Horney: Psychoanalytic Social Theory

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Please Mark These "True" or "False" as They Apply to You.

1. T F It’s very important to me to please other people.
2. T F When I feel distressed, I seek out an emotionally strong person to tell my troubles to.
3. T F I prefer routine more than change.
4. T F I enjoy being in a powerful leadership position.
5. T F I believe in and follow the advice: “Do unto others before they can do unto me.”
6. T F I enjoy being the life of the party.
7. T F It’s very important to me to be recognized for my accomplishments.
8. T F I enjoy seeing the achievements of my friends.
9. T F I usually end relationships when they begin to get too close.
10. T F It’s very difficult for me to overlook my own mistakes and personal flaws.

These questions represent 10 important needs proposed by Karen Horney. We discuss these items in the section on neurotic needs. Please know that marking an item in the direction of neurotic needs does not indicate that you are emotionally unstable or driven by neurotic needs.

Overview of Psychoanalytic Social Theory

The psychoanalytic social theory of Karen Horney (pronounced Horn-eye) was built on the assumption that social and cultural conditions, especially childhood experiences, are largely responsible for shaping personality. People who do not have their needs for love and affection satisfied during childhood develop basic hostility toward their parents and, as a consequence, suffer from basic anxiety. Horney theorized that people combat basic anxiety by adopting one of three fundamental styles of relating to others: (1) moving toward people, (2) moving against people, or (3) moving away from people. Normal individuals may use any of these modes of relating to other people, but neurotics are compelled to rigidly rely on only one. Their compulsive behavior generates a basic intrapsychic conflict that may take the form of either an idealized self-image or self-hatred. The idealized self-image is expressed as (1) neurotic search for glory, (2) neurotic claims, or (3) neurotic pride. Self-hatred is expressed as either self-contempt or alienation from self.

Although Horney’s writings are concerned mostly with the neurotic personality, many of her ideas can also be applied to normal individuals. This chapter looks at Horney’s basic theory of neurosis, compares her ideas to those of Freud, examines her views on feminine psychology, and briefly discusses her ideas on psychotherapy.

As with other personality theorists, Horney’s views on personality are a reflection of her life experiences. Bernard Paris (1994) wrote that “Horney’s insights were derived from her efforts to relieve her own pain, as well as that of her patients. If her suffering had been less intense, her insights would have been less profound” (p. xxv). We look now at the life of this often-troubled woman.
Biography of Karen Horney

The biography of Karen Horney has several parallels with the life of Melanie Klein (see Chapter 5). Each was born during the 1880s, the youngest child of a 50-year-old father and his second wife. Each had older siblings who were favored by the parents, and each felt unwanted and unloved. Also, each had wanted to become a physician, but only Horney fulfilled that ambition. Finally, both Horney and Klein engaged in an extended self-analysis—Horney’s, beginning with her diaries from age 13 to 26, continuing with her analysis by Karl Abraham, and culminating with her book *Self-Analysis* (Quinn, 1987).

Karen Danielsen Horney was born in Eilbek, a small town near Hamburg, Germany, on September 15, 1885. She was the only daughter of Berndt (Wackels) Danielsen, a sea captain, and Clothilda van Ronzelen Danielsen, a woman nearly 18 years younger than her husband. The only other child of this marriage was a son, about 4 years older than Karen. However, the old sea captain had been married earlier and had four other children, most of whom were adults by the time Horney was born. The Danielsen family was an unhappy one, in part because Karen’s older half-siblings turned their father against his second wife. Karen felt great hostility toward her stern, devoutly religious father and regarded him as a religious hypocrite. However, she idolized her mother, who both supported and protected her against the stern old sea captain. Nevertheless, Karen was not a happy child. She resented the favored treatment given to her older brother, and in addition, she worried about the bitterness and discord between her parents.

When she was 13, Horney decided to become a physician, but at that time no university in Germany admitted women. By the time she was 16, this situation had changed. So Horney—over the objections of her father, who wanted her to stay home and take care of the household—entered the gymnasium, a school that would lead to a university and then to medical school. On her own for the first time, Karen was to remain independent for the rest of her life. According to Paris (1994), however, Horney’s independence was mostly superficial. On a deeper level, she retained a compulsive need to merge with a great man. This morbid dependency, which typically included idealization and fear of inciting angry rejection, haunted Horney during her relationships with a series of men.

In 1906, she entered the University of Freiburg, becoming one of the first women in Germany to study medicine. There she met Oskar Horney, a political science student. Their relationship began as a friendship, but it eventually became a romantic one. After their marriage in 1909, the couple settled in Berlin, where Oskar, now with a PhD, worked for a coal company and Karen, not yet with an MD, specialized in psychiatry.

By this time, Freudian psychoanalysis was becoming well established, and Karen Horney became familiar with Freud’s writings. Early in 1910, she began an analysis with Karl Abraham, one of Freud’s close associates and a man who later analyzed Melanie Klein. After Horney’s analysis was terminated, she attended Abraham’s evening seminars, where she became acquainted with other psychoanalysts. By 1917, she had written her first paper on psychoanalysis, “The Technique of Psychoanalytic Therapy” (Horney, 1917/1968), which reflected the orthodox Freudian view and gave little indication of Horney’s subsequent independent thinking.
The early years of her marriage were filled with many notable personal experiences for Horney. Her father and mother, who were now separated, died within less than a year of each other; she gave birth to three daughters in 5 years; she received her MD degree in 1915 after 5 years of psychoanalysis; and, in her quest for the right man, she had several love affairs (Paris, 1994; Quinn, 1987).

After World War I, the Horneys lived a prosperous, suburban lifestyle with several servants and a chauffeur. Oskar did well financially while Karen enjoyed a thriving psychiatric practice. This idyllic scene, however, soon ended. The inflation and economic disorder of 1923 cost Oskar his job, and the family was forced to move back to an apartment in Berlin. In 1926, Karen and Oskar separated but did not officially divorce until 1938 (Paris, 1994).

The early years following her separation from Oskar were the most productive of Horney’s life. In addition to seeing patients and caring for her three daughters, she became more involved with writing, teaching, traveling, and lecturing. Her papers now showed important differences with Freudian theory. She believed that culture, not anatomy, was responsible for psychic differences between men and women. When Freud reacted negatively to Horney’s position, she became even more outspoken in her opposition.

