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Narcissism in the Epistemological Pit

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For some people, the move from dualistic to relativistic epistemological thought is accompanied by significant psychological distress. Although there are several possible sources of psychological difficulty in stage transition, we argue that long-standing deficits in object relations can predispose a person to clinical crisis during particular life phase and cognitive stage transitions. Specifically, a person is likely to experience clinical crisis during a particular life phase or stage transition if that developmental advance requires abandoning strategies that have been used to shore up faulty self and object representations. The life phase move from adolescence to adulthood and the cognitive stage shift from dualistic to relativistic thought often pose particular difficulty for persons with a narcissistic personality organization. The epistemological move to relativism can be particularly traumatic when adolescents have cathected their own intellectual products (ideas, ideologies) as idealized self-objects. A case study is presented to illustrate the clinical crisis that can be precipitated by the narcissistic adolescent's loss of intrapsychic supports in the move to adulthood and to committed relativism.

KEY WORDS: adolescent development; narcissism; narcissistic personality; relativism; epistemology.

In our studies of epistemological development in adolescents and young adults, we have been struck by the degree to which, for a number of people, the move from dualistic to relativistic thinking is accompanied by enormous pain and struggle, seen most acutely in the uncommitted relativist position. Perry (1970) described uncommitted relativism as a "silent" position, often apparent only in a student's reflecting back upon it, whereas we found that many people were quite conscious and articulate regarding their uncommitted relativistic epistemology, remained in this position for long periods of time, and made the transition to committed relativism only with a good deal of *angst* and, often, personal crisis. These participants were typically in late adolescence or early adulthood and were usually—but not always—males who were highly intelligent and intellectual, heavily invested in ideas. Epistemological and existential issues were a conscious concern, not to say a preoccupation. The dissolution of certain dualistic knowledge, for these young men, seemed to bring about depression, self-hatred, self-fragmentation, and meaninglessness. Having lost a basis for guaranteeing "right" choices, they seemed unable to make any choices at all, to have lost meaning and vitality. This picture of the depressed, intellectual, cynical, existential late adolescent is not a new one. It is a staple of Western adolescent fiction, for example. What was compelling to us was the extent to which this "existential crisis" and its accompanying affect seemed to correspond to the move from dualistic to relativistic thought. Although from a cognitive viewpoint, we spoke of the "shift" from dualistic to relativistic epistemology, when considering the wider personal implications of this shift, we came to use the metaphor of the "pit" of uncommitted relativism—a dark place which one "fell into" when dualism failed, and which one had to "climb out of" to achieve the firmer ground of commitment.[4]

Originally, viewing this phenomenon through the lens of cognitive–developmental theory, we attributed

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[4]We learned this metaphor for epistemological development from Carol Gilligan and Michael Murphy.

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the pain of these adolescent philosophers to their cognitive-stage transition. They hurt, we reasoned, because losing one's epistemological innocence hurts. They struggled because finding one's way in a relativistic world is hard. Moreover, we assumed that when they developed higher cognitive structures, these adolescent existentialists would become able to make meaningful choices and commitments and be "saved" from their pain and crisis.

Later, however, two experiences led us to a different understanding of the pain of the uncommitted relativist. As we became more familiar with modern psychoanalytic theories (object relations and self-psychology), we began to see that the interviews we had chosen to use in our teaching as exemplars of successful (albeit painful) stage growth could also be viewed clinically as showing patterns of disturbed self and object relations. At the same time, the first author was doing psychotherapy with college students and was able to observe ways in which their epistemological struggles were placed within broader clinical problems. We began to see the uncommitted relativist's distress, then, as coming not only from the difficulty of the stage transition, but also from long-standing disturbances in object relations.

In this paper, we put forward a model of the clinical precursors to unusual difficulty in stage transition, and then use that model to examine the late adolescent who suffers in the transition to committed relativism. Along the way, we address several related questions, including

Is psychological suffering during moral/ego/epistemological stage transition universal? Common? Does growth have to hurt?

