This paper looks at the development of some of Freud’s understanding of trauma and loss in the context of his life experience. Material from Freud’s biographies is used to illustrate the development of his thinking as well as to suggest that it was Freud’s thoughtful relationship to his life that germinated these insights.

It seems more than coincidence that three of Freud’s revolutionary understandings followed his personal experience of loss and trauma. In looking at the development of some of Freud’s understanding of trauma in the context of his life experience, I will be paying particular attention to three papers which, together, can be seen as providing the basis for all psychoanalytic developments in the field of trauma: *Mourning and Melancholia* (1917), *Beyond the pleasure Principle* (1920), and *Symptoms, Inhibitions and Anxiety* (1926).

In writing this paper I had initially wanted to take up a comment that ‘Psychoanalysis isn’t interested in the family’—It’s a thought—provoking statement that opens up a large area for discussion that includes the question What is it that psychoanalysis is interested in?’ This then generates more questions such as Why do we want to know?’ and What is it that interests us?’ These are questions about what it is that gives our lives meaning, what it is that drives us. In linking of some of Freud’s life to some of his writing, I hope to illustrate how psychoanalysis is interested in the relationship between subjective and objective reality, both of which include the family. I should emphasize that I’m not attempting what Freud himself called psycho-pathography (Freud, 1910). I am not trying to describe Freud’s whole person and his whole life or suggest a reductive explanation for either his life or his understanding. I am wanting to use a little of what Freud and his biographers have written to suggest that it was Freud’s thoughtful relationship to his life that can help us understand the proximity of some of his revolutionary understandings to his personal experience of loss and trauma.

I begin with a brief look at the family context of *The Interpretation of Dreams* (1900). Freud wrote this paper in the year after his father’s death. Then I go on to place *Mourning and Melancholia* (1917) and *Beyond the Pleasure Principle* (1920) in relation to the loss and devastation that the First World War meant to Freud, again with reference to his family. Finally, I discuss *Inhibitions, Symptoms and Anxiety* (1926) against the background of Freud’s treatment for cancer and the deaths of his daughter and grandson. I begin with a little of Freud’s early history. Perhaps those already acquainted with this material can take courage from Freud’s example in re-considering what seems familiar.
Freud’s father was an unprosperous wool merchant who, at the age of 40, with 2 grown sons and grandchildren, married for the third time. His new wife was 20 years his junior. Born in 1856, Freud was the first, and mother’s favourite, of the 8 children of that marriage. Of those 8, the second, a baby boy called Julius, died when Freud was in his second year. In his third year his mother was confined for her third pregnancy. At the instigation of his adult half-brother, Phillip, Freud’s loved nursemaid was arrested and jailed for petty theft. Freud later recalled desperately searching for his mother, ‘howling all the while’ (Gay, 1998, p. 7).

In October, 1896, when Freud was 40, his father died, leaving Freud with a wife, mother, sisters and 6 children to support on a meagre income. He wrote:

The old man’s death affected me deeply … I valued him highly … with his peculiar mixture of deep wisdom and imaginative light-heartedness he meant a great deal in my life. By the time he died his life had long been over but at a death the whole past stirs within one. I feel now as if I had been torn up by the roots.

(Clark, 1980, p. 160)

This uprooting involved extreme mood fluctuations, feelings of impotence, failure, guilt and intellectual inhibition (Wilson and Zarate, 2002). Part of Freud’s response to this uprooting was to engage in a mental inquest on his relationship with his father over the previous 40 years.

I soon saw the necessity of carrying out a self-analysis, and this I did with the help of a series of my own dreams which led me back through all the events of my childhood

(Clark, 1980, p. 165)

The Interpretation of Dreams was published in 1900. His revolutionary discovery of the meaning of dreams and the systematic evidence of the unconscious that they provide was not widely noted at the time. By 1931 Freud still considered it:

the most valuable of all the discoveries it has been my good fortune to make … Insight such as this falls to one’s lot but once in a life time.

(Brill, 1938, p. 181)

Freud was later to state that, after the book was published, he realized it to have been:

a portion of my own self-analysis, my reaction to my father’s death—that is to say, the most important event, the most poignant loss, of a man’s life.

(Clark, 1980, p. 175)

Almost a quarter of a century later he said of his father’s death: It revolutionized my soul (ibid, p. 160).

