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Article

“I Walked under the Rain without Getting Wet”: War Trauma and Its Impact on the Narcissistic Structure of a Child

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Abstract: We explicate a traumatized child's narcissistic defense against trauma. Following a review of psychoanalytic understandings of trauma we explore the invocation of narcissistic defenses against trauma. The phenomenon of *Nachträglichkeit* or *après-coup* is explored, and the paper concludes with clinical illustration drawn from the experience of a young boy who suffered significant separation trauma during the Holocaust.

Keywords: narcissism ;trauma ;child trauma; apres coup ;Holocaust trauma ;narcissism as defense agaisnt trauma ;trauma impasse and resolution

Introduction

Renata's interest in writing a paper on trauma and its effects on children's narcissism arose from my class on trauma last year. In that seminar, taught by Michael, the students were exposed to many different psychoanalytic perspectives on the theme and many testimonies from people who have endured genocides, political persecution, and domestic violence – adults and children who have left their countries, cultures, and homes to continue to exist simply. Reading about and listening to Menachem's testimony of his survival as a young boy in Nazi-occupied Poland made me think about the impact of indescribable suffering on a child's subjectivity (Laub, 1995; Vlock and Laub, 1979). Menachem's accounts portrayed a boy needing a grandiose view of himself and an idealized version of his mother to survive physically and psychically while wandering the streets during the Second World War. The need to survive made the, then, little boy overinvest in himself, as so many people do, in the face of horror and trauma.

Our goal is to understand the phenomena associated with the overinvestment in self that is necessary during these dire traumatic situations, the effects on the child's subjectivity, and how to better help children transition from psychic survival mode to a more integrated psychic existence during peaceful times. In this paper, we will use Menachem's story to understand the multiple reorganizations of libidinal forces on his narcissistic structures due to his efforts to adjust to different environments: wartime, post-wartime, adulthood, and parenthood. We will present our understanding of narcissism and the history of this concept from a psychoanalytic perspective, introducing our views on childhood trauma, specifically Holocaust trauma during childhood, and the effect of traumatic situations on narcissism. Finally, we will discuss the concept of a double *après-coup*, one looped in the impasse of unthinkable memories and a second one when there is more mature access to symbolization and mourning, a moment where deep healing occurs.

Narcissism, then and now

Psychoanalytic texts define narcissism as a libidinal investment in the self. The self is a substructure of the ego that translates the different representations of the self, integrating them (Kernberg, 2003). Self-representations are conscious, preconscious, and unconscious representations of the body and mental self (Milrod, 2002). As it is not possible to be objective about ourselves, there

are discrepancies between the self and the self-representation, which tend to be greater than those between the object and the object representation. (Milrod, 2002).

In the early days of psychoanalysis, the child was perceived as a separate entity, and the construction of a child's narcissism was based solely on attending to the child's physical needs. With time, psychoanalysis developed new theories of narcissism in which the child's relation with the mother, even in utero, became a central anchor for the inception of a child's sense of self. Therefore, the child's self-representations result from human relations, especially early relations with parental figures, not only bodily satisfaction.

Furthermore, narcissism is a concept closely related to the regulation of self-esteem. Self-esteem depends on how successfully someone can bring a representation of self to her wished-for self-image, whose contents are made of qualities admired in others and desired for herself in the future (Milrod, 2002). A person's self-esteem tends to fluctuate depending on gratifications and frustrations in interactions with others, and between the attainment or not of an individual's needs and goals. Normal childhood narcissism depends on regulating self-esteem according to the child's age (Kernberg, 2003).

Narcissism can be normal or pathological, depending on how well a person can regulate her sense of self. For instance, if someone feels overwhelming external pressure, she might need to inflate her sense of self to face the challenges. If this person cannot readjust her sense of self once the challenge is over, there could be a fixation in a grandiose state which may generate a pathology.

The concept of narcissism was first developed in Freud's writing (Freud, 1910), but a lengthier conceptualization was presented in 1914, in his text "On Narcissism". Freud continuously wrote about the many aspects of narcissism in subsequent papers as this is a concept of incredible polysemy in psychoanalysis (Freud, 1917, 1921, 1923). Freud considered narcissism an intermediary state between autoeroticism and love of the object. The subject takes her own body, her own self as a love object. Later, Freud emphasized the libidinal investment in the self as opposed to the libidinal investment in the object.

