

CHAPTER FOUR

The Genesis of Narcissism

In The Metamorphoses, the Roman poet Ovid tells the story of a handsome youth named Narcissus, a tale he learned from Greek mythology. Narcissus is so intent on his own desires that he is unable to fall in love, rejecting the advances of all who are attracted to him. Never having seen his own image, he understands the power of his beauty only through the reactions others have to him. When he rebuffs the love of Echo, a nymph, her unrequited passion causes her to waste away and die. When one of Echo's handmaidens prays to Nemesis, the goddess of revenge, Nemesis responds by declaring that Narcissus shall get a taste of his own medicine: If he should ever fall in love, he will be denied the very thing he so desires.

One day, while stopping to drink from a forest pool, Narcissus catches a glimpse of his reflection in the smooth water. Smitten by the sight, he falls madly in love with his own beautiful image. He lies next to the pond, staring at his own reflection in the water. But whenever he reaches into the water and tries to embrace the image, it dissolves. Unable to kiss, or hold, or in any way capture his true heart's desire, he too dies of unrequited love.



Most people assume that the Narcissus myth is a cautionary tale about the dangers of falling in love with oneself. In common parlance, *narcissism* is often used as a synonym for egomania or excessive self-regard. In psychological terms, however, egotism and

narcissism can be very different things. Egotists are preoccupied with themselves to an extreme degree. Their self-importance is unshakeable, so much so that it generally allows them to disregard reality.

Narcissism, on the other hand, springs from an opposite relationship with the self: not self-involvement, but a *disconnection* with oneself. The key to understanding the Narcissus myth is not that he fell in love with himself, but that he failed to recognize himself in his own reflection. In other words, true narcissists are not self-aware. A real narcissist is dissociated from his or her true self; he feels haunted by chronic feelings of loneliness, emptiness, and self-loathing and seeks to replace that disconnection with a sense of worth and importance fueled by others. Narcissism is also marked by a profound lack of empathy, a fundamental inability to understand and connect with the feelings of others. Taken together, these are the traits psychologists measure in diagnosing what's known as *narcissistic personality disorder* (NPD).

These traits—the profound lack of self-knowledge and the inability to experience an empathetic connection with others—force narcissistic individuals to fixate on the reactions of others in order to shore up their own sense of self. For the narcissist, the whole world is a mirror; life is spent in constant pursuit of a gratifying reflection, a beautiful self-image to help stave off feelings of internal emptiness. The modern narcissist seeks those reflections in the pages of glossy magazines, and on the screens of their TVs and computers. The celebrity-media looking glass responds with images of a privileged life where the participants are beautiful, charismatic, powerful, and free to act as they choose. The mirror of celebrity reinforces every narcissist's belief that a world of constant admiring attention is possible: All you need to do is act sexy, play the diva, demand privileges, and party with abandon.



For some people these roles come more easily than for others. Every individual's personality combines many traits. Some people are shy, others gregarious; some are stingy, others generous; some even-tempered, others volatile. Our personality traits are formed in early childhood, persist throughout life, and affect every aspect of our day-to-day behavior. Yet most people are able to adjust the influence of these traits based on specific situations. Very shy people learn to overcome their self-consciousness, for example, in order to function in social situations. Stingy people may be moved to donate money to a cause they deem worthy. People with hot tempers moderate them in the workplace.

Narcissism is a particular constellation of personality traits. The seven traits classically associated with narcissism are: authority, entitlement, exhibitionism, exploitativeness, self-sufficiency, superiority, and vanity. A diagnosis of narcissism is not a black-and-white matter; rather, it's a matter of degree. People at the psychologically healthy end of the narcissism continuum exhibit these traits in normal, moderated levels. People at the other end manifest their narcissistic traits in such extreme ways that they demonstrate the pathologies of narcissistic personality disorder. In between lies a spectrum of infinite gradation.