In 1932, Horney left Germany for a position as associate director of the newly established Chicago Psychoanalytic Institute. Several factors contributed to her decision to immigrate—the anti-Jewish political climate in Germany (although Horney was not Jewish), increasing opposition to her unorthodox views, and an opportunity to extend her influence beyond Berlin. During the 2 years she spent in Chicago, she met Margaret Mead, John Dollard, and many of the same scholars who had influenced Harry Stack Sullivan (see Chapter 8). In addition, she renewed acquaintances with Erich Fromm and his wife, Frieda Fromm-Reichmann, whom she had known in Berlin. During the next 10 years, Horney and Fromm were close friends, greatly influencing one another and eventually becoming lovers (Hornstein, 2000).

After 2 years in Chicago, Horney moved to New York, where she taught at the New School for Social Research. While in New York, she became a member of the Zodiac group that included Fromm, Fromm-Reichmann, Sullivan, and others. Although Horney was a member of the New York Psychoanalytic Institute, she seldom agreed with the established members. Moreover, her book *New Ways in Psychoanalysis* (1939) made her the leader of an opposition group. In this book, Horney called for abandoning the instinct theory and placing more emphasis on ego and social influences. In 1941, she resigned from the institute over issues of dogma and orthodoxy and helped form a rival organization—the Association for the Advancement of Psychoanalysis (AAP). This new group, however, also quickly suffered from internal strife. In 1943, Fromm (whose intimate relationship with Horney had recently ended) and several others resigned from the AAP, leaving that organization without its strongest members. Despite this rift, the association continued, but under a new name—the Karen Horney Psychoanalytic Institute. In 1952, Horney established the Karen Horney Clinic.

In 1950, Horney published her most important work, *Neurosis and Human Growth*. This book sets forth theories that were no longer merely a reaction to Freud but rather were an expression of her own creative and independent thinking. After a short illness, Horney died of cancer on December 4, 1952. She was 65 years old.
Introduction to Psychoanalytic Social Theory

The early writings of Karen Horney, like those of Adler, Jung, and Klein, have a distinctive Freudian flavor. Like Adler and Jung, she eventually became disenchanted with orthodox psychoanalysis and constructed a revisionist theory that reflected her own personal experiences—clinical and otherwise.

Although Horney wrote nearly exclusively about neuroses and neurotic personalities, her works suggest much that is appropriate to normal, healthy development. Culture, especially early childhood experiences, plays a leading role in shaping human personality, either neurotic or healthy. Horney, then, agreed with Freud that early childhood traumas are important, but she differed from him in her insistence that social rather than biological forces are paramount in personality development.

Horney and Freud Compared

Horney criticized Freud’s theories on several accounts. First, she cautioned that strict adherence to orthodox psychoanalysis would lead to stagnation in both theoretical thought and therapeutic practice (Horney, 1937). Second, Horney (1937, 1939) objected to Freud’s ideas on feminine psychology, a subject we return to later. Third, she stressed the view that psychoanalysis should move beyond instinct theory and emphasize the importance of cultural influences in shaping personality. “Man is ruled not by the pleasure principle alone but by two guiding principles: safety and satisfaction” (Horney, 1939, p. 73). Similarly, she claimed that neuroses are not the result of instincts but rather of the person’s “attempt to find paths through a wilderness full of unknown dangers” (p. 10). This wilderness is created by society and not by instincts or anatomy.

Despite becoming increasingly critical of Freud, Horney continued to recognize his perceptive insights. Her main quarrel with Freud was not so much the accuracy of his observations but the validity of his interpretations. In general terms, she held that Freud’s explanations result in a pessimistic concept of humanity based on innate instincts and the stagnation of personality. In contrast, her view of humanity is an optimistic one and is centered on cultural forces that are amenable to change (Horney, 1950).

The Impact of Culture

Although Horney did not overlook the importance of genetic factors, she repeatedly emphasized cultural influences as the primary bases for both neurotic and normal personality development. Modern culture, she contended, is based on competition among individuals. “Everyone is a real or potential competitor of everyone else” (Horney, 1937, p. 284). Competitiveness and the basic hostility it spawns result in feelings of isolation. These feelings of being alone in a potentially hostile world lead to intensified needs for affection, which, in turn, cause people to overvalue love. As a result, many people see love and affection as the solution for all their problems. Genuine love, of course, can be a healthy, growth-producing experience; but the desperate need for love (such as that shown by Horney herself) provides a fertile ground
for the development of neuroses. Rather than benefiting from the need for love, neurotics strive in pathological ways to find it. Their self-defeating attempts result in low self-esteem, increased hostility, basic anxiety, more competitiveness, and a continuous excessive need for love and affection.

According to Horney, Western society contributes to this vicious circle in several respects. First, people of this society are imbued with the cultural teachings of kinship and humility. These teachings, however, run contrary to another prevailing attitude, namely, aggressiveness and the drive to win or be superior. Second, society’s demands for success and achievement are nearly endless, so that even when people achieve their material ambitions, additional goals are continually being placed before them. Third, Western society tells people that they are free, that they can accomplish anything through hard work and perseverance. In reality, however, the freedom of most people is greatly restricted by genetics, social position, and the competitiveness of others.

These contradictions—all stemming from cultural influences rather than biological ones—provide intrapsychic conflicts that threaten the psychological health of normal people and provide nearly insurmountable obstacles for neurotics.

The Importance of Childhood Experiences

Horney believed that neurotic conflict can stem from almost any developmental stage, but childhood is the age from which the vast majority of problems arise. A variety of traumatic events, such as sexual abuse, beatings, open rejection, or pervasive neglect, may leave their impressions on a child’s future development; but Horney (1937) insisted that these debilitating experiences can almost invariably be traced to lack of genuine warmth and affection. Horney’s own lack of love from her father and her close relationship with her mother must have had a powerful effect on her personal development as well as on her theoretical ideas.

Horney (1939) hypothesized that a difficult childhood is primarily responsible for neurotic needs. These needs become powerful because they are the child’s only means of gaining feelings of safety. Nevertheless, no single early experience is responsible for later personality. Horney cautioned that “the sum total of childhood experiences brings about a certain character structure, or rather, starts its development” (p. 152). In other words, the totality of early relationships molds personality development. “Later attitudes to others, then, are not repetitions of infantile ones but emanate from the character structure, the basis of which is laid in childhood” (p. 87).

Although later experiences can have an important effect, especially in normal individuals, childhood experiences are primarily responsible for personality development. People who rigidly repeat patterns of behavior do so because they interpret new experiences in a manner consistent with those established patterns.

Basic Hostility and Basic Anxiety

Horney (1950) believed that each person begins life with the potential for healthy development, but like other living organisms, people need favorable conditions for growth. These conditions must include a warm and loving environment yet one that is not overly permissive. Children need to experience both genuine love and healthy
discipline. Such conditions provide them with feelings of safety and satisfaction and permit them to grow in accordance with their real self.

