Panel: Warm Ashes – Smoldering or Igniting?

The panel, Warm Ashes – Smoldering or Igniting? is seeking to explore the long-term effects of massive trauma experienced by several analysts and the implications for their own recovery and subsequent analytic work with their patients. Motivated by Santayana’s (1906) statement, “Those who cannot remember the past are condemned to repeat it,” the panel not only asks how, when, and what we need to remember in order to avoid a compulsive repetition of silence, shame, rage and suffering, but also how these feelings enter the analysts’ counter-transferences in their work with patients.

The image of Warm Ashes refers to the lingering memories and unconscious conclusions associated with trauma stemming from experiences during and after WWII and in the aftermath of survival. Creating access to such memories, even many years later, by the use of language, both verbal and non-verbal, allows for a linkage between repressed images and disjointed affect, and hopefully will assist in further integration or reconstruction of the traumatic impact. Warm Ashes also refers to the lingering unconscious and conscious feelings of revenge, resentment, prejudice, shame and guilt, which can be ignited by triggered memory and pain.

It is concluded that the ashes must be shared, both in the analytic process with our patients through listening and witnessing as well as in the analyst’s own reflection with others as a tool for deepening understanding and reconciliation. The powerful process of sharing personal and professional experiences by various members of this panel allows for a model for recognizing and working through the Smoldering and/or Igniting forces such as the compulsive repetition of silence and suffering, unconscious aggression, prejudice, or murderous rage. As painful as this process might be for all involved, I can speak from my own experiences, it reclaims the ability to listen to oneself, fosters self-analysis, and restores listening and empathy for others. Only in this context can survivors speak and can the voices become audible and past experiences bearable. Conclusions are applicable to the treatment of the second generation of survivors. It is hoped that this process modeled by the panel may be meaningful for those who have been involved in comparable situations of trauma and challenged for integration.

The topics will most likely illicit strong emotional responses from the listeners yet they need not to be avoided. Rather, they must be voiced as part of remembering, repeating, and working through of trauma at the 2007 IPA congress in Berlin, a city
burdened by a history of human atrocity, anti-Semitism, and challenged by the need for reconciliation.

Panel chair: Anne-Marie Sandler: *Warm Ashes – Smoldering or Igniting?*

Participants:

1. Anna Ornstein, M.D. The Missing Tombstone and The Transformation of Memory.

2. Maria Ritter, PhD: Return to Dresden – A Psychoanalyst’s View on Trauma and Recovery.

3. Peter Loewenberg, PhD: Clinical and Historical Perspectives on the Intergenerational Transmission of Trauma.

Format: Introductory remarks by panel chair  
Three panel presentations, 20-25 minutes  
Audience participation

Time: 2 hours
Return to Dresden
A Psychoanalyst’s View on Trauma and Recovery
(IPA Congress Berlin, July 2007)\(^1\)

Abstract
Maria Ritter, Ph.D.

Santayana’s statement (1906), “Those who cannot remember the past are condemned to repeat it,” holds especially true when the trauma involves overwhelming childhood experiences of survival during WWII and its aftermath in Germany and everywhere directly effected by this war. It is one of the most horrid collapses of decency and civility in the history of human civilization.

This paper attempts to put words to a personal story unearthed in my personal, analytic work. While my book, Return to Dresden (2004), gives a reflective, subjective, and historical account of my family’s history during and after WWII in Germany, including years of refugee life and the survival of the fire bombing of Dresden, the paper presents an effort to reflect on and understand the verbal as well as the non-verbal memories, affects and associations within the psychoanalytic framework – in particular as they relate to trauma, analytic process, complicated mourning, adaptive defenses, and lack of psychic integration. In order to illustrate these connections, the actual text is quoted.

One particular form of early repression associated with massive trauma, the silencing of the child voice, emerges as a profound, life-long defensive response in the service of maintaining the fragile organization of early ego development. The process of silencing serves both, the managing of experienced terror as well as the organizing of intra-psychic conflicts around shame, guilt, aggression and masochism. Within the therapeutic experience of being listened to, the ability to verbalize memories and reconnect repressed and distorted affect is restored. This process ultimately reclaims the ability to listen to oneself, fosters self-analysis, and empathy.

