

Blinded by Darkness

The Collective Denial of Evil and its Impact on Psychiatric Treatment

“The only thing necessary for the triumph of evil is for good men to do nothing”

Edmund Burke

Rev. Sheri Heller, LCSW

A therapist advises a woman who's been stalked and harassed by her psychopathic ex-husband to meet him over coffee to address co-parenting. A young woman with severe somatization of trauma is told by her therapist that her psychopathic brother was engaging in sexual 'play' when he was raping her vaginally with objects as children. An abused young man avoids necessary treatment because his perpetrator, his father, is an iconic philanthropist. He legitimately fears being scrutinized by clinicians who question his sanity. Why is the burden of proof on the victim to establish a legitimate case for his or her suffering? Why aren't these victims believed and why are facilitators of an empirical science denying the psychological reality of evil?

Evil denotes an absence of good. It is that which is depraved and immoral. Theodicy, coined by philosopher Gottfried Leibniz, is a theological construct which attempts to answer the question of why a good God permits the manifestation of evil. Questions arise in theodicy as to levels of will, why evil exists and whether there is a demonic force responsible for radical evil. All of these questions address the chaotic universal force of evil, but for the purposes of this article we will address the conundrum of human evil, specifically the evil we inflict upon one another, and the collective denial of its very existence, which in turn allows for evil's proliferation.

In *Religion Within the Boundaries of Mere Reason*, philosopher Immanuel Kant (1724-1804) makes the claim that evil is innate to the human species. According to Kant, self-conceit is the designated egoistic trait responsible for moral corruption. In his seminal book, *The Mask of Sanity* (1941), an extreme propensity for evil has been referred to by psychiatrist Hervey Cleckley as a neuropsychiatric defect which fuels the need to destroy. Cleckley's psychological perspective identifies a measure

for evil as psychopathology. Psychopathy as described by Cleckley purports a visage of normalcy. According to Cleckley the psychopath has the uncanny ability to conceal this neuropsychiatric defect. Cleckley asserts that “they are disarming not only to those unfamiliar with such patients but often to people who know well from experience their convincing outer aspect of honesty.” (Cleckley 2011:342) We are deceived, even deluded by, the psychopath’s disguise of virtue, his glibness, ostensible calm, status and charm. The psychopath’s veneer of normality can be so seamless it becomes implausible to consider the malevolence behind the mask, even for trained clinicians.

On the contrary, prolonged exposure to the psychopath’s abuse and exploitation results in complex PTSD and, in the worst-case scenarios, DID. The victims of psychopaths are emotionally, psychologically, physically, financially and socially devastated. The visibility of their distress and symptoms makes them vulnerable to being stigmatized. Sociologist [Erving Goffman](#) defined stigma as, “a phenomenon whereby an individual which is deeply discredited by his/her society is rejected as a result of the attribute”. (Goffman, 2009:30) Goffman emphasizes the role stigma plays in psychiatric diagnosis and treatment by expounding on its insidious barrier to recovery and the dehumanization and de-personalization which stimulates further damage and marginalizes victims. Essentially stigma breeds contempt and contempt breeds blame. Following this line of reason, the stigmatized victim is ultimately blamed for the harm inflicted by the psychopath. This socially Darwinistic paradigm illustrates how the psychopath’s advantage over the victim supports a survival of the fittest template. The fittest are elevated, irrespective of their character. Signs of weakness and fragility are subject to condemnation. Power and status are the relevant markers for what is valued and esteemed.

Along with what is collectively viewed as aberrant or hierarchically correct, and thereby conducive to stigmatization, there are other elemental collective biases we adhere to in spite of contrary evidence. For example, the need to believe that the world is fundamentally just contributes to the rationalization that egregious maltreatment must be somehow deserved by the victim. The need to assure ourselves that we are invulnerable to evil affords us a false locus of control, which again shifts the focus onto the victim’s culpability. What deviates from the norm creates conflict with our social reality. This generates uncertainty and threatens our world-view. To return to a state of perceived equilibrium we may limit the intrusion

of new information or thinking about things in ways that contradict our pre-existing beliefs. We simply deny that which causes us distress. Given that evil calls into question our basic trust in the order and structure of our world, we are compelled by our instinct for self-preservation to deny evil's existence and construct a reality that offers an illusory sense of safety and predictability.

