

IDENTITY : A USEFUL PSYCHOANALYTIC CONCEPT
WITHIN A THEORY OF NARCISSISM

*"Man is man through men,
God alone is God through himself"*

Proverb of the Kabyle Tribe of N. Africa
(Bourdieu, 1966)

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INTRODUCTION

Persons have the capacity to remain the same in the midst of change. This curious and characteristic quality of human beings has been more or less by-passed within the psychoanalytic world. This observation was the essence of Lichtenstein's (1961) definition of identity. The present investigation will attempt to show that identity is one of a group of fundamental concepts required by a theory of narcissism when this is seen as rooted in individuation and growth.

As indicated in the tribal proverb above, experience and meaningful behaviour, identity in some crude sense, develops and exists in a social context. Therefore, in the process of refining the concept of identity and making necessary distinctions and definitions, it seems likely that the nature of the social will have to be tackled and appropriately linked to the more conventional psychoanalytical territory of the intimate.

REVIEW OF LITERATURE

The concept of identity has always had an uneasy place inside psychoanalysis, partly because psychoanalytic theory has had to share the term with the social sciences. It does not appear in the index of the Standard Edition of Freud's works (Vol. 24) nor in Laplanche and Pontalis' (1973) The Language of Psychoanalysis. Nevertheless the term has been widely used by noted psychoanalytic theoreticians and researchers including Eissler (1958), Spitz (1957), Mahler (1958) and Greenacre (1958). Terminological problems have plagued discussion (Leites, 1971). The major difficulty, however, is that identity seems to have been conceived of essentially as a subjective experience. A clear articulation of objectively observable phenomena requiring appropriate conceptualisation as identity is not readily available except in the writings of Lichtenstein (1977).

Jacobson (1964) pointed out that there are two distinct experiences to which the label "identity" has been attached. These are "sense of identity" and "objective identity". The "sense of identity" refers to the consciousness of one's continuous being distinguishable from all others (Rycroft, 1968). This is sometimes called the "I am I" experience. The meaning used by Mahler is slightly different: "It is not a sense of who I am but that I am" (Mahler et al, 1975). There is no doubt that the conviction of the reality of one's own existence and the subjective experience of uniqueness and sameness as a person are important internal states. However, they are clearly examples of a large class of "self-feelings" and require understanding and theoretical incorporation into psychoanalysis as such.

"Objective identity" refers to the actual content of being, in other words what it is that is remaining the same or is "really alive". Greenacre (1958) emphasised this aspect by referring to identity as "unique characteristics of an individual person or object whereby it can be distinguished from other somewhat similar persons or objects". This use of the term always implied for her a "socially-determined component". Erikson (1950) and Jacobson (1964) have studied the child's development of objective identity. Although these authors refer to the problem of maintenance of both the sense of identity and objective identity, the mechanisms of maintenance are not pursued.

Retaining the term identity in either of the two usual ways has proved theoretically unprofitable. Recent developments in the conceptualisation of narcissism might have been expected to make a firmer place for identity but the reverse has been the case. Kernberg (1975) uses it descriptively but says little about it per se. He refers to "identity diffusion" meaning "lack of an integrated self-concept", a use which is little more than a tautology. Kohut (1970) is forthright in his rejection: he writes "there is no appropriate place in psychoanalysis for the concept of identity", and insists that "it is not a depth-psychological concept; it relates primarily to an individual's conscious and preconscious experiences of his role and personality". Gedo and Goldberg (1973) argue similarly that the concept of identity "is an attempt to straddle the gap between two disciplines, social and individual psychology, without belonging to either".

The Contribution of Lichtenstein

We must now return to the observation and defining quality of identity, namely the dynamic persistence of personal sameness, and attempt to build a useful and coherent theory within a psychoanalytic framework which does justice to this extraordinary phenomenon.

