Impact of Family Dynamics on Narcissism and Impotence: A Commentary and Implications for Psychodynamic Counselors

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Growing up in a thwarted relationship with a father perceived as lacking in meeting the basic nurturing needs of the father-son relationship disrupts a boy’s normative development and may leave him fixated in a regressive state. This also impacts the mother-son relationship. This paper uncovers obscure layers of the male psyche and argues that a regressive state renders the grown man highly susceptible to developing narcissistic tendencies in adulthood. These tendencies are likely to affect interpersonal relationships including impotence and sexual performance with women. Implications for psychodynamic counseling and clinical supervision are discussed.

Keywords: narcissistic tendencies, father-son relationship, impotence, psychodynamic counseling, clinical supervision

Holmes (1999) submits that the quality of the parent-child relationship tends to be the template by which the realm of other relationships would fall. The father-son dynamic in particular appears to have an impact on the relationships boys develop with themselves and others, including their adult male-female relationships (Goss, 2006; Herzog, 2001; Jacobs, 1977). Extensive research on this subject led Herzog (2001) to contend that the quality of the relationship a father or a father figure may develop with his children is crucial in the children’s developmental landscape. Herzog (2001) coined the term “father-hunger” to explicitly depict a child’s yearning for his or her father’s nurturing (p.21). Herzog (2001) adds that father hunger “is an affective state experienced when the father is felt to be absent” (p. 51). While Herzog concedes that this yearning for a father’s availability applies to both sons and daughters, he suggests this sense of longing is far more prevalent with and processed differently by boys. A plausible explanation may be found in how girls experience their relationship with their fathers as separate from the one they have with their mothers—which is not the case with boys (Gauthier, 2010).

Following Freud’s earlier arguments, Gauthier (2010) proposes that boys expect to be rescued by their fathers from what they perceive to be their mothers’ propensity toward engulfment, but they (the fathers) also lead the boys “back to mother, at a new relational level” (p. 116). This new relational level proposed by Gauthier should distinguish the mother’s self from her son’s self. It should be noted that girls do not need their fathers to rescue them from their mothers as they innately want to identify with them (Hall, 1954).

Gauthier (2010) extends Herzog’s (2001) arguments on father-hunger and argues that father-hunger in boys not only includes the quality of the relationship a son may have with his father, but also encompasses the relationship a boy perceives to be between his mother and his father as a couple, as well as his own place in the triad: father-son-mother. Moreover, a boy whose father or father figure is consistently absent (physically, emotionally, or both) is more likely to perceive his mother as the responsible agent for his father’s absence, which would in turn impact the mother-son relationship (Gauthier, 2010).

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In his successive work, Herzog (2010) came to recognize this phenomenon—how boys react to the relationship of parents together as a couple—and added this dynamic to his repertoire as “a father-hunger and a father-and-mother-together hunger” (p. 112). Although a father-and-mother-together hunger may be experienced by both boys and girls, it appears to have the most impact on boys’ development. The father-and-mother-together hunger refers to an emotional yearning for the metaphorical union of both parents and the fusion of the parents with the child (enmeshment). In other words, with the help of fathers, mothers learn to appreciate their sons’ right to their own perspectives, which may be different than their own. When fathers fail to help their sons separate from their mothers, boys tend to develop enmeshment with both parents (Gauthier, 2010). Enmeshment can be explained by the notion that clinging is typically a reaction to perceived distancing from a significant other.

Boys who have father-hunger tend to unconsciously enmesh with both parents as a couple perceiving their fathers as unavailable and their mothers as engulfing. Herzog (2010) suggests that how this “parental alliance” is perceived by boys plays a major role in the child’s “optimal development . . . of the concept of the self” (p. 111). The concept of the self refers to the level of differentiation children may develop with separate feelings and thoughts from those of their parents (Kerr & Bowen, 1988). Differentiation of the self exists on a continuum with the authentic self at one end of the spectrum and the grandiose (pseudo) self at the other end (Kerr & Bowen, 1988).

