'THINGS ARE CHANGING FOR ME . . . THE ANGER IS STILL THERE BUT NOT THE HATRED'. SOME REFLECTIONS FROM WORK WITH A RACIST

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SUMMARY

This paper explores how a psychoanalytic perspective can be useful in understanding a particular defensive organization based around racism. A series of clinical vignettes are presented of material from an adolescent patient in psychotherapy. These vignettes concern the functional significance of a blatant racist discourse presented in therapy as a defence against a traumatized and denigrated identity. The clinical concepts of splitting and projective identification enabled a clearer understanding of the patient's presentation and progression of treatment rather than reaching an impasse.

INTRODUCTION

Thinking about racism from a psychoanalytic perspective is not simply a matter of discussing psychical reality, because there are very real historical abuses and very real continuing differences economically, educationally and politically in society. The racist depiction of black people within early psychoanalytic writings has also been a major source of concern about its applicability (Frosch 1997). The tendency to attribute universal meanings to words, actions and events has also been highlighted as a concern, as has the tendency to place responsibility for understanding ethnicity onto black therapists and clients 'as if they are its sole possessors'(Bennett and Dennis 2000). However, there has been a steady trickle of significant texts which have aimed to demonstrate how a psychoanalytic perspective can meaningfully contribute to issues of race and culture (Fanon 1968, Kovel 1984, Rustin 1992, Gordon 1993, Davids 1996, Bird and Clarke 1999). For

example, a psychoanalytic understanding emphasizes that one cannot directly explain the present in terms of the past. There are many significant mediating variables that serve to perpetuate or disqualify perceptions and identities. This view is particularly relevant to contemporary psychoanalysis, which emphasizes the dangers in inferring the past directly from current observation without first exploring unconscious dynamics in the present. This paper aims to explore some of the ways in which a psychoanalytic perspective can be useful in illuminating a particular defensive organization based around racism.

A number of writers have discussed racism from a psychoanalytic perspective and have aimed to reconcile inner dynamics with outer realities. Common to these writings are attempts to examine and understand perpetuating vicious cycles of demeaning stereotypes and behaviours, both from the position of the recipient minority or disadvantaged group and from the racist perspective. Frantz Fanon (1968), writing from an analytic perspective, argued that for the black person growing up in a divided colonial world the consequences of white racism are often that they end up with a similarly divided internal psychological world. In his book Fanon gives many examples of this division and its value judgements, which Davids (1996, p.216) condensed as follows:

The black is an animal, the black is full of rhythm but short on intelligence, the black is bad, the black is the devil, and the black is, of course, sexual.

With particular reference to this experience, Wachtel (2001) has described a number of maintaining factors for persistent unconscious fantasies around race, drawing on a cyclical psychodynamic model. He emphasizes the key role of phenomena such as 'stereotype anxiety' and 'disidentification', in which he describes how defensive attempts to ward off threats to self-esteem have ironic and obverse consequences. Citing Steele (1997), Wachtel (2001) describes a series of social psychology studies that examined how anxieties associated with the burden of social representation (here concerning black intellectual ability) accounted for poorer performance on cognitive tests in college students. Other intersecting defensive processes, such as 'disidentification' with the whole area of academic achievement in response to such social pressures, further exacerbate this 'stereotype anxiety'. Steele and Aronson (1995) have described the sequence 'such that school achievement is not a basis of self-evaluation nor a personal identity. This protects the person against the self-evaluative threat posed by the stereotypes, but may have the by-product of diminishing interest, motivation, and ultimately achievement'. In this sense, conduct can become perpetually overdetermined from the inside.

