

"I Know It's Wrong, But I Want Them to Suffer": Revenge, Humiliation & the Retaliatory Imagination

An online webinar with
Dr Jan Hepburn
Zoom Webinar
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CPD hours: 3



Location: Online streaming only
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The Wish We Don't Talk About — and What It Teaches Us Clinically

Every therapist eventually sits with a client who lowers their voice and confesses:

"I know it's wrong... but I want them to suffer."

Not to act. Not to harm. Not to destroy.

But to imagine.

Revenge fantasies arise more often than clinicians admit — and they reveal far more than they conceal. They show:

- where dignity was ruptured,
- how humiliation fragmented self-cohesion,
- what form of justice the psyche longs for,
- where shame has become unbearable,
- what the therapist is being asked to witness,
- and how countertransference becomes a clinical instrument.



Within moments of disclosure, the room fills with complexity: guilt, intensity, relief, defensive shame, and the unmistakable tremor of the injured self reaching for coherence.

Training rarely prepares clinicians for this moment. Jan does.

For the Clinician Who Knows This Terrain Too Well

Senior practitioners will recognise the psychological density of revenge fantasies. They sit at the crossroads of:

- narcissistic injury and the collapse of self-cohesion,
- moral violation and helplessness,
- humiliation and its symbolic counterforces,
- dignity, justice, and the longing for recognition.

These fantasies are seldom acts of malice.

They are injured self-states seeking coherence — often with surprising psychological intelligence.

Jan Hepburn's Distinctive Lens

Jan brings an unusually rich synthesis to this work: analytic sensibility, trauma understanding, developmental thinking, moral psychology, and a literary/aesthetic intelligence. She often draws on visual culture in her teaching — for instance, using an intact **Eros sculpture** to explore how shame operates: the exterior seemingly perfect, while inside the self feels ruptured, exposed, or undone.

In this workshop, she brings that same depth to the retaliatory imagination, treating revenge not as pathology but as a **symbolic attempt to restore dignity to what humiliation has broken**.

A Case That Refuses Resolution (Yet)

Consider *Elena* (not her real name).

Six years after leaving an emotionally abusive marriage, Elena appears outwardly composed. She meditates, journals, and speaks fluently about resilience. But she carries a private revenge fantasy:

She imagines her ex-husband walking into a room full of colleagues — just as a silence falls, a glance is exchanged, and he realises, with a small, devastating moment of recognition, that he is now seen the way she once was: unprotected, unmasked, and without the armour he relied on.

In that imagined humiliation, Elena feels briefly restored.

"It's awful... but it makes me feel like something finally evens out."

Nothing dangerous.

Nothing sinister.

Nothing requiring containment.

What we witness is the **injured self attempting to reassert dignity through fantasy** — a stabilising structure that prevents collapse into shame.

We leave Elena unresolved — because this is exactly where the work begins.



Why Revenge Matters Clinically

Revenge fantasies give us direct access to the emotional truth of injury. They function as:

- attempts at psychic stabilisation after humiliation,
- symbolic rebalancing when no repair was possible,
- assertions of dignity in the aftermath of degradation,
- forms of protest against erasure,
- buffers against shame,
- temporary holding structures until deeper integration can occur.

Far from signalling dangerousness, many revenge fantasies are adaptive efforts to prevent collapse.

The Humiliated Self and the Birth of Fantasy

Humiliation is a relational trauma: sudden, disorganising, and identity-altering. From this rupture, fantasies emerge as:

- restorative,
- protective,
- symbolic,
- morally expressive,
- attempts to reclaim personhood.

Revenge is less about harming the other and more about reassembling the self.

The Forms Revenge Takes in the Therapy Room

Revenge rarely announces itself dramatically. It appears in subtle, intricate forms:

- The wish for moral exposure "I want them to finally be seen."
- The private daydream of reversal "I imagine them feeling what I felt."
- The internal tribunal a personal court of justice.
- The silent retaliator forgiveness on the surface, vivid fantasies beneath.
- The turned-in revenge retaliation collapsing into depression or self-attack.

