

# *Unconscious Guilt and Major Resistance*

---

Presentation by Reiko Ikemoto-Joseph, LMFT

---

# What is Unconscious Resistance?

---

In ISTDP we recognize certain subcategories of resistance that have specific clinical relevance and which in turn inform our interventions.

- **Resistance against feelings (RAF)**
- **Resistance against emotional closeness (RAEC)**
- **Major (Superego) Resistance**

---

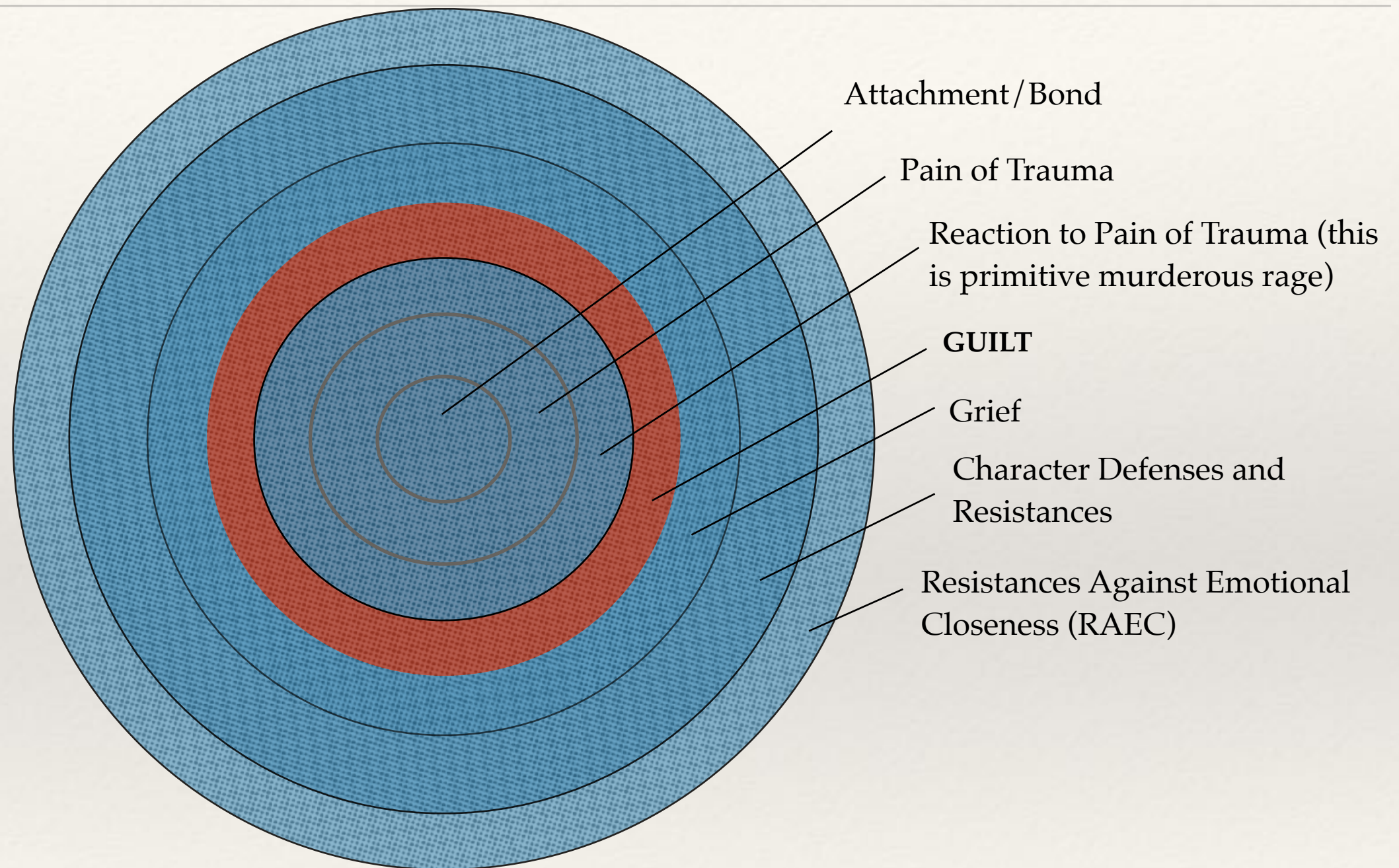
# Unconscious Guilt & Resistance

---

“The ‘unconscious sense of guilt’ represents the superego’s resistance. It is the most powerful factor, and the most feared by us.” — Freud in *The Question of Lay Analysis* (1926)



# Psychopathological Dynamic Forces



---

# The Perpetrator of the Unconscious

---

The perpetrator of the unconscious is an evocative term coined by Dr. Davanloo to describe a destructive force in the unconscious that derives from traumatic disruptions to the attachment bond between a child and his caregivers, often in the earlier phases of life. The earlier and more severe the damage to the bond, the more destructive the resulting force.





---

# Unconscious Guilt – the most painful emotion

---

- Unconscious guilt is just that — unconscious. The patient doesn't feel guilty. She feels anxious, symptomatic and confused about her self-defeating patterns.
- When guilt enters conscious awareness, it is often experienced as deep, sharp, and very painful sensations in the upper chest and throat.
- Unconscious rage and guilt, when left unresolved fuels self-punishment.
- Our job as clinicians is to help the patient face and resolve the painful feelings they've spent a lifetime avoiding.

# Unconscious Guilt & The Law of Talion

---

- The Law of Talion is the early Babylonian “Eye for an Eye” principle, which was later adopted by the Romans.
- The Perpetrator of the Unconscious operates on the same Talion logic.
- “The Punishment Shall Fit the Crime” — The Law of Talion applies to symptom formation and self-defeating behaviors.



---

# Common Clinical Presentations of Unconscious Guilt

---

- Self-Harming Behaviors including self-injury, patterns of use & abuse, eating disorders, and self-sabotage
- Martyring / Pathological Caregiving
- Compensating / Compulsive Achieving
- Undoing



---

# ISTDP Interventions

---

## ❖ **Pressure**

In ISTDP, the main intervention is “pressure.” This means as clinicians, we assess for and apply pressure to whatever is avoided.

## ❖ **Challenge**

When we challenge, we are inviting the patient to recognize and relinquish their defense mechanisms (avoidance).

## ❖ **Clarification**

You can't invite a patient to relinquish a defense they don't see. We use clarification to help the patient see the defense, how it's operating, and the price of continuing to use it.