In a similar vein, Thomas (1996) has drawn on the Winnicottian concept of 'false self' to describe a process he has observed in psychotherapy on the formation of a proxy black self in black clients presenting to predominantly

white therapists. Like all defences, the proxy self is not recognized as a defence but as a way of warding off anxiety (of being seen as different, in an undesirable inferior way). Also, like all defences, the proxy self brings short-term comfort or protection but at the cost of long-term disadvantage (e.g. the failure fully to engage in a meaningful therapeutic encounter). Davids (2002) has developed this particular therapeutic theme further by discussing the difficulties in negotiating racially-based mechanisms once mobilized, and the potential impasse that can ensue. He writes:

> For instance, a black patient complains of being misunderstood by the white analyst's interpretation, allegedly because of (unconscious) prejudice on the analyst's part: rather than see the patient as he is, the analyst is felt to be imposing a view of the patient refracted through a white lens (to which his own ethnocentricity blinds him). The analyst sees the problem differently: the interpretation is reasonable but brings anxiety, hence the patient's objections are a form of resistance. These two positions become entrenched, everything said by one party is felt simply to restate his own polarized stance, and it becomes more and more difficult to find common ground on which to base communication. The result is a highly charged situation that causes us more problems than most, for example, when we are accused of being sexist in our views. Even the most experienced and nimble clinicians can become extraordinarily flat-footed in the face of such unyielding polarization, and often the result is impasse or unanalytical political correctness (p.263).

Studies of racist perspectives have, in contrast, highlighted different defensive tendencies that serve to perpetuate socially corrosive race relations. White racism is a complex phenomenon because of the mixture of irrational long-standing, and defensively influenced internalized schemas and perceptions of actual events and circumstances. The ability to evaluate or reflect upon the extent that such perceptions and attitudes are based in unconscious anxieties and fantasies is significantly mediated by socially organized and superficially confirmatory experiences. In broad terms the analysis of white racism is summed by Wachtel (2001, citing Kovel's 1984 work) as:

> whatever a white man experiences as bad in himself, whatever is forbidden or horrifying in human nature may be designated as black and projected onto a man whose dark skin and oppressed past fit him to receive the symbol. While these racist projections may take a number of forms an important distinction between 'dominative' and 'aversive' has been identified; where 'dominative old-fashioned racism' resorts to direct violence in the face of threat and a more 'aversive modern racism' which when faced with the same threat turns away and blocks off (Wachtel 2001, pp.666–667).

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Building upon many of the observations above, Davids (1996, 2002) draws on an object-relations approach, particularly emphasizing the key functions of splitting and projective identification for an understanding of interpersonal racism. In a simplified form, this perspective emphasizes how uncontrollable affects (sexual, violent) are powerfully split off and projected into the racially identified other (e.g. black), such that awareness of one's own split-off self remains hidden. Once produced, this fantasy can be enacted or defended against, but not freed from. This becomes an even more powerful and heady cocktail when it dovetails with dominant social organizations. In this sense, rather than adopting a perspective of solely seeing malevolent splitting as permeating down from social structures, Davids takes the view that people are acutely aware of differences, including skin colour, from a young age, and make active (or defensive) use of these to achieve inner equilibrium. Davids also emphasizes that this phenomenon, in a general sense, is equally true across the racial divide.

In object-relations theory, splitting and projecting of good from bad experiences are believed to be an integral part of early psychic development. This is a consequence of the separate building up of experiences linked with very positive and very unpleasant affect states. However, such splitting and projecting can also be used for defensive purposes. Assimilation of a broader reality is achieved through integrating these idealized and denigrated aspects of the self and other (the hero and villain, god and the devil, black and white). Racism as a distinct state of mind thus involves the use of existing external differences for the purpose of projective identification, resulting in fixed relationships with members of that group. The state of mind functions like a pathological organization (Steiner 1993), but with a covering of normality.

The cost of an over-reliance on such defensive manoeuvres, which psychoanalysts have emphasized, is that it gives rise to a state in which true separateness is not experienced. It seems to me that this development of narcissistic object-relating is particularly relevant to an understanding of racism. For example, the dominant 'old-fashioned' racism described above corresponds with a particular type of defensive psychic organization labelled by Rosenfeld (1987) as thick-skinned narcissism. Bateman (1998, p.14) describes this state as follows:

> In thick-skinned narcissists, the survival of an idealized self is paramount … [relationships] become dominated by defensiveness, a devaluation of external relationships and a wish to destroy the analyst as an object who can be a source of goodness and personal growth.