All healthy individuals exhibit narcissistic traits throughout their lives, and the traits of narcissism can affect our personality in positive ways. For example, people who have high levels of authority and self-sufficiency may be highly motivated and exhibit strong self-confidence. They may be charismatic, compelling, and persuasive in convincing people to listen to their ideas. Other narcissistic traits are simply part of life: It's realistic to feel entitled once in a while, for instance, or to expect accolades on a job well done, or to

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enjoy a degree of exhibitionism, or even to feel superior to others in certain ways. However, people with healthy levels of narcissism are also able to step outside their own perspective long enough to assess how their behavior may be affecting others around them. This ability to avoid becoming stuck in narcissistic mode, and to consider the impact of your actions on the feelings of others, is one of the key distinctions between healthy and extreme levels of narcissism.

In my work as a doctor, for instance, I must be authoritative and, to a degree, self-sufficient. It requires authority and conviction to make diagnoses and recommend treatment. Particularly when working with addicts, I have had to learn to trust my gut when assessing their total condition. However, I also need to be able to listen to my patients, to know when to ask for another opinion, to admit if something particular concerns me. There's no question that patients would suffer if their doctors were unable to moderate the narcissistic side of their personalities. In fact, what my patients need most from me is to balance that self-sufficiency with a deep empathic appreciation of their troubling experiences.

In contrast, people who have an overtly narcissistic personality style—that is, those who exhibit heightened levels of narcissistic traits—can be obnoxious or overbearing in their interactions with others. Unhealthy narcissism can generally be traced to a childhood disruption in emotional and moral development. A common indicator of unhealthy, or problematic, narcissism is when a person is unable to accept or genuinely feel good about praise from others. For a true narcissist, simple praise does not even begin to fill the bottomless pit of emptiness and the longing he or she constantly experiences.



We are all born narcissists. As infants, we are fixated completely on survival, turning our focus inward on our own needs, while relying on the abilities of others to meet them. A baby is purely, wholly connected to his truest self. He is completely preoccupied with addressing fundamental drives, such as satisfying his hunger, learning how to control the movement of his limbs, or dealing with the discomfort of a wet diaper.

At first, infants are unable to identify their own primary emotions, such as disgust, rage, or satisfaction. Until these emotions, both pleasant and unpleasant, are recognized, they cannot be understood or regulated. According to Dr. Peter Fonagy, a specialist in early attachment theory, this process begins at roughly six months, when an infant's attention shifts slightly to focus on things beyond his body boundaries. When an infant begins to recognize his own nascent emotions through interaction with his caretakers, he begins to develop primitive mechanisms for emotional regulation. Dr. Fonagy calls this mechanism *mentalization*, the process of creating a mentalized representation of one's emotions.

Research has helped us understand how infants develop attachments to their mothers, fathers, and even other caregivers, but it also tells us that each of these attachments is independent and differs in quality. Children need to form what are known as *secure attachments* in order to thrive emotionally. A secure attachment is a relationship in which a child desires contact with a caregiver, viewing himself as basically good and loveable and the caregiver as trustworthy and responsive. A child who is securely attached feels protected, and thus feels comfortable and willing to venture out and explore his world. Secure attachment is also an important component of emotional regulation. As children grow older, relationships with friends, and later, romantic partners, assume the

importance of their early relationships to mothers, fathers, and caregivers. The quality of these early attachments is thus believed to provide the emotional template for future adult relationships.

Dr. Fonagy's research confirms that a young child's relationships, particularly with his mother, play a key role in teaching the child how to study the outside world, and other people, in order to learn to place his emotions in context. And the adult's behavior in this relationship is critical. As child psychiatrist Donald Winnicott notes, in a healthy relationship "the mother 'looks like' what she sees" in her child; that is, she mirrors his behavior back in her own. Picture a mother studying her crying child and responding with an exaggerated frown of her own, even reinforcing what she sees by saying "You're very unhappy." The mother may not be feeling unhappy herself—indeed, it's important for her not to confuse the child's emotions with her own—but by imitating her child's expressions she literally signals that she appreciates his emotional state. The mother then underscores this message by offering appropriate interaction: holding or stroking a crying child, feeding one who is hungry, interacting playfully with one who is smiling.

