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**Melanie Klein  
and Early Object  
Relation Theory**

*Psychology of the Self and the Treatment of Narcissism*

# **Melanie Klein and Early Object Relations Theory**

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# Melanie Klein and Early Object Relations Theory

In *Civilization and Its Discontents*—better translated as “The Uneasiness Inherent in Culture”—Freud (1930, p. 122) wrote, “The evolution of civilization may therefore be simply described as the struggle for the life of the human species.” He concludes:

The fateful question for the human species seems to me to be whether and to what extent their cultural development will succeed in mastering the disturbance of their communal life by the human instinct of aggression and self-destruction. . . . Men have gained control over the forces of nature to such an extent that with their help they would have no difficulty in exterminating one another to the last man. (p. 145)

Forty-five years later Eissler (1975) wrote, “An anguished mood of desperation has settled over the whole world. . . . No remedy has obviously been found that could counteract the excess of aggression and narcissism that is a property of the species *Homo sapiens*.” In this article entitled, “The Fall of Man,” Eissler discusses the central Western image of Christ expiring on the cross and explains, “Possessed by a sentiment, perhaps amounting to a premonition, that something is basically wrong in human affairs, Christianity has, for almost two

thousand years, been waiting for His coming.” In an earlier paper, Eissler (1971) defends Freud’s notion of the death instinct in a most enthusiastic fashion even though it is a notion rarely accepted by psychoanalysts today. Indeed, no better theory has been devised that fits so well with the rest of Freud’s theories and discoveries (Kohut 1984, p. 35), and with the profound and detailed elaborations of these into a general psychology by the famous New York-based ego-psychology school headed by Hartmann, Kris, and Loewenstein (see Loewenstein, Newman, Schur, and Solnit 1966).

## **FREUD’S VIEW OF HUMAN NATURE**

In Freud’s view, human beings are beset by lustful and aggressive drives, confined by the superego and the demands of reality, reluctantly attempting to tame the drives and arrive at a compromise that would preserve as much drive satisfaction as possible. Only after years of childhood struggle do people shift reluctantly (as little as possible) from the pleasure principle to the reality principle. This shift is forced on them by the need to survive in civilization, leaving guilt and neurosis in its wake. Innumerable theoretical revisions and rereading’s of Freud have been offered in an attempt to get away from

this basically pessimistic view of human beings, but the dismal course of human history keeps dragging us back to it. Even massive social experiments in the so-called Marxist countries have totally failed to eliminate the prevalence of lust and aggression as barely checked forces governing the relationship of one person to another.

In *Beyond the Pleasure Principle*, Freud (1920) views human beings as driven to their own death and destruction, somehow kept alive by the brief flicker of libidinal energies in the direction of life. He emphasizes the great primacy of the drive toward death and destruction, and sees the life instincts as fighting only a delaying or holding action while the individual, the species, and all organic matter speed on toward their own destruction. It is a remarkable fact that the most current cosmological theories in modern physics now view slow proton-decay as the ultimate process that will eventually result in the disappearance of all matter, leaving only light in empty space (Crease and Mann 1984). In later writing and without argument or explanation, Freud gave equal value to the life and death instincts, but this was a gratuitous change and is not supported by any clinical evidence.

In his basic formulation Freud made it clear that the dominant force in biological organisms must be the death instinct (Meissner 1980).

## Overview of Klein 's Work

The controversial psychoanalyst Melanie Klein recognized the full consequences of Freud's theory. If Freud is correct, the human being's greatest and most serious problem lies in dealing with the "death instinct" that operates from the moment life is conceived. Klein recognized that, from birth, powerful innate aggressive drives posed fundamental obstacles to life. She understood and took seriously Freud's theory that, with the individual as with the species, there is a brief flicker of life and then ultimately extinction and destruction as the death instinct prevails and all organic matter returns to the inorganic form. She attempted to develop a metapsychology to explain that which Freud never made clear: how do the life instincts fight this delaying action? In Klein's view, this was accomplished by deflecting the death instincts outward in the form of aggression (as Freud said) and then attenuating this aggression through recurring cycles of projection and introjection of "good" and "bad" objects.



