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## EARLY TRAUMAS - A DIALECTICAL APPROACH

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by

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The recent issue of **Self and Society** on depression carried a number of statements about early trauma as a cause of depression, and it seems worth while to say a bit more about this.

In a recent issue of *Changes* (Vol 5 No.1) Zaida Hall raises the question of what she calls 'soul murder'. She makes it clear that the early regime of children may be so oppressive and so hard to escape that the person can only be regarded as a victim. And of course this has a great deal to do with the question of whether early traumas are best regarded as real or as fantasies. More recently again, Helen Sheldon (Vol 5 No.2) raises the issue, and again comes to the conclusion that the main problem is the way in which therapists can ignore the truth of sexual abuse, and push the whole question back into the mind of the victim.

Jane Malcolm (1986) has shown how important this controversy has become within psychoanalysis, According to her account, it is rather like a battle in which one side says that early trauma explains everything (what is outside the person causes the neurosis), and the other side says that it is

the responsibility of the patient which explains everything (what is inside the person causes the neurosis). Perhaps it would make more sense to take up a dialectical approach, where we see that each of these positions is a moment in a process, such that each of them is inadequate without the other.

The example which comes to mind is the case of Sybil (Schreiber 1975) which was made into a vivid film shown more than once on television. Here is a case in which both moments in the dialectic come out with great clarity. The child was innocent, abused and maltreated, both sexually and otherwise, by a psychotic mother, supported by a passive father. The defence she chose was splitting, in the form of dissociated personality. Over a period of time she developed and showed sixteen distinct personalities. So this was her form of defence, in response to a very real attack. The very fact that we call these things defences leaves the way open to the consideration that the attack might come from inside or from outside.

## ALICE MILLER

Of course this is very much Alice Miller territory. It was Alice Miller (1985) who raised so acutely the need to deal with the suffering of the hurt child, and not to dismiss it as fantasy. She puts in a moving way the need to pay attention to the poisonous pedagogy of the majority of parents. Most parents, she says, deal with children in a way which suits them but offends against the integrity of the child, and this produces ill effects in the unfortunate child. The child is then prevented from complaining, because the parents have to be right - that is the system. She is, as it were, on the side of the injured child. And this has made a big impact on the psychoanalytic world, because it seems to argue counter to the Freudian theory of repression - what Miller calls the drive theory. Shengold (1975) makes some very similar points, as Hall says in the article referred to above, but I do not think he makes the point which Alice Miller does: she argues that a great deal of what psychoanalysts do is another form of the same poisonous pedagogy that the patient suffered in the first place. Analysts, too, prevent the child from complaining, by turning it all back on the patient, and having to be right.

### THE SECRET PSYCHOTIC

The most recent and spirited expression of this sort of view is to be found in the first issue of the *Journal of the Institute of Self-Analysis*. Here John Southgate and Liz Whiting (1987) have brought together a number of

papers all centred in this area. One discusses the process of Freud's self-analysis, and brings out the way in which he hides from himself all those things which might threaten his opinion of his own father.

One of the most interesting papers reviews a book by Robert Fliess. Robert Fliess was the son of Wilhelm Fliess, Freud's correspondent and friend. At the very time when Freud was conducting his self-analysis and writing about the theory of sexual abuse (which he called by the rather gentler name of seduction) in childhood, Fliess was sexually abusing his own son. As a result of discovering this in his own analysis (Robert Fliess became a psychoanalyst himself), he put forward the following three contentions:

- 1 The neurotic seriously in need of analysis is apt to have at least one psychotic parent. (He explains that this can be an 'ambulatory' or 'secret' or 'unknown' psychosis, which is undiagnosed and not spoken about, and which often never comes to light, because it is in no one's interest to disclose it)
- 2 He has been victimized by the bizarre sexuality of this parent.
- 3 He has suffered the (largely diffused) aggression of which this parent has made him the object.

How can these parents (it can be either the mother or the father who is involved here) behave in this atrocious way? Fliess says

that they see nothing wrong in what they are doing, because they do not see the child as a person. So they do not feel guilt at what they are doing. Instead, says Fliess, it is as though the child takes over all of the feelings of guilt over incest that the parent should have had, but being psychotic, did not. So the unfortunate victim has the pain of the assault, and all of the guilt about it, both at the same time.

Fliess makes the most interesting point that when faced with this sort of material from a patient, many therapists run out of empathy - they cannot feel themselves into the situation, because it is too bizarre; it is beyond their experience. And he says at this point that the therapist just has to listen, and to trust the patient and admit that empathy does not get you everywhere in this business.

Another difficulty for the therapist is that transference can get very heavy indeed if the therapist is seen as a repetition of the parental abuser. And the therapist is quite likely to be seen in this way if he or she treats the client in a parental manner, giving advice, having to be right, confronting the client in an aggressive manner, and so on. I speak from personal knowledge here, because I have done this myself as a therapist on more than one occasion. One patient of Fliess said: 'You do not listen to me; you interrupt me; you do not let me talk; you even speak like my father; you even use the same words.'

