

Capacities and dispositions: reflections on Good and Evil from a forensic psychiatrist

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*'A capacity for good and a capacity for evil are one and the same capacity. To
realise the good, dispositions are necessary'*

St. Thomas Aquinas

I start with this quote from Aquinas because I want to examine what psychology and psychiatry might have to tell us about the problem of evil. They have little to say about the classic problems of evil: how God allows evil to exist in a loving, good and godly world; nor about the distinction between human and natural evils, nor the problem of free will. But it seems to me that the concept of 'dispositions' might link with psychological capacities for of thinking, feeling, believing and acting.

So I want to look at the mental dispositions that make evil possible and I am going to do this by concentrating on the experience of those who have done evil things; what they say about them and what others say about them. I want to use what I have learnt from those who tread the Via Dolorosa; and I want to start by acknowledging their part in my moral education. I am also grateful to my colleagues in forensic psychiatry and psychotherapy for giving me the time to talk about these things

What is evil? Noun or Adjective?

Defining evil seems to be very difficult, and I will only touch on a few themes here. I have been very influenced by the work of Mary Midgley (1984). Midgley emphasizes the complexity of our lives and our decisions, what she calls '*the unevenness and conflict of our motives*'. At this point, I would also add the term, 'coherence', and perhaps more importantly 'incoherence', when thinking about how people make choices. I wonder to what extent evil is associated with a type of psychological incoherence in terms of living out our narratives, and I shall come back to say more about this.

I was asked recently whether psychiatry repudiated the notion of 'evil' as non-scientific or 'mediaeval'. I believe the questioner was thinking about the effect of Freud and the post-Freudians on our understanding of the mind; the analytic view that all our choices are determined by our mental life, and are meaningful, even if not all conscious. On this basis, evil does not exist as a noun: it is an action that arises from unconscious guilt, or the need for pleasure, or an unconscious destructiveness.

Richard Worsley (1996) a priest and counsellor, argues for evil as a consequence of human freedom. Human evil is a matter of choice, but destructive choice: a '*destructiveness of imperfection or excess*' (p144).

For Worsley, Melanie Klein's account of the development of the personality in terms of relationships with others offers a fruitful way to think about evil. If evil represents a failure of agency, it must do so as agency arises from the personality. Such a failure of agency indicates a disruption of relationships in early life and personality development. Klein's concept of the paranoid-schizoid position facilitates the commission of evil because unspeakable affects (the term I use) or perhaps the Shadow, to use Carl Jung's term) are projected out into another and then related to in a way which is ultimately disconnecting from others - a type of autism.

Evil as an interpersonal phenomenon

When looking at the literature on evil, we return to the same themes repeatedly. Evil seems to be related to the good intrinsically, yet is it the opposite of good or something much more than this, having a life of its own? Opinions vary about whether it is a negative, a 'not-state', or something more actual in its own right.

I take the view that evil has an interpersonal quality; that we recognize evil because of its impact on us as persons with feelings and choices. Our state of mind, in response to something done or witnessed, tells us something about whether we consider the state of mind of the actor to be 'evil'. Destructiveness will often be a part of this; cruelty, deliberateness and disdain for distress also seem to be key features of an 'evil' state of mind.

I think that disconnectedness and alienation are crucial to the evil state of mind; this reminds me of Paul Tillich's (1951) account of unbelief, pride and desire, which then interferes with our power to be all that we can be. It also seems to me that we are talking about a failure not so much of the ordinary psychological self but the moral identity that we aspire to, so that evil makes us less than we are or can be. We want to be more than we are; sometimes we have a sense that there is more than the here-and-now-ness of life, and that we could reach it if we only knew how, perhaps best described by Wordsworth:

*'...something far more deeply interfused,
whose dwelling is the light of setting suns,
and the round ocean and the living air
and the blue sky, and in the mind of man.*

(Excerpt from Lines composed above Tintern Abbey)

Identity as an interpersonal process.

I have always liked the notion that we create a narrative of ourselves and that the capacity to do this is an enormously complex one, called by Jeremy Holmes (1992) 'autobiographical competence'. Three things flow from this for me. First, the construction of a coherent autobiographical narrative is an on-going process; it is not a matter of stages. We move from level to level, from complexity to complexity. We can regress of course, but we can always elaborate, see it another way.