I will be discussing the concepts of trauma and reconstruction, ranging from Freud’s etiology of neurosis and affect trauma theory to a more contemporary debate over the usefulness of trauma work at all (Blum, Fonagy), including the popularization of victimhood as a contemporary cultural defensive phenomenon (Reisner, Laub and Lee). Within this discussion, the underlying feelings of shame and guilt emerge as significant counter-transference reactions when the heaviness of anti-Semitism and the generational guilt of a “child of the perpetrator nation” enter the therapeutic relationship. Clinical examples of working with a Holocaust survivor and a woman of German/Jewish descent will follow.

Freud’s comments to Einstein (1932) on feelings of powerlessness in the face of humans waging wars include the hopeful yet desperate appeal to counteract and balance the destructive instinct by creating affectional ties and promote empathic identification with others. Surviving trauma means defying death and re-claiming the broken pieces of life with others.

\(^1\) An earlier version of this paper was presented at a Scientific Meeting at the San Diego Psychoanalytic Society and Institute on March 26, 2004, with discussants, Drs. Haig Koshkarian and Robert Nemiroff. The following persons contributed ideas and helpful suggestions: Marky Reynolds, Dr. Michele Stewart, Dr. Winfried Ritter, Dr. Gay Parnell, and Dr. Robert Tyson.
I. The Ever-Presence and Ever-Reminder of Trauma

The inscription under the statue of an emaciated inmate at the Dachau Concentration Camp reads: **Den Toten zur Ehr, Den Lebenden zur Mahnung.** (In Honor of the Dead, a Reminder/warning to the Living). It mandates us to examine and weep over the Warm Ashes of loss and evil. The millions of dead are reminding us to mourn with each other and live on by listening and talking.

I am deeply grateful to my colleagues for this experience of re-membering and reminding. I am fully aware of the fact that some among us here today cannot talk, or will have a difficult time listening to this topic of anguish and horror. I have a difficult time speaking.

The statement of Santayana (1906), “Those who cannot remember the past are condemned to repeat it,” holds especially true when the trauma involves overwhelming experiences during WWII and its aftermath in Germany and everywhere directly affected by this war. It is one of the most horrid collapses of decency and civility in the history of human civilization. Sixty some years after the fall of the Third Reich and the end of Nazi massacres, we meet as psychoanalysts in this city, all of us ‘in exile’ after traumatic experiences in Nazi Germany. We are here to share, to name, and to listen to the impact of such a horrific past on our lives and on our work with patients. It is my hope to create an opportunity for dialogue and reconciliation, and to model courage by listening and tolerating each other at a time, when the cycle of violence and trauma continues in many parts of the world.

A few weeks ago, while I was in session with a patient, there was a loud knock on the door. When I opened, two huge policemen in full gear waited for me. All I saw were shiny sheriff badges, polished boots, and dark uniforms blocking my way.
Instantly, I asked myself the ever-present self-accusatory question, “What have I done now?” I expected to be arrested or be served some legal papers - my paranoid response fueled by a recent subpoena for medical records.

You may well have had a similar response, but for me this scene triggered a familiar déjà vu and an old nightmare coming true.

In 1947, I lived with my family in Leipzig, in the Soviet sector of occupied Germany. As a six-year old girl I knew of soldiers and policemen coming to the neighborhood, often early in the morning, to take suspected individuals away - never to be seen again. We lived in a scary world where neighbors spied on each other, authorities only came to accuse and punish - not to protect. I often feared that my mother, too, could suddenly disappear or be caught on the black market in town where people traded goods for money. My fears had already been well incorporated, supported by cultural, religious, and familial introjects, such as fears of witches and ghosts, fire and darkness, the Butzemann (bogeyman), Knecht Rupprecht, God Almighty, the devil and other lurky creatures. These internal as well as external harsh superego directives were well programmed into the collective conscience of the Nazi culture by the time I was born.

The sight of the policemen at my door and the direct pathway to my powerless feelings of guilt were the fruits of a ‘hardwired’ past, my physiological-emotional reaction that has grown dimmer over the years, however never to be totally extinct. Such post-traumatic reactions are familiar to most trauma survivors.

Back to the policemen at my door, I finally heard one of them ask, “Did someone in this Suite call 911?” 3

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2 See Der Struwwelpeter, 1844, by Dr. Heinrich Hoffmann, (1809-1894), a psychiatrist with special interest in child psychiatry. Freud most likely was familiar with that book. I clearly remember its text and pictures.

