



Was Queen Jezebel intelligent? Insight in individuals with histrionic personality disorder¹

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Małgorzata Starzomska-Romanowska^a ✉

^a *Małgorzata Starzomska-Romanowska, Phd hab., <https://orcid.org/0000-0002-9540-2402>,
Institute of Psychology, Faculty of Christian Philosophy, Cardinal Stefan Wyszyński University in Warsaw*
✉ eltram@life.pl

Abstract: In this article, the author attempts to answer the question of whether it is possible to speak of insight in individuals with histrionic personality disorder. In principle, this question is rhetorical, since researchers, and not only psychoanalytic ones, have long had no doubt that the answer to this question is „no”. However, it is worth asking the question again and answering it in the context of a very specific group of women whose symptoms manifest themselves in places of religious worship. People associated with theology, especially clergymen, describe such people as functioning in the „spirit of Jezebel,” the amoral queen described in the Bible. The author of the article attempts to look at this phenomenon with the help of an imposing analogy of the characterization of Jezebel in women with histrionic personality disorder. Highlighting the danger that these individuals pose in places of worship in the area of respect for the sacrum, the author tries to explain the motivations for their actions. This allows us to look at them as individuals who hide inner despair under the mask of unconscious defenses, most often in the form of sexualizing even formal relationships.

Keywords: histrionic personality disorder, sacrum, Queen Jezebel, countertransference, massive repression

Introduction

In the Old Testament Jezebel is described as a princess from Sidon worshipping the gods of weather and fertility, Baal and Ashera, who married Ahab, the King of Israel. She enticed Ahab to adopt her religion, as well as to force his subjects to follow suit. Jezebel had the prophets of God violently purged and brought the prophets of Baal in their place. The only one to survive was Elijah, who later defeated the prophets of Baal on Mount Carmel. The enraged Jezebel wanted to kill Elijah, and so the prophet had to go into hiding. Jezebel persuaded Ahab to murder Naboth in order to possess his vineyard. Elijah predicted her violent death, and indeed she was defenestrated upon Jehu's orders (New Revised Standard Version Catholic Edition). In the New Testament, Queen Jezebel appears as a pseudoprophetess enticing Christians to turn against God and commit spiritual immorality

as well as eat food sacrificed to idols (Revelation, 2, 20-23). The name Jezebel has become synonymous with licentiousness, while she herself is considered an archetype of femme fatale. Jezebel remains a moral and political prototype of a wicked, seductive, and greedy woman engaging in machinations behind the back of a man in power. The Epistle to the Ephesians contains the following words of Jesus “These things saith the Son of God, who hath his eyes like unto a flame of fire, and his feet are like fine brass; I know thy works, and charity, and service, and faith, and thy patience, and thy works; and the last to be more than the first. Notwithstanding I have a few things against thee, because thou sufferest that woman Jezebel, which calleth herself a prophetess, to teach and to seduce my servants to commit [spiritual] fornication, and to eat things sacrificed unto idols.”

¹ Article in Polish language: Czy królowa Jezebel była inteligentna? Wgląd u osób z histrionicznym zaburzeniem osobowości, https://www.stowarzyszeniefidesetratio.pl/fer/2023_4Starz.pdf

Jezebel's personality brings to mind two nosological entities: narcissistic personality disorder (NPD) and histrionic personality disorder (HPD), although one should also keep in mind that her activity was predominantly associated with religious cult and sites devoted to it. Although undoubtedly one can discern clear narcissistic traits, especially in her amoral drive for power and lack of empathy, in this text I would like to focus on HPD, because using seduction to attain one's goals is one of the major traits of the abovementioned disorder. While in the old Testament this mode of Jezebel's action is not explicitly mentioned, it is described in the cited fragment of the Book of Revelation.

At the beginning of this text, it seems necessary to provide the diagnostic criteria of HPD. According to the ICD-11 classification (code F60.4)², for the clinician to diagnose this disorder, the patient must present with at least four of the following traits or behaviors: – self-dramatization, theatricality, exaggerated expression of emotions; – suggestibility and being easily influenced by surrounding persons and/or circumstances; – shallow and labile affectivity; – continuous seeking of exciting experiences and activities, during which the individual is at the center of attention; – inappropriate seductive behavior; – excessive focus on physical attractiveness. In turn, according to DSM-5 (code 301.50) (2013) HPD is characterized by deep-seated, exaggerated emotionality or attraction-seeking, usually beginning in early adulthood. For a diagnosis, at least five of the following criteria must be met: the individual – is uncomfortable in situations in which he or she is not the center of attention; – his or her interaction with others is often characterized by inappropriate sexually seductive or provocative behavior; – displays rapidly shifting and shallow expression of emotions; – consistently uses physical appearance to draw attention to self; – has a style of speech that is excessively impressionistic and lacking in detail; – shows self-dramatization, theatricality, and exaggerated expression of emotion – is suggestible (i.e., easily influenced by others or circumstances); and – considers relationships to be

