

The hijacked mind: an examination of the trauma of sexual abuse using the events of September 11th 2001 as a metaphor.

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Abstract

This paper considers the traumas suffered by those who have been habitually sexually abused by a parent living within the family home. The cumulative events of the '9/11 terrorist attacks' are used as a metaphor. This metaphor has helped the author to think and to imagine the scale of the damage to the child's internal world and to appreciate more fully the extent of the losses which are incurred by the victims of abuse. Throughout the paper the impact of annihilation anxiety on the personality development and symptomatic presentation of those who have been hurt by a parent in this way, is highlighted.

One can never fully close the gulf that exists between those who have experienced massive trauma and those who listen. Nor is it desirable, for the essence of the help is contained within the separateness, as much, if not more than, in the listener's ability to imagine and identify with the traumatized.

Laub and Auerhahn (1993) discerned that there is a paradox in understanding severe trauma. They write "while those who have not experienced catastrophic trauma ultimately cannot imagine its reality, those who have cannot imaginatively know it either". They suggest that this is because "knowing in the form of elaborative play requires a capacity for metaphor which cannot withstand atrocity" (p.289). However, I hold that metaphors can be useful for the therapist's thinking, in providing a bridge towards understanding.

A shaken world

9/11 has caught the world's involvement and imagination as we try to grapple with the fundamental confusions and reverberations of catastrophic betrayal, the fear that the West's protective shield is a mere illusion and the consequent loss of our previous 'sense' of safety, our "going-on-being" or "continuity of being" as Winnicott described (1965, p. 60-61).

Sexual abuse is a trauma that similarly involves catastrophic betrayal, the failure of the parental protective shield and the loss of ordinary "going-on-being", leaving the victim in a state of fundamental, even critical, confusion.

Winnicott's concept describes a primitive mental state of relaxed unintegration, which occurs in conditions of trust, based on the reliability of positive environmental experience. The first such experiences are internalized at the breast (Winnicott, 1949).

Then again in 1965 Winnicott wrote:

Good-enough ego-coverage by the mother (in respect of the unthinkable anxieties) enables the new human person to build up a personality on the pattern of a continuity of going-on-being. All failures (that could produce unthinkable anxiety) bring about a reaction of the infant, and this reaction cuts across the going-on-being. If reacting...recurs persistently it sets going a pattern of fragmentation of being. (1965, p. 60)

This paper focuses upon one particular patient's experience of being abused sexually, emotionally and physically by her biological father. I shall refer to my patient as Jessie. She attended thrice weekly psychotherapy with me between 1997-2006. By comparing Jessie's experience to that of New York's inhabitants, we can attempt to imaginatively know about her trauma of having to live with a form of terrorism at home.

Primitive symbolism

Sexual abuse, when committed by a parent does not occur in a political vacuum but, rather like the 9/11 terrorist attacks, it occurs in the context of a highly charged, primitive object relationship, i.e. within a volatile and menacing political climate.

Hanna Segal (2002) wrote: "I think September 11 was highly symbolic" (p. 35). She suggested that the American message in building the Twin Towers and the Pentagon was: "We are all-powerful with our weapons, finance, high-tech; we can dominate you completely". She goes on to say, "the suicide bombers sent an equally omnipotent statement: 'I with my little knife, can puncture your high-flying balloons and annihilate you' " (p.33). One has to agree with Segal; the 9/11 terrorist attacks were littered with menacing symbolic messages, which were delivered in a concrete way. Sexual abuse is similarly highly symbolic: father delivers messages, sometimes consciously and sometimes unconsciously, via his abusive acts. The child receives these messages and is terribly afraid and damaged by them.

From Jessie's account, her father's messages seem to have been like the following:

I will puncture your omnipotent idea that you can have the breast, which you have stolen from me. I will stop you imagining that you hold the seat of power in this family and that you can bask in the protective shield of the breast. I will destroy your infant sense of "going-on-being" just as mine was destroyed. Now that I am father and no longer the abused child, I hold the power: both mother and you are my possessions and I will repeatedly remind you of this.

I believe that both the 9/11 attacks, and familial sexual abuse, exhibit a form of primitive symbolism and I offer other striking parallels:

Firstly, before the attacks, Al Qaida began a grooming process, lulling America out of 'stranger anxiety' and into a state of relaxed inattention. To effect this grooming it seems that the hijackers spent months living peaceably amongst their victims and taking many dummy flights to acclimatize and familiarize the airline companies and the F.B.I to their presence. This build up of innocuous intimacy allowed them to slip beneath America's protective shield and in so doing to become all the more powerful and overwhelming by attacking from within it. I think this is the core of the agony of betrayal-someone attacking from within the protective shield.