Freud conceived of man as a biological being that developed an historical existence in order to survive. Instinctual adaptedness to the environment was replaced by the evolution of consciousness and ideational mastery as manifested in memory, judgement and thought. This argument was developed in detail in the "Two Principles of Mental Functioning" (Freud, 1911). The element of choice emphasised by Freud ("to choose the line of greatest advantage instead of yielding in the direction of least resistance" p.223 footnote) became lost in later writings as Freud became preoccupied with the repetition compulsion which appeared to be beyond choice. The development of the concept of the death instinct (Freud, 1920) led in two directions, both away from the personalised problem of choice. Instinctual theory became further elaborated by Klein in the U.K., and Hartmann in the U.S. developed a mechanistic ego-psychology. Lichtenstein (1961) emphasised that both trends led away from the notion of an evolving organism and both stemmed from the conceptual hurdle of the phenomenon of repetition.

In 1935, Lichtenstein argued cogently for the distinction between repetition and retrogression. The latter led to death and was opposed by progression and life. Repetition however was seen as the basis of permanence, as the only method of ensuring continuity through time. So, the repetition compulsion was linked to identity maintenance. This theoretical development lay largely ignored for a quarter century until it was taken up again by Lichtenstein himself in a series of brilliant papers (1961, 1963, 1964, 1965). The essential theme was re-argued with force. "Identity.....requires a 'repetitive doing' in order to safeguard the 'sameness within change' which....(is).... a fundamental aspect of identity" (1977, p.103). Non-procreative sexuality was assigned a crucial place in the acquisition and maintenance of identity and the whole was located within the then ill-defined field of narcissism. Since those papers, the work has again lain virtually untouched for one and a half decades, as if it were an eccentric by-way within psychoanalysis.

There appears to be a number of reasons for this by-passing of Lichtenstein's contribution. The writing is profound and at times philosophical and Lichtenstein does not hesitate to draw on the widest variety of sources to develop his argument. Such breadth (unless it is Freud's) leaves many psychoanalysts uncomfortable. By and large they prefer experiential elaboration of established theory. This possibly explains the preference in the literature for consideration of the identity experience rather than identity itself. Lichtenstein's work is not only outside the current major theoretical paradigms but transcends them without offering direct assistance to clinical work.

Lichtenberg (1980) in a review complains of the lack of systematic comparison with other major contributors in the field. This is to miss Lichtenstein's vision. Khan's review (1982) recognises Lichtenstein as an "innovator and pace-maker". Lichtenstein stressed that identity dealt with the persistence of behavioural patterns which are not biologically preprogrammed. By doing so he pointed to the need for psychoanalysis to consider social functioning and human choice as part of intrapsychic activity.

Because the social order is created by individuals for themselves and social functioning is a psychological fact of individual existence, social reality requires to be investigated from a psychoanalytic perspective. If Freud demonstrated that man must exist as an historical being or not exist at all, Lichtenstein is one of the few psychoanalysts who would not be uncomfortable theoretically in asserting that man must exist as a social being or not exist at all. The duality that troubled Freud was that of biology and psychology, but this is not the duality of experience. The crucial duality for man as an agent is that of man as psychological being versus man as social being.

THEORY OF NARCISSISM

It would be presumptuous to argue the case for the reality of the problem of human identity after Lichtenstein's exposition. This paper runs parallel to rather than develops his argument. Lichtenstein's use of the term identity is at times so sweeping as to be near unmanageable; identity then appears to be almost identical to life or existence. In this paper, I shall attempt to bring this and other theoretical and phenomenological issues out into the open, and clarify them so as to integrate the key ideas within psychoanalytic theory and practice.

The initial tasks are to distinguish the realms of theory within psychoanalysis, then to place identity within the appropriate realm, and finally to delimit its meaning in an acceptable fashion.

Psychoanalytic theories are of two types (Sandler and Joffe, 1969). The first group involve organisations of non-experiential concepts e.g. id, ego and superego within the structural theory. The second group involves organisations of experiential concepts e.g. wish, fantasy, drive.

