

Aggression & Destructiveness

Psychoanalytic Perspectives

*Edited by
Celia Harding*

*Book Notes by
Michael Mervosh*

Part One – Mapping The Terrain

Chapter 1 – Making Sense of Aggression, Destructiveness & Violence

In everyday language, aggression is usually referred to by its destructive aspect, overlooking its necessary and positive functions.

Psychoanalysis detect aggression where it is not immediately apparent. Aggression, like sexuality, is subject to social disapproval and constraints, and is therefore repressed and expressed in many disguises.

Aggression can serve many psychic functions and needs.

In total psychology, being stolen from is the same as stealing and is equally aggressive. Being weak is as aggressive as the attack of the strong on the weak. Murder and suicide are fundamentally the same thing...possession is as aggressive as is greedy acquisition

- Winnicott

Psychoanalysis also recognizes healthy aggression. It promotes ego development and an active engagement with reality. In relationships, aggression is an essential ingredient of self-assertion and autonomy.

Freud firmly included aggressive behavior within the psychosexual framework of the human being.

He understood that healthy aggression, facilitating the progress of the sexual instinct, could be perverted into sadism. He identified hatred in the ego's repudiation of, and the destructive impulses towards, unpleasurable and painful experiences.

This hatred of an offensive 'other', threatening a sense of well-being, was attributed to a self-preservation instinct.

- Freud proposed that aggression is a primary response to loss (1917).

By loss he meant actual losses of loved and hated figures and emotional losses, especially narcissistic injuries to the self.

Freud's successors have drawn on his insights and provided a range of theories that emphasize different aspects and functions of aggression. In particular, aggression in the service of individuation and development, self-preservation, and as an inevitable part of the ambivalence we feel towards our objects.

Finally, Freud came to the concept of an independent destructive drive in the 'death instinct'.

Healthy Aggression

Freud recognized that we need aggression to grasp life, pursue it, master it, create it, and live it.

He saw it as an essential resource for the sexual self and self-preserved instincts.

Aggression is the impetus for psychic development and integration, for independence and autonomy, for agency and mastery of the environment.

Aggression facilitates separation from mother the child's individuation, contributing to the child's attachments, explorations, recoveries and learning.

Winnicott regarded aggression originally as synonymous with activity, essentially life generating. With time and development, love and aggression are differentiated.

Self-Preservation

The idea of aggression in the service of self-preservation is the basis for understanding aggression provoked by a perception that the self and identity is under threat from internal or external dangers.

Increasing mental disturbance is accompanied by mounting aggression. People with a precarious sense of self are convinced that their longings for intimacy will compromise their psychic existence. A longing for closeness induces murderous rage towards the person they yearn for.

But being alone also threatens their fragile sense of self: eliminating the threatening person means eliminating the person they need. They resolve this dilemma by sexualizing their self-preserved aggression, turning into sadism, thereby converting the wish to destroy into the wish to control and hurt.

The consequent sado-masochistic relationship protects them from the threat of intimacy while sustaining an intense relationship at a safe distance, neither too close nor too far away. The anxieties associated with engulfment or abandonment are eroticized and turned from murderous rage into excitement.

Threats to an unstable identity often lead to violent behavior. Violence may serve as organizing function when people feel that their identity is liable to fragment or when they fear they may become helpless.

- *Self-preservative destructiveness also takes the form of attacks against the self when the self is felt to be at risk of exposure to re-traumatizing experiences.*

Any sign of vulnerability may induce a self-destructive attack, in an attempt to protect the self from violation.

Reaction to Loss and Fear of Loss

Freud (1917) suggests that people cannot mourn their loved objects until they have come to terms with their unresolved hatred towards them.

The infant fears that its neediness, erotic longings and frustrated rage will jeopardize its necessary relationship with the mother. Aggression is mobilized to subdue these dangerous feelings, thus averting the catastrophic consequences of the mother's rejection.

The infant attempts to control the bad, frustrating mother and his hatred of her, by internalizing these aspects of their relationship; in this way the infant can appear to preserve the external mother as loved, available and satisfying.

This maneuver relocated the problem from the external relationship into the mind, where both the object and the ego are split into subsidiary relationships.

Infants direct their aggression inwards in a misguided attempt to keep the relationship with the mother aggression-free and therefore protected from rejection.

Without the empathic attunement of a secure attachment, children cannot develop the mental capacities necessary to regulate and make sense of losses and the aggression they evoke.

People without the capacity to regulate their feelings are prone to express their strong emotions in primitive ways such as self-harm and violence towards others. Destructive and violent reactions to vulnerability and loss frequently indicate lost or damaged attachments earlier in life.

