

Levinas Conference 2018
“Malignant Normality and Enlivening Guilt”
Lane A. Gerber, Ph.D., A.B.P.P.

I come to this year’s conference theme of Justice as always inspired by Levinas and his writing on “Useless Suffering”. This year especially at this time of the terrorist attacks on the synagogue in Pittsburgh. I will carry this writing of Levinas within me while principally using the works of Robert Jay Lifton.

Lifton is a psychiatrist, psycho-historian, researcher and writer whose voluminous works attempt to understand psychologically the interplay between the extreme historical situations and events of our era—Hiroshima, the Vietnam War, Auschwitz, Nazi doctors, Totalism, Nuclear War, Climate Change and other writings—and the psyches of individuals. His work is important to us as clinicians not only because we as human beings are concerned about larger social issues, but also because we are professional people trying to understand and work with others in some healing capacities. We as well as those with whom we work, also carry the vulnerabilities and responsibilities that our clients and all people carry who live in the shadow of the extreme situations of our era.

Lifton, with whom I did a 6 month sabbatical in 1988, describes his own work as a small attempt to try to understand, through extended interviews and conversations sometimes lasting years, the world of survivors and of

perpetrators. His mission as he sees it is a small step in restoring moral validity to the shattered universe in which we all live.

This presentation will note some of Lifton's themes as I use two clinical examples, both of whom have given me permission to use some of our work together today. These people attempt in their own ways to struggle to live with integrity despite the fears, anxieties, powerlessness and numbness of contemporary life. One of these patients is a 70 year old Cambodian man and the other is a midwestern born, Caucasian man, retired physician in his mid- 60's.

In any discussion, especially during this historical period, we need to remind ourselves of the context within which we, patients and therapists/analysts, live and work. Ladson Hinton's words speak to us here. He said, "We are in a deep and perhaps fatal crisis as a species. The biosphere is rapidly deteriorating, and social and political turbulence fills the land. Human beings seem more and more dependent on their... technological 'organs' (e.g., cellphones, computing devices, etc.) with their dimensions of memory and lightspeed. Late stage capitalism, with its mad consumption, exhausts creative imagination with its kidnapping of desire, while steadily undermining the material security of all but a tiny minority of citizens. It has become more and more difficult to think amidst the barrage of speed, advertising, and the abdication of responsibility... "

S. is a 70 year old Cambodian man who fled the Khmer Rouge and the Cambodian killing fields in the late 1970's. He was beaten, tortured, saw his first wife murdered and miraculously escaped a work/concentration camp and made his way to a refugee camp in Thailand just over the border. There he waited for several years where he met his second wife, herself a survivor of the Cambodian genocide who had lost her husband and two children to the Khmer Rouge. They married, were moved to a relocation camp in the Philippines and finally came to Seattle in the mid-1980's. His wife had three children by her previous marriage and she and S. had two more children together.

I began first by working with S's wife, N, in 1986. She was physically and emotionally very debilitated as a result of Khmer Rouge beatings and starvation. Over the next 16 years I worked mostly with N, and then S and their family.

S was in a survivor's group—started because he and several other survivors wanted to speak more openly than was usual in the Cambodian community here. The group met weekly, facilitated by a colleague and myself, for ten years. At some point during the group's life, he asked if he and I also could continue talking together individually. We began meeting weekly for five years. After this period we continued once or twice a month. Regarding his wish to start a "survivor's group", he said that he wanted "to live not just survive".

At some point in these processes, he said with some urgency that he wanted to record our sessions—“for myself, to think about what we are saying.” We did this. He listened to the tapes himself and we both listened to them together. After doing this for some time, he said that he wanted others in his community to hear them, if they wanted to do so. He hoped that present and future generations of Cambodians survivors and their children would know their history and “decide to live.”

This was a most unusual request in my experience and we agreed to discuss it and make a decision on it when we both felt sure. He listened to each tape and together we decided what felt safe and appropriate for others to hear. I encouraged him to be choosy and careful; if he let others hear parts of our tapes, he could do so in small doses to see what the outcomes would be for him and for the select others for whom he played parts of some tapes.