Unfortunately, a multitude of adverse influences may interfere with these favorable conditions. Primary among these is the parents' inability or unwillingness to love their child. Because of their own neurotic needs, parents often dominate, neglect, overprotect, reject, or overindulge. If parents do not satisfy the child's needs for safety and satisfaction, the child develops feelings of basic hostility toward the parents. However, children seldom overtly express this hostility as rage; instead, they repress their hostility toward their parents and have no awareness of it. Repressed hostility then leads to profound feelings of insecurity and a vague sense of apprehension. This condition is called basic anxiety, which Horney (1950) defined as “a feeling of being isolated and helpless in a world conceived as potentially hostile” (p. 18). Earlier, she gave a more graphic description, calling basic anxiety “a feeling of being small, insignificant, helpless, deserted, endangered, in a world that is out to abuse, cheat, attack, humiliate, betray, envy” (Horney, 1937, p. 92).

Horney (1937, p. 75) believed that basic hostility and basic anxiety are “inextricably interwoven.” Hostile impulses are the principal source of basic anxiety, but basic anxiety can also contribute to feelings of hostility. As an example of how basic hostility can lead to anxiety, Horney (1937) wrote about a young man with repressed hostility who went on a hiking trip in the mountains with a young woman with whom he was deeply in love. His repressed hostility, however, also led him to become jealous of the woman. While walking on a dangerous mountain pass, the young man suddenly suffered a severe “anxiety attack” in the form of rapid heart rate and heavy breathing. The anxiety resulted from a seemingly inappropriate but conscious impulse to push the young woman over the edge of the mountain pass.

In this case, basic hostility led to severe anxiety, but anxiety and fear can also lead to strong feelings of hostility. Children who feel threatened by their parents develop a reactive hostility in defense of that threat. This reactive hostility, in turn, may create additional anxiety, thus completing the interactive circle between hostility and anxiety. Horney (1937) contended that “it does not matter whether anxiety or hostility has been the primary factor” (p. 74). The important point is that their reciprocal influence may intensify a neurosis without a person’s experiencing any additional outside conflict.

Basic anxiety itself is not a neurosis, but “it is the nutritive soil out of which a definite neurosis may develop at any time” (Horney, 1937, p. 89). Basic anxiety is constant and unrelenting, needing no particular stimulus such as taking a test in school or giving a speech. It permeates all relationships with others and leads to unhealthy ways of trying to cope with people.

Although she later amended her list of defenses against basic anxiety, Horney (1937) originally identified four general ways that people protect themselves against this feeling of being alone in a potentially hostile world. The first is affection, a strategy that does not always lead to authentic love. In their search for affection, some people may try to purchase love with self-effacing compliance, material goods, or sexual favors.

The second protective device is submissiveness. Neurotics may submit themselves either to people or to institutions such as an organization or a religion. Neurotics who submit to another person often do so in order to gain affection.
Neurotics may also try to protect themselves by striving for power, prestige, or possession. **Power** is a defense against the real or imagined hostility of others and takes the form of a tendency to dominate others; **prestige** is a protection against humiliation and is expressed as a tendency to humiliate others; **possession** acts as a buffer against destitution and poverty and manifests itself as a tendency to deprive others.

The fourth protective mechanism is **withdrawal**. Neurotics frequently protect themselves against basic anxiety either by developing an independence from others or by becoming emotionally detached from them. By psychologically withdrawing, neurotics feel that they cannot be hurt by other people.

These protective devices did not necessarily indicate a neurosis, and Horney believed that all people use them to some extent. They become unhealthy when people feel compelled to rely on them and are thus unable to employ a variety of interpersonal strategies. Compulsion, then, is the salient characteristic of all neurotic drives.

**Compulsive Drives**

Neurotic individuals have the same problems that affect normal people, except neurotics experience them to a greater degree. Everyone uses the various protective devices to guard against the rejection, hostility, and competitiveness of others. But whereas normal individuals are able to use a variety of defensive maneuvers in a somewhat useful way, neurotics compulsively repeat the same strategy in an essentially unproductive manner.

Horney (1942) insisted that neurotics do not enjoy misery and suffering. They cannot change their behavior by free will but must continually and compulsively protect themselves against basic anxiety. This defensive strategy traps them in a vicious circle in which their compulsive needs to reduce basic anxiety lead to behaviors that perpetuate low self-esteem, generalized hostility, inappropriate striving for power, inflated feelings of superiority, and persistent apprehension, all of which result in more basic anxiety.

**Neurotic Needs**

At the beginning of this chapter, we asked you to select either “True” or “False” for each of 10 items that might suggest a neurotic need. For each item except number 8, a “True” response parallels one of Horney’s neurotic needs. For number 8, a “False” answer is consistent with the neurotic need for self-centeredness. Remember that endorsing most or even all of these statements in the “neurotic” direction is no indication of emotional instability, but these items may give you a better understanding of what Horney meant by neurotic needs.

Horney tentatively identified 10 categories of **neurotic needs** that characterize neurotics in their attempts to combat basic anxiety. These needs were more specific than the four protective devices discussed earlier, but they describe the same basic defensive strategies. The 10 categories of neurotic needs overlapped one another, and a single person might employ more than one. Each of the following neurotic needs relates in some way or another to other people.
1. **The neurotic need for affection and approval.** In their quest for affection and approval, neurotics attempt indiscriminately to please others. They try to live up to the expectations of others, tend to dread self-assertion, and are quite uncomfortable with the hostility of others as well as the hostile feelings within themselves.

2. **The neurotic need for a powerful partner.** Lacking self-confidence, neurotics try to attach themselves to a powerful partner. This need includes an overvaluation of love and a dread of being alone or deserted. Horney’s own life story reveals a strong need to relate to a great man, and she had a series of such relationships during her adult life.

3. **The neurotic need to restrict one’s life within narrow borders.** Neurotics frequently strive to remain inconspicuous, to take second place, and to be content with very little. They downgrade their own abilities and dread making demands on others.

4. **The neurotic need for power.** Power and affection are perhaps the two greatest neurotic needs. The need for power is usually combined with the needs for prestige and possession and manifests itself as the need to control others and to avoid feelings of weakness or stupidity.

5. **The neurotic need to exploit others.** Neurotics frequently evaluate others on the basis of how they can be used or exploited, but at the same time, they fear being exploited by others.

6. **The neurotic need for social recognition or prestige.** Some people combat basic anxiety by trying to be first, to be important, or to attract attention to themselves.

7. **The neurotic need for personal admiration.** Neurotics have a need to be admired for what they are rather than for what they possess. Their inflated self-esteem must be continually fed by the admiration and approval of others.

