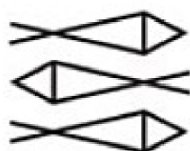


THOU SHALT NOT BE AWARE

SOCIETY'S BETRAYAL OF THE CHILD

ALICE MILLER



THOU SHALT
NOT BE AWARE

Society's Betrayal of the Child

ALICE MILLER

*Translated from the German
by Hildegard and Hunter Hannum*

*With a Preface by Lloyd deMause
and a new Introduction by the Author*

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Preface

BEFORE there was Alice Miller, there were few voices telling the truth about our betrayal of our children.

As she points out in this book, Freud and most psychoanalysts were little different from others in blaming children for their own abuse. Freud once called a girl patient “hysterical” who was molested by her father (the father was a friend of Freud’s) because she complained about her molestation. It was children’s sensuousness that was to blame for sexual assaults by adults, he declared, because “the sexual constitution which is peculiar to children is precisely calculated to provoke sexual experiences of a particular kind [seductions].” Karl Abraham, Freud’s associate, also believed the molestation of his child patients was “desired by the child unconsciously.” Most psychoanalysts since then have continued to label patient reports of childhood sexual abuse merely the victim’s “wishes.” As one psychiatrist wrote, “I was taught in my ... early years in psychiatry, as most of us were, to look very skeptically upon the incestuous sexual material described by my patients ... Any inclination on my part, or that of my colleagues in the training situation, to look upon these productions of the patient as having some reality basis was scoffed at and was seen as evidence of our naiveté.”

Nor has opinion really changed much in either academia or psychiatry. Scholarly academic journals have recently praised pedophilia as “nurturant” and advocated abolishing laws against sex with children. The American Psychiatric Association’s current diagnostic manual claims pedophilia is only a psychiatric disorder if it bothers the pedophile; otherwise, having sex with children is healthy. In fact, when I gave a speech at a recent A.P.A. convention showing that the majority of children in history were sexually abused, the audience reacted by wondering if incest isn’t after all not

really pathological, since so many have done it. Alice's insight into the unconscious causes of this almost universal denial of the harm and its costs to society is, unfortunately, still a lonely one today.

Most adults in the past believed that children didn't remember anything of what happened to them up until the age of five, so sexual exploitation, beatings, and other severe abuse had no real effect on them. One particularly widespread belief was that having intercourse with a child would cure one of venereal disease. Up until the early twentieth century, in fact, men who were caught by London police raping little girls were often let go because they thought they were curing themselves of syphilis. Doctors only reinforced the social pact of "thou shalt not be aware." When they treated men for venereal disease, they often found that their children had it too, on their mouths or vaginas or anuses, but they didn't report this to anyone. The attitude was that raping children was an adult prerogative. As one man said coming out of a trial during which a man had been let go after raping a little girl, "What nonsense! Men should not be punished for a thing like that. It doesn't harm the child." Alice Miller demonstrates in this book that one of the far-reaching harms is the lack of awareness and the denial of crimes.

Laws in most countries even today rarely give much protection to children against assault. Incest is usually considered a minor felony, and most sexual abuse still goes unpunished, because it is undiscovered or unprosecuted or routinely plea-bargained. About half of the children raised today in industrial nations have been sexually abused, and the overwhelming majority have been regularly hit, often by dangerous instruments. The statistics proving this high incidence are buried in little-read journals, the better to keep secret the extent of "society's betrayal of the child." But the past two decades of extensive documentation by scores of childhood historians corroborate Alice's conclusions in detail.

Because of her courageous work and studies by others

like her, things do change, however slowly. I am told by the bookstore of the Freud Museum in London that the works of Alice Miller are among their best sellers. Many American psychoanalytic institutes now teach therapists to take seriously memories of sexual abuse and not just imagine that they are fantasies. *The Journal of the American Psychoanalytic Association* recently had a whole issue on the reality of sexual abuse of children, showing an awareness unthinkable fifteen years ago. Also, Alice Miller's work on the social effects of child abuse has begun to be documented. There is even a book, *The Altruistic Personality*, that shows that Nazi sympathizers had very abusive childhoods, whereas rescuers of Jews during the Holocaust had kind, caring parents who didn't discipline them in the brutal manner of most European parents of that time.

Today, the number of caring and well-informed parents is doubtless growing, although not quickly enough. Perhaps if enough people read Alice Miller, we can at long last learn to greet each new child born in the world with a simple "Hello. Welcome to the world! How can I help you grow?" so that we can finally awaken from the nightmare of childhood and put an end at long last to the slaughterbench of history.

Lloyd deMause, author of
The History of Childhood
and editor of *The Journal of Psychohistory*

Introduction

STUDY of the history of cruelty to children reveals that people only mistreat their children if they have been victims of cruelty themselves. We may think that such a situation should be easy to remedy. After all, unlike plants, we have a fully developed conscious mind. We know what we do, why we do it, and what will come of it. Or so we think.

A plant has no influence on its destiny. It grows from a seed, and in its maturity produces new seeds containing the same program as the one from which it grew. Even if the seed is that of an unpleasant and destructive weed, it has no choice but to carry on producing precisely that weed. And if it stems from a beautiful orchid, then it enjoys the undeserved good fortune of basking in its own beauty and giving unalloyed pleasure to others. Weeds provoke our hostility, they encroach on other plants and frequently choke them to death. But they have no choice. They are what they are.

Humans, we are inclined to think, ought to be able to rewrite their programs. And so they can, in theory. But in order to deploy that ability they have to be able to recognize what is destructive about them. And this recognition is something new to our generation. The fact still provokes all kinds of resistance, from lawyers, experts, embattled parents, public foundations, but in the long run there is nothing that can make it disappear from the face of the earth. For it is an insight championed by people who have not grown up in line with the old inherited program. These people have been reared in a family climate consciously chosen for them by parents refusing to conform automatically to the traditional programs.

People still railing against the truth about cruelty to children because they are afraid to face up to their own childhood can hardly be expected to change. But in the

course of time they will die out and make room for those whose awareness of what they have been through makes them want to ensure that their children will have a better life. They know that they are not plants, that they have options, that they are not forced to people the world with mentally disturbed criminals. They know that the relevant information is there for the asking. If they want to, they can find out about the positive effects of gentle childbirth and non-violent upbringing. Day by day they are informed by the media about the consequences of childhood cruelty, as manifested by acts of terrorism of all descriptions. Education by fear is still practiced in various religious schools claiming to inculcate a Christian code of morals into their charges. But this pretense has become more and more difficult to uphold. In time, changing education and birth-care methods are bound to swell the numbers of enlightened people able and willing to reveal this hypocrisy for what it is.

Do weeds sense that they are destructive parasites? I do not know. I assume that they have no awareness, that they blindly follow a survival blueprint that is entirely ruthless with respect to the lives of other beings. But what about us humans, so proud of our moral superiority, so ready to read our children improving stories from the Bible? Are we perhaps indifferent to the lives of others too? Do we behave toward our children like mindless plants, obeying preordained programs, doing exactly the same to them as was done to us all those years ago?

To answer this question, all we need to do is to give some thought to the legitimacy of a tradition of education that operates on the principle of “beating some sense” into children. Although this precept has finally been recognized for the absurdity it is, that does not mean that it has been abandoned. Many still hanker after the feeling of power conveyed by taking it out on the children, remaining in a vegetable state of unawareness instead of developing a conscious realization of the consequences of their deeds. They use all the means at their disposal—including law courts and scientific institutions—to prove that human

memory is unreliable.

