

Love Relations of the Heterosexual Couple

Otto F. Kernberg

In this talk, I want to convey some of the psychoanalytic understanding of sexual love—the loving relationship of a couple—that a number of researchers, clinicians, and theoreticians in various countries have achieved regarding what keeps a couple together and what tends to separate them. I've been influenced by my own study of personality disorders and by my work in recent years in treating couples in serious conflict, as well as by the psychoanalytic literature.

The subject is so vast that I have to concentrate on just one aspect of it. I'll talk about the dynamics of the love relations of the heterosexual couple. I'll try to highlight what we know by describing how I would apply this knowledge concretely in dealing with a couple, hoping that the general theory will emerge from this description. It's an experiment; I hope it goes well.

I will use the scenario of my sitting in an airport waiting to be called to board a plane. I have exactly half an hour. As I'm sitting there I make friends with a young couple. They look as if they are in their early thirties—for me that's young—and they seem to be highly educated, professional, nice people who are not in the field of mental health (and it's a relief to talk with normal people). They ask me what I do, and I tell them I'm a psychiatrist. They remark, "Oh, are you going to analyze us?" and I assure them that I don't work outside my office. They ask what I work on, and I tell them that I'm working on understanding what goes on between couples. They say, "Oh, we are a couple; we are planning to get married. Can you tell us anything that might be of help to us?"

I reply, "I can say nothing that can be of help to you; I don't know you. Every couple has different problems, if you have any. You look like very happy people."

Otto F. Kernberg

“Well, we love each other,” they reply. “We want to marry, but we are also aware that marriage seems to be disappearing—that according to one statistic, only 17 percent of couples in love end up in a permanent relationship. We are frightened by the 50 percent divorce rate in the United States and by the fact that 80 percent of those who divorce and remarry again get divorced. So it seems to be a dangerous enterprise, to get married. In addition, we see less and less of it. We understand that people live together without getting married. They have fewer children. The population tends to be shrinking, particularly in Western Europe.”

I tell them I’m impressed by all they know, without being in the field. To this they say, “In addition, we’ve heard that there’s a lot of talk about the ‘deconstruction’ of love, meaning that aspects of a relationship that traditionally used to be put together—a heterosexual couple in love, who have a sexual relation that is fully satisfactory, and at the same time have children whom they love; that is, the aspects of love, erotism, and reproduction—are getting unhooked. The romantic ideal of love punctured by divorce, the isolation of people, the ideology of ‘combat’ between the sexes, the questioning of heterosexuality as one style among many others—these don’t speak well of traditional romantic love.

“Regarding erotism and sexual attraction,” they continue, “mechanics and chemistry seem to be invading sexual pleasure. We have penile implants; vibrators and dolls, to avoid the complexity of adjustment in sexual intercourse; internet sexuality, to avoid all the complications of personal relationships. Is erotism in danger? And then, when it comes to reproduction, of course, first of all we have preservatives, we have selling of eggs and sperm, borrowing of pregnancy carriers, so that there is disassociation between the genetic relation and the emotional relation, between an ordinary child and an ordinary couple consisting of father and mother. So it’s a little worrisome. Is it the end of marriage? What do you think, doctor?”

I say, “We have only thirty minutes—you have told me more than you’ve asked me! But I have the highest respect for what you are saying. Let me say, first of all, that I don’t know whether we’re seeing a permanent change. Everything you’ve said is absolutely correct, but we don’t know whether this is permanent or one of the frequent fluctuations that have occurred historically and that are motivated by economic, social, religious, and cultural pressures. These pressures can lead to oscillation between periods of traditional marriage, strict moral codes, and puritanical ideological atti-

Love Relations of the Heterosexual Couple

tudes, and periods of disillusion with all of that, periods of official libertinism. And this also varies by social class; we have some research on that. So it's hard to pronounce anything, because there are such frequent movements in this regard. And I believe," I add, "that there are biological as well as psychological pressures or trends going in the opposite direction, tending to foster the stability of a couple in love—although that seems to run so much against what is popular nowadays.

"Now, I can't tell you at all what's going to happen with you, but what I'm going to do in the time that I have left is give you a few signals about what's going well in your relationship, and what problems are possible and how you can deal with them. You may have none of these problems, but if you want me to give you some preventive treatment, you can have it. Are you ready? Good.

"First, keep watch over your sexual life. Mutually exciting and gratifying sexual relations are a fundamental component of the long-term relationship of a couple. Even if you have a good relation right now, it may all of a sudden not be so good once you are married, for psychological reasons, because we all harbor profound guilt feelings against a satisfactory sexual relationship in a relation that unconsciously reproduces that of the parents. Many couples have a great sexual life so long as they are not married; the day they get married, something happens. They do much better sexually once they have had fights, because then they have paid a price, and sex becomes okay again.

