

# DEALING WITH DAMAGE: THE DESIRE FOR PSYCHIC VIOLENCE TO SOOTHE PSYCHIC PAIN

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**ABSTRACT** *Damage and destruction in people's lives can be dealt with either through recognizing and resolving psychic pain and loss or acting out destructive human relationships. This paper highlights the internal processes within a patient and a troubled society where psychic pain may not be recognized, experienced and worked through, so leading to the possibility that psychic violence may be used to soothe heartfelt emotional injuries. Psychic pain is often associated with emotional poverty and inadequacy. This paper describes the idea that pain is acted out through psychic violence and how the therapist has to face and contain many facets of this human frailty disguised as 'sexed-up' violence. My observations of psychic violence in the everyday life of a society exposed to over 35 years of death and destruction are also described. Here, there is not the comfort of the consulting room to detoxify poisonous projections, which often present under the psychic guise of superiority and contempt. Intrapsychic formulations are outlined which underlie such violence and clinical interventions and suggestions to repair societal troubles are offered to help this disturbed state of mind move towards more whole-object human relations. Copyright © 2005 John Wiley & Sons, Ltd.*

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## INTRODUCTION

Feeling good when doing bad is the essence of the sadistic impulse. This impulse can be easily camouflaged by destructive narcissism where the excitement of adulation masks the pleasure in destroying others. Twenty-first century society validates this way of coping with psychic pain. Burbach and Clarke (2002) commented recently on how 11 September 2001 brought out the worst in America. In using this tragedy to become the focus of world attention; their distress was greater than others. In the calm

of the consulting room we can see clearly how much psychic pain can be uncovered with such destructiveness. The milk of adulation can be used to soothe the deep-down damage felt from an earlier trauma. In this paper I will review Kleinian and post-Kleinian concepts of psychic pain, manic reparation, coupling and Fairbairn's concept of an excited object as ways of dealing with psychic damage. I will illustrate these concepts through a case study and also refer to the destructive narcissism, which I have observed in the society in which I live.

## PSYCHIC PAIN

People exist who are so intolerant of pain or frustration (or in whom pain or frustration is so intolerable) that they feel the pain but will not suffer it and so cannot be said to discover it . . . the patient who will not suffer pain fails to suffer pleasure. (Bion, 1970/1984, 9)

Psychic pain, if not truly experienced, inevitably becomes acted out in many ways and one of these is through destructive impulses. Both Klein and Bion point to the struggles with psychic pain in the paranoid-schizoid position. Intimacy and tenderness cannot be experienced and the depressive position is avoided at all costs. Within a Kleinian and post-Kleinian framework, creating an analytic space where negative capability leads to the emergence of K, a state of mind that is conducive to knowledge and truth, can be experienced as the infliction of cruelty and emotional deprivation by the psychoanalytic therapist. However, it is often at these quiet moments that the deeper psychic injuries carried by the patient can emerge. In particular, by paying attention to moment-to-moment countertransference reactions (Joseph, 1981) the internal world of the patient can be received and understood in a way that can illuminate whether real human contact is being sought or if such intimacy is so difficult to bear that psychic violence or withdrawal is the way of dealing with psychic life. Some cues I have found helpful are:

- An invitation to admire and praise the patient for their achievements.
- Speed of speech and colourfulness of words to describe themselves and others.
- Sexualized actions aimed at castrating the analytic mind, so inviting an excited contact that bypasses the real damage of early trauma.

Klein (1935/1998) refers to this excited relatedness as a cannibalistic feast where objects are devoured by an insatiable object. Winnicott makes two different references to how an object is used. Firstly, in a positive way he writes of the importance of the patient being able to play with the analyst as a way of developing creativity (Winnicott, 1971a). Secondly, and more akin to the work of Klein, he writes of the patient using the analyst to find out that destructive attacks can be survived (Winnicott, 1971b). This survival, in itself, Winnicott contends is critical for successful analytic treatment where omnipotence can be relinquished and replaced by love for the surviving object, the analyst, so initiating the capacity for concern. Here, following Heimann's (1950) technical advice on using our reactions as a vital source of information to understand the internal world of the patient, we can begin to construct a view of the internal world of the patient, which can be modified in the light of further experience.

