Section 5
Psychoanalysis and politics
13. Accidental pasts and the truth of history

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The question of ‘psychoanalysis and politics’ begins with a working assumption of two objects (whatever we make of their relation to names, especially within the ontology of psychoanalysis). Of these, ‘psychoanalysis’ invokes the possibility, or meaningfulness, of an individual and ‘politics’ invokes the possibility or meaningfulness of a commonwealth. Their association, the question of psychoanalysis and politics, thus invokes and may help to problematize the relation of the one to the many, of self to other, of subject to world, of private ‘law’ and the law of the state, of intension to extension – there are many theoretical, methodological and disciplinary ways of formulating these terms. They are, however, some of the most basic terms of existence.

Yet, pursuing the question of psychoanalysis and politics, we may also come to question this tension between our supposed objects. Psychoanalysis involves an other. Therapy, to take it at its most practical, involves a curative intervention, but most practitioners would insist this is above all a practice of ‘taking care’ or ‘looking after’ which contains a spectrum of responsibilities in a shared space or world. The word therapy may be indicative here. It is derived from the Greek verb therapein which, unlike the verb hiatrein [to heal/cure] and its derivative hiatros [doctor], denotes not the end-product, essence or telos, not a finite state, but the ongoing act of ‘looking after’ someone or something in the manner of a therapeôn [an attendant or caretaker]. Such care, or consciousness, or commonality, holds within it societal consciousness and ‘politics’ (politics and polis are

1 The question of name and object is inherent to the issue at hand. See, for example, the brief discussion in Ernesto Laclau, On Populist Reason (Verso: London, 2005), 101–17.
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words with a meaning looking back to the shared space or enclosure, or citadels). This is simply to suggest, as indeed many have, that the thinking of Freud – we might add Nietzsche, Marx and others – is key to the process of the dissolution (literally, ‘an-alysis’) of an interiorized point of being, of a Cartesian subject, and thus also key to a fundamental reconsideration of relations between the individual subject, the society and politics at large.

Critically speaking, we find ourselves in profitable if not unfamiliar difficulty in a manner that pertains to both history and philosophy: if we choose to separate psychoanalysis and politics, together with their categories, we must answer how, if at all, the two and their inflections can relate to each other; if we choose to conflate them, we must determine whether (if we believe them to be identical) a dialectic or some other relationship is even possible, or (if the two only partially overlap) to what degree and in what manner a relationship exists between them. Either way, psychoanalysis and politics are ‘good to think with’.

To the degree that the specific question of psychoanalysis and politics helps problematize basic terms of existence, its consideration would sprawl beyond the practical boundaries of this volume, let alone this brief introductory note. Yet the threat of projecting fragmented examples is inherently, perhaps even uniquely, appropriate. A partial discussion, something that disavows its capacity as complete representation, can enact a kind of allegory (which may be a model for being, or for the phenomenological understanding of being) or mise-en-abyme of the problem at hand. This is the problem of the fragment and the whole, of singularity and multiplicity. This, we may say, is also the problem of the care of the psyche and care of the body-politic. What is more, this principle also translates, happily, into the most practical action – for example, with regard to the year-long IGRS seminar that constituted the ‘Psychoanalysis and politics’ section of the Psychoanalysis and the Arts and Humanities project, and with regard to the essays by Juliet Mitchell and Jaspar Joseph-

2 Etymology is not the buried truth of words, of course, but it can provide an interesting component of their phenomenology, especially in terms of psychoanalysis. Note that the word curative itself is derived from the Latin cura, which means ‘to take care of,’ ‘to attend to,’ in matters of one’s self, of others and indeed in affairs of the state. Cure does not mean ‘to heal’ (see entry in Oxford Latin Dictionary). For the Greek see Henry George Liddell and Robert Scott (with the assistance of Henry S. Jones), A Greek-English Lexicon, 9th edn. (Oxford: Oxford University Press, 1996).

3 See, for example, Elizabeth Grosz, Becomings: Explorations in Time, Memory, and Futures (Ithaca NY: Cornell University Press), 1999, 3.

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Lester which together comprise this section of the book. We might draw courage, for example, both in the abstract and in a practical sense, from Cornelius Castoriadis’s statement: ‘The world – not only ours – is everywhere in fragments, yet it does not fall to pieces. To reflect upon this situation seems to me to be one of the primary tasks of philosophy today’.

Apart from exchanges during the opening and closing conferences, the ‘Psychoanalysis and politics’ group met to read and reflect on some basic texts. This was a collective discussion, not an exercise in the production of a commentary or an argument. The group began its readings, not surprisingly, with Freud’s Civilization and its Discontents (1930). Discussions focused – much aided by Juliet Flower MacCannell’s observations – on its melancholy, both historical (in view of the date of its composition) and perhaps inherent (when contrasted with Rousseau and others…), and its fundamental formulations of aggression, constraint, freedom and conformity. It is impossible to read this text without bearing in mind Totem and Taboo (1913), with its formulation of collective guilt, the killing of the father and the emergence into sociality, and Group Psychology and the Analysis of the Ego (1921), with its discussion of the primal father, and so on. Whatever we might say in a brief introduction to such heavily annotated texts, Freud’s understanding of individual and communal neuroses constitutes one of the important inaugural moments of the question of psychoanalysis and politics. As Freud says – the matter is of course up for debate:

If the development of civilization has such a far-reaching similarity to the development of the individual and if it employs the same methods, may we not be justified in reaching the diagnosis that, under the influence of cultural urges, some civilizations, or some epochs of civilization – possibly the whole of mankind have become “neurotic”?

But equally, he warns, the attempt to carry our understanding of the tension between patient and environment over to the realm of culture requires extreme caution, if only because that tension may


not exist where, as Freud says, ‘all members of the group are affected by one and the same disorder’.

Without following a canonical historical or conceptual trajectory, the group went on to read Cornelius Castoriadis’s short piece ‘Psychoanalysis and politics’ in his collection of essays The World in Fragments (published posthumously in English in 1997). For Castoriadis, psychoanalysis, pedagogy and politics share a single structure as ‘impossible’ professions, disciplines that explore that question of the law of always putting the law into question. We paused, among other things, on his reading of the Freudian ‘Wo Es war, soll ich werden’ [where id/it was there ego/I shall be’]. How to read Freud? How to read Castoriadis’s reading of Freud? Do either Freud’s formulation or its critique imply a finite progression towards the ego? Towards therapy as ‘cure’ rather than process? Here the group took a certain leap, deciding to read Lacan’s Ethics of Psychoanalysis (Seminar of 1959–60) and especially his comments on Antigone.1 Lacan’s observations (made against the background of earlier Hegelian reading of the play and the conflict of responsibilities, state and religion, civic sphere and family) opened up another area for debate. Yet Lacan, too, in his very different way (at least in Judith Butler’s account and given her critique of Lacan’s structuralist patrimony), may have excluded Antigone, and thus also something within psychoanalysis, from the political.2 The possibility of a breach opens up again, although our readings of Yannis Stavrakakis’ Lacan and the Political (1999) will have provided, at least in part, a counter-argument.3 If, as Paul Verhaeghe (cited by Stavrakakis) writes, ‘all human productions [society itself, culture, religion, science] … can be understood in the light of the [the] structural failure of the symbolic in relationship to the real’,4 then perhaps, as Stavrakakis suggests, ‘it is the moment of this failure, the moment of our encounter with the real, that is revealed as the moment of the political par excellence’. Finally, though not in the sense of a teleological movement, we read

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chapters from Jacqueline Rose’s States of Fantasy.5 Here above all, the notion of fantasy plays a definitive function in the political, not only in the context of abstract analysis, but also most practically in such historical contexts as Israel, Palestine or South Africa.