Knowing that first generation Cambodian survivors are often reluctant to tell their stories not just to “Westerners”, but in their communities, and that second generation children of survivors are busy becoming “American”, I wondered what the reactions in the Khmer community might be. He said, “At some point they will want to know. I want those who will listen to know.”

While S. and I continued seeing each other periodically over recent years, he also encouraged others of his Cambodian generation to speak out. The responses in this community varied, but S. was happy with his decision as well as his decision some years ago to drive for the Red Cross. In this latter capacity he took patients (Cambodian and other foreign born peoples) to see their doctors, and helped out in a number of ways. Life was very difficult for him and his children, but he increasingly felt better and more hopeful.

In the lengthy run-up to the 2016 election, we talked about the candidates running for President. He was extremely touched by Khzir Khan, the Pakistani born father whose middle son was a captain in the U.S. Army and was killed by a bomb loaded truck while protecting his squad. S.'s eyes became moist and he bowed his head and said that he knew what it was like to lose a son, and wondered, "Is anywhere safe?"

As the Presidential campaigns neared the end, he said, "I watched him (Trump) on television last night. He makes me afraid. He then fell silent.

We talked with each other many times just before the election. I was concerned that he was having flashbacks and was increasingly scared and depressed. He said that he was scared, "but that your government would not permit that man to be President." I stayed in closer touch with S. during this time

because I remembered how scared and dazed he was after 9/11. At the same time it was just after that event that he first thought of volunteering for the Red Cross. I tried to listen to his fears while trying to quiet my own.

Then we talked just after the Presidential election was decided. He didn't look at me as we talked in hushed tones. After a long silence he said, "I am going back to my country. I lived in Cambodia during the Khmer Rouge. I cannot live here anymore and see a man like that rise again... I am sorry. I will miss you. You will always be part of my family, my brother, but I cannot see this again... My own country is still not safe, but it is my country. I cannot stay here. Staying here makes me think again and again of the Khmer Rouge coming."

We talked on a number of occasions after that. Finally, one day early last year he bowed to me and said, "Forgive me. I leave next week for Cambodia. My family is staying here. Please take care of them. I cannot look at that kind of death again. I see my dead childrens' faces when I see him (Trump). The monks will take me in. I am finished talking." The next week he left.

As I get news about him, as I read of "strong", violent men becoming dictators in more and more countries, and of course as #45 continues in office and tries to consolidate his power, I think of Robert Jay Lifton saying, "after the

Holocaust and Hiroshima, we are all survivors.” I feel like there is a death imprint not just on S. Death’s shadow feels like it looms over all of us.

Again, Lifton’s words come to mind... “after the horrific events of the concentration camps and the use of nuclear weapons, we learned that we not only have the power to destroy all life, but the will to use it.”

S’s family members are frightened, angry at his departure and yet also wonder at S’s calm voice on the phone. During visits they have made to Cambodia over the past two years they say the same thing. S continues to live with the monks. His family members shake their heads. After one of his children went to Cambodia to visit him, I was told on the son’s return that his father wanted me to know that he is still speaking, not to men, but to Buddha. He is waiting for his death so that he can be reborn into a future life. He prays for his family, for his country and for this country, too. He hopes that his tapes and his story help Cambodian-Americans here to “live”.

S’s return to Cambodia deeply frightened me. My Western self could not grok this. I finally realized that I was using his example of “choosing life” as a shield against the darkening shadows that I feel in these death stained times.

But S’s example reminds me of Lifton’s phrase “animating guilt”. That is, the guilt that S felt as he survived the killing fields while others did not; and how

he somehow turned his guilt into an animating force for life. By helping to start the survivor's group and by trying to spread his story to younger generations of Cambodian Americans, he worked to give them a sense of their history, and their living on with meaning and a strong sense of their responsibility in the world.

Lifton's phrase the "death imprint" haunts those who survived the Cambodian genocide—often overwhelming their capacity to live (a kind of "death in life" to use a Lifton book title about the survivors of Hiroshima). Yet S's work, his legacy here, has been an effort to see that that "stain", that horror, does not happen again to others.

PAUSE

A very different story, with some similarities, can be found in my work with K., a mid 60's male. He is a shy, retired physician originally from our Midwest. He worked as a physician for close to four decades. He initially consulted me five years ago because he felt "at odds with himself". His life was financially comfortable, his work at a medical clinic secure and his family intact. Yet, he felt anxious and depressed without being able to put his finger on why.