The penetrative attacks, which followed this grooming process, led to the collapse of the Twin Towers and to the perverse creation of a Ground Zero situation. I will use these events as an analogy for the damage done to the abused child's internal world through familial incest. By comparing Jessie's 'internal landscape' to the New York landscape, and by comparing her experience to that of those caught up in the hijackings, I shall depict the destructive transformation of a child's developing internal world from a state of 'going-on-being' to trauma site. In addition I will show that the damage to the defence headquarters (The Pentagon or ego of the victim) led to fundamental confusion and to the scrambled marshalling of primitive defences (the beginnings of a hijacked mentality) displayed by my patient and indeed by the Americans as they oscillate between different forms of knowing and not knowing about their trauma. Throughout I hope to highlight the impact of annihilation anxiety on the symptomatic presentation of those who have been abused by a parent.

In "Beyond the Pleasure Principle," Freud (1920) described traumatic neurosis as "a consequence of an extensive breach being made in the protective shield against stimuli" (p. 31). Freud (op. cit.) attributed importance to the element of severe fright, suggesting that it is:

[C]aused by lack of any preparedness for anxiety, including lack of hypercathexis of the systems that would be the first to receive the stimulus. Owing to their low cathexis those systems are not in a good position for binding the inflowing amounts of excitation and the consequences of the breach in the protective shield follow all the more easily" (p. 31).

Terrorists and abusers usually strike when their victims' defense systems are in "low cathexis". It seems evident that they tend to choose victims who have relaxed into a state of "going-on-being". Also most abusers and terrorists have considerable skills in activating this state of non-alertness, and build up of trust. This technique may simply be an act of seeking the safest opportunity to perpetrate their crime; however the work with Jessie has prompted me to wonder whether there is envious intent behind the shattering of their victims' inner sense of relaxation at 'the breast'. In this way of thinking, their criminal act is the sexualized expression of an envious wish to reduce their victim's inner world to the shocked, collapsed, state of their own.

The following is a quote from The Guardian newspaper's first edition of October 17 2001, the day after the Black Box recording of Flight 11 was released to the press. It contained the chilling actual words spoken by the hijackers of Flight 11. Notice that the journalist tried to convey the pre-trauma sense of "going-on-being" in the ground control room:

It was 7.45 am at Logan airport in Boston and ground control was going through the perfunctory business of talking the pilot of American Airlines Flight 11 through the manoeuvres towards take off....Five weeks after the attacks, transcripts of what went on between the pilots of the hijacked planes and air traffic controllers trace the air paths from banality to doom... At 8.14 a.m. two controllers are recorded discussing the fact that the pilot is out of contact. There is silence for 10 minutes until a hijacker's voice is heard. "We have some planes," it says, "just stay quiet and you will be OK. We are returning to the airport. Nobody move, everything will be OK. If you try to make any moves you'll endanger yourself and the airplane. Just stay quiet".

Twenty-three minutes later, at 8.47 a.m. the same plane was steered into the North Tower of the World Trade Centre in New York. This assault was the first in a chain of air crashes that would leave approx 3,000 dead in the U.S.A. This would seismically alter American lives, for their sense of personal safety within a national protective shield was now ruptured and, I contend, due to the loss of fundamental boundaries, their development and 'personality' as a nation has now been hijacked by trauma, threat and survival anxiety.

Compare this with Jessie's account of the day of her father's first sexual assault upon her: Jessie reported that she was still 3 years old, and at that point in her life, although her father had begun to hit her when chastising her, she thought she was loved. Her father would tell her that she was "the apple of his eye". Tragically she was indeed the apple of his eye but in the same perverse way that New York was the 'big apple' of Osama bin Laden's eye. Jessie's brother had just been born and her mother seemed 'wrapped up' in the baby, causing Jessie (and perhaps her father) to feel out of contact with her. The family were at their caravan for the weekend. They all went to the park and she and her father were playing 'chase and tickle', a now familiar game, when he announced that he would take Jessie back to the caravan for tea. Jessie was taken up on his shoulders and they left, leaving her mother feeding the new baby in the park.

