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HERNANDO'S ANAL WORLD: AN ADOLESCENT BOY WITH NARCISSISTIC PERSONALITY DISORDER

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Abstract

Hernando, a 15 year-old boy was seen for individual art therapy while attending an urban middle school. He manifested behaviors similar to Rosegrant's client (1998). Hernando revealed narcissistic symptoms in behavior and words that invoked an anal world where competition and age-appropriate responsibilities did not exist. Initially Hernando denied differences between genders and generations and was provided treatment in which mutuality, empathy, and acceptance of one's imperfections were encouraged. He seemed to emerge from his therapy with recognition of the differences amongst people and an increased integrated sense of self.

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Even raw and messy emotions are a form of light - crackling, bursting with energy. We can use that light of rage in a positive way, in order to see into places we can not usually see.

Clarissa Pinkola Estes

A Session With Hernando

Hernando, a 14-year-old boy attending the art therapy program offered in an urban middle school, entered the art therapy room for our 8th session, giggling.

I said to him, “You are giggling. Something must be funny to you.”

Hernando answered, smiling and nodding his head, “It’s the Rock [a professional wrestler]. [giggle] He is so funny.”

He stood looking at me. I invited him to sit down. I told Hernando that I had changed his art therapy session time to accommodate his request to attend a teen therapy group held during the same period. He asked me if I could write down the new time and period for him. I did so saying I had changed his schedule to Mondays, during 7th period, when he had English.

Hernando replied, “No, with a smile. “How about 3rd period?”

I told him I already had someone scheduled then. He quickly asked me about 4th or 6th period. I told him that those sessions were also scheduled. “You say no, do you not wish to come during English?”

He shrugged, “I don’t care.”

“It sounds as though you are saying you don’t care if you go to class?”

Hernando answered, “Nah! Can I tell you what happened last night?

“Sure.”

Hernando interrupted me mid-reply with the catchphrase of the Rock, “It just doesn’t matter!”

Hernando described the professional wrestling match he had watched the night before. The Rock flipped another wrestler over and had repeatedly used his catchphrases, “It just doesn’t matter,” and “I’ll shove it up your candy ass”, many times. He giggled, “The Rock, he is so funny.”
“It sounds as though the Rock fools people when he is talking to them.”
Hernando agreed.
“How do you think he feels when he does this?”
Hernando just shrugged his shoulders, “I don’t know.”
I continued, “It sounds as though he may feel good and in charge when he fools others.”
Hernando quietly answered, “Yeah,” while looking down. He manipulated some building sticks that were on the table, putting them together and then taking them apart. “I used to have fun in here with Sue,” (his art therapist from the previous year).
“You must miss Sue. What types of things did you do together?”
“We would play.”
“What kind of things would you play?”
“I would play with this,” as he picked up the drawing mannequin.
“It was more fun than this.”
“It is understandable that you miss Sue. She and I are two different people and will do things differently. Maybe you could tell me more about the things you did together.”
Hernando shrugged.
“I wonder if you are angry with Sue for leaving and that maybe you could be angry with me for taking Sue’s place?”
Hernando half-heartedly shrugged and answered with a soft, “Yeah.”
“It is understandable and okay to be angry.”
Hernando turned to me, “Are you crying?”
“It seems you think I am going to cry, what makes you think that?
“I don’t know, the way you look.”
“What do people look like when they are crying?”
Hernando shrugged.
“What kinds of things do you think happen that would make someone want to cry?”
Hernando started repeating everything I said and imitating every movement I made. I acknowledged this.
He continued in this manner for a few minutes, grinning, and then explained to me that it was a game called "Shadow". He then asked me to shadow him. I asked him how it felt to shadow someone. Hernando shrugged.

"It seems that maybe it would feel good."

He then asked me if he could draw. "I will draw Vader." He picked up the box of building sticks and placed it in between his paper and my line of sight. He then picked up a pencil, sharpened it and started to draw, then put the pencil down and picked up a second one to use. Hernando seemed focused, but would look up at me from time to time. A couple of times he stopped and stretched or sharpened his pencil.