There is often a confusion in the literature between the views of Klein and those of Kohut on narcissism although Kohut takes great pains to distinguish his views from Klein (Kohut 1971, 1977, 1984). Klein's views—especially with modifications added later, for example, by Kernberg (see Chapter 5)—form an important alternative set of explanations for the phenomena of the narcissistic disorders. Furthermore, some critics of Kohut have insisted that his theoretical system is unnecessary because psychoanalytic ego psychology with the addition of object relations theory is a satisfactory explanation for all of the phenomena found in these narcissistic disorders; however even a brief review of Klein shows that there are just as many unresolved and controversial issues both in Kleinian theory and in later object relations theories (Greenberg and Mitchell 1983). I will concentrate mainly on what Freud thought of as the narcissistic disorders—psychoses, borderline cases, narcissistic personality disorders, some depressions, and some masochistic disorders—as they are explained by Klein.

There are five crucial concepts that form the basis of the system of Melanie Klein. First, she believed that stages of the Oedipus complex and superego formation exist in early infancy, which implies that the

infant has the capacity for some very complex perceptions, emotions, and mental integrations. Second, she postulated that the early postnatal operation of introjection and projection build the infant's inner fantasy world; introjection and projection are based on dealing with the death instinct as the initial problem of life.

Third, Klein postulated two critical "positions," a difficult term which is thought of differently than Freud's developmental phases (such as oral, anal, genital). The paranoid-schizoid position deals with ambivalence by splitting and projection and occurs during the first three or four months of life; it is characterized by persecutory fears and anxiety over survival. During this position the good breast produces a feeling of love when the infant is satisfied which is projected and experienced as the good breast loving the infant, who then internalizes this sense of being loved as a protection against the death instinct. The infant's oral sadism springing from the death instinct and the bad breast imagined when the infant is frustrated, produces hate. This is projected and experienced as the bad breast hating the infant. This bad breast is also internalized in order to control it. The basic implication is that the infant can feel supported or attacked from within itself. Furthermore, the hate and love can be

reprojected or re-introjected, so that if the hate is reprojected or re-introjected a vicious cycle of an increased sense of persecution from within or without is produced; if love is reprojected and re-introjected, it leads to a cycle of increased well-being, “trust and gratitude.”

Klein introduced confusion through the use of her term “part-object.” Kernberg (1980a) points out that she used this term in two ways. First, Klein meant to represent a partial anatomical aspect of a real person, such as the breast, which the infant perceives as if it were the object to which the infant is relating. The second sense—predominantly used by Kleinian authors—is explained by Kernberg:

As a result of splitting, part-objects constitute either part of persons or total persons perceived in a distorted, unrealistic way under the influence of the projection of pure libido or aggression, so that those objects are either all good or all bad. (p. 822)

The second half of the first year of life, according to Klein, is marked by the depressive position, emerging as self and object differentiation becomes possible in a cognitive sense. Splitting into part-objects is less present, and, as a consequence, anxiety occurs over the loss of good objects without and within, ushering in the depressive

position. This is a consequence of the capacity for internalizing whole objects, which Klein says begins in the second quarter of the first year of life. The infant fears that its own destructive greedy impulses will destroy the good breast, which is later expressed as the child's fear that the parent may die. The destructive impulses can destroy the good breast by appropriating it; this is sometimes distinguished from the destruction of the breast due to envy, which we will discuss later. At any rate, a state of sadness is ushered in and becomes the key hurdle in ordinary development. If it is too painful, a regression to the paranoid-schizoid position or a defensive swing to the manic state occurs, and the psychological groundwork is laid for the psychoses—schizophrenia, or the manic-depressive disorders.

The good and bad breast in the paranoid-schizoid position are forerunners of the benign and harsh superego. For Klein, the oedipal triangle begins in the oral stage, and there is an inborn knowledge of the genitals of both sexes. Thus, there is a long and complex prehistory before Freud's oedipal stage, involving combinations of parents, splitting, projections, and internalizations. There may be a premature advance into oedipal material due to the use of genital love mobilized against pregenital aggression.