8. **The neurotic need for ambition and personal achievement.** Neurotics often have a strong drive to be the best—the best salesperson, the best bowler, the best lover. They must defeat other people in order to confirm their superiority.

9. **The neurotic need for self-sufficiency and independence.** Many neurotics have a strong need to move away from people, thereby proving that they can get along without others. The playboy who cannot be tied down by any woman exemplifies this neurotic need.

10. **The neurotic need for perfection and unassailability.** By striving relentlessly for perfection, neurotics receive “proof” of their self-esteem and personal superiority. They dread making mistakes and having personal flaws, and they desperately attempt to hide their weaknesses from others.

**Neurotic Trends**

As her theory evolved, Horney began to see that the list of 10 neurotic needs could be grouped into three general categories, each relating to a person’s basic attitude toward self and others. In 1945, she identified the three basic attitudes, or neurotic trends, as (1) moving toward people, (2) moving against people, and (3) moving away from people.
Although these neurotic trends constitute Horney’s theory of neurosis, they also apply to normal individuals. There are, of course, important differences between normal and neurotic attitudes. Whereas normal people are mostly or completely conscious of their strategies toward other people, neurotics are unaware of their basic attitude; whereas normals are free to choose their actions, neurotics are forced to act; whereas normals experience mild conflict, neurotics experience severe and insoluble conflict; and whereas normals can choose from a variety of strategies, neurotics are limited to a single trend. Figure 6.1 shows Horney’s conception of the mutual influence of basic hostility and basic anxiety as well as both normal and neurotic defenses against anxiety.

People can use each of the neurotic trends to solve basic conflict, but unfortunately, these solutions are essentially nonproductive or neurotic. Horney (1950) used the term basic conflict because very young children are driven in all three directions—toward, against, and away from people.

In healthy children, these three drives are not necessarily incompatible. But the feelings of isolation and helplessness that Horney described as basic anxiety drive
some children to act compulsively, thereby limiting their repertoire to a single neurotic trend. Experiencing basically contradictory attitudes toward others, these children attempt to solve this basic conflict by making one of the three neurotic trends consistently dominant. Some children move toward people by behaving in a compliant manner as a protection against feelings of helplessness; other children move against people with acts of aggression in order to circumvent the hostility of others; and still other children move away from people by adopting a detached manner, thus alleviating feelings of isolation (Horney, 1945).

Moving Toward People
Horney’s concept of moving toward people does not mean moving toward them in the spirit of genuine love. Rather, it refers to a neurotic need to protect oneself against feelings of helplessness.

In their attempts to protect themselves against feelings of helplessness, compliant people employ either or both of the first two neurotic needs; that is, they desperately strive for affection and approval of others, or they seek a powerful partner who will take responsibility for their lives. Horney (1937) referred to these needs as “morbid dependency,” a concept that anticipated the term “codependency.”

The neurotic trend of moving toward people involves a complex of strategies. It is “a whole way of thinking, feeling, acting—a whole way of life” (Horney, 1945, p. 55). Horney also called it a philosophy of life. Neurotics who adopt this philosophy are likely to see themselves as loving, generous, unselfish, humble, and sensitive to other people’s feelings. They are willing to subordinate themselves to others, to see others as more intelligent or attractive, and to rate themselves according to what others think of them.

Moving Against People
Just as compliant people assume that everyone is nice, aggressive people take for granted that everyone is hostile. As a result, they adopt the strategy of moving against people. Neurotically aggressive people are just as compulsive as compliant people are, and their behavior is just as much prompted by basic anxiety. Rather than moving toward people in a posture of submissiveness and dependence, these people move against others by appearing tough or ruthless. They are motivated by a strong need to exploit others and to use them for their own benefit. They seldom admit their mistakes and are compulsively driven to appear perfect, powerful, and superior.

Five of the 10 neurotic needs are incorporated in the neurotic trend of moving against people. They include the need to be powerful, to exploit others, to receive recognition and prestige, to be admired, and to achieve. Aggressive people play to win rather than for the enjoyment of the contest. They may appear to be hard working and resourceful on the job, but they take little pleasure in the work itself. Their basic motivation is for power, prestige, and personal ambition.

In the United States, the striving for these goals is usually viewed with admiration. Compulsively aggressive people, in fact, frequently come out on top in many endeavors valued by American society. They may acquire desirable sex partners, high-paying jobs, and the personal admiration of many people. Horney (1945) said that it is not to the credit of American society that such characteristics are rewarded while love, affection, and the capacity for true friendship—the very qualities that aggressive people lack—are valued less highly.
Moving toward others and moving against others are, in many ways, polar opposites. The compliant person is compelled to receive affection from everyone, whereas the aggressive person sees everyone as a potential enemy. For both types, however, “the center of gravity lies outside the person” (Horney, 1945, p. 65). Both need other people. Compliant people need others to satisfy their feelings of helplessness; aggressive people use others as a protection against real or imagined hostility. With the third neurotic trend, in contrast, other people are of lesser importance.

**Moving Away From People**

In order to solve the basic conflict of isolation, some people behave in a detached manner and adopt a neurotic trend of moving away from people. This strategy is an expression of needs for privacy, independence, and self-sufficiency. Again, each of these needs can lead to positive behaviors, with some people satisfying these needs in a healthy fashion. However, these needs become neurotic when people try to satisfy them by compulsively putting emotional distance between themselves and other people.

Many neurotics find associating with others an intolerable strain. As a consequence, they are compulsively driven to move away from people, to attain autonomy and separateness. They frequently build a world of their own and refuse to allow anyone to get close to them. They value freedom and self-sufficiency and often appear to be aloof and unapproachable. If married, they maintain their detachment even from their spouse. They shun social commitments, but their greatest fear is to need other people.

All neurotics possess a need to feel superior, but detached persons have an intensified need to be strong and powerful. Their basic feelings of isolation can be
TABLE 6.1
Summary of Horney’s Neurotic Trends

<table>
<thead>
<tr>
<th>Neurotic Trends</th>
<th>Toward People</th>
<th>Against People</th>
<th>Away from People</th>
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<tbody>
<tr>
<td>Basic conflict</td>
<td>The Compliant Personality</td>
<td>The Aggressive Personality</td>
<td>The Detached Personality</td>
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<tr>
<td>or source of</td>
<td>Feelings of helplessness</td>
<td>Protection against hostility of others</td>
<td>Feelings of isolation</td>
</tr>
<tr>
<td>neurotic trend</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>2. Powerful partner</td>
<td>5. Exploitation</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal analog</td>
<td>Friendly, loving</td>
<td>Ability to survive in a competitive society</td>
<td>Autonomous and serene</td>
</tr>
</tbody>
</table>

In summary, each of the three neurotic trends has an analogous set of characteristics that describe normal individuals. In addition, each of 10 neurotic needs can be easily placed within the three neurotic trends. Table 6.1 summarizes the three neurotic trends, the basic conflicts that give rise to them, the outstanding characteristics of each, the 10 neurotic needs that compose them, and the three analogous traits that characterize normal people.