As the child learns to interpret the expressions on his mother's face in the context of his emotional state, he begins to take the important developmental step of identifying his own feelings. Two important emotional processes are at work here: the ability to *regulate* one's own emotions by identifying and understanding them, and the ability to *connect* with others in a way that soothes or pleasurablely enhances these emotions. Gradually, with ongoing appropriate responses from a parent, a healthy child gains the ability to identify, manage, and exchange emotions.

One developmental theory, known as mirror self-recognition, posits that a child's ability to recognize his image in a mirror implies an awareness of self, an ability to monitor one's own thoughts

and feelings, and a capacity to use that knowledge to understand the thoughts and feelings of others. This is the key to the evolution of empathy—the ability to appreciate the thoughts and feelings of others, as filtered through our own personal experiences. As empathy evolves, a child’s grandiose feeling that he is the center of the universe begins to diminish, and his conscious recognition and appreciation of others begins.



When this early, primary form of emotional interaction malfunctions, however, the result is problematic, even traumatic. Children in such circumstances tend to misinterpret or disregard feelings, suffer from an inability to connect with others, and find it difficult to regulate their emotions. Such children often come to depend on *dissociation*—a state of complete disconnection from feeling, almost like an out-of-body experience—as a primary means of emotional regulation. Rather than feel too intensely, they feel nothing at all.

When humans face danger or trauma, our central nervous systems respond in a characteristic way. When our instinctive fight-or-flight response is thwarted, the body switches from a state of hyperexcitation to a state of hyperinhibition. The brain is bathed in chemicals that cause it to shut down in preparation for imminent assault: Blood centralizes, heart rate slows, and the individual may literally feel he or she is watching the experience from afar, as a third person.

If this primitive adaptive strategy is triggered early in childhood by traumatic experiences it can be emotionally shattering. If experienced repeatedly, it can actually block the brain’s growth. The interconnections between the emotional centers of the brain and their capacity to communicate with each other become markedly reduced.

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It is this kind of emotional retardation that lays the foundation for the development of narcissistic personality disorder.

Unfortunately, it's easier than you may think to short-circuit this delicate developmental process. This can happen when a mother is unavailable for this critical two-way interaction with her child for some reason, because she is depressed, for example, or overly absorbed with work, or abusing drugs or alcohol. Her own traumatic experiences may cause her to misidentify her child's primary emotions and neglect to mirror them appropriately. As a result, her child will be unable to connect to his or her own feelings, experiencing them only to a weak degree, or not at all. If a child cannot comprehend his own emotions, he will be unable to attain the next emotional milestone of empathetically understanding the feelings of others.

Neglect isn't the only factor that can prevent a child from developing a sense of his own emotional landscape. If a parent is overly involved in *participating* in the child's feelings, rather than reflecting them, rushing in to rescue a child from an unpleasant feeling before he has been able to identify it, for instance, or catching the child's emotions and becoming equally overwhelmed by them, the child can fail to develop regulatory control of his emotions. In the first case, the child gets the message that he cannot manage his feelings without being rescued by his mother. In the second, he learns that every time he has a feeling, it creates a scary or negative reaction in others. In both cases, he learns that his feelings don't really exist within his own body boundaries. They exist *out there*, in the responses of others.



This use of physical expression as a means of tuning in to the feelings of others is called *intersubjectivity*. This interpersonal exchange

depends on both people involved being able to appreciate each other's feelings through emotional connection, and on each individual's capacity to trust the other. It is this form of communication, also referred to as a *cocreated experience*, that allows humans to understand one another intimately at many levels and to trust the creation of a relationship.