Each form reveals the structure of the original injury.

The Therapist's Ethical and Emotional Conflict

Revenge fantasies evoke a layered countertransference:

- the urge to reassure,
- the impulse to moralise,
- · fear of collusion,
- fear of missing risk,
- discomfort with one's own retaliatory impulses,
- the activation of internalised moral codes.



This **ethical countertransference conflict** is not noise — it is **data**, guiding the therapist toward what the fantasy is protecting or protesting.

Working with Revenge Fantasies: A Clinical Pathway

Jan's method is clinically rigorous and emotionally attuned, offering a pathway that neither sanitises nor sensationalises.

- Making room for the unspeakable
 - Creating a space where fantasies can be voiced without shock or moral correction. Clients often stabilise when they sense: "You're still with me."
- Clarifying fantasy vs. intent
 - Distinguishing symbolic wishes from enactment lowers anxiety for both client and therapist.
- Tracing the fantasy to its origin
 - Revenge fantasies consistently map back to humiliation, betrayal, or moral violation. Naming this shifts the work toward self-repair rather than "badness."
- Using ethical countertransference diagnostically
 - Jan shows how to recognise the roles clients implicitly ask the therapist to occupy judge, witness, accomplice, moral authority and use these movements therapeutically.
- Exploring the fantasy's psychological meaning
 - Interpreting too early strips the fantasy of its stabilising power.
 - Jan teaches how to deepen understanding while preserving the fantasy's internal function.
- Supporting integration without enactment
 - The goal is not premature forgiveness or moral transcendence but **coherence** allowing the injured self-state to rejoin the internal community and soften naturally.

What You Will Learn

By the end of the workshop, participants will be able to:

- Recognise revenge fantasies as stabilising psychological structures
- Identify the humiliation—shame—revenge sequence and its clinical implications
- Distinguish symbolic fantasy from genuine enactment risk
- Understand how revenge fantasies express unmet needs for dignity, agency, and recognition
- Work safely and sensitively with clients who feel "bad" for having retaliatory wishes
- Use countertransference especially ethical tension as a clinical compass
- Explore fantasies in a way that deepens meaning without dismantling their protective function
- Support clients in reclaiming dignity and agency without enactment
- Facilitate integration of injured self-states so that fantasies soften over time

This is material clinicians take directly into the consulting room the very next day.

Why This Training Matters Now

We live in a cultural moment saturated with humiliation — from public shaming to institutional betrayal to intimate relational wounds.

The quiet wish for revenge, in its symbolic and psychological forms, is increasingly present in the consulting room.

Yet almost no trainings address it.



Jan Hepburn does — with depth, courage, nuance, and the distinctive artistry of her clinical mind.

This evening offers a rare exploration of the retaliatory imagination, the injuries that shape it, and the ethical and emotional sophistication required to meet it.

This is not a workshop about forgiveness.

It is a workshop about truth.

Not resolution.

Not transcendence.

Not letting go.

But understanding — the kind that lives in the darker corners of the psyche and seeks witness rather than judgment.

About the speaker

Dr Jan McGregor Hepburn has a background in Social Work Management and Psychoanalytic Psychotherapy and is a trainer for the British Psychotherapy Foundation She was the Registrar of the British Psychoanalytic Council for 15 years and currently chairs the Professional Standards Committee. She is the author of several papers, most notably those published in the British Journal of Psychotherapy and European Psychotherapy Journal. She has presented papers at conferences and devised and facilitated both seminars and workshops on a variety of subjects to both management dynamics and clinical topics.

She is part of the ScopEd project which is the collaboration between BACP, UKCP and BPC to map the core competencies for clinical work. She is on the Reading Panel of the British Journal of Psychotherapy and has a doctorate from the University of Northumbria. Her latest book: Guilt and Shame, A Clinician's Guide is out now with nscience publishing house.

Jan was awarded the BPC Lifetime Achievement Award in November 2023 in recognition of her great contributions to the profession and the BPC.

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cpd@nscience.world UK/Europe: +44(0)2070961722