
This is a collection of three papers delivered at the 43rd Annual Margaret S. Mahler Symposium on Child Development (Philadelphia, April 28th, 2012), together with three response papers, an introductory overview and a concluding commentary. Of the spate of books that have emerged recently representing the return of the topic of guilt from repression for over four decades in psychoanalysis, many of which I have reviewed in these pages (Carveth, 2011, 2014, 2016b), this is by far the best from a clinical as well as a theoretical point of view. Salman Akhtar, as editor, is to be congratulated for gathering and presenting us with excellent work on this important topic. The papers by William Singletary, Desy Safán-Gerard and Stanley Coen, together with Elio Frattaroli’s discussion of the latter and elaboration of his own important ideas regarding the absence of morality in psychoanalytic theory and practice, are each in their own way gems of clinical and theoretical psychoanalytic insight. They deserve our close attention and should be required reading for candidates.

In his introductory overview, Akhtar addresses a range of important conceptual issues, seeking to clarify distinctions between guilt, shame, regret and remorse. He helpfully outlines the different varieties of guilt (annihilation, epistemic, oedipal, separation, induced, deposited, survivor’s) and varying consequences of guilt, both pathological (its projection, externalization and libidinization) and healthy (seeking forgiveness and making reparation). In many areas of psychoanalytic theory confusion arises from the fact that key concepts and terms are understood in very different ways. While many will agree that “shame is developmentally earlier than guilt” (p. 3), not all will agree that guilt “in its true meaning only evolves after the post-oedipal consolidation of the superego” (p. 3). For Melanie Klein (1948) persecutory guilt is normally supplemented by depressive anxiety or reparative guilt on entry into the depressive position, long before the consolidation of the Freudian superego at five or six years of age. Akhtar acknowledges that Klein uses the terms guilt and remorse interchangeably. For this reason few Kleinians would agree that “Guilt is about breaking rules and remorse about hurting others” (p. 4), holding that remorse is a type of depressive (as distinct from persecutory) guilt and that one might well experience remorse and regret over breaking rules and so injuring the moral community espousing them. While Akhtar’s overview reflects a more Freudian orientation, several other contributors to this volume parallel the Kleinian view in differentiating between “good” (reparative) and “bad” (persecutory) guilt. Akhtar offers a helpful discussion of the technical handling of guilt as it emerges during clinical sessions.

William Singletary’s “Pinocchio’s Journey to a Good Heart: Guilt, Reparation, and Transformation” views Carlo Coloddi’s (1883) story as an allegory of the process of emancipation from serious psychopathology and offers a moving account of the sixteen year treatment of a boy originally diagnosed with Asberger’s whose development clearly illustrates this process. Like the figures in the lower rungs of Dante’s Inferno who are frozen in ice and unable to move, at the beginning Pinocchio is a, notably motherless, hostile, self-centered and callous spirit imprisoned in a block of wood. He is indifferent towards and unappreciative of his loving father and rejecting toward good and helpful figures like the Cricket (the “still small voice of conscience”) and the positively guiding Blue Fairy, seduced instead by delinquent figures into a magical and omnipotent world of self-indulgence. In the face of his father’s illness and suffering, Pinocchio gradually changes direction, working to heal his father and in the process developing a “good heart” and finally becoming, as his father had wished, “a real boy.” Singletary
distinguishes the “good conscience” that promotes love and responsibility from the “bad conscience” (i.e., hostile and corrupt superego) that both seduces and punishes.

Singletary points out that when the normal developmental process of giving and receiving love is seriously derailed, love becomes threatening and defences are set up against it. “A five-year-old boy impulsively jumped from the top stair in my toy closet. I caught him, preventing his injury, and his response was to spit in my face!” (p. 18). When, after a wonderful time with his mother Bobby immediately kicked her, Singletary said to him: “I think that whenever you’re mean to people, it’s because you’re feeling more loving and caring toward them” (p. 17). He sees “interpretation of hatred as a reaction to feeling more love rather than as a justified reaction to hurt” (p. 18) as central to transforming hate back into love and thus promoting “good guilt” and the drive toward reparation. This understanding of hostility, omnipotence and withdrawal as defences against the threat constituted by love and need is crucial not only in work with autistic spectrum children but with all those who resort to narcissistic defences against the dangers constituted by object love: need, dependency, rejection, and loss. Significantly, in this connection Singletary describes his patient Mark’s “descent into Asperger’s” (p. 23), viewing this condition as constructed as a defence against psychic pain.