As a child grows older and begins to explore the world, he begins to appreciate that there is a difference between himself and his mother, while still maintaining a narcissistic expectation of an idealized union with her. Even as the child tests his autonomy and independence, he will return to the mother for emotional refueling. As his emotional development continues (until around the age of twelve), the mother continues to play a critical role in shaping his behavior and his capacity for healthy social functioning. During these years, the child shifts from an idealized sense of omnipotence—*I control those around me and they will meet my needs without question*—to a more realistic appraisal of self, and an ability to appreciate the existence of others and the importance of their emotional landscape.

When trauma occurs to a child under the age of twelve, it triggers a characteristic—and normal—thought process. The child will first believe that he has somehow invited the traumatic actions; that they are all his fault. This grandiose thought becomes fixed in his mind, resulting in a deep sense of shame. One of the most confusing aspects of the typical response to trauma is that it results in an unconscious urge to seek out reenactment of the traumatizing event. This is why young girls who have been abused by men will seek out relationships with abusive men throughout their lives. Teenage girls who call in to *Loveline* to complain that they never have relationships with “nice guys” will usually admit with little prompting that they were abused as children. This type of uncon-

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sciously damaging behavior is called *repetition compulsion*, and it helps to explain why narcissists so often become caught up in perpetual cycles of certain kinds of acting out.

In healthy development, the child learns to tolerate feelings of shame when his behavior conflicts with his idealized mother's expectations. By allowing their children to experience such feelings, then offering opportunities for repair and reunion, parents teach their children to trust in the all-important interpersonal exchange. If the child experiences feelings of shame, but is not allowed a chance for rapprochement, he will come to expect further shame, exploitation, or abuse. When this occurs, the child withdraws from closeness, shutting himself off from the very experiences he needs for emotional nourishment and development, and falling back on the primitive emotional strategies discussed above. Over time, the child becomes convinced that his or her own feelings don't matter. Just as critically, he also comes to believe that other people's feelings especially don't matter.

The belief that one's feelings don't exist, except as interpreted and expressed by others; the inability to trust others or engage in intersubjective experiences; and the perception that feelings don't matter—all these effectively prevent a child's genuine self from properly developing, much less flourishing. That dysfunction, the lack of a sense of self, is the hallmark of narcissistic personality disorder.



When the narcissistic character traits described here become very rigid and self-defeating, they can interfere with an individual's personal and social functioning throughout adulthood, and can even lead to psychiatric symptoms. The American Psychological Association (APA) defines personality disorder as "an enduring pattern

of inner experience and behavior that deviates markedly from the expectations of the culture of the individual who exhibits it.”

Narcissism falls in with the types of personality disorders classed together in three main groups, or clusters. Cluster A disorders include odd or eccentric behavior, and include paranoid personality, schizoid personality, and schizotypal personality. Cluster B includes narcissistic personality disorder (NPD) as well as histrionic, antisocial, and borderline disorders. Cluster C consists of anxious or inhibited behaviors and includes dependent or obsessive compulsive disorders.

People with Cluster B disorders manifest narcissistic traits and feel very disconnected from their genuine feelings. They crave attention, and often fall back on highly dramatic or erratic behaviors to attract it. Unable to accept real-world demands and limitations, they show a disregard for social norms and laws, along with a lack of remorse for any transgressions. They often suffer from dysfunctional interpersonal relationships, addictions, and other emotional, physical, or psychological impairments. Other traits include an unstable self-image, extreme anger or aggression, suicidal feelings, and chronic feelings of emptiness. They have highly evolved strategies for manipulating their environment to satisfy their individual needs. Perhaps the most distinguishing feature, however, is their chronic empathic failure.

Pathological narcissism, that is, narcissism that can be definitively diagnosed and treated as a personality disorder, is relatively rare. The *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR)*, used by mental health professionals to diagnose disorders, maintains that 2 to 16 percent of the population currently in treatment, and less than 1 percent of the general population, suffer from narcissistic personality disorder. Many professionals believe that this is a drastic underestimate. High levels of narcissistic traits

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and behaviors associated with Cluster B disorders are clearly common in our culture. In fact, some research suggests that as much as 5.3 percent of the population, or over 16 million people, show signs of NPD.