Mourning and Melancholia
Now I want to fast-forward this account to 18 years later, to 1914 when Freud is 58 years old. On June 28th Archduke Franz Ferdinand and his consort are assassinated at Sarajevo by young Bosnian militants. On July 28th Austria declares war. Freud’s half-brother, Emanuel, is killed falling from a train in England. This is a great grief to Freud since his fondness for this half-brother has been quite unbroken from his earliest childhood. Emanuel was 81, the same age as their father when he died (Jones, 1957). Communications are disrupted by the war. Despite his protestations two of Freud’s three sons volunteer for military service and fight at the front lines. (Ogden, 2002, p. 768) The meetings of another of his progeny, the Viennese Psychoanalytical Society, are suspended. (Clark, 1980, p. 376) He writes of his loneliness—colleagues either called up or inaccessible. His practice is meagre, only two or three patients.

In 1915 in a letter to Abraham, Freud writes, At present I am as in a polar night and am waiting for the sun to rise’ (Clark, 1980, p. 376).

Yet this is a time of tremendous emotional and intellectual upheaval for him. In the space of 12 weeks Freud writes 10 of a series of 12 essays, which represent his first major revision of psychoanalytic theory since the publication of The Interpretation of Dreams (1900). He hoped that this collection would provide a stable theoretical foundation for psychoanalysis (Ogden, 2002, p. 768).

*Mourning and Melancholia* (1917) was the fifth in the series. Freud addresses the nature of chronic depression, or melancholia, as it was known at the time and which is a common, long-term outcome of trauma. In this paper, Freud’s question is about how it is that in reaction to real loss or disappointment caused by a loved one, some people react with normal mourning, which is eventually overcome, while others succumb to a depressive state. He notes that unlike normal mourning, which takes place mainly consciously, pathological mourning proceeds unconsciously. Of conscious mourning, you will recall Freud’s own ‘polar night’ in which he was waiting for the sun to rise. There is in that polar night a sense of time-limitation, a sense of confidence that the sun will rise eventually. He writes, ‘In mourning it is the world which has become poor and empty; in melancholia it is the ego itself’ (Freud, 1917, p. 254)

In mourning, he is saying, the world becomes a wintry polar ice-cap; in melancholia, the dark, deadened landscape is internal and eternal. He comments,

> It never occurs to us to regard (mourning) as a pathological condition and refer it to medical treatment … We rely on its being overcome after a certain lapse of time, and we look upon any interference with it as useless or even harmful.

(Freud, 1917, p. 252)

What is different and problematic for the melancholic, Freud suggests, is that even if the patient is aware of the loss that has given rise to his melancholia … (it’s) only in the sense that he knows whom he has lost but not what he has lost in him.

(Freud, 1917, p. 254)

With this insight Freud reaches right to the unconscious meaning of the experience and what it is that the external loss represents internally.
The one symptomatic difference between mourning and melancholia that Freud identifies is the diminution of self-regard. The patient reproaches himself, vilifies himself and expects to be cast out and punished. He abases himself before everyone and commiserates with his own relatives for being connected with anyone so unworthy. (Freud, 1917, p. 254)

A manuscript addressed to Fliess, dated May 31, 1897, makes it clear that Freud was thinking about mourning and melancholia in the aftermath of his father’s death. You may recall that Freud’s father died in the autumn of 1896. (This same document is where Freud first foreshadows the Oedipus complex.)

Hostile impulses against parents (a wish that they should die) are also an integral constituent of neuroses. They come to light consciously as obsessional ideas. In paranoia what is worst in delusions of persecution (pathological distrust of rulers and monarchs) corresponds to these impulses. They are repressed at times when compassion for the parent is active—at times of their illness or death. On such occasions it is a manifestation of mourning to reproach oneself for their death (what is known as melancholia) or to punish oneself in a hysterical fashion (through the medium of the idea of retribution) with the same states (of illness) that they have had. The identification which occurs here is, as we can see, nothing other than a mode of thinking, and does not relieve us of the necessity for looking for the motive (Freud, cited in Editor’s Note., P.F.L 11, p. 248) (My italics)

For the next 18 years Freud was on the lookout for the motive for this identification.