Beyond the meetings, the two chapters by Juliet Mitchell and Jaspar Joseph-Lester in this section of the project bring together, like all the other sections of this book, work anchored in academic and clinical psychoanalytic practice, on the one hand, and in artistic production, on the other. As a general principle, it seems to me that some movements across disciplinarity may themselves be viewed as an inherently psychoanalytic practice. Perhaps, as the above citation from Verhaeghe puts it, ‘all human productions [society itself, culture, religion, science] can be understood in the light of the [the] structural failure of the symbolic in relationship to the real’, and if that is so, then a movement across disciplines, at least when it is successful, rests on a ‘structural failure’ of disciplinary boundaries (for instance, those between ‘critique’ and ‘art’) and their relationship to being and the work of thought.

The two essays, by Mitchell and Joseph-Lester respectively, were not created together. They are not representations or reflections of each other. Mitchell deals with the role of sibling relationships and especially sibling trauma in the formation of fundamental social identities through a pointed discussion of the case, known from the work of Freud and others, of Daniel Paul Schreber. Joseph-Lester, adopting the poetic voice of an interiorized reflection, meditates on what we might – borrowing from such terms as ‘social psychology’ or ‘social anthropology’ – describe as ‘social architecture’. He speaks, without ever explicitly naming it, of the building known as the Goetheanum, the world headquarters, near Basel in Switzerland, of the Anthroposophy movement started by Rudolph Steiner. Do I, writing this introduction, have the right to name what is deliberately left un-named in Joseph-Lester’s words? Perhaps as much, or as little, as I have the right to note that Mitchell, who does not speak of the Goetheanum in her essay, has nevertheless in conversation acknowledged her longstanding interest in the Goetheanum and in anthroposophy’s thematizing, for example, of the transmigration of souls, which she fleetingly links to the many ‘Daniels’ in Schreber’s family (the father Daniel Gottlob, the elder brother, Daniel Gustav, and Daniel Paul Schreber himself) and to Schreber’s enigmatic reference to the ‘soul murder’ which his analyst, Paul (another repeated name) Fleschig, had committed upon him and which Mitchell interprets.

6 Castoriadis, The World in Fragments, 125–36.
10 Paul Verhaeghe, ‘Psychotherapy, psychoanalysis, and hysteria’, The Letter, vol. 2 (1994), 61, cited Stavrakakis, 73 (in this and the next citation, the ellipses are Stavrakakis’s).
ultimately, as ‘the inhabitation of one person by another’ [see p. 0000]. We are, to be sure, dealing with brief points of contact. These points, nevertheless, like the infinitesimally small tangents of a circle and a line in geometry, are points where ‘touch’ can occur. For Mitchell, ‘sibling trauma’ is the nuclear relationship on the long march towards the social.’ Beyond the horizon of sibling trauma lie, as she puts it, the relationships of ‘peers, affines, friends and enemies’; it is necessary to appreciate this axis of analysis for the proper appreciation of ‘the politics of violence (or peace)’ [this volume, p. 0000]. For Joseph-Lester the very substance of the building, its rough concrete, provides the ‘concrete’ substance of community which the building is designed to house and which bonds the individual occupant, in her or his space, to the commonwealth. Both, we might say, draw us into discussions that point in the direction of, ultimately, the political, that which belongs to the polis, the place of shared living.

Underlying Mitchell’s short essay is a very large project indeed. Where the conventional models of analysis rely on ‘vertical’ relationship within the family (the father, the mother and the offspring), she is, in fact, proposing, on the basis of her careful analysis of the case of Daniel Paul Schreber and his siblings – his elder brother and sister, and his two younger sisters – a ‘horizontal’ model which, through its various modalities of anxiety and identification, envy and separation trauma (associated with, but different from, Winnicott’s notions of separation), love and hatred, forms the self and structures our social relations. She is, in fact, hinting at a potential new role for a so-called ‘social unconscious’ for the ego’ invested in sibling trauma [this volume, p. 0000].

Where Mitchell’s essay relies on some of the formalities of clinical discourse, Joseph-Lester offers us a literary fantasy. He uses – not surprisingly, but in clear distinction to ‘academic prose’ – what is known as ‘free indirect speech’, that much-studied modality of speech which brings to the fore fundamental questions of the inside and outside of the ‘I’ and problematizes its voice: ‘He had come to see the concrete. He wanted to get to physical grips with the material that he loved. He had heard about the monumental and virile structures that had been constructed close to where he once lived. This place now stood before him.’ The speaker is the ‘he’, the grammatical third-person, and yet clearly this is the interior voice of the first person, the ‘I’. The tension between the ‘he’ and the ‘I’, we must note, is exactly the problem at the core of sibling rivalry, the dynamic setting for the ‘horizontal’ trauma that is the substance of Juliet Mitchell’s essay. Joseph-Lester’s ‘He/I’ voice is that of the architect in question, the elusive ‘I’, we may further disclose (although this disclosure may again be inappropriate given that Joseph-Lester has chosen not to name him), is Le Corbusier. To find him, we have to search ‘in the details’ (God, as architect Mies van der Rohe or, alternatively, so the myths go, as Aby Warburg said, is ‘in the details’ where shd the close-bracket be? – & do you have a ref for MvdR and AW? of Joseph-Lester’s essay: the name appears, but only obliquely, in the sign at the bottom-left corner of the image and in the reference within the caption,12 As Joseph-Lester points out elsewhere, again in a personal communication, this ‘I’ voice, Le Corbusier, is supposed to have toured the Goetheanum, and apparently did not utter a word throughout the whole day of his visit.13 Joseph-Lester’s work here deals, in the form of material thinking, with the question of communal space and the enclosure of an individual within the frame of a polity (a commonwealth, a polis). The raw concrete, so important to the building that is the Goetheanum and fetishized by Le Corbusier, is crucial to the kind of order we are invited to imagine through the literary reflections of the architect. ‘The concrete’, as Joseph-Lester says, ‘allows it’ [this volume, p.000]. This concrete comes through in the prose of the architect:

He was determined to design a place in his building where the spatial qualities of the material could be fully experienced. He believed that the roof would be the site for this; it was the space that people would share. Here would stand an elevated piazza for the use of the inhabitants of the building. It would be enclosed by a surrounding concrete wall and would be an outdoor room open to the sky. The hot summer evenings would bring people outside; here they would gather on the hard roof and watch the concrete transform into new forms [this volume, p.000].

We are speaking, in ways that are different, and which can nevertheless be made to touch, about ‘formative’ elements of the social, and through the social, of the political, in the individual’s mind. The result, in the case of this volume and this meeting of academic and creative discourse as in other chapters of this book, is elusive, of course. But it is only through such elusive contacts that we can mediate the individual and the community.

12 See p. 000. The elision of the name is a crucial literary device, we might say. It has a long history reaching back to Odysseus’s elusive use of his name in Homer’s Odyssey and, not least, also unfolds in psychoanalysis. 13 Joseph-Lester, in conversation with AK, 3 August 2009: ‘the narrative is a “fictional” account of Le Corbusier’s visit to the Goetheanum (although it is known that he did visit the building) and his fetishization of the concrete or, in other words, his belief in its spiritual, social and political meaning. The text follows Le Corbusier’s ‘later’ design and building of the unité d’habitation in Marseille’. 

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14. The ‘sibling trauma’ and the case of Judge Daniel Paul Schreber

Juliet Mitchell

This chapter proposes a possible further way of understanding the psychosis and delusions of Schreber, whose Memoirs Freud analysed in 1911. Freud’s account confirmed the importance of infantile sexuality that he had spelled out in ‘Three essays on sexuality’ in 1905 and indicated that Schreber’s symptoms derived from a conflict between his homosexual desires and the taboo on them. In the case history we read how Schreber transferred his ambivalent feelings towards his older brother on to Professor Flechsig, the first psychiatrist to treat him, and then transferred his love/hate for his father on to his concept of God in a delusion that he was a woman who, fecundated by God, would repeople the world with a new race of men. The shift from brother to father that Freud delineated was seamless: fathers and brothers (or mothers and sisters) belong, both for Schreber in his delusion and for Freud in his analysis, in the same category and the more important figure for the child to whose status Schreber had regressed is always the father of the Oedipus complex. My additional reading is based on the assumption that sometimes

siblings form an autonomous horizontal axis which interacts with the vertical generational one. This changes somewhat if we add siblings to the picture.