3 911 is a national emergency call number
I stared at them and found myself apologizing for something I had not done, and then returned to my patient who had no idea how stirred up I was. My immediate panic and my guilt represented another well familiar pathway to my past of collective shame for the sins of my ‘fathers and mothers’ in Nazi Germany. Although I was a young child during the war, growing up however, I agonized over the realization that even my family members had participated in the atrocities of war, supported the Fuehrer, and that the price we all paid was having no right to speak. Our fate had been our punishment. Similar reactions of collective and survivor guilt are not property of one time or one nationality only as was demonstrated by the Korean community after the recent massacre at Virginia Tech in Blacksburg, Va., US, last April.

II. The Silencing of the Child and The Recovery of Language

Maybe the German idiom, “Es hat mir die Sprache verschlagen,” (I turned speechless) would be a better way to describe the after-effects of massive trauma, the shock response of not being able to speak in order to organize the experience. Such was the case for us Kriegskinder, us children during and after WWII in 1945. In the subsequent experience of collective guilt and national shame during the post-war awakening, we children did not ask questions.

\[4\text{ Kriegskinder in this context is defined as children born before and during WWII who have been exposed to war traumata and survived. Their experiences have left physical and emotional scars of various degrees of reactivity on their mental functioning, depending on age, and external as well as internal constellations. (M.Ritter)}\]

\[5\text{ See the Tagungsreport: Die Generation der Kriegskinder und ihre Botschaft fuer Europa sechzig Jahre nach Kriegsende, 14.04.2005 – 16.04.2005, Frankfurt, Germany. The conference was attended by 600 experts and eyewitnesses and focused among others on the intent to stop the silence of the parent generation by naming the atrocities. The dialogue was not meant to create a pattern “victims competition.” The effects of the war on children were described as the following issues: to have to grow up “early in life”, high self expectation to function independently, guilt feelings and inability to ask parents what happened, a disturbed ‘urtrust’, and a fragile identity. Such issues have been transferred to the next generation of survivors.}\]
A recent article in The San Diego Union-Tribune (Sunday, May 20, 2007) welcomed the German maestro Christoph Eschenbach for a concert with the Philadelphia Orchestra. It included the following comments about his history:

“He was born in Breslau, Germany (now Wroclaw, Poland) during WWII. His mother died in childbirth; his father, a musicologist and anti-Nazi, was forced into the German army and perished on the Russian front. His grandmother and great-grandmother died of disease while trying to get young Christoph to safety. When the war ended, the then 5-year old orphan was so traumatized that he was unable to speak for almost a year. When he began piano lessons, music became his salvation.”

These experiences have life altering consequences of various degrees of intensity in the development of affect tolerance, or to say it more distinctly, challenge many of us to live and work with post-traumatic stress disorder. It is a dilemma shared by many of our patients and our colleagues. However, gaining awareness and finding verbal expression of the silenced child can lead the way to a better understanding of defensive responses such as the need to maintain and idealize suffering in the face of aggression, guilt, and shame. In short, trauma must be retold in words. Here are my own words:

“We certainly received what we deserved,” my grandfather said after the war, and I believed him. The look on his face as he stared out the window spoke of bitterness and solemn resignation in the face of God’s punishment and pity for us all.…. For many years I thought my story was not of any importance in light of the suffering of the millions of victims. Then one day, it became clear to me that it is not important to compete for victimhood with those who have lived through their trauma but rather to celebrate the life that is left, one person’s story of survival at a time – one person at a time, one tear at a time.” (p. XV and 104)

It was in third grade when I first saw a flickering black and white film of the liberation of Auschwitz as part of a school-required de-Nazification program. I had no idea what I was seeing, but I remember people with emaciated faces, hollow eyes wearing striped outfits and staring at me from behind barbed wire. I was so terrified I wanted to close my eyes. The teacher did not
comment on what we were seeing, and I did not ask my mother either. What I had seen was too horrible to ask anyone about, but I knew my own people had committed these crimes and this showing was part of a punishment. Only later, as an adult, I visited the concentration camp in Dachau and began to grasp the enormity of these atrocities and the evil ideology behind such actions. That day, I lost all faith.

Silencing the child serves both a functional repression of frightening visual and auditory impressions or recollections as well as sets the stage for conflicts around neurotically organized aggression and suffering of inhibitions. Trauma influences the process of ego development compounded by affect regulation and tolerance problems.