The energetic conceptualization of narcissism, which recognizes the permanent investment in the self, changed the paradigm: narcissism is not a state anymore but a stasis, a libidinal investment unsurpassed by any other object. Thus, if we consider narcissism as libidinal investment totally cathected to the self, then we can think of infantile narcissism as the formation of the self (Laplanche & Pontalis, 1968).

There is no consensus on the previous assertions, though. It is possible to conceive the constitution of the self as a psychic unit that correlates with the constitution of a body scheme. It is also possible to think about the constitution of the self based on an image (acoustic, visual, tactile, verbal) generated by the other and perceived by the subject as being the self, as it has been theorized in concepts such as the Lacanian mirror stage (Lacan, 1949), Winnicottian handling (Winnicott, 1962), and Anzieu-Stern's psychic envelopes with sensory basis (Anzieu, 1989, 1990; Mellier, 2014; Stern, 1985).

Later, when Freud wrote about his second theory of the psychic apparatus, he opposed primary narcissism and object relations. Primary narcissism, considered a more primal state, was characterized by the absence of relations with the environment, where an undifferentiation exists between the subject and the object. The child is the object of its love, and only later will the child choose other objects of love. In secondary narcissism, based on the identification with the other, the libido flows to the self by identifying with others, taking its energy from the objects (Freud, 1914). Thus, primary narcissism has been associated with the earliest developmental phases of a child. The child's primary focus is on meeting their own needs and desires. Secondary narcissism presupposes a differentiation between the self and the object representations out of a previously fused representation. Hence, objects can be cathected narcissistically (Behrendt, 2015). For Freud, secondary narcissism is a libidinal reinvestment of the ego stemming from its identification with objects and, therefore, a return of the energy from former libidinal objects to the ego (Smith, 1988).

Klein is one of the many authors that objected to the proposition of primary narcissism, arguing the idea that children have object relations from the beginning of their existence. Klein asserted that

narcissism and autoerotism were based on the relationship with a good object, which the infant perceives as part of itself (Klein, 1952). Thus, for Klein, all narcissism is secondary narcissism (Smith, 1988).

Françoise Dolto also proposed a different perspective on narcissism, considering children in relation to their parents from conception (Dolto, 2022). Dolto proposes a theory on the existence of a fetal ego. The loss of a primary object is not constitutional of the narcissism and not an organizer of the psyche. The primary object is not lost; it is always there but separated. Thus, the baby's pre-ego originates in the mother's dialectical presence and absence, in a continuum of perceptions relating to a securing presence. The sense of safety is important for Dolto's concept of the unconscious image of the body. This sense of safety will be directly influenced by the conscious and unconscious attitudes of the mother and her ability to satisfy the baby's needs and give her a sense of safety modulated by the presence and absence of the mothering figure. Hence, the organic satisfactions of the baby are intertwined with her image of the body, followed by the unconscious affects of the mother. The ideal of this pre-ego is omnipotence and total security. The baby will gradually substitute her residual body image from the fetal experience for the introjected dyad of the maternal presence-absence and, in this process, install her primary narcissism. (Dolto, 1961; Nadal, 2006).

Following in the footsteps of Dolto, contemporary authors, such as Bernard Golse (2016) and Suzanne Maiello (2007) discuss the intrauterine relation of the fetus with the mother, opposing their ideas to that of an isolated intrauterine space. For instance, Maiello (2007) suggests that the sound of the mother's voice, alternating with silence, may give the child a proto-experience of presence and absence and become the basis for the constitution of a prenatal proto-object with sound qualities. For these authors, the relation between a child and a relational object takes place in sensorial environments based on sound, touch (through the mother's belly skin), and proprioception, fostering (pre)symbolizations of presence and absence of the object, and thus a proto-structure of relation with the object. (Golse, 2016).