I tried to give him some quiet time to work, but did say to him, "Sometimes it can be hard to stay focused on a drawing when you are thinking so much about it."

He smiled, "yes." Hernando looked up at me and moved the box away from his drawing. (Figure 1) It was a pencil drawing without any color added and without the jagged energy lines surrounding the figure. Hernando turned to me and told me that this was his drawing of Vader. He took out the markers and crayons and said he had to color in Vader. He meticulously outlined the body parts first and continued to work with concentration. When told there were about five minutes left in his session, Hernando anxiously said, "I have to make his energy." He quickly picked up the pencil and drew the lines of energy around the figure. I reminded him that he did not have to finish the drawing during this session; he could continue it during the next session. He worked feverishly, uttering "No."

"It is difficult to stop when you have an idea in your head that you need to get out." Hernando looked at me and said, "Yes."
When I told Hernando it was time to finish for the day, he said okay and put the supplies away. As he left the room, I laughed to myself and then breathed a sigh of relief. This was only my 8th art therapy session with Hernando and already his case and history thoroughly intrigued me. Working with him was both exhilarating and exhausting. I was aware of my countertransference, as I both looked forward to and dreaded our sessions. I wondered why Hernando behaved the way he had and said what he did. I rearranged the art therapy schedule as he requested and he reacted as though I was inconveniencing him. When I tried to address the feelings behind his comments, he changed the subject and disregarded me by interrupting me.

Hernando expressed anger by telling me he enjoyed art therapy more with his previous art therapist than with me. He may have projected onto me his own sadness, by asking me if I were crying. Next, the Shadow game was the ultimate test of my frustration limit. It became clear that Hernando controlled the pace, content, and feelings expressed in this session.

The artwork Hernando created during this session seemed to provide clues to his pathology and to exemplify the duality that intrigued me about him. Vader was the first full figure Hernando had produced this year or the year before in art therapy. Yet, the hands are non-existent or covered as if with mittens. The arms are outstretched and raised almost in victory, but the lack of hands causes the figure to appear defenseless. Vader is a caped, omnipotent superhero, yet his small stature illustrates vulnerability. What Hernando described as Vader’s energy contains the figure, while conversely appearing as cracks and surrounding it.

I wondered about the contradiction of selecting a superhero but portraying him as inadequate. Was there something in his history or development that contributed to the duality expressed in his behavior and artwork?

**Hernando’s History**

Hernando was small for his age, shorter than most of his peers and very thin. He wore baggy T-shirts and pants and liked to wear silver
rings and beaded friendship bracelets. His teachers often described Hernando as having a pleasant attitude and a willingness to cooperate.

His school record revealed a learning disability and possible Mild Mental Retardation. Before he was enrolled in the middle school he had been in a parochial school for grades three through five. He had transferred from an elementary school and was held back in the parochial school in third grade.

At his mother’s request, Hernando had been tested several times for special education placement. According to when last tested (Department of Education, 1999), two months earlier, his reading scores were at the upper third grade level and his math at the upper first grade level. Although, Hernando’s thinking appeared to be concrete, he had an excellent memory and relied on a high level of structure to get by.

On the Vineland Adaptive Behavior Scales, Hernando tested lowest on receptive communication and interpersonal relationships. In turn, Hernando’s peer relations seemed to be strained and troublesome. When observed in the classroom setting, Hernando usually sat by himself and was periodically the subject of verbal abuse from the other students. Oftentimes, in the hallway he could be observed calling out sarcastic remarks to his peers when they appeared to be just out of hearing range.

At the time of treatment Hernando lived in an apartment with his mother with whom he seemed to have a strong attachment. Also living in the apartment were his 10-year-old sister, with whom Hernando supposedly shared a bedroom and other extended family members. Hernando’s mother and father were divorced. Often, his father would promise to spend time with him but would fail to show up.