Kernberg (1966) has elaborated the manner in which object-relations theory serves as a personified basis for the abstractions of structural theory. Hence both object-relations theory and structural theory are necessarily concerned with the handling of drives. Freud (1914) located narcissism within the theory of instincts and current practice is to regard narcissism as having two legs, one of which is instinct.

Thus for Rosenfeld (1964) narcissism is inseparable from aggression, hatred and envy, while for Kohut (1971) it is a form of libido. In both cases, some conceptualisation of the "self" seems to be mandatory, i.e. the other leg of theories of narcissism stands in object-relations theory rather than structural theory.

I have been recently developing a synthesis of views and concepts subsumed within narcissism (Kinston, 1980, 1982a, 1982b, 1982c). It is not necessary to recapitulate the theory in full here, however it is perhaps worthwhile to describe its development briefly. My first step was to review the literature and demonstrate that there were two opposing views in existence from the earliest days of psychoanalysis and currently epitomized by the views of Kohutians on the one hand and Kleinians on the other. Both theoretical views had a coherence, consistency and explanatory power such that each had to be taken seriously in its own right. I labelled these conceptual stances as self-narcissism and object-narcissism. I then pointed out that both stances were usefully applied in all analyses and reflected components of psychic function. The next phase was to determine if and how self-narcissism and object-narcissism were linked (Kinston, 1982a). Unless they were closely linked, it was questionable whether such similar labels were appropriate. An interesting observation was that adherents of object-narcissism tended to explain self-narcissistic disturbance, when it appeared during analyses, in terms of object-narcissism, and vice versa. This suggested that the two concepts were indeed closely linked. It proved possible to provide definitions in terms of the purpose imputed to activities (mental or physical) for object- and self-narcissism and thus make the concepts clinically usable and sharable amongst psychoanalysts. A similar definition of self/object relations,

restricted to states in which self- and object-representations were separate and linked by a wish-filled bond, completed the definition of perspectives required for using the object-relations model. The next observation was that transitions between object-narcissism and self-narcissism could be observed routinely during psychoanalysis and that these transitions were accompanied by characteristic changes in drive quality, affective experience and activity in the transference (Kinston, 1982b, 1982c).

These observations and studies have inexorably led to the possibility of a coherent theory of narcissism. Such a theory seemed to be linked to but distinct from the theory of instincts (hence narcissism is undefinable in terms of instinct) but intimately bound to object-relations theory.

The structural theory had been developed to deal with the expression of instincts in the light of the impact of past experience, this being the basis of early psychoanalytic technique (Freud, 1911-15). On review, it seems that object-relations theory has been developed to deal with the expression of separateness and growth or individuation in the context of interpersonal relationships. This seems to be the basis of more recent psychoanalytic technique (Guntrip, 1968; Giovacchini, 1972).

The theory of narcissism as a theory of individuation and growth might be regarded as having primacy over the theory of instincts in the same way that object-relations is the theoretical precursor of psychic structure. Lichtenstein wrote (1961): "identity is the pre-requisite for the possibility of drive because the concept of drive presupposes living organised continuity". I would substitute the more global term "narcissism" for Lichtenstein's "identity".

It is possible to show, as Kernberg has done (1975), that narcissism involves the whole psychic apparatus, relationships, external behaviour and achievements, and the body. But this seems simply an expression of the mundane truth that all psychological phenomena and concepts are interlinked. It is of more immediate importance to be specific about the definitive realm of narcissism. It encompasses such psychological notions as identity, self-feeling, growth, maturation, relatedness, development and role. Such concepts and experiences intrinsic to psychology are integrated with, but not reducible to, instinct; similarly they are not reducible to or an aspect of the structural model.