more intimate than they actually are. As can be seen, both diagnostic systems define HPD in very similar terms, but DSM-5 (2013) provides two additional criteria as compared to ICD-10³, namely a style of speech that is excessively impressionistic and lacking in detail and considering relationships to be more intimate than they actually are. In turn the psychoanalytical researcher Mentzos (2009) lists seven characteristics of individuals with HPD: – theatrical behavior with a tendency for self-dramatization and pretentiousness, unnaturalness and exaggeration, seeking attention, sympathy and admiration, – emotional lability characterized by outbursts of laughter or crying disproportionate to the stimulus, as well as the high volatility of shallow affect, whimsicality, – the need to enter into dependent relationships with others in an infantile way without, however, giving up one's own activity and initiative (in contrast to dependent personality); – overreactiveness, or excessive readiness for exaggerated reactions to external changes; – egocentrism, or a tendency to prioritize one's own needs including the unmet need of "being loved and appreciated"; – seductive behavior manifesting itself in the sexualization of all activities, emphasizing the motif of erotic love, experiences in this area, and orgasm, exclusively for the purpose of being liked and admired by others; and – suggestiveness, or strong susceptibility to the influence of others and one's own. In the guidelines formulated by the AWMF (Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften – an umbrella organization for medical associations) (de Folch, 1984), histrionic patients are described as hyperexpressive, theatrical, and often self-dramatic in their behavior and emotionality. Motivated by a strong need for attention, acceptance, and adoration, histrionic individuals often function within an imaginary world. They are extrovert, charming, and attractive, and sometimes very successful; they pursue popularity and are admired. However, up close their charm seems to pale. People with HPD often behave unnaturally and sometimes come across as vague or empty. Their low tolerance to stress and frustration

2 <https://icd.who.int/en>

3 *ibidem*.

lead to a propensity to get distracted and a lack of reflection, as well as a clear tendency for quick changes and sensation- and challenge-seeking. This impressionistic cognitive style is characterized by vagueness and ambiguity. They often find it difficult to engage in abstract thinking, logical cognitive processes, and planned problem solving. Such individuals find a lack of attention from others unbearable. The problem is that the initially captivated audience soon gets irritated and turns away, while the vicious circle repeats itself and continues until the emergence of mental symptoms necessitating treatment (Sulz, 2010).

1. Histrionic individuals in places of religious worship

These days one can find a clear similarity between Jezebel's actions and the behavior of some women in religious communities that would be astonishing for the average person. Analysis of this worrying phenomenon is important in that while there is a rather widespread awareness of narcissism, few people have heard of HPD, and certainly do not anticipate meeting histrionic individuals in places of religious worship. The subject matter of Jezebel has been recently brought up at several conferences of Catholic and Protestant ministers in relation to women that join communities "out of nowhere," quickly wreaking destruction and depriving the religious leaders of strength and charisma, occasionally causing illness in them (probably of decisively psychosomatic nature). It should be emphasized that while narcissistic disorders are much more democratic in terms of sex distribution, and are slightly more widespread among men, HPD affects mostly women (but not exclusively).

As already mentioned, the main medium by which histrionic women reach their goals (even though they may not realize their own motivations, as

later explained), are eroticization and sexualization. Obviously, one of the traits of narcissistic individuals is their propensity for seductiveness. Millon and Davis (2005), who examined the seductive subtype of narcissistic personality noted that it has a strong histrionic component. Members of Internet discussion clubs devoted to this disorder who have experience of relationships with HPD individuals report that their partners engage in numerous sexual affairs, which are very hurtful for them. At the same time, histrionic individuals tend to diminish the significance of those affairs, as if they did not matter in the context of their current relationships. It appears that the relationships of individuals with HPD are short-lived due to their manipulateness, propensity for lying, shallowness, and emotional theatricality.

