

RACE AND GENDER IN THE EXPERIENCE OF ANGER IN THE PSYCHOTHERAPEUTIC OF SOCIO-HISTORICAL PSYCHOLOGY

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Abstract

The Brazilian context of profound social inequality intensifies differences in the ways of living and feeling human experiences. It demands from mental health care the critical appropriation of the oppressive and exploitative structures that found and sustain capitalist society. Among the fundamental human experiences, emotions have special emphasis, especially in clinical practice. That presupposes embracement and bonding, so that understanding the particularities that determine emotional experiences is essential for clinical reasoning. Socio-historical psychology with its historical materialist base offers categories that allow the appropriation of these determinants, among them the notion of significance, meaning and experience that guide this study. Based on Socio-Historical Psychology, we understand emotions as socially meaningful experiences. Kahhale & Montreozol (2019) list some fundamental parameters for thinking about clinical management in socio-historical psychology, they are: active listening; dialogical and reflective relationship; historicity as an analytical category; potentialization and autonomy of the subject and human rights and access to the best cultural production of humanity We constructed this paper from a clinical case study (21-year-old black woman, daughter of a black father and white mother, college student, resident of São Paulo /SP/Br), a psychotherapeutic process that took place during the first half of 2020, understanding that through this format we were able to apprehend clinical processes in their concreteness, that is, as a synthesis of multiple determinations. We aim to deepen the debates about the experience of anger from an intersectional perspective, understanding the historical processes of meaning of this emotion for the female gender and for black people. The discourse analysis methodology of the therapeutic sessions and case supervisions was used, so we illustrate psychotherapy based on Social-Historical Psychology using a case study focusing on anger. The following core meanings were obtained: the client's denial of her emotions; the expression of anger; therapists' emotions. These nuclei indicated a specific knot of this condition in which black women are doubly excluded from the right to signify and express their anger. In view of this, it is fundamental that the therapists involved take ownership of these discussions at the most immediate and unique level so dear to psychotherapy, the emotions.

Keywords: *Psychotherapeutic process, emotions, socio-historical psychology, race, gender.*

1. Introduction

This paper intends to deepen a clinical case study built from a psychotherapeutic process that took place during the first semester of 2020. The client here named J., is a Black woman, 21 years old at the time, daughter of a Black father and a white mother, university student, living in São Paulo/SP/Br. During the therapeutic process of this case, two issues deeply mobilized the therapists, the client and the supervision group: the condition of the client as a Black woman in the current patriarchal and racist Brazilian society;

and the presence of an affection that was denominated anger in her verbal and behavioral expressions in the consultations. The denomination of anger was constructed in different contexts and directions as will be portrayed throughout this paper. The objective of this work of elaboration and deepening, therefore, is to analyze the clinical management of emotional-affective expressions. The intention is to apprehend the processes of signification and naming of emotions and affections, and to understand how social particularities, especially the intersection of race/gender/class, tied to our social context, determines the experience of this process.

The choice of the clinical case format makes it possible to reveal the client's main meanings, which are relevant to the objective of the study, thus allowing empirical studies to provide theoretical and practical advances in the socio-historical clinic, based on the historical-dialectical materialism method, a theory in which we are aligned in the defense of the need to overcome the appearances of clinical processes, reaching their concreteness, through the synthesis of multiple determinations. The sessions were carried out remotely through platforms such as Google Meet and WhatsApp due to the restrictions imposed by the COVID-19 pandemic. Each session lasted 50 minutes and the client J., a therapist and a co-therapist participated. The sessions were recorded and later transcribed with the client's permission.

The data that make up this clinical case study correspond to the transcripts of the sessions held, the client's psychological reports produced for the Ana Maria Poppovic Clinic at the time the case was referred, and the recordings of the supervision meetings held at the Laboratory for the Study of Health and Sexuality (LESSEX). The project was approved by the Research Ethics Committee of PUC-SP/Br and received the following protocol: CAAE 18783019.00000.5482.