"Try to keep your freedom—freedom from conventionalities. Find your sexual pleasure. Do the kinkiest thing you're interested in, and try to learn what turns you on; you may not know. Your internal freedom in the sexual area will help your relationship. If you can't achieve this, however, there's help. Today we know how to diagnose and resolve severe sexual inhibitions. And I'll tell you, there are basically two.

"The most severe is a primary inhibition of sexual excitement and eroticism because of excessive aggressive experience in the early months and years of life. We now know that sexual affect, sexual excitement, depends biologically on particular circuits and structures in the brain. I won't go into details, but there are specific neurotransmitters, neuropeptides, and specific limbic areas that activate sexual excitement through the hypothalamus; there are peripheral cells and organs that respond. (Poor Freud didn't know anything about this and thought libido originated in the periphery

of the body, but that was because neurobiology was not at this level in his time.) But sexual affect needs an unconscious, erotic triggering by Mother in the form of enigmatic messages that transform sexual excitement. It also needs an erotic disposition that looks for an erotic object. To this day we don't know exactly what determines whether this object will be homosexual or heterosexual, although there are 'culture wars' over this issue. There is very little effective research going on as yet.

"Anyhow, what I'm telling you," I say to the couple, "is that the most severe sexual problem is primary inhibition, though you don't look like you're going to have that. Primary inhibition is associated with the most severe personality disorders that we treat, and you just don't look like that (though I may be wrong—this is not a consultation). But an important trigger of difficulties is a secondary inhibition that arises out of unconscious guilt, stemming from an excess in the infantile prohibition—real or fantasized—that reserves sex to the parents, and unconsciously makes all sexual behavior forbidden. Secondary inhibition can be treated psychotherapeutically, and in some cases psychotherapy can be complemented by sex therapy. So there is help on the way.

"A second problem is that in sexual behavior, as well as in all the other complex matters I'm going to mention, there will be not only love—erotism is not only love—but also the activation of aggressive affect, not only sexual excitement. We are wired from the beginning to life to have, under conditions of gratification, intense dependent and potentially erotic longings. And under conditions of frustration, we are wired to have intense aggressive feelings, which have the purpose of getting rid of bad stimuli. 'Getting rid' means, at the most primitive level, destroying whatever creates pain, and later on, it means trying to take revenge when somebody causes us pain by causing pain in return. There's pleasure in revenge. We tend to become sadistic in this pleasure, taking pleasure in hurting others. Later on all of this gets toned down, and we just want to control the Other, which is already a very sophisticated expression of aggression and leads to the power aspect of relationships. (*Aside, to audience:* You have heard these aspects brilliantly exposed, earlier today, by Ethel Person.)

"This aggressive component of sexuality, which also shows in other things, is both helpful and harmful. It is helpful in the sense that it gives the special spice to sex. Exhibitionistic, voyeuristic, fetishistic, masochistic, and sadistic tendencies are absolutely nor-

Love Relations of the Heterosexual Couple

mal in early infancy and childhood. Later on they get integrated into the genital feelings, but they always remain as an important potential for sexual play, fantasy, and interaction, and for the expression of all kinds of conflicts around love and aggression and power and dependency. If you achieve sexual freedom, this means also the freedom to treat each other as objects.

“Hey,” says the man to me, “are you talking about pornography? Isn’t that the objectifying of women?”

I reply, “Yes, I’m talking about pornography; and ‘objectifying women’ is a social ideology that can inhibit your sexual freedom, in the same way that traditional, orthodox religious prohibitions against anything except the—how shall I say?—‘Sunday-school position’ for having sex can inhibit your sexual freedom. You have to protect your sexual life. Francesco Alberoni, an Italian sociologist, has said that the relationship of a couple is a revolution of two. You’ll have to remember that, for the sake of your sexual life.

“But let me go on to other things. The next important matter, as important as sex, is the nature of your emotional relationship. That sounds kind of trivial, but it isn’t. Your emotional relationship means the capacity for an intense wish for fusion, for closeness—the wish both to depend on the Other and for the Other to depend on you. It means, at the same time, a tolerance for unavoidable frustrations in the relationship, so that you can get very angry, and you can get most angry with the person whom you love most. In other words, all deep emotional relations are ambivalent. Don’t believe that what you have to do is try to get rid of all your fights and anger and frustrations and only be loving. On the contrary: the capacity to experience love and hatred toward the same person, while one has the assurance that love will always dominate, is an essentially normal condition.