Narcissistic personality disorder must be diagnosed by a properly trained mental health professional (such as a psychiatrist, psychologist, or licensed social worker) through a process of personal interviews, observations, psychological tests, and interviews with significant others. The diagnosis can be made when an individual meets at least five of the following nine characteristics.

1. A grandiose sense of self-importance. A person with NPD exaggerates his achievements and talents, and expects to be recognized as superior without the qualities to support that conclusion.
2. A preoccupation with fantasies of unlimited success, power, brilliance, beauty, or ideal love.
3. A sense of specialness, a belief that he is so unique that he can only be understood by, or should only associate with, other special or high-status individuals or institutions.
4. A need for excessive admiration.
5. A heightened sense of entitlement, leading to unreasonable expectations that others should treat him especially favorably, or comply automatically with his expectations.
6. A tendency to be interpersonally exploitative. A person with NPD does not hesitate in taking advantage of others to meet his or her own ends.

7. A lack of empathy, an inability or unwillingness to recognize or identify with the feelings or needs of others.
8. An envy of other people, or, conversely, a belief that other people envy him.
9. A tendency toward arrogant behavior or attitude.

One reason it's difficult to diagnose NPD is that the various Cluster B personality disorders all share certain characteristics, among them grandiosity, lack of empathy, exploitative interpersonal relations, and a need to be seen as special or unique. Instead, specialists typically distinguish NPD from borderline, antisocial, and histrionic disorders by the *absence* of certain behaviors. Narcissists are rarely inclined to hurt themselves, for instance, whereas individuals with borderline personality disorder are prone to self-injury and attempted suicide. Narcissists avoid intimacy, while people with histrionic or borderline disorders exhibit intense desires for relationships. Narcissists rarely commit violent crimes, but individuals with antisocial personality disorder or psychopathy have no remorse over using physical violence.

Despite the low numbers of individuals who are diagnosed with narcissistic personality disorder, there has been an obvious increase in narcissistic and other Cluster B styles of behavior. I have witnessed the growth personally in my own medical career, but you don't have to be a doctor to see evidence of the trend everywhere in our culture. As we've seen, one night watching reality TV, flipping through the tabloids, or surfing the Internet would be bound to turn up many instances of behavior that fits most of the criteria above. And NPD isn't confined to the ranks of celebrity: Any of the talk shows that feature average people in crisis—*Dr. Phil*,

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The Tyra Banks Show, Maury, Jerry Springer, even Judge Judy or Divorce Court—would doubtless leave you with a similar impression of the general population. I can't help but conclude that there are many more individuals suffering from unhealthy levels of narcissism than there are patients diagnosed with narcissism as a psychological disorder.

Another reason NPD can be difficult to diagnose is that narcissism, even at NPD levels, doesn't stop people from attaining positions of power, wealth, or prestige. Narcissists often develop attractive or persuasive social skills to help them maintain the persona they have constructed to get what they want from the world. High-functioning narcissists are often well liked by casual friends and colleagues who never get close enough to detect the emptiness beneath the veneer of success. Furthermore, narcissists rarely have qualms about lying in order to maintain their carefully constructed image, making it harder for a therapist to recognize where the patient's version of events leaves off and the real story begins. Finally, diagnosis can be challenging simply because it's extraordinarily difficult to convince a narcissist that he needs psychological help. Any challenge to a narcissist's unrealistic self-image is likely to provoke rage, disdain, denial, or other protective behaviors, as the individual struggles to protect the pseudo-self at all costs.



Because narcissists feel empty and alone, they require constant reinforcement from the world around them to inform and inflate their sense of self. Because their sense of true self is so flimsy, narcissists are masters at creating ways of getting what they *do* need to exist: positive feedback and stroking from others. This is just one of the reasons that celebrity and narcissism go hand in hand: Nar-

cissists crave the constant validation of an audience, and the job of the contemporary celebrity is to court his audience, 24/7.