**Father-Hunger Scale**

Perrin, Baker, Romelus, Jones, and Heesacker (2009) measured the impact of father-hunger in young adults and assessed the validity and reliability of Baker’s (2000) Father-Hunger Scale by recruiting two different groups of participants, male and female college students. Their findings led Perrin and colleagues to deem the Father-Hunger Scale with a high level of construct validity and as an effective tool to assess the degree of father-hunger in an individual. Furthermore, the researchers concluded that the “Father Hunger Scale provides an empirical basis from which researchers can investigate the role that may be played by one’s psychological longing for a greater connection with a father” as it relates to one’s overall functioning (Perrin et al., 2009, p. 323).

In addition, grounded in his clinical work, Herzog (2001, 2009, 2010) found a correlation between father-hunger in boys and a propensity to develop narcissistic tendencies observed in adulthood as a defense mechanism to earlier unmet needs. Narcissism refers to the tendency for feelings of grandiosity and “is exemplified by the devaluation of others and the idealization of oneself” (Luchner, Moser, Mirsalimi, & Jones, 2008, p. 2). Idealization of oneself is grounded in pseudo self-esteem versus genuine self-esteem. Someone with pseudo self-esteem has a propensity toward bestowing upon oneself attributes that may not be consistent with reality. Although both males and females may develop narcissistic tendencies as the result of father-hunger, Herzog (2010), Gauthier (2010), and Goss (2006) claim that there is a higher susceptibility and propensity for males to develop narcissistic characteristics in comparison to females. They speculate that the triggering point for this phenomenon (narcissistic tendencies) may be rooted in how boys process and experience father-hunger (intrapsychic phenomenon and fusion with parents), which may have lifetime effects. Feeling entitled to receive endless admiration from others as an adult is an example of a narcissistic tendency generated to compensate for having felt unloved during childhood. A man who holds unmet dependency needs (unfulfilled nurturing) is likely to be enmeshed with his family of origin and has a poorly differentiated self in contrast to having an authentic self (Kerr & Bowen, 1988).

For instance, a man who may be primarily driven by his unacknowledged and unmet dependency needs related to his family-of-origin may be unconsciously prompted to choose a profession or a mate likely to be approved by his family as the primary criteria while ignoring his own heart. Going against both the spoken and unspoken family rules may not be perceived as safe because it may threaten the status quo and may render the man feeling emotionally, if not physically, isolated from his family-of-origin. This is an example of enmeshment—a blur of boundaries between oneself and another person. This creates a gap within the grown man between wanting to please his family and ignoring his own feelings and thoughts, thus creating an internal vacuum that tends to be filled by narcissistic tendencies.

When being genuine does not produce the acceptance one needs from one’s family, there is a tendency toward artificially generating a self that is perceived to be better than others in a futile attempt to increase the chances one would
feel accepted (Solomon, 1989). Pseudo self is the result of earlier narcissistic injuries. Narcissistic injuries refer to the losses and disappointments experienced or perceived at an early age, such as the loss of unmet expectations, approval, or unfulfilled dreams (Viorst, 1986). And, yet, Viorst suggests these are necessary losses that are called upon to be reconciled in adulthood to achieve personal growth. Some men are not willing to accept the vulnerability that comes with experiencing losses. Viorst (1986) emphasizes that losses are inevitable and constitute “the course of a normal life” (p. 61).

Unhealthy compensation for the vulnerability to experiencing losses may involve certain behavioral patterns, such as feeling one is always right and others are always wrong; the inability to feel empathy for others, and feeling entitled to receiving admiration from others even when others are perceived as defective compared to oneself (Kealy & Rasmussen, 2012; Solomon, 1989). Narcissistic tendencies (pseudo self-esteem) are likely to prevent the development of an authentic self (genuine self-esteem) (Kerr & Bowen, 1988). Kerr and Bowen designed the Differentiation of Self Scale to assess where one falls in the differentiation of self spectrum, between genuine and pseudo self.

**Differentiation of Self Scale**

Jankowski and Hooper (2012) retested the efficacy of the Differentiation of Self Inventory (DSI; Skowron & Friedlander, 1998) using 749 male and female college students whose average age was 21, representing different ethnic backgrounds. Jankowski and Hooper found evidence of both construct and divergent validity in the concept of differentiation. Those who rate the lowest in the differentiation scale are more likely to develop a fragile self, have narcissistic tendencies, and engage in maladaptive coping strategies (Kerr & Bowen, 1988). Examples of maladaptive coping strategies include extreme self-centeredness, pervasive feelings of grandiosity, lack of empathy for others, and blaming someone else for one’s own struggles in an effort to diffuse feelings of inadequacy, loss and rage (Jacobs, 1977).