The fourth set of concepts are introjective identification and projective identification. Introjective identification results from the introjection of the object. Projective identification is a hybrid concept which is used differently by every subsequent author. Klein introduced it as having two aspects, one intrapsychic and the other interpersonal. In projective identification there is a forceful aggressive evacuation in fantasy consisting of a penetration into the object and a reinternalization of the object that was injured, which may lead to depression, or a reinternalization of the object that was rendered hostile, which may lead to persecutory hypochondria. It is also a very primitive means of communication, and leads to a “beyond the countertransference” distress in the therapist, an interpersonal interaction (Money-Kryle 1974).

The fifth basic concept was introduced by Klein in her seventies as a major addition, and produced new storms of protest against what she assumed was possible in the mind of the infant. She believed that there was an early infantile form of envy, also based on the death instinct, which was aimed at the destruction and possession of the envied good breast (or in treatment, the imagined serene analyst) and that there was a constitutional variation in the amount of envy and

aggression present in each individual.

Thus, oral sadism is the first critical manifestation of the death instinct. Oral sadism varies with constitutional strength and is the key to understanding human development and pathology. It is first projected, resulting in persecutory fears and the fear of annihilation by the destructive devouring breast. Thus, the first source of anxiety arises when projected oral sadism threatens to destroy and invade the ego or self (again not carefully differentiated by Klein). Oral sadism also produces envy, which appears first; the breast is experienced as willfully withholding and there is a wish to scoop out, destroy, and possess it. Later derivations of envy are greed, which is a more sophisticated form of envy and arises from it, and jealousy, a later emotional development characteristic of triangular situations such as the oedipal conflicts. Here a third person is hated because that person preempts the desired love. It follows that constitutionally excessive aggression would foster a great deal of splitting and denial of reality in order to deal with these affects, and their associated fantasies, constituting envy, greed, and jealousy.

Conversely, the projection of “good” inner objects onto new

objects forms the basis of trust in later life. Gratitude comes from good experiences, decreases greed, and leads to a healthy generosity in contrast to what Klein calls “reactive generosity,” a defense against envy which eventually ends in feelings of being robbed.

## **Klein on Narcissism**

Klein defines narcissism as identification with the good object and the denial of any difference between one’s self and the good object. There is no “primary” narcissism (Greenberg and Mitchell 1983). This definition is used to explain the clinical phenomena of narcissism and should be distinguished from narcissistic internal structures and narcissistic object relationships which are based on projective identification. Segal (1980, pp. 120-121) calls attention to Klein’s differentiation between narcissistic states, which are states of identification with an internal ideal object and correspond to what Freud described as autoerotism, and the postulated complex narcissistic object relationships of the infant, which contain the internal fantasies of introjection and projection as described above. Each relationship is based primarily on an interaction between the individual and projected aspects of that same individual which the

individual experiences as belonging to another person. In addition to splitting, idealization also preserves “all good” internal and external objects; when this breaks down there appears the fear of destruction from within as well as destruction from without.

Splitting originally occurs into good objects which are introjected and bad ones which are projected, but a secondary splitting can take place when aggression is strong and there is a related predominance of bad objects. These bad objects are then further split into fragments and when these fragments are projected we get the multiple persecutors or the so-called “bizarre objects” described dramatically by Klein’s analysand and follower, Bion (1963, 1967).

Narcissistic internal structures and narcissistic object relationships arise in an effort to escape persecutory fears by an excessive dependence on an idealized object and by the use of others to confirm one’s grandiosity. The idealization of external objects in the paranoid-schizoid position is marked by fantasies of unlimited gratification from these objects, which protects the individual against frustration, denies any need for aggression, and protects the individual against persecutory fears from the objects.



The idealization of internal objects in the depressive position protects the individual against unbearable reality. The denial of internal and external reality represents the denial of aggression and is a form of hallucinatory wish fulfillment at the cost of reality testing. The aggression of both the bad inner and outer objects is denied.

Stifling and artificiality of the emotions may protect one from aggression and persecutory anxiety, and represent a form of pathological consolidation in the paranoid-schizoid position. For Klein, projective identification is an acting-out of primitive sadism. Fear of internal aggression based on the death instinct is at the core of all of these mechanisms.

