now available. Chief amongst these is the multi-volume set produced in the 1960s and early 1970s under the wonderful editorship of Trevor Jones at Jesus College, Cambridge – though if the assiduous reader spots weaknesses in my translation of German words beginning with S through to Z, then they should please direct their brickbats at Oxford University Press, who have signally failed to publish the missing volume(s)! On the other hand, the OUP certainly deserve the warmest possible plaudits for their *Oxford English Dictionary*: no one could wish for a better resource than this matchless work, and having plundered its riches several times daily for many months, I happily close by offering grateful obeisance to what is surely one of the mightiest achievements of English culture.

On the Introduction of Narcissism[1]

condition, for whom I have proposed the term paraphrenics, display two fundamental characteristics: megalomania, and withdrawal of interest from the external world (people and things). The latter development makes them unamenable to psychoanalysis, it makes them incurable no matter how hard we try. The paraphrenic's withdrawal from the external world, however, needs to be more precisely characterized. The hysteric and the obsessional neurotic likewise abandon their relationship to reality, assuming their illness develops to that point. But analysis shows that they by no means forsake their erotic relationship to people and things. They hold fast to it in their imagination, on the one hand replacing or mingling real objects with imaginary ones drawn from their memory, whilst on the other not initiating in respect of those objects any of the motor activities needed for the attainment of their goals. For this condition of the libido alone, and for no other, should one use the term indiscriminately applied by Jung, namely *introversion* of the libido. With the paraphrenic, however, the position is quite different. He really does seem to have withdrawn his libido from the people and things of the external world without replacing them with any others in his imagination. In cases where he *does* so replace them, this appears to be a secondary process, and to form part of an attempt at recovery that seeks to lead the libido back to the object world.[5]

The question then arises as to the subsequent fate of the libido in schizophrenia once it has been withdrawn from objects. The megalomania characteristic of this condition points the way. We can assume that it arose at the expense of object-libido. The libido, having been withdrawn from the external world, is channelled into the ego, giving rise to a form of behaviour that we can call narcissism. However, the megalomania itself is not a new entity, but, as we know, only a magnified and more distinct form of a pre-existing state. This in turn leads us to think that the form of narcissism that arises as a result of the incorporation of object-cathexes[6] is a secondary one that develops on top of a primary one rendered obscure by a variety of different influences.

Let me stress once again that I am not seeking here either to resolve or further to complicate the schizophrenia problem, but

am merely bringing together what has already been said in other contexts, in order to justify introducing the concept of narcissism.

A third factor contributing to this, in my view legitimate, extension of the libido theory arises from our observations and interpretations of the inner life of children and primitive peoples. In the latter we find traits which, if they were to occur individually, could be classed as megalomania: an overestimation of the power of their wishes and psychic acts – the 'omnipotence of thoughts'; a belief in the magical power[7] of words; a technique for dealing with the external world, namely 'magic', which appears as the logical application of these megalomaniac premisses.[8] We expect to encounter an entirely analogous attitude to the external world in the child of our own day and age, whose development is far less clear to us.[9] We thus find the notion taking shape in our mind that it was the *ego* that originally underwent libido-cathexis;[10] some of this libido is later transferred to objects, but essentially it stays put, and relates to the object-cathexes rather as the body of an amoeba relates to the pseudopodia that it sends forth. This aspect of libido lodgement inevitably remained hidden from us to begin with, given the symptom-based nature of our researches. The only things apparent to us were the emanations of this libido, namely object-cathexes, which can be sent forth and then retracted again. We can also discern what in broad terms we can call an antagonism between the ego-libido and the object-libido – the more replete the one becomes, the more the other is depleted. The highest phase of development achievable by the latter appears to us to be the state of being in love, which presents itself to us as an abandonment by the individual of his own personality in favour of an object-cathexis, and which has its antithesis in the paranoiac's fantasy (or self-perception) regarding the 'end of the world'.[11] What we ultimately conclude regarding the differentiation of psychic energies is that initially, in the state of narcissism, they remain clustered together, and hence undifferentiable in terms of our crude analysis, and that only the supervention of object-cathexis makes it possible to differentiate sexual energy, the libido, from the energy of the ego drives.

before I go any further, I must touch on two questions that take us to the heart of the difficulties entailed by this topic. First: how does narcissism as we are here proposing it relate to autoeroticism, which we have elsewhere described as an early form of libido? Second: if we postulate a primary libido-cathexis to the ego, why is there any need to differentiate sexual libido from non-sexual energy in the ego drives? Wouldn't the supposition of a single, unified psychic energy spare us all the difficulties associated with trying to distinguish between ego-drive energy and ego-libido, between ego-libido and object-libido?

As to the first question, I say this: it is a necessary hypothesis that there is no entity present in the individual from the very beginning that is equatable with the ego; the ego has to be developed. Auto-erotic drives, however, are primal; therefore something else must supervene in addition to autoeroticism, a new psychic process, in order to produce narcissism.

Any psychoanalyst called upon to give a definitive answer to the second question is bound to feel distinctly uncomfortable. One balks at the idea of abandoning empirical observation for the sake of sterile theoretical disputes, but nonetheless we cannot shirk the obligation to try to resolve the issue. Notions such as that of an ego-libido or an ego-drive energy etc. are undoubtedly neither particularly easy to grasp nor sufficiently weighty in content; a speculative theory of the relevant relationships would want above all to establish a sharply defined concept as a basis for everything else. But in my view that is precisely the difference between a speculative theory and a science founded on the interpretation of empirical facts. The latter will not envy speculation its privilege of resting upon neat and tidy foundations of unassailable logic, but will gladly make do with nebulously evanescent, scarcely conceivable basic ideas, hoping to grasp them more clearly as they develop, and willing if need be to exchange them for others. For these ideas are not the foundation upon which the entire science rests; instead, it rests solely upon observation. They are not the substructure but the superstructure of the whole edifice, and can be replaced or discarded without harm. We are currently seeing the same sort of thing happen

in physics, moreover, whose fundamental ideas about matter, centres of force, attraction and such like are scarcely less precarious than their counterparts in psychoanalysis.

