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**THE PSYCHOPATHIC MEANING OF LIFE.
WHEN THE THERAPEUTIC RELATIONSHIP BECOMES A BATTLEFIELD**

Private practice

psychopathy

meaning of life

Summary

The article constitutes an attempt to draw attention to the phenomena of the “psychopathic meaning of life”, which sometimes appears as a basic theme of the therapeutic dialogue. The author attempts to demonstrate, referring to the Freudian metaphor of the process of transference as military action, how the psychopathic meaning of a patient’s life appropriates the therapeutic dialogue, leading to an impasse in it. The clinical illustration of this phenomenon constitutes a description of the psychotherapeutic process of the author with a patient who introduces the “psychopathic meaning of life” in the area of therapy. The said description demonstrates how the therapeutic relationship, from the outset, becomes a battlefield in which the work of the psychotherapist resembles the work of a sapper, who may lead his foolhardy actions only when acts of war are for some reason ceased for a moment. Warfare conducted by both sides of the therapeutic process could be desired for this type of patients (for reasons marked in the paper). On the other hand, the therapist is left with very little space for reflection and is reclaimed the peace necessary to conduct “sapper” activities. Under these specific circumstances, an in-depth analysis of the countertransference reaction seems a wholly necessary measure, to reclaim – at least for a while – peace and the ability to think. It constitutes a prerequisite, although insufficient for a positive outcome of this process. For this process to be successful, the author perceives as necessary the existence of specific conditions on the part of the patient, which he gives a working name of the “therapeutic window”.

Purpose

In this article, I aim to illustrate the impasse that arises when the process of therapy is supplemented by the patient with his or her “psychopathic meaning of life”. In the paper, I shall use the term “psychopathic” to describe a general trend of some people to absolute (overlooking the subjectivity of other people in the relationship) acquisition of power and basking in it. On the contrary, the term “meaning” shall be used by myself as a definition of a positive goal (beneficial in effect) from the perspective of the values of the individual adopting it. To the question: “What is the meaning of my life?”, the response of an individual sympathizing with a psychopathic meaning of life would sound: “My life is about acquiring as much power as possible and basking in it for as long as it is possible”. A patient who, consciously or unconsciously, introduces into a relationship with a therapist the said meaning, often encounters such counter-transference reactions of the therapist as fear, resentment, or disdain. This type of counter-transference may lead the psychotherapist to express in

the course of therapy, explicitly or implicitly, the view that the patient's comprehended meaning of life is an absurdity. The above circumstances often sentence two parties to a therapeutic relationship to endless battles for demonstrating the superiority of their subjective meaning of life, of which often the sole reasonable exit is a cease-fire and a renewed reflection on the situation in which they have both found themselves.

The battlefield

In an interesting article about the "decisive moment", Janusz Galli [1] recalls the metaphor of Freud from the "Introduction to Psychoanalysis" [2]. In it, Freud compares the process of transference with warfare, in which a watershed moment may occur when one of the armies achieves an advantage by winning over a key strategic point. Acquiring a small, seemingly irrelevant hill, it turns out that this object is immensely valuable for strategic reasons. Winning it means gaining a considerable strategic advantage over enemy forces.

I have the impression that this metaphor, although used by Freud to explain matters other than those discussed in this article, explains therapeutic relationships with a certain category of patients, with whom we are sentenced from the beginning to the necessity of watching for this strategic point. Those patients appear to persistently attempt to win this point, exposing us to the temptation of retaliatory measures. Sometimes, the point is to decide, at any cost, when we begin and end a session, other times, when is the time for who to speak or remain silent during a session or who may or may not cancel it. If the therapy is chargeable, an absolutely strategic point becomes the matter of payment. Refusal and postponing of payment, an attempt to reduce the rate, as well as other acts, constitute a good excuse to mark one's advantage. The case is most often that there is no further plan in this striving of power. Power must be acquired and maintained but it is not clear why. What is clear is that it is important.