For example, sexual promiscuity or sexual conquests, seen commonly in the narcissistic disorders, may represent the turning from one idealized object to another in a desperate attempt to escape imagined inner and outer persecutors. Hypochondriasis is explained as the projection of persecutory bad objects to parts of one's own body; the fear of poisoning and of pathological control from the outside is based on a combination of persecutory paranoid and hypochondriacal fears.

## Klein on Depression and Idealization

In the depressive position the fear shifts from that of a persecutory fear to one of harming the good internal object, and idealization is used here to protect against aggression towards the good internal object. Depressive anxiety or guilt about the survival of good inner and outer objects are critical, so the object is idealized in the depressive position to protect against aggression to it and to remove guilt over this aggression. In contrast to Kohut, idealization is used in both of Klein's basic positions as a defense against sadism and destruction in fantasy (Segal 1974, 1980). Internalized bad objects are no longer projected in the depressive position nor are they re-introjected because now the total object is experienced and, therefore, the internal bad objects remain, forming the roots of the primitive superego which attacks the ego or self with guilt feelings. Good internal objects attenuate this attack.

The standards set by or the demands coming from the idealized good internal objects become, when combined with sadistic superego precursors, cruel demands for perfection leading to an unremitting harshness of the superego. This is complicated in cases where there is

much sadism from the need to protect the good objects in the superego by excessive idealization so the standards of the superego become extremely high.

In Klein's theories mania represents a triumph in fantasy over the loss of the object, the basic fear of the depressive position. Mania is characterized by omnipotence, which represents a denial of need for the object and of any attacks on it; an identification with a sadistic superego in which external objects are depreciated with contempt or devaluation by projection of bad parts; object hunger—life is a feast so who cares if a few are eaten; triumph over a dead and dying universe of depression; or even an exaltation in which there is extreme idealization and identification with idealized internal and external objects leading to messianic states. In patients with manic and depressive symptoms no secure good internal object has been established. The various mechanisms described are all used to preserve the shaky, good internal object and protect it from destruction by aggression of bad internalized objects. There is a consequent failure to work through or resolve the depressive position.

When the depressive position is not worked through, there is a

reprojection of the sadistic superego in order to deflect intolerable guilt outside, which in turn requires a regression to the paranoid-schizoid position. This, however, reinforces persecutory anxiety and leads to the greedy absorption of supplies as a protection against the dangers of threatening external attack.

All of this may be prematurely sexualized as an attempt to deny pregenital sadism through genital love. The longing for the good breast out of displaced oral dependency may be experienced as the longing for the father's penis and lead to homosexuality in males and hysteria in females. The bad breast out of displaced aggression may be experienced as the fear of the bad destructive penis. Similarly, the primal scene receives the projection of oral sadism characterized by the devouring phallic mother with the "vagina dentata," and the sadistic father. Due to this projection, an imagined sadistic father interferes with normal oedipal identification in males and the imagined devouring phallic mother interferes with normal oedipal identification in females, due to an increased fear of retaliation over oedipal aggressive competition. According to Klein, penis envy is derived from oral envy and is therefore not a critical feature of female sexuality. Conversely, sexual inhibition arises from defenses against

sadistic impulses that are infiltrating sexual urges. Klein conceptualizes oral drives and oral conflicts as fueling and infiltrating oedipal developments everywhere.

## Criticism of Klein's Theories

There are some questionable assumptions in Klein's theory. First, she demands too much from the infantile psyche. Examples of this appear in her notion that envy is one of the earliest infantile expressions of the inborn death instinct, an expression requiring considerable cognitive skill on the part of the infant. Even more complex mentation would have to be postulated for her claim that the infant is born with an innate knowledge of the genitals of both sexes as well as postulated for her claim that the infant has the capacity to experience an Oedipus complex in the first year of life. A similar objection has been raised to Kohut's postulation of the grandiose self and the idealized parent imago as intermediate narcissistic formations appearing before the age of 4. This, however, is a relatively minor assumption as compared to the extraordinary complex capacities assumed by Klein to be present in the mind of an infant.