The Death Instinct

The death instinct is directed at the self and operates invisibly and unhindered when it is not bound by life forces.

In the internal world, aggression is expressed as sadism towards the self and experienced as guilt.

The 'depressive' position is achieved when good and bad are seen as aspects of the same person, capable of surviving the infant's sadism and envy, and thus enabling a good object to be introjected and loving feelings to modify destructive impulses.

The death instinct, according to Melanie Klein, is part of the human constitution and operative from birth.

The concept of the death instinct has remained contentious in psychoanalysis.

An Integrated Theory of Aggression

Mitchell sees aggression as a central organizer of our sense of self. Aggression arises as part of our nature. Aggression, like sexual desire, has a power derived from its physiological base. When strong aggressive reactions have not been 'mentalized' they seem to take us over.

- *Intense anger is arresting and pre-emptive. When unintegrated, it can shatter and diffuse other concerns and intentions; its physiological power can disorganize mental states. When integrated, it can generate and energize other motives and actions. Aggression, like sexuality, often provides the juice that potentiates and embellishes experience. (Mitchell)*

Our destructive feelings acquire meanings from the ways others evoke, receive and understand our aggressive initiatives and responses. Destructiveness is evoked when the sense of self feels endangered.

In particular, the prolonged dependency of human beings on others during infancy inclines us to experience responsive failures as threats to our psychological, and sometimes physiological, survival throughout life.

~ Coming To Terms With Aggression ~

Developmental Roots

As children gradually internalize experiences of empathically responsive figures as good objects to turn to in states of helplessness and distress, they learn that it is safe to be vulnerable in the presence of a protective object.

When feelings can be contained and thought about by a protective object, the child can begin to symbolize and process their feelings mentally.

A mother's maternal function is compromised when her child's emotional states are experienced as a threat to her own psychic equilibrium.

Without an understanding and protective internal object to turn to, or the mental to symbolize their aggression, the endangered self resorts to destructive defensive measures.

The maternal function in the child's development is complemented by the paternal function of separation and individuation, represented in therapy as the role of the father.

Children need a 'third' in their lives to help them to separate from mother and to mediate the demands of external reality.

When the father intervenes in the relationship between the mother and child to 'reclaim' his wife, and establish a relationship of his own with his child, he offers the child 'a way out' of an exclusive dependence on the mother.

In order to develop an independent identity, the child needs help to separate from the mother, and encouragement to express their independent strivings, often in the form of angry protests.

Failure to achieve this separation jeopardizes the child's developing sense of self and makes it difficult later in life to establish either intimate relationships with, or autonomy from, others.

Estrangement from the mother is liable to be experienced as abandonment without a container, propelling the child back to the symbiotic relationship with the mother.

The child is released from their symbiotic relationship with the mother by seeing that there is more than one way to interact with her. (By observing the father and other children do so.)

Boys with violent fathers face a dilemma about how to manage their aggressive feelings.

In favorable circumstances, young boys identify with fathers who have protected and supported their strivings to become independent of their mother, and helped them to manage their longings for an exclusive union with mother.

This identification helps the child to experience father's presentation of the 'facts of life'.

However, when the father is violent, emotionally and especially physically, identification with the father exposes the child to frightening levels of unmanageable aggression.

The young boy's attempts to become independent of mother are hampered because father is unavailable as a protective and supportive object, and because his aggression feels too alarming to use in the service of self-assertion.

The boy's aggression, particularly self-preservative aggression, is liable to violently erupt when he perceives a threat to his identity, because he lacks the capacity to distance himself in more sophisticated and imaginative ways.

Aggression In Disguise and As Guise

Aggression can be disguised by the hopelessness and despair of depression.

Sexual excitement may perversely disguise underlying hatred and violence.

The role of innocent victim can disguise unprocessed rage and destructiveness from traumatic experiences.

Denial and rationalization in psychosis conceal massive attacks on reality and the self.

- *Destructiveness that cannot be processed mentally has to be evacuated and/or enacted.*

There are three solutions to the problem of containment when the capacity for symbolization collapses:

1. People may identify with their designated aggressor and turn their passive experience of helplessness into active perpetration of what was done to them. This defense can lead to depressed or vengeful states of mind.
2. People may eroticize their overwhelming experiences and turn pain, anxiety and rage into excitement, and adopt perverse defenses and solutions.
3. People with highly unstable identities may react violently when they feel threatened. In extreme cases, the endangered self resorts to psychotic functioning by attacking one's perceptual capacities.

Working With Destructiveness in the Clinical Situation

Aggression is an essential ingredient in psychotherapy.