This is a flashback from Jessie. Notice that she moves between past and present tense. Unresolved trauma cannot fully be consigned to the past:

I run from room to room playing chase. He lifts me onto the kitchen bench and tickles me. I still thought it was a game – until he made me do things to him, things I didn't want to do. He got angry with me. He told me to be quiet. He told me not to move and I'd be alright. (*Note the similarity to the words of the hijacker on Flight 11*). He pushed my head down. I remember seeing something close up to my face. Next I feel I am choking. I want to be

sick and I cannot breathe. Then I am lying on the floor, crying; my ankle is bleeding.

Jessie reported that when she looked up from the floor she did not recognize her father; but despite her confusion, the incident registered in her mind as a real threat to her life.

This violent sexual assault on Jessie was the first in a chain of many such assaults which would affect her development and personality, for Jessie's life had lost its boundaries, she had been betrayed by one of her primary objects, and her sense of a personal protective shield had been ruptured.

I think that massive trauma causes structural change to the minds of its victims and witnesses (perhaps also to its perpetrators). I think this is because the previously held 'parameters of the possible' collapse, as unconscious phantasy becomes actual experience. Psychic paradigms are permanently altered. An inner atmosphere of "going-on-being" is replaced by a constant sense of foreboding: a feeling that 'anything bad could happen at any time'.

Living with the threat of annihilation is traumatic in itself. Any break in the protective shield is equated with the loss of the good object and exposure to the bad object (O'Shaunessey, 1964). Our inherited reaction to a threat of trauma is a 'startle response'. This prompts the 'fight/flight' defensive posture, designed to eliminate the bad object in one way or another. When humans are actually hurt, we sense the failure of our ability to protect ourselves and others; the inadequacy of our protective shield. At these times we don't just feel exposed to the bad object, we feel caught in its grip.

Whilst I think there is hope that the surviving New Yorkers' startle response may return to normal, as most could run, scream and behave as their minds dictated; this is not the case for the child whose father abuses her. These children are caged, emotionally trapped, and perhaps physically pinned down. This is more like the experiences of the passengers on Flight 11, who (we can only imagine) sat rigidly, obeying their captors, hoping to be returned to safe ground and the airport (mother's breast), as the hijackers promised, whilst waiting helplessly for their nightmare to end. In such circumstances, obedience seems paramount to survival, as escape from the bad object does not seem possible.

The impact of cumulative trauma

T.V. channels transmitted the terrorist attacks live and repeatedly. This diminished the 'great Atlantic divide', and pulled most viewers out of their own "going-on-being" and into identification with the panic-stricken citizens on the run from the bad object. However, I recall seeing one man, appearing out of the dust cloud, standing on the sidewalk, completely grey, covered in dust. He stood unblinking, staring into space, petrified, like a stone statue, his dust-covered briefcase in his hand; he seemed to be like a monument, unveiled in the dreadful space of Ground

Zero, depicting both what was once America and what it had now become. He appeared to me to be overwhelmed, with all instincts to flee the bad object gone.

Compare this with Jessie's state of mind, three years after the cumulative traumas of her abuse began:

I'm told to go home for lunch, he has made me chicken soup. Afterwards I don't want to go back to school, I want my mother. He walks me back to school. I cry. I feel sore. A button had popped off my blouse and this upsets me. I sit at the back of the class and sob. A teacher questions me and all I can say is 'my button's missing'. The teacher sends me home.

When Jessie got home her father beat her for missing school. She poignantly added, "I stare out of the window. No one comes. They never do, but I stare anyway". Like the man on the New York sidewalk, Jessie too just stared like someone petrified. With all defences over-powered by their aggressors, they both displayed the nullification and stupefaction effects of cumulative traumas which have overwhelmed both body and spirit.

An internal Ground Zero situation: the fate of the internal objects

Laub and Auerhahn (1993) agree that in trauma "the internal mother always watches, allowing the attack to occur, or at least failing to prevent it" (p. 287). In the situation of sexual abuse, this is particularly shaming and destabilizing because Jessie felt that her internal mother had seen the abuse. As a child, she carried a painful contradiction inside her mind: Whilst her external mother appeared to 'see nothing and know nothing' her internal mother appeared to be frighteningly 'all seeing and all knowing' - a terrifying omnipresence. This was very confusing for Jessie. Her conscious mind thought she was keeping the secret of abuse from her mother, as her father ordered her to, but her unconscious mind believed she was keeping the secret *for* her mother. With these realizations her internal landscape changed irrevocably. The impact of primary betrayal, and failure of her protective shield induced part of Jessie's internal world to collapse. Like the fall of the Twin Towers, it was as if both of the previously built up, inner parental objects crumbled as their structure became unraveled: they, who had been associated with life-sustaining properties, ceased to exist.