## MANIC REPARATION: THE SEARCH FOR THE MAGICAL PENIS AND BOUNTIFUL BREAST

Patients that we see in day-to-day clinical work often engage in the idealization of powerful sexual and emotional experiences as one way of dealing with internal damage and despair. This despair can have its etiology in the internalization of early destructive experiences. Klein (1935/1998) describes this in her seminal paper on manic-depressive states:

'Both in children and adults suffering from depression, I have discovered the dread of harbouring dying or dead objects (especially the parents) inside one and on identification of the ego with this condition' (Klein, 1935/1998, 266) and she adds:

The persecutions and demands of bad internalised objects, the attacks of such objects upon on another (especially as represented by the sadistic coitus of the parents); the urgent necessity to fulfil the very strict demands of the 'good objects' and to protect and placate them within the ego, with the resultant hatred of the id; the constant uncertainty as to the 'goodness' of a good object, which causes it so readily to become transformed into a bad one. (Klein, 1935/1998, 267–68)

In excited relations, sex and aggression can be used within the paranoid-schizoid state of mind to achieve short-term solutions to long-term problems. Within a Kleinian theoretical framework, both the part-objects of penis and breast become the focus of heightened states of arousal. As I will describe later in the clinical case, patients report violent sexual relations temporarily leave a feeling of contentment but this soon gives way to an underlying feeling of discontentment. Fairbairn (1952) also describes a similar use of the 'exciting object' where infantile dependent relationships are unconsciously created to manage feelings of inadequacy. Also, a complex arrangement comes into play, which Fairbairn calls the anti-libidinal ego or internal saboteur, which Bion (1957/1967/2004) and Rosenfeld (1987) describe as the psychotic personality or mad self. For many patients struggling to enter the depressive position their experience is one of 'tenderness I cannot bear'. With tenderness, potentially comes a huge negative therapeutic reaction (Rosenfeld, 1987), which is an envious attack of whole object intimacy. A patient in dream described this vividly when he felt me getting near to him as 'shooting the nigger if he comes any closer'! Joseph (1989, 128) describes the technical skill needed to weather this psychic storm:

So I am stressing here that a powerful masochism is at work and these patients will try to create

despair in the analyst and then get them to collude with the despair and become actively involved by being harsh, critical or in some way or another, verbally sadistic to the patient if they succeed in getting themselves hurt or in creating despair, they triumph, since the analyst has lost his analytic balance or his capacity to understand and help and then both patient and analyst go down into failure!

Within the analytic relationship, the transference/counter-transference pressures are intense. The pressure to act out negative object relations (Sandler, 1976) is massive and thus it is critical to pay close attention to noticing personal reactions in ourselves (Feldman, 1989). As I will illustrate later, these processes are difficult enough to manage when manifested in less controlled settings. If we assume that the effects of exposure to over 35 years of violence leaves minds more likely to exhibit the features of paranoid-schizoid functioning, in particular, splitting and projection, then there is the likelihood this will be repeated in everyday life. Elsewhere (Kapur and Campbell, 2004) I have noted this observation in relation to splitting into good and bad in everyday life. These particular observations apply to educational and other patterns in Northern Irish society where, in the former, all good resides in the grammar school and all the bad resides in the secondary school system. In this observed state of mind, difference is felt to be potentially the enemy rather than shades of pluralism that have equal value. This of course replicates the primitive splitting so evident in the 'good' and 'bad' categorizations of Catholic and Protestant communities.

## COUPLING

The picture of the parents in the patient's mind has in varying degrees undergone distortion through the infantile processes of projection and idealisation and has often retained much of its phantastic nature . . . it is the origin of these

fluctuations in earliest infancy which accounts for their strength in the transference and for the swift changes – sometimes even within one session. Between father and mother, between omnipotently kind objects and dangerous persecutors, between internal and external figures. Sometimes the analyst appears simultaneously to represent both parents – in that case often in a hostile alliance against the patient, whereby the negative transference acquires great intensity. What has then been revived or become manifested in the transference is the mixture in the patient's phantasy of the parents as one figure, the combined parental figure as I described elsewhere. (Klein, reprinted in Mitchell, 1986, 208)