Winnicott also reexamines Freud's contribution to the concept of primary narcissism: he brings the idea of maternal care and the presence of the psychic environment into the construction of primary narcissism. Between the individual and the sense of self, Winnicott inserted the maternal object and her function as a mirror of affects who acts as a medium for the organization of self-identity. A process of differentiation that governs the discovery of the object is in a dialectical relationship with narcissistic identification (Roussillon, 2010; Winnicott, 1967, 1970).

In Winnicott's theory, mothering during the primary narcissism phase enables the infant to establish and reinforce its body-ego experience. When this is not possible, the infant's intelligence takes over some part of the mother's role, and the child will develop a false self, not grounded in his body experience, thus not a body-ego experience (Winnicott 1958; James, 1962).

Examining narcissism. Kohut proposed a phenomenological view of narcissism, describing its features but not allowing for articulating the components of the psychic world. The narcissistic self was evaluated as a maturational predetermined step and a developmental achievement. Kohut enhanced the understanding of narcissism by emphasizing grandiosity and mirroring relations and posited that the grandiose fantasy was phase-appropriate and adaptive, similar to the overestimation of the power and perfection of the idealized object (Kohut, 1966).

Kohut's developmental model of pathological narcissism affirms that early maladaptive experiences with caregivers may result in emotional and relational internal experience that has since been conceptualized as either grandiose or vulnerable narcissism. In Kohut's formulation, caregivers are experienced as self-objects by the child or, in other words, as emerging psychological parts of one's sense of self. When needs are unmet, the infant is left with impaired abilities to regulate self-esteem and may defensively avoid and disavow them. The result of disavowed needs may be a narcissistic vulnerability or disorder. Feelings of shame, self-consciousness, and helplessness are common in vulnerable narcissism and are conceptualized as emotions that arise when a person perceives wrongdoing as a core problem with the self (Buren and Mehan 2015).

Green (2002) developed a theory where narcissism aims at oneness—the cathexis of the self being fed partly at the expense of object cathexis; and negative narcissism, which aims at nothingness,

moving toward psychic death. Negative narcissism is the form narcissism takes when combined with self-destructive drives: the patient is the one who is worthy only of universal contempt. These patients seem to have been crushed by a maternal image against which they can rebel socially, but not internally. Negative narcissism results from the combination of narcissism with an orientation toward psychic death. In positive narcissism, others are seen as being of low value. Life narcissism is a way of living with an impoverished ego, limited to illusory relationships that support the self, but without any involvement with objects. Death narcissism is a culture of void, destructive withdrawal, and permanent self-depreciation with a masochistic quality.

In childhood, narcissistic relationships will be dominant for some psychic structures: there will be anxiety about object relationships, self-protection, and encapsulation. In these situations, Green notes two lines of development are possible: egoism (selfishness, withdrawal, self-sufficiency, a self-centered personality) or destruction (decathexis of objects and the self itself). (Green, 2002)

Our need for selfobjects is enduring, and although our selfobject experiences mature, we continue to carry archaic selfobjects in our unconscious. Our more archaic infantile dependence on an object has some consequence, a primary identification with it, while more mature dependence entails a relationship with an object that is independent and differentiated from the self. This transition is gradual and incomplete. Persistent failure of self-objects is a common cause of developmental arrest of the self that can translate into a grandiose or vulnerable narcissism. These failures can include deficient mirroring, abandonment, overindulgence. For instance, a grandiose self protects the child against the fear of abandonment, keeping the illusion of self-sufficiency alive and shielding the child from fear of harm and vulnerability. On the other hand, feeling heard and responded to assures a person's self-esteem and makes her surer of herself (Behrendt, 2015).

Some concepts of trauma and *après-coup*

Bion (1961) described traumatism as nameless dread. For the child, a traumatic situation is the total loss of external and internal protection, a loss that cannot be represented, generating psychic agony (Romano, 2020). It is important to note that the traumatic event resonates with previous traumas from the past. In Diatkine's (1979) theory on hyper-precocious trauma, intergenerational trauma present in the parents' unconscious is projected into the child's psyche through sensorial inscriptions during uterine life (Golse, 2016; Romano, 2020). For instance, a mother's state of panic or fear in certain environments due to her past trauma can be communicated to the fetus through the mother's body tension, altered heart rate and speech, and anxious gestures. The fetus sensorially perceives this bodily communication. The fetus also receives information from biological markers, such as higher cortisol, altered hormones and methylated DNA (Monk, Lugo-Candelas, Trumpff, 2019).