The value of the concepts 'ego-libido' and 'object-libido' resides in the fact that they derive from thorough study of the intimate characteristics of neurotic and psychotic processes. The separation of the libido into one that pertains to the ego, and one that becomes attached to objects, is a necessary corollary of a primary hypothesis that differentiated between sexual drives and ego drives. This, at any rate, was the conclusion that I was driven to by analysis of both of the pure forms of transference neurosis (hysteria and obsessional neurosis), and I know only that all attempts to account for these phenomena by other means have utterly failed.

Given the complete lack of any guiding theory of drives, it is legitimate, not to say imperative, first to take a hypothesis of some kind and test it thoroughly and rigorously until it either fails, or proves valid. Now, quite a number of things tend to support the hypothesis of a primal separation of sexual drives and other kinds of drives, i.e. ego drives, not least its efficacy in the analysis of transference neuroses. I admit that this factor on its own would not be unambiguous, for it might well be a question here of indifferent psychic energy that turns into libido only through the process of object-cathexis. For one thing, however, this conceptual distinction corresponds to the distinction so commonly encountered in ordinary life between hunger and love. For another thing, *biological* considerations lend support to the hypothesis. The individual really does lead a double existence both as an end in himself, and as a link in a chain that he serves against his will, or at any rate regardless of his will. He even supposes sexuality to be one of his own designs – whereas on an alternative view he appears as a mere appendage of his germ-plasm,[12] to whose purposes he devotes all his energies in return for the reward of a mere sensation of pleasure. On this view, he is but the mortal vehicle of a – perhaps – immortal essence; like the lord of an entailed estate, he is but the temporary occupant of an institution that will outlast him. The separation of the sexual drives from the ego drives would simply mirror this dual function of

the individual. Thirdly, one has to bear in mind that all our tentative psychological theories will need to be grounded at some point in organic systems. It will then very likely transpire that it is particular substances and chemical processes that are responsible for the workings of sexuality, and which make it possible for the life of the individual to carry over into the life of the species. We take full account of this likelihood by substituting particular psychological forces for particular chemical substances.

Precisely because I am normally at pains to keep psychology separate from all that is alien to it, including the mode of thinking characteristic of biology, I wish to concede quite explicitly at this point that the hypothesis of separate ego drives and sexual drives, i.e. the libido theory, is essentially biologically based, and is grounded scarcely at all in psychology. I shall therefore also be consistent enough to drop this hypothesis if a better and more serviceable theory of drives were to emerge from psychoanalytical work itself – though this has not so far proved to be the case. It might then turn out that – at the deepest possible level and at the remotest possible distance – sexual energy, the libido, originated as a part of the energy inherently active in the psyche that then separated off through differentiation. But such a proposition is of little relevance. It concerns things that are so far removed from the problems raised by our clinical observations, and so limited in their contribution to our knowledge, that it is no more worth contesting than it is worth applying in practice. Any such primal oneness is perhaps just as irrelevant to our analytical interests as the primal kinship of all the races of man is to the Probate Officer seeking proof of kinship between an heir and a testator. All these speculations get us nowhere. And as we cannot wait until the definitive theory of drives is handed to us on a plate by some other science, it is far more expedient to try to see what light can be thrown on these fundamental biological puzzles by a synthesis of *psychological* phenomena. By all means let us acquaint ourselves with the possibility of error, but let us not be deterred from rigorously following up the first hypothesis we mentioned,[13] viz. that of an antagonism between ego drives and sexual drives thrust upon us by our analysis of the transference

neuroses, and thereby discovering whether it can be developed in a fruitful and consistent way, and whether it can be applied to other disorders as well, e.g. schizophrenia.

Things would be different, of course, if it were proven that the libido theory had already come to grief in failing to explain this latter disorder. C. G. Jung has made precisely this claim (1912) and has thereby forced me to set out the considerations above, which I would much rather have been spared. I should have preferred to follow through to its conclusion the path already taken in my analysis of the Schreber case, without going into its underlying assumptions. Jung's claim, however, is premature at the very least. His reasoning is scant. He bases his argument in the first place on my own supposed admission that in the face of the difficulties of the Schreber analysis I felt driven to modify the libido concept, that is to say, to abandon the notion of its having a sexual content and to regard the libido as being part and parcel of psychic interest[14] in general. As to rectifying this misconception, Ferenczi (1913) has already said all that needs to be said in his thorough critique of Jung's book.[15] I can only agree with Ferenczi, and repeat that I have never voiced any such renunciation of the libido theory. A further argument of Jung's, asserting that there was no reason to think that the loss of the normal reality-function[16] could be caused solely by withdrawal of the libido, is not an argument at all, but an assertion of dogma; it 'begs the question'[17] and pre-empts debate, whereas the question whether and how such a thing might be possible really does need to be explored. In his next major work (1913), Jung touches briefly on the solution that I pointed to quite some time ago: 'Now in all this we admittedly also need to take account of the fact – something incidentally that Freud refers to in his account of the Schreber case – that introversion of the *Libido sexualis* leads to a cathexis of the "ego", which is conceivably what causes this reality-loss effect to appear. The possibility that the psychology of reality-loss might be explained in this way is indeed an enticing one.' Unfortunately, however, Jung does not explore this possibility very far. Only a few lines later he dismisses it with the comment that on such a basis 'the psychology of an ascetic anchorite would emerge successfully, but