Intrapsychic Conflicts

The neurotic trends flow from basic anxiety, which in turn, stems from a child’s relationships with other people. To this point, our emphasis has been on culture and interpersonal conflict. However, Horney did not neglect the impact of intrapsychic fac-
tors in the development of personality. As her theory evolved, she began to place greater emphasis on the inner conflicts that both normal and neurotic individuals experience. Intrapsychic processes originate from interpersonal experiences; but as they become part of a person’s belief system, they develop a life of their own—an existence separate from the interpersonal conflicts that gave them life.

This section looks at two important intrapsychic conflicts: the idealized self-image and self-hatred. Briefly, the idealized self-image is an attempt to solve conflicts by painting a godlike picture of oneself. Self-hatred is an interrelated yet equally irrational and powerful tendency to despise one’s real self. As people build an idealized image of their self, their real self lags farther and farther behind. This gap creates a growing alienation between the real self and the idealized self and leads neurotics to hate and despise their actual self because it falls so short in matching the glorified self-image (Horney, 1950).

The Idealized Self-Image

Horney believed that human beings, if given an environment of discipline and warmth, will develop feelings of security and self-confidence and a tendency to move toward self-realization. Unfortunately, early negative influences often impede people’s natural tendency toward self-realization, a situation that leaves them with feelings of isolation and inferiority. Added to this failure is a growing sense of alienation from themselves.

Feeling alienated from themselves, people need desperately to acquire a stable sense of identity. This dilemma can be solved only by creating an idealized self-image, an extravagantly positive view of themselves that exists only in their personal belief system. These people endow themselves with infinite powers and unlimited capabilities; they see themselves as “a hero, a genius, a supreme lover, a saint, a god” (Horney, 1950, p. 22). The idealized self-image is not a global construction. Neurotics glorify and worship themselves in different ways. Compliant people see themselves as good and saintly; aggressive people build an idealized image of themselves as strong, heroic, and omnipotent; and detached neurotics paint their self-portraits as wise, self-sufficient, and independent.

As the idealized self-image becomes solidified, neurotics begin to believe in the reality of that image. They lose touch with their real self and use the idealized self as the standard for self-evaluation. Rather than growing toward self-realization, they move toward actualizing their idealized self.

Horney (1950) recognized three aspects of the idealized image: (1) the neurotic search for glory, (2) neurotic claims, and (3) neurotic pride.

The Neurotic Search for Glory

As neurotics come to believe in the reality of their idealized self, they begin to incorporate it into all aspects of their lives—their goals, their self-concept, and their relations with others. Horney (1950) referred to this comprehensive drive toward actualizing the ideal self as the neurotic search for glory.

In addition to self-idealization, the neurotic search for glory includes three other elements: the need for perfection, neurotic ambition, and the drive toward a vindictive triumph.
The need for perfection refers to the drive to mold the whole personality into the idealized self. Neurotics are not content to merely make a few alterations; nothing short of complete perfection is acceptable. They try to achieve perfection by erecting a complex set of “shoulds” and “should nots.” Horney (1950) referred to this drive as the tyranny of the should. Striving toward an imaginary picture of perfection, neurotics unconsciously tell themselves: “Forget about the disgraceful creature you actually are; this is how you should be” (p. 64).

A second key element in the neurotic search for glory is neurotic ambition, that is, the compulsive drive toward superiority. Although neurotics have an exaggerated need to excel in everything, they ordinarily channel their energies into those activities that are most likely to bring success. This drive, therefore, may take several different forms during a person’s lifetime (Horney, 1950). For example, while still in school, a girl may direct her neurotic ambition toward being the best student in school. Later, she may be driven to excel in business or to raise the very best show dogs. Neurotic ambition may also take a less materialistic form, such as being the most saintly or most charitable person in the community.

The third aspect of the neurotic search for glory is the drive toward a vindictive triumph, the most destructive element of all. The need for a vindictive triumph may be disguised as a drive for achievement or success, but “its chief aim is to put others to shame or defeat them through one’s very success; or to attain the power . . . to inflict suffering on them—mostly of a humiliating kind” (Horney, 1950, p. 27). Interestingly, in Horney’s personal relationship with men, she seemed to take pleasure in causing them to feel ashamed and humiliated (Hornein, 2000).

The drive for a vindictive triumph grows out of the childhood desire to take revenge for real or imagined humiliations. No matter how successful neurotics are in vindictively triumphing over others, they never lose their drive for a vindictive triumph—instead, they increase it with each victory. Every success raises their fear of defeat and increases their feelings of grandeur, thus solidifying their need for further vindictive triumphs.

Neurotic Claims

A second aspect of the idealized image is neurotic claims. In their search for glory, neurotics build a fantasy world—a world that is out of sync with the real world. Believing that something is wrong with the outside world, they proclaim that they are special and therefore entitled to be treated in accordance with their idealized view of themselves. Because these demands are very much in accord with their idealized self-image, they fail to see that their claims of special privilege are unreasonable.

Neurotic claims grow out of normal needs and wishes, but they are quite different. When normal wishes are not fulfilled, people become understandably frustrated; but when neurotic claims are not met, neurotics become indignant, bewildered, and unable to comprehend why others have not granted their claims. The difference between normal desires and neurotic claims is illustrated by a situation in which many people are waiting in line for tickets for a popular movie. Most people near the end of the line might wish to be up front, and some of them may even try some ploy to get a better position. Nevertheless, these people know that they don’t really deserve to cut ahead of others. Neurotic people, on the other hand, truly
believe that they are entitled to be near the front of the line, and they feel no guilt or remorse in moving ahead of others.

**Neurotic Pride**
The third aspect of an idealized image is *neurotic pride*, a false pride based not on a realistic view of the true self but on a spurious image of the idealized self. Neurotic pride is qualitatively different from healthy pride or realistic self-esteem. Genuine self-esteem is based on realistic attributes and accomplishments and is generally expressed with quiet dignity. Neurotic pride, on the other hand, is based on an idealized image of self and is usually loudly proclaimed in order to protect and support a glorified view of one’s self (Horney, 1950).