But no such proof is required. It is true that our memories are unreliable, easily manipulated from within (our “wishful thinking”) and without. But above all they serve our will for survival. Our will for survival will never push us to invent painful stories, rather the contrary: to make up nice memories in order to *obscure* the painful reality of our childhood. This is something we must never lose sight of. The commandment that says “Thou shalt not be aware of what was done to thee, nor of what thou doest to others” ensures that cruelty suffered in childhood is played down or modified by memory until it becomes unrecognizable.

In this book I have tried to show why that happens. I have also drawn on examples from writers like Kafka, Beckett, and Flaubert to show the precision with which the truth asserts itself in their works without the authors noticing it. Unfortunately, the truth comes out not only in art, in dreams, and in fairy tales, but also in political action, in crime, and—increasingly—in the activities of sects exploiting the ingenuousness and gullibility of maltreated and misguided children for their own financial ends. But this can only happen as long as we let the old traditional programs run on undisturbed. There is nothing inevitable about this. Today we have access to all the information we need in order to put an end to manipulation from outside and to stop denying our own truth at the dictates of our wishful thinking. There is no need to think that we will lose the love of our parents if we assert our allegiance to our own personal truth. The love of a child for its parents is all but indestructible. As children we cannot reconcile this love with the truth, and so we deny that this truth exists. But as adults we can learn to preserve both. In fact we have very little choice, if we want to uphold our verbal tributes to love. It is only in alliance with the truth and the refusal of hypocrisy that authentic love can survive and grow.

Psychoanalysis: Dogma vs. Experience

Will Françoise ever be told that she nearly died? Perhaps she will learn that she was rescued by her wonderful father She will not be told that he tried to kill this little girl who was not his own And so Françoise will perhaps repeat the story that something happened to her when she was little, she doesn't know what, and that since that time she has been going to the hospital on account of her hip, her leg, or her foot so that someday she will be able to walk just like everyone else In any case, she has been making progress, and she has been told that she can wear new orthopedic shoes

—Leila Sebbar, *Gewalt an kleinen Mädchen*
(*Violence against Little Girls*)

1

Two Psychoanalytic Approaches

IT is of course not classical psychoanalysis alone that suppresses the question of how parents consciously, or more often unconsciously, treat their children in the first years of life; all the disciplines I know of that deal with the human psyche share this characteristic, including those with free access to the relevant facts, i.e., psychiatry, psychology, and various schools of psychotherapy. Probably the main reason I call particular attention to the phenomenon in psychoanalysis has to do with my belief that this discipline could bring about the deepest and most authentic understanding of the subject if its theories did not automatically and unconsciously act as blinders. In order to describe the mechanisms involved, I must go into some detail.

If I as an analyst direct my interest and attention to finding out what drive desires a person who enters my office for the first time is suppressing at the moment, and if I see it as my task to make this clear to him in the course of his analysis, I will listen sympathetically when he tells me about his parents and his childhood, but I will be able to absorb only that portion of his early experiences which is made manifest in his drive conflicts. The reality of the patient's childhood, which has been inaccessible to him all these years, will be inaccessible to me as well. It remains part of the patient's "fantasy world," in which I can participate with my concepts and constructs without the traumas that really took place ever being revealed.

If from the beginning, however, I confront the person who enters my office with questions having to do with what befell him in childhood and if I consciously identify with the child

within him, then from the very first hour events of early childhood will open up before us that would never have been able to surface had I based my approach on an unconscious identification with the parents and their devious methods of upbringing instead of consciously identifying with the former child. In order to enable these events to come to light, it is not enough to ask questions about the past; besides, some questions tend to conceal more than they reveal. But if the analyst directs his attention to early childhood trauma and is no longer compelled to defend the position of the parents (his own and those of his patient), he will have no trouble discovering the repetition of an earlier situation in the patient's *present* predicament. If, for instance, the patient should describe with complete apathy a current partner relationship that strikes the analyst as extremely painful, the analyst will ask himself and the patient what painful experiences the latter must have had to undergo in early childhood, without being permitted to recognize them as such, in order to be able to speak now so impassively about his powerlessness, hopelessness, loneliness, and constant humiliation in the present-day relationship. It may also be, however, that the patient displays uncontrollable feelings directed toward other, neutral people and speaks about his parents either without any show of feeling or in an idealizing manner. If the analyst focuses upon the early trauma, he will soon ascertain, by observing how the patient mistreats himself, how the parents once behaved toward the child. In addition, the manner in which the patient treats the analyst offers clues to the way his parents treated him as a child—contemptuously, derisively, disapprovingly, seductively, or by making him feel guilty, ashamed, or frightened. All the features of a patient's early training can be detected in the very first session if the analyst is free to listen for them. If he is a prisoner of his own upbringing, however, then he will tell his supervisor or colleagues how "impossible" his patient's behavior is, how much repressed aggression is latently present, and which drive desires it emanates from; he will then seek advice

from his more experienced colleagues on how to interpret or “get at” this aggression. But should he be able to sense the suffering that the patient himself is not yet able to sense, then he will adhere strictly to his assumption that his patient’s overt attitudes are a form of communication, a code language describing events that for the time being can and must be reported in exactly this way and no other. He will also be aware that the repressed or manifest aggression is a response and reaction to traumas that at present remain obscure but will have to be confronted at the right moment.

I have outlined here two differing, indeed diametrically opposed analytical approaches. Let us assume that a patient or a training analyst in search of psychotherapy speaks with a representative of each of these approaches. Let us further assume that on the basis of the initial session a report has to be submitted, either for the clinic or for the supervisory committee. In itself this is of little importance, for such reports usually remain hidden away in a drawer. What is important is whether the people seen in these sessions are led to regard themselves as a subject or as an object. In the former case, they glimpse, sometimes for the very first time, an opportunity to encounter themselves and their life and thereby come closer to their unconscious traumas, a prospect that can fill them with fear as well as hope. In the latter case, their customary intellectual self-alienation prepares them to see themselves as the object of further pedagogical efforts in the course of which, to use the words of Freud’s patient, they can paint themselves as black as necessary but must spare other people.

These differences in a patient’s attitude toward himself strike me as having far-reaching significance, not only for the individual, but for society. The way a person perceives himself has an effect on those around him as well, particularly those dependent on him, e.g., his children or his patients. Someone who totally objectifies his inner life will also make other people into objects. It was primarily this consideration that led me to distinguish sharply between

these two approaches, although I realize that the motives underlying the “cover-up” approach (defending the parents, denying trauma) have deep, unconscious roots and are unlikely to be altered by books or arguments.

There are other reasons as well that caused me to reflect on the differing approaches of analysts: I frequently encounter the view that analytic work on the self, as I understand the process, can be performed only within the framework of lengthy classical analysis, that it cannot be accomplished by another, perhaps shorter form of psychotherapy. I, too, was convinced of this at one time but no longer am, because I can see how much time the patient may lose if he has to defend himself against his analyst’s theories, only to be forced in the end to give in and allow himself to be “socialized” or “educated.” The same is true for group therapy. If the therapist assures the members of a group of their right to express their feelings, yet at the same time is afraid of possible outbursts against their parents, he will not be able to understand the participants and may even intensify their feelings of helplessness and their aggressions. He can then either let these feelings remain in a chaotic state or resort to more or less disguised pedagogical measures by calling upon reason, morality, a willingness for reconciliation, etc. The therapist’s efforts are often directed toward reconciling patients with their parents because he has been taught—and is also convinced on a conscious level—that only forgiveness and understanding bring inner peace (which in the child’s world is actually the case!). Possibly it is the therapist’s unconscious fear of his repressed anger against his own parents that leads him to recommend reconciliation to his patients. In this way he is really rescuing (in the therapeutic process) his parents from his own anger, which he imagines to have a fatal effect, because he was never allowed to find out that feelings do not kill. If the therapist is able to relinquish entirely his unconscious identification with the parents and their methods of child-rearing and identify instead with the suffering child, serving as his advocate, in a short time his

understanding, freed of anxiety, will set in motion processes that at one time were considered miraculous, because their dynamics had not yet been conceptualized.