- *Integrated aggression energizes engagement with the therapist in self-assertion and contributes perseverance and determination to the therapeutic alliance.*
- *Unintegrated aggression may disrupt the progress of therapy, preventing or disturbing engagement with the therapist.*

The ego strength required to mentally process powerful aggressive and sexual impulses is only achieved through containing destabilizing feelings.

Therapists fulfill the dual functions of maternal containing and paternal separating and differentiating for their clients, until the client has internalized these capacities for themselves, through symbolic thought rather than re-action.

“No stronger impression arises from the resistances during the work of analysis than of there being a force which is defending itself by every possible means against recovery, and which is absolutely resolved to hold onto illness and suffering.” - Freud

- *Part of the therapist’s task is to understand the client’s shifting motives for tenaciously holding onto their suffering.*

Suffering may, for example, appease a cruel and unforgiving superego; gain pleasure from triumphing over the therapist and the needy part of the self.

Freud recognized that ego weaknesses make it difficult to manage aggressive impulses constructively. He attributed ego weakness to two main factors:

1. the strength of the destructive instinct,
 2. a traumatized ego inadequately protected by the stimulus barrier, and overwhelmed by experiences from internal and external sources.
- *Therapists must keep in mind that what they say or become for the client may be experienced as threatening.*

The presence of a therapist’s compassion or empathy can make clients aware of their own neediness and vulnerability, and thus provoke defensive reactions when these needs are felt to endanger the self.

Experiences perceived as threatening the self can provoke frustration, humiliation, disempowerment, insult to one’s ideal self – all which undermine self-esteem. The client may feel at risk of unbearable confusion, disintegration or remorseless castigation by a tyrannical, sadistic superego.

When the capacity to symbolize and reflect on feelings is unstable or non-existent, the client risks reliving threatening feelings and relationships, and becoming re-traumatized.

The client’s trust in the therapist to be a reliable, good object, and a secure base with whom it feels safe to be vulnerable and needy, has to be established and re-established over and over again.

“It is only once the therapeutic bond is formed that the controlled turbulence and challenge needed for new meanings to emerge can hope to succeed.” - Holmes

The client's need to rely on the therapist may re-expose them to disappointments, betrayals, neglects that were experienced in past dependent relationships.

The therapist's empathic understanding may be experienced as the presence of an engulfing mother threatening the client's sense of self and evoking self-preservative rage, to create distance from the threatening therapist.

Connecting with the pain of loss exposes the client to guilt and grief for the damage they have inflicted on their good objects, and to the life that they have failed to live.

When a threat to psychic equilibrium is too overwhelming to be thought, the client can literally take flight or project the intolerable state of mind into the therapist.

As in everyday life, there are broadly three types of solutions to the problem of disposing of and expressing helpless rage when experiences beyond the ego's capacities arise in the therapeutic relationship.

1. *Clients may turn their perceived helplessness into active identification with the aggressor.* They perceive their therapist as mistreating them and exploiting their trust. This shifts the passive vulnerable client into the powerful position of a victim with a valid grievance, who is justified in attacking the therapist.
2. *Clients may eroticize the rage induced by their helplessness and dependency on the therapist.* They may attempt to turn the therapeutic relationship into a sexual seduction, or convert it into a sado-masochistic one, where the client feels safely in control of the therapist kept at a safe distance, not too close and not too far.
3. *Clients with a self in extreme danger resort to psychotic solutions.* A psychotic part of the self appropriates the mental apparatus and attacks the perception of reality and the perceiving self.

The therapist detects the expression of destructive impulses and fantasies through transference and counter-transference communications. Frequently, therapists become aware of an urgent pressure to do or say something, to act rather than think in response to the client's projected states of mind.

- *The therapist is required to process the projections and then represent the unbearable experiences in thoughtful understanding.*

The therapist needs an open mind to see things from the client's point of view, and to hold the client's projections until they can be understood. This containing process introduces the client to the process of thinking about their mental states.

The therapist gradually articulates the client's underlying anxieties and dilemmas, and shows the client the illusory clarity of their violent and destructive solutions.

Any direct interpretation of a client's aggression towards the therapist is likely to be futile and counter-productive, and may compound the client's dread that they are irredeemable, and that their destructiveness is uncontainable.

Trust in the therapist will be jeopardized if the client perceives the therapist as defeated by, or colluding with, their destructiveness.

The client's vulnerability must be carefully assessed, and it may be more helpful to interpret the client's inertia and paralysis as fear of explosive rage, rather than focus on the destructive rage itself.

The therapist's task is to show the client how their ways of managing work against them.

- *The capacity to contain destructiveness in damage-limiting ways generates hope of psychic reparation.*

As the client's superego becomes less cruel and demanding of perfection and is more forgiving, the ego can accept forgiveness, compromise and imperfect repair.

These are hard won and inestimable achievements.