The theory of narcissism thus becomes a theory of "the bond which unites the person". Freud's only effort to deal with this is his phylogenetic theory which asserts that human characteristics, such as morality and religion, have been inherited. Such a theory is insufficient in the light of the current understanding of social life.

Lichtenstein has posited three phenomena which must be incorporated within any definitive theory of narcissism. These key concepts are self-transformation, i.e. the process of change through time via learning, growth or development; self-objectivation, i.e. the acquisition of definable roles and the use of these roles to assure sameness; and metamorphosis, i.e. the transformation into something that is incompatible with sameness. The theory presented above does incorporate them: self-transformation is a function of the formation

of new self-images and their dynamic incorporation within the self-representation. Self-objectivation is a consequence of being regarded as a thing by and for the other. Metamorphosis is an aspect of the move from self-narcissism to object-narcissism: from being a thing for oneself to being a thing for another.

SAMENESS AND SELF-NARCISSISM: A PLACE FOR IDENTITY

Activity, mental or physical, is an expression of self-narcissism insofar as it serves to maintain a self-representation which is integrated, has continuity over time and can be given a positive (affective) value (Stolorow, 1975; Kinston, 1980). Sameness can be located within self-narcissism by focusing on the aspect of continuity over time. Clinically, it makes sense to refer to this as "identity". More specifically, *identity* is defined as the persistence in psychic reality of certain self-images which we may refer to as "core self-images".

These core self-images are resistant to transformation or removal.

They are not affected by learning, development -- or psychotherapeutic work. The self-representation is repeatedly restructured and reconstituted through the individual's life-time, but at all times the core self-images which carry identity are dynamically incorporated.

As a result a theme can be determined through a person's life which is a manifestation of his identity. The inexorable expression of identity has been termed by Lichtenstein the "identity principle", which, he claims, is beyond the pleasure principle. His easily understood example is the wild animal that dies of starvation in captivity rather than adapt.

This definition of identity as the persistence of core self-images fits in with Rycroft's (1968) suggestion that "the sense of identity is probably synonymous with self-awareness".

Identity maintenance is thus a subset of narcissistic activities. We may define it as activity, mental or physical, which maintains the psychic reality of particular core self-images. Identity maintenance is equivalent to psychic survival and is the core value process of mental life.

The position taken here is that identity and identity maintenance are fundamental concepts in any psychoanalytical theory of narcissism, and are crucial to an understanding of the nature and limits of psychoanalytic treatment. The concepts are not trivial but truly depth-psychological, and in my writings will always be used technically rather than colloquially.

Having placed and defined identity, a number of questions immediately arise and require clarification. What are the origin and nature of these core self-images? How does this subset of narcissistic activities relate to other subsets? How does this conceptualisation relate to identity pathology as usually understood?

The Origin of Identity

The child has an identity before birth: in his mother's and father's minds. It is an expression of their interest in and value of the unborn infant. These parental experiences usually develop and elaborate during the pregnancy period. If the ideas are too rigid or unrealistic, then the birth may produce a shock and the infant is off to a less favourable start. Under favourable circumstances, the mental transition from

uterine existence to existence as a baby is a smooth one for the parents. Winnicott (1956) described a "primary maternal preoccupation" in the early months of life. This is, in essence, the expression of the baby's continuous existence in the mind of the mother blending with her attention to the physical reality of the baby. If all goes well, the infant's existence, internally and externally, is positively valued by the mother. However, even if the baby is rejected or given a negative valuation, it may still be maintained as a continuous presence in the mother's mind. If the rejection is more profound and the child is ignored, or if there is no mother, then this can be the basis of a pervasive feeling of non-existence. Such children may fail to thrive and may even die (Spitz, 1945).

Continuity of maternal contact from the moment of birth is now emphasised in many obstretic clinics even if the mother is psychotic. The crucial awareness that permits this is that this mother is the only mother for this particular child. However unfortunate this may appear on the surface, any other solution is worse because it attempts to avoid the uniqueness of each mother/child dyad, and ends up asserting that indiscriminate socially-defined mothering is more important than having a mother, who is psychically attentive.