The difference between the two approaches can be illustrated by a thoroughly banal example of so-called acting out, something every psychoanalyst is familiar with from his practice. Let us assume that a patient in a certain stage of analysis telephones the analyst at home at all hours of the day and night. An analyst with an unconscious pedagogical bent will see in this behavior “insufficient tolerance for frustration” (the patient cannot wait until the next appointment), a distorted sense of reality (the patient doesn’t realize that the analyst, in addition to the hours spent with him, also has a life of his own), and other narcissistic “defects.” Since the analyst himself is a “well-trained” child, it will be difficult for him spontaneously to impose limits on his patients. He will search for rules and regulations permitting him to eliminate the annoyance caused by the frequent telephone calls; in other words, to “train” the patient.

If, instead, the analyst is able to see in his patient’s behavior the active reenactment of a situation passively endured in childhood, he will ask himself how the parents treated this child and whether the patient’s behavior may not be telling the story of the totally dependent child, which lies so far back in the past that the patient cannot tell about it in words but only in unconscious behavior. The analyst’s interest in the patient’s early childhood will have practical consequences: he will not attempt to “take the proper steps” nor will he be in danger of giving his patient the illusion of constant availability, something that the patient never experienced with his parents and that he submissively attempted to offer them in the deluded hope of receiving it in return. As soon as both analyst and patient are able to perceive the latter’s earlier situation, the analyst will have no need of pedagogical measures and will nonetheless—or for this very reason—be able to give the proper weight to, and protect, his private life and free time.

It is a reflection of the pedagogical approach that the concept of acting out is virtually synonymous with “bad behavior” among analysts. I prefer not to use this concept and refer instead to reenactments, to which I ascribe a central role and which for me do not signify “misbehavior.” For what is involved here is an essential, often dramatic, unconscious message about the early childhood situation.

I know of a patient, for example, who drove her first sympathetic and patient analyst and his family to distraction by calling up at night, only to find out very quickly with her second analyst that these telephone calls were unconscious reenactments of traumatic experiences from early childhood. Her father, a successful artist who often came home when she was already asleep, liked to take her out of her crib and play wonderful and exciting games with her, until he grew tired and put the little girl back to bed. The patient was unconsciously reenacting with her analyst this trauma of suddenly being awakened out of a deep sleep, of being strongly stimulated and then suddenly left all alone; only after they had both realized this was she able to experience for the first time the feelings that situation had aroused in her: indignation at having her sleep disturbed, resentment at the effort she had to make to be a good playmate so that her father wouldn't go away, and finally rage and sorrow at being abandoned. In this reenactment the analyst was assigned the role of the awakened child who wanted to behave correctly in order not to lose the attachment figure she loved and, at the same time, the role of the father, who, when he ends the telephone conversation, hurts the child's feelings by leaving her alone again. The first analyst did not understand the biographical context of this so-called acting out and thus joined in it. The second one listened to the story contained in the reenactment, and this helped him to devote his full attention as a spectator to the drama, without jumping onto the stage and joining in the act. Since he kept his gaze focused on the patient's childhood from this vantage point, he did not see only “resistance” in her transference but also a dramatic re-

creation of her father's behavior and her emotional reactions to it.

2

Analysands Describe Their Analysis

I SHALL attempt to illustrate the two different analytic approaches I have delineated with the aid of three autobiographical accounts of the analytic process: Marie Cardinal's *The Words to Say It*; Tilmann Moser's *Lehrjahre auf der Couch* (Apprenticeship on the Couch); Dörte von Drigalski's *Blumen auf Granit* (Flowers on Granite).

As far as I can tell, all the analysts portrayed in these books are sincere, dedicated people who are recognized as highly trained, valued, and respected members of the International Psychoanalytic Association. I know only two of them personally but not well enough to be able to draw any conclusions about their work. Everything I am going to say concerning their methods is based entirely on having read the three books mentioned above. Since the sole concern of all three authors is to present their subjective reality, they are being perfectly honest. In reading their books, I let myself be guided by the authors' feelings, the same way I am by patients' feelings in my analytic work.

The reports of the three analysands gave me the impression that all four analysts (Drigalski had two) devoted themselves to their patients, tried to understand them, and placed their entire professional knowledge at their patients' disposal. Why are the results so different? Can it be explained simply by calling an analysand incurable if the analysis was a four-year-long misunderstanding? Formulations such as "negative therapeutic reaction" or "resentful patients" remind me of the "wicked" (because "willful") child of "poisonous pedagogy,"¹ according to which children are always guilty if their parents don't understand

them. It may be the case that we blame patients in similar fashion and label them as difficult if we cannot understand them. Yet patients are just as little to blame for our lack of understanding as children for the blows administered by their parents. We owe this incomprehension to our professional training, which can be just as misleading as those “tried and true” principles of our upbringing we have taken over from our parents.

In my opinion, the difference between Cardinal’s successful analysis on the one hand and Moser’s and Drigalski’s tragedies on the other is that in the first case the seriously ill patient, whose life was in danger, found out in analysis what her parents had done to her and was able to relive her tragic childhood. Her description is so vivid that the empathic reader goes through the process with her. The boundless rage and deep sorrow she felt at what she had been forced to endure as a child led to relief from the dangerous and chronic uterine hemorrhaging that had previously been unsuccessfully treated by surgery. The result of her sorrow was the full blossoming of her creativity. It is obvious to the professionally trained reader that in Cardinal’s case psychoanalysis—not family therapy or transactional analysis, for instance—was used, for the connections can be traced between her tragic emotional discovery about her childhood and what happened in the transference.

The other therapists also used a psychoanalytic approach, but we can sense in them an attempt to interpret whatever the patient says and does from the perspective of the drive theory. If it is an axiom of psychoanalytic training that everything that happened to the patient in childhood was the result of his drive conflicts, then sooner or later the patient must be taught to regard himself as wicked, destructive, megalomaniac, or homosexual without understanding the reasons for his particular behavior. For those narcissistic traumas—humiliation, rejection, mistreatment—inflicted on the child and traditionally considered a normal part of child-rearing are not touched

upon and thus cannot be experienced by the patient. Yet it is only by addressing these concrete situations that we can help the patient acknowledge his feelings of rage, hatred, indignation, and eventually, grief.

There are unquestionably many analysands who “successfully” survive the pedagogical approach inherent in their therapy because they are completely unaware of it. As a result of “poisonous pedagogy” they are so accustomed to not being understood and frequently even to being blamed for their fate that they are unable to detect the same situation when it occurs in analysis and will adapt themselves to their new mentor. They will leave analysis having substituted one superego for another. It should not surprise us that Tilmann Moser and Dörte von Drigalski, both creative people, are reduced to despair as a result. In Moser’s case, it is true, the despair is still concealed behind idealization of the analyst, but his next book, *Gottesvergiftung* (God Poisoning), shows that he was not able to experience his aggression toward his parents in analysis because obviously the analyst as well as the parents had to be spared. In Drigalski’s case, her disappointment with both analyses leads to a rejection of psychoanalysis per se, which is understandable although regrettable, for the case of Cardinal for one demonstrates that psychoanalysis can contribute positively to a person’s creative growth.