His pivotal understanding in this is that the self-accusations that characterise the melancholic are really directed at someone else, the important person who has occasioned the melancholic’s emotional disorder and caused the loss and disappointment. Freud perceived that, rather than lose the object, the melancholic holds it captive by identifying with it (Garland, 1998). In his unique voice Freud writes of

the shadow of the object falling on the ego, the latter … then be(ing) judged by another part of the ego as if it were the lost object (1917, p. 258)

Until this point Freud had formulated a topographical model of the mind, with layers of awareness, at the bottom of which he located the unconscious dominated by primary wish-fulfillment process or the pleasure principle. His recognition that, by dividing itself, the ego could take a part of itself as an object, opened up the possibility of an internal world, based on identification and populated by objects in dynamic relation to each other. This understanding heralds Freud’s radical revision of his model of the mind that would later be termed object relations theory. To explore the implication of these separating rivers in Freud’s thinking is beyond the scope of this paper and I return to what Freud calls the preconditions for melancholia.

Firstly, he proposes that melancholia is a problem of narcissism. By this time he thinks of relatedness as evolving along the line auto-eroticism, narcissism, object love (Freeman, 1998, p. 107). In previous papers he has described how, at the narcissistic stage, we love those who
represent ourselves, or what we wish for in ourselves. This leads to a merging of self and object. Now he is saying that the melancholic, unable yet to love someone who is experienced as separate from himself, hasn’t the capacity to face the full impact of the reality of the loss, which is the work of ordinary mourning. Instead he evades the pain of loss through regression from narcissistic object relations to narcissistic identification.

So Freud is also seeing melancholia as a defensive regression to very early forms of object-relatedness in response to the psychological pain of loss. The result, he says, is that

in spite of the conflict (the disappointment leading to outrage) with the loved person, the love relation need not be given up
(1917, p. 258)

The second precondition discussed by Freud is ambivalence towards the love-object, an ambivalence that means the hated aspect of what is lost is also identified with.

The self-tormenting in melancholia, which is without doubt enjoyable, signifies … a satisfaction of trends in sadism and hate which relate to an object and which have been turned around upon the subject’s own self
(1917, p. 260)

The patients usually still succeed by the circuitous path of self-punishment, in taking revenge on the original object and in tormenting their loved one through their illness, having resorted to it in order to avoid the need to express their hostility to him openly.
(Ibid)

What Freud calls the most remarkable feature of melancholia is ‘its tendency to change around into mania’ (ibid, p. 262). Freud makes clear his uncertainties regarding how to understand mania but suggests that both mania and melancholia are wrestling with the same ‘complex’ but that probably in melancholia the ego has succumbed to what mania triumphs over, (ibid, p. 263). Both states of mind evade the pain of loss, but at enormous cost: the loss of one’s own vitality. In cutting off from the reality of the external world, the mind cannot learn from experience, grow or generate. To return to Freud’s polar analogy, growth can’t happen in a frozen wasteland.

We have since come to understand the paradox where the conscious perception of loss makes us aware that we exist as a separate and unique being, different to others. In this way, knowing, experiencing our separateness is the foundation of our sense of self, as well as our knowledge of the other (Quinodoz, 1993).

I’ve looked at this paper in some detail because of its central importance in understanding how loss and trauma can be reacted to. I am suggesting that the seeds of Mourning and Melancholia (1917) can be found in the emotional uprooting that Freud experienced in the death of his father. Eighteen years after this loss, Freud established the motive for the identification process in melancholia: rather than lose the object, the melancholic holds it captive by identifying with it. Freud found that identification and mania are means of avoiding the pain of loss. He also identified narcissism and ambivalence as the preconditions of this defensive identification.
Some six months after the outbreak of the war Freud also wrote two short essays titled *Thoughts for the Times on War and Death* (1915). In our present Age of Terrorism they have an immediate and informing relevance. In the first, titled *The Disillusionment of the War* he challenges the illusion that our cruel, barbarous and fraudulent tendencies can be eradicated. Amongst much else in these brief but very rich thoughts, Freud recognises that in the unconscious everyone of us is convinced of our own immortality. He relates the joke of a husband saying, ‘If one of us two dies I shall move to Paris’ (Freud, 1915, p. 87).