Gradually he began telling me of what it was like being a family physician at this time. He felt constantly pushed by the clinic and hospital administration to keep his "productivity" high, complete paper and online forms and stop his

criticism of the clinic pressure to order lab tests whether or not he thought they were called for. These factors, together with a talk he finally decided to give at his clinic about favoring single payer health programs and spending more time listening to patients, angered the administration who periodically “talked” with him about this. But by giving this talk and then other talks, K said he was finally finding his sense of integrity.

He loved the practice of medicine as he wanted to practice it. He wanted to hear his patients’ stories and invited them to talk much as old time G.P.’s did. He occasionally made house calls if he felt his patients couldn’t get to his office and because he wanted to see the environs in which they lived. But a year into our work, after yet another talk with the clinic administrator, he said to me, “I can’t do what I want to do there. What they want me to do is be a cog in the wheel of their money machine which runs faster and faster, and bills more and more. Capitalism and medicine have become toxic.” He said, “None of the docs with whom I practice really does a comprehensive physical exam anymore. Nobody touches their patients anymore.” He paused and then said, “Maybe it’s time for me to retire.” Several months later, he did.

But he had definite ideas about the way medicine was headed and he couldn’t sit still and not say anything about them. He began giving talks to various

community groups in his geographic area, and then around the state. He felt very strongly about the single payer health system, but cared even more about trying to establish conversations among people with different as well as similar views. At some point he began speaking regionally. He missed his patients and their stories, but felt that this was the only way he could reach others and talk with them. He also felt like what was happening in medicine was simply one aspect of a culture that increasingly relied on technology and speed with little time to reflect on what it was doing, and little time to listen.

K had also always been an avid hiker and wanderer, renewed by roaming in the outdoors. For years he had been extremely troubled by climate change and the effects of global warming. Several years into treatment his concerns led him to visit a climate scientist. This scientist had collected climate data for six months of every year for 40 years on a disappearing spit of land in the Arctic seeing and studying disappearing bird and sea life, and native peoples displaced. After this visit, he became even more scared, despairing and angry about what was happening to the biosphere, to the oceans, to the species lost as the climate warmed and sea levels rose and became more acidic. He would come into our sessions alternatively despairing and then angry... and also experiencing “the

feeling that all of us have now, but most of us deny... we feel powerless, and then we are silent.”

Lifton’s phrase “malignant normality” comes to mind with his statements. That is, as our sense of powerlessness, despair and finally numbness lead us to compartmentalize the violence that is happening now, and eventually act as though the malignant acts of violence based on race, culture, religion and sexual orientation were “normal” and acceptable and stop us from resisting and taking action.

Occasionally K. would stop and wonder with me about “Is this alright to talk about in therapy?” I asked him where this question came from. He replied that “people who come to therapy are supposed to talk about their feelings about their backgrounds, not what is happening in the world.” I replied that I thought we were talking about his strong feelings... and his integrity... about how it is to be a person in the world at this time in history. He paused and then said, “Well, regardless of what we are or aren’t supposed to talk about, I need to talk about this... and you seem to me to want to listen.”

After much thrashing around with his sense of responsibility and his feeling of powerlessness, he talked with the researcher in the Arctic who has done seminal work on climate change, but done this on his own for many years, so that

few if any grants have come his way. K began talking with others, friends and environmental groups, about how to get increased funding for this research and other environmental research. He's made more trips to the Arctic, staying there weeks at a time to learn. He has donated his own funds and successfully encouraged universities to supply graduate students to help the now older original climate scientist. This very shy, midwestern born retired physician has lobbied state governments here and in Alaska.

He doesn't kid himself about the effects of his efforts. He says, "I love that area of the Arctic. I love the natural world. I feel overwhelmed frequently by all the vast changes that have come about, especially now with our President dismantling everything." He snorts and adds, "as though Mother Nature will wait until we get our action straight... But as little as it is, I have to do something. I can't remain powerless. I have to use my funds and get others to use theirs. I have to talk about how our culture of consumption pollutes the world in which we live. It doesn't come naturally for me to be 'out there' talking to groups. I'm scared when I approach different groups to speak, but these are desperate times, and I feel so much better when I talk about this."