This uniqueness or specialness is part of the quality of identity, that is, part of the affective investment of the core self-image. Identity is inevitably unique because it is a function of the imprinting by the other of her wishful images and needful demands

on the infant, as it interacts with the unique genetic endowment of the infant. The mother not only tunes in to the infant but provides an environment to which the infant can tune in to. The early mother-child period is pre-verbal and expressed in sensations, images, actions and affects. As the child matures, self-awareness develops and self-images form which are affected by self-observation and primitive self-concepts.

Lichtenstein has described this early mother-infant phase in more detail and referred to it as forming "primary identity". For him, this is an organisational principle for psychic development, and the basis for the person's "identity theme". It does not seem inappropriate to regard "core self-images" as having this gyroscopic function. As indicated earlier, they represent the earliest assignment of value and hence the prototype for later interests and valuations. They may have other functions as well. Identity as core self-image may in the end prove to have a conceptual usefulness and richness similar to that of "internal objects" as described by Stierlin (1970). He points out that "inner objects" (by which he means object-images, or object-representations) have a variety of functions including serving as inner reference points, stabilising and steering, and contributing to the relative autonomy of the individual.

Feldman (1962) was undoubtedly searching for such a concept when he referred to an "id-ego agency" which must be reached for an analysis to be successful: it "knows the facts (the 'truth') and guides the individual in establishing his place in life with the given constitution and infantile experiences he carries within himself".

The Primacy of Identity

Self-narcissism rests on a tripod of continuity, cohesiveness and positive valuation. Continuity appears to be more basic than the other two. Individuals will act in ways that sacrifice or impair integration or result in a negative valuation if identity is maintained thereby. Lichtenstein asserts that continuity may have primacy over preservation of life. In his definition and mine, it is clear that there is no meaningful way of regarding the individual as still existing if core self-images are extirpated. Physical existence may or may not be subsequently endangered. The choice of individuals to die for what they believe in is therefore not usefully reduced to masochism or psychosis. It can be regarded *within a psychoanalytical frame of reference* as an expression of core values.

Jacobson (1964) dismisses Lichtenstein's claim (1961) that "man is forever threatened with loss or breakdown of his identity" by claiming that neurotics do not have identity problems. Lichtenberg (1980) supports this criticism by claiming the backing of the views of the psychoanalytic community. These assertions appear invalid on logical and clinical grounds. First, it must be possible for "most analysts" to be wrong or progress is unimaginable. Second, patients frequently say in the early stage of analysis, that they only feel alive and themselves during the sessions. This seems to be related to the focusing of attention on inwards. Third, neurotics do not show psychotic symptoms, but that does not mean that psychotic processes are not at work; similarly for identity processes. Fourth,

if identity processes are looked for in neurotics they may be easily discerned. The importance of continuity in the analytic setting -- sessions, times, room furnishings -- is well established though its theoretical basis is seldom explicated. Fifth, most people when given orders by a socially-legitimated authority will act in ways that would be unusual, untypical or even abhorrent or unthinkable for them in other circumstances. Finally, when we observe the way that most people will maintain and defend such value-filled experience and activity as language, theories and lifestyle then it seems likely that anxieties of a particularly deep sort are involved. Accepting anything from anyone (including Lichtenstein) involves at this level a threat to identity.

Identity Disturbances and Their Treatment

Narcissistic vulnerability has been referred to as the ease of evocation of negatively-valued self-images (Kinston, 1980). This can now be elaborated to refer most specifically to those core self-images which carry the personalisation and continuity of the self. Identity as a continuity of core self-images is the source of the sense of existence, of Winnicott's "aliveness" and of Erikson's "pure actuality of being".