In “Bearable and Unbearable Guilt: A Kleinian Perspective,” Desy Safán-Gerard offers a remarkably open, detailed and illuminating account of four back-to-back sessions with a narcissistic, guilt-evading man. Correctly understanding her work to be not that of liberating the patient from an unreasonably harsh superego but rather as helping him to begin to be able to bear the justified guilt arising from his destructiveness, her initial attempts to interpret his defences against guilt succeed only in involving her in a sado-masochistic transference and countertransference. The patient then uses what appears to him to be (and, in all honesty, is) scolding to expiate rather than learn how to bear his guilt, just as he does through a range of self-defeating behaviors. In other words his evasion of justified guilt only strengthens his sadistic superego which, with the analyst’s assistance through her scolding interpretations, he projects onto her as a now external persecutor. But the ongoing self-monitoring of this experienced analyst begins to alert her to what is going on. She begins to recognize her guilt for the scolding interpretations and how she has been punishing herself by allowing the patient to accrue a debt. In light of this growing understanding, by the third session she is remembering that the patient’s guilt is a measure of his love for his objects and she begins to shift her technique away from interpreting defences against guilt towards drawing attention to the love underlying the guilt. She begins to convey empathic understanding of the intense pain with which the patient is threatened if he acknowledges his callous behaviour toward his loved objects. Safán-Gerard is to be complimented for her courage in providing us with a remarkably honest account of the countertransference, enactments and errors that she came to recognize and correct.

Just as Singletary’s patient spits in his face after he saves him from injury and another boy kicks his mother after a particularly lovely day with her, so Safán-Gerard’s patient wonders “why he should go after another woman precisely after having made love to Alma” (p. 53). She writes: “The awareness of such love makes the patient acutely aware of his or her separateness and infantile dependence on the object that he or she is manically trying to deny” (p. 44). By the fourth session, after his analyst has made great strides in overcoming her countertransference and re-establishing empathic contact with her patient’s pain, David remarks “I can’t believe I did that!” and ends the session saying “This is very sad … this is very painful.” Safán-Gerard offers us the following very important advice with respect to work with narcissistic patients: the analyst needs “to bring the patient’s attention to that moment in the session where guilt was experienced, acknowledging how painful it must be to recognize neglect or damage toward loved ones or toward the self” (p. 56). “Mobilizing the love might have prevented a
sado-masochistic enactment in the transference” (p. 57). In Kleinian fashion, Safán-Gerard points out that David’s difficulty in moving fully into a depressive position concern for his objects is due to “his unconscious envy and jealousy which makes him want to spoil and devalue them” (p. 57). I would like to suggest whatever primary basis they may or may not have, such envy and jealousy are, in my experience, at least inflamed, if not caused, by the perception that the good objects are unwilling to share, that they are withholding of their goodness, or that they are simply in one way or another absent or “dead.” Interpreting this as the basis of destructive envy is another way to be experienced by the patient as empathic rather than judgmental.

In “Guilt in the Therapist and Its Impact Upon Treatment,” Stanley Coen encourages colleagues both to scan themselves and identify with analysts in trouble. Instead of dissociating ourselves from such colleagues, insisting that, unlike them, we are well enough analyzed and trained to avoid such problems, he suggests we should face the more threatening task of focusing on our own needs, vulnerabilities and temptations that might lead us astray. In his view, “Some degree of anxiety and mistrust of ourselves seems essential for protecting the analytic situation” (p. 74). He wonders if it might be significant that when he presented a paper on “The Wish to Regress in Patient and Analyst” a discussant who insisted he had never had such temptations subsequently got into ethical trouble. For Coen, we need as much as possible to allow ourselves to be conscious of our unacceptable impulses and desires, while at the same time being able to contain and not be overwhelmed and drawn into acting on them. The optimal superego stance for the analyst at work involves scanning his needs, wishes and temptations from the standpoint of an overseeing, guiding, criticizing, restraining, praising and loving superego.

What Coen fails to mention at all is that this superego bears little resemblance to the superego Freud gave us, driven by castration fear and operating “like a garrison in a conquered city” (Freud, 1930, p. 123), but rather to the revisionist, “loving and beloved” superego that Roy Schafer (1960) cobbled together from small hints and suggestions appearing here and there in Freud’s writings but that Freud himself had notably not allowed to alter his overall view. Admitting that “Freud was not prepared to pursue to its end the line of thought leading to a loving and beloved superego or to integrate such a conception with his decisive treatment of the criticizing and feared superego” (p. 163), Schafer nevertheless proceeded to do the job for him. Subsequent readers of Schafer’s paper, no doubt aided by wish-fulfilment, seem to have thought the paper revealed that Freud himself recognized a more benign in addition to the sadistic superego, when what the paper truly revealed was what Schafer and others wished had been Freud’s view, not the superego he actually gave us. The “tolerant, loving attitude toward the analyst’s affective experience” (p. 70) to which Coen refers is characteristic not of the superego but of what I call the conscience (Carveth, 2013, 2015, 2016a), a structure that, along with the ego-ideal, Freud (1923) merged with the superego but that I argue is separate from and capable of conflicting with it. The kind of scanning or self-monitoring Coen recommends is a function not primarily of the superego but of the ego-ideal and the conscience—the latter requiring a “good heart,” something that, unlike far too many psychoanalysts, Stanley Coen clearly possesses and uses to good effect.