Neurotics imagine themselves to be glorious, wonderful, and perfect, so when others fail to treat them with special consideration, their neurotic pride is hurt. To prevent the hurt, they avoid people who refuse to yield to their neurotic claims, and instead, they try to become associated with socially prominent and prestigious institutions and acquisitions.

**Self-Hatred**
People with a neurotic search for glory can never be happy with themselves because when they realize that their real self does not match the insatiable demands of their idealized self, they will begin to hate and despise themselves:

The glorified self becomes not only a *phantom* to be pursued; it also becomes a measuring rod with which to measure his actual being. And this actual being is such an embarrassing sight when viewed from the perspective of a godlike perfection that he cannot but despise it. (Horney, 1950, p. 110)

Horney (1950) recognized six major ways in which people express self-hatred. First, self-hatred may result in *relentless demands on the self*, which are exemplified
by the tyranny of the should. For example, some people make demands on themselves that don’t stop even when they achieve a measure of success. These people continue to push themselves toward perfection because they believe they should be perfect.

The second mode of expressing self-hatred is merciless self-accusation. Neurotics constantly berate themselves. “If people only knew me, they would realize that I’m pretending to be knowledgeable, competent, and sincere. I’m really a fraud, but no one knows it but me.” Self-accusation may take a variety of forms—from obviously grandiose expressions, such as taking responsibility for natural disasters, to scrupulously questioning the virtue of their own motivations.

Third, self-hatred may take the form of self-contempt, which might be expressed as belittling, disparaging, doubting, discrediting, and ridiculing oneself. Self-contempt prevents people from striving for improvement or achievement. A young man may say to himself, “You conceited idiot! What makes you think you can get a date with the best-looking woman in town?” A woman may attribute her successful career to “luck.” Although these people may be aware of their behavior, they have no perception of the self-hatred that motivates it.

A fourth expression of self-hatred is self-frustration. Horney (1950) distinguished between healthy self-discipline and neurotic self-frustration. The former involves postponing or forgoing pleasurable activities in order to achieve reasonable goals. Self-frustration stems from self-hatred and is designed to actualize an inflated self-image. Neurotics are frequently shackled by taboos against enjoyment. “I don’t deserve a new car.” “I must not wear nice clothes because many people around the world are in rags.” “I must not strive for a better job because I’m not good enough for it.”

Fifth, self-hatred may be manifested as self-torment, or self-torture. Although self-torment can exist in each of the other forms of self-hatred, it becomes a separate category when people’s main intention is to inflict harm or suffering on themselves. Some people attain masochistic satisfaction by anguishing over a decision, exaggerating the pain of a headache, cutting themselves with a knife, starting a fight that they are sure to lose, or inviting physical abuse.

The sixth and final form of self-hatred is self-destructive actions and impulses, which may be either physical or psychological, conscious or unconscious, acute or chronic, carried out in action or enacted only in the imagination. Overeating, abusing alcohol and other drugs, working too hard, driving recklessly, and suicide are common expressions of physical self-destruction. Neurotics may also attack themselves psychologically, for example, quitting a job just when it begins to be fulfilling, breaking off a healthy relationship in favor of a neurotic one, or engaging in promiscuous sexual activities.

Horney (1950) summarized the neurotic search for glory and its attendant self-hatred with these descriptive words:

Surveying self-hate and its ravaging force, we cannot help but see in it a great tragedy, perhaps the greatest tragedy of the human mind. Man in reaching out for the Infinite and Absolute also starts destroying himself. When he makes a pact with the devil, who promises him glory, he has to go to hell—to the hell within himself. (p. 154)
Feminine Psychology

As a woman trained in the promasculine psychology of Freud, Horney gradually realized that the traditional psychoanalytic view of women was skewed. She then set forth her own theory, one that rejected several of Freud’s basic ideas.

For Horney, psychic differences between men and women are not the result of anatomy but rather of cultural and social expectations. Men who subdue and rule women and women who degrade or envy men do so because of the neurotic competitiveness that is rampant in many societies. Horney (1937) insisted that basic anxiety is at the core of men’s need to subjugate women and women’s wish to humiliate men.

Although Horney (1939) recognized the existence of the Oedipus complex, she insisted that it was due to certain environmental conditions and not to biology. If it were the result of anatomy, as Freud contended, then it would be universal (as Freud indeed believed). However, Horney (1967) saw no evidence for a universal Oedipus complex. Instead, she held that it is found only in some people and is an expression of the neurotic need for love. The neurotic need for affection and the neurotic need for aggression usually begin in childhood and are two of the three basic neurotic trends. A child may passionately cling to one parent and express jealousy toward the other, but these behaviors are means of alleviating basic anxiety and not manifestations of an anatomically based Oedipus complex. Even when there is a sexual aspect to these behaviors, the child’s main goal is security, not sexual intercourse.

Horney (1939) found the concept of penis envy even less tenable. She contended that here is no more anatomical reason why girls should be envious of the penis than boys should desire a breast or a womb. In fact, boys sometimes do express a desire to have a baby, but this desire is not the result of a universal male “womb envy.”

Horney agreed with Adler that many women possess a masculine protest; that is, they have a pathological belief that men are superior to women. This perception easily leads to the neurotic desire to be a man. The desire, however, is not an expression of penis envy but rather “a wish for all those qualities or privileges which in our culture are regarded as masculine” (Horney, 1939, p. 108). (This view is nearly identical to that expressed by Erikson and discussed in Chapter 9).

In 1994, Bernard J. Paris published a talk that Horney had delivered in 1935 to a professional and business women’s club in which she summarized her ideas on feminine psychology. By that time Horney was less interested in differences between men and women than in a general psychology of both genders. Because culture and society are responsible for psychological differences between women and men, Horney felt that “it was not so important to try to find the answer to the question about differences as to understand and analyze the real significance of this keen interest in feminine ‘nature’” (Horney, 1994, p. 233). Horney concluded her speech by saying that once and for all we should stop bothering about what is feminine and what is not. Such concerns only undermine our energies. Standards of masculinity and femininity are artificial standards. All that we definitely know at present about sex differences is that we do not know what they are. Scientific differences between the two sexes certainly exist, but we shall never be able to discover what they are until we have first developed our potentialities as human beings. Paradoxical as it
Psychotherapy

Horney believed that neuroses grow out of basic conflict that usually begins in childhood. As people attempt to solve this conflict, they are likely to adopt one of the three neurotic trends: namely, moving toward, against, or away from others. Each of these tactics can produce temporary relief, but eventually they drive the person farther away from actualizing the real self and deeper into a neurotic spiral (Horney, 1950).