The Pyrrhic Victory of the King of the Wood

How mysterious our human motivations are at times, recalled Frazer [3], researching different cultures of antiquity; he describes a certain recurring tragedy set in the village of Nemi in the Alban Hills. Under a steep rock, there was a holy grove and the Temple of Diana Nemorensis. The author of the "The Golden Bough" describes this strategy as follows [3, pp.5-6]: "In the sacred grove, there grew a certain tree round which at any time of the day and probably far into the night, a grim figure might be seen to prowl. In his hand, he carried a drawn sword, and he kept peering warily about him as if at every instant he expected to be set upon by an enemy. He was a priest and a murderer, and the man for whom he looked was sooner or later to murder him and hold the priesthood in his stead. Such was the rule of the sanctuary. A candidate for the priesthood could only succeed to office by slaying the priest, and having slain him, he retained office till he was himself slain by a stronger or a craftier. The post

which he held by this precarious tenure carried with it the title of king; but surely no crowned head ever lay uneasier, or was visited by more evil dreams, than his. For year in, year out, in summer and winter, in fair weather and in foul, he had to keep his lonely watch, and whenever he snatched a troubled slumber, it was at the peril of his life. The least relaxation of his vigilance, the smallest abatement of his strength of limb or skill of fence, put him in jeopardy; grey hairs might seal his death-warrant.”

Whenever I read this fragment, I cudgel my brains whether the contender for the title of the King of the Wood is wondering how his senectitude will look like. Or perhaps he is entirely submitting to the appeal of the exciting moment of gaining authority. Unfortunately, Frazer does not give an answer to this question.

Why Must the Meeting Point in Therapy be a Battlefield?

McWilliams, [4, p. 168] recalling the findings of Lykken, Hare, Loeb and Mednick states that: “Anti-social people have an innate tendency to be aggressive and a higher than average threshold for pleasant excitement.” This means that it is not enough to touch somebody to feel good; a stronger stimulus is required. The King of the Wood described above is not lacking in strong stimuli. Their uninterrupted stream means that people with such a “construction” find it harder to reflect on the potential immediate destructive effects of their actions, or in a broader perspective on the meaning of their lives. They must not be contemplated when one feels strong agitation. The sense of physical strength or power given by their social position sweeps aside similar dilemmas. Often, it is only when their sense of strength and power really weakens that a necessity (chance) of finding another meaning of life arises.

What are the psychological reasons why the King of the Wood cannot give up his kingdom? I think the essential reason concerns the potential loss of meaning in life. If he decided to pursue it, then his years-long efforts would become meaningless and he would, therefore, be exposed to the sad conclusion that he had devoted his life to an absurd idea.

This is quite accurately described by a dream of a patient of mine: “I am walking upstairs, it is taking me a lot of time; in this dream, I am somewhat like Sisyphus but unlike him, I finally climb to the top, and I look around. Suddenly I feel that I’m becoming increasingly more afraid because it’s the wrong place! This is not the top I was supposed to climb!”

The above in a sense condemns the patient and psychotherapist to an impasse in therapy. The patient is convinced that life is about being a king in a cruel kingdom, where one must be constantly alert to offer no chance to the imagined opponent (the psychotherapist) who wants to spot (expose) and take advantage of one’s weaknesses and, thus, deprive them of their kingdom and (meaning) of life. The latter – the therapist must confront the projection in which he is the usurper and the potential

murderer who is after the crown and the scepter. The therapist will accept this projection for better or for worse. A credible threat is that, after the period of proving that he is not the usurper, he will feel battered and will lose hope.

The “Therapeutic Window”

The “therapeutic window” is defined by me as a set of circumstances which must come into existence for extremely difficult tasks to have a minimum chance for success. There are reasons to believe that a “therapeutic window” must be anticipated patiently. McWilliams [4, pp. 169-170] writes of a certain clinical follow-up: “Experienced clinicians have noted that psychopaths who have avoided self-destruction or imprisonment tend to burn out in middle age and often become exemplary citizens. They are also more open to psychotherapy and are able to benefit from it more than young people with a similar diagnosis.” McWilliams argues that this change is the result of a decrease in hormonal activity. This decrease weakens the internal impulse to action, it is also accompanied by a loss of physical strength in middle age. Changes in the functioning of the body force mental development. As he continues [4, p. 170]: “As long as the omnipotent defense mechanisms do not encounter any restrictions, the individual will have no reason to develop more mature adaptive mechanisms.” Strength and efficiency are conducive to a sense of omnipotence, many young people do not believe in their own death, they see it as something unthinkable. Only a decrease in physical strength and fitness, deterioration of health or a rapid loss of social position, which progress with age, can suddenly create conditions for therapy, open a therapeutic window.