**Narcissistic Tendencies**

To the extent that maladaptive coping strategies may be intended to protect one’s fragile self by diminishing others in the process, it is more likely that they would fall under the realm of pathological narcissistic tendencies (Solomon, 1989). Solomon suggests that narcissism exists in a continuum ranging from a natural, innate drive to look after one’s own self-preservation at one end of the spectrum to a pathological demand for admiration from others at any cost at the other end. It is the narcissism found toward this pervasive end of the spectrum that is considered pathological and tends to bring havoc to both intrapersonal and interpersonal relationships (Jacobs, 1977). Jacobs believes that pathological narcissistic tendencies coupled with a tendency to view one’s mother as a powerful figure capable of interfering in the relationship between a son and his father are the underpinning variables mediating secondary male impotence. Jacobs examines how this dynamic impacts the sexual relationship between a man and his significant female partner.

**The Impotent King Syndrome**

While some of the factors triggering primary male impotence may be the man’s age, illnesses, substance abuse or medications, secondary impotence is believed to be most likely triggered by psychological variables, such as feelings of inadequacy, revenge and grandiose self-concept (Jacobs, 1977). Jacobs has come up with the term *impotent king* to describe a man with psychic impotence whose narcissistic tendencies may be keeping him from emotional and sexual maturity. Jacobs attributes the dilemma of psychic impotence to motivation in maintaining “sexual immaturity” (p. 97). A man may secretly want to remain a child to recapture what he thinks he lost in his childhood—his uniqueness and own sense of self-value (Jacobs, 1977).

Grounded in his clinical experience, Jacobs (1977) submits that the impotent king is typically involved in a “dominant-submissive relationship” with his female sexual partner—placing the man in the dominant role during coitus (p. 101). Fixated in a regressive state, he is now trying to recapture the powerlessness he felt growing up. While very concerned with his own needs, sexual and otherwise, the impotent king tends to disregard his partner’s needs. A woman needs to feel she is important to her man; that he is committed to the relationship. Blaming his secondary impotence on her takes a toll on her emotionally. In an effort to compensate for her unmet emotional needs she may cling to him, much like he may
clinging to his parents’ approval.

Her clinging and compensatory over-functioning reminds him of his perceived engulfing mother. A man cannot make love to his mother; thus, he develops impotence. Except that instead of focusing in his own issues with impotence, he turns his attention to his female partner, his wife in most instances, and blames her for it, paralleling the way he might have blamed his mother for his father’s absence. Whereas the impotent king tends to be passive-dependent, he unconsciously pairs up with a woman who may be aggressive-dependent and have motherly overtones (Jacobs, 1977). He selects a woman with these characteristics because she reminds him of his mother, and at the same time, he resents her for the same reason (Jacobs, 1977).

No doubt, the impotent king may be aware of his female partner’s sexual needs. Thus, his impotence “may serve as an oblique outlet for the husband’s covert hostility triggered by the wife’s dominance” (Jacobs, 1977, p. 101). Riveting with metaphors, the bedroom becomes a torture chamber: his unconscious payoff is to diffuse responsibility for erectile dysfunction with his sexual partner and thus, blame her for his inability to perform. He punishes her for his own unresolved and unacknowledged dependency issues with his family-of-origin. Covered with rage, the impotent king syndrome depicts a man who covertly blames his mother for keeping his father away, and then overtly blames his female partner for reminding him of his mother: “These men perceive women as invasive and insatiable” (p. 99). The impotent king views women as insatiable because that is how he most likely experiences his own need for nurturing. The explicit rage against his female partner is actually a cover-up for the hidden rage he feels toward himself. He despises himself for his own human vulnerability. Viorst (1986) suggests this vulnerability to rage is “relentless” (p. 61).