If not, what determines who suffers and who makes a relatively easy stage transition?

Is there really such a thing as an "existential crisis"? (Or is distress over existential issues merely an intellectualization of pain stemming from childhood trauma and current life blows?)

OBJECT RELATIONS DEFICITS AND PSYCHOLOGICAL DISTRESS DURING LIFE PHASE/STAGE TRANSITION

Past work (e.g., Noam, 1998; Noam, Chandler, & Lalonde, 1995) has identified four ways in which psychological distress can be related to developmental processes or events:

(1) *Psychological distress can result from development gone wrong*: This model, typified by psychoanalytic theory as well as by structural–developmental theories like Selman's, sees psychological disorder resulting from delays, fixation, or regression in development (Selman, 1977). Psychoanalytic theories generally focus on the later effects of early problems in development (the "early insult" model), whereas cognitive–structural theories generally focus on delays in normal development (age–stage dissynchrony).

(2) A particular kind of psychological distress can be normative for a certain life/developmental phase. This model posits specific forms of psychological distress that occur normally in particular phases of normal development—for example, Erikson's description of identity crisis in adolescence (Erikson, 1968).

(3) *New forms of psychological distress can arise when a person develops more complex cognitive/ego structures*: For example, Noam et al. (1995) found that adolescents who move from the preconventional to the conventional level show a reduction in externalizing symptoms, but an increased risk for depression and suicide. Similarly, Chandler (1994) found adolescents' suicide risk to rise when they were making a transition to a more complex understanding of identity. This model implies (as does # 4 below) that resistance to development may serve the purpose of warding off distress/pathology.

(4) *Psychological distress results from the process of stage transition*: This position is exemplified by Kegan's work on the "natural emergencies of the self," in which he identifies "normal" forms of depression, anxiety, self-fragmentation, and so forth that correspond to each of his stage transitions (Kegan, 1982). More generally, Commons et al. (Commons, Goodheart, Dawson, & Miller, 1996; Commons & Richards, 2002) identify a series of stages and substages that they believe characterize all structural stage transitions, each of which is associated with typical personality and behavioral difficulties. This model shares with # 2 the view that periods of psychological disorganization are natural and necessary parts of healthy growth and are not necessarily indicative of underlying pathology.

Our studies of the suffering of the adolescent existentialist have led us to an understanding of pain in this developmental transition that draws upon each of these models. Put most generally, we propose that, although there is indeed normative distress associated with both certain life phases and stage transitions, it is also the case that long-standing intrapsychic deficits can predispose a person to more than the usual distress during particular developmental transitions. *Specifically, a person is likely to experience clinical crisis during a particular life phase or stage transition if that developmental advance requires abandoning strategies that have been used to shore up faulty self-object structures*.

The transition from late adolescence to adulthood and from dualistic to relativistic thought may be "normatively" difficult for most people. Erikson's description of identity crisis, Perry's chronicling of Harvard students' struggles in defining commitment, Chandler's portrayal of "epistemological loneliness," all describe the "pain of normal development" in this period (Chandler, 1975; Erikson, 1968). When we look at those late adolescents who suffer more seriously and acutely in the move from dualism to relativism, however, we notice consistently a particular pattern of underlying disturbed object-relations problems, described best by the psychoanalytic literature on narcissism.