There is, additionally, a thesis beyond the scope of this essay which nevertheless prompts it in this context. I argue that what I call ‘the sibling trauma’ is the nuclear relationship on the long march towards the social. The human neonate is born into the social group as well as to its family of origin. When, at around the age of two, it discovers that it is no longer the one and only baby, it is forced from infancy into childhood – the older sister or brother, sometimes a unique one among unique others, sometimes just anyone among any others. This lateral relationship expands into peers, affines, friends and enemies. We cannot understand the politics of violence (or peace) if we do not develop a model of this horizontal axis. Looking at Schreber and his siblings makes only a small contribution to this task. Because we are looking at pathology, the focus is exclusively on the pains, not the very many pleasures of siblinghood.

Freud’s account of Schreber’s delusional system, privileged Schreber’s desires and used analytical interpretations to understand these. My ‘addition’ explicitly and implicitly uses Freud’s own later theories to stress the psychic importance of foundational trauma and the (re)construction of these in analysis. In her work on early and late Freud, Ilse Grubrich-Simitis claims that there are two great books which are infused with the insights of Freud’s self-analysis: The Interpretation of Dreams (1900) and Moses and Monotheism (1939). She labels the first ‘the book of desire’ and the second, written under the external threat of rising Nazism and the internal threat of cancer, ‘the book of the trauma’. The analysis in 1911 of Schreber’s case falls under the aegis of desire.

Although desire retains its importance, to add siblings to the picture, as I wish to do, is to add trauma. This is central to this reevaluation. As understood by psychoanalysis, a trauma comes both from outside and inside; it shatters the ego which, in order to defend itself, tries to split and project but above all makes an overwhelming effort to bind the unbound energy which the traumatic impingement has released within the organism. The psychology of the trauma and its effects are not simple. In the process of recovery from the trauma, delusions and hallucinatory fantasies with their wish-fulfillment (desires) will appear which, like the daydream, ‘make’ use of an occasion in the present to construct, on the pattern of the past, a picture of the future. In one of his last papers, ‘Constructions in analysis’, Freud writes:

If, in accounts of analytic technique, so little is said about ‘constructions’, that is because ‘interpretations’ and their effects are spoken of instead. But I think that ‘construction’ is by far the more appropriate description. ‘Interpretation’ applies to something that one does to some single element of the material, such as an association or a parapraxis. But it is a ‘construction’ when one lays before the subject of the analysis a piece of his early history that he has forgotten.

Using a possible construction of a trauma in the past from the perspective of a trauma in the present, my ‘addition’ highlights the psychological illness and suicide of Schreber’s older brother Daniel Gustav as an important feature of the ‘historical truth’ which underlies Schreber’s paranoia and his delusional psychosis.

My general argument is that the toddler aged two to three is traumatized by the expectation/arrival of a sibling. This ‘sibling trauma’ is another dimension of the occurrence which D.W. Winnicott described as a separation trauma – from the mother – which occurs prototypically when the new baby stands in the place of the previous one. In addition to the experience with the mother, there are plenty of feelings about the baby itself as Winnicott’s own observations (but not his theory) richly demonstrate in many of his writings. I consider that the ‘sibling trauma’ affects all the subject’s subsequent relationships. In the case of Daniel Paul Schreber’s illness, I suggest that the key sibling relationship with Daniel Gustav is indicated both by the nature of the transference onto his psychiatrist, Paul Emil Flechsig, and by many features of his symptoms and his behaviour. These, together with a reading of the Memoir, the case history and further information about his life which was not available to Freud, enable us to offer a possible construction of Schreber’s childhood trauma.

2 Sigmund Freud, ‘Creative writers and daydreaming’ [‘Der Dichter und das Phantasieren’ [1908]], SE 9, 148.
3 Sigmund Freud, ‘Constructions in analysis’, SE 23, 261 [‘Konstruktionen in der Analyse’ [1937]]. Preserving the term ‘construction’ rather than reconstruction indicates the putative or creative nature of the attempt. However, ‘historical truth’ is not only as near as one can get to the actuality of the past from the perspective of the present, it also allows us to account for the extraordinary hold that delusions have over humankind: something that underlies the distortions of delusions, really did happen. On the relationship between the illness and the treatment, Freud writes: ‘The delusions of patients appear to me to be the equivalent of the constructions which we build up in the course of analytical treatment’, 268.
sibling history. Freud used only one piece of history from outside the text of the Memoir and thus in this respect he was treating it as though it were an analytic patient. In using some biographical facts I am not offering a possible new psychoanalytic case history, as this would demand that one did not deploy material gained from outside the consulting-room; I am only trying to establish the importance of lateral relations along a horizontal axis. The factual data bring out elements latent within the text.

It is of course not Schreber but Gustav, the older brother, and Anna, the older sister, who will have been traumatized by the arrival of Paul (the patient), their younger sibling: ‘this jealousy is constantly receiving fresh nourishment in the later years of childhood and the whole shock is repeated with each new brother and sister’. However, I consider that the ‘sibling trauma’ which is always with the younger sister or brother inevitably reflects the relationship with the older – and indeed that this case history helps us to disentangle this common dynamic. Daniel Paul Schreber (the patient) had an older brother, an older sister and two younger sisters. His trauma will have been with his successor Sidonie, who I think also plays a part in the case history beyond her generic role as the bearer of the trauma. (It would have been repeated differently and to a lesser degree with Klara, his youngest sister).

Daniel Paul Schreber, a married but childless judge of a minor court, first became ill in the autumn of 1884 at the age of 42. He had recovered by the end of 1885. After about two months in the Sonnenstein Asylum he was moved to the Leipzig Psychiatric Clinic and placed in the charge of Professor Emil Paul Flechsig, where he was diagnosed as suffering from severe hypochondria. He was discharged six months later.

Some eight years further on, in 1893, he was appointed Presiding Judge of a Saxon Appeal Court but fell ill, returning again to Flechsig’s clinic suffering from terrible insomnia. Persecutory ideas with sensory delusions were added to the hypochondria. Six months later he was transferred briefly to the Lindenhof Asylum and then once more to the Sonnenstein Asylum under Dr Guido Weber, where he remained until he was discharged in December 1902, after nearly nine years. The transfer from Flechsig’s care in a university department to an asylum coincided with the development in June 1894 of a hallucinatory stupor. This became a full delusional system in which he was in direct communication with God and living in another world. However, the paranoid delusion gradually became isolated so that in all other respects Schreber was able to act and think normally. While always maintaining the value of his delusion, Schreber made several applications for release and, with that aim in mind, wrote his Memoirs during the years 1901–02. His release was granted in 1902 with the Court summarizing his persisting delusion that if he were transformed into a woman he would repopulate the world and restore it to a state of bliss. The Memoirs were published in 1903. Schreber’s third illness started in 1907, ending with his death in April 1911. As Freud was working only with the Memoirs, he did not consider this last relapse; I shall mention it briefly later.

The paranoia with its persecutory fantasies was focused on Flechsig, the redeemer fantasy on God. In the first illness, both Schreber and, in particular, his grateful wife (perhaps stirring Schreber’s jealousy) had shown very positive feelings towards Flechsig. However, despite the fact that Schreber was under Flechsig’s supervision for only two periods of six months each within the roughly nine years of his incarceration prior to the completion of his writing, Flechsig is featured throughout the Memoirs. Schreber believed that Flechsig had abused him by committing ‘soul murder’ on him. Only at the time of his second illness did Schreber form the delusion he was a woman able to be impregnated by God. However, he recalls that he had already, while in a hypnagogic state just after his marriage in 1878, and thus prior to any illness, imagined how pleasant it would be to be a woman in coitus. For Freud this recollection is the key as it leads directly to the relationship with God. Freud focuses only on the long second illness which culminated in the Memoirs. If we introduce the importance of siblings, then Flechsig as ‘soul murderer’ takes precedence and the first illness is important.