Feelings of Rage

Jacobs (1977) suggests that “secondary impotence occurs within the context of the husband’s narcissistic rage elicited by their wives’ unwillingness to pay continued tribute to them” (p. 100). In his studies, Goss (2006) uncovered that feelings of rage are a welcome relief to the feelings of inner emptiness these men experience. Goss suggests this is most likely the result of the detachment from the authentic self (differentiated self). This rage may be either clearly expressed or superficially withheld while manifested through acts of passive-aggression, such as seducing a woman and then having an unconscious desire to frustrate her sexually and blame her for his impotence (Goss, 2006).

Drawing from a similar paradigm as Jacobs’ (1977), Karpman (1933) referred to the phenomenon of psychic impotence as “sexual neuroses” (p. 275) and argued that sexual neuroses are manifestations of the emotional disturbance of the personality through the sexual organ, but these manifestations have very little to do with sex or sexual organs per se and more to do with interpersonal relationships. Karpman posited that psychic impotence not only refers to the inability to attain or maintain an erection, but also to the inability to derive any physical or psychological satisfaction after reaching orgasm. Mostly detached from conscious awareness, the inability to perform in the bedroom may bring these men to counseling seeking relief for their sexual impotence. Jacobs (1977) cites scholars who report a high failure rate in counseling these men with sex therapy, and suggests that “a refinement in the treatment techniques may reduce the failure rate in the future” (p. 97). In agreement with Jacobs, and based on their recent study Kealy and Rasmussen (2012) recommend applying the psychodynamic counseling approach to treat “narcissistic vulnerability” (p. 358). Kealy and Rasmussen assert this approach “would add to the understanding of narcissistic phenomena” (p. 357).

Psychodynamic Counseling

Kealy and Rasmussen (2012) emphasize that clients suffering from narcissistic vulnerabilities are a challenge to clinicians because of their strong resistance to mourning their losses. With that in mind, Herzog (2009) proposes that helping these men calls for careful consideration of the counselor’s gender to facilitate identification. Ideally, a reenactment needs to take place in the therapeutic session with the male client projecting the feelings toward his (living or deceased) father onto a male counselor. A male counselor oriented in psychodynamic counseling would be most helpful in triggering the client’s transference and tapping into his resistance (Herzog, 2009). In contrast with other counseling approaches, in psychodynamic counseling both transference and resistance are not only expected, but embraced. Transference requires a well-trained practitioner who would not give up in the face of a challenge and would continue to
work with the client’s expected resistance (Hill, 2011). Goss (2006) adds that through the transference process, the client would have the opportunity to experience his internal feelings of emptiness at a conscious level—which is an obstacle to him developing an authentic self. They have maintained their real feelings of early loss through the fragile self.

Psychodynamic counseling is about raising the client’s self-awareness and interpreting the client’s narrative by extracting meaning from the patterns and themes evolving from the narrative. In sum, psychodynamic counseling is the result of a well-educated guess based on the integration of the client’s history, the client’s response to the history, and the counselor’s clinical experience, training and knowledge. It is highly recommended that psychodynamic-oriented counselors go through counseling themselves before counseling clients (Holmes, 1999). In psychodynamic counseling the question is not whether the past is infringing upon the present, but rather, to what extent. In the case of the impotent king, the issue to analyze is the man’s motivation for maintaining his resistance to vulnerability.

What is his outcome or payoff? It is conceived that during counseling the client is driven to protect himself from the anxiety triggered by intimacy (emotional and physical) (Jacobs, 1977; Kealy & Rasmussen, 2012). Resistance is the fuel behind the transference (Gabbard, 2009). There would be no transference if the client would be willing to speak directly rather than project those feelings and thoughts they deem unacceptable onto the counselor. Transference is a psychological phenomenon that may occur during counseling sessions when clients react to the counselor’s interpretation of events. Psychodynamic-oriented counselors act as detectives, listening with accurate, empathic understanding, looking for clues, and detecting themes and patterns (Holmes, 1999). They submit their interpretation to their clients as a guess or conjecture, not as solid fact, but rather inviting the client to fill in the gaps (Holmes, 1999). Nevertheless, clients may resist, which lets the counselors know they are on the right track to illuminating the core issue that brings them to counseling.

