

## Definition of Disorder of the Self

**Self disorder** is the term Heinz Kohut used, in his psychology of the self, to describe those psychological situations in which the core narcissistic elements of the personality are either permanently arrested and result in a primary developmental failure or, secondarily, they are temporarily fragmented due either to a toxic but less malignant milieu or to disruptions in the current environment. In either case, and in normal development as well, the core elements of the self form as a consequence of the child's interaction with its earliest caretakers. Because these formative people (objects) are experienced by the developing child as part of its self, in terms of the particular psychological functions they provide, Kohut called them selfobjects (see **cohesive self**).

Noting the import of the surrounding milieu upon the formation and deformation of the developing self, Kohut and Wolf wrote, "Depending on the quality of the interactions between the self and its selfobjects, the self will emerge either as a firm and healthy structure or a more or less seriously damaged one. The adult self may thus exist in states of varying degrees of coherence; from cohesion to fragmentation; in states of varying degrees of vitality, from vigor to enfeeblement; in states of varying degrees of functional harmony, from order to chaos. Significant failure to achieve cohesion, vigor, or harmony, or a significant loss of these qualities after they had been established, may be said to constitute a state of self disorder." (Kohut, H. and Wolf, E, (1978) *The Disorders of the Self in Search for the Self*, ed. Ornstein, P. vol 3 p 359-385) (p 362)

### *Primary disorders of the Self*

Serious, unalterable damage to the developing self occurs when the young child is exposed to an unremittingly toxic milieu in which its existence and vitality are not responded to with even the most minimal affirmation (mirroring) and its need to merge with a soothing, calming, omnipotent presence (idealization) is massively frustrated. Add to this the inability, due either to biology or

environment, to create useful defensive structures that might cover or primitively manage the core defects in the self and a psychosis forms. In the borderline states the core self is similarly permanently deformed, however, its defect is covered over and protected by a series of defensive structures. Because of the extreme vulnerability of the self it generally is not advisable to tamper with the defenses, such as isolation and avoidance, in these people. These defenses form out of the early experience that interaction with others leads to injury which, for these people, is nearly insurmountable. Rather than viewing these defenses as maladaptive they should be understood as the child's best attempt at keeping the self safe and should be honored as such.

In the group of self deformations Kohut called the narcissistic behavior disorders, the self, while stunted in its development and consequently seriously symptomatic in its behavior, is resilient and amenable to psychoanalytic treatment. These people respond to the enfeeblement and deadness of their self through behavioral means. They tend to become addicts and substitute their drug of choice for the soothing, calming effect that would have become internalized as part of their self had that capacity existed within their failed idealized selfobjects of childhood. Perversions, also of many stripes, are their attempts to either sooth an agitated, often manicy self, or to stimulate a deadened, enfeebled self. While these activities tend to be physically and socially dangerous they should be understood as attempts, even though ultimately ineffective, to rescue a faltering self.

The underlying disturbance in the narcissistic behavioral disorders is the deformed, fragmented self that emerges from its failed early environment. In contrast to the internal situation in the primary self orders, the self for these people, while protected by their particular problematic behavior, is resilient and capable of tolerating the affects that emerge during a psychoanalytic treatment. In such a treatment the affects associated with the deforming, enfeebling failures and traumatic experiences of early life are lived-out in the defensive repetitive

transferences of the failed selfobjects. The underlying, unrequited needs for the missing selfobject functions (selfobject needs) also emerge and are lived out in the transference. Strengthening of the self occurs as previously rejected affects are experienced in an optimal environment.

Narcissistic personality disorders are similar etiologically and therapeutically to the narcissistic behavior disorders however, their symptoms are not expressed behaviorally. Instead, they suffer a panoply of painful psychological states. A few of the many possible internal dystonias are; empty depressions that reflect the absent early affirmation of their existence, hypochondria that expresses their unarticulated sense of "falling apart," and agitation and sensitivity to slights that express an unmodulated unconscious grandiosity. In the person who suffers a narcissitic personality disorder, the self while feeble is also resilient and, as with the narcissitic behavior disorder, is availalbe to psychoanalytic treatment.