**Constructing Schreber’s sibling history**

In 1956 Franz Baumeier published his findings about Schreber’s illness and his family history. Although much has been researched and expanded subsequently, it is these case-notes (not, of course, available to Freud) that I shall use here. They allow us to speculate what part the ‘sibling trauma’ may have played and how we could offer a hypothesis about a construction of Schreber’s sibling history. Under a sub-heading, ‘Schreber’s siblings’, Baumeier gives us information about birth-order from which I deduce the following:

Daniel Gustav, 1839–77; three years older than ‘our’ Schreber

5 Sigmund Freud, ‘Femininity’ [‘Die Weiblichkeit’ [1933]], SE 22, 123.

Although Baumeyer, like most commentators, does not remark upon this fact, we should note that the first name of all the men in the family is Daniel. Having the same name, even among peers, is important for children: its very existence can provoke a repetition of the nightmare of the trauma that one has been replaced. Naming a child after an ancestor, though important too, implies that the child is doing the replacing and is not in danger of being replaced.

Daniel Gustav was around a year old when his sister Anna was born – he would have been too young to know why he felt disorientated and chaotic. These feelings must have been focused when he became a toddler so that the next sibling, Daniel Paul Schreber, is likely to have been their recipient. Daniel Paul will have been the perfectly timed subject of Anna’s sibling trauma. When Daniel Paul was a toddler, at the right age for the sibling trauma, no baby arrived. The gap of four years in a family where siblings are one to two years apart may have been caused by a miscarriage. We can surmise that Daniel Paul will have been left worrying what he did wrong not to have had a sibling at the ‘right’ time. His sister Sidonie is likely to have felt the delayed effects of Daniel Paul’s sibling trauma.

The trauma, the delusion and the analytic construction

In An Outline of Psychoanalysis, published posthumously in 1940, Freud writes:

instinctual demands from within, no less than excitations from the external world, operate as ‘traumas’ [...] The helpless ego fend[s] them off by means of attempts at flight (repressions) [...] No human individual is spared such traumatic experiences; none escapes the repressions to which they give rise.

After Freud, psychoanalytic theoreticians of infancy have not developed this double perspective. The baby’s envy and fantasized destruction of the mother in Klein’s theory, though certainly powerful enough, are not conceptualized as a trauma. Nor is there in Kleinian theory any external trauma, such as the mother’s withdrawal, for the baby to confront. The two-year-old’s ‘separation trauma’ (as identified by Winnicott) is, on the other hand, primarily an external trauma – the baby does not contribute traumatic wishes and drives from within; it reacts with strong emotions and ‘disturbed’ behaviour but only to what is done to it. Freud’s late concept of the trauma of internal and external forces converging to destabilize the subject’s psychic economy, is, I believe, crucial. In trauma, the external and internal forces are of great strength but also, in infancy, the protective barriers and the stage of ego development are too weak, so that the subject is overwhelmed with unbound energy which the primitive ego tries to bind.

Because a psychogenetic trauma (unlike, for example, the traumatic neurosis of war) comes from within as well as from without, it has an aetiological significance: it sets up repression at the outset of psychic life in an attempt to suppress the traumatic internal demands. In Moses and Monotheism (1939), the period when trauma has this effect is extended backwards before the Oedipus complex to earliest infancy. This brings narcissistic and psychotic conditions within the range of its effects – as is the case with Schreber. Later trauma will repeat the effects of this earlier experience – or, rather, this earlier experience will be compulsively repeated when later traumatic occurrences arise.

Several reactions to trauma are possible: there can be some form of denial which will manifest itself in inhibitions or phobias or the trauma may persist as an un-integrated ‘foreign body’ in the ego, ready to ‘return’ compulsively at later moments. Such a compulsive repetition will occur because of the ego’s failed efforts at taking the trauma on board, making it part of itself. But trauma often remains encysted, a small state within a larger one. The ego makes repeated efforts to rebind the energy in order to restore a sense of integration after the experience of disintegration or of annihilation. At first nothing can be taken in – the chaos must be expelled. Persecution often dominates so that he/she whom one has loved becomes the person who now hates one, destroying one’s very being. The delusion to which Freud gives attention, is often a second stage response to trauma; it is an effort at recovery, forming a patch over the annihilated ego: this terrifyingly wonderful thing happened instead of that simple terrifying thing. The often grandiose delusion, such as Schreber’s, is a hallucinatory substitutive fantasy that remakes the scene of the trauma; it stands in its place – it is, thus, as Freud claims, a step on the path of a cure.
a self-cure. A ‘construction’ made in a psychoanalytic treatment hypothesizes the originating traumatic moment or constellation. In doing this, it repeats on a different level – that of an analytic cure – the work that the patient’s self-curing delusion aspired to bring about.

The sibling trauma

My schema for the sibling trauma goes as follows: at around the age of two-and-a-half, weaning traditionally takes place (see, for instance, Isaac’s weaning feast in Genesis). Parental sexuality is resumed and conception with the possibility of pregnancy resulting in a live (or dead) birth, takes place. Whether or not this actually happens, humankind unconsciously expects it. Taking its actual occurrence as ‘normative’, this will dethrone the older child who reacts with an extension of its narcissism to adore the new arrival who in its child’s mind will be thought of as ‘more’ of itself because it was, until now, itself the ‘baby’ of the family. At the same time, the toddler feels a murderous hatred of the new arrival who turns out instead to be other than itself. There is a distrust of the betraying mother and a turn to the father as her substitute. It is also common for there to be illness to gain the attention of the lost mother.

The quotation I gave above from Freud’s late paper ‘Constructions in analysis’ continues:

‘it is a ‘construction’ when one lays before the subject of the analysis a piece of his early history that he has forgotten, in such a way as this: ‘Up to your nth year you regarded yourself as the sole and unlimited possessor of your mother; then came another baby and brought you grave disillusionment. Your mother left you for some time, and even after her reappearance she was never devoted to you exclusively. ‘Your feelings towards your mother became ambivalent, your father gained a new importance for you’ … and so on. (SE 23, 261)

Winnicott’s notion of a separation trauma likewise focuses on the loss of the exclusive mother. But the observations, unlike the theories, highlight the reason for the loss of the mother. This is Freud’s comment:

what the child grudges the unwanted intruder and rival is not only the suckling but all the other signs of maternal care. It feels that it has been dethroned, despoiled, prejudiced in its rights; it casts a jealous hatred upon the new baby and develops a grievance against the faultless mother which often finds expression in a disagreeable change in its behaviour […] we rarely form a correct idea of the strength of these jealous impulses, of the tenacity with which they persist and of the magnitude of their influence on later development. (SE 22, ‘Femininity’, 123, my italics)

The observation of the power of sibling jealousy outstrips the theory: child analysts in particular notice its prevalence, record it but then let its explanation fit into the dominant understanding of vertical relationships. However, it is clear from the observations that the reason for the loss of the mother is not yet the claims of the father but is (or ‘should be’) the presence of the new baby that replaces the ‘toddler’ who was yesterday the baby.

I have written about the array of observations of this phenomenon elsewhere,9 and shall only summarize enough here to provide a context for a construction of Schreber’s possible experience. In this, the many and confusing identifications which the traumatized toddler makes are very important.

There is an identification between the baby whom the mother is nursing and the baby the toddler previously was; then a further identification with the previously pregnant and parturient mother as a means of not losing her. Freud’s case history of Schreber, who was both a younger and an older or ‘middle’ child, offers a particular variation on this ‘sibling trauma’. While the older child can both adore and torture the one who has apparently replaced it, the younger child will both adore and be terrified of the older one. These raw emotions of love, hate and terrible jealousy have to be socialized by what I have called ‘the Law of the Mother’ (Mitchell 2003), a concept whose exploration is beyond the scope of this chapter.

In my view the reason the toddler experiences the nightmare of separation from the mother (as Winnicott describes it) is because of the actual or expected advent of a sibling who displaces and replaces it. This displacement occasions the traumatic annihilation of the vulnerable ego whose omnipotence the toddler still needs, but which it must relinquish in order to realize that it is one among others. In the case of Schreber it is the older brother, I argue, who is crucial. However, the trauma of the arrival of a younger sister, Sidonie, is the ground plan on which Daniel Paul Schreber reacts to the trauma his older brother experienced when he was born. Having a younger sister and being a younger sibling to an older brother means that both as an identification with the sister and as an object of his brother’s equation of his inferiority with femininity, there was a chance that his response would be in the direction of femininity.