To this day, memoirs of Holocaust survivors and other war survivors, both in the US and in Germany, are being published. They keep finding a voice - even after 60 years. The reasons for those delays are manifold. I am convinced that among the German war survivors, a generation of parents and grandparents had to die first before their admonitions could be disobeyed and the silence lifted. To ask them, would have meant to poke in their warm ashes of destruction, and possibly ignite their fire of hate and pain all over again. And foremost, time is running out to tell the story.

Not too long ago, I had my own warm ashes poked when I applied for psychoanalytic training. One of the interviewing analysts asked me, “How have these experiences of your childhood affected you as a therapist?” Stirred by his question, I thought back to my hesitation and shame in the past when working with Jewish patients and my concern for their transference and my countertransference. Do they see me as another Gestapo woman, or a benign old lady with a German accent, sounding not so different from some of their older family members, or just as a true ‘Freudian’ - given my
accent? Sometimes Jewish patients shared their reactions, at other times, they walked out
of my office after they identified my German history.

Some years ago, an elderly man, a concentration camp survivor, sat down in my office
referred by the clinic’s psychiatrist who thought we would be a “good match.” He introduced
himself by handing me his official concentration camp documents and was hoping that I could
read and translate them for him. Looking at them made my heart race and my voice became
shaky as I read to him. Here we were, a Jewish “Häftling” (inmate) and a child of a perpetrator
in the same room. I was fully aware, even as hard as I might try, I could never fully comprehend
the enormity of his losses, the personal agony, the extinction of his family, and the homelessness
that followed his camp years. Strangely enough, he felt understood by another immigrant, so he
stated at our first meeting.

In 1945, as a 15-year-old boy separated from his parents, a German man in the
concentration camp had spared his life. My patient said, “I concluded that not all Germans were
evil. There had been at least one good German!” By telling me his story of insurmountable loss,
he had unconsciously reminded me of my own people who had committed these atrocities, even
more so when he handed me his identity papers from Buchenwald with a picture of his emaciated
face. There was the evidence of agony in front of me. I stared at the picture and shuddered. It
brought back the images I had seen in third grade on the screen. Despite the deep abyss between
us, during the next few months, he shared with me his life long history of suffering, his feelings
of terror, and his chronic physical symptoms. He lived with fears of being persecuted again even
after all these years of living in a country with human rights, safety, and religious freedom. A
neighbor was currently suing him over a property dispute and he had become despondent. When
I said to him that the fear of losing his property and home might bring back feelings of terror he
endured in Nazi Germany, he began to cry quietly. I could not hold back my tears either. He needed to tell me and I needed to bear it. So we sat quietly together and I listened to his words and his silences. There was stillness in the room.

I felt there was a fragile bridge between us, and a glimmer of reconciliation by just being together. However, deep down I feared his rage, unspoken rejection or retaliation that he could unleash on me as a representative of the German people. I was moved and surprised by my strong feelings of compassion, deep shame and guilt. For me, there was no way to hide from the facts, the memories and the feelings of sadness; I knew it would take time and tears to work through mine, too.6 I began to uncover in my own analysis at the time the underlying confusion around suffering in the service of denial of rage and my distortions of individual and collective guilt.

Many authors address the crucial importance of counter-transference in analytic work. Among them, Volker Friedrich (1999) stresses the importance of analyzing counter-transference, and all projections onto one another, in order to expand tolerance for pain and anxiety and deepen understanding of the second and third generation of descendents, both, survivors and perpetrators of the Holocaust. Friedrich comments, “To recognize the Hitler in us is difficult for the German psychoanalyst.” Is this a gruesome task to take a lifetime?7

Laub and Lee (2003) claim that trauma “unleashes the death instinct by creating a state of instinctual defusion and libidinal decathexis,” a process that leads to a failure of the empathic connection at the time of the traumatization.

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6 See also Ritter, M. Return to Dresden, The Mitzvah, p. xxiii
7 Note the recent Position Statement by the American Psychoanalytic Association condemning Torture. “As an organization of psychoanalysts who have devoted their lives to helping people undo the effects of trauma in their lives. ApsaA strongly protests all torture, including any governmentally administered and governmentally approved torture of people who are detained. Torture degrades those tortured and those torturing. The effects of that physical and moral degradation, we know, are transmitted to the families and offspring of both victims and perpetrators. (See Website, ApsaA)
Alexander and Margarete Mitcherlich (1975), describe the loss of the German nation’s super ego ideal following the fall of the Third Reich. This loss was experienced as a massive and potentially malignant, narcissistic injury.