Second, this construction of an autobiographical narrative is a group process; subjectivity arises out of the space between us, but this is the space of the dance of many, not few: the reel and not the waltz.

Ruth-Ellen Josselson (1996) has perhaps written best about this. Of course, there may be many different groups which give us identity: our families, our chosen cultural and ethnic identity, our professional identities, even gender to the extent we think this can be chosen or created. However, it seems to me that our capacity to make choices is part of our identity that is constructed in relationship not just with our first caregiver but also with all the caregivers and care-seekers with whom we relate.

Lastly, I see our moral identity as a particular sort of 'I-ness', which is part of the autobiographical narrative. This could be linked to notions such as the ego -ideal, or the super-ego. Whatever the wording, it is hard not to think, as Isaiah Berlin (1969) suggests, that the splitting of the self into higher and lower is a profound conceptual development in the Western history of ideas. Where there is a failure to develop a moral identity, or in those situations where the moral identity is undermined, diminished or abandoned, there will be what Midgley calls 'the empty centre', or as one my patients called it, 'a dark space'. Perhaps it is a type of nothingness; here is C.S. Lewis's description:

' Nothing is very strong... strong enough to steal away a man's best years, not in sweet sins but in a dreary flickering of the mind over it knows not what and knows not why...'
The Screwtape Letters

'Between the acting of a dreadful thing and the first motion, all the interim is like...a dreadful dream'
Shakespeare: Julius Caesar

It is interesting how many writers and poets have used the metaphor of light and dark to think about evil, so that evil states of mind are often associated with a type of inner darkness or blindness. Certainly there seems to be an important theme of 'not-seeing' aspects of reality that are there to be seen, so that in an evil state of mind we do not see other people's distress, we do not see the injuries we do and we do not let ourselves know some important aspect of experience. This may be why evil has so often been associated with deception: what Scott Peck called 'people of the lie'. (1983)

I also think there is something about self-deception here, a blotting out of sense perception and of affective perception or empathy. When we do this, we can then be cruel. By not seeing others as human, we can treat others merely as means to an end. The most desperate evils of the world seem to me to involve a deliberate not-seeing of others as human; the reduction of a person to an abstraction, rather than each one as a spark of the divine.

In addition to not seeing, we might also add not thinking, a failure of the empathic imagination. In the Nazi Death Camps, we know that to ablate that sense of empathy, it took: between 2- 4 bottles of vodka per day (Lifton1986). This tells us something of the enormity of what needed to be blunted out of consciousness.

Thus the evil state of mind is not just to do with destructiveness but also with a type of blindness which gives rise to deception, cruelty and blankness. No wonder people have commented on the blandness or ordinariness of evil, its monotonous, boring quality. In these states of mind, there may be little excitement, but rather a cutting off from experience and a dream like state.

It therefore seems to me that when we come to contemplate evil, we are not considering a noun, a force outside ourselves. We are considering instead an adjective; a descriptor of a way of being, a state of mind that is interpersonal and in which moral identity is impaired. I want now to give some accounts of the different ways the moral identity can fail: whether by development, by choice, by fear.

Talking to remarkable (evil) men

What is most striking about the people I meet is not that they are amoral but rather that their accounts of morality are incoherent. At the heart of the Genesis story is the knowledge of good and evil, and in the research that I have been doing with Jonathan Glover we find that type of knowledge and moral reasoning in people who have done violent things. It is reasoning with gaps, with inconsistencies and lapses in reasoning fragmented narrative. And this is like the incoherence of insecure attachment narratives, which seem to indicate a failure to think at a crucial moment:

' I am afraid to think what I have done.'
Shakespeare: Macbeth

This being afraid to think is itself a type of dissociation from the reality of the moment. The gaps in experience produce gaps in the narrative of lived experience so that self-experience becomes yet more fragmented.

Such dissociation is part of a process that makes evil states of mind more possible still and induces a false sense of security that all is well. *'It didn't feel wrong'* said one of my patients, *'but also I didn't care anymore'*.