Literature on trauma indicates that interpersonal and interfamilial trauma may be more damaging than psychic trauma related to accidents, catastrophes, physical injury, or illness (Yalch and Levendosky, 2020). Childhood trauma has developmental consequences associated with the immaturity of the personality and the developmental phases when the trauma occurs. Furthermore, the neurobiological effects of psychic trauma validate the differentiation of psychic trauma from lesser forms of adverse developmental experience and from nontraumatic psychic conflicts. External events may become sources of internal trauma when they coincide with forbidden unconscious fantasies. Trauma confirming unconscious fantasies may lead to the fusion of fantasy and reality (Blum, 2007).

The reverberations of traumatic experiences have an even more significant impact when they coalesce with the experience and fantasies of the family and the social surroundings. Because of the immaturity of the ego, children are more susceptible to trauma and require greater support from sustaining objects with which they identify to recover from the traumatic experience. Regression, disorganization, and damage to the ego may parallel traumatic effects in children (Blum, 2007).

Psychic trauma has both a quantitative dimension as well as qualitative one. In traditional psychoanalytic thought, the traumatized individual has a stimulus barrier that has been breached, and as a result, the ego is overwhelmed and incapacitated. Patterns of experience of a traumatic kind

disturb the ordinary functions of perception, registration, and memory-trace formation. Such experiences, when repressed, are registered in the unconscious in various forms, such as somatic memories or the need to act or be acted upon, and are usually connected with the potential for intense negative affect (Cohen, 1981). Trauma may affect different ego functions differentially, as well as the defenses mobilized to deal with the trauma (such as regression, repression, denial, and dissociation). These defenses, designed to reduce danger and damage, may paradoxically increase the constriction of ego capacities (Blum, 2007).

New trauma also reactivates prior traumatic experiences. Regression and defense can influence not only trauma memories but also the formation of memories, selective amnesia, dissociated reactions, and somatization. Multiple traumas may be telescoped into a single traumatic experience, and both traumatic and nontraumatic experiences may be amalgamated, obscuring the components and determinants of cumulative trauma (Blum, 2007).

It is essential to differentiate the elements which make up trauma: the traumatic event; the intrapsychic traumatic process, where there is a rupture, partial or complete, of the ego's barrier or defensive capacities against stimuli; the traumatic effect or result, a state of psychic helplessness; and the traumatic agony (Baranger, Baranger & Mom, 1988). The traumatic event is an external excitation powerful enough to break through the psychic protective shield. Intrapsychic process refers to the ego's ability, or lack thereof, to repair the psychic damage in sufficient time to maintain a state of security. The traumatic effect or result is a state of significant psychic helplessness. And the traumatic agony is a painful and anxious affect that follows the traumatic unfolding of events (Baranger, Baranger & Mom, 1988).

The traumatic event is a moment of rupture, outside the linearity of time, which connects past traumas in the child and in the child's family and will be resignified, reorganized in the *après-coup* moment later in the future.

Après-coup, a French term, refers to the retroactive effect of an event or trauma on an individual's psyche and subsequent experiences. Thus, the full impact of a traumatic event may only become apparent later in life, often triggered by a seemingly unrelated event or experience. Freud (1895) developed the original concept as *Nachträglichkeit*, translated as deferred action or afterwardness. It implies that the significance of an event is not fully understood or integrated at the time of its occurrence. Its meaning is constructed retrospectively, as subsequent experiences and memories clarify its psychological content. Additionally, *Nachträglichkeit* can encompass an enactment or insight which creates an experience of retrospective disorganization (Goldin, 2016). However, small-scale disorganizations and reorganizations of the past allow for an actualization of the sense of self and sense of the world and is necessary for healing from trauma (Goldin, 2016).