“Ambivalence is normal. An older generation of psychoanalysts thought there were ‘postambivalent’ relations, which was totally silly. We know nowadays that in the development of our psychic life, very intense loving and hateful relationships tend to build up, at first, separately. In the first year of life—initially because of biological reasons, then because of primitive psychological mechanisms that tend to separate very frustrating, aversive, negative, or bad relations from very positive and loving ones—there’s an independent buildup of memory structures, particularly in certain structures of the brain. This is a very important function of the hippocampus, and later on of the frontal preorbital neocortex as well.

Otto F. Kernberg

First of all, in very primitive limbic structures—the amygdala, the hippocampus, the hypothalamus—we build up, separately, representations of the other person and of our ourselves interacting with the other person, within the frame of an extreme positive or negative affect. Only gradually, throughout the first three years of life, do we integrate these representations, putting together the bad relations and the good ones. We realize that we are neither as bad as we seem in a bad relation nor as ideal as we seem in an ideal relation, nor is the object of desire as good as it seems in the good relation or as bad as it seems in the bad relation, but there's good and bad together. We tolerate an integration of the representations of self, an integration of the representations of significant others. We become more realistic, and at the same time we develop the ability to experience relationships more in depth. The normal relations of the couple play this out—the expression, in depth, of an awareness of the Other, of interest for the Other, and of the security that love can contain the anger, the hatred, the frustration, without going under.

“Now this doesn't happen simply and harmoniously. It may happen in different ways. André Green, the French psychoanalyst, has talked about the ‘private madness’ of couples—couples who, when they are alone, all of a sudden enter into crazy fights. As soon as they are in public everything is fine. If people were observing them in private they'd say, ‘These people have gone mad. They are not their usual selves.’ But the private madness is part of that regulatory integration. The French philosopher Bataille said that we oscillate between reality-oriented behavior, controlled by day-to-day reality tasks and reasoning, and moments of intense ecstasies—ecstasies both in the sense of intense love, sexual excitement, religious experiences, and also in the sense of intense aggression, hatred, and self-aggression, which one hopes are controlled by the intensity of love. But those moments in which we are dominated by passion give intensity to life. If we live only in those moments we are lost, because we lose our contact with reality. But if we live only in reality and eliminate passion, our life is impoverished as well.

“And so I hope,” I tell them, “that you'll have a very good relationship, but remember there will be times of fighting, there will be times of distance, there will be times of separation, and there will be times of passion when everything goes well. Don't listen to people who tell you that after a period of time, being in love—romantic passion—goes away and everything becomes calmed down and a matter of convenience, because that is a distortion of clinical reality.

Love Relations of the Heterosexual Couple

“And this brings me to the next point,” I tell them, “which is, the major interference that may occur with this normal aspect of the relation. Here we come to the most interesting and most complicated aspect of the love relation of the couple: the unconscious enactment, in the relationship, of the dominant, unresolved conflicts from their pasts. Whatever is left as a major unresolved conflict with their own parents tends to get activated in an intense relationship that reproduces that of the parents. Both partners tend to activate these conflicts, and in doing so they use a primitive psychological mechanism. I have already mentioned to you one primitive mechanism, that of the splitting of idealized relationships from bad, persecutory relationships. But there is a second and fundamental mechanism called *projective identification*, first described by Melanie Klein, one of the leading psychoanalysts. It consists of the activation of an unconscious relationship that’s conflictual, inducing unconsciously in the one’s partner the role of the person from the past with whom one had a conflict, and activating in oneself the role that one had in the past in the conflict with that person. We activate the past relationship by inducing in the Other that which was traumatic and problematic for us. We are causing this, but we attribute it to the Other. We think, ‘Oh, it’s the Other’s problem.’ What we unconsciously induce, we say that he or she caused, and we react to her or to him in the same way that we reacted in the past. So the mechanism of projective identification is a combination of identification of the Other with a part of one’s past, and projection onto that Other of the affective problem that we had with that person in the past. If both partners do this unconsciously, they complement their mutual processes, and it starts ‘clicking.’ All of a sudden you have a specific conflict of the couple that, on psychoanalytic exploration, turns out to be a compromise between that load from the past that they carry within, and their repetition of it, in an unconscious effort to resolve it by repeating it. So behind every marital conflict, behind every couple’s conflict, are not only destructive efforts, but also efforts at repair—a desperate desire that the conflict be solved. And that’s important for treatment.”

I ask the couple, “Are you still with me?”

They reply, “It’s a little complicated. We would raise questions, but as you have to leave in twenty minutes, just go on.”