not a dementia praecox'. To show how little this inapt analogy can contribute to a resolution of the issue, we need only remark that such an anchorite in his 'eagerness to eradicate every trace of sexual interest' (though only in the popular sense of the word 'sexual') does not even need to exhibit any pathogenic libido lodgement. Though he may have completely averted his sexual interest from human beings, he can easily have sublimated it into a heightened interest in the divine or natural or animal realm without falling victim to an introversion of his libido onto his fantasies, or a reversion of his libido to his ego. This analogy appears to disregard from the very outset any possibility of differentiating between interest arising from erotic sources, and that arising from others. If we also bear in mind that the researches of the Swiss school, however commendable, have elucidated only two features of dementia praecox – the existence of complexes familiar to the healthy as well as to neurotics, and the similarity between patients' fantasies and folk myths – whilst for the rest proving unable to throw any light on the actual mechanism of the disorder, then we can readily reject Jung's claim that the libido theory has been proved a 'failure' by its inability to solve the problem of dementia praecox, and is therefore finished in respect of other neuroses too.

II

Any *direct* study of narcissism seems to me to be prevented by a number of special difficulties. The principal means of approaching the matter is likely to remain the analysis of paraphrenias. Just as the transference neuroses have enabled us to trace the libidinal drive-impulses, so, too, dementia praecox and paranoia will afford us insight into the psychology of the ego. Once again, our understanding of the normal in all its seeming simplicity has to be derived from the pathological with all its warped and coarsened features. All the same, a few other paths to a better understanding of narcissism do remain open to us: the study of organic illness, of hypochondria, and of the love-life of the sexes; and I shall now discuss each of these in turn.

In considering the influence of organic illness on the distribution of the libido, I am following a suggestion made to me in conversation by Sándor Ferenczi. It is universally known, indeed it seems self-evident to us, that anyone tormented by organic pain and dire discomfort abandons all interest in the things of the external world, except in so far as they bear on his suffering. Closer observation shows us that he also withdraws all libidinal interest from his love-objects; that so long as he suffers, he ceases loving. The banality of this fact need not prevent us from translating it into the language of the libido theory. We would then say: the patient retracts his libido-cathexes into his ego, and redeploys them once he is well. 'The sole abode of his soul forsooth', says Wilhelm Busch of a toothache-stricken poet, 'is the small black hole in his molar tooth.' Libido and ego-interest share the same fate in this regard, and are

once again indistinguishable from each other. The notorious egoism of the ill covers both. We find this egoism so self-evident because we know for certain that in similar circumstances we would behave in exactly the same way. In its own way, comedy, too, exploits this phenomenon whereby physical ailments sweep away even the most passionate inclinations, and replace them with utter indifference.

Like illness, the sleep state, too, involves a narcissistic process whereby the libido is withdrawn from its various positions[18] and focused on the self or, to be more precise, on the sole desire for sleep. The egoism of dreams probably fits in very well in this context. If nothing else, we see examples in both cases of alterations in libido distribution as a result of ego-alteration.[19]

Hypochondria, like organic illness, expresses itself in painful and distressing physical sensations, and matches it, too, in the effect it has on libido distribution. The hypochondriac withdraws both his interest and – particularly markedly – his libido from the objects of the external world, and concentrates both of them on the organ that concerns him. But a disparity between hypochondria and organic illness forces itself on our attention here: in the latter case the painful sensations are grounded in demonstrable physical changes, whereas in the former they seem not to be. However, it would be fully in accord with our conception of neurotic processes as a whole if we were to venture the view that the message given out by hypochondria must indeed be quite right, and that it, too, must surely involve organic changes. But what would these changes consist in?

We are going to let ourselves be guided here by our knowledge that physical sensations of an unpleasant kind, comparable to those encountered in hypochondria, are also present in the other neuroses. I have already on an earlier occasion mentioned my inclination to regard hypochondria as the third 'actual' neurosis[20] alongside neurasthenia and anxiety neurosis.[21] It is probably not going too far to suppose that an element of hypochondria may also routinely be present in the other neuroses; the finest example of this is probably to be seen in anxiety neurosis and its overlying hysteria. It is of course

the genital organ in its various states of excitation that constitutes the most familiar exemplar of an organ at once painfully sensitive and physically changed in some way, yet not in any ordinary sense of the word morbid. In such circumstances it becomes engorged with blood, swollen, moist, and the locus of manifold sensations. Let us use the term *erogeneity* to describe the process whereby a part of the body transmits sexual stimuli to the psyche; let us also bring to mind that our reflections on the theory of sexuality have long since accustomed us to the view that certain other parts of the body – the *erogenous* zones – might be able to substitute for the genitals and behave in a similar way to them: there is then just one further step that we must dare to take at this point. We can venture to regard erogeneity as a general property of *all* the organs, and we can then speak of it as increasing or diminishing in intensity in any particular part of the body. Any such variation in the erogeneity of the organs might be paralleled by a change in libido-cathexis within the ego. It is in such factors perhaps that we need to search for whatever it is that we might consider the basis of hypochondria, and that is capable of having the same effect on libido distribution as when the organs are affected by physical illness.

We note that if we continue thinking along these lines we shall come face to face with the problem not only of hypochondria, but also of the other 'actual' neuroses, neurasthenia and anxiety neurosis. Let us therefore call a halt at this juncture: the purposes of a purely psychological study are not served by straying so far into the realm of physiological research. We might simply mention that on the available evidence it seems reasonable to suppose that hypochondria stands in a similar relationship to paraphrenia as the other 'actual' neuroses do to hysteria and obsessional neurosis, that is to say that it depends on ego-libido just as the others depend on object-libido; on this supposition, hypochondriac fear is the counterpart on the ego-libido side to neurotic fear. Furthermore, given that in the case of the transference neuroses we are already familiar with the idea that the mechanism of the onset of illness and of symptom-formation – the progression from introversion to regression – can be linked to

a heavy build-up of object-libido,[22] then we may also feel more inclined to embrace the idea of a heavy build-up of ego-libido, and relate it to the phenomena of hypochondria and paraphrenia.