As Klein suggests, the internal coupling blueprint held in the mind of the patient can have a massive influence on the quality of object relations in the consulting room and everyday human relations. Damaged relationships have the potential to become acted out in sado-masochistic relationships where people are impelled to couple in destructive ways. This can act as a theatre for their phantasized picture of their own experiences of parental coupling. What is happening deep in their own mind can become acted out in human relationships. Moreover, if such damage is exerting such a powerful unconscious influence then dominance or submission may appear as the only limited choices available to individuals to relate to their fellow man. Ordinary intimacy and mutual dependence is felt to be unbearable and of a violent nature with either the mother/father or breast/penis taking up such a violent and perverse configuration that there is little possibility of new baby ideas being created. In the mind of the internally damaged patient attacks on linking may be rife (Bion, 1957/1967/2004) so leaving the mind with little idea of life or newness and as such this negative inner world can be acted out in the transference as so aptly

described by Bion (1959/1967/2004, 94) in his own clinical work:

Observation of the patient's disposition to attack the link between two objects is simplified because the analyst has to link with the patient and does this by verbal communication and his equipment of psycho-analytic experience. Upon this the creative relationship depends and, therefore, we should be able to see the attacks being made upon it.

### **Excited object**

Riesenberg-Malcolm (1999, 34) describes her experience of her patient's excited state of mind:

In the analytic situation excitement had taken a central place in the patient's expressions; she felt it most of the time and tried to make the analyst feel it. In this sense, excitement seems to have been a basic defensive response against the envy experienced at the breast and later on towards the parents' intercourse. It seems that for the patient it could be expressed in the following way: 'I am excited and I am alive'. Provided they are excited – analyst, breast, parents – they want me, need me and that's why they come to get in from me. In the sessions, over and over again, I was felt to want to know about her laboratory or flat because of my being excited. Here it can then easily be linked with her promiscuous experience; she felt nothing but arrogant superiority and contempt for her partners because they were the prey of such hot desire and excitement.

Fairbairn (1952) first highlighted this phenomena of the excited object, which is very much aimed at creating a pseudo psychic life for the patient who lacks whole object relatedness. Fairbairn refers to this as further splitting of the ideal object, which lends to seeking out exciting objects to meet the idealized dream of emotional nirvana; the eternal soothing of psychic pain. Whatever the conceptual analysis of such an idea the object relations remain the same. There is a tremendous drive towards

seeking out highly charged relationships, either sexual or aggressive, to deal with earlier psychic traumas that have left considerable damage in the mind of the patient.

As Riesenber-Malcolm highlights, these can be acted out in the transference. The Kleinian emphasis on a thorough, minute analysis of counter-transference reactions can reveal how these intense difficulties with ordinary happiness and intimacy can be detected. People, whether they are patients we see in the consulting room or those we observe in everyday life, may build professional and personal lives that can pervert normal 'feel good' or healthy sources of narcissism to these more perverse excitements. This may delay even further the understanding and analysis of such perverse object relations, as will be described later in my description of the 'troubled mind of Northern Ireland'. It will also refer to the manic pace of everyday life in every society, where there can be many opportunities for this healthy narcissism to spill into states of mind which potentially, could act as a vehicle for taking the good from others through adulation and idealization, so leaving inappropriate and unjust feelings of poverty in others. For example, in organizational psychoanalytic work, the studies of Isobel Menzies-Lyth (1988) highlighted how nurses can project their good feelings into doctors who may demand such adulation. Inevitably, then, doctors can project their bad feelings into nurses. A society under massive regressive pressures may do no different. In the society in which I live, I have noticed a prevalence of such phenomena where status and titles can be used to attract and extract such good feelings from others. Also, as will be described later, if we accept the political analysis of many commentators (such as Farren and Mulvihill, 2000) that Northern Ireland has not promoted a meritocratic society then

titles and status, particularly when idealized, can be used to distract from injustices that may have occurred. As such, any unfairness that may have occurred perpetuates a 'false self' society as merit has not been the vehicle by which people have achieved such positions.

