

Psychoanalytic Quarterly, 51:447-454 (1982)

The Paranoid Process

By W. W. Meissner, S.J., M.D.

(New York: Jason Aronson, Inc., 1978. 872 pp.)

Review by Arnold Richards

Few contributors to the psychoanalytic literature today would consider tackling a topic of the breadth and scope of Meissner's *Paranoid Process*. He has written a massive, ambitious work that is divided into three main sections. The first, titled "The Structure and Function of Paranoid Ideation," considers the psychopathology of paranoia, paranoid mechanisms, and paranoid style. It is concerned with the variety of theoretical perspectives that have been brought to bear on paranoid psychopathology, beginning with Freud's classic exposition of Schreber. The second section, "Clinical Perspectives on the Paranoid Process," contains ten case histories of patients for whom paranoid symptomatology was important if not always central. Eight of these patients were treated with psychotherapy in the hospital, and two underwent analysis in an office setting. In the third section, "Toward a Clinical Theory of the Paranoid Process," Meissner develops a clinical theory of paranoia centering on the concept of a "paranoid process." In it, he gives detailed consideration to a host of topics, including narcissism, aggression, genetic and developmental factors, family processes, and social "belief systems."

In the first section, Meissner considers a wide range of normal and pathological phenomena from the standpoint of what he terms "paranoid process." He emphasizes, here and throughout the book, that there is a basic continuity between paranoid psychopathology and significant aspects of normal developmental processes, of which psychopathological formations can be an outgrowth. In adopting this outlook, Meissner places himself among those analysts who view psychopathology on a continuum that encompasses both serious disturbances and normal functioning.

The problem for Meissner is to demonstrate that his idea of a paranoid process continuum provides theoretical and clinical clarifications that are clinically useful. In this key respect, Meissner's exposition offers little that is new or even interesting. His impressive erudition notwithstanding, he adopts a theoretical vantage point that ultimately translates into a thesis that is couched in such broad terms as to be inherently trivial. Meissner candidly admits to the theoretical and clinical quandary in which his book leaves the reader. Implying throughout that relevant clinical distinctions must somehow be made, he offers little to help the reader arrive at those distinctions. Content to point out that the difference between normal belief systems and paranoid delusional systems involves "quantitative variation rather than qualitative difference" (p. 98), Meissner ultimately offers no new evidence or any original theoretical constructions to facilitate the analyst's apprehension of the difference.

Meissner's attempt to depict the dynamic interplay between defense mechanisms and cognitive paranoid style that yields paranoid phenomena betrays an underlying confusion in his perspective. He admits at the outset, for example, that whereas "projection is the characteristic and basic defense mechanism employed in paranoid states," the regularity with which projection is found in a variety of other clinical conditions means "we cannot regard it as a defining or pathognomonic aspect of paranoid states" (p. 99). Having admitted this, Meissner nevertheless tries to make projection specifically relevant to paranoid conditions by suggesting that

introjection, which he views as a defense mechanism complementary or reciprocal to projection, codetermines paranoid states. But Meissner provides no theoretical or clinical material to support this argument, relying instead on a single quotation from Harold Searles to make his case.

Meissner argues that projection and introjection jointly serve a developmental function in early life, through the oedipal period, which facilitates the structuring of the inner world and differentiation of self and object. Once such differentiation has been achieved, however, the persistence of these mechanisms points to "defensive needs" (p. 102). But how convincing is this chronological distinction? Inasmuch as defense mechanisms are part and parcel of developmental process and, in turn, evolve developmentally over time, an attempt to juxtapose discrete developmental and defensive dimensions of such mechanisms is not persuasive. At times, it seems that Meissner wants to link projection with defense and introjection with development; introjective mechanisms are viewed as developmental because they pertain to the building up of psychic structure via internalization. The problem, here and elsewhere, is that Meissner's theorizing embodies a level of abstraction that lacks ready clinical reference.

In the second section, 361 pages in length, Meissner presents ten cases, of which eight involve hospitalized psychotherapy patients, and only two involve analysis. His explanations of the paranoid process in the (often brief) psychotherapy cases outrun the data and are not persuasive. The clinical descriptions, furthermore, contain very little description of the therapeutic exchanges and little comment on the course of the therapy. The two analytic case reports, unfortunately, also are disappointing. The case of Mr. James J., for example, describes a man in his early twenties who was seen in analysis for four years. His predominant symptoms were sexual anxiety, academic performance anxiety, and hypochondriasis. During the analysis, the patient's conviction of his defectiveness, traceable to surgical repair of a patent ductus arteriosus when he was five years of age, emerges as central to his psychopathology.