Daniel Paul was the recipient of Daniel Gustav’s trauma when he was born; thus, when the time came for his own ‘sibling trauma’ the fact that he himself has already been adored and nearly murdered by his older brother (and older sister) will affect the way he responds to Sidonie, his immediately younger sister. Sidonie’s arrival will retrospectively give meaning to his own earlier experience. The case history, as I shall indicate, demonstrates the psychological imbrication of these temporally distinct events: the unconscious does not know time.

Freud acknowledges the importance of Schreber’s brother but here, as elsewhere in his theory, considers that sisters and brothers belong in the same classificatory category as mothers and fathers. I suggest that sometimes they do (for instance in the nomenclature of a clan); sometimes they do not (for instance in kinship position).

Schreber’s siblings

The father of the family, Daniel Gottlob Schreber, a famous physician and educationalist, became seriously ill when Daniel Paul was 12 and died seven years later. From the hospital records, Baumeyer notes: ‘His celebrated father suffered from obsessional neuroses with homicidal impulses’ (70). Unaware of this, Freud concentrates on Schreber’s ambivalence towards his father: he argues that Schreber greatly admired and forcefully repudiated him and this ambivalence was portrayed in his attitude towards God, on to whom he has transferred his feelings. Freud points out that Daniel Gustav, the older brother, may have taken on a paternal/patriarchal role in Schreber’s teenage years. This being so then the older brother may have played God towards his younger brother.

From the viewpoint of the sibling trauma, Anna came ‘prematurely’ for Daniel Gustav; Daniel Paul, with whom his mother must have been pregnant while he was two, came at just the right age. So Daniel Paul Schreber will have been the object of the sibling trauma of both his older sister Anna and his older brother Daniel Gustav. He will have identified with both of them, enjoying the extension onto himself of their narcissistic love for a baby that is meant to be ‘more’ of themselves and terrified of their murderous hatred of him as being someone other than themselves. Between two and three years of age he will have expected a new baby and when one fails to arrive, he will wonder if his jealousy has killed it. Sidonie is born when he is four years old; she will have been a crucial object of his love and hatred. With sisters either side, there is plenty of room for feminine identification. With an older brother as an object of his aspirations, for better and worse, Daniel Paul will have had plenty to live up to.

Daniel Gustav will have wanted to kill Daniel Paul, who will have thought he killed the babies that didn’t arrive (or didn’t live). But to an infant killing is reversible – death is only recognized as irreversible later. Likewise the solution of ‘giving birth’ as a mother does, only acquires its sexual meaning later. The ‘sibling trauma’ comes before these later understandings of death and sex which are linked to sexed reproduction.

In adulthood his older and only brother was sufficiently mentally ill for an asylum to be considered. When Daniel Gustav committed suicide, did Daniel Paul take his place in the asylum that might have saved the life of his now dead brother? To do so, he would have to become his brother.

Schreber, the siblings and the illness: the brother

Daniel Gustav Schreber died in 1877. Daniel Paul married in 1878. Although he did not become hospitalized until 1884, the clinical notes reveal that he had by then been suffering from hypochondriacal ideas for some years and that these had become worse in 1878, at the time of his marriage. Freud speculates that the marriage may have taken place as a defence against homosexuality; while Baumeyer notes that hypochondria can be understood as an expression of doubt about the marriage.10 I would observe in addition that his marriage took place in the year following his brother’s suicide; in the same period he imagines the pleasure of being a woman in intercourse. If, as is most probable, the marriage protected him from his passive homosexuality, it is likely to be the brother (not the father) who was salient in this.

Daniel Paul Schreber officially falls ill with a diagnosis of hypochondria in 1884 after his wife’s miscarriages and their continuing childlessness. At the time of the sibling trauma a child falls ill frequently, and often seriously, and so may the adult in regressing to that time or at least imagining it – hypochondria. There will also be an identification with a brother who is ill. At the time of Schreber’s diagnosis, hypochondria in men was thought to parallel hysteria in women. It was through my examination of ‘male’ hysteria, 10 See Freud 1911, 45 and Baumeyer, 70. An odd feature of Baumeyer’s account is that he cites the hospital notes: ‘One brother paralytic, committed suicide’ (62), yet his commentary only says that Daniel Gustav died from paralysis. I shall stick with what the notes say since suicide fantasies and attempts are a particularly prevalent feature of Daniel Paul’s illness.
in particular, that I was led to the importance of siblings in my own research.

Baumeyer makes two important comments on the role of the brother Daniel Gustav before following Freud in an entirely vertical analysis:

Regrettably we know nothing of Schreber’s relationship to his brother. It is of interest that six years later [than Daniel Gustav’s suicide] Schreber repeatedly expressed the fear that he was suffering from softening of the brain. It is conceivable that this and other hypochondriacal fears originated in guilt feelings about his brother.

(Baumeyer, 70)

He also notes: ‘it should be remembered that, following the death from paralysis of his elder brother, the dread of madness ran like a red thread through Schreber’s manifold hypochondriacal fears’ (72). Indeed it does. When ill for the second time in 1893, Schreber thinks he is suffering from ‘softening of the brain’, fears he is going to die, has persecutory notions that they have made a lunatic of him, that he is dead and decayed so that he is no longer in a fit state to be buried; and makes many suicide attempts – all bringing to mind what little we know of the brother’s history.

The case-sheet of the Leipzig-Dosen Asylum, where Schreber returned in 1907 and died in 1922, comments: ‘One brother paralytic, committed suicide’ (62). His youngest sister Klara had written to the clinic on 21 March 1900 that Daniel Paul Schreber, once ill himself, had failed to recognize ‘the progressive psychosis of our dear eldest brother’ (68). This must refer to the ‘unofficial’ illness of Daniel Paul as by the time he is hospitalized, Gustav has committed suicide. Probably Daniel Paul could not recognize Daniel Gustav’s illness because he was enacting it in a hysterical identification.11 I suggest Daniel Paul is first terrified that he is like, and then terrified that he actually is, his brother. He imagines that he is this brother not only in the near-present of his brother’s psychosis and suicide but also in the time of their childhood. I think there may be one explicit reference to his brother in Freud’s citations of Schreber, an indirect naming: Schreber is preoccupied with the fact that both he and the soul-murdering Flechsig had warring ancestors, so he asks about the dates of King Gustav’s reign in the 17th century.

11 She was alive at the time of his death, dying in 1907 just prior to Schreber’s final period in an asylum from 1907 until his death in 1911. We do not know her reaction to Daniel Gustav’s death – but whatever it was, it is likely to have triggered Schreber’s memories of his childhood sibling experiences.

The ‘siblings trauma’ and the case of Judge Daniel Paul Schreber

The childhood of Daniel Gustav and Daniel Paul will most likely have been in this connection both the childhood of torturing games played by brothers and of the sibling trauma when Sidonie arrived. Schreber’s identification with the baby is both with Sidonie and with his own babyhood, when he had himself arrived to the shock of Daniel Gustav. Schreber suffers the fate assigned him in his infancy by a jealous older sibling. This is played out most fully in the fraternal transference to Flechsig.

Flechsig has, according to Schreber, committed ‘soul murder’, the main charge of his persecutory fantasies and a notion that has attracted a great deal of critical attention subsequently. Schreber addresses his Memoirs at start and finish to Flechsig. Yet Schreber was only in Flechsig’s clinic for two short periods of about six months, before writing his Memoirs. At no point is the portrait of Flechsig that of a father; he is, rather, either a point of identification with Schreber himself – the two Pauls – or his brother.