In conclusion, the negative object relations that flow from psychic damage are inevitably, and tragically for the patient, permeated with psychic violence as one way of managing emotional poverty. In this theoretical review I have tried to highlight how the work of Klein, Bion, Fairbairn and others draws our attention to how this violence is acted out in charged mental states. While the purpose of hostile object relations may be different, for example murderous violence is aimed at killing the object whereas sadistic impulses are aimed at control and abusing dependency (Lazar, 2003), the feelings left in the 'victim'/receiver are the same. These feelings range from inadequacy, despair and humiliation to retaliation, revenge and resentment. This is the key point of this paper; whatever the etiology or particular method of acting out such damage, the quality and volume of containment is massive, thus calling on the transformational capacity of the recipient (Bion, 1967). Otherwise, temporary soothing continues indefinitely and human relations, either in the consulting room or society, are perpetually re-enacting human destructiveness.

I will now present a clinical case and a description of work from an analysis of the emotional effects of the Troubles in Northern Ireland.

### **CASE A**

A 45-year-old, single male, academic. Seen twice and three times weekly for psychoanalytic therapy. He had a history of failed heterosexual relationships. The session reported is the fourth year of work with

him, where he is being seen three times per week. For the first year he was seen once and then twice weekly; second and third years were three times per week. A reduction was made to twice weekly in planning termination, however, we reverted to three times per week when it emerged that the planning of termination stirred up massive anxieties for him.

Mr A carries a lot of damage in his mind. In his early years he had to care for his medically ill sibling. His family looked to him to cope as they became interested in their own careers. He took on the mantle of caring for his younger sister. He became the person who made everything right for damage in his family.

*Pt:* I'm feeling a bit better today . . . I've been through a lot and end up feeling very tired. I have this unrelenting desire to take care of my family. As a young boy my job was to keep everyone happy and alive. In my job . . . it's the same. My first interest is in the other person. I just can't seem to separate from home. The guilt is massive . . . and I look for perfection in others . . . in my partner. In previous relationships, if the person isn't attractive or intelligent, I feel I've settled for something else. There have been many moments where I've felt my misery has been dealt with by high octane sexual encounters, only to find disappointment when I realize this woman isn't perfect.

*T:* Anything ordinary that brings with it both good and bad experiences seems second best . . . a positive experience has to be ideal and last forever.

*Pt:* Even my partner not wearing make-up can seem like a disappointment . . . part of me feels I can never get away from this desire for perfection. Someone that will meet my every need. That's what I did at home so why can't people do that for me?

*T:* Your energy has been dedicated to working out how are people feeling, thinking and setting about making that right . . . even here when you

enter the session you may notice that your first comment is 'How are you?'. An enquiry about my state of mind . . . Am I in the job of helping you?

*Pt:* It's my nature . . . what I've always done. I worry that these feelings I have will never go away. Every time I think of separating from the despair at home, I feel so guilty. I just want to say leave me alone, let me have a life.

## COMMENTARY

At the start of this session the patient presents some sense of relief from the psychic exhaustion he experiences from the torture of his internal objects in dealing with the feelings of despair and deadness he has carried around for many years. This underlying affect of depression emerged as the central emotional state being defended against through excited object relations. At difficult periods in the work the patient did become clinically depressed where there was a space to explore, painfully and with some difficulty, the deadness he was carrying within his own mind. As a child his job was to keep his sister alive with a depressed mother who could not bear the existence of a severely, medically ill, sibling. This also involved daily medication, which had to be administered on a regular basis to physically keep the patient alive. He had to become trained in resuscitation techniques as the nature of her illness meant she could experience life-threatening convulsions at any time. He also found himself taking care of his mother, which, in the Oedipal situation represented a triumph over his father as he could now occupy the role of the favourite male and thus secure his mother's affections over his father. Tragically, for the patient, the offer of a special place in his mother's eye resulted in a continuation of tremendous pressure to continue this caregiving role with others. This left an emotional reflex reaction to rescue others in

distress, which left the patient strained with the burdens of others. He struggled to let others take responsibility for their own distress. In his professional role this often led to further exhaustion with his wish to make things better for everyone.

This wish to deal with left-over feelings of inadequacy and emptiness was also dealt with by a history of highly charged sexual relationships, which all went wrong. For this patient, there is an inherent attraction and addiction to sexual attractiveness and excitement to deal with psychic trauma. Sexually, this patient failed to have a full sexual relationship, so indicating a failure to give himself over fully to another woman.

