizing needs). Whereas Kohut initially thought, in keeping with Margaret Mahler's separation-individuation theory, that we outgrow mirroring and idealizing needs and become independent of selfobjects, he now suggested that mirroring and idealizing selfobject needs mature throughout a lifetime, that is, there is a developmental line for each selfobject need (8). A child's idealizing selfobject needs, for example, mature from needing a powerful all-protective parent to a parent who has admirable qualities that become the source for the formation of ideals. In his last book, Kohut (9) identified twinship to be a third major selfobject need that refers to an experience of essential likeness. To feel that we share and are a part of a family, a community, a nation, the human race, are all twinship experiences that serve to support a vital sense of self. These selfobject needs and the availability of selfobject responsiveness within relationships are crucially important throughout our lifetime for developing and maintaining a positive cohesive sense of self. This is why, for example, that elderly people living alone do far better physically and psychologically if they have a dog or a cat, a pet who provides a vitalizing selfobject connection. Kohut describes:

Self psychology holds that self-selfobject relationships form the essence of psychological life from birth to

death, that a move from dependence (symbiosis) to independence (autonomy) in the psychological sphere is no more possible, let alone desirable, than a corresponding move from a life dependent on oxygen to a life independent of it in the biological spheres (9: 47).

Kohut's theory legitimized self issues as a lifetime concern. Narcissistic concerns, that is self concerns, were released from pejorative connotations. While the focus on the development and maintenance of self resonated with Jung and the British object relations theorists, particularly Winnicott and Guntrip, Kohut and self psychologists, in my view, have contributed significantly to psychoanalysis through delineating more clearly developmental pathways to the consolidation of a positive sense of self through the identification of selfobject needs and their emergence in the establishment of selfobject transferences.

From a self psychological perspective, consistently faulty self-selfobject relationships (now referred to more simply as selfobject relationships) during the formative years are the principal cause of psychopathology. Faulty selfobject relationships entail insufficient developmentally required selfobject availability and responsiveness, which disrupts the development and maintenance of a positive sense of self. Without sufficient affirmation a child, for example, cannot develop a positive image of self. Consistent parental criticism and denigration create negative self feelings and images. Conflict arises when a child experiences her central strivings and affective reactions to be inimical to the maintenance of the selfobject bond (10). A child will likely accommodate to maintain some, albeit limited, selfobject tie. (This model corresponds with Winnicott's (11), notion of the formation of "a false self on a compliant basis.")

In the *Restoration of the Self*, Kohut (7) reconceptualized the Oedipus complex. Clinically he noted that, subsequent to patients' self-restoration, they often went through a brief and mildly conflictual oedipal period. In contrast to Freud's position that the oedipus complex is a biologically determined intensely conflictual arena that is central for us all, Kohut differentiated between an oedipal phase and an oedipal complex. An oedipal phase, a time when the child is expansively competitive and sexual, is natural. What is developmentally critical, however, is how each parent responds to the child's competitive and sexual

strivings. A parent's welcoming and embracing of the child's sexual and competitive strivings as further evidence of the child's growth and prowess provides what is known as an "oedipal selfobject responsiveness," that is, a responsiveness that enhances the child's self. This oedipal phase is not marked with intense intrapsychically generated conflict. In contrast, when the child's strivings encounter a parent's hostility or denigration, most likely related to their self vulnerability, intense oedipal conflict and an oedipal complex ensue. In other words, what the child experiences within the parental selfobject relationship will effect a healthy or pathological outcome of the oedipal phase. The frequent occurrence of intense oedipal conflict, for Kohut, is not evidence of a normal developmental stage, but rather is a reflection of the magnitude of parental self disturbance extant in our society.

Kohut was deeply impressed with Freud's brilliance in using the power of the Oedipus myth to enshrine his theory of intergenerational strife. Freud had, however, failed to focus on the beginning of the Greek tragedy in which Laius, Oedipus' father, had, in response to the Oracle's prophecy, placed his son on the river, abandoning him to death. We could interpret, in keeping with self psychological thinking, that a father's abandonment of his son will surely lead to a powerfully destructive father-son relationship. In an effort to counter the power of the Oedipal myth, Kohut in his final paper, "Introspection, Empathy and the Semi-circle of Mental Health," published in 1982 (2) just shortly after his death, borrowed the tale of Odysseus to depict what Kohut felt was man's fundamental striving for intergenerational continuity. As told by Homer, the Greeks began to draft all the chieftans for their Trojan expedition. Odysseus wanted to stay home with his young wife and baby son and did not wish to go to war. To avoid the draft, he feigned insanity when plowing his fields using various antics like throwing salt over his shoulder. Sensing his malingering, the military chiefs tested his insanity by suddenly seizing and flinging Telemachus, Odysseus's baby boy, in front of the plow. Although saving his son would readily reveal his malingering, force him to return to war, and put his own life at risk, Odysseus without hesitation plowed a semi-circle around his son to avoid injuring him—forming what Kohut called the "semi-circle of mental

health." Kohut felt strongly that "It is the primacy of the support for the succeeding generation, therefore, which is normal and human, and not intergenerational strife and mutual wishes to kill and to destroy" (2: 404).

In his last book, *How Does Analysis Cure?*, published posthumously in 1984 (9), Kohut presented his final views on self psychology. Having extricated himself more fully from classical theory, Kohut presents his most comprehensive self psychological account of how analysis cures. While interpretation is always central in Kohut's theory of technique, he now indicates that analytic "cure" occurs not in the cognitive sphere per se. Instead, cure is the development of the self that occurs within the "self-selfobject relationship" within the analysis. For Kohut, analysis of the repetitive, object relational transference is required to remove it as resistance to the emergence of self-object needs and the establishment of selfobject transferences. Inevitably the analyst will fail to understand or provide the necessary attuned responsiveness (from the vantage point of the patient), rupturing the selfobject tie to the analyst. Reparation of the selfobject tie occurs through understanding and interpreting the precipitants of the selfobject rupture. Kohut viewed these ruptures as optimally frustrating (if they are reparable) and their reparation as structure building. Reparation of selfobject ruptures became, for Kohut, the principle route to self development. Kohut also described, but did not emphasize, a second route to self consolidation, namely, the ongoing selfobject experience within the analytic relationship. To use Kohut's (9) words, "[the analyst's] on the whole adequately maintained understanding leads to the patient's increasing realization that, contrary to his experiences in childhood, the sustaining echo of empathic resonance is indeed available in this world" (9:78). In the following paragraph, Kohut responded to the anticipated "ill-disposed critic" of calling this process a "corrective emotional experience" with an unabashed acceptance, "So be it" (9:78).

The ideas of self psychology have continued to evolve and to influence and to be influenced by psychoanalysis at large. To delineate some of its further evolution and contribution, I will focus on five central topics: listening modes; selfobject experience; developmental model; transference; and therapeutic action.