In his fantasies, Schreber both becomes his ill and dead brother and reenacts his childhood self in his transference of the brother onto his psychiatrist, Emil Paul Flechsig. This reenactment was quite probably of the torture to which his brother may actually have subjected him in childhood and to which his own sexual excitement and sexual love for his brother will have contributed. ‘Complaints that Flechsig disturbs him by calling for him and shouting “Holy Thunder!”’ (Baumeyer, 63). At times Flechsig is not his persecutor brother but his suicidal brother; at times, too, Schreber thinks he himself is the one who sexually abuses Flechsig. In childhood both the brothers would have been recipients of identification and objects of the other’s illicit desires. What we have here are the sexual desires, assaults and bullying, the sort of persecutions seen in schoolboys’ mutual torments and anal, masturbatory games. For instance, the adult Schreber complains that when he needs the lavatory, someone is sure to have got in first to keep him out so that he even faints through violently suppressing the need to defecate. He sometimes takes the imagined effeminate and passive role but he shifts between being assaulted and being ecstatic – as may well have been the case in mutual boyhood, particularly anal, masturbation. What is ‘soul murder’ but the inhabitation of one person by another as could have been experienced in the mutual identifications of orgasmic boyhood masturbation?

In the complex disguise of hallucinations and delusions, what Schreber experiences is commonplace between brothers or peers in fraternal-type relationships in childhood. They may persist into
adulthood. Christopher Isherwood describes the advent of sexuality in his close friendship with W. H. Auden: the sophisticated adult friends were embarrassed by ‘the schoolboy sex partners’, who were nevertheless immensely important.12 Letters between Sándor Ferenczi, Freud and Jung, while Freud was at work on this case history, have the homosocial frisson of their being ‘all boys together’. I mention these outside instances in order to convey that there is nothing Oedipal about Schreber’s sexuality from the side of either a man or a woman.

This relationship, however, was not just based on the real abuse Daniel Paul may have suffered and in which he most likely participated, it was profoundly influenced by his own ‘sibling trauma’ when his sister Sidonie was born. Here Schreber is a mix-up of the toddler he actually was at the time of her birth, the baby he had been until her birth and the baby he wants to be – the baby girl, Sidonie, who is getting all the attention.

Schreber, the siblings and the illness: the sister

Schreber will have experienced the sibling trauma of feeling annihilated when his sister was born. At that moment he will have wanted simultaneously to be her – the loved baby – and to get rid of her, his hated replacement. The identifications are featured in the feminine positions he assumes; his ambivalence will have contributed to the negative associations with which he regards girls as well as to the pleasures he has in ‘becoming’ one of them.

Like the traumatized toddler, the adult Schreber wants to be the baby again. Hypochondria is the mark of an adult regressing to the frequent illnesses of the sibling trauma. In the clinic, Schreber suffered from ‘retardation of speech’, his eating was disordered; he often wet the bed and ‘dirtied’ himself. There is the anality which characterizes the displaced two-year-old who is identifying with the beloved new baby – smearing himself with faeces. In the regression there is also the anger of feeling and behaving ‘like shit’. The adult Schreber, like the regressed toddler, felt too weak to walk and wanted to be carried.

In childhood his brother may well have called him ‘sissy’, just as he imagines Flechsig deriding him as ‘Miss Schreber’, but when he retaliates with ‘Little Flechsig’ it is more likely that this is how he derided Sidonie. He both scorns anything ‘girlish’ such as the ‘talking birds’ (Freud deciphers these as bird-brains = girls) who inhibit heaven and he also acts in girlish ways, perhaps imitating his older sister Anna, whom he may have admired but who would also have been perceived with hostility because of his hatred of his younger sister Sidonie.

Freud emphasizes how Schreber wanted to be a woman, yet what Schreber insists is not that he is a woman but that he is a young girl frightened of indecent assaults. In the second illness he looks in a mirror and sees his breasts growing: ‘April 1899. His occupation with feminine pursuits (staking with paste, sewing, decorating with gaily coloured ribbons) continues’ (Baumeyer, 64). In dismissing him as ‘the baby’ did Daniel Gustav, very typically for a three-year-old boy (and of our cultures generally), also equate babyhood with effeminacy? Did Schreber identify with Sidonie and Anna as he adorned and adored himself, thus turning the pain of Daniel Gustav’s taunts into the products of the love and hate he felt towards his sister(s)?

When Schreber’s wife miscarries and perhaps gives birth only to dead babies, these fatalities will replicate the wish to kill his younger sister to which he has regressed. His mother may also have miscarried or had dead babies, which would contribute to the dread that his murderous jealousy may have succeeded. It is maybe in an echo of this that Freud’s Schreber considered – unusually for the time – that he was partly responsible for his wife’s (mother’s?) ‘failure’ to produce live children.

The siblings’ mother

A toddler’s dominant identifications overlap and coexist and these will be played out throughout childhood. The regression of the adult patient, although it is typically to the period around two to three years old, will also take on the tones from later relationships – certainly those that are important in the adulthood of the present day, but also ones from other periods of his or her life, such as puberty. Thus Schreber is a young girl preening herself in front of a mirror as his adolescent sisters may well have done. He is a sexually ambiguous person being abused anally by his older brother, as he himself may have experienced in latency. He also derides girls and accuses himself of being an abuser again; whether this really happened or was only a fantasy, in either case it will probably be from later childhood. He has regressed to these positions from the status of an adult and socially powerful male.

Regression to the ‘sibling trauma’ also entails an identification with the mother. The toddler has ‘lost’ the mother to the new baby;

one way of not losing is to become the other: Freud describes the small child who, following the death of a cat, went around mewing, lapping from saucers and so on. Schreber becomes his pregnant mother. But for him the identification is ambivalent: he rages against the missing mother as well as worshipping her. For Freud, the ambivalence is towards the father. But such violent repudiation and oscillating adoration is typical of the ‘dethroned’ child. Baumeyer comments on Schreber’s continual ‘bellowing’ (which Freud does not address): ‘By the bellowing, God would be compelled to draw nearer to him again. Schreber behaved like an infant calling for his mother’ (Baumeyer, 71, my italics).

It is important that Baumeyer introduces the mother but is he right in suggesting the child ‘bellow’s’ for her? Might not the bellowing Schreber also be the parturient mother? In the Memoirs (though not the case history) ‘bellowing’ is the most persistent feature of Schreber’s behaviour – an appalling note of agony that emerges from some unidentifiable depth of his being. The same word is used for the cow-like agony of the mother in labour. Is Schreber howling both because the little boy cannot bear his mother’s new pregnancy and wants her all to himself, and also because he thinks he can give birth as she does? Thomas Mann describes Jacob’s wife Rachel in the throes of giving birth: ‘urgent pain grabbed the mother-to-be […] when things grew worse, she did scream – monstrous, savage cries […] she was not in her right mind, no longer herself, and they could easily tell by her hideous bellowing that it was not Rachel who was screaming, because the voice was utterly strange, the voice of demons’. 13

We do not know whether Schreber’s mother gave birth to his younger sisters at home (almost certainly) or whether Schreber was in the house (quite likely) or was sent away, no idea whether she had miscarriages or stillbirths – but Schreber’s constant bellowing resembles this account of Rachel’s. When Schreber feels he is also responsible for his wife’s miscarriages it may be because he has reached the male climacteric (as Freud suggests), but it may also be because he believes that as a murderously jealous toddler he caused his mother’s miscarriages and therefore is repeating this trauma with his wife. Two-year-old Schreber will have wanted to be the mummy, like the little girl whom Winnicott calls ‘the Piggle’ (after her own self-naming), and desired to have given birth to babies like Freud’s ‘Little Hans’. 14


Unlike the silly girl, whom Schreber becomes when he feels he is sexually and violently abused by Flechsig/Daniel Gustav, this maternal identification may at first appraisal seem a more positive association of femininity as it produces the delusion of creating new lives. However, the sibling trauma also alerts us to the fact that this illusory identification with the procreative mother is threatened by the strength of the toddler’s ambivalence. We see here the child’s violent rejection of the disloyal mother; if she has to be shared with the new baby, the mother topples. Looked at from the perspective of the sibling trauma, the identification with the mother is both reassuring (omnipotently giving birth) and terrifying – risking not only torturous pain (bellowing in agony) but also death – both these positions are exemplified in the ‘self-cure’ of Schreber’s delusion. The possibility of real death for the parturient mother is informed by the experience of death/annihilation and the murderous hatred which belongs to the sibling trauma.