Towards the end of his first episode of speech, before I speak, he describes the level of excitement he demands in heterosexual relationships for improvement. My interpretation attempts to highlight this expectation, which I felt keenly in the transference, to offer extraordinary and idealized experiences. In the transference, this would also appear, particularly in the earlier period of the work, as vivid descriptions of both sexual and hostile encounters. Either I would be invited to feel like a spectator listening to pornographic material or like a boxer, waiting for him to land the knockout blow. The invitation to be mutually excited was pervasive. Any less was not good enough and this demand for a bountiful and excited breast was omnipresent in most of our work. He finds any movement from this part-object relationship to more mature, whole-object relationships particularly difficult. An 'unthinkable thought' is that ordinary human relationships with their own emotional rhythms of goodness and badness could be enough to deal with his internal damage.

He then reiterates his desire for perfec-

tion. His final comment points to the perfect idealized experiences he tries to provide for others in work and at home. This patient puts considerable pressure on himself to make everything right for others. An unfortunate legacy of a damaged past where, as a young boy, he was given this tremendous responsibility to keep his sister alive. He would often describe moments of watching her every breath and being rehearsed in various medical techniques to keep her alive. I point to how he does that to me with his enquiry about my state of mind. His pressure manifested in the transference to watch my every move and keep me alive.

He then comments on a regular theme throughout the work: this incessant desire to maintain this symbiotic relationship with his sister and mother to keep them alive. Any separateness is experienced by the patient as turning off a life support machine.

As stated earlier in this paper, the quest for excited objects represents a wish by the patient to soothe the horrific damage gained from the introjection of deadness and despair from earlier times. Unfortunately, for this and other patients, the volume and quality of psychic excitement is often proportional to their despair, forcing them to engage in extreme sexual and aggressive experiences, which can only do further damage. Coupling tends to be aggressive and primitive with little or no experience of ordinary human intimacy in adult relatedness. Thus, the task within the analytic pair is huge: to offer thoughtful, careful and containing experiences repeatedly, which give an idea that psychic life can be fulfilling without perverse excitement. For this patient this new idea and realization is slowly taking place with the inevitable internal attacks from his psychotic self that reiterate the propaganda of

highly charged emotional states as the way to soothe psychic pain. However, whatever the pull of the regressive forces, the patient has remained committed to the sessions and has remained in an 'ordinary' and intimate heterosexual relationship for the longest time ever. I think somewhere there has been an establishment of a view that life can be fulfilling in a sane, depressive functioning way.

Recently, he has reported his full sexual experience in a stable heterosexual relationship. A sure sign of psychic development, which now has to weather the inevitable storms of internal attacks that see this progress as an abandonment of the psychotic personality.

## THE TROUBLED MIND OF NORTHERN IRELAND

### Linking external and internal worlds

Rustin (1991), Elliot and Frosh (1995) and Erlich (1997, 2003), offer descriptions where external societal and cultural issues can be understood more fully, using psychoanalysis. Here, psychoanalysis can be used to discover the deeper forces that propel individuals and society collectively, to relate in particular ways. Assuming the predominant role of external object relations in configuring the internal world, there emerges, logically, an idea that what happens outside is of crucial importance in the formation of inner worlds. So what has occurred in the social-political life of Northern Ireland to create troubled states of mind?

My colleague, Jim Campbell and I (see Kapur and Campbell, 2004) have detailed the conditions that cultivate minds permeated with suspicion and hostility. They are best summarized by the work of Farren and Mulvihill (2000) who highlight how unfair-

ness and injustice became embedded in Northern Irish society:

To protect their own state against perceived internal dangers, successive Unionist Governments permitted and actively connived at a range of discriminatory practices aimed at diminishing as much as possible, Catholic-Nationalist political influence, while at the same time consciously developing a sense of Britishness about life in Northern Ireland to mark it off as much as possible from its southern neighbour. Measures taken to achieve the former included the abolition of proportional representation in local Government, the gerrymandering of electoral boundaries to favour majority Unionist areas, the allocation of housing to favour Unionist constituents and the manipulation of employment opportunities in both public and private sectors to favour applicants from a Unionist-Protestant background. (Farren and Mulvihill, 2000, 20)