With that lack of caring comes a type of grandiosity and a certainty about the world. There can even be elation as the anxiety begins to fade. For a moment, the

person can feel like a god such as Shiva, the destroyer of worlds or, as the Talmud suggests, *he who destroys one life destroys the world entire*'. This sense of empowerment can be especially important for those offenders who have profound experiences of being helpless and humiliated, often (but not exclusively) in childhood.

The breaking up of identity after evil

In Richard III, Shakespeare accurately portrays the breakdown of the self after evil, so that there is an urgent need to dissociate further from the part of the self that has done shameful or guilt inducing things. Shakespeare also shows the collapse of language after the unspeakable happens. At the beginning of the play, Richard speaks in faultless prose. By the end of the play, after the murder of the innocent, his language disintegrates, together with his sense of identity. With the disappearance of language, comes the necessity for a somatic solution, a bodily enactment of what is felt; hence, *'speak, hands, for me'*.

If there were more time, I would say more about the failure of language as an indicator of the failure of autobiographical competence and how this may be crucial for the management and expression of dangerous affects. Indeed, there is evidence that the experience of helplessness and fear affects the part of the brain that facilitates articulated speech so that people who have both committed and experienced acts of violence may literally struggle with a sense that their experience is unspeakable.

How tempting it would be to characterize this as mental illness! There is no doubt to my mind that for some (perhaps not all) who have been in evil states of mind, there is suffering after, and horror; especially where there has been destruction of life. There are several reports in the literature of traumatic stress reactions in those who have killed or 'committed atrocities'. The difficulty with using the language of 'psychosis', or of other types of mental illnesses is the notion that all who are in an evil state of mind are 'ill'. If we are speaking existentially, or even spiritually, then we can use illness as a metaphor for something gone wrong. But my concern is that if we are not speaking metaphorically, we may end up saying 'Well, all evil is mental illness'. We might be more forgiving and less condemnatory, which makes us feel better but we may miss a sense of agency in the actor, that is to say, his or her ownership of the evil event and it is that sense of agency that bothers people afterwards. In my experience, most forensic patients don't find the language of illness all that helpful, either as an explanation or an excuse. I shall come back to this.

Ordinary evil

Forensic psychiatry looks at evil deeds at an individual level and in the context of abnormal mental states. Our patients are 'extraordinary' men and women, often notorious and made special by their actions. They are then put in a 'special' place. In contrast, historians and sociologists look at groups and communities of 'ordinary men' who have done evil things. This literature is essential reading for forensic psychiatrists, just as our work is essential reading for the sociologists. We need to have dialogue, as we approach the problem of evil from different perspectives.

Key sources of information for me here have been the Holocaust literature and associated texts and media; also historians of the third Reich, and communities affected by Nazi occupation. In these works we find accounts of the development of the capacity for evil in men and women, who had not previously been so often or so completely identified with those states of mind. Forensic patients may be those who have failed to develop a moral identity. Here, in this literature, we read accounts of people who abandoned their moral identity or found it slipping away beneath their feet. Like a type of dementia, it seems their moral reasoning crumbled insidiously and

subtly over time, the more shocking because not everyone had this experience and some managed to hold onto a coherent moral narrative.

What made it possible? Repeated themes emerge. First, group processes seem important; and also 'antigroup' processes. Antigroup processes, as described by Nitsun (1994) are those in which a group acts to deal with rage and hatred in pathological ways. Much the same mechanisms then can operate at a group level as at individual: splitting, projection and, most toxic, the idealisation and denigration that goes with these processes. The idealisation of one group seems to entail the denigration of another, a perverse defence against anxiety. Healthy coherence of the group is replaced with pathologically cohesion (Pines1998). During the Nazi regime, peer support for doing evil things made it seem 'all right', as friends colluded in denial. Burleigh (1994) describes how friends were recruited together deliberately to the department that oversaw the euthanasia program, and which generated the framework for the death-camps.