Rooted in education, the psychodynamic counseling approach offers a road map to unresolved issues that begin and end with the quality of the counselor-client relationship (Holmes, 1999). Hartmann (2009) suggests that part of the counseling approach must include guiding the client to learn how to view himself “excluded from the parental relationship” (p. 2336). Unacknowledged early wounds create a discontinuity of “ordinary growth,” which leads to arrested development or acting out of a regressive state, such as withholding nurturing feelings from his wife to compensate for the deficits he feels he experienced growing up (Goss, 2006, p. 685). Emotional growth is necessary to develop a differentiation of the self that is separate from one’s parents (Kerr & Bowen, 1988).

The counseling goal is to help these men grow up emotionally. Attempting to address this phenomenon, Herzog (2001) suggests that working through this emotional separation from the parents means the “unraveling and reconstruction of the past as it is encountered in the present” (p. 2). Encouraging the client to do an autopsy with the counselor about his family dynamics may be a way of engaging his cooperation towards his own recovery. Bringing the material in the unconscious to conscious awareness is the tenet of psychodynamic counseling. Goss (2006) insists that the challenge for counselors is not only to have the client acknowledge and grieve the loss of a perfect father or an ideal mother, but also to prevent the client from undoing the work achieved in one counseling session by returning to his fictitious self in the following session.

**Implications for Counselors**

In addition to the obvious challenges counselors face with some men who may harbor narcissistic vulnerabilities, Kealy and Rasmussen (2012) emphasize that clinicians are not exempt from narcissistic tendencies themselves, either overt or covert, which may be triggered during counseling sessions. As aforementioned, the psychodynamic counseling model recommends for counselors using this approach to go through counseling themselves before counseling their clients. Those counselors who might not engage in genuine self-awareness may unconsciously prevent their clients from engaging in transference during sessions, such as avoiding confrontations or “refusing to address the enactments” most likely because they may be unconsciously seeking approval or admiration from their clients (Luchner et al., 2008, p. 5). This desire for approval may be related to the supervisees’ narcissistic vulnerabilities, which may go undetected in some instances during supervision (Luchner et al., 2008).
Clinical Supervision

Pearson (2006) calls for supervisors to be “skilled practitioners” (p. 250) and integrate their major roles (teacher, counselor and consultant). This encompasses a combination of sharing information with supervisees regarding theory, indicating to supervisees how they may be reacting to their clients’ narrative, and assessing the efficacy of the supervisees’ strategies with their clients. For example, the supervisee’s tendency to rescue their clients and prevent them from expressing their most difficult feelings should be addressed during supervision. Pearson acknowledges this is not an easy task for supervisors who are either solely instructional-oriented or consulting-oriented. Pearson insists that “applying a psychotherapy-driven approach in supervision incorporates the best of both models [the instruction-oriented model and the consulting-oriented model]” for the supervisee (p. 247). The psychodynamic-oriented supervision model is one of the supervision approaches, among others, that is consistent with Pearson’s integrated model of supervision (teacher, counselor and consultant).

Conclusion

Experiencing losses is part of living. Unacknowledged disappointments may lead to narcissistic vulnerability—the compulsive use of maladaptive defenses in a futile attempt to disguise the painful experience of loss. But the pain does not go away. Instead, resistance to grieving losses fosters more pain and isolation from oneself and others. When some men neither acknowledge nor begin to grieve their early losses, they increase the likelihood of remaining in a regressive developmental stage that includes sexual immaturity. As the result, children may be neglected; mothers may be perceived as the culprit to one’s inner conflicts, and female partners may be experienced as responsible for secondary impotence. The payoff for these men’s denial is quite attractive—to distract themselves from recognizing their wounds and their responsibility to heal their wounds. This secondary gain—the distraction to their vulnerability—may be difficult to resist and may show up in counseling in the form of transference. Appreciating and using transference in the counseling session for the client’s benefit remains the tenet of the psychodynamic counseling approach.

Implications for counselors include their committed efforts to be aware of their own unresolved issues, to grieve their losses, and to become comfortable with the dynamics involved in transference. It has been said that counselors cannot take their clients where they have never been.

The implication for supervisors is to stay focused and detect resistance among supervisees in exploring the supervisee’s issues and their tendency to bring those issues to the counseling session. This resistance may be either explicit or implicit. It is only through working on their own recovery that counselors may guide their clients through their respective journeys to mental health.

References