Second, a powerful new movement in psychoanalysis actually arose from authors like Fairbairn and other neo-Kleinians, who pointed out the extraordinary neglect of environmental factors in her explanations of the development of psychopathology. Klein's baby, endowed with its constitutional share of aggression, reacts immediately to its early circumstances and then goes off in its own direction in fantasy with little further attention paid to environmental factors. Most of Klein's followers have recognized these deficiencies.

Third, there is a neglect of differences in adult clinical psychopathology in Klein's explanations. Interpretations involving primitive fantasies and defenses in the paranoid-schizoid and depressive position are used in treatments of all forms of pathology and are found in material from all levels of development. This has been criticized severely by a number of psychoanalytic authors (Kernberg 1980).

Most pertinent to a discussion of Kohut's work is the disagreement between Klein and her followers—who view adult narcissistic idealization and grandiosity as defenses against unconscious aggression—and Kohut, who views adult narcissistic

idealization and grandiosity as based on developmental arrest and as originally representing, although not, as some critics misunderstand, identical with, a normal stage of development. Klein makes early oral sadism critical to an understanding of the appearance of idealization and grandiosity. Kohut views early oral sadism as a breakdown product of the self due to disappointment over failures in maternal empathy and not at all as the expression of any inborn death instinct, aggressive drive, or other “instinct.” This is a profound and irreconcilable disagreement between the psychology of the self and all Kleinians and neo-Kleinians.

The role and origin of aggression and its transformations in both normal and pathological development remains an area of major controversy; furthermore, there is no reason to rule out the possibility that a new theory may at some future date provide an explanation of the vicissitudes and origins of aggression in a way more satisfactory and more acceptable to all psychoanalysts.

Melanie Klein postulated the existence of a functional ego from birth, and she insisted that the first phase of life was already based on a form of narcissistic object relationship with the mother, eliminating

the autoerotic phase postulated by Freud. Thus, she acknowledged environmental influence but stressed the constitutional aspects of aggression. Klein disagreed with Freud, because she believed that even normal mourning always implied guilt since it reactivated the guilt of the depressive position. She also felt that normal mourning could reinforce the solution of the depressive position by causing a fresh working through and resolution of that position.

## **Kleinians on Narcissism**

Rosenfeld (1964, 1971) paid special attention to the subject of narcissism from a Kleinian standpoint. Segal (1983) points out that Klein gave us conceptual and technical tools to understand narcissism but says very little about it herself. Klein, as explained above, distinguished between temporary narcissistic states involving withdrawal to an identification with idealized internal objects and “narcissistic structures,” a more long-standing organization involving projective identification to control objects and re-introjection of them in a way that affects the structure of the ego and the superego (Spillius 1983). She did not expand on this nor did she make an explicit connection between envy and narcissism although it is implicit in her



book *Envy and Gratitude* (1975) that she thought of narcissism as a defense against envy. Segal (1983) stresses that narcissism is an expression of the death instinct as well as a defense against it, and proceeds to give clinical illustrations.

Rosenfeld (1971), like Segal, regards all but the most temporary states of narcissism as basically destructive and suffused with death instinct and not to be confused with self-respect and caring for one's self. He describes his concept of "destructive narcissism" as an organization based on idealization of the bad self, which triumphs in seducing the good self and defeating the analyst. Narcissism is experienced as the need to deny any dependency on an external object, because such dependency would imply the need for a loved and potentially frustrating object that is also intensely hated, with hatred taking the form of extreme idealization of the good object. Narcissistic object relations permit the avoidance of aggressive feelings caused by frustration and the awareness of envy. Rosenfeld says the narcissistic individual has introjected an "all good" primitive part-object or projected an idealized "all good" object into someone with the basic aim of denying any difference with or separation from the object; the individual with narcissistic object relations is allowed to avoid any

recognition of separateness between self and object.