Hernando had periodic psychotic episodes, when he would refer to images of blood dripping out of the shower or claim he saw monsters. At the age of 11, Hernando reportedly had constant night terrors and nightmares and was placed on the anti-psychotic drug, Haldol. He stopped taking it after less than a year because his mother decided against it (personal communication, March 13, 2000).
Hernando was delayed in both motor and language development and, according to his mother, he had asthma until he was 12 years old. In addition, Hernando did not eat solid food until he was about 4 years old and had to be hospitalized at two because of a severe milk allergy. His mother reported that Hernando had difficulty controlling his bowels until he was 10 and was still constipated from two to six days a week. This information struck me as particularly significant because he seemed to be preoccupied with thoughts of food and control over his bodily functions during our sessions. It was suspected that his mother routinely administered enemas to Hernando thus intruding on his privacy and control. I questioned whether these aspects of Hernando’s history, in unison with his current behavior, could be indicative of a disturbance in Hernando’s narcissistic development and in the formation of a healthy sense of self.

Narcissistic Personality Disorder

I was surprised by the lack of literature about the Narcissistic Personality Disorder (NPD) in children. The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) referred to Narcissistic Personality Disorder as beginning by early adulthood (p. 282) and most of the early literature concerns the adult manifestation of what is commonly conceptualized “as self-adoration with an aloofness that denies the need for another person.” (Russell, 1985, p. 137) Freud (1923) used the term narcissistic disorder (cited in Joffe & Sandler, 1998, p.3) to refer to the psychoses, but in recent psychological thought, it has come to represent “major disturbances in attitudes towards the self and in the regulation of well-being and self-esteem” (Joffe & Sandler, 1998, p. 3).

As an infant matures, the infant begins to understand that he or she is separate from the caregiver (the object) and if “surrounded by approving and libidinally mirroring friendly adults, seem[s] electrified and stimulated by this reflecting admiration” (Mahler & Kaplan, 1998, p. 16). According to Mahler and Kaplan (1998), as a child begins to see her or himself as a separate entity who can autonomously achieve, the child’s inner sense of personal narcissism develops in a healthy way.
The child grows and begins to realize that the caregiver/object is not always good. At times, perhaps the child's immediate needs are not met and the child may become angry with the caregiver. In normal narcissistic development, the object and self representations are structurally differentiated and the child begins to realize that the caregiver can be both good and bad and that the child can feel both love and anger for the caregiver (Kernberg, 1989).

Kernberg claimed (1975) that adults with narcissistic personality disorder do not derive from the same path as healthy narcissism. The person with NPD is incapable of empathy and relationships function merely for fueling grandiose fantasies. Kernberg (1975) emphasized that little satisfaction is gained from these relationships, as the narcissistic individual usually feels intense envy and even hatred for those perceived as having things he or she does not have but desires (cited in Russell, 1985).

Kohut (1971) described a narcissistic disorder as a fixation at an early stage of healthy narcissistic development (cited in Russell, 1985). For Kohut, the individual with narcissistic personality disorder had failed to "sufficiently develop the internal structures necessary for maintaining the cohesiveness, stability and positive self-colouring of the self-image which is related to a sense of stable identity" (cited in Russell, 1985, p. 139). The person with NPD is unable to identify clear boundaries between self and others.

*Narcissistic Personality Disorder in Children and Adolescents*

Beren (1998a) recognized that treating children with psychological disorders, in particular NPD, can be difficult, but that they should be treated differently from adults, or we, as therapists, would be "doing them a disservice" (p.xiv). Children with NPD are described as expressing their

... narcissistic vulnerabilities in feelings of injury, shame, and humiliation, with accompanying feelings of powerlessness, helplessness, and rage. These children pose unusual challenges by their frequent provocation and enactments, their omnipotent and
grandiose fantasies and their formidable defenses that aim to control the therapist by keeping him at arms length. (p. xiv)

My suspicion that Hernando had a narcissistic disorder did seem valid. As with adults having a narcissistic disorder, children and adolescents with NPD present difficulties with “the regulation of self-esteem, the regulation and modulation of affects, and the regulation of the body and bodily orientation in time and space, among others” (p. xv). Children and adolescents with NPD will often exhibit a defense against any significant relationships, along with illusions of omnipotence and self-sufficiency. Conversely, they simultaneously long for a relationship with the idealized other.