The methodology used was discourse analysis, made out of the sessions and supervisions records. The analysis was based on the cores of meaning proposed by Aguiar and Ozella (2006) and supported by the methodological reflections presented by Friedman (1995) on the study of the relationship between language and emotions. The authors point to the notion of semantic field as an interpretative element of the link between referential meaning and associative meaning of signs, indicating an active process of meaning choice based on personal meanings and positioned in the confrontation between social meanings and personal experience. Rescuing the notion of semantic field in the analysis of the cores of meaning, we intend to understand that the process of meaning and management of emotions goes beyond the moment of their naming.

Next, we will present a brief theoretical review that we used to elaborate the analysis, linked to the Brazilian context and the acknowledgement of the current system of oppressions. Afterwards, an analytical description of the therapeutic process that J. was submitted to and the formulation of the analysis discussed in three cores, as well as reflections on clinical handling..

2. Theoretical foundation

The Brazilian context of profound social inequality intensifies the differences in the ways of living and feeling the experiences of people in this territory according to their specificities. Thus, it is necessary that mental health professionals think critically about this reality built through oppressive and exploitative structures that founded and sustains capitalist society. It is understood that, among human experiences, emotions have special emphasis, especially in clinical practice.

Social-Historical Psychology (SHP) has been producing theoretical foundations for clinical practice, understanding the individual as a unique, active and historical being that develops through the social relationships he establishes with his environment, interpersonally, with the world and with himself. The development of the subject in this approach occurs in a mediated way in a singular-particular-universal dialectic. From this perspective, in the humanization movement, the higher psychological functions were developed, such as consciousness, language, attention, perception, among others that result from the historical formations of the human gender, containing within themselves the characteristics of the social totality in which they are inserted (Vygotsky, 1987). Therefore, the process of constitution of the individual as a human being, occurs through the dialectic between appropriation and objectification of the cultural accumulation of humanity according to the access that a given reality allows and offers.

Thus, Social-Historical Psychology (SHP) proposes a historicized clinical practice that aims to break with the classical clinical practice built on the dichotomy subject-society, emotion-reason, etc., thus enabling an understanding that relocates the meaning of emotions in Psychology by understanding them as a historical and social phenomenon (Lane & Camargo, 1995). This implies a clinical reasoning that seeks to understand the particularities that determines emotional experiences, based on the historical-dialectical materialism, we can investigate how the various mediations that takes part in social totality affect feeling/thinking/acting on emotions. This process of reasoning and handling must be linked to the understanding that the various mediations are configured in alienation, in the structuring of the capitalist system, and its interlacing of class, gender, and race.

About emotions, which is the focus of this research, we started from Vygotsky (1999 [1925]) when the author highlights the dialectic character for the formulation around emotions. His defense is that these are not entities that are inside or outside the individual, but are built from the constant interaction between this individual and the environment, so, they can also be transformed as the subject develops continuously. With his historical materialist basis, the author offers categories that allow not only to describe, but also to explain these phenomenon, among them the notion of meaning, sense, and experience that guide this study. Based on these categories added to the other formulations of social-historical psychology, Kahhale and Montreozol (2019) list some fundamental parameters for thinking about clinical management in Social-Historical Psychology, they are: active listening; dialogical and reflective relationship; historicity as an analytical category; empowerment and autonomy of the subject and human rights and access to the best cultural production of humanity.

Therefore, when we understand that the relations that found, constitute, and develop the subject, with consciousness being related to thought and language, we understand that signification is mediated by particular aspects. To understand how these mediations are constituted we point to Lukács (2018), one of the authors who synthesizes the notion of mediation in the singular-particular-universal dialectic, taking the particularity as mediation between the universal (human kind) and the singular (individual). In other words, the particularity is a concrete and real field composed by mediations that decisively affect the way in which the singularity is constituted in the universal and this in turn is concretized in the singularity.

Thinking about this mediation in the singular-particular-universal dialectic from the theme of race relationships, Devison Faustino (2018) points out that racism would be this concrete field of mediations that determine singular experiences. From this perspective, the particularity aspect can't be taken as a characteristic of the subject, such as race, class, or gender, but needs to be understood as "structural or conjunctural forms under which singular individuals experience their generic universality" (Faustino, 2018, p. 146). This way, it refutes the colonial thinking that was producing various dichotomies that found the notion of the human and the Black as non-human. With this, the Black is reduced to an extreme of this dichotomy, as the author states in another text: "The Black (the Other) is expected to always be emotional, sensual, virile, playful, colorful, childish, banal; as close as possible to nature (animal) and distant from civilization" (Faustino, 2013, p.6).