Laub and Auerhahn (1993) suggest that "the essential experience of trauma (is) an unravelling of the relationship between the self and nurturing other; the very fabric of psychic life" (p. 287). As Jessie put it: "My insides are in tatters".

Melancholia is most commonly described by sufferers as "a pit in the stomach... as if someone died." Ground Zero hauntingly depicts the feeling of loss and internal collapse which is experienced in depression. I think that Jessie felt this to be the case and in her therapy it was as if she searched amongst the rubble of her own internal Ground Zero, for her lost loved ones and the lost parts of herself. The search continued (and for some the search may never end) as she tried to restore the collapsed imagoes of nurturing parents. Those who come for therapy don't

necessarily come to tell you how it is: they come hoping you will say, “Here they are look, safe in an air pocket after all these years”.

Jessie lost a unified self in the abuse trauma. This can feel irreparable. As a child Jessie unconsciously recognized this when she cried over her lost button.

Jessie’s button can be understood as a symbol of her protective shield (her early mother’s nipple), the object which had held her together as an infant and which ‘flew off’ in the assault, but, in its absence, reminded her of what had been lost. The gaping hole left by the missing button could be thought of as representing a “psychic hole” (Freud, 1887-1904 p.104) that Jessie feared she was pouring through and suffering annihilation (Symington, 1985). I also think that the fright of her button flying off was unconsciously linked to her experience of being suddenly and perversely weaned (from mother’s nipple to father’s penis) at a point when Jessie was still reeling from the shock of her brother’s arrival.

The truth as a bad object

How does a child survive this state? What is a child to do? Often they deny the truth. Dissociation and omnipotence take over in the flattened space and the truth, in its awfulness, is perceived to be the actual bad object that they need to resist (Klein, 1946 p. 102; Laub and Auerhahn 1993 p. 288).

To defend herself from the devastating truth of her private Ground Zero, Jessie needed to divest herself of the remnants of her traumatized self and her persecutory inner objects. Thus she began to run away from knowledge as a way of eliminating the bad object.

The presence of annihilation anxiety in a climate of helplessness can prompt the mind to flee from unbearable realities. On the streets of New York, on September 11, a dawning realization began that the planes used as missiles were ‘domestic flights’ carrying Americans. The nation was horror struck. Similarly Jessie’s father used Jessie’s own body, her sexuality and her trust, in a domestic crime against her own family. Such things are hard to withstand.

The mirage self

I suggest that in situations of horror some abused children install a mirage inside; a beautifully made up illusion of what once was or what they wish there to be. This is akin to the initial American proposal to build two replacement Twin Towers, bigger and more prominent than the first, in the place of ground Zero.

Giovanni Liotti (1999) in describing Pierre Janet’s (1907) thinking relayed that for Janet “consciousness is a creative act of meaning making – an activity of personal synthesis” (p.758). Experiences that are too horror-filled or bizarre are encoded in a separate system of “fixed ideas”. Janet suggested this was an attempt to encapsulate the trauma. There can be no synthesis or meaning making, as these are dynamic activities, which cannot occur in a paralyzed or fixed mind.

The installation of idealized parental false objects is akin to Janet's "fixed ideas". Jessie's mirage of 'wonderful parents' imprisoned both her knowledge of the trauma and her ignorance of it, rendering her mind fixed in the trauma moment, throughout her development into adulthood.

The abused child uses dissociation and idealization to help the mirage withstand inspection by the self and by others. She relates to her abusive parents as if they are ideal. In this way of thinking, the attachment one sees, in a child, to the abusive parent is not an attachment to a bad object, but a desperate clinging to their defensive mirage of 'ideal nurturing parents' that they think will hide the truth of their shameful circumstances. Jessie told me she "adored" her father's smile. Perhaps when one inhabits the bleakest of landscapes, the simplest of primroses can mean so much.

In a letter, Jessie told me about her mirage:

As a child I had a fantasy where I was a pretty, confident and happy girl. A girl who had a perfect life, loving parents who protected her, who took time out to play with her, showered her with kisses and bought her presents because they loved her. ...To enable me to cope during an attack, I would concentrate very hard on my fantasy and wrap myself up in a 'bubble', my own little protective world where no-one could hurt me.