Primo Levi's experiences (1988) are also a fruitful source of information for understanding evil states of mind. His famous account of the Camp guard who, when asked why he had assaulted a prisoner, responded 'There is no why here', gives us a picture of the creation of a human community without meaning, curiosity or boundaries and where everyone is the same. Again, the language of psychosis can seem appealing here; a world in which different things are treated the same and accorded the same lack of value. Consequently, there is no distinction between truth and falsehood, good or bad. The challenge for the inmates was to maintain some sort of moral life and Levi is not at all sure they succeeded. Instead, he sees them as living in a 'grey zone' where the best did not always survive. Levi challenges others to judge those faced with life in the work camps. However, he also is able to describe 'moments of reprieve' in this world where there is no 'why'. Tvetlan Teodorov (1999), in contrast, provides accounts of the maintenance of moral identity in the face of chaos, loss and cruelty.

The Holocaust literature describes the development and maintenance of a community which had an 'empty centre'; somewhere there was a distance from all that is real and complex and human. The planning and running of the Final Solution had an awful banality. There is no complexity, no reflection, instead an awful certainty that this is the way it has to be. Unremitting certainty appears to be another common feature of evil states of mind at both individual and group level.

Lastly, I want to consider Gita Sereny's account (1974) of her interviews with Franz Stangl, who was commandant at Treblinka and who oversaw the murder of some 900, 000 people. She talked to him weekly for about a year. Seventeen hours after their last interview, he died of a heart attack. At their last interview, he had acknowledged to some degree the wrong and harm he had done and Sereny's feeling was that his death came about because of this confession, that he had become 'the man he should have been', a man who felt grief and remorse for the evil that was done by him. How much can any normal heart take?

The moral self and the mirror

If we compare these narratives of evil states of mind, in the individual and the group, what can we learn about moral identity and its failure? Where do we get our moral identities from and how and under what circumstances can they be undermined or dismantled?

We may conclude, as did Worsley, that evil is not extraordinary but 'insidiously normal', or as St. Augustine did, that it is part of our human nature. I prefer Aquinas' view, the one with which I began, because it seems to me to hint at the importance of our developmental history in understanding the expression of the potential for both good and evil.

Developments in social biology and attachment theory over the last twenty years tell us that humans have an innate capacity for relating with others and the development of the capacity to make effective and loving relationships is a task that takes us from the cradle to the grave. In our earliest relationships with others, we develop our own sense of self, organized in the mirror of our relationships with others. The problem that Narcissus had was that he did not recognize himself. An absence of mirroring meant that his own sense of self was faulty.

Without that mirroring function, we do not learn to self-reflect and without self-reflective function, there may be little capacity for empathy. There is evidence that relating empathetically with others is an essential part of our make up. As early as eighteen months, children relate to each other in what the psychologists call 'prosocial' ways, attempting to comfort distress and being helpful to others.

Presumably the capacity for love and prosociability can be lost or never acquired. In this sense therefore, if a person does not acquire a disposition for good, then he or she may well then develop a disposition for evil. One recalls Aristotle's account of the importance of character for virtue and the relationship between personality, self and character. I find myself wondering if by character, Aristotle meant that moral sense of self or I-ness, which is transpersonal and connects to those other important aspects of self experience, 'me' and 'we'.

In the hospital setting we see people who seem to have lost the capacity to relate to others, but very much in the context of a failed sense of self. It seems to me that as well as other people not being very real for them, many of our patients also are not very 'real' to themselves either. One thinks here of the children's story of the velveteen rabbit, (Williams, 1992) who was loved into being real; we may compare this experience with not only our own but also the experience of 80% of our patients who have experienced abuse, fear and neglect as children. Their failure to be loved has caused them not to be 'real', with important moral consequences.

The psychological construct called psychopathy has often been invoked as the mental capacity for evil. Research using a checklist based on psychopathy characteristics (callousness, lack of empathy, emotional shallowness) shows that a subgroup of people does exist with these personality traits, and they are at increased risk of acting violently to others. Hare (1991) argues that these are people who have failed to acquire a moral identity, or perhaps who moral identity is faulty in some way, either as a result of inherited or environmental factors.