The narcissistic personality organization is described by Masterson (1993), who distinguishes between the "grandiose narcissist" (the type identified by the *DSM-IV* disorder) and the "closet narcissist." These organizations share a common underlying unconscious representation of self and object: namely, a grandiose self that is fused with an omnipotent, idealized object. This self-object representation is false and defensive, in that it is based on fantasy, and its purpose is to defend against pathological affect rather than to deal with reality. Split off from this idealized self-object representation and defended against is a parallel representation of a harsh, attacking, devaluing object fused with an inadequate, unworthy self. This pathological intrapsychic structure is thought to result from the failure of the child's early caretakers to provide the adequate mirroring of the child's real self—the child's genuine emotions, motives, experiences. Often, such a child has been used by a narcissistic parent, either as mirror or audience to the parent's grandiosity or as an idealized object whom the parent narcissistically cathects, for example, takes as an object of fulfillment of their needs. Either way, such a child will become fearful of genuine self-activation, and, instead, maintains defensive operations to sustain its self-aggrandizement. The difference between the grandiose narcissist and the closet narcissist is that the grandiose narcissist directly cathects the self as special, unique, adored, admired, entitled, whereas the closet narcissist cathects the omnipotent object, maintaining his own grandiosity by "basking in the glow" of his identification with the idealized object. In either case, challenges to the narcissistic defenses (such as criticism, failure, disappointment with the idealized object, failure of others to adequately meet mirroring needs) lead to abandonment depression, experiences of self-loathing, and a sense of "falling apart."

The transition from adolescence to adulthood can present particular difficulties for the person with a narcissistic personality organization. Blos (1962) describes these difficulties in his analysis of a syndrome he calls "prolonged adolescence in the male" (although he interprets this syndrome in classical psychoanalytic, rather than in object-relational terms). These men, says Blos, typically have been the "apples of their mothers' eyes." They have internalized their mothers' narcissistic overvaluations of themselves as special, gifted, destined for great things. With the end of adolescence comes the "crushing realization" that the world does not share in the parent's view. For all adolescents, adulthood requires a limiting of one's options, a renouncing of some grandiose fantasies to achieve an investment in a real adult self. For the narcissistic adolescent male, however, adulthood threatens the loss of the primary supports for his narcissistic defenses. Separating from the mother and enacting real adult possibilities is tantamount to narcissistic impoverishment. As a result, such boys avoid making adult commitments, keeping the late adolescent conflict open indefinitely, while frantically investing in a series of ideals, plans, fantasies, and, sometimes, supportive relationships with women who assume the mother's role of "adoring fan," in their attempts to shore up the threatened grandiose self-image.

Just as the life-phase transition from adolescence to adulthood can be made more difficult by underlying narcissistic deficits, we suggest that the epistemological transition from dualism to relativism can be unusually difficult for people with narcissistic personality organization. Specifically, we propose that epistemological development becomes particularly problematic when the person has heavily cathected his own beliefs, ideologies, and intellectual prowess as part of his narcissistic defenses. In Kegan's

terms, the "objects" of ego Stage 4—ideologies and systems—serve as self-objects, that is objects that are experienced as part of the self and are used to serve a self-function (Kegan, 1982; Kohut, 1971). For the grandiose narcissist, one's identity as an intellectual and as an adherent to a system may be idealized. For the closet narcissist, ideologies or value systems (or the people who hold them) may become narcissistically cathected as omnipotent objects. In either case, one's relation to one's system of values serves as a source of narcissistic support. The cognitive-ego structures of Stage 4, and of dualistic epistemology, then, are adaptive for the maintenance of narcissistic defenses and, thus, help the narcissistic adolescent ward off underlying depression and self-criticism. We suggest that at Stage 4, when one is dualistic about one's ideologies, the intellectually invested narcissist may function quite well and may, in fact, not show signs of vulnerability except under acute stress.

For these persons, however, stage movement from dualism to relativism threatens the collapse of these important narcissistic supports. As Kegan (1982) describes, in this transition, ideologies move from being "me" to "not me," from defining "who I am" to something I "have." Thus differentiated, they can no longer function as successfully as self-objects. Moreover, with the discovery of contextual relativism, one's own ideologies lose their specialness, their privileged status as "*truth*," and become on a par with others' beliefs—flawed, partial, ordinary. The very moves in thought that enable many people to feel more empathy and appreciation for those with different beliefs, threaten the self-aggrandizement of the grandiose narcissist and deprive the closet narcissist of an idealized object. The move to relativism involves some narcissistic loss for all of us, as most growth does. Many times people speak of becoming "humbler," less sure of themselves, epistemologically speaking. For a person with a relatively stable and robust self-representation, however, the narcissistic blow of giving up dualism and moving to relativism is tolerable. For a narcissistically fragile person, who has depended on ideologies and intellectual superiority to shore up their false self, it can be a very painful and seemingly intolerable blow.