Here we see the installation of fake parents and a fake self, as well as the mirage of a protective shield: her "bubble". These things were grasped and held onto as if her psychic life depended upon it, especially at the moment that her father, by his intrusion, threatened to reveal the truth again of her private Ground Zero.

Perverse twists

When one is trying to run from the truth as a bad object, lies and secrets can come to be perceived as places of safety, like good objects, seeming to offer shelter at times of need. It is interesting that the protective shield Jessie was able to form was an exact copy of the misshapen, perverse, shield that her mother demonstrated to her: silence, denial and falsities.

Jessie kept her abuse secret for the first year of therapy, requesting help for bulimia nervosa. She was also an alcoholic, having used vodka from the age of nine to nullify her experiencing and thinking self.

The act of keeping the abuse secret is like a child running into a cupboard to lock herself away from 'the bogey man', only to find that he is already in the cupboard. This is because the secret trapped Jessie with her external abuser and with her shaming 'internal mother' who was made all the more powerful by being the only witness. The following dream of Jessie's and other similar dreams of hers prompted this understanding:

A little girl is trapped in a small room or cupboard. Someone tells her that her family has left her all alone, that no one wants her. She is terrified but can't get out of the cupboard. Everything appears dark.

Americans feel that Ground Zero is the epicenter of their national rage, their grief, and their family bond. For an abused child their Ground Zero is the epicenter of their shame and their aloneness: the fissure in her family's bond. They too have rage, but it is directed at the self who has internalized the imagoes.

Splitting and Multiple Personality formation as a form of encapsulation of traumata

With embarrassment and a fear that I would have her sectioned, Jessie eventually freed herself from another secret. She told me that her 'mirage-self' had a name: "Debbie". This is a name she had borrowed from her favorite film "The Sound of Music". (It was the real name of a child actress in the film whom Jessie liked). One way of thinking about "The Sound of Music" is that it is a film about the restoration and emotional re-habilitation of a father. Jessie watched the film obsessively as a child and I think of this obsession as her way of escaping her 'cupboard'.

My patient also had "Little Jessie" who contained all the experiences. "Little Jessie" was hated.

Like a complementary pair of "fixed ideas" these two characters persisted throughout her development until the loosening process of therapy. It was "Little Jessie" who internalized it all and who was felt to possess the images, now felt to be torturing objects. 'Debbie' on the other hand was adored for her non-experiencing. Jessie interacted with her real parents as 'Debbie', supporting her own mirage and the 'mirage' her parents created of themselves. One can see how her rage was kept away from the fragile mirage, the real parents and the real world. Abused children usually tell no one and end up in a very isolated place where the experiencing self is the hated object.

In one session Jessie said:

After an attack, I was always left alone, rejected and unloved. Everything hurt inside and out, physically and emotionally. I would sit on my bed crying, staring at myself in the mirror (note that she no longer stares out of the window looking for her mother). I hated myself, I hated my face, I hated my body and I hated my life. I was a shy, weak, worthless and unlovable child. The anger I felt towards myself was incredible.

And:

I wish I could explode and get all the shit out, once and for all. I have an image inside my head where I burst and little Jessie comes shooting out in pieces. First her legs come out, followed by her arms, then her body and finally her head. Out. Out. Out. She's gone and I don't ever have to deal with her anger, pain and sadness again. I want rid of her, I hate her.

On several occasions Jessie cut her wrists and thus repeated the cluster of wrongs: primary betrayal; the self used to abuse the self; a wrongful penetration; and the

break in her protective shield (her skin). This time the projectile was not a penis, but a knife held in her own hand guided by omnipotent rage.

The hijacked mind

The traumatized person whose external good objects are perceived to have collapsed by their utter failure to function, experiences herself as having killed off her internal good objects. In everyday life this had terrible consequences for Jessie. She felt guilty every day for her refusal to have contact with her parents, feeling sure that they were “dead or dying.” She also worried that she would harm or abuse her own daughters (both were conceived and born during the course of her therapy, after 8 years of previous infertility was corrected by a new abstinence from alcohol). Indeed she was terrified of her own unconscious, fearing anything she might momentarily imagine or wish for would materialize. This was the consequence of her ‘fundamentalist’ father transforming her ordinary oedipal wishes and fantasies into awful, concrete reality. Jessie reacted to her unconscious as if it was a terrorist part of herself; she could not allow herself to relax; and generally she avoided all men. She was unable to enjoy sex with her husband and she felt ashamed at her occasional capacity to have an orgasm.