Sneering, jeering, rejecting before being rejected, impenetrable superiority, are some of the hallmarks. In contrast perhaps, the aversive 'modern' racist, characterized by a turning away from and lacking a willingness to acknowledge racist beliefs while clearly expressing them in subtle and dis-

guised forms more obviously corresponds to Rosenfeld's more vulnerable thin-skinned narcissist. Of this state Bateman (1998, p.15) writes:

> He is ashamed of himself, feels sensitive to rejection, and persistently judges himself as inferior to others … In essence the thin-skinned narcissist is 'object-denying', continually abasing himself, looking for agreement and denying difference.

Importantly, Rosenfeld emphasizes the connection with projective identification and how it involves the idealization of good aspects but also of destructive parts of the self. He also identified that a significant aspect to difficulties in reclaiming projected parts of the self is due to their association with concrete attributes (in this context the otherness defined by skin colour).

Given this generalized model, I will now present a clinical case where more detail of the personal dynamics involved can demonstrate the clinical utility of this approach to understanding such malignant identificatory processes and aspects around its resolution as observed in therapy.

CLINICAL MATERIAL

Dan was referred for psychotherapy at the age of 15 years by his GP. He had already been in once-weekly cognitive behavioural therapy with a clinical psychologist for around 20 sessions to address a number of anxieties and phobias as well as attending an after-school therapeutic drama group aimed at fostering interpersonal skills. However, the GP remained concerned about Dan as he had recently been excluded from school due to violent and provocative behaviour. The GP went into some detail to describe his contact with Dan over the years, and it became apparent that he felt quite strongly that Dan's difficulties were in some way related to unresolved psychological impact of early physical trauma. What were not clear from the GP's communications were the personal context surrounding Dan's unacceptable behaviours. That is, his explicit commitment to racism.

Dan lived with his natural parents and was the eldest of two children, his sister being three years his junior. Up until the age of 5 years, he led a content and happy life by all accounts. However, at this time he suddenly fell very ill and it was discovered that he had kidney failure which, undetected, had led to unexcreted toxins returning to his blood and leading to a subsequent brain haemorrhage. In short he had suffered a severe stroke at the age of 5 years. While his kidney functioning could be addressed relatively straightforwardly through medication and some initial dialysis, the impact of the stroke was much more profound. It left Dan with paralysis of his left arm and leg, memory and concentration difficulties, fatigue, etc.

The following years were difficult for Dan but he appears to have managed them valiantly. He engaged in all subsequent rehabilitation programmes with

an intense passion with the aim of total recovery. In retrospect this period had many of the hallmarks of latency – embracing of rules, becoming industrious in an outwardly focused way, combined with a number of the attributes of emotional avoidance. Dan seems to have entered a state of mind where he could believe that if he did everything the doctors said he would be able to return to being the person he was, i.e. a failure to mourn. The above situation continued for much of Dan's primary school years.

However, difficulties began to re-emerge when Dan entered adolescence. All the physical, cognitive and social changes of adolescence took on a very specific meaning for Dan, which emphasized a personal sense of damage, failure and inadequacy.

Vignette 1: early days

Dan arrived 20 minutes late for his session, carrying a plastic bag and a piece of green paper. He slumped down in the chair and then started to look at the paper, stuffed it into his bag, then looked up and gave me quite an aggressive, confrontational smile.