In Drigalski’s report, the tragic traces of “poisonous pedagogy” are particularly striking. They can be seen not only in the approaches of the psychoanalytic training institutes, which often appear to have a veritable horror of originality, but, most tragically, in the years of wasted effort on the part of the patient and both analysts, all of whom were prevented from gaining access to the narcissistic traumas of early childhood because they were inhibited by the unspoken commandment to spare the parents and blame the child. For this reason, what the author reports about her childhood, her parents, and her brothers remains sketchy and devoid of strong feelings, as in the case of

Moser, but very unlike that of Cardinal. Now all Drigalski's outrage is directed against psychoanalysis and her second analyst, who did not understand her. Would this woman have been able to struggle against her feelings for four years and bear such torment if she had not been brought up to ignore her inner voice and keep a stiff upper lip? The adults who figured in her early childhood are spared her rage, however. This is the rule, for the more or less conscious goal of adults in rearing infants is to make sure they will never find out later in life that they were trained not to become aware of how they were manipulated. Without "poisonous pedagogy" there would be no "poisonous psychoanalysis," for patients would react negatively from the very beginning if they were misunderstood, ignored, not listened to, or belittled in order to be forced into a Procrustean bed of theories.

There is a good deal else that would not exist without "poisonous pedagogy." It would be inconceivable, for example, for politicians mouthing empty clichés to attain the highest positions of power by democratic means. But since voters, who as children would normally have been capable of seeing through these clichés with the aid of their feelings, were specifically forbidden to do so in their early years, they lose this ability as adults. The capacity to experience the strong feelings of childhood and puberty (which are so often stifled by child-rearing methods, beatings, or even drugs) could provide the individual with an important means of orientation with which he or she could easily determine whether politicians are speaking from genuine experience or are merely parroting time-worn platitudes for the sake of manipulating voters. Our whole system of raising and educating children provides the power-hungry with a ready-made railway network they can use to reach the destination of their choice. They need only push the buttons that parents and educators have already installed.

Crippling ties to certain norms, terminology, and labels can also be clearly observed in the case of many thoroughly honorable people who become passionately engaged in

political struggle. For them, political struggle is inseparably associated with party, organization, or ideology. Since the ominous threat child-rearing practices pose to peace and survival has always remained hidden, ideologies have not yet been able to perceive this situation or, if they do perceive it, to develop intellectual weapons against this knowledge. As far as I know, not a single ideology has “appropriated” the truth of the overriding importance of our early conditioning to be obedient and dependent and to suppress our feelings, along with the consequences of this conditioning. That is understandable, for it probably would mean the end of the ideology in question and the beginning of awareness. Accordingly, many ideologues who consider themselves politically active are like people who, if a fire breaks out, would open the windows to try to let out the billowing smoke (perhaps contenting themselves with abstract theories about the fire’s origin) and blithely ignore the flames leaping up nearby.

My hypothesis that Adolf Hitler owed his great popularity to the cruel and inhuman principles of infant- and child-rearing prevalent in the Germany of his day² is also proved by the exception. I looked into the background of Sophie and Hans Scholl, two university students in Hitler’s Germany who became famous as a result of their activities in the resistance movement, “The White Rose,” and were both executed by the Nazis in 1944. I discovered that the tolerant and open atmosphere of their childhood had enabled them to see through Hitler’s platitudes at the Nuremberg Rally, when the brother and sister were members of Nazi youth organizations. Nearly all their peers were completely won over by the Führer, whereas Hans and Sophie had other, higher expectations of human nature, not shared by their comrades, against which they could measure Hitler. Because such standards are rare, it is also very difficult for patients in therapy to see through the manipulative methods they are subjected to; the patient doesn’t even notice such methods because they are inherent in a system he takes completely for granted. ³

What would have happened in the case of a woman such as Marie Cardinal had she gone to an analyst who had explained her hemorrhages as nothing but a rejection of femininity or an expression of penis envy? Here we can only speculate. If the analyst had been a likable person in other respects, Cardinal might have fallen in love with him and temporarily recovered from her symptoms. But if she had not discovered the truth about her mother, she would never have been able to admit to the extent she did the boundless rage and hatred she felt for her. Had she not come to realize that her hostile feelings were *reactive*, she would have considered herself a monster for having them. The outcome probably would have been that in her despair she would have given up analysis after several years or would have ended up in a mental hospital because of her feelings of hatred, misconstrued as “unfounded.” It would not have been she who wrote about her case but her analyst, citing it as an example of an incurable illness, a negative therapeutic reaction, or the like. If, on the other hand, she had disliked her analyst from the start, a sadomasochistic transference would soon have emerged, in the course of which his interpretations would increasingly have assumed the character of veiled accusations. However this may be, we are seeing more and more patients like Cardinal whom we cannot do justice to with the usual labels.

The difference between the two opposing attitudes I have tried to illustrate here with my three examples cannot be conveyed by the concept of “reconstructive interpretations.” If the analyst is under the sway of the Fourth Commandment⁴ no matter how hard he tries to reconstruct the original situation, he will invariably take the part of his patient’s judgmental parents and sooner or later try to “educate” him by urging him to have understanding for them. Without a doubt our parents were victims, too, not of their children, but of their own parents. It is essential for us to perceive the unintentional persecution of children by their parents, sanctioned by society and called child-rearing, if our patients are to be freed from the feeling imposed on

them from an early age that they are to blame for their parents' suffering. In order for this to happen, the analyst has to be free from guilt feelings toward his own parents and be sensitive to the narcissistic wounds that can be inflicted in early childhood. If he lacks this sensitivity, he will minimize the extent of the persecution. He will not be able to empathize with a child's humiliation, since his own childhood humiliation is still repressed. If, in keeping with the saying "You'll be the death of me yet," he has learned to accept all the guilt in order to spare his parents, he will try to allay his patient's aggression, which he cannot understand, by repeatedly emphasizing the parents' good sides; this method is referred to as "the establishment of good objects" in the patient.

If a mother sees her infant as wicked and destructive, then she will have to bring him under control and train him. But if she recognizes his rage and hatred as reactions to painful experiences, whose significance may still escape her, she will not try to train the child but will permit him to experience his feelings. The same is true of the psychoanalytic process. The example of Marie Cardinal demonstrates why it is not necessary "to establish a good object in the patient" and keep telling him that his parents also had their positive sides and were concerned for his welfare. He had never questioned that; on the contrary, the child does not need to repress what is positive for the sake of survival (see my book *The Drama of the Gifted Child*). When the anger of early childhood and the ensuing grief have been experienced, affirmative feelings, which are not based on denial or feelings of duty or guilt, can emerge of their own accord, assuming the right preconditions are present. These affirmative, more mature feelings must be clearly distinguished from the small child's unconditional, dependent, all-forgiving, and therefore tragic love for his or her parents.

We cannot reproach Sigmund Freud for being a child of his times or for not having the opportunity, being the founder of psychoanalysis, to lie on an analyst's couch himself. This

was not his fault but his inescapable predicament. To recognize this, however, does not prevent us from seeing the limitations of Freud's self-analysis, limitations revealed in his persistent idealization of the parents and in his tracing the cause of neurotic suffering back to the child's drive conflicts. Freud had no one to help him experience the reactive aggression lurking behind his idealization as a response to narcissistic wounds. Perhaps he later transferred this aggression to followers who did not understand him as well as he thought they should have or who, as he believed, misunderstood him, like Jung and Adler. He was obviously unable to work through his disappointment within the context of early childhood.

But our situation differs from Freud's. Now an analyst has the opportunity of being analyzed, even a second and third time if necessary. Moreover, we are living with a younger generation that is much more open, honest, and critical toward its parents than was ever possible in Freud's day. We can learn a good deal from these young people—from our children, students, and patients—once we have liberated ourselves from our anxious dependence on dogma.