The description of the above-mentioned event can be found in Yalom [6], in his book “Love’s Executioner And Other Tales of Psychotherapy.” In the section with the powerful title “If Rapes Were Legal...” he describes the successful process of therapy of a patient named Carlos, whose change was made feasible when he developed lymphoma which, after ten years of treatment, spread to the lungs and began to metastasize to the heart. His declarations from the dialogue with Yalom reveal a way of thinking analogous to the state of mind of the King of the Wood. It shows paranoid fear of other men [5, p. 88]: “Who needs a friend and where to find one? Every man would drown you in a spoon of water for a dollar, a better job, or a pussy,” an obsessive striving to triumph, one-upmanship, which he achieved through sexualizing women and contempt for them [6, p. 89]: “Without a trace of shame or embarrassment, he confessed to me that his goal was to fuck as many women as possible.” In the case of Carlos, the circumstances enabling the opening of the “therapeutic window” were as follows [5, p. 89]: “No, there was nothing encouraging, neither in Carlos’ character nor in his appearance. He was emaciated, had large lymphatic outgrowths on the elbows, body and behind the ears, and was bald as a result of chemotherapy. His pathetic efforts to hide the shortcomings of his looks – a wide-brim Panama hat, a scarf around the neck, painted eyebrows – unnecessarily attracted even more attention

to his repulsive appearance. There was a reason he was depressed. He spoke bitterly of his ten years of anguish. Cancer was killing him in stages. It almost had all of him. It killed his energy, his strength, and then his freedom. And the worst thing is that it had killed his ‘social life,’ which for Carlos meant sex life. When he underwent chemotherapy, he was impotent, and after chemotherapy, when the sexual juices began to circulate again, he could not win any woman because of baldness. Truth be told, they did not want him even when his hair grew back slightly, even prostitutes refused because they thought that the outgrowths on his body were caused by AIDS. His sexual life was limited to masturbation during seances of sadomasochistic videos.”

For Carlos to think about a change of the meaning of his life, he had to be terribly bothered by fate. It is difficult to wish such fate upon somebody. However, I think that without this “therapeutic window” it is extremely difficult to achieve changes with this group of patients. I dare to say that both factors must come into existence: circumstances conducive to the opening of the “therapeutic window” with simultaneous skilful actions of the therapist. The work of a psychotherapist is then similar to that of a sapper, who exercises his activities not during the fire, but when warfare subsides, at least for a moment.

Acquiring the key strategic point on the minefield

Going back to Freud’s metaphor of transference as a battlefield, to me this key strategic point, essential for the entire therapy, is drawing the patient’s attention to the relativity of the meaning of life and the need to consider it not only from a pro tempore perspective but also from the perspective of the end of life. Taking this concept a step further, the fundamental goal of effective therapy is questioning the psychopathic meaning of life (the conviction that life is about acquiring power and maintaining it at all means) as a meaning for the entire life, with simultaneous recognition and comprehension that this purpose of life could be desirable to many in the shorter time horizon. I think that, consciously or not, with this group of patients, we are in essence driving at communicating to them that we think and feel that we have something better to offer than the game of thrones which they are so passionate about. And it is worth accepting that if we are expressive in our message, it will probably trigger contempt, rage, envy, and – if we have a bit of luck – also sadness. Looking at things from a realistic perspective, it is highly likely that we will sooner live to see contempt. I was recently given an account of a great illustrative fragment of therapeutic dialogue:

Patient: What are you offering me? Love and respect?

Therapist: Well, yes.

Patient: Awfully gay vibes.

Clinical Illustration

Mr. X. reported to me six years ago. He was 33 at the time. He rang several times when I could not answer his call. He left me a voicemail with the information that he had rung and would like me to call him back. When I did, he did not pick up. This happened several times. I later learned from him that he felt “a kind of satisfaction” that I could not reach him. He could have answered, but the delay was tempting, so he failed to pick up several times. During our meeting, he pointed out that he needed a “man from the outside”. His father was an important and influential figure of a large medical centre and was interfering with his treatment. “He wants to have power but I will not give him the satisfaction,” said Mr. X. Soon I came to realize that he too valued power very much. When we set the framework of the contract, almost every point was a good opportunity for him to show me that he was not going to come into line with my will. Although I saw it quite differently, as if he heartily desired to impose his will on me.