“Okay,” I say, “I’ll go on.” They look a little unhappy, and I don’t know—had I been going too far? But I continue. “What I’m going to say next I’m sure you have read, because every magazine

talks about Oedipal conflict. It's either considered a basic reality of the human being, or one of these idiotic, old-fashioned assumptions that only the Freudians believe, and that has long been proved wrong—at least as we read about it in the middlebrow press." I explain, "There is very good and convincing evidence that old-fashioned Oedipal conflicts really are quite basic in the human being, and that there are two kinds of conflicts that are central and prevalent, although there are many others. The first arise from the early stages of development, the first three years of life, and have to do with profound frustration in the relationship between infant and caregiver, usually infant and mother; they have to do with profound difficulties in establishing the normal perception of self and Other because of distortion of the affective developments in that relationship. We call these pre-Oedipal conflicts—a not-quite-correct name, because such conflicts go on throughout life, and what we call Oedipal conflict does not occur later but starts very, very early, probably already in the first year of life. But the traditional term is pre-Oedipal conflicts, for those occurring around dependency, around affect integration, and now mainly studied in normal and pathological attachment.

"What I'm going to tell you, in one word," I continue, "is that the affect dispositions that I mentioned—good feeling or bad feeling; euphoria, happiness, or anger, rage, resentment, irritation—at first are overwhelming to the baby. But the mother—in understanding those affects and reflecting them back to the baby, while at the same time signaling that she doesn't share them completely, but she understands them—helps the baby put a cognitive frame to the affects and reduce their impact, particularly the impact of negative affects. This decreases aggressive affects and facilitates integration. If Mother is not able to do this—if there is pathological attachment—then this function cannot be carried out, negative affects hit the ceiling, and sometimes there may be terrible mistreatment of the child—physical abuse, sexual abuse, the witnessing of chronic physical or sexual abuse. But other times, even without abuse, just because of the difficulty in metabolizing affect, there is such a predominance of negative affect that there's a lack of integration of positive and negative; and then, problems around dependency become central.

"One frequent secondary defense against such problems around dependency is a massive denial of all dependency, an idealization of the self, an attitude as if the only thing the person needs

Love Relations of the Heterosexual Couple

is admiration from others, and the rest, to hell with them. We call this pathological narcissism. Pathological narcissism is a major plague that affects love relations, because individuals who suffer it carry with them an intensive form of unresolved aggression that takes particularly the form of envy. They experience envy because at bottom they hate the person whom they need most, which is Mother; they hate what they think Mother has and is not giving them. This then generates hatred of what others have and they don't have. The most fundamental hatred, unfortunately, is hatred of the other sex, the other gender, because we are all condemned to be only one gender. We miss half the fun and half the capacities—and this goes for men who unconsciously envy women, and for women who unconsciously envy men. Narcissistic personalities need to unconsciously devalue the persons with whom they fall in love. This is a disaster, because the narcissist first idealizes somebody and then devalues him or her. Narcissists cannot stay in a relationship, so sexual promiscuity is a consequence, an incapacity to maintain the couple; and there are other, multiple symptoms that I cannot go into.

“Even if the couple doesn't separate—if they are nice and traditional and feel that once you are married you are married forever—the narcissist's unconscious devaluation of the Other takes the form of profound boredom; he or she loses interest in the other person. Narcissists suffer from terrible boredom. They are desperately looking for somebody who will help them, somebody who will animate them, who will be fun always. This can destroy the intimacy of the relationship, in addition to bringing about infidelity, extra-marital relations, et cetera. If narcissism is present it requires individual treatment, and we have now developed psychoanalytic and psychotherapeutic treatments for the condition. I trust that you people don't suffer from narcissism, but if you do, it's not the end of the world.

“There is a second problem that is frequent, and you may have this, because it's so frequent and it's less severe. It relates to unconscious guilt over a good sexual relationship and intimacy, because that is like competing with the Oedipal parents. It goes against the prohibition of sexuality, against the Oedipal couple—because unconsciously it is as if the two of you as a couple are a reproduction of your parents as a couple. Even if you tell yourself, ‘That's ridiculous, this has nothing to do with them, we're grown-ups,’ these are profound unconscious processes. They may bring

about a chronic sense of unconscious guilt that is expiated by destroying your relationship precisely when it is most satisfactory.