In “Reflections on the Absence of Morality in Psychoanalytic Theory and Practice,” Elio Frattaroli writes that Coen’s method of listening and scanning is “the heart and soul of psychoanalysis” for it “gives us entry into the sacred space where healing can occur” (p. 85). But, he points out, “Considering the disturbingly high-incidence of sexual boundary violations among psychoanalysts, it is apparent that too many of us … don’t do the kind of … self-scanning that Stanley Coen recommends …” (p. 88)—namely self-scanning that is “guided by a deeply moral sensibility” (p. 87; original emphasis). Frattaroli validates the kind of “honest and thorough self-analysis of disturbing countertransference impulses” illustrated in Coen’s report of his work with Mr. R. and points out that the kind of deep connectedness this can
facilitate between analyst and analysand, far from promoting boundary violations, “always entails increased compassion, never increased desire” (p. 90). By the sacred space where healing can occur Frattaroli is referring to Winnicott’s area of play, “the creative space in which the spontaneous True Self is born” (p. 90). “To hold this space as sacred is an act of love. To ignore or violate it is an act of tyranny” (p. 90).

Like Singletary who distinguishes “bad” and “good” conscience, and Klein who distinguishes persecutory from depressive or reparative guilt, Frattaroli points to two varieties of contrition, one “where guilt is primarily a fear of Hell” and another in which it is “primarily a feeling of remorse for hurting someone you love” (p. 91). Here also he refers to Martin Buber’s distinction between neurotic and authentic guilt, the former based on a fear of punishment for violation of parental and socially constructed rules, and the latter “based in the reality of doing something we know is truly immoral” (p. 91). Here he points to the difference between Coen’s “superego” (what I call conscience) and Freud’s: “An analyst motivated by Freud’s kind of superego would restrain himself from violating sexual boundaries not out of empathy and respect for the patient, but out of fear of what might happen to him if he did what he wanted. He wouldn’t have clear knowledge that it is always wrong to have sex with a patient. He would know only that it is forbidden” (p. 95). Unlike “the moral compass of our True Self,” the Freudian superego “remains like a foreign body or external voice in our heads that becomes part of our Winnicottian False Self” (p. 95).

The absence in Freudian theory of the idea of a guiding moral compass has, for Frattaroli, dangerous consequences. “It is a disturbing fact that nowhere in his writings does Freud suggest that it is morally wrong or even psychologically unhealthy to selfishly use other people for one’s own sexual gratification” (p. 98). Frattaroli here recounts the dismal story of Freud’s morally obtuse and inexcusable treatment of Dora, a fourteen year old girl essentially pimped out by her father to the husband of the woman with whom he was having an affair, a girl Freud diagnosed as hysterical for her refusal to go along with the perverse arrangement. Frattaroli asks: “So if Freud never recognized the immorality of a parent sexually abusing his own child, if he failed to recognize the immorality of his own self-serving misuse of Dora—as is evident from his lack of guilt and shame in publishing the details of how he understood and treated her—how then can we expect psychoanalysts who have been trained in the Freudian tradition to recognize the immorality of more subtle misuses of our patients? … I doubt there is a single psychoanalytic institute that currently teaches the Dora case for what it really is: a cautionary model of what psychoanalysis at its worst can be” (p. 101).

Frattaroli points out that in contrast to what Buber (1923) called “I-it” relations in which one uses or imposes oneself on others, in “I-Thou” relations one helps another to unfold. Following Summers (2001), he writes: “the models of therapeutic action currently accepted in different schools of psychoanalytic thought—interpretation and insight, internalization of the analyst’s self-psychological functions, or the impact of the real relationship with a collaborative co-constructing analyst—all emphasize, in one way or another what the (active) analyst must do or provide for the (passive) patient, and all fail to appreciate that the healing process is internally generated by the patient … and his innate tendency toward self-unfolding and actualization” (p. 93). If the latter idea sounds excessively romantic or mystical to the psychoanalytic ear, Frattaroli reminds us that for Melanie Klein “the depressive position unfolds naturally out of the paranoid-schizoid position” and that, therefore, human beings “have an innate direction not only of sexual but of moral development; a direction that includes the innate moral tendency to feel remorse (authentic guilt) for wanting to harm someone we love” (p. 106).
In locating the roots of conscience (as distinct from superego) in Klein’s “depressive anxiety,” Winnicott’s “capacity for concern,” and in early attachment and identifications with good objects, I depart somewhat from Frattaroli’s identification of conscience with what he calls our “higher consciousness” composed of the capacity for self-observation or self-reflection (as in Coen’s self-scanning). Although Frattaroli does not here cite the work of George Herbert Mead (1937) or the symbolic interactionist social psychologists who followed him, this tradition in American pragmatic philosophy and sociology also focused upon what it saw as our uniquely human capacity to imaginatively take the role of the other and then look back at ourselves as objects from the perspective of the other as the basis of moral order. The problem is that this is a capacity that saints share with psychopaths who have to be skilled in empathy precisely to be able to know how best to deceive and manipulate others. Empathy is not sympathy. To know that another is in pain is not at all the same thing as caring and wishing to help. The latter comes from prosocial feelings and attachments that we share with other primate species. In this light what we humans need is not more of the “higher” consciousness so often expressed in our uniquely human destructiveness, but more of the “lower” consciousness we see in animal altruism (De Waal, 2013). Coen’s method of self-scanning can be used for good or for ill. It will only be used constructively when it is informed by what Pinocchio finally achieved: a “good heart.”

References


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