Since the beginning, I was bothered by his feistiness, I felt that it formed a strange set with his frail, rather boyish than manly posture; he came off as much younger. In childhood, he had taken testosterone on the recommendation of an endocrinologist. He continued to take it periodically, without medical supervision. He had undergone two therapies that he had begun and interrupted, the first lasting four and the other three months. He spoke dismissively of his therapists: “the blond” and “the redhead”. He declared that: “He would like to try it with a man.” It was easy to understand what was going on during the consultation but it was much harder to bear it. The pattern of both previous therapies was similar. He came when he felt depressed and was “put a skip in his step” in the course of it. His mood was elevated by the thought that he was dominating his therapists and the excitement associated with it, after which the depression returned and he abandoned the “ineffective therapies.” As it turned out later, during our initial consultation he has dissimulated (despite my question about it) that he had been in detoxication treatment (from alcohol). He also devalued those treatments as inefficient and led in an unprofessional manner. He claimed that he did not abuse alcohol, and he concealed information about treatment so that I “do not perceive him as somebody inferior”.

His wife had left him a few years earlier, declaring that: “She is not intending to spend her life with a psychopath.” Once, he hoped that they would get back together again, and at the very next moment he felt tremendous hatred for her and fantasized about how he could take revenge on her for leaving him. He started writing his doctoral dissertation five years before but due to a lot of pushing and shoving with his thesis advisor, concentrating on who had humiliated whom in this relationship, he could not focus on writing and the prospect of successful completion of his doctorate was increasingly edging away.

Frankly speaking, I did not have high hopes when accepting him for therapy. The above information allowed me to think that I would be just another therapist to defeat and abandon, so that

Mr. X. could uplift his spirit for a moment. In spite of that, I was curious whether something in his functioning could be changed. I think that this curiosity was rooted in a small working-class town where I grew up at a time when the boys' possibilities to spend their free time constructively were fairly modest. Engraved in my memory was a painting that I had passed for several years every day on my way to school, which "adorned" the store wall. It represented a huge phallus, and under it the inscription: "THE ORGAN OF AUTHORITY". Like every creation, this painting left room for employing fantasy. What did the author have in mind? Why did he draw it? It seemed completely absurd to me then, but I could not pass by it indifferently. Exactly those thoughts accompanied me many years later during consultations with Mr. X. His attitude was like that painting. The state of curiosity built up when Mr. X. confessed that the immediate cause for coming to therapy to me was fear of death, which had paralyzed him during his trip to his cabin in the mountains. I thought that this apprehension could turn out to be the "therapeutic window" mentioned above.

During the six months of therapy, Mr. X., as he had declared during consultations, "tried it with a man". I was increasingly arriving at the conclusion this if I do not directly negate his sense of meaning of such actions, then the perspective of pleasure derived from them will annihilate any reflection. Below, I am quoting a fragment of a session during which I decided to question this sense apparently during the entire therapy with him. The context of this session was created by the twofold preceding absenteeism of Mr. X from sessions, not announced by him in any way. Our contract stated that he was to pay for the canceled sessions.

Patient (P): Good morning, you know, Sir, that I cannot pay you for those sessions.

Therapist (T): Good morning, is this a question or a statement?

P: You just know it, that I can't. I cannot allow you to be at the top, that's all.

T: And why is it so important to be at the top?

P: How do you mean why it's important? This is what everyone is after, you are surely after it as well.

T: I am afraid that if we forget why you have arrived here in the first place, we may both be after it. But what happens then?

P: Let's not worry on the off-chance [with a smirk].

T: We could also worry that we are wasting time on jostling.

P: We are not wasting it.

T: You travelled a long way to be here and if you would like to continue to participate in therapy, then according to the rules of this place, you will pay me a considerable sum for our meeting to provide yourself with stimuli, which you could easily provide yourself with without leaving your apartment, quarreling with your neighbor. [The "favorite" entertainment of Mr. X. in his free time was teasing his neighbor, who was not far behind]. In your opinion, this makes sense, while in mine it does not. It appears to me, well, actually I am in essence certain that we are crossing over here and there are no perspectives for it to change.