Naturally enough, our thirst for knowledge prompts us at this point to ask why such a build-up of libido in the ego has to be experienced as unpleasurable. I should like to make do here with the reply that unpleasure is routinely the form in which increased tension expresses itself, and that therefore what happens here, as elsewhere, is that a certain quantity of the physical process transmutes into the psychic quality of unpleasure; though it may then well be the case that what determines the degree of unpleasure is not the absolute magnitude of that physical process, but rather some particular function of it. From this vantage point one may even dare to approach the question as to *where* the compulsion comes from in the first place that makes the psyche transcend the boundaries of narcissism and invest the libido in objects. Again, the logical answer in terms of our overall train of thought would be that the compulsion arises when the libidinal cathexis of the ego has exceeded a certain level. A strong ego affords some protection against falling ill; but in the end we must necessarily start loving if we are not to fall ill, and we must necessarily fall ill if refusal[23] makes us incapable of loving – rather along the lines of the model offered by Heinrich Heine when he envisions the psychogenesis of Creation:

> Krankheit ist wohl der letzte Grund
> Des ganzen Schöpferdrangs gewesen;
> Erschaffend konnte ich genesen,
> Erschaffend wurde ich gesund.
>
> (Sickness no doubt was the ultimate cause
> of my urge to become the Creator;
> by dint of creation I was able to recover,
> by dint of creation I regained my health.[24])

We have identified our psychic apparatus as being above all an instrument charged with asserting control over excitations that

would otherwise prove distressingly uncomfortable or pathogenic. This psychic processing activity achieves extraordinary things with regard to the inner discharge of excitations that are incapable of direct external release,[25] or for which such release would be undesirable at that particular moment. With inner processing of this kind, however, it is initially irrelevant whether it operates with real objects or imaginary ones. The difference only becomes apparent later on, if there is a heavy build-up of libido as a result of the latter turning to non-real objects (introversion). In the case of the paraphrenias, megalomania permits a similar inner processing of the libido once it has retreated into the ego; it is perhaps only when the megalomania has failed that the build-up of libido within the ego becomes pathogenic and triggers the healing process that strikes us so forcibly as illness.

Trying as I am at this point to penetrate just a little way into the mechanism of paraphrenia, I shall rehearse those concepts that seem to me at the present time to be worthy of attention. In my view, what makes these disorders different from the transference neuroses is the fact that when libido is freed up as a result of refusal, it does not resort with objects in the imagination, but withdraws to the ego; that being so, megalomania corresponds to the process in the transference neuroses whereby the psyche asserts control over this quantum of libido, i.e. introverts it onto products of the imagination; any failure of this psychic control-process gives rise to the hypochondria characteristic of paraphrenia, which is homologous to the fear characteristic of transference neuroses. We know that this latter fear can be dislodged by other forms of psychic processing too, namely conversion,[26] reaction-formation, and the formation of protection mechanisms (phobias). In the case of the paraphrenias, this role is played by the phase of attempted restitution, to which we owe the conspicuous symptoms of morbidity. Given that paraphrenia in many – if not most – cases involves only a partial dislodgement of the libido from objects, the clinical picture may be divided into three distinct groups of symptoms: 1) those reflecting what the subject retains of his normal state or neurosis (residual symptoms); 2) those reflecting the illness process itself (dislodgement of the

libido from objects, and also megalomania, hypochondria, affective disorder, regression in all its various forms); 3) those reflecting the restitution process which, after the manner of hysteria (in the case of dementia praecox and paraphrenia proper) or obsessional neurosis (in the case of paranoia), re-attaches the libido to objects. This new libido-cathexis takes place on a different level and under different conditions from the primary one. The difference between the transference neuroses created by this secondary cathexis, and their counterparts as formed by the normal ego, would surely afford us the deepest possible insight into the structure of our psychic apparatus.

A third point of access to the study of narcissism is provided by the love-life of human beings, given the different forms that it takes in men and women. Just as the object-libido initially hid the ego-libido from our inquiring eye, so too in the case of object-choice on the part of the child (and developing individual) we initially focused our attention on the fact that they derive their sexual objects from their gratification experiences. A child's first experiences of autoerotic sexual gratification occur in the context of vital functions conducing to self-preservation. Sexual drives initially develop by imitating the ego drives and their gratification, and only subsequently make themselves independent of them – though the imitative process remains evident in the fact that it is the people concerned with the child's feeding, care and protection who become its first sexual objects, hence primarily the mother or mother-surrogate. But alongside this type and its associated source of object-choice, which we can term the *imitative* type,[27] a second and quite unexpected one has been revealed to us by our psychoanalytical researches. We have found – and this has been particularly clear in the case of people whose libidinal development has been disturbed in some way, such as perverts and homosexuals – that they model their subsequent love-object not on their mother, but on their own person. They quite clearly seek *themselves* as love-object, thereby exhibiting what we can call the *narcissistic* type of object-choice. It is this observation above all that has driven us to our narcissism hypothesis.

Now we have not concluded from all this that human beings fall into two sharply differentiated groups, one predisposed to the imitative type of object-choice and the other to the narcissistic, but instead prefer the hypothesis that both paths are open to each and every individual, and that either is equally capable of being preferred. We are arguing that every human being originally has two sexual objects: himself, and the woman who cares for him; and concomitantly we postulate a primary narcissism in all human beings, which in certain circumstances can prove dominant in their object-choice.