However, the concept of psychopathy does not account for those 'ordinary' men and women who seem to have the capacity for loving, and goodness in relation to some people but who appear to abandon it in relation to others. Accounts by Dicks (1972) and others of working with those who commit atrocities (usually in the context of state organized violence or war) do indicate ways in which one can 'train' people out of feeling. If as Midgley suggests, feelings: '*are lasting attitudes with logic and structure*', then by convincing people of some sort of logic or structure, feelings will follow. (One thinks here of the importance of propaganda, and the misuse of both science and history to fuel racial hatred).

Feelings themselves can also give rise to logical thoughts and mental structures and I want to focus next on the importance of grief and its common accompaniments, rage and despair. I have no doubt that the capacity for evil is much more likely to emerge when these feelings are present, either at the level of the group or the individual. Given that we all have the potential for all these feelings and we cannot know what new events will test us, it seems to me that Aquinas is right; at all times, and in all places, we have the potential for both great good and great evil. I see our psychological life as a wave function, operating at both individual and group levels, and that when the wave function collapses there are crucial moments of moral significance when we are in a state of mind for some type of action, good or bad. Many factors will influence the collapse of the wave function; internal factors such as

rage, despair or great compassion and external influences such as political will and history.

If there were more time, I would give an account of other important psychological mechanisms that act as internal influences. These include unresolved trauma and victimization, which in turn may lead to identification with the aggressor, dominance and the denigration of vulnerability, the influence of perceived authority and the abandoning of identity and responsibility.

I would also want to say something about the capacity for thinking about thinking: complexity and the second order thinking. Mary Main (1991) calls this 'metacognition' and she posits a close relationship between the capacity for metacognition, secure attachments and the capacity for curiosity. The lack of a sense of curiosity is arguably an important aspect of failure of empathy - the inability to see things another way. Insecurity of attachment is also related to failure of language around autobiographical memory, another important aspect of the construction of the sense of self.

Walking the Via Dolorosa: What happens after...

*'Will you take me on the way a little?
T'is but a little that I can take thee...yet I'll go with thee'*

Shakespeare (Othello)

I want to close by thinking a little about what happens afterwards. I often think that my patients are like survivors of a disaster *where they were the disaster*. Disaster survivors often describe how they feel cut off from the social group where they used to belong. For offenders this is also true; but the sense of being cut off by what they have done is amplified by the rejection by that social group, often shrill and vocal. Berlin (1969) suggests that connection to a community entails connection to a set of values and that those who do not share those values are excluded from community.

So what can we do for those who have been so rejected? First, we can be there on the Via Dolorosa, 'to take them on the way a little'. Second, we can use therapeutic time (in all its forms) to help these people construct an autobiography, a more complex, colourful and detailed narrative. In the space between us, we want to help the person to develop some greater sense of being real; to reintegrate the different sense of self that often seems so chaotically connected, expressed in what this patient said to me:

'I had multiple masks... I don't really know who I am'.

The ability to construct an autobiography inevitably contains a moral element insofar as we are made of our connectedness to others; the 'self' is intimately relational in nature, not an atomistic object. If our selfhood is relational in nature, it is moral, for to hurt another person is to hurt ourselves and we suffer. As John Donne said, *'Any man's death diminishes me'*. (1972)

But we have to let ourselves know that; and we have powers of deception and disconnection that allow us to cut off from knowing about our connectedness to others. Traumatic experiences, even ordinary life experiences, can steer us into that type of disconnection. And addressing this through therapy is not easy or painless, for it means facing up to hidden, unspeakable things.

'You must not hide your impulse to do evil. You must take it out and place it before you every day. The impulse to do evil can only have great power over you when you cannot see it'. (Freeman, 1991)

Lastly, I want to think about the importance of judgement. Primo Levi argues strongly that judgement is important; he and his fellow prisoners were victims of violence no matter what unconscious forces were at work in them as in all people. I think this is a crucial point for forensic work because it seems to me that we are not allowed the luxury of non-judgement, to be found in the kindly benevolence of

medicine that is empathic and kind to all. I am not suggesting for a moment that we should become punitive but rather that we cannot take ourselves out of the moral discourse in which the offenders are involved. We are part of the community that they alienated themselves from by their actions; there is a moral valence or spin to the work and the thinking that cannot be avoided. To pretend with offender patients that they did not do something awful is to miss out on a most important therapeutic aspect. Explanation is not excuse and the patients are aware of this.