I think this joke also expresses what Freud identified as the triumph of the survivor, who is ambivalent even to the loved one. Consequent to this, Freud notes, is the survivor’s guilt. As with a complex musical patterning, we hear again in Freud’s writing the theme of guilt that appeared in the 1897 manuscript written in the year following his father’s death. The impact of the World War and its carnage, the death of his 81 year-old half brother, with its echo of his father’s death, all these must have stirred his own survivor guilt.

**Beyond the Pleasure Principle**

Freud’s original paradigm for a traumatic event was sexual seduction. It was with frustration and puzzlement that he came to understand that many of the seductions of his patients had been products of phantasy. It’s perhaps worth saying here that Freud continued to believe in the incidence of sexual abuse but he no longer believed that this was a necessary and sufficient cause of hysteria. (Wilson and Zarate, 2002) The shift of emphasis, from fact to phantasy, was later re-balanced when the appalling legacy of the first World War seemed to re-kindled his original interest in the significance of the external event. He was intrigued by the repetitive traumatic dreams of war veterans.

Until he wrote *Mourning and Melancholia* (1917), Freud’s theory was that the mind is dominated by the pleasure principle where pleasure consists of a reduction of sexual tensions and displeasure consisted of their increase. But in *Mourning and Melancholia* (1917) Freud realised that the central problem is mental pain and how it is negotiated (Meltzer, 1978, p. 86).

With *Beyond the Pleasure Principle* (1920) Freud was suggesting how it is that certain events actually achieve their traumatising effect on the mind. He wanted to show that there are fundamental forces in the mind that invalidate the pleasure principle in the most consequential way. One behaviour, that appeared regularly in those that had been traumatised, was the apparent compulsion to repeat the events. The principle beyond the pleasure principle Freud called the repetition compulsion.

One of his most famous examples of repetition compulsion is the fort-da game that Freud observed his 18 month-old grandson playing. Little Ernst was the oldest son of Freud’s daughter, Sophie. Ernst was described as a ‘good’ boy who, though very attached to his mother, never cried when she left him briefly each day. But he repeatedly played a particular game with himself: he would take a wooden cotton reel attached to a piece of string, throw it over the edge of his curtained crib, so that it disappeared into it, and say mournfully to himself, ‘gone’. He would then pull the reel back, saluting its reappearance with a happy, ‘there!’

Why, Freud asked, should the little boy repeat a distressing experience in this way? Where was
the pleasure in that? Ernst’s observant grandfather interpreted it as a way of coping with an overwhelming experience, converting a passive, painful experience of being left into an active game. Freud made a further observation. One day, Ernst greeted his mother with ‘Baby gone!’ Sophie had been absent for several hours and during this time Ernst had found a way of making himself disappear. He had discovered his reflection in a mirror that didn’t reach to the floor. By crouching down he had made his mirror-image ‘gone’. If we draw on the understanding of the *Mourning and Melancholia* (1917) paper, we can see that Ernst has divided himself into two, identifying with the mother who rejects, as well as being the one who is left (Garland, 1998, p. 203). Although Freud is using this everyday example of repetition compulsion, we can see how Ernst is using the defence of identification with the lost object.

Freud suggested that, as well, Ernst was revenging himself on his mother substitute, reversing the trauma. We’ve since come to understand in the clinical setting that reversing the trauma might be the only way the survivor has of communicating the intensity of the experience, for which words are not yet available. How many of us have experienced, as clinician or patient (or both), a forgotten or cancelled therapy or analysis session around a holiday break?

*Beyond the Pleasure Principle* (1920) was published six months after the suicide of a close colleague, Viktor Tausk. In January 1920, a friend and benefactor, Anton Von Freund, died of cancer at the age of 40. Freud visited him daily during his illness.

Five days after his death, Freud’s daughter, his ‘dear, blooming Sophie’ (Gay, 1998, p. 391), the mother of little Ernst, died suddenly from influenza complicated by pneumonia. She had been pregnant with her third child. Freud could not get over the ‘unconcealed brutality of our time’ (ibid, p392), which made it impossible for the Freuds to join their son-in-law and his two small children of five years and 13 months in Hamburg. There were no trains. ‘I do not know’, he wrote in a letter a month later, ‘whether cheerfulness will ever call on us again.’ ‘I was prepared for the loss of my sons; now comes that of my daughter’ (ibid, p. 391)

His sons had survived the ravages of the war and its aftermath. Sophie didn’t. Helping himself with psychoanalytic language, he writes in another letter, ‘the loss of a child seems a heavy narcissistic insult’ (ibid, p. 392)