We propose, then, that in the development of relativistic thought, the narcissist has literally "outgrown" the psychic strategies that had supported his object relations deficits. The demise of the dualistic/Stage 4 structure reveals the underlying vulnerabilities in object relations and can precipitate a psychological crisis.

PSYCHOLOGICAL CRISIS AND EPISTEMOLOGICAL DEVELOPMENT IN THE LATE ADOLESCENT NARCISSIST: A CASE EXAMPLE

As we have seen, both the transition to adulthood and the decline of dualistic thinking pose challenges to narcissistic defenses. When these two developmental transitions coincide for a person with underlying narcissistic deficits, there is a great risk of clinical crisis. We have observed several cases of this kind of "existential crisis" in late adolescent intellectuals with narcissistic personality organizations, in which intellectual development to relativism, life-phase transition to adulthood, and clinical crisis centered on narcissistic issues coincide.

To illustrate the parallels among life phase, epistemological, and clinical aspects of this crisis, we present the case of "Sean," a patient seen in weekly therapy beginning in his junior year of college and continuing through his 1st year following graduation. Sean was an exceptionally intelligent, academically gifted student, who had been recognized by teachers as unusual and received various kinds of special attention and honors throughout his school career. He was a philosophy and religious studies major who approached his course work as one facet of his larger "search for truth." Sean was also clearly the "special" child in his family, the favorite of a charismatic, dramatic, dominating, and often cruel mother. (His parents had divorced, and the children had little relationship to their father.) Sean's mother idealized him, but also required him to idealize her and provide almost constant mirroring for her. She regularly went into narcissistic rages at her children, blaming them for her unhappiness.

Adolescence precipitated a crisis for Sean, as all attempts to self-activate and separate from his mother were met with her cold rage and withdrawal. He became school-phobic and was eventually directed to psychotherapy by school officials. When, at his therapist's urging, he asked to spend the summer with his father, his mother cut off all contact with him, and the symbiotic relationship was ended. Sean lived briefly with his father and then with a series of acquaintances through the remainder of his high school years. He filled the void left by the loss of his relationship with his mother, during his high school and early college years, with a series of very intense romantic relationships with women and mentor–protégée relationships with older men, both centered on shared devotion to an ideology (eastern religion, Marxism, etc.). In these

relationships, people served as self-objects, shoring up his narcissistic fragility through their admiration and idealization of him (in the case of women) or through his idealization and/or merger with them (in the case of men). Both his ideologies and his relationships inevitably proved disappointing; however, in the years before coming to therapy, Sean had gone through an increasingly frantic search for an unassailable belief system.

He came into therapy in his junior year, as his anxiety about epistemological issues, his future, and his relationships was mounting. With the beginning of metasystematic thought, Sean became consciously preoccupied with epistemological issues, as he began to sense that the central problem in his intellectual quest was not his failure to find the one "*true*" ideology, but perhaps something more endemic to the nature of his relation to his ideologies in general. Like many late adolescent narcissists, Sean attempted a variety of maneuvers to resist the full implications of stage development, that is, to look for a way to hold onto his idealization of his beliefs. At first, he decided that, although all of the particular theories he had embraced were flawed, hope was nevertheless to be found in an "integration" of all of them, into a "mega–meta-theory." Surely *that* would be worthy of idealization. In this strategy, the emerging metasystematic thought structures that underlie relativism are used in an attempt to defend against their ultimate epistemological implications.

As that strategy collapsed and Sean's epistemological thinking became fully relativistic, he attempted to narcissistically cathect relativistic epistemology itself, becoming engrossed in social constructivism and postmodern philosophy. During this period, he was given a scholastic assignment of defining his core beliefs. He wrote an essay in which he stoically renounced all belief and at the same time idealistically expressed his faith in the process of meaning-making itself. His descriptions of himself, his ideas, and other people, all vacillated between idealization and devaluation. Often both were fused into a single representation. ("I was stupid to believe that any beliefs could be really true, but I'm special because I'm so willing to face the awful truth that there is no truth.")