Due to the damage caused to Jessie’s developing ego (her Pentagon or Defence Headquarters) the marshalling of her defences was scrambled, confused and haphazardly over-reactive or under-reactive. She found it very difficult to distinguish between good and bad external objects. This frequently led her to leap to wrong conclusions about where the actual threats lay, like the American and British Governments post 9/11. This fundamental confusion also made her prey to paedophiles outside of the home as a child. At the same time her damaged ego was unable to enlist the help of good objects, like her teacher, because of her fear of encountering the ‘perverse object’ who ‘flips’ from good into bad, as traumatically experienced with her parents.

In addition to this fundamental confusion, Jessie’s mind was constantly hijacked by flashbacks of abuse, which were felt as persecutory and were a central feature of her presentation. Jessie described a sense of relaxed “going-on-being” which would be violently disrupted by seemingly insignificant sensory data.

For example, Jessie clipped her car in a supermarket car park because she was disturbed by seeing someone wearing a coat with a button missing. The image hijacked her mind to the moment she lost her button.

Importantly, as a child Jessie began to equate feelings of relaxation, to trauma. In response to this reaction she began to deprive herself of any feelings of security or trust in others. In this way, what was once an inter-personal dynamic between Jessie and her father became an intra-psycho dynamic, compulsively repeated. As soon as a part of her relaxed, another part of her adopted the role of father and destroyed the moment, by intruding flashbacks, which, to Jessie, appeared to be current rather than historical. This resulted in a daily rush of ‘startle responses’, which took on the menacing quality of father’s presence. (Her inability to relax

meant that she could not shift to the couch until she had already had 4 years therapy). The 'Terrorist' was now resident within her own mind. She perceived the whole world to be full of abusers, and she feared she might be one of them.

This state of partial inner collapse, hidden by a constructed mirage of fixed ideas and secrecy, as I have described, was the condition of Jessie's inner landscape when she presented for treatment; but I did not know that.

Treatment

The experience of working with Jessie and other patients who have a 'Ground Zero' situation is analogous to the New York Fire Department's gradual, reluctant realization that they were involved in a recovery operation, not a rescue mission.

Jessie often engendered 'rescue' urges in me. I found these omnipotent ideas unsettling. One needs to be prepared to stand with the patient on their 'Ground Zero' and help them face their truth. However one needs to do this in full awareness that the space, now occupied by omnipotence, can act like a 'Black Hole' drawing everything that is too near into annihilation. On 9/11, the firemen's sense of emergency, confusion and identification with the victims, was lethally combined with instinctive urges to rescue, and a belief that their expertise would act as a protection against harm. I think the same elements can pull therapists towards danger.

At the beginning of Jessie's therapy, she used my consulting room as "The Cupboard" of her dreams, which she ran into to escape her situation. However, once the transference relationship developed, she experienced me as 'the Bogey Man' in the cupboard, pointing out that she had no one who loved her. In the transference, it was as if I held the awful truth, and she did not. I had become the bad object who could pop her mirage and reduce her to 'Ground Zero' again by speaking.

When she began to reclaim the truth for herself Jessie became very anxious and depressed. She brought many dreams about structures collapsing, and about falling, or being trapped. Here is an example:

I am on the top floor of a high building. I get into the lift and suddenly it races down at a forceful speed. As I go down I see faces of people staring at me on each floor. I am terrified; I am all alone and have no control of the lift. I am afraid as I know when the lift hits the ground I will die.

With immeasurable sadness I also report that very late in treatment, when her memories shifted from being somatically held to being held in her mind and when she began to trust that I would not reject her or abuse her, Jessie likened these 'lift dreams' to her father's sexual act upon her and her fear of dying, as the pace of his rape quickened.

Sometimes it felt as if she placed intense pressure upon me to abandon my separateness of mind so that, once seduced away from my boundaries, I would join

her, metaphorically, in the 'lift' of her nightmares. We would then both fall forever, as Jessie and her father did 30 years in the past.