A comparison of males and females then shows that there are fundamental – though not of course universal – differences between them in their relationship to the two types of object-choice. Full object-love as per the imitative type really does seem to be characteristic of males. It displays conspicuous sexual over-valuation, which probably derives from the original narcissism present in childhood, and accordingly represents its transference onto the sexual object. This sexual over-valuation gives rise to the curious condition of being in love, reminiscent of neurotic obsession, and amounting as such to a transfer of libido that depletes the ego for the benefit of the object. Things develop in a quite different way in the commonest, probably purest and most authentic type of female. Here, the onset of puberty manifest in the development of the previously latent female sexual organs appears to be accompanied by an intensification of her original narcissism unfavourable to the forming of any proper object-love with its due complement of sexual over-valuation. Particularly where she develops the attributes of beauty, a woman comes to feel sufficient unto herself, which compensates her for the greatly reduced freedom of object-choice imposed on her by society. Strictly speaking, such women love only themselves, and with the same intensity as men display in loving them. Their need, furthermore, is not to love, but to *be* loved, and they deign to tolerate any man who fulfils this condition. The importance of this type of woman for the love-life of human beings is very great. Such women hold the greatest possible fascination for men, not only for aesthetic reasons, since they are usually the most beautiful, but also because

of an interesting combination of psychological factors. For it seems clearly apparent that narcissism in an individual becomes magnetically attractive to those who have altogether relinquished their own narcissism,[28] and who are casting around for object-love. The fascination of the child rests to a great extent on its narcissism, on the fact that it is sufficient to itself and impervious to others; so too does the fascination of certain animals that appear to show no interest in us, such as cats and the great beasts of prey; indeed, even dire criminals and comic heroes captivate us within the context of the arts by dint of the narcissistic rigour with which they keep at bay anything tending to diminish their ego. It is as though we envied them their retention of a blissful psychic state, of an unassailable libido position, that we ourselves have since relinquished. However, the powerful fascination of the narcissistic woman is not without its darker side; the lovelorn male's frustration, his doubts about the woman's love, his lamentations on her enigmatic nature, are largely rooted in this incongruence of the two types of object-choice involved.

It is perhaps not entirely superfluous for me to emphasize that in describing women's love-life in these terms I am not remotely animated by any bias inclining me to disparage women. Quite apart from the fact that bias of any kind is alien to me, I am also well aware that these different patterns of development reflect the differentiation of functions within an extremely complex biological nexus; furthermore, I am quite ready to concede that there are innumerable women who love on the male pattern and also develop the sexual over-valuation characteristic of it.

Even for those women who remain narcissistic, and cool in their response to men, there is a path that can lead them to full object-love. In the child that they bear, they encounter a part of their own body as a distinct and separate object upon which, on the basis of their narcissism, they can now bestow full object-love. Then there are other women who do not need to wait for a child in order to progress from (secondary) narcissism to object-love. These are women who, prior to puberty, feel themselves to be male and manage up to a certain point to develop in a male way; their efforts in this direction are abandoned once female sexual maturity comes upon them – but

they thereafter remain capable of yearning for a male ideal, which really amounts to a perpetuation of the boy-like being that they themselves once were.

A brief summary of the various paths to object-choice may serve to bring these adumbrations to a close.

We love one or other of the following:

1) *Narcissistic type:*
   a) what we ourselves are,
   b) what we ourselves were,
   c) what we would like to become,
   d) a person who was once part of our own self.
2) *Imitative type:*
   a) the woman who feeds us,
   b) the man who protects us,
   and the many surrogates who take their place.

Category c) of the first type can only be substantiated at a later stage in the argument.

The significance of narcissistic object-choice in the case of male homosexuality remains to be discussed in a separate context.

The primary narcissism of the child that we have postulated, and that constitutes one of the premisses of our libido theories, can be more easily inferred from other factors than captured by direct observation. When one looks at the attitude of affectionate parents towards their children, one cannot but recognize it as a resurgence and repetition of their own long-abandoned narcissism. The trusty characteristic of 'over-valuation', which we have already discussed as a distinctive marker of narcissism in the context of object-choice, predominates in this affective relationship, as is universally known. There is accordingly a compulsion to ascribe to the child all conceivable perfections, something for which dispassionate observation would find no cause, and to conceal and forget all its faults – indeed it is in this context that denial of child sexuality has its place. However, there is also a tendency when faced by the child to suspend

all the cultural accretions that we ourselves came to accept only in the teeth of opposition from our narcissism, and to reassert through the child our long-abandoned claims to rights and privileges. Things are to be better for the child than they were for its parents; it is to be saved from subjection to those imperatives that we have accepted as paramount in life. Disease, death, the forgoing of sensual pleasure, the curbing of one's own will – none of this is to apply to the child; the laws of nature and of society are to stop at its door; it really is to become the very core and centre of creation once again: *His Majesty the Baby*,[29] as we once thought ourselves to be. The child is to fulfil all the wishful dreams that its parents dreamed but never realized; it is to become a great man and great hero as proxy for the father, or get a prince for a husband as belated compensation for the mother. That most precarious aspiration of the narcissist scheme of things – immortality of the ego, so gravely threatened by sheer reality – is rendered secure by finding refuge in the child. Parental love, so touching yet essentially so childlike, is nothing other than the resurgent narcissism of the parents, which in its transformation into object-love unmistakably reveals its original nature.