Rosegrant (1998 & 2000) described his work with Donald, who began therapy at the age of five and continued until he was 11 years-old. Rosegrant gave an account of the struggle, the failures and successes of working with Donald. He believed Donald remained within an “anal world” to defend “against Oedipal phase of the differences between the genders and between the generations” (2000, p. i). Just as Donald was denying the passage of time by hiding Rosegrant’s watch or refusing to leave when sessions were over and exhibiting denial by fantasizing about interchangeable male and female genitalia, so I found similar themes in Hernando’s language, behavior, and artwork. Therefore, Rosegrant’s articles were the basis for my psychoanalytic interpretation of work with Hernando.

**Case Study: Hernando’s Anal World**

Hernando was originally recommended for art therapy in the fall of 1998. During the 1999-2000 school year I saw Hernando for a total of 58 sessions. During this time, he used art and art therapy sessions to express some of his feelings of rage and anxiety.

By encouraging a patient’s artistic ability and the importance of being identified as an artist, Kramer (1973) noted that the patient could improve (cited in Ulman, 1986). This may be especially valid for a child with NPD. In Hernando’s case, the act of drawing and painting provided him with a way to gain mastery over materials. In
art therapy he was able to form a relationship with me. His artwork was a clear example of his competence which seemed to increase his confidence and improve his sense of self.

The Course of Treatment

The motivation for dwelling in an anal world is fear of the consequences of developing into the phallic-Oedipal world, with its implications of adulthood, separation, and competition.

John Rosegrant

During the early treatment stage, Hernando often was unable to sit still and might spend the entire session playing with his toy wrestling figures. As sessions progressed, Hernando told me how he liked art therapy: “You ask good questions and let me tell you about wrestling.” He went on to say that his art therapist last year, Sue, had “farted and sometimes peed in her pants” during their sessions. You and the Spanish teacher are my favorite teachers. I like to come to art therapy.”

Hernando continued to play with his wrestlers and apologized when he let one drop on top of the art materials. When asked why he apologized, he replied, “I am annoying you, by doing something that annoys you, by throwing my wrestler and not listening.”

As I pursued these statements further with Hernando, I noticed a change in his tone of voice and asked him, “Have you ever done something and someone told you that you were annoying him or her?”

He answered quietly, “Yes.”

“Do you think you could tell me what happened?”

“I don’t know.”

“How did it feel to have someone tell you that?”

“Stupid.”

“It is understandable that you might feel stupid if someone said something like that to you.”

“Yeah.” Hernando then picked up a tube of paint and said, “I used to use these with Sue.”
I told him it was okay to miss Sue and asked him to tell me more about the work he had done with her the year before. He seemed to enjoy remembering his time with her in art therapy. As in the 8th session described in the beginning of this article, Hernando’s anger at Sue for leaving him seemed evident in his comments about her supposed loss of bodily control. Control seemed to surface in many of my early sessions with Hernando. In this session he was testing me and had to be reminded several times that he was safe in the art room.

In Rosegrant’s article (1998), his client, Donald, seemed to thoroughly enjoy invoking anal related activity or comments to express his anger. Just as Hernando often acted out his aggressive feelings in his play with his wrestler figures, so Donald often acted out battles using toy soldiers. These battles were often between boys and girls, the artillery would consist of “pooping, farting, barfing, and peeing” (p. 246). Rosegrant explained, “Indeed, anger was the only emotion [Donald] could admit to” (p. 248).

While Donald at first felt nothing but scorn for Rosegrant, Hernando seemed to be anxious about gaining my approval in early sessions, telling me often that he liked art therapy and that I was one of his favorite teachers. Yet, as described in the opening session, his play with his wrestlers would often escalate to the point when I would need to set a limit. Hernando seemed to be purposely testing my tolerance level, as though he wanted me to become annoyed.