If identity is so fundamental, we must ask how it can come to be lost or diffuse, or how disturbances come about. The use of the term identity in describing symptoms or syndromes is a colloquial one. Pathology involving core self-images, often the maintenance of these, are usually found at the root of such disturbance.

Fundamental disturbances in the formation and consolidation of core self-images in the early months of life can result in death, psychosis or gross retardation in function. Such persons do not come for psychoanalysis. Psychoanalysts are usually involved with borderline, schizoid, narcissistic and neurotic patients. In these patients it is necessary to distinguish between identity disturbances which are a function of the particular individual and those that are characteristic of the type of patient. For example, "lack of identity" may be a complaint that is based on a core self-image of blankness and emptiness. However, this blankness would be alive, meaningful and crucial for the patient as a consequence of a particular early infantile relationship. Such a patient has been described by Giovacchini (1972). In other words many so-called identity disturbances reveal themselves in analysis as a particular form of identity maintenance. Identity is not disturbed, rather the core self-images which constitute it are socially non-adaptive.

A characteristic genuine form of identity disturbance which may occur in a variety of patients is psychotic confusion. In this state, there is no differentiation between self- and object-images. Borderline patients whose core self-images are not dynamically and securely welded into a self-representation demonstrate the syndrome of "identity diffusion" (Erikson, 1956; Kernberg, 1975).

Clinical Illustration 1.

Miss D. who suffered with borderline pathology, showed a variety of primitive narcissistic disturbances. For example, her need for continuity was so intense that over the holidays (or weekdays) she would stop whatever she was doing at the time

she normally left for analysis and sleep through till she would normally drive home again. She graphically described her core image problems in terms of loss of herself, attempts to create a self through choice of clothes, and becoming the other. She often complained about being muddled by contradictory states of being e.g. if she competently succeeded at something while feeling inadequate. Initially she described herself as a series of black suitcases, of which one would be in use depending on the circumstances. Later in analysis she described herself as having become a pie-chart with sections of it referring to different aspects of herself.

Some "narcissistic" patients can fairly rapidly develop an ability to recognise and handle feelings and thoughts in situations where they themselves are not at stake. If some form of personal commitment is required, then sudden decompensation may result. However if analysis is commenced and the analytic symbiosis is firm, then acknowledgement and containment of internal experiences, though not of the conventional transference type, becomes possible. Once the patient regards the analyst as trustworthy, reliable and genuine i.e. a non-narcissistic, not perfect and above all non-intrusive external object, then he will display his lack of integration and poor development from early states of the self.

A psychoanalysis can provide the opportunity for growth and even the creation or re-evocation of weakly invested self-images if the psychoanalyst can understand and tolerate the extremes of narcissistic functioning.

Clinical Illustration 2.

Miss S. showed these transitions during eight years of weekly psychotherapy, which followed a six months hospitalisation under my care. During these six months she revealed herself as sensitive, good-natured, and with an excellent command of language. For these reasons, the course of therapy was commenced.

Miss S, 17 years old, presented with anorexia nervosa and profound potentially fatal existential despair. The initial 18 months of therapy were marked by non-existence. She only appeared for sessions after a gentle letter of enquiry and then sometimes sat outside the consulting room without letting me know she was there. She said little on the few occasions that we met face to face. At around 18 months she began writing to me when she missed sessions and I slowly stopped writing to her. However her letters, which gradually increased in size, were incoherent and near incomprehensible. In the second and third years her speech during sessions was disconnected and she appeared to exist but be unintegrated. Over these years, the therapeutic approach involved a continuous valuation of the patient's productions, repeated interpretation of the details of her object-narcissism, reconstructions from early infancy, and containment of the futility and hopelessness that pervaded the whole endeavour.