III

There are certain questions that I should like to leave to one side for the time being since they represent an important area of study that has still not been fully dealt with: questions as to what disruptions the primal narcissism in children is prey to, what reactions it displays in resisting them, and what paths it is forced along in the process. The most significant part of all this can be identified as 'castration complex' (penis-fear in the boy, penis-envy in the girl), and can be dealt with in conjunction with the effects of sexual intimidation during infancy. Psychoanalytical research, which normally serves as the means for us to track the various fates of the libidinal drives when they have become isolated from the ego drives and then find themselves in conflict with them, allows us in this present context to draw inferences as to the nature of an earlier stage and psychic situation in which both sets of drives manifest themselves in harmonious interaction and indissoluble combination with each other as narcissistic interests. It was on the basis of this nexus that Alfred Adler arrived at his 'masculine protest', which he elevates to the status of being almost the sole driving force behind the formation of personality and neuroses alike, whilst grounding it not in a narcissistic, i.e. still libidinal impulse, but in a social value-judgement. The standpoint of psychoanalytical research has been to acknowledge from the outset both the existence and the importance of the 'masculine protest', but to argue, in opposition to Adler, that it is narcissistic in nature, and has its origins in the castration complex. It pertains to character-formation, to the genesis of which it contributes along with many other factors, and as such is wholly irrelevant to the elucidation of problems concerning

neuroses, the only noteworthy aspect of which for Adler is the way they serve the ego-interest. I find it quite impossible to suppose that the genesis of neurosis rests solely on the slender basis of the castration complex, no matter how powerfully the latter may manifest itself amongst the resistances displayed by men to treatment of their neuroses. I might add, too, that cases of neurosis are known to me in which the 'masculine protest' or, in our terms, the castration complex, plays no pathogenic role, or indeed is entirely absent.

Observation of the normal adult shows his erstwhile megalomania to be much reduced, whilst the psychic characteristics from which we inferred his infantile narcissism are scarcely distinguishable. What then has become of his ego-libido? Are we to suppose that it was entirely absorbed by object-cathexes? Such a possibility clearly contradicts the entire thrust of our argument. But we can find pointers to a quite different answer to this question in the psychology of repression.

We have learned that libidinal drive-impulses are subject to the fate of pathogenic repression when they come into conflict with the individual's cultural and ethical notions. What we understand by this is *not* that the individual has a merely intellectual awareness that these notions exist, but rather that he fully accepts them as his own yardstick and fully submits to the demands that they entail. As we have said, repression emanates from the ego; or, to put it more precisely, from the self-respect of the ego. The same impressions, experiences, impulses, desires that one human being will readily entertain, or at least consciously process, will be rejected by another with utter indignation, or be stifled before they even enter consciousness. However, the difference between the two, which reflects the conditions in which repression takes place, can easily be expressed in terms enabling us to resolve the issue by means of the libido theory. We can postulate that the one individual has set up an *ideal* within himself against which he measures his actual ego,[30] whereas the other has formed no such ideal. On this view, the formation of an ideal[31] constitutes the necessary condition on the part of the ego for repression to take place.

It is this ideal ego that is now the recipient of the self-love enjoyed

during childhood by the real ego. The individual's narcissism appears to be transferred onto this new ideal ego which, like the infantile one, finds itself possessed of every estimable perfection. Here too, as is ever the case in matters of the libido, human beings have proved incapable of forgoing gratification once they have enjoyed it. They are unwilling to forsake the narcissistic perfection of their childhood, and when – discomfited by the admonitions raining down on them while they are developing, and with their powers of judgement duly awakened – they fail to retain that perfection, they seek to retrieve it in the new guise of the ego-ideal. What they project as their ideal for the future is a surrogate for the lost narcissism of their childhood, during which they were their own ideal.

It is appropriate at this point to explore the ways in which this forming of an ideal relates to sublimation. *Sublimation* is a process involving object-libido, and consists in a drive latching on to a different goal far removed from sexual gratification, the main aim here being to divert attention away from the sexual. *Idealization* is a process involving the object itself, whereby the object is magnified and exalted in the individual's mind without itself changing in nature. This idealization can occur within the domains of both ego-libido and object-libido. Thus, for instance, sexual over-valuation of an object constitutes an idealization of that object. To the extent, therefore, that sublimation has to do with drives whereas idealization has to do with objects, the two concepts need to be clearly distinguished from each other.

The formation of ego-ideals is frequently confused with the sublimation of drives, to the considerable detriment of our understanding. Just because someone has traded his narcissism for veneration of an exalted ego-ideal does not necessarily mean that he has managed to sublimate his libidinal drives. The ego-ideal certainly demands such sublimation, but cannot force it to happen; sublimation remains a separate process that may be triggered by the ideal, but then runs its course entirely independently of any such trigger. It is precisely in the case of neurotics that one finds the most electric disparities between the sophistication of their ego-ideal and the degree of sublimation of their primitive libidinal drives; and it is

generally much harder to convince an idealist that his libido is inappropriately located than it is to convince the uncomplicated sort who has remained modest in his expectations. Sublimation and the formation of ideals also play completely different roles in the causation of neurosis. As we have seen, the formation of ideals intensifies the demands of the ego, and is the strongest single factor favouring repression; sublimation represents the let-out whereby such demands can be met *without* recourse to repression.

