

Dealing with Guilt

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Every animal is afraid of pain and will do anything to avoid it. It's natural. But this avoidance creates a whole host of problems. In my last article (*your Health source*, November 2005), I showed how anger, if not experienced in a functional way, can also create a host of problems in one's health and relationships. This article is going to discuss how Experiential Dynamic Counseling deals with guilt, a powerful emotion that can stifle joy and well-being.

Guilt is there for a reason. It acts as a moral guide signaling when some rule or law has been transgressed. It tells us when we have done something wrong, it should guide our choices not abuse us. But in this kind of work the counselor cannot isolate and focus on just one blocked emotion because it can often be one or a combination of several that are inhibited which lead to the problem. For example, for many people anxiety is paired with joy. Along with the experience of joy can come the anxiety that it won't or can't last, or that the joy is undeserved.



One can also experience guilt about feeling anger at someone one cares about. As I explained in my last article, the actual emotion of anger feels good but this kind can be painful because we suppress these feelings and experience instead self criticism and guilt. Gabor Mate writes in his book *When the Body Says No* "A therapist once said to me, 'if you face the choice between feeling guilt and resentment, choose the guilt every time.' If a refusal saddles you with guilt, while consent leaves resentment in its wake, opt for the guilt. Resentment is soul suicide."

However, I have seen plenty of cases where guilt is just as crippling. Take the example of a mother who suffers from a chronic illness and who uses her illness in a manipulative way to get the attention she craves from her daughter. The daughter may feel tremendous guilt about getting on with her life and leaving her mother behind. Can she imagine herself five years down the road happy and successful while her mother is still ill and depressed? Can the daughter feel compassion and sadness about her mother's situation and still get on with her life, or will she more likely feel crippling shame and guilt? Only a very mature person could have a frank discussion about all this without the deprecating self talk that says that she **shouldn't** feel the way she does. On the other hand, how does the mother feel? Is she also tortured with guilt about needing her daughter's attention so badly? What is her history that makes her so needy?

In some cases people use disease as a punishment by accusing themselves of deserving their illness. Or there could be guilt about being sick and a burden to others.

The counselor is constantly watching for signals that don't compute. For example, the patient smiles when he talks about his sick mother – the counselor is going to challenge the smile. Or a patient will talk in a monotonous, dead voice whilst recounting a situation she feels guilt about. The counselor will challenge the lack of emotion. It's all about challenging the defenses against painful feelings, and bringing awareness to the surface.

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I had a patient who was tortured by so much guilt and self loathing that he lived like a hermit. He had his own inner judge and jury which had condemned him for something that had happened in his childhood and over which he had had no control. This guilt carried over into his adult life and made it impossible for him to stand up for himself because he always judged himself in the wrong whatever the situation. His girlfriend had just left him due to his lack of being able to connect emotionally, and he landed up in my office knowing something was wrong but not sure how to fix it. He did not consider himself deserving of happiness and believed that any show of emotion on his part meant he was emotionally unstable. He lived a life of doom and dread with a very tight control over his thoughts. His case was difficult because he truly believed that he was bad and unworthy and that he deserved to be punished. We had to examine each of his beliefs (valid=worth). Was this or that belief truth or fiction? What evidence could he find that would back up this belief. At first he could only accept that his guilt was self inflicted on an intellectual level. We had to dig deeper to get to that part of him that really believed he was bad. We had to work slowly to help him to distance himself from his guilt and to see it for what it was worth. Gradually he stopped sitting hunched in his chair, stopped looking like a condemned, crippled man, stopped the talk in his head that was always self condemning. A crack appeared in his gloomy outlook on life, and slowly he was able to embrace the good that was around him and know without doubt that he deserved it.

As I said in my last article on anger, we tend to be unaware of the many ways we unconsciously suppress emotions. We are not born with suppressed emotions. Such suppression or avoidance is a learned response taught by our caregivers and the world around us. What we do in this work is try to help the patient to acknowledge the real feelings she has and not what should be and, most important, to accept them however unpleasant. We are born perfect, but we are not born with a set of instructions. If we have been brought up imprinted with the wrong information from our caregivers or society, we can change it and take control of our life again. As Shakespeare wrote "This above all: to thine own self be true, and it must follow, as the night the day, thou 'canst not then be false to any man."

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