One of the most obvious examples of this dynamic is the relationship between director and actor on any film or television set. We all know the stereotype of the actor who must be handled with kid gloves, and that image exists for a reason: A narcissistic actor may not even be consciously aware that he's behaving in certain ways in order to evoke a steady stream of encouraging feedback, but their needs are usually obvious to those around them. Actress Julia Ormond, who has worked on stage and screen for more than two decades, has noticed this behavior: "Actors who move me, or whom I respect from a craft point of view—their level of self-esteem and their level of confidence really needs to be nurtured by those around them, because it can be crushed in a second. It's like a small flame that burns inside them and any director can walk up to them [blows] and *poof*. It's really very hard to bring it back." When an actor storms off the set, or refuses to deal with a certain director, or quits a project outright, he's acting out his narcissistic defenses, protecting himself against criticism that might trigger his insecurities and threaten his fragile sense of real self.

To protect his flimsy self-esteem, and avoid the pain of the inadequacies he constantly feels, the narcissist creates a pseudo-self, an idealized version of himself, and consciously or unconsciously projects it out to others to prime that continual stream of admiration and desire. As long as the pseudo-self remains firmly in place, the narcissist can continue to believe he's in control and capable of getting what he wants from others without exposing any real needs or vulnerabilities.

Narcissists rarely feel ashamed of their behavior. In fact, they have a remarkable ability to avoid shame. Narcissists don't perceive themselves as vain, or entitled, or exploitative, so they're un-

likely to worry that someone else will see them that way. What *is* stressful to a narcissist is when the pseudo-self slips to expose his or her real self, the one they feel is inadequate, that they're desperate to keep under wraps. This scenario is intolerable to a narcissist, and since they have no healthy internal mechanisms to help them process these overwhelming and painful feelings, they direct the shame outward. When a narcissistic person feels threatened, he tends to fall back on the primitive coping strategies of childhood: dissociation, aggression, and reversion to other immature behaviors such as lying, distorting, projecting, or extreme rationalizing.

We'll look at the Britney Spears saga in more detail later, but for now consider just one thread of the story: Soon after the birth of her first son, Sean, Britney began attracting criticism for her parenting. First, she was photographed driving with her infant son on her lap instead of in a car seat. Then, child welfare officials visited her home after Sean was injured in an incident involving his high chair. Many parents take such careless risks with their children, of course, and many kids are injured in freak accidents. When such things happen, most parents face their errors in judgment, realize the dangers involved, adjust their behavior, and make amends if needed.

When the press implied that Britney was a bad mother, her defensive reaction was that of a textbook narcissist. In an interview with Matt Lauer that aired on both the *Today* show and the evening news magazine *Dateline*, she called motherhood "amazing," and denied being anything less than an ideal mother: "I know I'm a good mom." She blamed the media for putting her in a situation that allowed her mothering skills to be called into question: "I can't go anywhere without someone judging me." She rationalized putting her child in a dangerous situation: "I did [the same thing] with my dad. I'd sit on his lap and I'd drive. We're country."

The same can be said for Joe Francis, the controversial founder of the *Girls Gone Wild* media empire, who constantly reverts to classic narcissistic defenses to maintain his pseudo-self as a successful multimillionaire businessman. When he's accused of exploiting inebriated young women by filming them naked in compromising situations, he insists that they enjoy it, that they're choosing to participate in a cultural phenomenon, a twenty-first century rite of passage. Felony tax evasion charges? Not his fault; the accountant never showed him the documents. Sued for collection of massive gambling debts? He's not to blame; the casino deceived him. Press coverage criticizing his treatment of women? Nonsense. He's a rich successful man; what woman wouldn't want him?