This should not be confused with Kohut's conception of the self-object. For the Kleinians, the lack of recognition of separateness between self and object is a powerful defense based on complicated introjective and projective mechanisms. If this defense is broken down, the separateness between self and object reappears with all the hatred and envy attached to the separate object of one's dependency strivings. In Kohut's theory, the notion of self-object represents a primary experience and is normal at a certain phase of development. By the way of contrast, Rosenfeld (1964) says:

The rigid preservation of the ideal self-image blocks any progress in the analysis of narcissistic patients, because it is felt to be endangered by any insight and contact with psychic reality. The ideal self-image of the narcissistic patient may be thought of as a highly pathological structure based on the patient's omnipotence and denial of reality, (p. 336)

This quotation is an excellent point against which to measure the theories of development and of treatment of Klein and the object-relations theorists on the one hand, and Kohut on the other. The development and function of the "ideal self-image," as Rosenfeld calls

it, is viewed entirely differently by these two groups of theorists, in basically irreconcilable theoretical and clinical approaches.

One could conceive of a reaction to losses, whether wounds to one's self-esteem or the loss of objects upon whom one was dependent, in terms of Klein's basic premise that the depressive position is never worked through and therefore any loss will reawaken the problems of this position. If there is a relatively secure internalized good object, adult depression can lead to the working through of the depressive position with ego enrichment and creativity. If not, we see instead a regression to the paranoid-schizoid position with persecutory anxiety and dread. This would be a Kleinian type of explanation for the common phenomena in which narcissistic wounds are seen to produce at first a depressed state which then may be followed by an overcoming of that state in creativity and renewed efforts or a disintegration of the individual with the appearance of paranoid manifestations and hypochondriacal anxieties (Segal 1974).

Yet Segal's (1974, p. 119) postscript on technique, describing the relatively calm analyst as unaltered by the patient's projections and interpreting to the patient what is going on relatively free of

countertransference, has a certain similarity to Kohut's description of the calm, well-trained craftsman (Kohut 1968, 1971), explaining to the narcissistic patient the empathically perceived experience of the narcissistic wound involved when the session is over and the patient must leave the office. The nature of the explanations involved, however, and the concept of cure in the two theories are totally different (Kohut 1984).

According to Klein, at every phase of life the battle has to be waged anew, for with each loss the individual must avoid regression to the paranoid-schizoid position or the development of a manic defense; if the battle is waged successfully there will be further growth in the personality (Segal 1980). For Kohut the "battle" is not as vague. In an ambience of empathy and interpretation, the minor narcissistic wounds lead to new growth by transmuting internalizations; no early complex "positions" are postulated.

Spillius (1983) mentions the work of Bick who published some of her ideas in a brief paper on the skin as container (Bick 1968). According to Spillius, Bick presented the idea that the death instinct is experienced by the infant as falling apart, falling endlessly into space,

or as the liquefying and pouring out uncontrollably of one's insides.

Spillius writes:

She thinks the response to this anxiety is a desperate use of all the senses to hold the self together—focusing on bright objects, on sounds, on being held, on the feeling of the nipple in the mouth; later on some form of activity and movement may serve this function of holding the self together. (p. 324)

There is a remarkable overlap here with Kohut in the language used to describe the fragmentation of the self and the attempt to prevent this catastrophe, but there is also a total difference in theoretical conceptualizations and in postulations regarding ego capacities in infants.

James (1973) insists that Kleinians have always been interested in the same kind of narcissistic phenomena that are studied by Kohut, but they have not acknowledged this interest. James cleverly spots what he calls the “nervousness” of Kohut at “seeming to subscribe to too many mental institutions in the first year” (p. 366), which would then leave Kohut open to the same criticisms leveled at Klein.

He emphasizes the similarities rather than the differences

between the two theories. The views of Kohut and Klein are based on essentially conflicting and irreconcilable postulates and premises, and it would be even harder to reconcile them than it would be to reconcile the views of Melanie Klein and Anna Freud.

These three sets of explanations: the Kleinian, those of Freud and the ego psychologists, and the psychology of the self, represent alternative theoretical systems for the understanding of narcissistic phenomena. Whether they are “complementary” or irreconcilable has become today as much a political question within the psychoanalytic movement as a theoretical question.

In an effort to make Kleinian theory more consistent with the ego psychology school and more compatible with the tastes of North American psychoanalysts, Kernberg has produced an important revision of Kleinian theory which is still consistent with at least some of its principles. In so doing he has developed the major current popular alternative to the psychology of the self, known as modern object relations theory, which we turn to in the next chapter. Selecting from among Klein’s major concepts and deciding which to accept requires further assumptions and postulates.

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