P: [lost a bit of his self-assurance] Well, there is something to it. [After a moment] Unless I don't pay you [notably animated]. Then it makes sense.

T: Please tell me more about why you think that it makes sense.

P: One must do something in life, what else am I to do? There is nothing to do here. Perhaps the things I feel when I dispute with you are that sense.

T: That is your idea for living, to waste away most of your resources for verbal confrontation? Now we know why you did not finish your doctoral thesis, pushing and shoving with your thesis advisor made more sense to you than creating something. It was likewise in the case of your wife. Having such a balance of life, I am not surprised that you are panically afraid of death.

P: If you were intending to make me feel bad, then you've finally succeeded.

T: And why did you feel bad?

P: I don't know, maybe it truly doesn't make sense. Perhaps this is what you would like to hear from me?

T: Yes, I would like you to think that but I also believe that you have your reasons not to. If that is the case, then it's important and we shouldn't omit it. From my perspective, the trouble with you lies in that you are equalizing what is pleasant with what is meaningful. And that is not necessarily the same.

P: That's interesting, why do you think that this is how I think?

T: I think it helps you not to think about different things, maybe death, which gave you a scare in the mountains, maybe your wife who has refused to continue to be in a relationship with you, the distant vision of a scientific career, the awareness of your own loneliness, which you would experience if it weren't for the war with your neighbor or myself.

Until the end of the session, he was sad and furious in rotation. I was not afraid of his anger, but I began to feel threatened by his fear. After this session, I remembered a suicide note, the last words of a man who had lost his sense of meaning in life, cited by Yalom [6, p. 430] in his reflections on the meaning of life: "Imagine a group of happy fools occupied with their work. They are carrying bricks across a field. Once they gather all bricks on one side of the field, they begin carrying them to the opposite side. And round and round it goes, every day, year by year, they are occupied with doing the same thing. One day, one of the fools stops for a moment, long enough to ask himself what he is doing. He contemplates on the purpose of carrying bricks. And from that moment on, he is not so satisfied with his occupation as before. I am a fool who is wondering about why he is carrying bricks". I think that it is this specific note that came to my mind at the time, which reflects the state of my counter-transference, a mixture of concern for him, anger, compassion for his invisible suffering and contempt for his lifestyle. I must admit that it was challenging to bear this consciousness that evening and the thought that attempting to question his sense of life, I expose a man who has already alienated everyone who could potentially support him, to confront the enormity of the damage he had caused. When I realized more clearly that this was what I would encourage in Mr. X., I not only thought, but also felt very intensely, that he has important reasons not to succumb to this persuasion. Seeing this complexity allowed me to acquire a new drive for working with him.

But I was never meant to continue. Mr. X. stopped coming to sessions. When I called him to ask what happened, I heard a message from a mobile operator that: "the number is temporarily unavailable." The mobile operator did not tell me anything new – I thought ironically – when it was

possible to call him, he did not seem to be available to me anyway. I made several attempts, always with like effect. There was no contact with him and I had to not only admit that I would not verify whether my emotional insight would have facilitated our work, but also bear the fantasy that something terrible had happened.

Epilogue

A few years after the described disappearance of Mr. X. I received an email. It turned out that its sender was Mr. X. He explained the reason for his disappearance. Two days after the last session cited in this paper, he was arrested and for obvious reasons could not appear at the session. He did not write the reason for the arrest or whether he was guilty of the criminal offense or not. He described his stay in custody, and then in prison, quite cautiously: “It was difficult at first, but I got used to it finally,” he wrote. He added that he sometimes recalled our sessions and thought about what he would respond to my “provocations”. He also joked that if I truly wanted to get in touch with him, there was a free place in the cell. He sometimes read “various interesting things” and could use a companion to discuss the meaning of life. I took this as information that he had somehow got involved with me and missed me. This permitted him to identify with me in the scope that he saw the reflection on the meaning of life as something important. What will result from it? I do not know but I am curious. This email made me stop considering the work with Mr. X as meaningless and encouraged me to write this text.

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