Slowly, she appeared to become more integrated during sessions, but would breakdown in between sessions. She stated at this point (in the fourth year) that it was the experience of disintegration, of collapsing and falling to pieces, after leaving a session, that was the basis for not wanting therapy. In the fifth and sixth years she

slowly became able to sustain herself and engage in conversation. She began reporting whole experiences in a coherent fashion in her letters to me. During the sessions she described how affects such as jealousy and anger were being experienced by her recognisably for the first time in her life. (They had, of course, been consistently interpreted from the very beginning). Shame also appeared: previously she would say or do something then not know whether it was genuine ("really me") and get confused and angry, often with blushing. She was still vulnerable and described how excess alcohol or alterations of her body premenstrually produced a sense of nightmarish disintegration and set her bingeing and vomiting.

One day in the beginning of the seventh year, she presented an image of herself as a fly in a bottle. Interpretation of her negative self-valuation led for the first time to crying. The next week she came in and said "I feel intact". Following this she cleared her financial debt with me for the first time and became able to organise her life around her own wishes and needs rather than in relation to some artificial ideal or friends who had previously served as extensions of herself. In the analysis she made a simple request of me for the first time -- which was granted rather than interpreted.

In the eighth and final year she spontaneously commenced to criticise me without feeling uncomfortable and became acutely aware of the pain and strength involved in maintaining herself as a separate person. Up to this time she had had sexual contact but never sexual intercourse with men friends. Shortly before the conclusion of therapy she reported the commencement of a full sexual relationship and not long after described feeling critical of me but uncomfortable. Follow-up

over several years has revealed that circumstances which demand uncontrolled commitment remain highly stressful e.g. composing an essay for examiners. However despite temporary avoidance of decision, often with symptom return, the situation is seen through usually successfully. Her personal relationships have a whole person quality and are deep and gratifying for her.

Thus far we have considered identity disturbances in the light of the evolution and organisation of the core self-images. The narcissistic disturbance of the neurotic is different in that it is not primarily in the realm of continuity. Rather, it is based on a negative valuation of the core self-images with secondary defensive manoeuvres affecting continuity. As described elsewhere (Kinston, 1980) the negative valuation is not due just to rage, anxiety and other unpleasurable affects filling the self-image, though this is commonly so. It is chiefly related to the separation-individuation process in early childhood becoming invested with parental rage and hatred or anxiety in association with the frustration of parental narcissistic strivings. Parental negation of the child then replaces affirmation and the adult patient finds himself with life problems associated with being rejected and rejecting others. The neurotic patient attempts to get rid of his self-images, usually by externalisation or wholesale repression. A crucial self-destructive device that is often used is the move to a state of object-narcissism.

Clinical Illustration 3.

Mr. X's identity related to the self-image of being unable to function. This derived from parental overprotection and intrusion interacting with his own wishes and from identification with their failure as parents. After

the work described in Kinston (1980) Mr. X did get promoted two grades in his current job with significant increased responsibility including supervising another person. Shortly after officially taking over the job which he had been carrying in a temporary capacity he began complaining about it in the analysis, and started behaving at the office in a provocative way, attacking his seniors, showing them up, trying to get them to "admit the job was impossible for anyone". After it was interpreted that he was inducing his boss to think that he couldn't cope, and that this was the self-image. The idea of himself, that he felt at all costs must be avoided, he settled down, handled the work well enough and made good relations with his seniors. Keeping alive his defective self in inner reality, maintained his identity and provided sufficient internal narcissistic support to allow him to function and relate and thus build up reality-based achievements which consolidated his social role. Later it emerged that the work was indeed beyond his abilities. In other words, he was keeping the idea of himself as a failure and unable to function alive by taking on an unsuitable job.

Core self-images and the concomitant pain-filled self-object relations lose their effect on the feeling state of the person when they are replaced by states of fusion with the object. It is self-evident that separateness is the prerequisite of all identity maintenance. Childhood experiences as described above may predispose to the burden of separateness being replaced by

the pleasurable relief of fusion in which the child acts as an extension of the parent. Such abandonment of separateness means temporary loss or interruption of continuity, and may impair growth and self-transformation. Hence there is serious but often unconscious or unregistered narcissistic damage. Such individuals, who live in intermittent states of fusion or who have created a caretaker self, find themselves having to make excessive efforts to restore themselves. They may use primitive methods of relating such as negativism and desperately seek external evidence of success such as status, acclaim and admiration.