We then understand that we are subjects within and from social relationships, in a psychophysical unity. When we think about gender, a similar movement occurs. There are studies on gender relations that bring to light this process of inferiorization and subordination in power relations in which women were placed as subjects outside history, on the margin, as the other. Historically, politics has relied on arguments that associated the position of women with subordination, in a hierarchical and naturalized vision of the relations between the sexes, producing a codification of gender with rigid meanings, much of the weight of this argumentation relied on an alleged natural difference between the sexes that would explain and/or justify patriarchal domination. This place of subjects outside history is related to the dichotomy between nature and culture fundamental in capitalist, colonial-patriarchal thinking (Scott, 1995; Haraway, 2004).

In the field of emotions in our society Lutz (1988 apud Despret, 2011) points out two central and contradictory lines are outlined, one of romantic inspiration that takes emotions as the true core of the human being, the source of life within us, and another based on Plato and strengthened by Christianity that sees emotions as an imminent danger, pathological expressions (páthos) of that which must be fought. Here again there is a dualistic and hierarchical clipping produced and sustained by colonial thought within which superior and inferior emotions are positioned, those that should be cultivated and those that should be repressed, and this positioning reflects concrete interests in maintaining capitalist exploitation. Therefore, to talk about emotions is to talk about society, is to talk about politics, about the way we organize our society and signify our experiences.

What we saw then is an intertwining between the notions of nature, culture, gender, race, and emotions, which are taken as biological and natural human components at the same time that the categories of gender and race position subjects in this spectrum and produce a hierarchy, subordination, and domination. In view of this, it was, and still is, necessary to be careful not to produce a direct and unthinking association between these positions presented here. However, both speak about a marginal position, of oppression that have been silenced and denied for much of western history, between which the relationships are complex and imbricated. Based on these references we built our analysis of J.'s case, recognizing that this configuration of our social organization most likely affects her social existence as a Black woman.

3. Results and discussion

At first, the client J. reached the psychological clinic motivated by a suspicion of ADHD and requested a neuropsychological evaluation. After the psychodiagnostic process, it was concluded that there was a lack of elaboration of her personal contents and she was referred to psychotherapy. In the first sessions of the psychotherapeutic, it was observed a certain difficulty in understanding how the clinical space worked, but, little by little, the psychotherapy was becoming more dynamic. With that in mind, we

organized the results into three cores, according to the objective of this case study: the denial of the client's emotions, the expression of anger, and the emotions of the therapists.

The first core concerns the reading of the previous professionals about J.'s process in the university clinic. In the first sessions of the psychodiagnosis, it was described in the medical records that J. was an avoidant person who did not talk about her feelings and demanded answers from the therapists only about her initial complaint - the ADHD diagnosis hypothesis. However, in our psychotherapy process we noticed in the very first sessions that the client was bringing stories of difficult experiences and verbalizing her affections from these experiences, especially anger, but also guilt and uneasiness, which was being disregarded by the previous therapists who indicated her as a person disconnected from her emotions. Therefore, it is understood that there was a denial of her affections by the previous professionals.

The second core of meaning refers to the expression of anger. A certain difficulty in expressing this feeling was observed, and during the supervisions, was noted the need to interweave J.'s racial aspects into the whole of her psychotherapeutic process. When talking about the fragile relationship she has with her father, the expression of anger appears, starting from denial. J. says she does not hold such affection, but that she feels repulsion and pity for the man who did not exercise a positive paternity; on the contrary, he was sometimes aggressive and mainly absent. It denotes that the line "*I don't keep these feelings*" (sic) may indicate an ideological aspect in its meaning, which, according to Reis (2007), there is a false and moralizing dichotomy about good and bad emotions, and added to this, the place of the affections within the family configuration, built and generalized from the bourgeois molds, created the social meaning of the family and the notions of love and control, especially in the social role of daughter.

This leads us to understand that elaborating and/or expressing a feeling such as anger (considered negative) towards one of their parents requires levels of authorization that are constantly denied in our society, so that this possibility in many cases is practically nonexistent. Therefore, it is important to think that the expressed affections, as well as the hidden ones, are not part of a natural process, but are related to the formulations of a series of determinations and violence to which the subject has been directly or indirectly submitted throughout her life.