A short silence followed. Then Dan spoke. He said that he had lost his travel card and a 'tenner' and that was why he was late. He told me he had been losing things all week, and that he had now lost 'a hundred and thirty quid' in the past two years. He quickly added 'I don't feel depressed any more. I feel stressed. It's not like the depression, and I still haven't got any friends at college'. After a pause, he went on 'Oh yeah I got my results from my studies and I'm doing well there. Educationally things are fine, I got three merits and a pass for my life-drawing skills which was for drawing a naked man, but I thought I should have done better in that, I was quite surprised, but apart from that things are terrible'. I said that it sounded as though he wanted me to know how well he was doing at college but also that he was very worried about why he was losing things and what this meant. Dan said 'No', adding that there was no point in me saying any of that stuff about this having anything to do with our relationship because we 'didn't have one. Got it!'. Dan then went on to say that he got on fine with adults, it was only peers he had problems with and as I did not have a shaved head nor was I built like a 'brick shit-house' it was not the same. By this point, Dan was working up into quite an angry state and continued by saying, 'I mean where I go to college is full of fucking Turks and Greeks and I'm in the minority, and nothing is working out and it's all getting worse and there's no hope anywhere'. I said I thought the hope he'd got from the success at college was now gone and so was the hope he had in telling me about it. Dan immediately responded by saying 'Oh fuck that! I told you because I thought you needed updating for your files. It's not because I care what you think. I'm here and you are there and I'm just spewing all this shit out and you have to listen. The end'. He then went on

to say 'There's a little bit of me that is still feeling positive about work but the rest of me is taken over by these other feelings ... In college I'm in the minority, 5% whites and 95% Blacks and Pakis and Turks. Right now I feel worse than a Third World Paki. I feel like total shit ... just pure shit, nothing else, fucking lost thirty quid; some bastard out there is profiting from me and fucking hell it was only five minutes walk from the bank to home and I lost them'.

I said he felt angry with himself at the moment because he was unable to keep things safe for long before he lost them. Dan quickly cut in 'yeah yeah, well I'll tell you this. I want to join the fucking Jewish Terrorist Organisation that's what I want to do and blow up fucking Palestinians and Arabs and, yeah, I've realized that I'm a racist; it's true and I fucking love it. The only time I hate it is when I'm having the shit kicked out of me but most of the time I love being a racist and it makes me feel better'. I said I thought he was also saying that there were parts of himself that felt alien or different, which he hated and wanted to destroy, like the part that forgot. Dan sarcastically retorted 'yeah yeah I know, it's all about me hating me'. I said he seemed to have made that link for himself earlier, to which Dan replied, 'Yeah well ... that's a bit of me, not most of me, and anyway you just fucking sit there and take all this shit ... I mean what kind of fucking therapy is this that I can walk in here every week late and sit down for thirty minutes and then spew out all this shit and you just sit there and listen and nod and then maybe say something, not really anything, maybe challenge me a bit like you did then, saying how I contradicted myself or whatever when I said it was all bad and the merits I got ... I mean fucking hell what's wrong with me, I need a kick up the arse'. I said that I thought he was worried about the way he treated me a lot of the time and wondered what it was doing to me. Dan replied 'I never had that fucking thought. Never crossed my mind because I don't care ... my sister has got a thick skin and that's what I need to get, a thick skin because at the moment the slightest thing upsets me and makes me feel terrible and I can't cope ... ahh poor Dan ... pathetic ... well I think I should move to Texas at least people in Texas appreciate minds like mine, racists Ku Klux Klan. I've seen them on the TV ... I need like-minded people around me where I'm appreciated'.

I said that he often felt I didn't share the same thoughts with him and he was both worried by it and hated it too. Dan replied, 'The thing is that I realized that the people they are attacking out there and want to get rid of is part of me ... Jew ... they hate Jews'. I said I thought all his racism often ended up leaving him the biggest victim.

Comment

I felt that Dan was relying upon the twin mechanisms of splitting and projection as a defence against a profound sense of internal threat and

damage. He seemed to have come to a view something like 'if you can't beat them join them' and identified with an imagined (or real) aggressor. In this way he could experience himself as big and nasty, as opposed to vulnerable and weak. In the session Dan also engaged in a great deal of baiting me, with 'in-your-face' comments about his racism. My countertransference response often felt very polarized between victim and persecutor. Either I was to be seen by Dan as the Jew to be persecuted, scoffed at and treated like shit; or I was expected to put on my Nazi jack-boots and kick him around. More optimistically, I wondered if through the therapy dynamic it might become clearer to Dan that what he was doing to me was in fact what he also does to an aspect of himself. The hope was to pull him back from all the internal terrorism he was caught up in.