3

Unconscious Pedagogy in Psychotherapy

CLASSICAL psychoanalysis is not the only place where we find the triad of shielding the parents, the drive theory, and concealment of trauma. By concealing parents' traumatizing behavior with the aid of drive interpretations (i.e., essentially by ascribing all guilt to the child), various psychoanalytic schools appear modern and progressive at the same time that they continue to fulfill the commandments of "poisonous pedagogy." This can be demonstrated by countless examples, but I shall refer to only one book, *Selbstanalyse* (Self-analysis) by Klaus Thomas, for here what patients have to say is not distorted by interpretations but is communicated directly to the reader in the form of letters. Thomas, director of a suicide clinic in Berlin, has successfully treated many adolescents who have attempted to take their own lives. Excessive demands on his time prompted Thomas to develop a new method of self-analysis based on having the patient write journal-like letters to the therapist; only a few of the problems raised in these letters can then be selected for discussion in the infrequent therapeutic sessions. I can see the possibility of substantial improvement for patients simply in their being able to articulate their feelings, formulate their resentments, and experience their rage toward their parents, providing the right conditions for all this are present, e.g., the assurance that someone will read everything they write, take it seriously, and not judge them for it. I gained the impression from the cases cited by Thomas that this kind of writing, followed by discussion, could offer a serious alternative to

psychoanalysis, especially for adolescents. Since the sessions are so infrequent, the patient's realization of the normal (and inevitable) limits of his therapist's understanding can be postponed for some time, with the result that the patient, thanks to the support he is being given, may in the meantime be better able to get through to his traumas than in orthodox psychoanalysis, whose preconceived notions can easily impede his discovery of his true feelings. But it can also be the case that the therapist's more or less conscious pedagogical attitude in his relationship with the patient, inherent in this form of treatment as well, comes through strongly and finally blocks the patient's emotional development after all. This may mean that in many cases the resocialization desired by all is attained, i.e., the patient's adaptation to the expectations of both parents and society. His true self then falls victim to these expectations, just as it did in his childhood. This can have negative consequences for artistically gifted people in particular. To demonstrate what I mean, I shall now cite at length from Thomas's book:

An example of self-analysis marked by aggressiveness toward the parents and by sexual relations with siblings

The following case history, in which the names but not the facts have been changed for reasons of professional secrecy, is just as instructive regarding the potential for self-analysis as it is regarding the significance of released aggression.

Background: On November 23, 1965, a 28-year-old medical student appears in my office for the first time. He sees himself locked into a situation from which—he believes—only suicide can save him. His parents, who live in a small town ... sent their oldest son as well

gloves, and even then I often chew off their tips,” an all too eloquent indication of her strong aggression. This form of self-disfigurement provides a constant source of reinforcement for feelings of inferiority going back to her childhood. Although her looks are far above average, she complains incessantly about being ugly. She writes about her *earliest childhoods memories* in her self-analysis: “Every evening and night I prayed, ‘Dear God, please make me pretty!’”

Diagnosis: These symptoms, as well as many others, lead to an initial *diagnosis* of an unmistakable *nuclear neurosis with suppressed, moderately severe, secondary depression with frequently anancastic-phobic states (attacks of compulsiveness and anxiety) and with sexual and familial conflicts as well as considerable nicotine abuse (she smokes over 50 cigarettes a day).*

Program of therapy: Cooperating closely with the psychiatrist available to students through the university health plan (he also considers full-scale psychoanalysis indispensable but out of the question for practical reasons), we begin with a *self-analysis* accompanied by *pharmacopsychiatric treatment.*

Over the next two years she appears on the average of once every two weeks, usually with two to five pages of notes for her *autobiography* and her complaints, her dreams, and her daydreams. The following quotations are taken from this material (only the names have been changed), which reveals a recurrent pattern of ambivalence, i.e., her impulses in opposite directions at the same

time. This is especially true for the central area of sexuality but is already apparent in her relationship with her parents.

Parents: Many of the patient's notes bear the stamp of obvious truthfulness, others must be viewed critically, still others are clearly products of a lively imagination and are objectively false (for instance, she writes repeatedly about having been brutally raped, yet the gynecological examination subsequently determined that she was still a *virgo intacta*). To begin with her own words (May 24, 1966): "When I was seven, my parents got a divorce. I lived with my *mother*, who was constantly berating me and calling me her 'coffin nail.' She also was always threatening to commit suicide; that way, she said, an end would be made of her even quicker than if she left it to me. On the other hand, from the time I was eight, my mom always kissed me like a man. I slept in the same bed with her and every night I had to stroke her until she had an orgasm. That went on for years.

"Other favorite expressions she kept repeating were: 'You Satan's morsel, you horny monster, you stupid cow, I'll have to hang myself yet on your account.'" [pp. 40–42]

Although the patient's conscious memories are sufficient to confirm fully her underlying feeling of having been violated (how else can one describe what the mother forced her daughter to do?), the therapist relies on the gynecological examination, which proves to him that the patient is "still a virgin," was therefore lying, and that her fear of being violated again has a paranoid character, i.e.,

can be seen as the projection of her own desires. This approach was used for decades in treating so-called hysterical female patients, who were portrayed as theatrical, overly dramatic, prone to exaggerate, and whom therapists tried to talk out of their “delusions.”

In every psychiatric and psychoanalytic diagnosis, the description of a hysterical patient is inconceivable without the use of the word “exaggerated.” What is meant by this is that these patients’ complaints are out of all proportion to their cause. But how can we measure the dimensions of the true cause if it is unknown or if it is ignored by the therapist, as happened, for example, in the case of the young art student? If we become practiced in overlooking the sexual abuse that actually took place, we will call our patients’ complaints excessive and abandon them to their trauma. Since they cannot confront their trauma without assistance, they must struggle to keep the cause from becoming conscious. They do this by transferring their feelings to someone in their present life who has nothing to do with the original trauma, and thus they cover up even more the situation their parents concealed from them. This also satisfies their desire—in spite of analysis (or another form of therapy)—to spare their parents’ feelings, albeit at the price of depression or another set of symptoms. In her reenactments Thomas’s patient is attempting to communicate her trauma to the therapist, and at the same time to spare her parents, which makes it more difficult for him to understand her and gives him the impression that she is being dishonest. Thomas writes:

Again and again the patient tells about all the times she has allegedly been raped. On Aug. 29, 1966, her self-analytic session ends at 8 p.m. At 9 she comes back, agitated and in tears, saying that she has just been raped by three men in a nearby park. I dissuade her from going to the police because I doubt the

lines. The second analyst, however, was not content to see his patient's attacks as expressions of a death instinct or of penis envy but searched for their causes. He understood that his hurt feelings and threatened self-confidence were signs of the countertransference and were telling him something about the patient's father; therefore, he was able to arrive at reconstructions that were then confirmed by new memories on the patient's part and by a spontaneous change in her attitude toward men.

It turned out that her father had been an insecure and weak man who was no match for his daughter intellectually, was submissive toward his parents, and was despised by his wife after he returned from the war. During puberty the patient shared her mother's scorn and often criticized her father, whom she considered a coward. She was conscious of all this; why, then, was she fixated on this attitude and why did she transfer it to other men so that she was unlikely to marry and have children, although this was what she really wanted? Her hatred of her father was not unconscious at all, one might think.