Defend, deny, blame, rationalize—using every mechanism they can, narcissists will consistently reject reality. From their distorted point of view, the real world is the problem, not them. There is no need to behave in any way that might acknowledge any imperfection. Britney considers anything short of portraying herself as a perfect mother unacceptable. Joe Francis can't understand why everyone is always picking on him. In their worlds, it's inconceivable that they might be part of the problem. In their minds, if we'd all just adjust our ideas of parenting, or realize that it's a wonderful and normal thing for beautiful (and often inebriated) college students to strip and simulate sex for video crews, we'd see that we, not they, were wrong all along.



One of the defining characteristics of the narcissist is a lack of *empathy*, the ability or willingness to recognize, perceive, and relate to the emotions of another person, to experience the world from another's point of view. People who are empathetic reach out; they

offer sympathy, ask about feelings, and validate what others feel. For the narcissist, the sole purpose of being around other people is to support his exaggerated pseudo-self with a constant stream of admiration. A narcissist will value a friend so long as that person provides validation. When narcissists feel they're not getting sufficiently supportive feedback, they're prone to lash out at, or simply drop, their offending friends with no regard for their feelings or how important the relationship may have been.

An empathetic nature does not suddenly evolve. Rather, empathy develops over time, reinforced constantly by positive experiences of emotional attunement with others. When a child's emotional interactions are traumatic, however, his emotional development is arrested and his capacity for empathetic response is impeded. Because narcissists are unable to access their own feelings, it is difficult for them to relate to the emotions of others. If you choose to share intimate feelings with a narcissist, and for whatever self-involved reason he or she decides to listen, your emotional outpouring is likely to elicit one of two responses: denial (*What's the matter with you? Nothing's wrong!*) or dismissal (*Toughen up and get over it!*).

The behavior of one of television's biggest self-help experts suggests a striking inability to feel empathy. Dr. Phil McGraw has attracted fame and a huge following for his "tough-love" brand of pop psychology. The people who appear on his show often have serious problems, but his frequently impatient demeanor toward his guests and his signature response, telling them to "get real!," suggests that he has difficulty appreciating their emotions. On the *E! True Hollywood Story*, Dr. Phil McGraw described dealing with the problems of the patients he counseled during the year he spent practicing clinical psychology: "They'd want to sit there and talk to

you for six months. There were a lot of times I figured this out in the first hour, and I'd be sitting there saying, 'Okay, here's the problem. You're a jerk.' " Such posturing may make good TV, but it also makes one wonder about Dr. Phil's capacity for truly empathetic response.



Even when a narcissist is successful at hiding what he perceives as his shamefully inadequate real self by arranging his world so that it reflects the image of his idealized pseudo-self back to him, along with a constant flow of praise, he still feels a deep sense of longing. Instead of pursuing real intimacy, however, narcissists tend to seek out high-arousal situations that allow them to bask in the love and attention of the people around them. Unable to create the real intimacy they crave, they are driven by a need to be needed by others, and that need is often expressed in an impulse to perform. The pseudo-intimacy of performing in front of an audience is an ideal setting for a narcissist who wants to believe he is relating to others. Bette Midler has noticed this tendency among current pop stars: "They don't talk to their audience," she points out. "They may say 'Hello, New York' or 'Hello, Las Vegas,' in the beginning and 'Thank you' in between songs, but they don't talk. They don't tell stories or take the time to make a connection, build a rapport. There's no emotion."

Lacking the emotional sensitivity to develop a full and complex sense of self, the narcissist fixes on the highest set of expectations—she must be the most beautiful; he must be the strongest, or funniest, or most daring—and behaves in extreme ways that cause others to validate these qualities. Being the object of dramatic attention becomes the narcissist's primary goal. That's why tabloid

celebrities don't care whether they're famous for being crazy, or sick, or almost dead. All that matters is that the audience keeps watching.

The same internal tendencies that lead to the creation of a pseudo-self also drive many celebrities (and other narcissists) to addiction and abuse. Narcissists seek fame because they want recognition from others to shore up their sense of self. Even after achieving celebrity, however, the narcissist remains disconnected, unempathetic, self-preoccupied, and lacking in genuine self-worth. Celebrity can't alleviate their feelings of emptiness and pain. And so, narcissists often turn to addictive behaviors as a way to numb the self-loathing they experience when they're not in the spotlight or performing for an admiring audience. This is the primary reason narcissism is so commonly linked with addiction.