"This problem takes hundreds of different forms, most frequently using aggressive affects, once more, to provoke fights and destroy the happiness of the relation. Another form is the setting up in the superego—in other words, in the unconscious internal morality that comes from childhood—of an attack on the self and on whatever makes oneself happy. Enormous pressures from unconscious guilt feelings bring about self-defeating behavior that may take the form of provoking the Other, provoking, provoking, and provoking until there's some punishment. Then the person feels better. At the same time, when we have this kind of superego—the size of a cathedral!—we tend to project it onto the Other, and then we see the Other as very aggressive toward us. In fact, it's practically normal that the person whom we love most is the person who hurts us most when that person is critical. We project our superego onto the Other, who then attacks us, and we feel even more devastated, so we may then try to defend ourselves by attacking the Other, and this creates a dangerous, vicious circle of sadomasochistic behavior that, under the worst circumstances, may get out of hand. The intensity of the aggression is very important in this regard.

"However, the superego is not only an enemy, insofar as it also contains our value systems. It is the place from which our ideals, our ethical values, our commitment to ideology, to religion, to cultural values, to science, to art, arise. It powerfully influences our capacity for falling in love, because falling in love is not only erotic excitement, not only the search for mutual dependency and intimacy, but also the wish for sharing value systems, for sharing the ideal of what one's life should be, for sharing how one enters into and how one relates to our culture. In that regard, the superego permits us to develop certain value systems that constitute a protective boundary for the couple, a basic set of laws that govern their relationship, that protect them from aggression. So you see that aggression has positive and negative aspects—at the sexual level, at the emotional level, and at the superego level.

"Let me describe for you," I told them, "the most frequent problem that derives from all these areas of sexual relation, emotional relation, relation at the level of value systems. The most frequent problem that evolves is the temptation, the tendency to break up the couple that stems from universal fantasies—the idea that, in

Love Relations of the Heterosexual Couple

contrast with the limited nature of one couple, somewhere there's some ideal partner; somewhere one will find the ideal woman, or the Prince Charming. There is some other idealized object in one's mind, in contrast to the real Other whom one has. But there is also the fear that if we remain, the Other, our partner, is going to leave us for a much better man or woman. This is, again, the Oedipal fear that we do not measure up to the ideal father, and there will be a much better man taking our woman, our wife, away. For the woman, there is the same fear regarding a much better woman who will take her man away.

"These fantasies, under conditions of severe conflict, tend to get put into action. One of the partners develops a relationship with somebody else, and it brings about infidelity that has very different functions and qualities according to what the dominant problem is—multiple affairs, in the case of the narcissistic personality, and a self-destructive affair, in the case of the masochistic personality who suffers under severe Oedipal guilt. The main problem of Oedipal guilt—self-attack and excessive guilt—is represented by masochistic pathology. A person with this problem may develop a love relation that seems so self-destructive that its masochistic function is quite obvious to people on the outside. There are also love affairs that are totally irrelevant, that are almost culturally pressured. And there is the type that is not simply an affair, but reveals that a couple really is losing its intimacy and a new couple is being established; so that sometimes the affair is not a triangulation, but the end of a relationship. Do such ends of relationship happen normally? Yes, they may, but most of the time they happen because of the significant psychopathology of one of the two partners, perhaps of the two.

"Long-standing triangulations, with long-standing affairs, while the couple stays together and is fighting with a third excluded person, whether the Other knows it or not, always indicates a profound conflict in the couple. And here, couple therapy can help. The first task in couple therapy is, of course, to find out: Is this the end of relationship, or is this a stable relationship that is undermined by an unresolved, chronic conflict that takes the form of marital infidelity—a third, excluded Other? The first thing the therapist does is try to protect the person who seems to be the victim from making everything worse, when things could go better. And the second task is to study how both partners have contributed unconsciously to the problem, and how this can be brought out in the

Otto F. Kernberg

open. What we do, in short, in treatment is available also for this kind of problem.

I have to leave; they have just called me to board my plane. I'm standing up. I say, "Goodbye, people, but let me give you two or three general words of advice, what is always helpful.

"First, remember that behind the rage of the Other is also a need to be loved. Think of that. Second, remember that love also implies a certain humility, to go out there and be available even if you don't know whether you'll be accepted or rejected or humiliated. And third, reflect on what is left of your gratification in the sexual area, in the emotional relationship, in your value systems, what may permit the relationship to be picked up again.

"And by the way, if you want to read something," I tell the couple, "I recommend as a basic text Henry Dicks's *Marital Tension*. I think it's the best text we have. Of course I have my own modest text, but I don't recommend that. And if you want to read good novels about these issues, the best I know are *Elective Affinities* by Goethe, *Love in the Time of Cholera* by Gabriel Garcia Márquez, and a novel that unfortunately doesn't exist in English, but only in Hungarian and German and probably French—*Vicissitudes of a Marriage* by Sándor Márai."

Thank you very much.

Suggested Reading

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