This trend of needing my satisfaction while correspondingly attempting to provoke me did continue throughout treatment. It seemed that Hernando may indeed have been expressing what Kernberg (1975) characterized as the basic contradiction an individual with NPD experiences in his or her relationships (cited in Russell, 1985).

Hernando’s ambivalence about using the school bathroom also surfaced many times. This seemed significantly important in light of Hernando’s history of eating and anal control issues, as well as his mother’s on-going intrusive enemas. While in session, Hernando would often express the need to use the bathroom, but then would adamantly refuse to do so when given the opportunity. Repeatedly he
would tell me that the bathroom next to the art therapy room was dirty and, if he did use it, I “could hear him.”

Perhaps this behavior was Hernando’s reaction to the intrusive enemas. His mother controlled his bodily wastes. It seemed Hernando had found a way to take control of his feces and urine by withholding them, even when it became uncomfortable. The connection between Hernando’s narcissistic injury and his bodily functions may be why anality is

... an arena for compensatory fantasies because anality is the arena for the first major power struggle with parents, thus the potentiality for the first experiences of power or humiliation and because the appreciation of the anal products themselves must change from idealization to devaluation” in the course of development. (Rosengrant, 1998, p. 254)

Hernando’s control over his body had been intruded upon at the stage when he should have been developing healthy narcissism. Hernando was denied control of his anal functions when the opportunity for him to gain praise and admiration for success instead became a source of embarrassment and humiliation because of failure.

As an adolescent, Hernando, like others his age, seemed to revisit issues of narcissistic self-identity and oedipal development. When an adolescent has not already integrated a sense of self and developed a successful oedipal triangular relationship with both parents, developmental narcissistic and oedipal issues might again resurface. (Beren, 1998b)

During this treatment stage, blatant anal discharge would appear periodically in Hernando’s artwork (Figures 2 & 3). This may indicate a need for release from the uncomfortable, pervasive desire for control. Art work became a safe way for Hernando to express direct emotion for a brief period of time. Almost always, Hernando would later throw out these pieces stating, “This is not really my good art.”

My suspicions of an enmeshed relationship between Hernando and his mother were further raised by her lack of follow-through regard-
ing Hernando's evaluations and treatment and her apparent identification with Hernando. Sharing a room with his ten-year-old sister seemed a further example of Hernando's mother's lack of awareness of his need to develop as a young man. Because Hernando's father was not consistently in their lives, it made me wonder what family role his mother perceived for Hernando. Kernberg (1975) stated that a "pathological grandiose self, crucial to the definition of NPD, may have derived from pathological object relationships as a defense against the child's experiences of severe, overwhelming frustration in the mother-child relationship" (cited in Russell, 1985, p. 141). Kernberg's idea seemed descriptive of Hernando.

According to Rosegrant (1998), to successfully progress to the oedipal stage when differences exist, the male child must realize he will never possess his mother or her genitalia. If he has not accepted the loss inherent in normal oedipal development, the male child may become fixated in a preoedipal, anally-oriented way of being.

In the anal stage, "the anus, buttocks, and feces are common to everyone, male and female, child and adult" (p. 252). In other words, gender differences are ignored.

As the year passed, Hernando increasingly referred to "burping, farting, and pooping" in our sessions, similar to Donald's reoccurring infatuation with digestive functions. This "fantasy of powerful excrements seems to exhibit an idealization of ... particularly... the
anal products” (p. 253). Just as Rosegrant (1998) described Donald’s development of “Farty Rules,” I was amazed to witness Hernando’s “The Art Fart Rules” (Figure 4). For both Donald and Hernando, the invention of their own rules seemed to allow each of them to rebel against and disregard conventions of the adult world.

Hernando’s gender confusion and fusing of the sexes became evident in his artwork from this period. During one session, he pulled a photograph out of his backpack of himself and Sue taken at the previous year’s art show. As he discussed the art show and his memory of working with Sue, he also took out a drawing he had done on his own, “The Creeper,” a monster who “creeps because he has no legs” (Figure 5). During the next
session, Hernando produced a similar monster figure, called “Glaciers” (Figure 6). He told me that Glaciers rose out of the water and was strong.