Thanks to her second analyst's interest in what actually transpired in her early childhood, it was revealed that there had at one time been someone who did not frighten this weak, hypochondriacal, and ailing man and who had not felt scorn for him, someone on whom he could take revenge for all the humiliation he had undergone during his childhood, then again as a prisoner of war, and finally in his marriage: this person was his oldest daughter, the patient, when she was still very little. Although he couldn't talk to anyone about his experiences and was very withdrawn, he could play with his little girl from time to time but then would suddenly start to scream at her, hit her, put her to shame, and humiliate her. He could be loving and hold her close when he needed someone, but then push her aside like a doll or a pet without any explanation and turn to other things or people. The reconstruction of this period was made possible by the patient's reenactments in the transference and was confirmed by her dreams; in addition, she began trying to

find things out from relatives that she had not wanted to know about before. For the first time she could now listen to details about her father's membership in the SA without having to run away. She was searching for her father as he really was and realized that the SA armband was no longer alien to her because she had found him within herself (his deep-seated insecurity and his related attempts to compensate for it) with the aid of the transference.

A period of deep mourning accompanied what she had learned. The patient kept experiencing herself as a loving child, dependent on a father who was unpredictable—sometimes affectionate and sometimes cruel. Now she was able to detect his immaturity, his vulnerability, and his extreme narcissistic deprivation, to see him as someone who had no understanding for what someone else was feeling and was himself unable to feel, a father who used her like a toy and as an outlet and who had no respect for her soul and no inkling of her true nature. It was *this* father the patient despised in all the men she feared and loved and *his* weakness she had to expose again and again as long as the father of her early childhood was not accessible to consciousness. She was constantly reenacting the drama of her childhood in her repetition compulsion, sometimes with the roles reversed, so that *she* was the one who was superior to men, who wounded and abandoned them. In her encounters with men she also hoped finally to punish her father for his cruelty. After she had experienced her childhood desire for revenge in analysis and had begun to understand that revenge taken on substitute persons in the present can never satisfy the desire for it felt as a child, she was able to experience new kinds of relationships with men that she had never believed possible before.

All this happened without anyone having told her what to do, without any effort on her part, without struggling to be "reasonable." The immeasurable rage she had felt initially toward the first therapist, who she felt had grossly misunderstood her, was slowly transformed into grief over his inability to understand, a limitation she gradually

discovered, in other areas, in her new therapist as well but was able to accept. At the same time it became possible for this basically empathic and sensitive woman to accept her father's past. She realized, now on an emotional level and without despising him, that as a child her father had been the plaything of his divorced parents (who were always shunting him back and forth) before he became the plaything of the state and the party in the Third Reich. But true understanding and forgiveness on the part of this woman were possible only because the humiliated little girl's rage and fantasies of revenge were taken seriously by the analyst and not interpreted as an expression of penis envy.

It is not an act of cruelty for an analyst to misunderstand a patient but rather an unfortunate circumstance closely related to his own training analysis; it can therefore be helpful for both parties if the analyst can admit his limitations. The patient is put in a difficult position, on the other hand, if the analyst explains that he understands his patient but that the patient "is refusing" to accept the analyst's interpretation because he, the patient, wants to be more clever, grand, and powerful and make everyone else look small and stupid. Such explanations encourage sadomasochistic transferences or are already a sign of them. They will be repaid with even more vigorous attacks, which can also take the form of hours of silence and make the analyst "lose his patience" completely, which certainly does nothing to increase his empathy.

What is taking place here? A little child who is being abused is not permitted to become aware of it or to talk about it, and this very taboo against experiencing and expressing himself robs him of his self-confidence. As an adult, when he goes to an analyst and is told that he "only thinks" he is misunderstood but actually is not, how will he react? If no foundation for his own feelings has been laid, then the only alternative is total adaptation, and the patient will accept labels for his behavior from his analyst as he once did from his parents. If, however, this foundation exists—i.e., a vital, true self—then the analyst's assertions, which

other analysts—an “analytic sister” of the Wolf-Man, so to speak—published a book in 1971 that contained, along with Freud’s and Mack-Brunswick’s presentations of the case, an autobiographical sketch by the Wolf-Man. Mack-Brunswick describes in detail her patient’s problems with money and his distrust of doctors, dentists, and tailors, culminating in a deluded and paranoid belief that his nose had been mutilated by the dermatologist Dr. X. She correctly suspected that aggression directed against Freud lay behind these delusions of persecution. Since she interpreted them as an expression of the patient’s “passive homosexual desires,” which had been disappointed by Freud, she did not need to defend her teacher against her patient’s reproaches and was able to help him express his rage, which brought about an improvement. She herself was surprised at his recovery, because she found what she considered a necessary prerequisite for the healing process to be missing in the patient, namely, full acceptance of his “desire for castration” and of his “homosexual desire to take the woman’s role in sexual intercourse with his father.” She says:

But the only way out was through the acceptance of his own castration: either this, or the actual retracing of his childish steps to the scene which was pathogenic for his feminine attitude to the father. He now realized that all his ideas of grandeur and fear of the father and, above all, his feeling of irreparable injury by the father were but cloaks for his passivity. And once these disguises were revealed, the passivity itself, whose unacceptability has necessitated the delusion, became intolerable. What appeared to be a choice between acceptance or refusal of the feminine role was in reality no choice at all: had the patient been capable of assuming the

feminine role and admitting his passivity to the full, he could have spared himself this illness, which was based on the mechanisms of defence against such a role. [*The Wolf-Man by the Wolf-Man*, p. 292]

Thus, the trauma of his mistreatment is interpreted in terms of a “passive attitude,” and “acceptance of his own castration” is urged. Although I regard such theories as doing violence to the patient, I can see that in this specific case they were of benefit to the Wolf-Man. For if the analyst had been able to recognize that the Wolf-Man had several *real* reasons for reproaching Freud, both as a person and in his role as father figure in the transference, she would have attempted, consciously or unconsciously, to protect her idealized mentor from these reproaches, as the following passage indicates:

The patient's statement that no doctor or dentist ever seemed to treat him properly is superficially to some extent justified. But when one examines the circumstances surrounding the long line of the patient's medical and dental experiences, one is forced to the conclusion that he himself demanded and facilitated bad treatment on the part of his attendants. Distrust was a prime condition of treatment. The normal individual breaks off treatment when he becomes dissatisfied with his physician; he certainly does not permit himself to be operated upon by someone whom he regards as his enemy. The passive nature of our patient makes every breach with a father-substitute difficult: his first attempt is to placate the assumed enemy. This attitude

played with it, at the same time telling him incomprehensible stories about his Nanya, as though by way of explanation. His Nanya, she said, used to do the same thing with all kinds of people—for instance, with the gardener: she used to stand him on his head, and then take hold of his genitals. [p. 164]

When we keep in mind that the boy actually didn't spend much time with his parents but grew up with his sister and their nurse and that he was afraid of the English governess, we can understand that his sister's behavior, along with the story she made up about the nurse, robbed him with a single blow of the one and only person to whom he could have communicated his feelings of fear and powerlessness. He might have dealt successfully with his sister's power over him if his relationship with the nurse had been left intact. But the idea that the person closest to him did "even worse things" with men than his sister did with him led to the child's sudden psychic loneliness (in the midst of people who "loved" him but had no understanding of his fears) and to the eruption of his infantile neurosis.