Commendably, Meissner does not make the mistake of viewing James J.'s sense of defectiveness simply as a sign of narcissistic deficiency, but perceptively probes the multiple intrapsychic needs served by it; i.e., it provides masochistic gratification and is used in attempts to resolve both oedipal and preoedipal conflicts. From the standpoint of Meissner's theory-building, however, the case presentation is unconvincing, since he does not demonstrate that a specifically paranoid process is at work. On finishing the case history, the reader is uncertain whether he has read about a patient with a specifically paranoid process that is distinct from, say, a hysterical process or an obsessive-compulsive process. It is not clear what is seen in this case, regarding the dynamic interplay of drives, defenses, and compromise formations, that is not seen in all patients.

The third section of the book is an ambitious attempt to synthesize the theoretical and clinical perspectives articulated in the first two sections into an integrated and multilayered theory of the paranoid process. Meissner's discussion is significant for its adoption of a popular trend in psychoanalytic theorizing that dissociates "instinctual and conflict-based levels of functioning and pathology" from an ostensibly newer concern with the "organization and functioning of the personality which ... [are] continually interacting with the social and cultural environment within which the personality functions" (p. 519).

In locating paranoid psychopathology within a wide-ranging, partly normative paranoid process, as "a consistent extension of identifiable trends in psychoanalytic thinking" (p. 519), Meissner

encounters the same difficulties that beset other theoretical systems (notably Kohut's) that seek to segregate intrapsychic conflict from the supposedly nonconflictual dimensions of mental life. Rather than viewing conflict as ubiquitous and continually interactive with a host of social and interpersonal variables, Meissner draws a radical distinction between "conflict-based" functioning and the realm of self and object relations.

Meissner elaborates the dynamic operations of the paranoid process at four discrete levels: (1) mental mechanism, (2) psychopathology, (3) development, and (4) sociocultural belief systems. His discussion of the mechanisms of projection and introjection is clear, lucid, and relevant. His discussion of paranoid psychopathology from the process viewpoint is somewhat less illuminating. His treatment of paranoid process as deriving out of normal developmental processes is somewhat confused. Finally, his comments on the relationship between paranoid process and social and cultural belief systems are speculative and relatively unconvincing.

Meissner's chapters on the paranoid's use of introjection and projection, which amplify his preliminary statement in Part I, are his soundest theoretically. The bridge between the two chapters is the notion that the psychic introject is essentially the intrapsychic content that can be projected. The elaboration of this idea and the discussion of introjection and projection in general are illuminating largely because we are dealing here with the concept of defense.

The following chapter, "Paranoid Mechanisms: Phobic States and Nightmares," suffers from a tendency toward overinclusion and overgeneralization that leads to trivial findings. Meissner believes that patients with phobic disorders suffer from ambivalence, leading to introjection of a feared object (e.g., the father) and subsequent reprojected of this negative introjective content onto a phobic object (e.g., an animal). This operation of introjection and projection links phobia formation to the paranoid process, Meissner feels, and he concludes that a phobic child "can be seen to be employing projective and basically paranoid mechanisms in the service of defense and in the production of a childhood neurotic state" (p. 586). Similarly, Meissner feels that regular involvement of projection in nightmares renders the nightmare a manifestation of "paranoid mechanisms." The universality of nightmares signifies to him that paranoid mechanisms are not restricted "to the relatively severe instances of the operation of these mechanisms, but ... are in fact a widespread and common experience in human kind" (p. 597). How meaningful is this statement for the analyst? To be sure, projection and introjection are common defense mechanisms, but Meissner's definition of everything in which they are involved as part of "the paranoid process" is logically inadmissible, especially as they have not been established as pathognomonic of it.

In the following chapter, "Paranoid Construction," Meissner is content to stress the continuity between subjectively determined paranoid cognition and the "relatively normal and healthy cognitive processes which characterize every human being" (p. 601). Paranoid construction is said to establish "links and lines of continuity with other realms of human experience" (p. 599).