This is a very powerful paper, giving details of material which is not easily come across - the book is not published or distributed in this country, and it had to be obtained by order from the United States.

### LEVELS OF TRAUMA

There are several other papers in this Journal, all worth reading. They all seem to add up to the same thing - namely, that early trauma, particularly in the way of sexual abuse, is usually important for any long-standing and important neurosis; and that the therapist has somehow to get on the side of the innocent and abused victim and speak from there.

Now Janov has always said much the same thing. In his 1970 book he was already making the point that the traumatized child not only has the pain, as Fliess says, not only has the guilt, as Fliess says, but also has the pain of not being believed or listened to. In his 1977 book he is very clear that trauma really is important, and he too is on the side of the child. In general, most of the humanistic psychotherapists go with the idea that infantile trauma is real and has to be worked with as such.

Frank Lake (1980) argued that there are four levels of trauma, and what happens inside the individual depends very much on exactly what level of trauma is involved. He made no distinction between sexual and any other type of trauma. The first level is pain-free, and is the ideal state. The second level has to do with coping,

and is where the stimulation is bearable and even perhaps strengthening, because it evokes effective and mostly non-neurotic defences. The third level involves opposition to the pain, but it is so strong that it cannot be coped with, and repression takes place. If the trauma happens in infancy or earlier, the defence will be splitting rather than repression. The fourth level Lake calls transmarginal stress, and it is so powerful or so early, or both, that the person cuts off completely and may even turn against the self, wanting to die. Some recent work by Southgate and others suggests that many child accidents are in fact unconscious attempts at suicide, based on this fourth level of trauma. And if the trauma was actually a case of sexual or other abuse, and if the abuse is repeated or recreated somehow in later life, a real adult suicide may result, again possibly disguised as an accident. This has been coming up recently in a number of cases.

Grof (1985) is very clear that early traumas can be very real and very important, and relates it particularly to the process of birth. He distinguishes four stages of birth, and says that adult neurosis is very frequently based upon traumas suffered at one or other of these stages. Lake (1980) in one of his charts, brings out the way in which his four levels of trauma can be related to Grof's four stages of birth to make a matrix of sixteen cells which account between them for many of the origins of many of the neuroses. And again, of course, many of the drastic things which happen in the lives of adults

may result from repetitions of the original trauma in some direct or disguised form.

### INNOCENCE

But perhaps the key point where the dialectic becomes so important is on the question of innocence. There is a statement which comes at the very head of a list which Alice Miller has produced to summarise her contentions: 'The child is always innocent.'

Let me say at once that I think this statement is for the most part true. The dictionary says that the word means 'Doing no harm. producing no ill effect or result: not injurious; harmless, innocuous.' It would depend exactly on where we drew the line for the word 'child' here, because there have been murderers as young as six years old, but over a very wide range of the youngest children we would certainly have to agree that this was a true statement.

But what is obvious to me is that this language is one-sided and undialectical. I do not agree that this is the language of psychotherapy. I cannot believe that therapy is about deciding on guilt and innocence, still less deciding in advance about guilt or innocence. Certainly children can have harmful wishes and fantasies at very early ages - everyone who has worked with early life has agreed on that, because it emerges so unmistakably. All the work of Klein, Fairbairn, Guntrip, Winnicott, Lake, Grof, Laing, Swartley, VERNY, Ridgeway, Farrant and others working in this area implies that children are

certainly not innocent in their hearts or minds, though they will almost certainly be so in their actions.

The dialectic goes like this: if someone is injured, that is a one-sided action, and it is only the one doing the injuring who could legitimately feel guilty; but if the injured party tries to get revenge, that is also a one-sided action in response. If the revenge is successful, we may feel either happy because poetic (or some other) justice has been done, or sad because the evil has been perpetuated: in either case the contradiction is not resolved. But we have to go to a further stage: it is only when reparation and restitution is made that the action is completed and the pattern made up. There must be forgiveness at the end, even if it is not appropriate at the beginning.

But to say that 'The child is always innocent' would presumably be to deny that. The implication is certainly that the parents are exclusively the guilty ones and should therefore presumably be punished. At least I do not really understand it if that is not what it means.

### RESPONSIBILITY

Mahrer in his research has found, as most of us have, that even where the client reports the most violent abuse, they also very often report a sort of excitement about it too, which may sometimes make them feel guilty or implicated afterwards. But the therapist who took the position - 'The child is always innocent' - would presum-

ably have to tell them not to be so silly, not to blame themselves, not to have any truck with guilt. But this is not to work through the guilt nor take it seriously - is it not fairly close to some kind of pedagogy?

I don't believe therapy is ever about telling people what happened or what to think or feel about it. If it is anything defensible, it is a process of discovery and self-discovery, where whatever comes up has to be taken seriously and worked through properly. The moment the therapist tries to know better than the client, we have an abandonment of the most central feature of psychotherapy - the way in which it takes the client seriously, even when the client is clearly wrong, mistaken, in error or otherwise off the wall.