The gender of these two figures cannot be discerned. Although their faces and upper bodies are masculine the lower body looks as though each is wearing a skirt. The lack of legs and suggestion of genitalia may indicate Hernando’s unresolved castration anxiety. The figures appear to look down at the viewer, disapprovingly. I wondered if Hernando was depicting his overbearing mother. Arms are crossed in both figures in an unfriendly manner and faces seem to reflect contempt, contributing to an appearance of supremacy. Without the regulating influence of his absent father, a strong male figure, Hernando may have been confused about his own role as a growing male.

Hernando’s art production increased in number but declined in complexity during this phase of his treatment. Over the course of the next few months, Hernando quickly produced many pieces, given titles of the catchphrases and names of professional wrestlers (Figures 7, 8, & 9) perhaps indicative of feelings of omnipotence.

As the year progressed, it became increasingly difficult for Hernando to acknowledge the end of our sessions. Often he would turn the clock around, similar to Donald’s hiding Rosegrant’s watch, or tell me that my clock was wrong and we had more session time left. At times he swore and gave the finger to the
clock whenever I mentioned how much session time remained. I gave Hernando some control over the termination of the sessions by asking him to tell me when there was five minutes left, using his own watch. He accepted this task with pleasure, although he would sometimes declare that it was five or ten minutes earlier than it actually was. Usually, he acknowledged the end of his sessions without protest.

Just as Donald’s changed conception of time represented a “thread that [ran] through [his] transformation of anality” (Rosengrant, 2000, p. 20), Hernando’s acceptance of time passing and our session’s endings seemed to have been a sign of transformation, albeit slow, into growing maturity. Acceptance of our separations also changed as the year progressed. During sessions just prior to our first major separation he was often angry and anxious. He came to sessions unable to remain seated for any length of time. In the session right before the holiday, he entered the art therapy room a few minutes late and went into a swearing tirade against his teacher who had kept him in class a few minutes longer than usual. He asked that I close my eyes and he presented me with a gift of candy, telling me his mother had made him bring it. I viewed his requesting that I close my eyes as his putting me in a vulnerable state.
Similar to Donald’s early inability to admit he might like his therapist, so Hernando seemed unable to directly express any favorable feelings towards me when he gave me the candy. Attempts to ask Hernando about his feelings were quickly diverted with stories of wrestling or what he wanted for Christmas. To help him understand and accept our separation during the forthcoming school vacation, we looked at the calendar together, as he methodically counted how many days until Christmas vacation and his subsequent return to school and art therapy. This provided Hernandez with structure and the notion that separation was not interminable.

Just before Hernando’s 15th birthday I encouraged him to discuss with me his ideas about sexuality and increasing responsibility. He had told me that he and his friend had been discussing turning 15. His friend had told him, “It’s just like being 14.” However, Hernando had recognized that this was not entirely so, thus, he was able to discuss his fear and anxiety about his anticipated responsibility of getting a job and entering high school.

Furthermore, he often asked me if he had gotten taller or if I could see his mustache or beard. He seemed anxious at the thought of maturing but excitement coexisted with anxiety. Hernando’s fears of growing older were akin to mourning. Blos (1962) described the adolescent as he gives up the innocence of childhood and takes on the responsibility of adulthood. For Hernando, this seemed to be a step towards acceptance of growing up.

For Donald and Hernandez, the anal world presented an opportunity to ignore the future and past, as they were living only in “an anal now” (Rosegrant, 2000, p. 20). Donald was able to slowly reenter a world through play where linear time passed. Through his play Hernando, seemed to realize that time was passing. He seemed to accept growing older, that he needed to think about entering the world of teenagers, and eventually, the world of adults.

Hernando’s interactions with me lost some of their vindictiveness during this later stage of treatment. A similar phenomenon occurred with Donald and Rosegrant through their joint creation of “Repeatland,” where their sports play could go on and on without a
definitive end (Rosengrant, 2000, p. 20). Likewise, Hernando explored his feelings about time passing in sessions.