This situation created the potential for people in everyday life to be left with feelings of unfairness and inequality. This was recognized by the British, Irish and American Governments in the Good Friday Agreement (1999) where they established an Equality Commission to deal with this history of social injustice. People witnessing and experiencing such unfairness had several reactions. Many left Northern Ireland to pursue livelihoods elsewhere in England, the US or Southern Ireland. Others 'put up and shut up' with such experiences and made the best of whatever economic opportunities existed. However, for many others, as described by Collins (1997) the experience sowed the seeds of hatred, which led to violence and terrorism. This then leaves a major question for Northern Irish society – how can you offer good experiences of authority when there is overwhelming evidence (recognized by three Governments) that people have achieved these positions through favour, rather than merit? If the characteristic of a 'good object' is trust,



human decency and meritocracy then Northern Irish society may have a huge real dilemma – who can you trust? Furthermore, if this permeation of favouritism is indeed rife then minority communities can be left with a feeling of being ‘second-class’ citizens as no matter what they try to achieve can, potentially, be devalued by a system that does not let the ‘best person win’. The comparison with many other societies such as South Africa is clear, where a black face was less valued than a white face, so giving people the potential to feel resentment that could lead to revenge as expressed through terrorism.

It is here that psychoanalytic thinking and, in particular, the work of Melanie Klein, can help understand the internal worlds created while not devaluing the clear existence of bad and dysfunctional societal structures. In the following analysis of the troubles, the concept of destructive narcissism will be used to illustrate how, when a society is improperly constructed, human beings may find that they have only one way to let their feelings be known, through psychic and physical violence. This may be the case in Northern Ireland, Palestine, Iraq and elsewhere, where if people feel an injustice has been done, whether real or imaginary, and they feel they have no recourse to another action, then violence is a distinct possibility. The failure of a good enough, facilitating containing society where there is a serious listening to grievances can leave individuals with limited choices on how to express feelings of injustice and persecution. This analysis highlights the etiology of such a state of mind, the impact on everyday human relations where envy, splitting and projection is prevalent, and suggests a collective ownership and repatriation of destructive impulses.

### **Destructive narcissism**

Elsewhere (Campbell and Kapur, 1997; Kapur, 2001/2002; Kapur and Campbell 2002; Rice and Kapur, 2002, and Kapur and Campbell, 2004) I have written on how the destructive processes within Northern Ireland have led people to live out most of their lives in the paranoid-schizoid position. Depressive position functioning is less likely in day-to-day human relations where minds have been scarred by intense hostility and paranoia. Over the past 35 years violent and superior object relations are seen as the way to achieve particular outcomes. For example, the violent stalemate between the different paramilitary groups (the Republican/ Nationalist community being identified with the Irish Republican Army (IRA) and the Loyalist community associated with the Ulster Volunteer Force (UVF)) and the security forces, as represented by the police force and the British army, was often dealt with by an idea that ‘might is right’ and that those who perpetuate greater violence would win. It may be this has permeated into everyday society. This would mean that ordinary intimacy and affection are less common experiences in such a traumatized society. An ex-Loyalist terrorist, Michael Stone, writes of his ‘feel good’ experience in taking up arms:

Herron handed me the Webley [gun] and the Bible. I swore on the open Bible to be a faithful and honourable member of the Ulster Defence Association. I swore to defend my community. I promised to be a guardian of my people and to fight to protect them with every drop of my loyalist blood. The service was over in minutes. I felt good, I was on a high. I was swept away by the romanticism of it all. It didn’t enter my head that I had just committed myself to a life of violence. I was in love with the idea of being the great defender, the knight in shining armour looking after my people. (Stone, 2003, 32)

The excitement of violence filled Stone and many other terrorists with potency and strength. The gun, handed to Stone in itself represents this excited phallus that got hot when fired and blew people apart. This destruction filled his emotional veins and gave, in my view, a sexualized strength that dealt with his own internal feelings of inadequacy. Legitimization of violence was confirmed through the external political structure of the Ulster Defence Association, however, internally he may have felt justified through his own internal world to justify such action. This would be similar to Rosenfeld's idea of the Mafia structure in his patient Simon, when he writes:

The destructive omnipotent way of living of patients like Simon often appears highly organised, as if one were dealing with a powerful gang dominated by a leader, who controls all the members of the gang to see that they support one another in making the criminal destructive work more effective and powerful. However, the narcissistic organisation not only increases the strength of the destructive narcissism and the deadly force related to it, but it has a defensive purpose to keep itself in power and so maintain the status quo. The main aim seems to be to present the awakening of the organisation and to control the members of the gang so that they will not desert the destructive organisation and join the positive parts of the self or betray the secrets of the gang to the Police, the protecting super-ego, standing for the helpful analyst, who might be able to save the patient. (Rosenfeld, 1987, 211–2)

In the mind of the terrorist and potentially all of us in Northern Ireland affected by the troubles, the internal loyalty to such a highly organized destructive structure becomes a source of excitement and potency that can be a way to deal with our own internal horror at witnessing the destructiveness that we can do onto each other. This is the thesis of the Troubled

Mind Project where we highlight the acting out of such destructive impulses in everyday life (Kapur and Campbell, 2004). The clinical application of this project is the delivery of a group therapy project that is both based in object relations theory and contemporary research (Cameron, 2005) which provides an opportunity for individuals to explore their internal worlds. This project is based on the idea that a healthy psychic coupling is less common in a traumatized society so there is greater potential to regress to human relationships characterized by contempt, triumph and control. Some interesting statistics from Northern Ireland pose the question as to whether our trauma is being represented by findings such as:

- having one of the highest rate of road traffic accidents in the UK;
- having the highest rate of heart attacks in the UK;
- having the highest rate of employment litigation in the UK;
- having the lowest rate of breast feeding in the UK.

Could it be that the lack of maternal containment has led to psychic violence being lived out in everyday human relations? As Stone writes, he was seen as the defender of his community and was swept away by it all. Importantly, he points to the lack of thought when he states 'it didn't enter my head that I had just committed myself to a life of violence'. This highlights the lack of thought in this violent part-object world. The focus on arousal and confidence is found in the violent act of murderous coupling acted upon his victims. This is the blueprint for life and moral justification is found for this particular type of cruelty. Brenman writes of this part-object relationship:

In normal development love modifies cruelty; in order to perpetuate cruelty, steps have to be taken to prevent human love from operating. My contention is that in order to maintain the practice of cruelty, a single narrow-mindedness of purpose is put into operation. This has the function of squeezing out humanity and preventing human understanding from modifying the cruelty. The consequence of this process produces a cruelty which is 'inhuman'. (Brenman, 1985, 273)

We continue to struggle in Northern Ireland with, in Bionian terminology, love winning over sadism (Bion, 1959/1967). As stated in an earlier paper (Kapur, 2001/2002) we have here a potential breeding ground for psychotic personalities where damage and loss is rarely worked through so leading to a greater chance of psychic and physical violence occurring and the inevitable identification with the aggressor. Potentially, with so many psychotic personalities in operation, envious attacks on intimate and human relations could be happening all the time, well out of our awareness. This may also be represented by an idealization of intellect over emotion. In Northern Ireland we still retain the old 11+ system where children are given an IQ tests at 11 and then categorized into grammar or secondary schools. This has the potential to create an atmosphere in everyday life where intellectual intelligence can be given a higher premium than the quality of human relationships in society. This could then leave many possibilities for 'false selfs' to be perpetuated where sincerity and human honesty are forfeited in preference of a more split-off intellectual self as recently vividly described by Goldberg (2004, 833-4):

This [function of a false self] is easy to grasp in the case of the intellectual false self, who distances his mature (or pseudo-mature) mental functions from his bodily based experience: despite being accomplished in the outside world,

he simply does not know what is going on inside. There is little emphasis on the seeking of emotional knowledge (K) but rather a falling in love (L) with destructive processes and objects, a fixation with hating (H) the other side. This cleavage of good and bad can be represented by both the Catholic/Protestant dichotomy but also academic over vocational and middle class over working class.