The Wolf-Man found himself in the same situation later when he became the object of the needs of his analysts and his analytic sister and again, finally, as a man of nearly ninety, when he gave the young journalist Karin Obholzer the opportunity to use him as a witness against psychoanalysis. The fact that he had been victimized by his sister was still influencing his relationships with women when he was an old man. In his conversations with Obholzer he mentions several times that he is trying in vain to stop seeing a woman whose friendship he finds he cannot do without. As a result, he is putting up with a number of things he actually doesn't like at all. We can also assume that it never occurred to him to refuse Muriel Gardiner's wish to make public his memoirs together with the two case histories because he was grateful to her for

Nonsexual Taboos

ALTHOUGH we encounter sexual abuse of children much more frequently in our practice of psychoanalysis than one likes to admit (among other reasons because patients' parents did not have a satisfying sex life), this is by no means the only topic children are kept in the dark about. The members of every generation experience, in addition to the universally binding taboos of their society, specific ones that have to do with the historical point at which they happen to be children. The former type of taboo, restricted to a geographical area and described by ethnologists, can easily be observed by every visitor to a foreign culture. The unconscious prohibitions of a Christian culture, for instance, are much more easily detected by a Mohammedan than by a Christian, and vice versa. But a given generation's taboos (whatever is internalized in childhood as being forbidden) peculiar to a certain time are almost impossible to unearth within a society, not even on the analyst's couch, as long as that analyst belongs to the same generation and society as his or her patient. Josef Breuer's sudden retreat from the patient Anna O., who shocked him with the sexual nature of her pathology, is a striking example of this. But Breuer was not a psychoanalyst. Today, should an analyst feel threatened by the associations or enactments of his patients, he would not run away but would either be incapable of hearing what his patients were saying or would take refuge in theoretical interpretations. Once, when talking to a large group of colleagues, I encountered this tragic, unintentional need to ignore what the patient says, which might also be called unconscious resistance on the part of analysts. This meeting resulted in a valuable deepening of

died at a very great age. [from the Book of Job]

But the Truth Will Out

IT may still be decades or even centuries before humankind stops regarding the knowledge stored up in the unconscious as immaterial, as pathological fantasies of the insane or of eccentric poets, and comes to see it for what it really is: a perception of reality, stemming from the period of early childhood, which had to be relegated to the unconscious, where it becomes an inexhaustible source of artistic creativity, of the imagination per se, of fairy tales and dreams. Once such knowledge is legitimized as pure imagination, all doors are opened to it. It can be admired as art, handed down in fairy tales as “the wisdom of the ages,” and interpreted in our dreams as an expression of the never-changing archetypal collective unconscious. We are proud of this cultural heritage, of its wisdom, of “the knowledge of good and evil” we possess, but we do not have to let it affect us deeply unless we happen to be poets or insane ourselves. We can read fairy tales to our children because, after all, “they should also learn something about life’s cruelty”; we can write with great detachment and intelligence about the baseness of society, yet not become emotionally aware of cruelty until the stones thrown by rebellious youth break our own windows. Then people whose profession involves the study of society—historians, for example, who have been teaching for years about the persecution of the Christians in ancient Rome, about the Crusades, the Inquisition, the burning of witches, and about history’s countless wars—may say that the violence of our times is the result of children being raised permissively. Violence doesn’t exist for these people until it is directed against them personally, because everything they learned in

he will let her keep her child. But what do the world's treasures mean to someone who can make gold himself? They do not outweigh a living creature. Nevertheless, Rumpelstiltskin takes pity on the queen and says, "If you can tell me my name within three days' time, then you may keep your child." The queen would never have been able to guess his name had not her messenger happened to see the little man in the forest. He was dancing and singing a song:

I've won the game
For no one knows
Rumpelstiltskin is my name!

When he returns, only to find that the queen does know his name, he shrieks, "The devil told you!" Angrily he stamps his right foot so hard that his whole leg sinks into the earth; then, in a rage, he seizes his left leg with both hands and tears himself in two.

Strangely enough, this fairy tale does not have a happy ending. The queen, to be sure, is freed of the troublesome little man, but how will she be able to go on spinning gold now? Possibly she can use her child for this purpose; just as her father and the king (grandfather) required her to do the impossible, perhaps she will be able to do the same with her child. But the real tragedy of the fairy tale is the story of Rumpelstiltskin, who tears himself in two. He commits this act of despair upon hearing his name revealed, when he is no longer able to hide and no longer has any hope of being able to alter his fate by means of a living child (the vital part of himself). The little man had been living (we do not know why) all alone in an isolated cottage in the forest, without ties to other human beings. Perhaps he hoped to escape the world's sorrows there if, in his seclusion, he was no longer subjected to human cruelty.

two more sons, one of whom lived two years and the other only six months. Later, she gave birth to three daughters when Franz was between the ages of six and nine.

All of Kafka's writing, including his letters, gives us only an approximate idea of how much a child of his intensity and depth of awareness is affected by these births and deaths as well as by feelings of abandonment, envy, and jealousy if he has no one to help him experience and express his true feelings. (There are parallels in the childhoods of Hölderlin, Novalis, and Munch, among others.) This alert, curious, highly sensitive—but by no means disturbed—child was hopelessly alone with all his questions, completely at the mercy of the power-hungry household staff. We often say with a shrug that it was normal in those days for wealthy people to entrust their children to governesses. (As if what is “normal” were ever the criterion of what is beneficial.) Certainly there have been many cases of a nurse or governess rescuing a child from cold and unloving parents, but we must also keep in mind what satisfaction it must have given oppressed household servants to pass the humiliation meted out to them from “above” on to the little children in their charge. Since it is difficult for children to tell anyone about what is being done to them, all the psychological cruelty they experience remains a well-kept secret.

How great, how irrepressible must have been Kafka's *hunger* for a sympathetic ear in his childhood, for someone who would respond genuinely to his questions, fears, and doubts without using threats or showing anxiety, who would share his interests, sense his feelings, and not mock them. How great must have been his longing for a mother who showed interest in and respect for his inner world. Such respect, however, can be given a child only if one has learned to take oneself seriously as a person as well. How could Kafka's mother have learned to do this? She lost her own mother at an age when a child can neither grasp nor mourn the loss. Without an empathic surrogate it was impossible under the circumstances for her own personality

stretch out his hand, only to be unnoticed by the passers-by.

That, too, is part of the human condition—for children to be ashamed of their needs while adults are not even conscious of turning a deaf ear and often haven't the vaguest idea of what is going on right beside them in their child's soul, at least not if their own childhood is emotionally inaccessible to them.

Kafka was described by his nursemaid as an “obedient” and “good” child who “had a quiet disposition.”

The child grew up under the supervision of the cook and the housekeeper, Marie Werner, a Czech who had lived with the Kafka family for decades The cook was strict, the housekeeper amiable but timid toward the father, to whom she always responded in an argument with, “I won't say anything, I'll just think it.” A nursemaid was soon added to these two “authority figures” and later a French governess, obligatory in the “better” families of Prague. Kafka rarely saw his parents: his father had set up noisy living quarters on the premises of his steadily growing business, and the mother always had to be on hand to help him and smooth things over with the employees, whom the father referred to as “beasts,” “dogs,” and “paid enemies.” Kafka's formal training was restricted to being taught table manners and given orders, for even in the evening his mother had to keep his father company and play “the usual game of cards ... accompanied by exclamations, laughter, and squabbling, not to mention whistling.” The boy grew up in this “dull, poisonous atmosphere of the beautifully furnished living room, so devastating for a child”; he found his father's brusque

commands incomprehensible and mysterious, and he finally became “so unsure of everything that, in fact, I possessed only what I actually had in my hands or in my mouth or what was at least on the way there.” The direction taken by the upbringing his father gave him added greatly to the boy’s uncertainty. Kafka describes this upbringing in *Letter to His Father*: “You can only treat a child in the way you yourself are constituted, with vigor, noise, and a hot temper, and in my case this seemed to you, into the bargain, extremely suitable, because you wanted to bring me up to be a strong, brave boy.” [Wagenbach, *Franz Kafka*, p. 20]

