Can we treat evil?

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What is treatment?

- An activity of professionals
- To bring about an improved state of affairs
- Restore, repair, support, alter
- Regulated and defined both legally and ethically
- Of individuals with disorders; not groups or societies

Can we treat evil?

- Only if it is a disorder of individuals
- Only if evil falls within the discourse of illness, disease, disability or disorder
- 'Harmful dysfunction' (Wakefield, 1992)

What is a disorder?

- A combination of facts and an evaluation of those facts

- A complex debate

- Illness, disease, disability, dysfunction

- Must cause harm or failure to perform function supportive to well being

- (Wakefield, 1992; Fulford, 1999)

Issues relating to debates about disorder

- Is illness the same as disease?

- What is the relevance of pain or dysfunction?

- Where do statistical norms come in and to what purpose?

- How does one decide what the 'norm' is, without reference to 'norms'?

- Issues of personal agency and identity

The nature of Evil

- Evil is hard to define

- A human activity: nature is not moral

- Specific aspects: conscious, planned, considered, exploitation of the vulnerable, lack of concern for suffering

- The self as the only concern: The Monster threatens the community

Evil and violence to others

- To call an act evil is to make a judgement about another person's mind

- The wish to hurt another person deliberately is part of the evil state of mind

- May or may not result in an act of physical violence

- Evil may be common; violence is not

Evil: a definition

- (a) Intentional suffering inflicted on the vulnerable

- (b) this suffering is treated with contempt and cruelty

- (c) Both cruelty and contempt are positively supported

- (d) It evokes a judgement of 'evil' and social exclusion: the anti-human

Conceptual slippage

Evil is not the same as aggression, violence or antisociality (Midgely, 1984)

Lack of emotionality and empathy may be significant

But complex relationship between lack of empathy and violence

Evil behaviours and actions are uncommon

Frequency vs undesirability

Antisociality, anger and hatred are common

Violence is not

Evil even less common

Degrees of evil?

Not all homicides are evil

Most child abuse is

Evil as a disorder

Statistically deviant and rare

Socially abnormal

Seems to show similar patterns like a 'syndrome'

A disorder of normal humanity?

If a disorder, it is located in individuals

Could evoke compassion as well as disgust

Easier to address than social attitudes

A failure to perform normal human functions

Perpetration of evil is a failure of humanity?

- Dysfunction of the social mind (Wakefield 1992; Dunbar, 2003)

- Victims seen as 'fair game' i.e. not human or as object" merely as a means"

- Contempt for vulnerability and need undermines pro-social function

But, unlike other disorders:

-         No evidence of suffering in the perpetrator

-         No evidence of any dysfunction except in terms of attitudes to the vulnerable

-         Evidence of choice in perpetrators: to begin and to desist

-         Not generally seen as ill or diseased until there is opposition to them

- No evidence of concern for the self and contempt for others' concern

Evil as a state of mind

Some situations may act as triggers   -   shame/humiliation

-    loss/threat of loss

-    previous exposure to humiliation and denigration when vulnerable

-    revenge?

-complex with regard to affects

Cultural factors that facilitate evil

-	stereotypes about "acceptable" victims

-	denigration of weakness and vulnerability

-	stereotypes about 'acceptable' violence

-	a discourse that talks 'up' differences and 'down' similarities

-	violence by the state: people don't matter

Are perpetrators of evil different?

- Different to whom?
- Different in what way?
- Are similarities ignored?
- What differences/similarities count?
- Who gets to decide?

Gauleiter
Dr. Meyer

Reichsamtsleiter
Dr. Leibbrandt

Staatssekretär
Dr. Stuckart

Staatssekretär
Neumann

Staatssekretär
Dr. Freisler

Staatssekretär
Dr. Bühler

Unterstaatssekretär
Luther

SS-Oberführer
Klopfer

Ministerialdirektor
Kritzinger

SS-Gruppenführer
Hofmann

SS-Gruppenführer
Müller

SS-Obersturmbannführer
Eichmann

SS-Oberführer
Dr. Schöngarth

SS-Sturmbannführer
Dr. Lange

SS-Obergruppenführer
Heydrich

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- Perpetrators of evil either blame their victims or take pride in their actions

- Little sense of blameworthiness or guilt because they justify their actions to themselves and others

- Little sense of their own wish to be cruel

- Social support for their views and actions

This thing of darkness I acknowledge mine…….

Does it make sense to 'treat' a crime?

-      Rather: we treat underlying antisocial mental states and attitudes

-Risk as continuum not state

- Therapy can consider the interpersonal <u>context</u> of risk: how do relationships increase risk for this person

-the importance of groups

Ownership and agency

- There is a self or mentaliser who owns actions: who is the agent

- The 'real' me, who is demonstrated by my actions and decisions

- The 'authentic' self (Baldock, 2009)

- High cost decisions need 'truer' authenticity

Agency and responsibility

- The language of offending
- Research shows importance of reworking narratives of passivity into narratives of agency
- Acceptance of the offender identity allows for change
- E.g. It wasn't me
  - It wasn't me, it was my illness
  - I was ill when I did it
  - I killed her