The possibility also exists that society becomes a fertile space for sadistic-masochistic relationships, where coupling is characterized by a feeling that 'someone's got to be on top'. A parental coupling characterized by equality and mutual respect may be rarer in Northern Ireland. This observation is based on my own anecdotal experience of having lived in and outside of Northern Ireland (in Blackburn and London) where I noticed an idea within this traumatized society some people feel more equal than others! Also as a first-generation Indian, born and bred in Northern Ireland, I had an opportunity from an early age to see what Protestants and Catholics were doing to each other. With this atmosphere of inequality, envy has many vehicles for expression, not least, terrorist attacks on the creativity of others. Betty Joseph describes the subtlety of these attacks:

What I want to do now is look at envy as we see it operating in everyday life and then consider some of its implications. The conscious end we all know about, in a sense – feelings of resentment at someone being ahead, doing better, and vague hostility, rivalry, competitiveness – but it is when it is more powerful that the trouble starts; for example, when it leads to a kind of constant carping criticism or snide remarks or the other way around, when the envious individual cannot see anything to praise or value in another individual, but always finds doubts, 'well it was good but . . . and he will find some reason to doubt or knock the other person. And as there really

always is some ground for criticism in any of us in what we do, the envious attitude can easily be missed and the criticism can look real. (Joseph, 1989, 182–3)

Envy, like a terrorist, appears from nowhere, inflicts considerable damage and is rarely brought to justice. In my work as a director/chief executive of a mental health charity, course director of the university psychoanalytic training, and past chairperson of my own profession of clinical psychology in Northern Ireland, I have experienced many of these attacks. One common experience has been in the organization of new developments. I introduced new ideas and projects into these groups. In Kleinian terms, a wish to be creative and take forward the life instinct of each organization. For example, in one particular professional meeting I was asked to disseminate papers for an important briefing with government officials; no papers arrived and at the meeting I was held up to be incompetent. This and many other experiences left me with a feeling of being emotionally annihilated and potentially destroyed, akin to a feeling of being emotionally gang raped. The hatred of bringing in a new idea with a 'creative ambition' was interpreted as a selfish motive for my narcissistic, destructive ambitions and there followed a wish to 'get rid' of me. These destructive group processes were manifested by pairing, often sexualized, between different players with the hope of producing a new baby to take its place. Whatever the psychic realities for the other people involved, where they may indeed deny or disagree with my analysis of events, my countertransference was very strong. Indeed, it reminded me of psychotherapy groups I ran with psychopathic patients in secure units in psychiatric hospitals. The containment of envy and hatred was massive in both situations. Unfortunately,

with some of these situations, I had to accept that my contribution was experienced not as sincere and creative but intrusive and controlling. I had to withdraw and give up ideas and hopes for projects that now would not take place.

Undoubtedly, these situations will occur in other societies but the particular experience of being terrorized and 'done away with' as if my feelings did not matter, I would attribute this to how we conduct everyday life in such a troubled society. Human and psychic life becomes cheap and everyone's motives have to be treated with intense suspicion. My inner experience of this situation was violent. Whatever my own internal troubles and 'sour grapes' I found it very disturbing that colleagues could leave such feelings in another human being. More importantly, it could still be happening to many others, unconsciously, so leaving 'innocent' people with toxic feelings that they cannot attribute to an external experience. This may leave them feeling that they are going mad when, in fact, the external projections are troubled and toxic and it is not them!

Creativity in a paranoid-schizoid world is a troublesome process, which, either on the couch or in a troubled society, requires enormous working through and realistic appraisals of what can reasonably be achieved in the face of powerful regressive forces.

## CONCLUSION

I have described clinical and societal experiences that illustrate how one way of dealing with psychic poverty is through psychic violence. Excitement and superiority manifested in a dominant intellectualized coupling becomes the modus operandi of dealing with human intimacy. Many of the moral values held within the depressive position are largely absent from

an individual, group or society preoccupied with these dysfunctional human relationships. Indeed, institutional psychoanalysis has recently been criticized for adopting similar styles of relationships in its own training processes (Meyer, 2003). The responsibility rests on all of us to hold on to the values of the depressive position, inside and outside the consulting room. As Kernberg (2003) stated, psychoanalysis has to be brought to society to illustrate how destructive unconscious processes can lead to inhuman acts. In this paper I have highlighted the complex justification processes individuals and society can invoke to allow cruelty to occur from one person to another. My plea, as stated in my Omagh paper (Kapur, 2001/2002) is that everyone takes responsibility for how we relate to others and not just assume because we know about the inner workings of dehumanization, that this absolves us from personal responsibility in how we conduct our day-to-day lives. Surely those informed by psychoanalytic knowledge have a duty to do differently?

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