We have seen this phase in each late adolescent narcissistic relativist that we have observed. It is, in fact, the phase that brings their epistemological development so prominently to our attention. When dualistic certainty had been eclipsed, our participants/clients made a last desperate attempt to hold onto their intellectual narcissistic idealization and grandiosity by embracing relativism itself as "*the right*" ideology. One is still intellectually superior, because one understands that no beliefs are certain (except the belief in the impossibility of certainty). At the same time, the narcissistic defenses have largely crumbled, and the affect even of this idealization of relativism takes on a good deal of the emerging rage at the failed world and at the self. Ordinary people are scorned; one's pain in facing the grim truth is idealized. Cynicism and bitter disappointment are seen as marks of superiority.

It is common for adolescents discovering relativism to revel in the uncertainty of belief and the implied undermining of authorities. What is unusual in the narcissistic intellectual adolescent, however, is both the degree of pain at the dissolution of dualistic certainty and the idealization of epistemological cynicism, which is now cathected as a way of being special, superior.

This final defense collapsed, for Sean, in his senior year of college. The tasks of choosing a graduate school and separating from the parent–substitute relationships that had sustained him during late adolescence were faced with increasing anxiety and depression. None of the graduate programs he visited fulfilled his fantasy of an inspiring intellectual community. He worked on his thesis, but he felt little narcissistic investment in its quality (a wholly new experience for him). As graduation approached, he became fully uncommitted-relativistic in his epistemological thinking, and seriously depressed. He precipitated a crisis in his mentor relationship, which led to a final separation. At that point, he attempted suicide and was hospitalized.

For the adolescent intellectual narcissists we have observed, the period in which the full implications of relativism were finally accepted was uniformly a time of great vulnerability and risk. All were seriously depressed. Many talked about suicidal feelings. At the same time, many expressed a sense of relief at being able to "let go," to stop the massive defensive manoeuvers that had characterized the previous years. They also often described a lifting of anxiety—as though a long-dreaded event had finally happened, and no longer needed to be guarded against.

DISCUSSION

In sum, we suggest that there is a characteristic syndrome that describes at least one of the forms of unusual suffering that can occur in the transition from

dualism to relativism. Specifically, there are four factors that predispose a person to suffer in this transition: (1) a narcissistic personality organization; (2) a strong "intellectual identity," that is, cathexis of one's own ideas; (3) the beginning of relativistic thought; and (4) the late adolescent to adult transition. When these four coincide, the person is very likely to experience depression, a sense of narcissistic depletion, self-blame, fragmentation, and meaninglessness. He is likely to avoid making commitments to adult life, to become disillusioned with the people and ideas that have been important to him, and to attempt suicide.

The clinical picture presented by our participants strongly resembles the "self-evaluative depression" that Kegan (1982) describes in the transition from Stage 4 to Stage 5 of his ego stages, characterized by feelings of self-blame, guilt, fragmentation, meaninglessness. He would understand the participants' affect as coming from essential aspects of the process of this stage transition—for example, self-blame as the Stage 4 perspective on its own dissolution, fragmentation and meaninglessness as reflecting the coming-apart and loss of the old way of making meaning. Masterson, on the other hand, might see our participants' depression as resulting from their experience of the attacking object/unworthy self-object representation, because of the collapse of narcissistic defenses. We see both of these views of the adolescent relativist's pain as valid, but partial. The relativizing of one's ideologies is so painful, not just because it is a breakdown of a previous worldview, but because this worldview has served the purpose of shoring up faulty self and object structures.

Let us now reconsider those broader questions posed at the beginning of this paper, to see what the proposed model has to say about them.