One should now address the question of how such people function in a community that is highly spiritual, exalted, and venerates that which is sacred? When a thoughtful person who is sensitive to non-verbal cues meets an individual with HPD, then even in a purely formal setting one can experience shock, disbelief, embarrassment, awareness of the inadequacy of behavior with respect to the environment, disgust with the overtly conspicuous form of seduction, and even perversion,⁴ as well as anxiety and anger. An individual knowing a woman with HPD stated that while contacting that person he sensed a kind of "void." Most of the aforementioned feelings can be deemed countertransference in nature. Obviously, it cannot be said that "guilt" lies only on the part of the histrionic individual, as Gabbard and Wilkinson (2011) are right in claiming that countertransference stems from both the projected aspects of the patient and the inner conflicts of the therapist (the word "therapist" may be here substituted with the name of any person interacting with HPD individuals, as countertransference, as well as transference, occur in all our relations to a smaller or greater degree), creating a specific interaction pattern

4 According to Steiner (2017), although the term "perversion" is usually associated with sexual excitement, it is increasingly thought to have a broader meaning, especially in psychoanalysis. Most old dictionary definitions of the words "perverse" and "perversion" stress the concept of "turning away from the truth." The definition of the verb "to pervert" (distort, misrepresent, subvert, corrupt) contains the idea of demoralizing or leading one astray in judgment or action. Interestingly, older editions of English dictionaries did not include the idea of perversion as a deviant sexual act or make only a passing reference to it. It seems striking that in our contemporary understanding of perversion we are increasingly inclined to use its dictionary definitions and consider sexual perversion as a particular case of a more general perverse attitude towards what is right and true.

within the therapeutic process. Bollas (1987, p. 202) notes that “in order to find the patient we must look for him within ourselves. This process inevitably points to the fact that there are two ‘patients’ within the session.” Assuming that countertransference is a product of both the therapist’s and patient’s mental activity, their relative contributions differ depending on the psychopathology, being greater on the part of the individual with more serious disturbances (cf. Curyło).⁵ As Gabbard and Wilkinson (2011) aptly put it, “we all have sadists and murderers lurking in our depths as well as saints and heroes. Considerable insight is gained in conceptualizing the psychotherapeutic process as involving ‘two patients,’ rather than one, by understanding that the most bizarre aspect of the patient has some parallel counterpart in ourselves (Searles 1986).” Thus, interactions with an individual exhibiting HPD (just as any other mental problem) may be a litmus test of our own mental health, triggering our previously repressed dark aspects. However, it is our knowledge and awareness of our own thoughts and emotions that are the precondition for realizing this fact as well as for gaining some benefit from experiencing such a difficult relationship.

It should be noted that, wherever they might be, histrionic women do not tolerate other women who could threaten their status as the center of attention. Moreover, motivated by jealousy, in their rivalry they draw other women into their game. The countertransference reactions of the latter may mirror (probably to a lesser degree than in the case of the histrionic individual) the sexualizing and seductive behavior of women with HPD (perhaps this should be treated as countertransference-related seduction). Within such a “hot cauldron” of rivalry and countertransference reactions, the sacred inevitably becomes overshadowed. This may be a very

difficult experience for a person with a sensitive conscience, as the place of religious worship turns very secular and barren, and the exalted atmosphere appears to pale. Even if some spirituality persists, the behavior of a histrionic individual makes the place of worship saturated with a certain inadequacy, or even grotesqueness, as it is the human being and her appearance and erotic aspect that take center stage, which is paradoxical, or indeed absurd in this particular instance. For instance, histrionic females may exhibit grotesque religious self-representation: on the one hand they may dress in a very seductive manner to casually reveal their charms while taking Holy Communion genuflected, while on the other hand, if it is not well received by the religious community (which is usually the case), they may, metaphorically speaking, switch to “sackcloth.” They may then kneel most of the time during religious rites or fervently pray the rosary making sure that no-one fails to notice how piously their fingers move on the beads. Creating this repentant image may actually make them more attractive to the devout, or perhaps austere religious leader. Obviously, such individuals repress the fact that in doing so they commit an amoral, or indeed perverse, manipulation.⁶

When a man enters into a relationship with such a woman (which is discouraged by both Catholic and Protestant clergymen), it conforms to the dynamic of relationships with histrionic women in general. According to the former partners of such women, a short “honeymoon” period is followed by a “nightmare”: harassing phones, text messages, e-mails, and visits; increasingly inappropriate behaviors towards the partner in the presence of other people, visits with family members and parents, as well as, regrettably, false accusations of sexual harassment, as reported by some psychotherapists and lawyers.⁷ It should be noted that one of the main diagnostic criteria of HPD,