Here Freud is recognising not only whom he has lost but what he has lost in Sophie. Freud’s use of the word narcissism speaks to us in a way that could not have happened 20 years earlier. Condensed into his reference to narcissism is a complexity and development in Freud’s thinking that can’t be done justice here. But in his 1914 paper *On Narcissism* he wrote that man was not willing to forgo the narcissistic perfection of childhood. When, faced with reality, he can no longer hang on to it, he seeks to recover it with a substitute. In this paper Freud also described the identification process in narcissism (1914, p. 85). So, with the cryptic economy of ‘narcissistic insult’ Freud conveys the injury to an idealizing and idealized infantile world, a time when the omnipotence of ‘His Majesty the Baby’ is law (ibid), where no loss or catastrophe is allowed. Eight years later he wrote of Sophie’s death, ‘I was shattered. All security and all happiness seemed to me lost forever’. (Gay, 1988, p. 392)

Together with Freud we recall his loss and distressed search for his own mother and nanny in his third year.

In *Beyond the Pleasure Principle* (1920) Freud also argues his belief that all human activity can,
broadly speaking, be placed in two categories: the death instinct, or that which pulls us to
destruction and death, and that which pushes in the direction of life and constructiveness.
Tempting as it might be, we can’t use the glimpses into Freud’s state of mind provided by these
extracts from his letters to suggest an explanation for his enunciation of the death-drive. *Beyond
the Pleasure Principle* was written and circulated for comment in 1919 when Sophie was still
healthy and flourishing. It’s not too hard to surmise, however that the stark slaughter of the war
and these personal losses were a significant part of what informed the reformulation in Freud’s
thinking in these later years. I think there is also another layer of personal experience informing
Freud.

Freud had smoked 20 cigars a day for most of his adult life. He noticed in 1917 a painful swelling
on his palate. It receded but by April 1923 the growth had become too large and persistent to be
further neglected. Freud knew his smoking was the cause and had kept the condition a secret
from everyone for some time, for fear he might be ordered to give up his addiction (Gay, 1998, p.
418). We can only wonder how conscious Freud was of the connection between this personal
conflict and his formulation (Freud 1920) that the aim of instinctual life leads to death. This
theory did not sit well with an instinct of self-preservation. Freud resolved the contradiction by
saying that the task of the self-preservative instinct was to make sure that the drive to death
wasn’t interfered with:

> What we are left with is that the organism wishes to die in its own fashion. Thus the
> guardians of life too were originally the myrmidons of death.
> (Freud, 1920, p. 312)

A physician among physicians, he consulted not an eminent specialist but someone whose
competence he had earlier expressed some scepticism about. In April the growth was excised.
Something went terribly wrong on the operating table. Freud bled heavily both during and after
the procedure. He was left in a room with only the company of another patient, described later
by Anna Freud as a ‘nice, friendly, retarded dwarf.’ (Gay, 1988, p. 419) It seems the dwarf saved
his life. Haemorrhaging massively, Freud had rung a bell for help but the bell was out of order.
Unable to call for assistance, Freud was helpless. Fortunately the dwarf rushed out to get the
nurse and, with some difficulty, the bleeding was brought under control.

Two months later, in June, Freud’s beloved grandson, Heinele, died. Heinele was four and a half,
the younger son of Sophie, the younger brother of our little cotton reel boy. The whole family
adored Heinele. Freud wrote:

> He was indeed an enchanting fellow and I myself know that I have hardly ever loved a
> human being, certainly never a child, so much as him (Gay, 1998, p. 421) … I find this loss
> very hard to bear. I don’t think I have ever experienced such grief; perhaps my own
> sickness contributes to the shock. I work out of sheer necessity; fundamentally everything
> has lost its meaning to me.
> (Clark, 1980, p. 441)

It was the only occasion in his life when Freud was known to shed tears (Jones, 1957, p. 96).
When, in mid-July, Ferenczi asked why Freud had not congratulated him on his fiftieth birthday,
Freud replied that he would not have omitted this courtesy to a stranger.

It is connected to my present distaste for life. I have never had a depression before but this now
must be one.
In a letter to Eitingon in mid-August he wrote, ‘I am still being tormented in my snout and obsessed by longing for the dear child’ (Ibid). In another letter he writes, ‘He meant the future to me and thus has taken the future away with him’. (Ibid) Again, with this bereavement, Freud is painfully aware of both whom and what he has lost with Heinele.