The general goal of Horneyian therapy is to help patients gradually grow in the direction of self-realization. More specifically, the aim is to have patients give up their idealized self-image, relinquish their neurotic search for glory, and change self-hatred to an acceptance of the real self. Unfortunately, patients are usually convinced that their neurotic solutions are correct, so they are reluctant to surrender their neurotic trends. Even though patients have a strong investment in maintaining the status quo, they do not wish to remain ill. They find little pleasure in their sufferings and would like to be free of them. Unfortunately, they tend to resist change and cling to those behaviors that perpetuate their illness. The three neurotic trends can be cast in favorable terms such as “love,” “mastery,” or “freedom.” Because patients usually see their behaviors in these positive terms, their actions appear to them to be healthy, right, and desirable (Horney, 1942, 1950).

The therapist’s task is to convince patients that their present solutions are perpetuating rather than alleviating the core neurosis, a task that takes much time and hard work. Patients may look for quick cures or solutions, but only the long, laborious process of self-understanding can effect positive change. Self-understanding must go beyond information; it must be accompanied by an emotional experience. Patients must understand their pride system, their idealized image, their neurotic search for glory, their self-hatred, their shoulds, their alienation from self, and their conflicts. Moreover, they must see how all these factors are interrelated and operate to preserve their basic neurosis.

Although a therapist can help encourage patients toward self-understanding, ultimately successful therapy is built on self-analysis (Horney, 1942, 1950). Patients must understand the difference between their idealized self-image and their real self. Fortunately, people possess an inherent curative force that allows them to move inevitably in the direction of self-realization once self-understanding and self-analysis are achieved.

As to techniques, Horneyian therapists use many of the same ones employed by Freudian therapists, especially dream interpretation and free association. Horney saw dreams as attempts to solve conflicts, but the solutions can be either neurotic or healthy. When therapists provide a correct interpretation, patients are helped toward a better understanding of their real self. “From dreams . . . the patient can catch a glimpse, even in the initial phase of analysis, of a world operating within him which is peculiarly his own and which is more true of his feelings than the world of his illusions” (Horney, 1950, p. 349).

With the second major technique, free association, patients are asked to say everything that comes to mind regardless of how trivial or embarrassing it may seem (Horney, 1987). They are also encouraged to express whatever feelings may arise.
from the associations. As with dream interpretation, free association eventually reveals patients’ idealized self-image and persistent but unsuccessful attempts at accomplishing it.

When therapy is successful, patients gradually develop confidence in their ability to assume responsibility for their psychological development. They move toward self-realization and all those processes that accompany it; they have a deeper and clearer understanding of their feelings, beliefs, and wishes; they relate to others with genuine feelings instead of using people to solve basic conflicts; at work, they take a greater interest in the job itself rather than seeing it as a means to perpetuate a neurotic search for glory.

Related Research
Horney’s psychoanalytic social theory has not directly inspired a great deal of research in modern personality psychology. Her musings on neurotic trends however are quite relevant to much of the research being conducted today on neuroticism.

The Neurotic Compulsion to Avoid the Negative
Most research on neuroticism highlights its negative side. High levels of neuroticism are associated with experiencing more negative emotion and being more likely to develop generalized anxiety disorder (Borkovec & Sharpless, 2004). Neuroticism is also associated with setting avoidance goals, in which a person avoids negative outcomes, rather than setting approach goals in which a person approaches positive outcomes (Elliot & Thrash, 2002). In Horney’s (1942) view, neurotics are compulsively protecting themselves against basic anxiety and this defensive strategy traps them in a negative cycle. Setting goals that are framed as approaching positive outcomes is generally considered to be a healthier way of life than being preoccupied with avoiding negative outcomes, but neurotics are generally unable to break free from their avoidance mindset (Elliot & Thrash, 2002). These findings would not be too surprising to Horney as they fit quite well into her model of neurotic trends. Whether it’s the constant battle with basic anxiety or just being stuck in a frame of mind focused on avoiding negative outcomes, neurotic defenses are not the path to a strong sense of positive well-being.

Can Neuroticism Ever Be a Good Thing?
Horney’s theory, as well as most of the work in personality psychology, paints neuroticism rather negatively. Based on the research reviewed in the previous section on neuroticism and avoidance goals and the associated negative outcomes, the negative bias toward neuroticism is understandable. Some recent research has begun investigating conditions under which neuroticism might not be all negative and, ironically, may actually have some benefits.

Michael Robinson and colleagues (Robinson, Ode, Wilkowski, & Amodio, 2007) asked the question “How could one be a successful neurotic?” For sure it’s tough to be a successful neurotic. People high in neuroticism are constantly drawn toward avoidance goals and dealing with basic anxiety by using all the detrimental
neurotic defenses described by Horney. But there may be some cases where neuroti-
cism is good, specifically in detecting threats. Neurotics are predisposed to avoid
threats (and any negative outcome). Therefore, Robinson and colleagues designed a
study to investigate the relationship between neuroticism, recognition of threats, and
mood. They predicted that for those high in neuroticism, the ability to accurately rec-
ognize threats in the environment would be related to decreased negative mood. In
other words, the neurotic sensitivity to threat would serve a purpose in that such peo-
ple could recognize problems, and presumably avoid them, and that successful
avoidance would make them feel better.

To test this hypothesis, Robinson and colleagues (2007) had 181 students
come into the lab and complete a self-report measure of neuroticism and then engage
in a computer task that measured their ability to accurately detect threats and as-
essed what they did upon making an error in detecting a threat. If a person makes
an error, the adaptive thing to do would be to slow down and assess the situation
more carefully. But not everyone does this, and the computer task used by Robinson
and colleagues measured whether people exhibited the appropriate response to mak-
ing an error. The computer task consisted of a word appearing on a computer screen
and then the participant, as quickly as possible, had to determine whether or not the
word represented a threat. For example, the word “stench” does not represent a
threat, but the word “knife” does. The computer kept track of how long participants
took at deciding whether or not the word was a threat and whether or not the partic-
ipant correctly identified the threat. Additionally, when the participant made an error,
the computer also kept track of how long a participant took to determine whether or
not the next word to appear on the screen represented a threat. Once the researchers
had each participant’s neuroticism score and a good measure of how they detected
threats and reacted to errors, participants were asked to keep track of their mood over
the next 7 days.

Interestingly, Robinson and colleagues found that there actually is a way to be
a “successful neurotic.” Specifically, they discovered that for those who are predis-
posed toward being neurotic, the ability to react adaptively to errors (i.e., to slow
down and think carefully) while assessing threat was related to experiencing less
negative mood in daily life (Robinson et al., 2007).