5 <https://skraweknieba.com.pl/materialy-szkoleniowe/adam-curylo-przeciwprzeniesienie>

6 In such a community, we may also have to do with a group of women who use their religious fervor to mask intersexual rivalry with other women for power (sic!) in the Church. This phenomenon is hard to notice at first glance, but it comes to the fore when the community is joined by a woman who could threaten a histrionic “leader” through her appearance or other socially attractive traits. The methods of devaluation of such a person, though disguised as “religious,” are characterized by intense intersexual rivalry often fueled by sexual instincts suppressed by compulsive religious practices. Obviously, such persons are a decisive minority, but nevertheless they do appear and often gain control over the entire religious group, despite suffering from a serious personality disorder.

7 It should be noted that O’Donohue and Bowers (2006), who studied a variety of factors leading to false allegations of sexual harassment, listed HPD as the second most popular one, right after borderline personality disorder.

which may underlie the aforementioned accusations of men is the tendency to consider relationships to be more intimate than they actually are, which essentially boils down to distorted mentalization (Allen, Fonagy, Bateman, 2014; Marszał, 2015) in the area of relationships. Histrionic women take very seriously the words of potential partners, not to mention any sexual intimacy. It seems that in terms of mentalization, this points to mental equivalency whereby mental states merge with external reality and whatever the individual feels, thinks, or imagines appears frighteningly true. Finally, when the partner fails to meet the essentially unrealistic expectations (often he is unable to do so), the histrionic woman enters into another relationship, while in processing her grief after the loss of the previous relationship she may use the mechanism of projection, telling herself and others how much she was hurt by her former partner (even if this mostly happened in her imagination). It seems that the tendency to engage in short-lived romantic relationships in histrionic individuals is even higher than in narcissistic ones, as in the latter case relationships last quite long despite being mostly founded on manipulation (a cycle of love-bombing, criticism, and rejection).

2. Insight in individuals with histrionic personality disorder

It should be stressed that the main defense mechanism used by histrionic individuals is massive repression enabled by the splitting of consciousness (Freud's term used in reference to such individuals). Thus, histrionics are not conscious of their own behavior, of dressing inappropriately, or of crossing the fine line of good taste. This does not mean that a woman must never dress boldly, even in places of religious worship, except in mentally closed communities, which are rare. Even in such places there is some naturalness and spontaneity, as can be seen, e.g., in tourists visiting historic churches. The problem is that individuals with HPD send explicit sexual signals. Millon and Davis (2005) depart for a while from their scientific discourse to observe that histrionic women cannot be bothered to think about

the feelings of men attending such places mainly for religious reasons. And why is that so? The authors explain that while the ability to empathize with other people requires reflection, histrionics filter out what is logical and reasonable and accept only what is tinged with emotion. In their analysis of individuals with HPD, Millon et al. (2004) observe that the histrionic cognitive filter provides protection from "anything too precise, factual, concrete, abstract, reasoned, logical, systematic, philosophical, or existential. The factual or concrete is too boring. The abstract or reasoned is too tedious. The philosophical is too long and tiresome. The existential is too deep and too threatening" (p. 315). After Shapiro (1965), Lewis and Mastico (2017) note that individuals with HPD notoriously exhibit impairment of certain cognitive abilities; they often make their decisions based on hunches or impressions without fully considering the available options or consequences of their actions. According to Millon and Davis (2005) "by refusing to reflect on their own goals, attitudes, and identity, histrionics free themselves from worry and are thereby excused from the existential albatross the rest of us bear. Histrionics repress the emptiness of the marketed self, the conflicts their sexualized relationships create in others, and even their own unfulfilled desires."

In the beginning, one should note that according to Reich (1933, after: Millon, Davis, 2005) histrionics use seduction as a way of defending themselves against the fear or threat of male aggression. According to Reich, histrionic women (as already mentioned most individuals with HPD are female, although males are increasingly often diagnosed with this disorder), anxious about possible violence, address another drive in the potential aggressor, attempting to arouse sexual attraction in place of hostility. This to some extent explains a curious paradox in their behavior: while they demonstrate enormous sexual potential, they harbor intensive fear and disgust towards actual sexual acts. Despite their outward erotic signaling, such individuals have deficits in the area of sexuality: paradoxically, they are closer to asexuality rather than to the kind of sexuality that would be open to the partner and rich in feelings and imagination. In reality, the histrionic individual is in shock when