Conclusion

As my late and much-missed colleague Murray Cox used to say, we need not just dialogue but triologue. Our reflections about good and evil will be incomplete without input from three sources, psychology (especially neuro-psychology), literature and theology. Had I more time, I would share with you the excitement and importance of the work of Allan Schore (2001) and Sean Spence, (Spence & Frith, 1999) who between them provide important evidence about the importance of the prefrontal cortex in making relationships and choices. From literature and theology, we get much needed complexity - images and words to free us from crude reductionism, which may seriously misrepresent reality – for language is vital in the face of the unspeakable. Memory and symbols are essentials to develop the type of emotional language that is necessary for autobiographical competence.

Members of the Christian faith sometimes describe themselves as 'Easter people', people with hope. That particular transcendent story also tells of being Good Friday people and like many other transcendent stories, suggests that suffering and cruelty often precede great good. It seemed to me that after the evil of September 11th, we feel touched by a terrible darkness; but we are all creators of both light and darkness. We contribute each one to the light or the dark and each one of us has the capacity to contribute in our own way. Each time we do something unworthy, we contribute to a type of collective blindness, a turning away, and at times it happens to all of us, that much is certain. But as Jim Gilligan (1999) puts it, there can be atonement, or at-one-ment. We need not give up hope that if we gather all the fragments, nothing will be lost forever, and that love is stronger than death. After all, as Philip Larkin (1988) put it, 'what will survive of us is love'. I hope that's true.

References

- Aquinas, St. Thomas. *Summa Theologiae. Vol. 22. Dispositions for human acts.* Trans. Kenny A. London, Eyre & Spottiswoode 1964.
- Berlin, I (1969) *Four essays on liberty.* Oxford Oxford University Press.
- Burleigh, M (1994) *Death and deliverance: euthanasia in Germany 1900-1945.* Cambridge University Press.
- Freeman, D (1991) *Victim power: the clinical and philosophical paradox of Nazi and Jew.* The Guild of Pastoral Psychology Newsletter, 1-14.
- Gilligan, J (1999) The Inwit of Angebite. In Cox, M (ed.) *Remorse and Reparation.* London, Jessica Kingsley Publishers, London. Pp 33-47
- Holmes, J (1992) *Between Art & Science.* London, Routledge.
- Larkin, P. (1988) An Arundel Tomb. In *Collected Works.* London, Faber & Faber. Pp.110
- Lewis, C.S (1942) *The Screwtape letters.* The Centenary Press, London. Pp 64
- Levi, P. (1988) *The drowned and the saved.* London, Abacus.
- Lifton, R .J (1986) *The Nazi Doctors: a study of the psychology of evil.* New York, Basic Books.

- Main, M (1991) Metacognition. In Parkes, Stevenson-Hinde & Marris, P (eds.) *Attachment across the life cycle*. London, Routledge.
- Midgley, M (1984) *Wickedness: a philosophical essay*. London, Routledge.
- Nitsun, M (1994) *The anti-group*. London, Routledge.
- Pines, M (1998) *Circular reflections: selected papers on group analysis and psychoanalysis*. London, Jessica Kingsley Publishers. Pp 211-225
- Schore, A. (2001) Effect of early relational trauma on right brain development, affect regulation and infant mental health. *Infant Mental Health Journal*, 22: 201-269
- Sereny, G (1974) *Into that darkness*. London, Andre Deutsch.
- Smart, N (1969) *The religious experience of mankind*. Fontana edition 1971. London.
- Tillich, P (1951) *Systematic theology*. University of Chicago Press, Chicago.
- Teodorov, T (1999) *Facing the extreme: moral life in the concentration camps*. London. Weidenfield & Nicholson.
- Williams, M & Nicholson, W. (1992) *The Velveteen Rabbit*. London, Mammoth.
- Wordsworth, W. Lines composed above Tintern Abbey. In, *A Treasury of Great Poems*. Ed. Louis Untermeyer. New York, Simon Schuster, 1942.
- Worsley, R (1996) *Human freedom and the logic of evil*. London, MacMillan.

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