Countless performers have attested to this dynamic. On the intimate interview program *Inside the Actors Studio*, a fresh-from-rehab Melanie Griffith explained to host James Lipton her vulnerability to addiction. "I feel things very strongly. And I think in my youth I used alcohol and cocaine in order to cover up the pain that I felt." She went on to describe her pain as an "emptiness inside that you don't know how to fill, really. I can fill a *character* great, but I don't know how to fill myself, you know? And therein lies the rub." Johnny Depp has admitted to drinking heavily early in his career to deal with his anxiety about public appearances: "I guess I was trying not to feel anything." In a March 2001 interview, he characterized drug use as having "less to do with recreation and more to do with the fact that we need to escape from our brains. We need to escape from everyday life."

I have heard many celebrities say the same things as Melanie Griffith and Johnny Depp about using drugs, alcohol, or even sex to cover feelings of emptiness or provide outlets for escape. As I

continue to talk with these people, they usually reveal childhood experiences that were clearly traumatic—the kinds of damaging episodes that are at the root of narcissistic disorders. My professional training and experience help me to understand the behavior of stars who act out in public, and to place it in context. For other observers, however, the meaning—and consequences—of such dysfunctional behavior are lost in the media spin. Where I may see an addict about to hit bottom, or an individual suffering a painful psychological crisis, the entertainment media sees the next episode of drama in the ongoing soap opera of celebrity scandal.

Even as I became increasingly attuned to the narcissistic drift in the celebrities I treated, I also began to see ordinary patients whose behavior followed similar patterns. Significantly, these non-celebrities often attempted to excuse or minimize their behaviors by explaining that they were acting no differently than the entertainers they admired. It became clear to me that this intersection of celebrity and narcissism was the nexus of a potentially dangerous phenomenon.

The celebrity media industry projects the image of a life where all participants are privileged, powerful, beautiful, and charismatic. However, when we look beyond the gloss of the media machine, a clear and troubling pattern emerges. Each one of the seven traits of narcissism identified in this chapter is an amplified expression of these characteristics. And, as we've seen, when these behaviors are consistently expressed at extreme levels, they point to a serious pathology.

Each one of us falls somewhere on the spectrum of narcissism. We are all born as complete narcissists and then, based upon our emotional development in early childhood, we arrive at our adult expression of these traits. A secure attachment to a parent nurtures empathy, high self-esteem, and self-awareness. But when traumatic

experiences short-circuit the delicate process of empathic development, individuals become locked in patterns of grandiosity and emotional disconnection.

The nature of our society today makes narcissistic personality disorder (NPD) notably harder to diagnose than other more obvious physical or mental dysfunctions, such as schizophrenia or obsessive compulsive disorders. The fact that narcissistic traits can be positive motivators for achievement and self-confidence makes it difficult to perceive their potential downsides—and the truth is that narcissists, even those with more extreme traits, often thrive in our society. They tend to master the persuasive social skills that help them pull others into their orbit in order to maintain the personae they have constructed.

I've said before that becoming a celebrity is the "de facto cure for narcissism." In other words, many individuals yearn for fame, at least in part, as an attempt to manage (one might even say to *treat*) the emotional emptiness that's characteristic of narcissism. For someone with "healthy" levels of narcissism, celebrity may very well be a satisfactory way to access admiration and validation for certain talents or physical characteristics. For individuals with unhealthy levels of narcissistic traits, however, becoming famous often causes more problems than it cures.

Mark and I agreed that high levels of narcissism likely predisposed stars to grandiose behavior. If this was true, were the worst behaviors we see in the celebrity media blatant manifestations of specific narcissistic traits? To learn more about it, we launched a study to determine just *how* narcissistic today's celebrities are—and why.