Now I happen to think that it is OK to teach things to the client in the process of psychotherapy. We had a very interesting third-year seminar on this at the IPSS, which went so well that we presented it at a plenary meeting of the whole Institute. There are all sorts of occasions when the client just has not thought of some possibility, or does not have a certain position on the mental map, and it is then OK in my book to tell them about such possibilities or positions, so that they can take them into account instead of leaving them out.

What is not OK is to tell the client that they are not feeling what they are feeling, that they are not having the experience that they are having, that they are innocent when they feel guilty.

But worst of all is to lay all the emphasis on what was done to the child and none on what the child's response was then and can be now. Because to do this is to take responsibility and power away from the client who is being worked with in the present. In Charles Hampden-Turner's moving book **Sane Asylum** he tells of the work of the Delancey Street Foundation, which is a therapeutic community of ex-criminals. One of the main statements which he quotes from John Maher, who started the venture, is - 'The system made you what you are, but if you want to change the system, you have to accept the responsibility for what you let the system do to you.' Those who did accept this, made it; those who didn't, didn't. To take that responsibility away from people is to rob them of the one thing they need in order to take their own power. It is the essence of being human that we have choice, that we are not pawns or puppets, that we respond to events rather than reacting to them - and the whole weight of prenatal research (Verny 1982, Ridgway 1987) goes now to show that we do not start being human at seven years old, or at four years old, or at two years old, or at birth - we are human right from the start.

## CONCLUSIONS

As always, we have to make the point that when we use the word trauma we do not necessarily mean a single event. It may be a situation of some duration which is apparently coped with and even accepted by the victim. Nor is it the case that early traumas cannot

be overcome. Even the earliest traumas - and people like Lake and Emerson have traced some of them back to the first three months in the womb - can be reached and dealt with by suitable psychotherapy. Grof (1985) makes the point that going into such deep matters may in many cases bring us closer to the spiritual. I have gone into this in much more detail in a book (Rowan & Dryden 1988) where there is probably not one contributor who would practice poisonous pedagogy in the therapy session - that is, taking up a parental position, siding with the parents, or having to be right.

But it also needs to be said that therapy does not stop with anger against the parents. Sybil (Schreiber 1975) eventually got down to the anger, but then when her symptoms had disappeared she was able to forgive her mother, and forgive herself, and see her mother as a psychotic sufferer, and feel sorry for her. If you can let go of your symptoms, you can let go of your hate too. You can take responsibility for your part in the events, without it turning into self-blame. You can complete the dialectic and come full circle.

This does not mean that everyone has won, and everyone must have prizes. It means that we have to beware of overlooking poisonous pedagogy, whether perpetrated by the parent or by the therapist. It means we have to enter into the client's world, and see it through the client's eyes, before doing anything else, and maybe instead of doing anything else.

Someone else who has taken up this position, but for different reasons, is Alvin Mahrer. In his latest book (Mahrer 1986) he shows how early traumas can be very complex, with more than one thing going on at the same time, and how the therapist may need to get right inside the experience to make any really adequate sense of it.

In fact, I think he is the only person who actually tells us how to get on the side of the child, how to get inside the child's world and see things from there. He gives full instructions as to how to line up with the client instead of trying to have a relationship over against the client.

Of course, some therapies do not give much importance to early trauma, and for them this whole controversy must be rather lacking in interest. To them we can only say that an awareness of these matters is very valuable, simply because many clients will bring it up in some form or another, whether they are supposed to or not. It is even true, apparently, that a student of Zen meditation came up to the *roshi* and said - 'I expected to get enlightenment, but all I am getting is all this childhood stuff.'

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## References

- Fliess R (1973) **Symbol, Dream and Psychosis** New York, International Universities Press.
- Grof S (1985) **Beyond the Brain** New York SUNY
- Hampden-Turner C (1976) **Sane Asylum** New York, William Morrow & Company
- Janov A (1970) **The Primal Scream** London, Abacus.
- Janov A (1977) **The Feeling Child** London, Abacus.
- Lake F (1980) **Studies in Constricted Confusion** Oxford CTA
- Malcolm J (1986) **In the Freud Machine** London, Fontana
- Mahrer A R (1986) **Therapeutic Experiencing** New York W W Norton
- Masson J M (1985) **The Assault on Truth** Harmondsworth, Penguin
- Miller A (1983) **The Drama of the Gifted Child** London, Faber & Faber
- Miller A (1983a) **For Your Own Good** London, Faber & Faber
- Miller A (1985) **Thou Shalt not be Aware** London, Pluto Press
- Ridgway R (1987) **The Unborn Child** Aldershot, Wildwood House
- Rowan J & Dryden W (1988) **Innovative Therapy in Britain** Milton Keynes, Open University Press
- Schreiber F R (1975) **Sybil** Harmondsworth, Penguin
- Shengold L (1975) **An Attempt at Soul Murder: Rudyard Kipling's Early Life and Work** Psychoanalytic Study of the Child, XXX
- Southgate J and Whiting L (1987) **Journal of the Institute for Self-Analysis** Vol 1 No. 1
- Verny T (1982) **The Secret Life of the Unborn Child** London, Sphere.
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