In October he underwent further surgery and the whole upper jaw and palate on the right side were removed under local anaesthesia. He was 67. There were to be 30 more operations, ‘many of them grave, and some inept’ (Wollheim, 1971, p. 216), all in an age when there were no antibiotics and no intra-venous feeding. Yet there was much vitality left in Freud.

Inhibitions, Symptoms and Anxiety

Inhibitions, Symptoms and Anxiety (1926), contains Freud’s radical revision of his understanding of the origins of anxiety. As far back as 1900 in The Interpretation of Dreams, Freud had asserted that birth was the first experience of anxiety in a child. In 1905 he proposed that anxiety in children ‘is originally nothing other than expression of the fact that they are feeling the loss of the person they love’ (Freud, 1905, p. 147). For this insight Freud thanked ‘a three-year old boy’ whom he heard call out of a dark room,

Auntie, speak to me! I’m frightened because it’s so dark. Auntie asked what could that do, when he still couldn’t see her. That doesn’t matter, the little boy argued, if anyone speaks, it gets light.

(ibid, footnote)

Thinking about what the absence means, Freud deduces that what the little boy was afraid of was not the dark but the absence of someone he loved.

This evocative vignette is in a footnote to which Freud added, in 1920, his long-held formulation that neurotic anxiety stemmed directly from unsatisfied libido, which turned into anxiety. He described how anxiety and unsatisfied libido were related ‘in the same kind of way as vinegar is to wine’ (Freud, 1905, footnote, p. 147) For 30 years Freud had remained faithful to his theory, in spite of the challenging clarity of his domestic observations.

But by 1926 he has come to regard anxiety differently. He now sees it as a state of helplessness that revives very powerful infantile memories, where the perceived danger reawakens the state of biological and psychical helplessness experienced by the infant in the absence of the mother. In this re-formulation Freud distinguishes two types of anxiety: automatic anxiety, where the ego is swamped by the traumatic situation, and signal anxiety where the danger is anticipated. He understands both forms of anxiety, signal and automatic, as deriving from ‘the infant’s mental helplessness which is a counterpart of its biological helplessness.’ (Freud, 1926, p. 295)

He sees this experience of extreme helplessness as the prototype of any situation of trauma. I think we can hear in the background the terror in Freud’s utter helplessness as he started to drown in his own blood after his first surgical procedure in 1923.
He writes that when a sufficiently extreme external event impacts on the mental organisation, its effect is to obliterate all defences against anxiety. He suggests that when the external event ruptures our normal defences, our infantile impulses and fears are all given fresh life. The external event is perceived as confirming our worst fears. The anxiety that then overwhelms us comes from internal sources, although the anxiety-provoking event is external.

There is debate among psychoanalysts as to the importance of phantasies, compared with reality, in separation anxiety and object loss. Freud addresses the comparison between external and internal dangers with the following:

One objection to it (the comparison) is that the loss of an object (or loss of love on the part of the object) and the threat of castration are just as much dangers coming from outside as, let us say, a ferocious animal would be; they are not instinctual dangers. Nevertheless, the two cases are not the same. A wolf would probably attack us irrespectively of our behaviour towards it; but the loved person would not cease to love us should we be threatened with castration if we did not entertain certain feelings and intentions within us. Thus such instinctual impulses are determinants of external dangers and so become dangerous in themselves; and we can now proceed against the external danger by taking measures against the internal ones.

(Freud, 1926, p. 303) (my italics)

Freud is recognising the interaction between phantasy and reality but stressing that it is ultimately the need or instinct that accounts for the traumatic or dangerous experience of the situation. He is saying that the danger and anxiety is really about retaliation, provoked by our own hostile, predatory instincts, instincts that he most clearly anchors to the Oedipus conflict. Normally we defend ourselves against any awareness of this drive to attack, but the effect of the external trauma is to shatter our defensive organisation.

If we think of little Ernst vengefully ejecting the mother-cotton reel out of his sight we can see something of what’s at stake in this interplay between fact and phantasy.

_Beyond The Pleasure Principle_ (Freud, 1920) contains a bleak footnote, added some years after the event of the cotton-reel game.