Reflecting somewhat schematically on Dan's communications, it seemed to me that he was oscillating between a vulnerable 'thin-skinned' position (his panic at a sense of loss) and a more menacing 'thick-skinned' position ('we have no relationship, got it'). Working in the face of such shifts in relating was very demanding, and therapeutic techniques, such as Steiner's (1993) distinction between patient-centred and therapist-centred interpretations, were very helpful in locating, recovering and maintaining a therapeutic stance.

Vignette 2: some four months later

As treatment progressed, Dan did in fact move on from a strong grasp of hatred as an external concretized form of racism, and started to recognize and identify with a more vulnerable aspect of his self. This second vignette highlights this change because of its position as a first session following a planned therapeutic break of two weeks.

Dan returned to treatment on time and immediately engaged with me, saying 'I mean I missed coming here I missed my therapy, and I missed seeing you ... but I didn't want to see you in the street or anything I wanted you here ... in this room with this plant and this table and the couch and everything'. I said that he had missed me as his therapist. Dan replied 'Yeah that's it, and then I realized that's what you were talking about ... I hadn't felt anything before, but now I'm curious'. (He is referring here to the way in the past I would continually draw his attention to the vulnerability generated by a break in treatment due to holidays, etc., and which in the past he would have typically scoffed at, mocked and denied.)

The session continued with Dan going into detail about his illness and spastic hand, adding 'When I was a baby and up to 5 all the beautiful people loved me ... but then when I was ill I was a spastic and ugly and no one was interested except ugly and shitty people ... and now I'm just about coping with it. Sometimes even at drama club I feel good! Almost great again! But then I also know it's still mostly shitty people because beautiful

people have left me and most of my rage is with being around people I'm attracted to for this reason'.

I took this opportunity to talk to Dan about how in a way his story was like a story of Paradise Lost. How he felt as a child surround by love and beauty, but then something foreign and ugly invaded and took over (like the foreign bodies that his kidneys couldn't excrete). What happened then seemed to have been that Dan felt banished, and he expelled himself, and was only able to view paradise from afar. His racism, the wish to get 'my beautiful country back', could also be his wish to go back to a version of his old self.

To this Dan agreed absolutely, but I then went on to suggest that perhaps there had been lots of times when things like this might have happened and he had found it difficult to accept change or adjust to it, which when he became ill was more like the final straw. I wondered for example about the loss of his special status when his younger sister was born too. Dan was predictably less keen on this idea – not least because of the importance it gave to his little sister, who in his mind was clearly insignificant!

Comment

I felt that in this second vignette Dan clearly demonstrated psychic change, in that he was able to emerge from his racist defence and tolerate more depressive anxieties concerning his attachment to me and the value he placed on therapy. Significantly, he introduces his illness and his body-image, and how he feels this has impacted on interpersonal relationships, as opposed to his usual reliance on a dominant racist discourse. Developmentally he was shifting from a pathological state of mind into a more object-based world where his polarized perceptions and manic defences were becoming loosened, evidenced by more thoughtful reflection and movement between persecutory and depressive concerns.

Towards the end of the material, I tried to deepen this shift further by drawing attention to the possibility that his perception of his 'old self' was possibly idealized and linking this tendency to an alternative 'historical fact', his sister. However, Dan found this shift too great and I wonder if my wish to cure him was getting the better of a curiosity to know him.

Vignette 3: two months later

Dan arrived, saying that nothing had happened since we last met, and then adding that he had been having lots of dreams which were quite scary, and he would wake saying, 'Great! Already a bad start to the day'. I wondered aloud whether dreams might also be an opportunity to think about his own feelings in a way he might not normally allow himself to do. Dan said he had had four dreams this week and four last week; and that he understood

what I was saying and what scared him was all the dreams seemed to be about real things that really happen so they felt realistic. I commented on how I was being left puzzling over whether he was going to share the dreams with me or not and Dan said that was because he could not remember any of them; he just knew about them and how he felt. I said that perhaps he was saying that he did not want to remember any more about them because it would be upsetting. Dan said no he just could not remember, except for last week he dreamt about some wrestlers. I asked him about this and Dan said it was about being in a swimming-pool or a swamp, or both, and that there were two wrestlers. Now he also remembered another dream of a boxing-match and throwing a punch and how at the end-point of contact his arm flopped and no contact was made.