Jessie often perceived me to be too distant or unfeeling. For example, the waiting room had a glass partition. She often arrived very early and sat watching for me, turning me into the mother who never seemed to come. Silences and breaks had a similar quality, as did gaps in my empathic attunement to her (of which there were many). She would mostly begin each session by telling me of something dangerous or distressing which had happened to her in the gap. After a while I lost some empathy and thought: "She's so dramatic," but later I began to think of this as a wish to tell the mother therapist: "Look what terrors happen to me when you've forgotten about me and focus on the baby!"

At such times I would experience such a painful countertransference that I would feel a pressure to be extra attentive and giving, hence losing my separateness at a stroke.

Sometimes Jessie experienced my quiet thinking to be like two people whispering behind her back, hatching plans. She reacted to me as if my mind contained a murderous couple. This was simply natural given her inner circumstances. She began to be interrogative as soon as she perceived that I was thinking and not just passively listening. At these moments of perceived separateness, of differentiation between us, she began to be abusive towards me. The atmosphere would suddenly change, as she grilled me over something I had said or done (or not said or done) and scrutinized it for signs of coldness, betrayal, seduction, disbelief, failure to protect her or hold boundaries. I would often feel shocked, pinned down and momentarily afraid of the possibility of professional annihilation. With my own "going-on-being" vaporized by her, I would wonder what I had done to upset her so much and be really quite keen to avoid it happening again. I felt a push to keep *my* bad object at bay by being nice to it. I began to understand more about Jessie's need to appease her menacing father.

On another occasion Jessie reported having kicked and destroyed her faulty vacuum cleaner, in a blind rage. It seemed clear that the faulty machine was a stand-in for the therapist who was not making it all go away. It became obvious that Jessie could become identified with her abusive father. On such occasions her children's expectations that she assist their own "going-on-being" stimulated her envy of them. This temporary envy, of 'the child who has a protective shield', would prompt her to startle them out of their self-absorption by shouting at them. Gradually Jessie began to recognise their fear, seeing "Little Jessie" in their eyes, and her father in her own behavior. In the last year of therapy, instead of her more usual paranoid fear that I would inappropriately ring Social Services about her care of the children, she became tearfully regretful. Her distress, caused by this fresh more reflective view of herself as an active agent, gave me hope that Jessie was moving towards a capacity for empathy with her children and maybe even with "little Jessie".

Endings and the importance of mourning

My chosen metaphor has helped me to hold in mind Jessie's multiple losses and fear of being killed. I began to see her difficult transference behavior in a more empathic light. This empathy has, in turn, helped my patient to think about her experiences and to mourn losses which had previously been unappreciated by her conscious mind. I should say that the work of grieving for these losses might only arise very late in treatment. However, I think the concepts of catastrophic loss and of annihilation anxiety need to be held somewhere in the therapist's mind, informing her or his thinking, when working with those who have been abused by a parent, particularly a parent who controls by menace.

As the dust settled, and the years passed we made real, Jessie's Ground Zero, and accepted it as our work site. In the process we found Jessie's drive to work hard, like the New York recovery personnel, to find and reclaim and sometimes to memorialize each part of her inner world.

I began to see Jessie's own impulse to create after destruction; to be a protective shield for her children, and to go forward towards mourning her own lost childhood: In particular the loss of "going-on-being" which tragically occurred so shortly after she first experienced it as a baby at the breast. The truth was slowly re-instated as a good thing. This has enabled Jessie to gradually own what she once only wished to flee from. Although occasionally sad, she can allow herself good times of true "continuity" that are not interrupted by flashback intrusions, and she is a good mother to her girls. I appreciate that the work was long and arduous and initially costly to the health service, but the need for more costly medication and hospital admissions were averted, as was the need for multi-professional involvement such as the alcohol services and crisis response teams; and I believe that the trans-generational benefits are evident. Jessie's children, whom I have met, are happy individuals. To date Jessie has claimed an enjoyable life as a teacher, for which she trained upon her discharge; she had previously survived on a disability living allowance. Jessie has a solid and intimate relationship with her husband, and she has a small group of friends who know her story and who have replaced me as her confidants (although she writes to me occasionally). She is now not just a survivor, but a liver, and a lover, of life.

I would like to end with Winnicott's (1970) observation on children who have experienced a high degree of environmental failure:

They know what it is to be in a state of acute confusion or the agony of disintegration. They know what it is like to be dropped, to fall forever, or to become split into psychosomatic disunion. In other words, they have experienced trauma, and their personalities have to be built round the organisation of defences following trauma. (p. 260)

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