Referring to Freud’s concepts of mourning and melancholia and the loss of the ego ideal, the authors claim that in order to avoid devaluation after WWII, the Germans collectively detached themselves from the actual crimes committed as a nation. The more contemporary voice of Daniel J. Goldhagen’s book, *Hitler’s Willing Executioners: Ordinary Germans and the Holocaust*, (1996) brings that point home.

Who was going to clean up this mess? As the next generation, we were left behind in the ruins, but alive. Confronted with nagging questions of who knew what and who did what without any clear answers, many of us slid into a national masochism and hate with either an externally forced, or more often, a self-imposed silence that carried a life sentence for atonement and willful amnesia. This way, suffering could take on a heroic and stoic expression, even justified as a noble goal in itself, with the cost, however, of a chronic depression expressed in pathos and melancholia. It would serve the elevation of a diminished self and, like in my family, provided us with a challenge to suffer ‘well’ (“in the image of Christ”), despite the disillusionment of our faith in God and the loss of trust in the guidance of the elders of our religious community.

I had not really much to do with it, or did I? It seemed that my parents had paid with losses and defeat for their participation and support of Hitler’s ideology, and I was born innocently into this god-awful mess and live with the dilemma of national defeat, collective guilt and personal shame. That I did indeed have much to do with it, I discovered painfully over my lifetime. My heritage of broken pieces included incomplete historical facts, family secrets and the loss of family members who knew the truth, contrasted by the cherished treasures of my great
culture. Mourning the de-idealization of my parents made them more human; I had no longer to defend them in their good intentions.

What happened to us children of WWII did not only include the loss of significant persons, homes or communities, but also led to the traumatic loss of the ‘good internal object’ and of a benign Superego. R. Schaeffer (1960) speaks to the importance of a loving and beloved Superego as it represents the remnants of an emotional contact to the parent or parent ideal. Maintaining such a contact allows for avoiding feelings of total abandonment and rejection. (Freud, 1939, p. 139; R Schaeffer, (1960, p.180)

I have concluded that such an absence of a protective and comforting Superego enmeshed with cultural, sadistic undertones of punishing and murdering contributed to a lack of positive self and object representations and, more so, resulted in an inability to organize, grasp and even remember the trauma.\(^8\) Expressing and feeling empathy are the result of self-reflection and an experience of compassion. The world we lived in was a broken world for all of us, for our family members, elders, and teachers long after the war was officially over. Lamenting the horrors became a spiritual and personal process. Here is an example of sacrificing empathy in the face of reality and control for dignity.

I have a very clear memory of my family sitting around the dinner table in 1947 during the *Hungersnot*\(^9\), when I asked for more bread and my 14-year old brother said to me, “If I am not hungry, then you are not hungry either.” Compassion came into our life when the American Care packages arrived with real food, toys and written notes of kindness.

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\(^8\) “One may go so far as to believe that the opacity of the trauma…that is to say, in my terms, its resistance to signification ---is then specifically held responsible for the limits of remembering.”

Jacques Lacan

\(^9\) ‘Hungersnot’ means famine.
This loss of mutuality and loss of existential safety holds also true for many war survivors, especially children, who live with a sense of passive anticipation of the next catastrophe. Laub and Auerhahn, (1998) speak of “living on borrowed time in a state of extended execution.” (p. 379)

A fear of “extended execution” (Laub and Auerhahn, 1998) began to haunt me when the Allied Forces came to bomb and kill us in Dresden in 1945 in order to help and liberate us from the evils of Hitler’s totalitarian regime. Even after the war was over, I remember sitting outside the house in Leipzig and waited for the Atom bomb to hit us next. In comparison to those fears, waiting for the second coming of Christ, to be announced by trumpet fanfares in the sky, (as I was told in Sunday school) was actually a relieving thought. I asked myself, “Were these the most severe punishments for us, or acts of empathy?”

Aggression was justified as a necessary evil and reality was experienced out of control. I have come to the following conclusions:

I propose that for the generation of WWII survivors, especially Kriegskinder, the task is to understand one’s own aggression and the distortions and splitting off from aggressive impulses that disorganized all ego functions. The intensity of evil witnessed in the outside world added to the distortion of angry impulses in the inside world by either omnipotence or denial. The “Nazi introjects,” Volker Friedrich (1999) talks about, represent the unconscious attitudes as well as the silent shame and guilt associated with the cultural introjects of parents. Repressed rage turns into self-hate and masochism.