The despair of narcissistic disturbance stems from the inescapable nature of personal history. The persistent self-images which live on in the unconscious can only be terminated by death - physical death or some form of death-in-life.

Identity and Social Activity

Social role is a preferable and less confusing term than objective identity. It is a complex social and personal phenomenon which is part of the person who comes for analysis. He has an urge to maintain this and develop it based on the full set of motivations and inter-relations of his life. Its understanding is as much a psychological as a sociological matter. The investigative mode of psychoanalysis only allows us a particular and limited access to it. Nevertheless important work has been done, for example, by Jacobson in relating it to identification, and further insights are yet to be obtained.

Social role and social activity can be linked theoretically to identity. It will be recalled that the primary process endeavours to find a perception identical with the image of the object which results from the experience of satisfaction. The secondary process modifies this and seeks identity between thoughts (Freud, 1900). This formulation is equally applicable to the experience of continuity of core self-images and is particularly important for identity maintenance. Early perceptions and, later, thoughts of the self which persist in psychic reality seek reaffirmation in the external world (Spiegel, 1959). Interpersonal interaction and social role behaviour are used to activate and give reality to self-images. Greenacre (1958) describes "the sense of the self-image" as being "vitalised by continual redefinement".

All major developmental and later life changes require the person to work so as to develop the experiences referred to as sense of identity and objective identity while maintaining and reasserting identity as we have defined it. The environment must be handled so as to reflect and reproduce some transformation of the early self-images. Authenticity can then be understood in terms of the integration of the crucial self-images into everyday psychological functioning.

However, where there is pathology, social activity may be detrimental to the maintenance of a legitimate or desirable social role: grotesquely so when the crucial sense of continuity involves being abandoned, battered or neglected. Alternatively, as Erikson argues, the social expression of self may win through and change society. This has happened in the establishment of social services which institutionalise dereliction and deprivation. The explicit adoption and expression of social role is an index of *sincerity*. The expression of identity within social

role is an index of authenticity. If social role is not a manifestation of core self-images, then a sense of falseness will be evident at least to the person himself, if not to others. In such cases, social role is an elaboration of sameness in relation to object-narcissism and covers chaos and isolation in the realm of self-narcissism, and psychic reality.

Most people we would describe as healthy, actively organise their lives to ensure stability, continuity, freedom from intrusion, a circle of friends who support, respect, like, encourage and praise them. Most of the above are requirements for analysability and criteria for success in analysis. Essentially the criteria are narcissistic. Chasseguet-Smirgel (1976) writes "even when the superego is well established within, this condition is not sufficient to offer man the narcissistic nourishment which he requires". Tartakoff (1966) also notes "the degree of dependence on external recognition in normal fantasiers at the expense of object relations". Lichtenstein (1961) goes further and sees society as a support system of the individual and therefore maintained by him. The superego may be the main internal regulator of self-narcissism (Sandler, 1960) but external relations and activity over-ride. This is in line with the intuitive awareness that individuals are finally judged by their deeds not their thoughts, and by their actions and accomplishments not their good intentions.

S U M M A R Y

A conceptualisation of identity, drawing heavily on the work of Lichtenstein, has been presented and integrated within a theory of narcissism developed by the author (1980, 1982 a,b,c). Identity is defined in terms of the persistence of core self-images in psychic reality. Identity maintenance and identity disturbances are discussed with clinical illustrations. The analysis emphasises man's psychic dependence on and psychic maintenance of a social system, and opens the way to further psychoanalytical investigation of the social, in distinction to the intimate, aspects of psychic functioning.

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