someone responds to their sexual signals. It may be noted that their self-image of sweet innocence does not allow them to realize how instrumentally they treat their own body. It is a good example of massive repression. Sometimes this may become even more extreme: a histrionic woman meeting with a positive response from a man may reverse the situation, projecting excessive interest in sex onto those who accuse her of it, thus diverting attention from herself. Such individuals may claim with “righteous indignation” (Millon, Davis, 2005) that they are extremely hurt by the allegation, leaving the unfortunate suitors furious, astonished or completely confused (Millon, Davis, 2005). This amounts to the devaluation of men. According to Rev. Piotr Glas, histrionic women (“acting in the spirit of Jezebel”) want to turn men into “eunuchs” – this term well reflects the intention that is hidden very deeply in the unconsciousness of such women.

3. The underlying causes of histrionic personality disorder

Psychoanalysts link the development of histrionic personality with inadequate, cold, and insensitive maternal care. As noted by Millon and Davis (2005), “Feeling afraid, isolated, unsafe, or unappreciated, the little girl must seek some source of nurturance beyond the primary caretaker [mother]. Eventually, she turns strongly to her father while devaluing her mother, thereby refusing a normal female identification. Males are strong and exciting, and females, including herself, come to be seen as weak and wanting. The part of her personality that might have developed a genuinely full and female selfhood given an adequate female role model is thus left to atrophy (McWilliams, 1994). Without any realistic anchor, it becomes caricatured into a loose set of behaviors that conform to social stereotypes about what elicits male desire (Blacker & Tubin, 1991). At the same time that the little girl is turning to her father, she finds attention-getting efforts to win

his approval are made more effective by nuances of seduction.⁸ Awareness of this attraction is mutually threatening to both father and daughter and must be forcefully repressed, though comments may be made on the little girl’s beauty, cuteness, sweetness, or innocence (McWilliams, 1994). As a result, a pattern of repressed sexual desire and sexual manipulation takes form and continues throughout life. Naturally, this also leads to conflicts between mother and daughter, whereby the mother is devalued. In effect, the future histrionic or hysteric, now ‘Daddy’s cute little girl,’ learns to throw herself at male figures with the false maturity of hypersexualization, but at the same time develops a shallow or superficial sense of self that betrays her lack of an adequate female role model” (Millon, Davis, 2005). Although in light of the above argument histrionic individuals may be perceived as innocent “perpetual girls,” being victims of a difficult childhood, this is not the whole truth. Their behavior may in fact lead to the destruction of men’s lives: while not aiming at a genuine sexual relationship they may end up “catching” a man who consents and drawing completely non-sexual benefits from the situation, involving allegations of unfairness, abuse, harassment, etc. It should be noted here that having experienced fewer prohibitions set by parental figures, histrionic individuals became “frozen” in their development, which impaired the formation of their superego; consequently, they may unscrupulously renege on their commitments or manipulate people in their environment (Millon, Davis, 2005). One should remember that in fact the histrionic individuals’ awareness of the harm they do to others and of the amorality of their attitudes is very limited.

Conclusions

To sum up, the question is how best to react to the presence of histrionic women in places of religious worship. First of all, it should be remembered that they are not aware of their actions, even if ruth-

8 Perhaps one should use the term “erotic transference,” which is “experienced as ego-dystonic and perhaps shameful desire for the therapist, the gratification of which is viewed as unrealistic” (obviously in the case of histrionic females what is indicated here is the transference initially addressed towards one’s father to another man) (Gabbard and Wilkinson, 2011, p. 97).

less. Theatrical behavior and the sexualization of relationships are in fact symptoms of underlying desperation (Benjamin, 1996, after: Millon, Davis, 2005). Self-dramatization, which is prevalent among histrionics, fulfills the role of an unconscious defense against deeply rooted anxiety and conflict (Lewis, Mastico, 2017). By dissociating their true self from theatrical flair and self-confidence, which they show off to the world, the individual with HPD prevents the deeper processing of painful experiences. As a result, the existence of an integrated self is suspended until the “storm” calms down to ward off suffering, desperation or anxiety. According to Bollas (1999),

in the case of histrionic individuals, the necessary preconditions for therapy are finding their authentic self separated from the drama, building sexual awareness through analysis of their defensive mechanisms, and setting boundaries if necessary. Unfortunately, individuals with HPD rarely seek psychotherapeutic help, and so we need to learn to look at them with compassion, or, to put it in religious terms, with neighborly love. At the same time, one needs to be watchful to make sure that they do not harm themselves, and especially those around them, with their exaggerated and inadequate reactions.

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