I asked Dan what he thought it might mean and he said he knew it was all about him, his body and his wishes to be physically masculine like other men and how he felt he had failed and was not good enough. He then went on to tell me about an actual event where he was boxing at a club the previous week and a black trainer said, 'The boy in the blue sweater up and in the ring for sparring' and Dan's heart burst and he walked up to him and said nothing, took a gum-shield, and put on the helmet and gloves, and then stopped himself and made himself walk to his dad and said 'I'm to spar' and his dad said he couldn't, and so he went back and said quietly, 'I can't – my wrist is weak'. Dan then told me:

> This is a lie because that isn't why I can't box but also true as the stroke did affect my wrist and it is slightly weak and I also said to him too little water in the brain, which is also a lie. Because the problem is too much water in the brain, but also true in that the shunt removes too much water and makes slightly too little pressure, so no pressure builds up. . . . And then I took the stuff off and went back and carried on training and for the next three days I have asked myself, Why do I box? What's the point?, and I said to myself, actually when I started here I used the weights to help me walk. Then I used the bags for building eye-hand co-ordination, etc. Now I'm peak fitness for me . . . can't go any further . . . not allowed in the ring . . . I so much wish I could box. My consultant Dr Edgars has said no he would not advise it – a punch to the side of my head will kill me.

A silence followed. Then Dan added 'Things are changing for me . . . The anger is still there but not the hatred . . . the hatred of the niggers and Pakis. I now know it is my anger towards them for being physically fit and I'm not . . . and one thing I am they could envy is my skin colour . . . The only thing I feel I have . . . But I know this because I never call black women or Pakistani women Pakis and niggers . . . only the men'.

Comment

Perhaps what is most striking about this third vignette is the apparent clarity and precision with which Dan illuminated dynamics related to his racism. It left me wondering about the relevance of Dan's reported dreams and associated material, specifically the extent to which this marked a phase of change for Dan. While there are still many indications that he is still operating within a paranoid-schizoid state of mind, there are significant structural changes too. The intensity and ferocity of his splitting and projecting and disavowal have reduced, and his capacity to tolerate a greater sense of sadness and loss. He seems to reflect that perhaps it is time he left the aggressive combativeness of his psychic boxing-ring (his racist psychic organization) and move on in order to preserve life. I think what is also more to the foreground is Dan's anxieties about his masculine identity and how to find a path through the conflicts and complexities he feels he faces. This also put me in mind of a remark regarding the developmental aspects of this case, that 'the most important [regression at adolescence] concerns the negative Oedipus complex, whose working through in its final phase at adolescence is the *sine qua non* for the transition into adult life'.

DISCUSSION

This case study has highlighted the clinical utility of understanding the psychic mechanisms of splitting and projection in the maintenance of a racist identity for defensive purposes. When the patient felt inferior he felt it as if he were racially inferior, and with varying success rid himself of such identifications. While the case has many features common to prejudiced thinking, there were also unique complications of triumphant superiority and persecutory inferiority engendered by a catastrophic breakdown in bodily functioning and subsequent failure to process its impact. The availability of a thinking space provided by therapy demonstrated both a key driving force for the racism and how addressing the underlying anxieties was also mirrored in a loosening of the patient's polarized and rigid racist discourse.

In the general context of this paper, racism has been clearly recognized as a pattern of economic and social practices and structures, which potentially 'fix' people in specific ideological positions. This is very much related to institutionalized aspects of racism (Bhui 2002). However, individual phenomenologically-informed enquiries about the development of specific 'racist identities' can also provide rich and meaningful contributions to an understanding of and interventions in this area. In particular, it has been argued in this paper that a psychoanalytically-informed model can help in exploring deeper issues of racism and mind. This is also in keeping with other contemporary writers who have approached the subject from a different research paradigm (Frosch *et al*. 2000).

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