Seen superficially, this is a description of a “sheltered” home life, a childhood no worse than many others that have produced more or less prominent and undaunted adults. But Kafka’s works reveal how a sensitive child can experience situations we still designate today as quite normal and unremarkable, situations with which our children must live without ever being able to articulate them like Kafka. If we can be empathic, refrain from trying to spare the parents, and learn to understand that what Kafka wrote was a description of conditions in his early childhood and of his reactions to them instead of the expression of his “neurasthenia,” his headaches, his “constitution,” or his delusions, then we will also become more sensitive to the burdens we are placing on our children here and now, often simply because we don’t know how intensely a child receives impressions or what later becomes of them inside him. It may merely be a matter of a harmless joke at the child’s expense, a trick one plays on him, or a threat one never seriously intends to carry out but makes only in order to encourage better behavior. The child, however, cannot

the Fleischmarktgasse ... the fear of the threat got the upper hand. School in itself was already enough of a nightmare, and now the cook was trying to make it even worse. I began to plead, she shook her head, the more I pleaded the more precious appeared to me that for which I was pleading, the greater the danger; I stood still and begged for forgiveness, she dragged me along, I threatened her with retaliation from my parents, she laughed, *here* she was all-powerful, I held on to the shop doors, to the corner stones, I refused to go any further until she had forgiven me, I pulled her back by the skirt (she didn't have it easy, either), but she kept dragging me along with the assurance that she would tell the teacher this, too; it grew late, the clock on the Jakobskirche struck 8, the school bells could be heard, other children began to run, I always had the greatest terror of being late, now we too had to run and all the time the thought: She'll tell, she won't tell-well, she didn't tell, ever, but she always had the opportunity and even an apparently increasing opportunity (I didn't tell yesterday, but I'll certainly tell today) and of this she never let go. [*Letters to Milena*, pp. 65-66]

There have been countless interpretations of Kafka's *The Trial*, for this work reflects the situation in which many people find themselves. Kafka's profound awareness of this situation, which made it possible for him to describe it as he did, is probably rooted in the child's early experiences, scenes similar to those just described on his way to school. Joseph K. is still in bed one morning when he is notified that a lawsuit is being brought against him, the rationale for

impact of the undeniable indifference of his environment. But not for long—a child cannot live without hopes and fantasies, which help him to disguise his unbearable reality. Once again the surveyor K. builds his castles in the air; again he tries to establish contact, if not with the count himself, then at least with the count's underlings.

We can only suppose that as a child Kafka, like the land surveyor in *The Castle*, was all alone with his thoughts and speculations concerning the relationships of adults among themselves and with him; paradoxically, this intelligent child, again like the surveyor K., was not taken seriously by his family. He, too, was discredited, misled, not paid attention to, shunted off with promises, humiliated, and ignored—without a single person who was sympathetic and explained things to him. Only his youngest sister, Ottla, gave him love and understanding, but since she was nine years younger than he, he had to spend his first years, the most crucial and formative of his life, in the atmosphere he described in such minute detail in *The Castle*. The surveyor K. (like the child Franz) feels that he is the victim of incomprehensible and inscrutable underhanded treatment; he is continually being subjected to inconsistent behavior; he has been summoned (is wanted), yet is useless; he is under someone's total control or is completely neglected and ignored; he is being humiliated and made fun of, or his hopes are being falsely raised; vague demands are being made on him that he can only guess at; and he is constantly unsure of whether he has done the right thing.

He tries to understand his surroundings, to ask questions, to find meaning in all this chaos and disorder, but he never succeeds. When he thinks he is being made fun of, the others are apparently in dead earnest; yet when he counts on their being serious, he is made a fool of. This is what often happens to a child: the parents call it “playing” and are amused when the child tries in vain to learn the rules of this “game,” which, like the pillars of their power, they will not relinquish. Thus, the surveyor in *The Castle* suffers from his inscrutable surroundings, just like a child without a

supportive attachment figure; he suffers from the meaningless bureaucracy (child-rearing principles), the undependable nature of the women, the self-importance of the employees, and above all from the fact that there seem to be no answers in this environment to his most urgent existential questions.

Among this great array of people there is not one—with the exception of Olga, who is also a victim of the system—who might explain to K. what is going on or might be able to understand him. Yet he never speaks confusedly but always with clarity, simplicity, friendliness, and conviction. The tragedy of never making any headway with even the simplest, most logical ideas and always running into stone walls permeates all of Kafka's works and is also perceptible in the letters as a constant, suppressed lament. Although Kafka repeatedly gives poetic form to this lament, and makes it a manifest theme of his fiction, for this very reason it remains unconnected with its roots in his biography. The suffering caused the little boy by his mother, who did not understand or even notice the child, is emotionally inaccessible for Kafka as an adult, whereas the difficulties he had with his father, which fall in a later period, were something he could grasp and could articulate much better (cf. *Letter to His Father*).

Kafka's friendship with Max Brod as well as his engagement to Felice Bauer left him ultimately alone, just as he always was with his mother. He once wrote about his relationship with Brod:

For example, during the long years we have known each other I have, after all, been alone with Max on many occasions, for days on end, when traveling even for weeks on end and almost continuously, yet I do not remember—and had it happened, I would certainly remember—ever having had a long coherent conversation involving my entire being, as

should inevitably follow when two people with a great fund of independent and lively ideas and experiences are thrown together. And monologues from Max (and many others) I have heard in plenty, but what they lacked was the vociferous, and as a rule even the silent, conversational partner. [*Letters to Felice*, p. 271]

A person who was as lonely as Franz Kafka as a child is unable, as an adult, to find a friend or a woman to understand him, since he often seeks unconsciously to repeat his childhood. From the kind of attachment Kafka had to Felice and she to him we can deduce how he suffered in his relationship with his mother. Julie Kafka not only had no time for her son, she also was insensitive to him, and when she concerned herself with his welfare she did it with such tactlessness that she wounded him deeply (cf. pp. 280-81) without meaning to and without his being able to put his feelings into words, for the child of an insecure mother is so concerned about her well-being that he cannot be aware of his own wounds. The same pattern emerges with Felice. Kafka's levelheaded fiancée can understand a great many things but not the world of a Franz Kafka. That he sought understanding from someone like her in vain and didn't become aware of his disappointment for a long time is not surprising when we consider that this man had (and loved) a mother who had absolutely no access to his world.

He wrote to Felice:

My mother? For the last 3 evenings, ever since she began to suspect my troubles, she has begged me to get married whatever happens; she wants to write to you; she wants

to come to Berlin with me, she wants goodness knows what! And hasn't the remotest idea what my needs are. [p. 312]

And to Felice's father:

I live within my family, among the kindest, most affectionate people —and am more strange than a stranger. In recent years I have spoken hardly more than twenty words a day to my mother, and I exchange little more than a daily greeting with my father. To my married sisters and brothers-in-law I do not speak at all, although I have nothing against them. [p. 313]

Language and the ability to speak meant everything to Kafka, but because it was not permissible to say what he felt, he had to remain silent and suffered as a result.

In my reading of Kafka, his *Letters to Felice* and the novel *The Castle* provided the keys to understanding both the man and his works. On the one hand, the letters helped me to grasp better what was happening in the novel; on the other, the episodes in the novel and the hopelessness of the hero's situation shed light upon why Kafka tried for five long years to explain himself to a woman who was ill equipped to respond to him. The effort he made to communicate with a partner who, for reasons having to do with her own history, was neither able nor willing to communicate on his terms would not be tragic if his efforts had not been accompanied by the compulsion to keep repeating them and to refuse to give up hope at any price. This absurd compulsion loses its absurdity when we picture a little boy who has no choice but to attempt to communicate with his mother, since he cannot pick out another. I often had to think of his predicament while I was reading *Letters to Felice*, in which, as in *The Castle*, Kafka's earliest relationship with his mother clearly emerges. Her presence was as necessary to him as "air to