Generally speaking, it may not be a positive thing to be neurotic and constantly
obsessed with avoiding negative outcomes, but there is only so much about our per-
sonality that is in our control. Neurotic people cannot simply wake up one day and
stop being neurotic. Neurotic trends and related defenses outlined by Horney are sta-
ble and durable aspects of individuals’ personalities that are not likely to change sud-
denly. Therefore, it is important to realize that, though much research shows the dark
side of neuroticism, it is not all bad news. Many neurotic people are quite skilled at
avoiding negative outcomes, and the avoidance of these outcomes does indeed make
them feel better on a daily basis.

Critique of Horney

Horney’s social psychoanalytic theory provides interesting perspectives on the na-
ture of humanity, but it suffers from lack of current research that might support her
suppositions. The strength of Horney’s theory is her lucid portrayal of the neurotic
personality. No other personality theorist has written so well (or so much) about neuroses. Her comprehensive descriptions of neurotic personalities provide an excellent framework for understanding unhealthy people. However, her nearly exclusive concern with neurotics is a serious limitation to her theory. Her references to the normal or healthy personality are general and not well explicated. She believed that people by their very nature will strive toward self-realization, but she suggested no clear picture of what self-realization would be.

Horney’s theory falls short on its power both to generate research and to submit to the criterion of falsifiability. Speculations from the theory do not easily yield testable hypotheses and therefore lack both verifiability and falsifiability. Horney’s theory was based largely on clinical experiences that put her in contact mostly with neurotic individuals. To her credit, she was reluctant to make specific assumptions about psychologically healthy individuals. Because her theory deals mostly with neurotics, it is rated high on its ability to organize knowledge of neurotics but very low on its capacity to explain what is known about people in general.

As a guide to action, Horney’s theory fares somewhat better. Teachers, therapists, and especially parents can use her assumptions concerning the development of neurotic trends to provide a warm, safe, and accepting environment for their students, patients, or children. Beyond these provisions, however, the theory is not specific enough to give the practitioner a clear and detailed course of action. On this criterion, the theory receives a low rating.

Is Horney’s theory internally consistent, with clearly defined terms used uniformly? In Horney’s book *Neurosis and Human Growth* (1950), her concepts and formulations are precise, consistent, and unambiguous. However, when all her works are examined, a different picture emerges. Through the years, she used terms such as “neurotic needs” and “neurotic trends” sometimes separately and sometimes interchangeably. Also, the terms “basic anxiety” and “basic conflict” were not always clearly differentiated. These inconsistencies render her entire work somewhat inconsistent, but again, her final theory (1950) is a model of lucidity and consistency.

Another criterion of a useful theory is parsimony, and Horney’s final theory, as expressed in the last chapter of *Neurosis and Human Growth* (Horney, 1950, Chap. 15), would receive a high mark on this standard. This chapter, which provides a useful and concise introduction to Horney’s theory of neurotic development, is relatively simple, straightforward, and clearly written.

**Concept of Humanity**

Horney’s concept of humanity was based almost entirely on her clinical experiences with neurotic patients; therefore, her view of human personality is strongly colored by her concept of neurosis. According to Horney, the prime difference between a healthy person and a neurotic individual is the degree of compulsivity with which each moves toward, against, or away from people.

The compulsive nature of neurotic trends suggests that Horney’s concept of humanity is deterministic. However, a healthy person would have a large element
of free choice. Even a neurotic individual, through psychotherapy and hard work, can wrest some control over those intrapsychic conflicts. For this reason, Horney’s psychoanalytic social theory is rated slightly higher on *free choice* than on determinism.

On the same basis, Horney’s theory is somewhat more *optimistic* than pessimistic. Horney believed that people possess inherent curative powers that lead them toward self-realization. If basic anxiety (the feeling of being alone and helpless in a potentially hostile world) can be avoided, people will feel safe and secure in their interpersonal relations and consequently will develop healthy personalities.

My own belief is that man has the capacity as well as the desire to develop his potentialities and become a decent human being, and that these deteriorate if his relationship to others and hence to himself is, and continues to be, disturbed. I believe that man can change and go on changing as long as he lives. (Horney, 1945, p. 19)

On the dimension of *causality versus teleology*, Horney adopted a middle position. She stated that the natural goal for people is self-realization, but she also believed that childhood experiences can block that movement. “The past in some way or other is always contained in the present” (Horney, 1939, p. 153). Included in people’s past experiences, however, is the formation of a philosophy of life and a set of values that give both their present and their future some direction.

Although Horney adopted a middle stance regarding *conscious versus unconscious motivation*, she believed that most people have only limited awareness of their motives. Neurotics, especially, have little understanding of themselves and do not see that their behaviors guarantee the continuation of their neuroses. They mislabel their personal characteristics, couching them in socially acceptable terms, while remaining largely unaware of their basic conflict, their self-hate, their neurotic pride and neurotic claims, and their need for a vindictive triumph.

Horney’s concept of personality strongly emphasized *social influences* more than biological ones. Psychological differences between men and women, for example, are due more to cultural and societal expectations than to anatomy. To Horney, the Oedipus complex and penis envy are not inevitable consequences of biology but rather are shaped by social forces. Horney did not neglect biological factors completely, but her main emphasis was on social influences.

Because Horney’s theory looks almost exclusively at neuroses, it tends to highlight *similarities among people* more than uniqueness. Not all neurotics are alike, of course, and Horney described three basic types—the helpless, the hostile, and the detached. However, she placed little emphasis on individual differences within each of these categories.

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**Key Terms and Concepts**

- Horney insisted that *social and cultural influences* were more important than biological ones.
- Children who lack warmth and affection fail to meet their *needs for safety and satisfaction*. 
These feelings of isolation and helplessness trigger basic anxiety, or feelings of isolation and helplessness in a potentially hostile world.

The inability of people to use different tactics in their relationships with others generates basic conflict: that is, the incompatible tendency to move toward, against, and away from people.

Horney called the tendencies to move toward, against, or away from people the three neurotic trends.

Healthy people solve their basic conflict by using all three neurotic trends, whereas neurotics compulsively adopt only one of these trends.

The three neurotic trends (moving toward, against, or away from people) are a combination of 10 neurotic trends that Horney had earlier identified.

Both healthy and neurotic people experience intrapsychic conflicts that have become part of their belief system. The two major intrapsychic conflicts are the idealized self-image and self-hatred.

The idealized self-image results in neurotics’ attempts to build a godlike picture of themselves.

Self-hatred is the tendency for neurotics to hate and despise their real self.

Any psychological differences between men and women are due to cultural and social expectations and not to biology.

The goal of Horneyian psychotherapy is to bring about growth toward actualization of the real self.