His moods go up and down depending on the political situation, the changes he observes in the American West, the Arctic and all around the world.

He worries often that all is for naught; that it may be too late. He acknowledges how easy it is to deny what's in front of everyone's face, to distract ourselves with another gadget. Yet again, Lifton's phrase "malignant normality" comes to mind. While his overall sense of helplessness against the economic and political forces in power, and the deep and hurrying sense of the planet's changing climate leave him dark and overwhelmed, his personal sense of shyness has diminished (or rather his extraverted side has been discovered), his sense of humor has increased as has his feeling that he is finally doing things that he feels he needs to do. He says, "I struggle with fear all the time. I have never felt so scared, worked so hard and yet felt so alive. I have a sense of meaning and at times even a sense of integrity." (He smiles.)

Reflecting on K and on Lifton and climate change, one can get a clear sense of the horrifying fear of humankind without a future, of human life ending while we feel powerless to prevent this. We have denied this possibility as too grotesque for our minds to consider. We have acted as though climate change isn't happening, or not to us; thus creating a "malignant normality" that allows us to proceed through our days as if somehow technology will solve this problem. K also struggles towards Lifton's "species self". That is, seeing his sense of self and living on after death not just through children or grandchildren, but in trying to

preserve our ecosystem as the “habitat of all species” who, in Archibald MacLeish’s words, are “riders on the earth together.” K’s belief is related to Lifton’s words, “Confronting the full danger of... climate devastation can enable us to sustain, rather than destroy, our species.”

One final note... over the last several years especially, when fear and danger hang over everyone, I have heard regular stories, as have many therapists, about the dangerous and often unreal-feeling world of which we are part. Whether it’s Trump, or immigration and refugee issues, or climate change, or late stage capitalism gobbling up all the planet’s resources, or the American Psychological Association’s part in torturing prisoners at Guantanamo Bay (this latter example related to Lifton’s writing about “Nazi Doctors”), such stories have increasingly cast a shadow of pain and foreboding in the therapy room. This is hardly surprising since we live in the world, and the world lives in us. We can no longer consider our patients as autonomous beings living in but not part of the larger world.

Thus, the stories of S and of K arose naturally as part of the therapeutic conversation. They did not come up as it were from thin air. I simply listened as deeply and broadly as I could. I was curious about K’s reactions about “being at odds” with himself. This led to his disquieting feelings about his medical clinic and

profit motives trumping human care, and feeling his integrity was at stake if he didn't speak out there. And, as he described his hikes, I wondered with him in as much detail as I could about his disquieting feelings as he described seeing familiar hiking areas clear-cut for profit while the planet is affected by drought and warming temperatures. As we explored these sights and the feelings they evoked in him, deeper questions and concerns arose, and gradually new possibilities opened in him. His love of the Arctic led him to see how warming Arctic waters are gradually flooding the lands of First Nations peoples forcing them to leave... and to fear of planetary climate change making refugees of untold millions fleeing their overheated and/or underwater lands. But what does this self-described "shy" person do with these frightening sights? Living a life of privilege himself, could he acknowledge his own shame and guilt? Could he allow himself to ask "what can a person of integrity do"?

One of the important factors in all this was allowing myself to open to these issues, hear him more deeply, be aware of my own tendencies to avoid difficult areas (in which I often feel shame and powerlessness), and then to explore with him and allow him to follow his own path. This wasn't always easy as I had to and have to come to terms with my own fears in order to listen and continue to open

areas that are frightening to all of us, patient and therapist alike. Lifton's phrase "enlivening guilt" is one of the anchors I have for myself during these times.

And, as always in the background is Levinas writing "Is humanity, in its indifference, going to abandon the world to useless suffering, leaving it to the political fatality—or the drifting—of the blind forces which inflict misfortune on the weak and conquered, and which spare the conquerors... must not humanity now, in a faith more difficult than ever, in a faith without theodicy, continue Sacred History; a history which now demands even more of the resources of the self in each one, and appeals to its suffering inspired by the suffering of the other person, to its compassion which is a non-useless suffering (or love), which is no longer suffering 'for nothing', and which straightaway has a meaning?"