When this child was five and three quarters his mother died. Now that she was really gone, the little boy showed no signs of grief. It is true that in the interval a second child had been born and had roused him to violent jealousy.

(Freud, 1920, p. 286)

No sign of grief? How can we understand this observed absence? Freud seems to be linking the apparent indifference of Ernst to his violent jealousy. You will recall that Sophie was pregnant with her third child when she died. Freud has by now provided us with a language to try and think about this.

How is the pain being negotiated here?

Is this the triumph of the manic defence that was recognised in _Mourning and Melancholia_ (1917)?
Is this a narcissistic identification and deadening to avoid the pain of the loss?

Is the perceived absence a way of avoiding unbearable guilt?

Whose pain is it that’s being negotiated?

Are we hearing more about the identification of the grief-constricted observer whose own baby brother had died in his second year, whose own mother and nanny were lost briefly to him in his third year?

Have we come up against an absence of understanding in Freud’s thinking for which we must wait for subsequent generations of psychoanalytic thinkers to address?

With the paucity of information these questions can only be speculations and must remain unanswered. I hope, however, that the very nature of these questions demonstrate the enlivening light that Freud’s writing brings to the polar night of psychic pain and how it is negotiated.

In Symptoms, Inhibitions and Anxiety (1926) Freud is presenting the fear of separation as the original model of anxiety. This new formulation, he states, is not ‘… so much a matter of taking back earlier findings but of bringing them into line with more recent discoveries’ (Freud, 1926, p. 298). While he doesn’t specify in this paper what these more recent discoveries are, they cannot be unconnected with his theory of the life and death instincts. With sadism and aggression now expressions of the death instinct they must constitute a primary cause of danger and thus of anxiety. Like the best of detectives, Freud has been establishing an unconscious motive and cause for the separation. As little Ernst might have put it, ‘when I am angry with people they die’.

Freud now sees anxiety as the original reaction to helplessness in the trauma and it is this anxiety that is reproduced later on in the danger situation as a signal for help. He is suggesting that what the traumatic and danger situations have in common is that they stand for a separation from or a loss of a loved object, or that object’s love. He places the loss of the loved object as one of the most central anxieties.

He proposes that the traumatic or danger situation from which anxiety stems varies with age and in normal development succeed each other. In chronological order these dangers are: birth (which seems more like the fear of annihilation), loss of the mother as an object, castration anxiety, loss of the love of the object and loss of the love of the superego. However, all these danger situations can persist side by side and come into operation simultaneously. If we go back to young Ernst, how do you deal with the loss of mother’s provision, the loss of mother’s love, the loss of a vital part of one’s own self-functioning, the loss of one’s own self-regard when you are any age, let alone five and three quarters?

From now on Freud’s emphasis is on the weakness of the individual’s ego. He considers that the ego, once it has grown stronger, is capable of anticipating the trauma, expecting it and reproducing it in attenuated form in order to work it through, as with a cotton reel, perhaps, or, possibly, with serial surgical procedures. He perceives that repeated experiences of satisfaction also modify anxiety.

Repeated consoling experiences … are necessary before it (the infant) learns that her (the
mother’s) disappearance is usually followed by her reappearance. Its mother encourages this piece of knowledge which is so vital to it by playing the familiar game of hiding her face from it with her hands and then, to its joy, uncovering it again. In these circumstances it can, as it were, feel longing unaccompanied by despair. (Freud, 1926, p. 330)

Although these three papers contain no explicit references to separation in the clinical setting, this evocative passage reminds us of the alternation of separations and reunions in therapy and analysis (Quinodoz, 1993, p. 57), the possibility of light and warmth coming to the arctic night.

To conclude, in looking at some of the development of Freud’s understanding of trauma and loss, I have tried to demonstrate the importance of his family experience in this. When we read Freud writing about how his father’s death ‘revolutionised his soul’, I think he is making a clear connection between his personal experience and his theoretical formulations. I’ve yet to find him making such clear connections in his subsequent writing. This is not so surprising, perhaps, given his effort to have psychoanalysis established as a science. A more thorough examination of his correspondence might yield more of his reflections on the relationship between his subjective losses and trauma and the ideas in his papers. My hope is that the examples that I’ve presented from Freud’s life demonstrate how thinking about trauma and loss, what it means to us, can generate new possibilities.

References


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