In Freud’s analysis, Schreber’s surge of tabooed homosexual libido moves seamlessly from an abusive relationship with the brother (transferred to Flechsig) to impregnation by the father who is perceived as having been transferred onto both God and the sun. Freud points out that the sun is the male counterpart to mother earth. However, if we take more seriously the fact that, in German (the language of Schreber and Freud) Sonne [sun] is feminine in gender, then other possibilities open up. Schreber insists that both God and the sun are whores, that is, faithless women, just like the toddler’s mother.

According to Schreber’s fantasy, God only has commerce with corpses. Schreber asks, of his own condition, ‘whether he has not been dead for a long time?’ (Baumeyer, 62). His mother may not only have betrayed him by giving birth to Sidonie and by her possible miscarriages; she also may have preferred her eldest son and have continued to do so after his death. For Schreber and the pre-Oedipal child, ‘God’ is as much the mother as the father; or, if the father, then the father who replaces the toddler’s ‘lost’ mother rather than the father of the Oedipus complex.

The trauma in the ‘sibling trauma’

Freud’s examination of the Schreber case seems latent with certain specific emphases he made in his final writings. The difficulties inherent in the case suggest the need for an additional focus. We can select a number of instances that indicate some new directions
and which, I would argue, could benefit from inserting siblings into the analysis. My suggestion of a generic sibling trauma implies a potential new role for a so-called ‘social unconscious’, for the ego, for trauma and for siblings themselves.

A year after the Schreber case, Freud wrote Totem and Taboo (published in 1913), which posits a human pre-history: the group of brothers murder the father who has hitherto monopolized all the women. Then they have to form the first social contract amongst themselves to stop internecine strife and to share out the women equably. Though an original take on the theme of the formation of a social mind, this mythology endorses the observation that children band together as a social group when they learn that the father will not love them if they hate their siblings, whom the father also loves. In 1914, in ‘On narcissism’, Freud added the ego as the object of self-love to provide another dimension to the picture of unconscious psychic life. Freud’s notion of ‘His Majesty the baby’ is the narcissistic baby just before the birth of the new baby. This ego is shattered when there is (or ‘should be’) another baby occupying its place. World War One brought to the fore the question of traumatic neurosis and hence a renewed interest in trauma.

The case of Daniel Paul Schreber, one of psychosis, is important not only for what it says but for what it opens up that still needed and needs saying. I have not considered other theorists because I believe, as group analysts also maintain, siblings are essential for understanding the formation of social groups and such groups are the sine qua non of political considerations. In this 1911 text, Freud promised the understanding of a social unconscious; such an understanding, I argue, needs siblings who indeed hold that position in Freud’s own work, yet it is a position which is clinically observed and mythologized but never theorized. In Group Psychology and the Analysis of the Ego (1921), Freud notes the identity of an individual and a social mind. These new themes were signposts which could only lead somewhere at the end of Freud’s life, in Moses and Monotheism, the Outline of Psychoanalysis, ‘Constructions in analysis’, ‘The splitting of the ego in the process of defence’ (1940) and the other last papers and written fragments.

For Schreber, I suggest, a particular occasion in the present that triggers his illness is the present-day trauma of his older brother’s psychosis and suicide. Using the incestuous-sibling desire and the probably normative or excessive abuse of his childhood sibling-relationships, he identifies with his ill/dead brother and his little-girl sister and manages to construct the delusion of a future on the model of the past in which he, a new and parthenogenetic mother, as he imagined when he was a toddler, will save the world by giving birth to a new race of humankind. The present trauma retrospectively uses the complex constellations around the old, original one and, by deferred action, the old one acquires retrospective meaning.

In the Schreber case, Freud wrote about the truth of Schreber’s delusion, referring to the fact that the patient, like the analyst, was confirming the importance of infantile sexuality. In 1937 he writes in almost the same words of the historical truth of the trauma that underlies psychopathology in general and the delusion in particular. A construction made in psychoanalytic treatment reaches back to the trauma beneath the delusion. In Moses and Monotheism, he wrote that the important traumas of childhood take place between the ages of two and four and are inaccessible to memory except as occasional flashes of screen memories, a memory of an imagined instance that stands like an icon of a wider crucial experience. The traumas, he claimed, relate to impressions of sexual and aggressive acts, and ‘no doubt also to early injuries to the ego (narcissistic mortifications)’ (Freud 1939, 74, my italics). Between the 1911 case history and the last writings, the importance of the death drive and aggression and a new model of the ego had been put in place. These are crucial for the ‘sibling trauma’ in which the toddler experiences an annihilation of its ego to which it may respond with aggression, sexual violence and/or depression as a turning inwards of the aggression.

Homosexuality, incest and the mechanism of paranoia

Freud begins his discussion of the mechanics of paranoia by arguing that the Oedipus complex is at stake in all psychogenic ‘illnesses’. Specific to paranoia is the formation of delusions of persecution to defend against a sudden increase in homosexual libido. Thus, referring to the confirmatory research of Jung and Ferenczi, he writes: ‘Yet we were astonished to find that in all of these cases a defence against a homosexual wish was recognisable at the very centre of the conflict which underlay the disease’ (Freud 1911, 59). He decides from this and other work, to make the following generalization: delusions never fail to uncover these relations and to trace back the social feelings to their roots in directly sensual erotic wishes. So long as he was healthy, Dr Schreber, whose delusions culminated in a wishful fantasy of an unmistakably homosexual nature, had, by all
accounts, shown no signs of homosexuality in the ordinary sense of the word. (Freud, 60)

This observation refers also to Freud’s thesis that the social mind arises from a sublimation of male homosexual desires. Much has subsequently been written to complicate, add to and dispute Freud’s explanation. Here I am only concerned with what adding siblings and an early sibling trauma would do to this explanation.

If we place Schreber’s original trauma and its resolution in his adult delusions as dating from roughly the age of two to three (the moment of the ‘sibling trauma’) then the division which Freud is making into a homosexual and heterosexual orientation is not pertinent. In the present time of the adult illness, assuming a female position may be equivalent to a homosexual stance; however, the adult patient has regressed to the cusp of infancy/childhood and for the toddler the distinction between ‘same’ and ‘other’ sexual desires is not pertinent – nor is it for the mother who, from her position as the ‘law’, forbids the child’s sexuality, whether same sex or other sex. Interestingly, when Freud referred his own relationship to Wilhelm Fliess and Carl Jung back to the death of his brother Julius when he was scarcely a toddler, he wrote not of his own ‘homosexuality’ with his male friends and colleagues but of his ‘femininity’. Although the heterosexual model dominates in our adult minds, small children are sorting out their gender positions before the ‘sexual difference’, which is the psychic facilitator of sexed reproduction, is symbolically acquired with the castration complex.15 My thesis argues that it is this, the gender femininity of girlhood, not the reproductive womanliness of ‘sexual difference’, that Schreber enacts.