(1) *Is psychological suffering during moral/ego/epistemological stage transition universal*? Theorists like Erikson, Kegan, Chandler, and Noam describe forms of suffering that are characteristic of particular stage- or phase-transitions. Commons and colleagues (Commons, Goodheart, Dawson, & Miller, 1996; Commons & Richards, 2002) suggest that all stage transitions proceed via a series of deconstructive and constructive moves that involve dysfunctional strategies and attendant typical personality problems. Is such distress, however, the exception or the rule? Our analysis suggests that some "suffering," or at least "normative crisis" may be universal for certain transitions. For example, we all narcissistically cathect the objects that are fused with the self. This is not just a characteristic of narcissists, but of healthy object relations as well. It is to be expected, then, that transitional periods in which one's "self-objects" are "threatened" by structural growth will be for most people times of heightened vulnerability to anxiety and depression. On the other hand, for people with mature and healthy object relations, this vulnerability will probably be tolerated with little acute distress. At the same time, the intense and protracted pain seen in the most vivid case examples is probably not the norm.

(2) *What determines who suffers and who makes a relatively easy stage transition*? We suggest that although stage/phase transitions are periods of heightened vulnerability for all people, acute clinical crisis is likely to be seen in those people who have used the cognitive and interpersonal structures of the previous stage/phase to defend against underlying psychic conflicts and to compensate for intrapsychic deficits. Commons and colleagues see narcissism as an outcome to be expected of Stage 2, the relativistic stage, in stage transitions, in which people "stop progress by insisting that there is more than one way to look at things, but cannot decide . . . the conflict between whether to choose A or B produces anxiety, *angst*, and mood swings and uncertainty about interpersonal roles, values, and so forth." They note that people at this transitional stage "fill academia," which, if true, would seem to support our notion that identification with one's intellectual products is a predisposing factor for crisis in this transition. Where Commons identifies narcissism as an *outcome* of this stage in stage transition (and we agree that all people are probably more inclined to narcissistic behavior during this transitional stage), we also suggest that preexisting narcissistic character is a strong predisposing factor for significant difficulty in the dualist–relativist transition. Moreover, we argue that this underlying narcissism can be seen not only in Commons' Stage 2, in which alternate views are held as equally valid, but in earlier stages as well (e.g., in the narcissistic rage at the failure of one's views in Stage 0 or the extreme idealization of new views in Stage 1).

(3) *Is there really such a thing as an "existential crisis"*? (Or is distress over existential issues merely an intellectualization of pain stemming from childhood trauma and current life blows?) Well, yes and no. Our view of the "crisis of the epistemological pit" suggests that acquiring an existential view of the arbitrariness of human meaning can indeed precipitate a clinical crisis—that this philosophical recognition is not merely an "intellectualization" of some deeper or more current interpersonal hurt. At the same time,

the recognition of existential realities is probably so hurtful for some people precisely because they have cathected their own ideas and their intellectual identities in ways that have helped them defend against underlying narcissistic injuries that *were*, in their origins, interpersonal.

Kegan (1982) uses the metaphor of the two parts of the Chinese character for "crisis" to remind us that times of crisis contain aspects of both danger and opportunity. We have focused here on the "danger" side of the epistemological transition for narcissists, the ways in which development toward relativism pulls the rug out from under narcissistic supports. In Commons's language, we have focused on the earlier "deconstructive" stages of the transition, rather than the later "constructive" stages (Commons & Richards, 2002). On the other hand, we could look at this transition as a time when development provides a natural confrontation to defenses—a therapeutic opportunity. This raises several questions for clinical practice: How can one be of help to someone undergoing this kind of developmentally precipitated clinical crisis? One very simple recommendation of our view is that a client's intense interest in epistemological issues should not be dismissed as mere intellectualization, but as a real arena in which the central clinical conflicts are being engaged. A more difficult question is whether structural development can itself be a palliative for object-relational deficit: Could the emerging higher-level stage structures provide cognitive mechanisms that could support more mature object relations and self-structure, enabling healthier functioning? Is cognitive growth itself a valid therapeutic goal in working with this group of people? We hope other developmental theorists and clinicians will join us in addressing these issues.

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