Meissner attempts to construct a truly clinical theory of paranoid process in two chapters, "Narcissism" and "Aggression." In both, his inclusiveness and tendency to generalize lead to mounting conceptual confusion that derives from continuing restatement of the theme from the vantage point of each new clinical concept that is introduced. Narcissism, which had figured rather passingly in the book in the first 600 pages, becomes in Chapter 21 basic to the paranoid process. Meissner invokes clinical examples suggesting that the projective defenses typifying paranoid process serve to maintain narcissistic fantasies of being special, powerful, etc. He

concludes that the paranoid process functions "essentially in the service of narcissism" (p. 616); in all his case histories, narcissism "lies for all practical purposes at the core of the disorder" (p. 617). This bold statement is, to say the least, rather surprising at this juncture in the argument. It presupposes, moreover, a casual and imprecise estimation of narcissism, which Meissner repeatedly equates with a subjective sense of self-esteem (e.g., p. 618). His contention that projective defenses help maintain narcissistic fantasies ignores the clinical observation that narcissistic fantasies may serve defensive functions, thereby forming part of a conflictual nexus involving the drives and associated unpleasure states of depression and anxiety.

But Meissner's exposition does not end with the elevation of narcissism to superordinate conceptual status. Before the chapter on narcissism is over, he assigns the notion of object loss to a central position in explicating the paranoid process, takes the affect of shame to "lie close to the dynamic heart of the paranoid process" (p. 631), and concludes with a discussion of envy as yet another important dynamic. In the following chapter on aggression, he postulates that "both [pathologic and altruistic] forms of aggression are specifically manifestations of the paranoid process" (p. 654). Later, in the chapter, "General Aspects," Meissner finds the paranoid process at work in Mahler's separation-individuation schema. As the material in Part III of the book assumes panoramic proportions, the reader's conceptual confusion understandably grows. Meissner is hard pressed to point out anything that is not central to or at least a significant manifestation of the paranoid process. This bloated inclusiveness and a failure to order hierarchically the various factors involved in the paranoid process erode the usefulness of his "clinical theory."

The conceptual confusion in Part III is aggravated by the organizational looseness and repetitiveness that pervade the book. Meissner's chapter on aggression, for example, follows the chapter on narcissism, but includes its own section on aggression and narcissism. The chapter, "Narcissistic Development," basically repeats the content of the narcissism sections of previous chapters.

The chapters on the paranoid process in early and adolescent development contain an instructive discussion of certain oedipal issues but are otherwise undistinguished. A standard psychoanalytic account of early development is provided, with an emphasis upon the way in which projection and introjection account for certain defensive vicissitudes. One emerges with the impression that the notion of paranoid process has simply been grafted onto an essentially didactic summary of the various stages of development.

In the final two chapters, "Family Processes in the Genesis of Paranoid Ideation" and "Paranoid Processes in Adaptation," Meissner considers the role of the paranoid process at the interpersonal and societal levels, briefly considering political structure, religious values, the development and maintenance of ideology, group process, and group formation. His ranging, speculative discussion in these chapters is discontinuous with the clinical and theoretical subject matter of the rest of the book and adds nothing to the persuasiveness of his exposition. The issues touched on in these chapters are interesting (Meissner's posited connection between the paranoia of individuals and the paranoia of nations is particularly intriguing), but one must reserve judgment on the validity of such broad constructions. Perhaps we can look to Meissner's projected volume on religion and religious values for a fuller consideration of the issues raised here.

In conclusion, despite Meissner's undeniable erudition, his explication of the paranoid process must be judged as highly problematic. By attempting to find in this process a superordinate

psychoanalytic concept, Meissner has bypassed the conventional and more useful view of psychoanalytic theory as a series of interlocking concepts, each of which derives its relative weight from its conceptual location within the entire network. It is difficult to appraise Meissner's exposition of the paranoid process as more than an at times insightful, if unidimensional study of projection and introjection as important defense mechanisms. To the extent that projection and introjection are defenses, they are best elucidated, both theoretically and clinically, by a theory of psychic conflict that is applicable to all forms of psychopathology. Tying these defense mechanisms to a specifically paranoid process that is viewed as superordinate in its defensive, developmental, and social aspects is a strategy of questionable theoretical, clinical, and heuristic value.