I also propose that we Kriegskinder need to expand our tolerance and empathy for the pain of others, such as Holocaust survivors and terror victims in today’s world. We need to manage our own anxiety and post-traumatic responses that will surely be revived when listening
to the other. The responses of shame and guilt are blinders, which keep us from noticing and seeing. However, without the remnants and presence of a loving and supportive Superego, it is hard to see and face human atrocities. The gift of compassion and acceptance, not necessarily forgiveness, offers a bridge for restoring self-love.

Therefore, the analysis of our own counter-transference becomes crucial in the training of all analysts with a personal trauma history when working with trauma victims. It is in the interfacing of common traumatization where identification and objectivity become porous and neutrality is a painful challenge, such as when working with a patient’s negative transference and rage, or when listening to trauma recollection. Trauma reconstruction is one way to organize the threads of memories into a manageable ego organization.

III. The Voice of Trauma

(Trauma recovery is a personal as well as a universal process and I refer you to the plentiful literature for further consideration. Mine included revisiting the actual locations in Germany and Poland, re-telling my story in words and reflections.

To write about trauma is very much like the analytic process itself, where words and associations flow, interwoven with elements of story telling, emerging memories and feelings, unconscious conflicts, poetic dreams, and puzzling symbols. Affect and defensive shifts provide meaning while fostering a re-creation of a conscious organization for past and present experiences. It is, however, the unique interpersonal experience of speaking, listening, and interpreting the analysis of process that allows the content to matter. The listening by the analyst witnesses a reality that over time has became etched, frozen, or distorted and submerged, but now has a chance to change.)
Rather than talk about trauma recovery, I want to share two passages to demonstrate how trauma speaks. First you hear the adult voice of my mother in a letter she wrote on February 23, 1945, ten days after we survived the firebombing of Dresden, in contrast to my own voice about the same event trying to gather fragments of memory and cropped emotions some fifty years later. My mother’s recollection of her traumatic experiences is marked by a telegram-style of reporting, an effort to organize what had just happened to all of us. It is the voice of numbness and shock emptied of all affect.

My own remembering child voice is much more visceral and fragmented, close to a primary process. I spoke and later wrote this text in the present tense, in English rather than in German. At times, I inserted familiar and symbolic word remnants. I even found myself slipping into poetic images as if to grasp on to the art form of words, borrowed from verse and music, something my adult voice could connect to and contribute. I understand this flow as a regressed memory recollection, attaching the once choked emotions to language in the analytic work. Both voices are fragmented and show a significant absence of affect at the moment of recollection. Since my mother tongue is German, you will hear the affect more so in my voice and in the way I am reading the text. My own recollection was spoken in English although at times, German words just came into the associations.

The Dresden night, February 13, 1945, a portion of my mother’s translated letter:

“…Then a new alarm. Hurry downstairs! We thought the world was coming to an end. The first raid was nothing compared to this one. The house rocked forth and back and caught fire. There wasn’t a house that was not in flames ----up and down the street….smoke, smoke. In a hallway, our first protection. But that house was also burning, we all huddled together. Oma and Liddy tried one more time to go outside but quickly returned…. Oma and Liddy lay down, totally exhausted. Liddy said, “We are all going to perish here.” The fire came down the staircase, everything was in flames, the house door, everything. Oma gracefully suffered a heart attack, she looked so blue. Liddy suffocated, but I could not help. Everybody suffocated or burned. I, myself, was only kept awake by the children saying,” Mutti, are you still alive?” With my last strength, early in the morning, I tried to rip the burning house door open. I succeeded. The
children out---Ruth out. Maria was fully ablaze, extinguished her with my coat----get out. Everyone else was dead.” (Ritter, p.84)\textsuperscript{10}

My own voice of the Dresden night of the same event:

(Excerpts) “I run toward the open door, my mother…I step---phosphor ignites me. “I am burning!” …Socks and stockings catch fire, fast around me, orange licks, cry…I burn like a torch…Mother rushes toward me, takes off her coat and wraps it tightly around me…flames out…hot…not that bad. Outside on the street, standing together. An old man walks out, too…don’t know who he is. Grandmother and Aunt Liddy are not with us…Daylight is breaking; we are walking…along streets. Stepping over debris, bodies there…smoke and ashes, horse dead…don’t see. Orange, no more firestorm. Hot asphalt, shoes get stuck, left there. We all walk into the park…trees are burning, charcoaled stumps……………..It is dark for days…. They say my wounds are finally getting better when I ask for some \textit{Wurst}…They share and laugh about it… “You were very sick during those days.”(p. 82, 83)