About the third and last core, the feelings of therapists, it was identified a certain difficulty for white therapists to produce a listening capable of hearing her suffering, unfolding in an invisibilization and disqualification. According to Kahhale, Montreozol and Costa (2020) it is significant that the thoughts, speech and emotions of professionals are in a constant process of reflection in an ethical-political commitment to contribute to the mental health of those being assisted.

Throughout our process, J. was emphatic in bringing up that her need and interest was to check the diagnostic hypothesis of ADHD, her initial demand that was directly related to the reality of her moment, which was the ending of her graduation. Her affirmations were accepted and validated as she understood the institutional and professional movement previously made, as well as the guarantee that we don't corroborate with these interventions. In this way, it was understood that J.'s expressions of anger are linked to the movement of claiming a place that is useful to her and in accordance with her concrete needs.

The relationship between anger and claim is practically a consensus among Black feminists who see in emotion, and especially in anger, a transformative and political potential. According to Bello (2022, p. 37), a tradition of argumentation favorable to this emotion has been developing as a possibility to overcome oppressive situations: "in these traditions, anger plays a central role in the claim for recognition of injustices, and assumes a function as an instrument to detect injustices and to motivate social action".

As we return to the first core presented - the denial of J.'s emotions - this process of denial is an expression of the dichotomy that we have been pointing out throughout the text, the dichotomy that Vygotsky (1999) criticized, in which thoughts and affections are separated. This highlights a crucial point, if we want to think about the management of emotions in clinical practice in Social-Historical Psychology: the emotions are present in all human processes, as motivation in activity and as a founder of meaning in experiences. So that emotions are always expressed somehow in the person's ways of acting-thinking and feeling.

As we have seen above, historically there was a process of condensation of the ideals irrationality, savagery, aggressiveness in the construction of the idea of race, which intensifies even more when we think of Black women. As J. is interpreted by the professionals in training through crystallized foundations, there is a characterization of her as an aggressive, harsh, and "too objective" person, which may dehumanize her as a result. Looking at the case analyzed, we understand that J. made several movements in a process of claiming her concrete demand to be listened, and this claim was necessary because a careful and committed listening was denied to her. The therapists denied her initial demand because of the maintenance of thoughtless ideological postures throughout her process, leading to the absence of a careful look at the mediations.

There is here a mirrored mechanism that gives us a basis for reflecting the way we therapists felt about J.'s movements and demands, that is, there was a discomfort generated in front of a Black woman claiming a space different from the one she was given. The first reading could tell us that J. could not elaborate her emotions and that is why she is referred to therapy, when we received her we held this false idea. But her desire was only for technical support to help her develop her studies.

4. Final considerations

With this way of looking at the emotions, we tried to apprehend the reports of what was felt when faced with the client's speeches and attitudes and how this influenced the analyses built about the case. We conclude that the cores indicate a specific knot of this condition in which Black women are doubly excluded from the right to express their anger. From this, it is crucial that the therapists involved recognize and deeply understand these discussions, especially about the most immediate and unique level so dear to psychotherapy: the emotions.

The limits and possibilities of meanings of the emotions are redrawn from the mediations imposed by racism and patriarchy, in the face of which we cannot dodge at the risk of neglecting or invisibilizing the various forms of expression of emotions, that escape only naming it, but also show potent gaps in the static and naturalized picture that is presented to us about emotions.

When thinking about the management of emotions in clinical practice in Social-Historical Psychology, we need to break with the naturalizing ideology of emotions that continuously separate the experience of emotion as a field apart, apart from the body, the word, and consciousness. To search for this dimension as a separate thing is dangerous, because it encourages us not to look at everything that constitutes the subject. Emotions are always present - no matter if it is not explicit, elaborated, named, or integrated.

We understand that the thoughts presented here are still in an initial stage, taking into account the scarce debate about emotions in clinical practice in Social-Historical Psychology. However, we emphasize the fundamental importance of productions that can aggregate our readings and analyses producing references about the clinical management of issues of racism and patriarchy mediating the emotions.

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