It would not be surprising were we to come across a special entity[32] in the psyche charged with ensuring that narcissistic gratification is indeed achieved in accordance with the ego-ideal, and to this end incessantly scrutinizes the actual ego and measures it against the ideal. If indeed such an entity exists, there can be no question of our discovering it as such; all we can do is to assume that it exists, and we may reasonably suppose that the thing we call our *conscience* matches the description. By acknowledging this entity we are better able to understand the so-called object-of-attention delusion or, more correctly, object-of-*scrutiny* delusion, that crops up so conspicuously in the symptomatology of paranoid illnesses, and which may perhaps also occur as a separate illness or as a random element in a transference neurosis. Patients then complain that all their thoughts are known, their actions watched and monitored. They are informed of the workings of this entity by voices, which characteristically speak to them in the third person ('Now she's thinking about that again', 'Now he's going away'). The complaint is justified, it depicts the true situation: such a power really does exist, and it exists in all of us in normal life, registering, scrutinizing, criticizing our every intention. Object-of-scrutiny delusions reflect it in a regressive form, thereby revealing both its genesis and the reason why the patient rebels against it. For what first triggered the formation of the ego-ideal – the duly appointed keeper of which is the conscience – was the critical influence of the individual's parents, communicated by voice, who were joined in the course of time by others involved in his upbringing, by his teachers, by the vast and indeterminate mass of all the other people in his milieu (people in general, public opinion).

Large quantities of essentially homosexual libido are drawn on for the purposes of forming the narcissistic ego-ideal, and achieve discharge and gratification through keeping it going thereafter. Conscience is instituted basically as an embodiment first of parental criticism, and subsequently of criticism by society at large, a process that more or less repeats itself in the emergence of repressive tendencies stemming from prohibitions and obstacles initially encountered in the external world. Neurosis then brings to light both the inner voices and the indeterminate mass, and the whole developmental history of the person's conscience is thereby regressively reproduced. However, his recalcitrance against this *censorial entity* derives from the fact that – in full accord with the fundamental nature of his illness – he wants to free himself from all these influences, starting with that of his parents, and withdraws his homosexual libido from them. He then sees his conscience in regressive refraction as a hostile force bearing down on him from outside.

The bitter complaining characteristic of paranoia also demonstrates that the self-criticism expressed via the conscience is essentially all of a piece with the self-scrutiny upon which it is based. The same mental process that has taken on the function of conscience has thus also lent itself to the exploration of the inner self, which is what provides philosophy with the material for its cerebrations. This may well have considerable bearing on the urge to construct speculative systems that is characteristic of paranoia.[33]

It will doubtless be a significant step for us when we are able to find evidence in other realms, too, of the activity of this entity dedicated to critical scrutiny – duly elevated to its role as both conscience and agent of philosophical introspection. I would like to draw here on what Herbert Silberer has termed the 'functional phenomenon', one of the few incontestably valuable additions to the theory of dreams. As is well known, Silberer has demonstrated that in states between sleeping and waking one can directly observe the conversion of thoughts into visual images, but that often in such circumstances what is actually represented is not the thought content but the *state* (of willingness, tiredness etc.) that the person fighting

sleep finds himself in. He has also shown that dream closures and breaks within dreams in some cases signify nothing but the dreamer's own perception of sleeping and waking. He has thus proved that self-scrutiny – in the sense of paranoid object-of-scrutiny delusion – plays a role in dream-formation. This role is not a constant one; I probably overlooked it because it plays no great part in my own dreams; it may well become very marked in the case of people who are philosophically gifted and accustomed to introspection.

We might remind ourselves at this point that we have argued elsewhere that the formation of dreams takes place under the sway of a censorial process that forces dream-thoughts to become distorted. In positing this censorship, however, we did not envisage any special power at work, but chose the term to describe that portion of the repressive tendencies governing the ego that is directed at dream-thoughts. If we go more deeply into the structure of the ego, then we may reasonably see in the ego-ideal and the dynamic utterances of the conscience the *dream censor*[34] as well. Supposing that this censor also remains alert to some extent during sleep, then we can readily comprehend that the prerequisite of its activity, namely self-scrutiny and self-criticism, helps to shape the content of dreams with contributions like 'now he's too sleepy to think', 'now he's waking up'.[35]

We can now attempt a discussion of self-feeling[36] in normal individuals and in neurotics.

Self-feeling seems to us in the first place to be an expression of the ego in its totality, without further regard being paid to its essentially composite nature. Everything one possesses or has achieved, every remnant of one's primitive sense of omnipotence that has been borne out by experience, helps to enhance this self-feeling.

If we are going to introduce our distinction between sexual drives and ego drives, then we must also acknowledge that self-feeling is particularly intimately dependent on narcissistic libido. We base this contention on the two fundamental facts that in the paraphrenias self-feeling is enhanced whereas in the transference neuroses it is

diminished; and that in love-relationships an individual's self-feeling is increased by his being loved, and decreased by his *not* being loved. We have already argued that, in the case of narcissistic object-choice, being loved constitutes both the goal and the means of gratification.

It is easy to see, moreover, that the libidinal cathexis of objects does not enhance self-feeling. Dependence on the love-object has a belittling effect; to be in love is to be humble. Loving someone means, so to speak, forfeiting part of our narcissism, and we can make good the deficit only by being loved. In all these respects self-feeling appears to remain directly proportional to the degree of narcissism involved in the subject's love-life.

The realization of impotence, of one's own inability to love, as a result of some psychological or physical disorder, has an extremely debilitating effect on self-feeling. Here, so it seems to me, may lie one of the sources of the feelings of inferiority so readily avouched by those suffering from transference neuroses. The main source of these feelings, however, is the depletion of the ego that occurs when extraordinarily large cathexes of libido are withdrawn from it; in other words, impairment of the ego by sexual urges that are no longer subject to control.