My treatment of D, who was abused by a pedophile over the course of many years, is an example of this phenomenon. The pedophile who I'll refer to as R was a highly regarded coach and educator in an affluent suburb. Years after the assault of D, the FBI arrested R in a sting operation. In spite of the irrefutable evidence implicating R, the community came to R's defense, citing his character and beneficent deeds as proof of his innocence. Even when allegations of sexual abuse made by a foster child in R's care came forth, the child's credibility was ironically damaged by his stigmatized status as an emotionally troubled ward of the state. This case in point illustrates the ego's ability to censor and reconstruct distressing information so as to maintain consonance. On a global scale we see the same defenses employed in response to allegations of clergy sexual abuse and cover-ups perpetrated by the catholic church. Psychiatrist Andrzej Łobaczewski studied what he termed 'pathocracy', institutional and government systems comprised of high ranking officials presenting with psychopathic traits. Łobaczewski attributed human ignorance and weakness to the propagation of macrosocial evil. Accordingly, in spite of the church's heinous history of aligning with Hitler and Mussolini, of implementing the Inquisition and Crusades and of supporting the Magdalene laundries, the witch-hunts and the democide and slavery in the Americas, Africa, and Australia, the persistence in upholding naïve, illusory ideas of spiritual infallibility and idealized notions of virtue trump accountability and objective reality. As Łobaczewski contends, evil motivations are masked by a humane ideology. When followers succumb to pathological influence they lose sight of their critical faculties and they lose the ability to distinguish normal human behavior from pathological. What results is a collusion with evil.

Those who are pathologically evil are ruthlessly driven to acquire power and control. They command compliance and obedience so as to actualize their agendas. Hence, they are encouraged by the absence of critical thought and the reliance on primitive psychological defenses intended to deny unacceptable truths. Psychologist Stanley Milgram's experiment concerning personal conscience and

obedience illuminated how susceptible we are to the influence of authority. The impetus for Milgram's experiment was the Nuremberg war criminal trials. The defense of the Nazi genocide was blind obedience to following orders. Milgram investigated this explanation by testing whether study participants would comply with instructions to administer electric shocks to other participants. The findings revealed that authoritative pressure could usurp moral judgment. In fact, 65 percent of the participants fully complied with the commands to administer up to 450 volts of electricity. This study reinforces what psychopaths understand – that the innate inclination to uphold and obey authority is rooted in sundry factors such as fear, identification with the aggressor, the need to belong, *etc.* As long as there are no serious repercussions, orders dispensed by an authority figure are generally obeyed, irrespective of whether they oppose our morals. This predisposition offers the psychopath malleable and yielding victims ripe for exploitation and abuse.

Returning to the inquiries at the beginning of this article, we can acknowledge why evil is denied and why the burden is on the victim of human evil to legitimize his or her reality and his or her suffering. The masses, including clinicians, are blinded by the psychopath's mask of normalcy. We stigmatize the symptomatic victims, denouncing them as inferior given their emotional instability, concomitant to lauding the capable and convincing psychopath. Our innate proclivity to maintain internal equilibrium and illusions of safety compels us to rely on elaborate psychological defenses to deny threatening information. We see evidence of this on a global scale in which objective reality is dwarfed by deceptive ideologies. None of us are immune to the intimidation of authority. The world is rife with leaders in high positions of power who are pathologically evil. For myriad reasons our innate inclinations to conform and obey eclipse our moral judgment. Unknowingly, ignorantly, carelessly and unintentionally we collude with evil more often than not.

So what is the panacea? As facilitators of therapy, mental health practitioners are bound to come in contact with victims of evil. As treatment providers we need to vigilantly challenge our denial systems and demythologize evil if we are to adequately treat those seeking our help. This requires us to courageously face the harsh reality of life's dangers, including the potential for evil that lurks within. Jung referred to the repressed, 'dark', unenlightened parts of the psyche as the shadow. As Jung explained, the denial and repression of the shadow unconsciously causes it to be projected onto the 'other'. If mental health clinicians collectively deny the

reality of evil, to quote Jung, then “...how can evil be integrated? There is only one possibility: to assimilate it, that is to say, raise it to the level of consciousness.”(Jung, 1970:465). By bringing the reality of evil’s influence into the therapeutic framework, a clinically significant factor in the healing process is consciously addressed. The dark side of humanity must be acknowledged if victims of evil are to assimilate what was done to them. Summarily, it is our ethical responsibility as therapists to embody consciousness. Only then can we truly recognize evil, refuse complicity and be reliable instruments of helping others heal from evil’s wreckage.

Rev. Sheri Heller, LCSW is a New York State licensed clinical social worker, addiction specialist, Ericksonian hypnotist, and interfaith minister. She is a seasoned psychotherapist with 25+ years experience in the addiction and mental health fields. For more info. visit sheritherapist.com

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