So, my mother saved my life, and she did so later again in the refugee camp and when she led us out of the Soviet Zone. In both of our histories, Anna and I relied on the presence of our mothers to maintain an emotional tie as fragile and as comforting it was. Reconstruction does not only imply searching and discovering facts and past events, but requires a subjective assessment of one’s own associations, memories, emotions and conflicts in the presence of the other. What cannot be put into words will be re-enacted in the transference and felt in the countertransference, but can be safely observed and tolerated together in the analytic experience. This process allows for re-organizing a chaotic, injured mind in the context of an important relationship and hopefully restore ‘good object representations.’ Developmentally, in retrospect, that period of trauma compressed my experience of very early mother idealization into a

conflicted combination of gratitude for saving my life, rage at the pain and deprivation for which I held her responsible via idealization, and a prematurely realistic feeling of reassurance that she could always be counted on. However, this took place constrained by silence about why all this happened, about who was responsible, and what the future held – with the rare exception about my grandfather’s comment that we all “deserved” this. The lessons of history mandate us analysts with a trauma history to share the warm ashes with one another. Sharing in the presence of empathy is the first move toward reconciliation.

IV. Clinical Case: Breaking The Silence

Time permitting or for use in the discussion.

Summary:

A clinical case illustrates the dilemma of reconstruction and re-organization of a once fragmented ego with lack of emotional connectedness in the treatment of a woman in her forties. Her German mother’s withholding of her own memories and emotions did not allow the daughter to build a secure and rich inner world. Sparing her the stories of war and survival impoverished her. My patient’s need to know the story of her family, her Jewish-American father’s background, the struggle for survival of her mother in Berlin in 1945, and finding her mother’s half sister became the groundwork for knowing herself. Her deep wish for having known her Berlin grandmother ‘Omi’ better, a women she could identify with, adventurous and spirited, affirmed her wish for assertion and separation. Her internal discoveries led to more complete self and other representations. An empathic connection was restored not only with her mother but also through the transference process with me. Uncovering her history served my

understanding of my history. My fears of losing her, just like her mother feared the daughter’s abandonment served an important function to clarify individuation without abandonment.

V. Closing Remarks (bolded text only, time permitting)

Freud’s comments (1932) to Einstein on the feelings of powerlessness in the face of humans waging wars include the hopeful yet desperate appeal to counteract and balance the destructive instinct by creating affectional ties and promote identification with others. Surviving trauma means defying death and re-claiming the broken pieces of life with others. Reconstruction defies destruction. The analysis is a joint act of defiance toward the external as well as the internal destructive impulses in the service of understanding and integrating them, with the hope of re-establishing affectional ties to events and significant objects. Healthy identifications stem the downward pull.

Understanding and managing aggression has been one of the most difficult tasks in my personal and professional journey and I know, in the recovery of other survivors. The dilemma of seeing anger manifested in catastrophic violence while praying “deliver us from evil” has made it difficult for me, and I assume for anyone else with a history of trauma, to humanize and organize the igniting elements of aggressive impulses.

The proverbial statement, “Reden ist Silber, Schweigen ist Gold,” (talking is silver, silence is gold) might be sound advice for the fledgling analyst. For the analysand, however, it is both in the silver (the talking), and in the gold (the silence), that the analytic process begins to shine. This process becomes interpretable by the witnessing of the analyst; your listening to me today is part of that experience. The re-membering process allows for integration and, according to Santayana, offers a necessary alternative to the proverbial ‘condemnation to repeat.’ Our hope
as psychoanalysts comes with a slight rewriting of Santayana’s statement: “Those who cannot remember the past are condemned to repeat in analysis.”

Some years ago, my oldest brother gave me a small brooch with the picture of my mother on it as a 1-year old girl. Her beautiful eyes speak of wonderment, innocence, and hope. She was born here in Berlin, in 1903. The brooch somehow made it through years of turmoil: flight, fire and ashes, refugee life, famine, death, music and relief. It is a remnant of her presence today, a reminder of the innocence of life and the resilience of the human spirit.

References


Freud, S. (1920). Beyond the Pleasure Principle, S.E., 18: 7-64.