A[lfred] Adler has rightly argued that when people recognize deficiencies in their own organs, this acts as a spur to their psyche (assuming the latter to be functioning adequately), and by means of over-compensation serves to lift their level of achievement. But it would be a gross exaggeration if we were to follow Adler's procedure and regard organ deficiency as the origin and necessary condition of every instance of high achievement. Not all painters are afflicted by eye defects, not all orators were originally stutterers. There are abundant examples, too, of excellent things achieved by people blessed with exceptional organs. When it comes to the aetiology of neurosis, organic deficiency and wasting play a minor role, perhaps much the same as that played by the perceptual material of the moment in the formation of dreams. The neurosis uses it as a pretext just as it uses every other expedient factor. One has no sooner given credence to a neurotic patient's notion that she was bound to become ill because – as she saw it – she was ugly, misshapen and devoid of

charm, so that no one could ever conceivably love her, than one is taught a lesson by the very next female neurotic to come along, who doggedly cleaves to her neurosis and rejection of sexuality despite seeming more than averagely desirable, and indeed being actively desired. The majority of hysterical women may be numbered among the attractive and even beautiful representatives of their sex; and inversely, the heavy incidence of ugliness, infirmity and wasted organs in the lower classes of our society has no effect whatever on the frequency of neurotic disorders occurring amongst them.

The relationship of self-feeling to the erotic (i.e. to libidinal object-cathexes) may be summed up in the following terms. We need to determine which of two alternatives applies: whether the love-cathexes are *ego-accordant*,[37] or whether on the contrary they have undergone repression. In the former case (i.e. where libido deployment is ego-accordant), the same value attaches to loving as to any other activity of the ego. The process of loving in itself, inasmuch as it entails yearning and going without, diminishes self-feeling; the process of being loved, of finding one's love returned, of gaining possession of the loved object, restores it to its previous level. In the case of repressed libido, the love-cathexis is experienced as a severe depletion of the ego; no gratification of the love is possible; replenishment of the ego can be achieved only by withdrawal of the libido from its objects. The return of object-libido to the ego, and its transformation into narcissism, creates as it were a semblance of love happily achieved, whilst a love happily achieved in actual reality corresponds in turn to the primal state in which object-libido and ego-libido cannot be differentiated from one another.

The importance and complexity of this subject is perhaps sufficient justification for appending a few extra paragraphs here in more or less random order:

The development of the ego consists in an ever-increasing separation from one's primary narcissism, and gives rise to an intense struggle to retrieve it. This separation occurs through the displacement of libido onto an ego-ideal imposed from without; gratification occurs through fulfilment of that ideal.

At the same time, the ego sends forth libidinal object-cathexes. It becomes depleted for the sake of these cathexes and for the sake of the ego-ideal, but replenishes itself through object-gratifications[38] and through fulfilment of the ideal.

One part of self-feeling is primary, the residue of childhood narcissism; another derives from our sense of omnipotence as borne out by experience (fulfilment of the ego-ideal); a third arises out of the gratification of our object-libido.

The ego-ideal puts considerable difficulties in the way of libido gratification through objects by causing some of them to be rejected by its censor[39] as unsuitable. Where no such ideal has developed, the relevant sexual urge enters the individual's personality in unmodified form as a perversion. Becoming our own ideal again in respect of our sexual urges as well as everything else, just as in our childhood: therein lies the happiness that human beings aspire to.

Being in love consists in the ego-libido overflowing abundantly onto the object. It has the power to undo repressions and remedy perversions.[40] It exalts the sexual object into the status of sexual ideal. Given that in the case of the 'object' or 'imitative' type it has its basis in the fulfilment of infantile conditions of love, we may venture the dictum: 'Whatever fulfils this condition of love is consequently idealized.'

The sexual ideal can enter into an interesting support role in relation to the ego-ideal. Where narcissistic gratification encounters real obstacles, the sexual ideal can be used for surrogate gratification. The person then enacts the narcissistic type of object-choice by loving what he once was but has meanwhile forfeited, or by loving whatever possesses the qualities that he himself doesn't have at all (cf. above under *c*) [page 19]). The formula parallel to the one cited above runs as follows: 'Whatever possesses the qualities that the ego lacks *qua* ideal, is consequently loved'. This particular resort holds special significance for the neurotic, whose ego becomes depleted because of his excessive object-cathexes, and who is hence incapable of achieving his ego-ideal. Having squandered his libido on objects, he then seeks a way back to narcissism by adopting the narcissistic type of object-choice and choosing a sexual ideal possessed of the

qualities he himself cannot attain. This is healing through love, which as a rule he prefers to the psychoanalytical variety. Indeed, he has no faith in any other healing mechanism; he generally embarks on his therapy in expectation of it, and duly focuses this expectation on the person of the physician treating him. What stands in the way of this curative scheme, of course, is the patient's incapacity for love as a result of his panoply of repressions. If the treatment manages to remedy this to some degree, we often meet with a successful if unintended outcome in that the patient withdraws from treatment in order to make a love-choice, and to entrust his further recovery to his shared life with the loved person. We might be content with this outcome if it did not bring with it all the dangers of a crushing dependence on his helper in adversity.

The ego-ideal opens up a significant new avenue for our understanding of mass psychology.[41] This ideal has a social element as well as an individual one, for it is also the shared ideal of family, class, nation. Besides narcissistic libido, it also harnesses a large quantum of a person's homosexual libido, which thereby reverts to the ego. Non-gratification resulting from non-fulfilment of this ideal releases homosexual libido, which converts into guilty conscience (social fear).[42] Guilty conscience originates as fear of parental punishment, or rather – to put it more accurately – fear of losing the parents' love; later, the indeterminate mass of fellow human beings takes the parents' place. We can thus more readily understand the fact that paranoia is frequently caused by the ego being wounded, by gratification being refused within the domain of the ego-ideal. Also, in the case of the paraphrenic illnesses, we can better understand the concomitance within the ego-ideal of ideal-formation and sublimation, the retrogression of sublimations, and the re-formation[43] of ideals that occurs in certain circumstances.

(1914)

Remembering, Repeating, and Working Through