What is taboo or forbidden in the earlier phase therefore is not homosexuality but incest, ‘incaustus’, unchastity for a member of one’s kin, a relative defined as very close, of either sex. Incest taboos are not only notoriously variable, but definitions of incest are also mobile. From the viewpoint of analysing it psychoanalytically, it is important to distinguish adult from childhood meanings. Childhood sexuality persists or is regressed to in differing degrees by everyone and it forms a part (normatively subsidiary) of adult sexuality. However, it is useful to delineate analytically what in real life is a mix-up. In the western world, sexuality between same-sex or other-sex children is equally prohibited. Looking from the perspective of psychoanalysis, I propose to call ‘incest’ any tabooed sexual intra-family relations whether same- or other-sex. We may think of incest as heterosexual because we link it to reproduction, but it is more inclusive than this. Schreber, like the toddler, is involved in a parthenogenetic birth: the impregnation by God is an immaculate conception, the putative parturition, a virgin birth. This is what Winnicott calls ‘a pre-genital pregnancy’.16

When Freud discusses soul-murder, his associations, though not his argument, suggest sibling incest following the sibling trauma. Thus he is on Byron’s track: ‘I have searched [Manfred] in vain for the expression ‘soul-murder’. But the essence and secret of the whole work lies in an incestuous relation between a brother and a sister. And here our thread breaks off short’ (Freud 1911, 44–45). Freud’s footnote to Byron (who committed sibling incest as well as writing about it) concludes with the observation (repeated later) that Schreber says in addition that it has occasionally been claimed that both Flechsig and Schreber himself are guilty of ‘soul-murder’ – it takes two to incest. If Schreber has sexual desires for his brother or father, these must, by any definition, be incestuous. The ‘Law of the Mother’ prohibits incest, either same-sex or other-sex, but does not prohibit homosexuality. Prohibitions must have a generic provenance. Attitudes to homosexuality are extremely diverse and I suggest that any taboo is not ‘universally’ there ab initio – we read it back post-oeidipally as an effect of that constellation. Cultural prohibitions and taboos cause the repression of illicit wishes in such a way that they become unconscious – unconscious processes are the object of psychoanalytic enquiry.

After Freud the processes of splitting and projection that characterize paranoia have been situated as arising in pre-oeidipal constellations. However the framework has remained both the ascription of tabooed homosexuality (which I am arguing is post-oeidpal) and the vertical axis: Schreber and his father or mother. I suggest that though the adult may be terrified of his repressed homosexuality, this masks a universal taboo however diversely expressed: one cannot kill one’s brother or sister except in particular circumstances. Pre-genital sexuality and children’s invariable fantasies of parthenogenetic reproduction as those aspects of sibling relations which become (most often) forbidden and tabooed as incest; thus it is incest and not homosexuality that breaks through in Schreber’s paranoid symptoms and redeemer fantasies. That one

15 See my ‘Procreative mothers (sexual difference) and child-free sisters (gender)’, in J. Browne (ed.), The Future of Gender (Cambridge: CUP, Cambridge 2007). In 1911, Freud, though en route there through analysing Little Hans, had not yet formulated the castration complex.

can be enjoined to kill, particularly a sister and sometimes a brother, and to marry and reproduce with a sibling, suggests an important difference from the prohibitions of Oedipus but not a difference of kind.

Sexual and aggressive/death drives are central as a response to the trauma. Schreber’s delusion, which forms a patch over his trauma, is redolent with his claim to be dead: this is the experience of his own ego’s annihilation as he failed adequately to move in this part of his mind from omnipotent infancy to social childhood. In the misery and triumph of his paranoid delusion we see the persistence of his narcissistic wish to have and be his brother and be and have his sister and the violent rejection of, and identification with, the adored and treacherous mother who was the God of his early siblinghood.

15. Spirit

Jaspar Joseph-Lester

He had come to see the concrete. He wanted to get to physical grips with the material that he loved. He had heard about the monumental and virile structures that had been constructed close to where he once lived. This place now stood before him. The vast concrete exterior of the building immediately inspired him. He began to ask himself what it might mean to build an entire city. The concrete captivated him. Here, in its richly textured surface, he imagined a new future.

He touched the walls. He believed that concrete could determine the way that people lived: its blank, grey surface produced powerful experiences; it fostered a sense of community; it generated new relations. He could see all of this as he wandered around the interior of the building. The physical scale of the internal spaces, the stairs, the walls and the floors were all joined together as if the space had been carved out of a single lump. Looking out, he observed the other buildings. This wider community of architectural forms repeated the same organic structures. The lines of the houses followed the contours of the surrounding hills; their forms occupied the landscape like sculptural objects.

Returning to France, he began to work on a new design. It was to be built in the south, in a city on the sea. The scale and vision of this concrete structure would take time to realize and the demands would be different from those of the buildings he had studied. The concrete was the thing that was most important to him. He knew that it would change lives: he had seen this happen. The concrete would allow him to structure and shape the activities of the people who were to live in his building. It would dissolve difference. It would produce unity. In every moment he worked on his drawings he remembered how the concrete embodied something more. This immaterial supplement
was as physical as the monumental structures it supported; its ghostly spirit addressed him directly. It produced meaningful affects in him.

Unlike the curved and moulded forms he had experienced in Switzerland, his building would take the modular units of the golden section. Two interlocking squares would be cut out in the part of the bare concrete façade containing the lift tower. This same section of façade would feature a row of six rectangular windows, repeated on each of the 17 storeys. The domestic spaces would be efficient and well-designed. Each would have access to a balcony where the huge concrete walls could be encountered directly. The physicality of the overall structure would be present in each of the apartments and would generate a strong sense of the whole.

He designed the lift to carry the inhabitants through the inner concrete structure of the building. The automated movement provided the necessary circulation and opened onto both residential and public spaces. This mechanized movement led towards the sky. He wanted to build a structure for a new age. It would house a community that would never need to leave its walls. Young people, families and single people, the entire community would live and work under one roof. They would share this space, joined by a deeper understanding of the material qualities of their homes. They would be bound together in the reinforced walls of the building.

He was able to think in this way because he had come to understand the process more fully. His new design would reveal the hidden secrets that he had experienced first-hand. The surface of the concrete mapped out the process of its casting; it spoke of human ingenuity and occupied the space in a way that reflected the humanity of the people who lived in it.

For him, concrete was something to be celebrated. He was determined to design a place in his building where the spatial qualities of the material could be fully experienced. He believed that the roof would be the site for this; it was the space that people would share. Here would stand an elevated piazza for the use of the inhabitants of the building. It would be enclosed by a surrounding concrete wall and would be an outdoor room open to the sky. The hot summer evenings would bring people outside; here, they would gather on the hard roof and watch the concrete transform into new forms.

He decided to travel back to the place that had first got him thinking. He would travel alone. He needed to explore the building more fully. On arrival he was again struck by the presence of the concrete. This time it addressed him differently.

He headed straight for the auditorium. The large internal space was situated at the centre of the main building. The tall concrete walls were painted in bright colours and the vibrant stained-glass windows refracted a spectrum of tinted light on to the hard interior surfaces. It was here that he saw the concrete move. The dancing, flickering shapes captivated him. For the first time he could see what he understood to be the spirit of the material. He had always sensed it but now he could see it moving before his eyes.

When he left the main building he saw how the smaller surrounding houses were also moving. In his eyes, they began to dance. The relation between these spaces was determined by an incommunicable order. The concrete allowed this. The space of the theatre and the spaces where the people lived were joined together as a single life force. A living, breathing organism. The community was governed by an agreement. The aesthetic of the spaces occupied reflected the politics of the community. The people spoke through the spaces that they had come to inhabit. They were transfixed by the structures of their making.

The inauguration ceremony took place on 14 October 1952. He took the grand opening as an opportunity to pay homage to the building tradesman Sarde (who was an expert in concrete construction) and Bertocchi (who was the master concrete worker in charge of the constructions and sculptural mounds on the roof). He also spoke of the political, moral and social ideas that were embodied in the building. The speech was followed by a ceremony involving a young dancer dressed in white fur. She performed a folk ritual on the concrete stage below the monumental screen. This was a celebration to mark the completion of the building, a construction that would act as a basis for the needs of the community. Here, on the roof, the inhabitants would pass beyond the reality of the world below.

He was now able to experience the space he had only imagined before. The tall concrete screen stood before him as a monument to his love of the material. The flickering images that danced over its surface gave form to the qualities that normally were only sensed. The inhabitants gathered to stare at its surface. The skyline of the city and the sea behind it acted as a backdrop to the serenity and force of the concrete. The surrounding wall, which circled the edge of the roof, blocked out the surrounding city. Here, in this space, the monumental screen appeared as a public sculpture in the grand piazza. The tactile and earthy qualities of the material eclipsed any architectural function; in place of the systemized domestic units, there emerged something more. The concrete performed in a way that
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pleased him, it was just as he had first experienced it. It did not speak of his beliefs and he was not sure if it even spoke for the community that lived in it. He no longer cared, he only wanted to be close to it, to watch it dance before him. The concrete was all that interested him.