Hernando also seemed to be gaining an awareness of gender differences during this phase by recognizing his own sexuality as an adolescent male. He expressed ambivalence and confusion in regards to his sexual development, which often manifested itself in off-color remarks about homosexual feelings. However, he was beginning to accept differences between the genders and recognize that his role in the adult world would differ from that of the female. Admittedly, Hernando lagged behind peers in comprehension of what a relationship with girls would be like but he was showing an interest in girls and in a desire for a relationship with one.

Donald was four years younger than Hernando when his therapy ended, but it appeared he was able to gain recognition of gender differences through his identification with Rosegrant. Rosegrant (2000) noted verbal expressions of Donald’s homosexual love which he identified as attempts to “keep in touch with more advanced developmental levels” (p. 9). These remarks were similar to those Hernando had made.

Hernando’s art work came to a standstill during this period. He would enter sessions saying he wanted to draw, only to soon state he wasn’t in the mood. The therapeutic work he was doing may have drained his energy so that drawing with the likelihood that feelings would surface may have been unsettling. He seemed to have enough to handle in dealing with our separation and his still obvious need for control and mastery.

Although Donald seemed to have a greater ability for symbolization and to relate to others in developmentally more appropriate ways than Hernandez, he had instances when he would revert back to his anal behavior. However, these behaviors were competitive with age-mates. They discussed burping or farting contests, and Donald demonstrated for Rosegrant real prowess at burping exhibiting an overall progress for Donald.

Hernando, too, made some obvious steps towards mental health during the last stage of treatment. He actually used the bathroom dur-
ing one of our last sessions. He came to session in an anxious state, unable to sit still. He said that he had to go to the bathroom and then asked me, “Should I?” I told him it was his choice. He then asked me, “Can you hear me go?” and I answered that I would step outside of the art therapy room and wait in the office until he was done. Hernando declared, “Okay, I have to go,” and went to the door. He asked me to wait outside and I showed him where I would wait, telling him he could come and get me when he was ready to return to art therapy.

I was delighted when this occurred. In some ways this simple action seemed to represent Hernando’s symbolically saying to me that it was okay that we were separating and I will be okay without you.

**Conclusion**

Children who are exposed to enmeshed relationships with their primary caregiver may develop NPD. NPD in children often manifests itself as

... an omnipotent sense of self, refusal to acknowledge shortcomings and vulnerability, projection of self-owned experiences onto others, and demands for public affirmation of power grandiosity and refuse to recognize shortcomings and vulnerability. They project their internal experiences onto others, and demand public affirmation of power. (Bleiberg, 1994, p. 30)

Hernando exhibited some symptoms of NPD. Through further study of Rosegrant’s work with Donald, I was better able to discern the possible psychological origins of Hernando’s behaviors and was thus able to develop a treatment plan. Just as Donald had immersed himself in what Rosegrant (1998) called an anal world, where differentiation is at a minimum and competition nearly nonexistent, so, it seemed, had Hernando. Theoretically, because he probably did not receive what Kohut (1971) called “the gleam of his mother’s eye”, Hernando was unable to develop positive personal narcissism (cited in Russell, 1985, p.144). Hernando thus had difficulty seeing himself as separate and worthy. Hernando’s identity and self-esteem were
impaired. He exhibited an inability to successfully handle separation, an unnatural desire to be omnipotent, like the professional wrestlers he impersonated, and seemed humiliated and angry when there was any possibility of failure.

For Hernando, lack of differentiation between the generations and genders, confusion regarding the passage of time, his need for control and his inability to acknowledge and accept responsibility were indicative of NPD. Hernando’s artwork progressed from the omnipotence of monsters and superheroes to a realization and internalization of his imperfections. Although there was a steady decline in the quantity and complexity of Hernando’s artwork, art therapy allowed Hernando to risk expressing feelings. As the year progressed, he exposed himself to situations where he might fail. By the year’s end, he was able to identify his feelings, relate socially to peers and adults, he demonstrated a capacity for empathy, and an increased tolerance for separating from others.

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