Freud initially introduced the concept of *Nachträglichkeit* in the context of anxiety-producing interpretations of childhood fantasy, when mature insight transforms infantile desire into guilt (Freud, 1918, Goldin, 2016). However, he didn't produce an article centered on this concept (Faimberg, 2005). The concept of *Nachträglichkeit* carries a dual temporality in which later insight changes previous knowledge. Lacan incorporated the notion of *après-coup* into his broader theory of the unconscious, highlighting its role in the formation of subjectivity and the construction of meaning. For Lacan, the concept of *Nachträglichkeit* which was translated in French to *après-coup* refers to the process in which the adult must understand her original experiences retrospectively because such understanding was not possible during the original traumatic moment (Goldin, 2016, Lacan, 1988). Laplanche (2006) expanded upon the concept of *après-coup*. He emphasized the role of sexuality and unconscious fantasies in shaping the retroactive effects of traumatic experiences. He readdressed Freud's model of psychic trauma, which requires two moments in time and an internal process. First, there is the implantation of a situation from the outside. This experience, or its memory, must be reinvested in a second moment. Then, it becomes traumatic. (Browning, 2018, Laplanche, 2006). Laplanche emphasizes Freud's presentation of trauma as an example of pathological repression, where distressing material cannot be processed in stepwise displacements but emerges in a full-blown displacement of psychic energy onto the second scene. Second, Laplanche focuses on internalization: it is not the event that is traumatizing, but the memory of the event. Its memory

carries the trauma forward in time, and it is so toxic that it assaults the person from within (Browning, 2018).

Expanding the temporality of trauma and *après-coup*, we can think of it as a multiple-time, as opposed to two-time process. Trauma and *après-coup* are like two mirrors in front of each other and their resulting infinite reflection alters each other's images. The *après-coup* is a resignification that happens in a loop, changing our memory of the past and thus transforming the past and affecting future representations. The mnesic traits are modified with resignification, and the impact is not confined to the events but spread to the whole psychic life of the individual, be it in the brain or the body.

Hirsch (2009) explores the uneven effect of the *après-coup* in a person's mind, for split parts of the ego are not affected by *après-coup*. The *après-coup* remains senseless and cannot transform split contents into integrated parts of the psyche. The split contents repeat themselves compulsively and inexorably and cannot be put into words, remaining in a blank, in absence of thoughts and representations.

Effects of Holocaust trauma on children

Unfortunately, children are often perceived as unable to fully understand, remember and be affected by events, even dramatic ones such as domestic violence or war. For many decades there was a misconception that adults were the real survivors of the Holocaust, as children were not believed to have memories of the torture suffered nor would they grasp the enormity of the genocide (Kestenberg, 1998, p.110). Nevertheless, child survivors were not spared of the systematic annihilation methods devised by the Nazi regime and were in greater danger due to their inability to work or execute orders. It is estimated that 9 in 10 Jewish children were killed in that time and "one-sixth of a sample of hidden children had been sexually molested" (Kestenberg, 1998, p. 111).

Children also had to face segregation, starvation, cold, humiliation, overcrowding, deportation, and sudden separation from their parents. Many survived by hiding. In concentration camps they were forced to engage in slave labor. Constant threats and lack of protection from parents and caretakers interfered with children's developmental phases and growth. Verbally and nonverbally, parents and adults imparted the notion that they no longer could protect their children. Both age and reliance on parents had an effect on children's capacity to buffer the traumatic event. Smaller children, although they could understand the sense of danger, tended to respond somatically and with acting out to threats. These responses put rescuers at greater risk to be detected by a Nazi official or collaborators. Many children responded with numbness, a compulsion to live, or clung tenaciously to a good object (Kestenberg, 1998).

Liberation, for children who survived the Holocaust, meant that another cycle of suffering was ahead of them. Postwar stresses could be extremely severe as they might have to acknowledge that their families were gone forever, or that their parents could not cope and would send them to orphanages. Some children returned to antisemitic environments, or to foreign countries, where their sufferings should be discarded with their past. Psychologically, these children faced postwar traumatic events and most coped by repressing their memories and feelings. (Kestenberg, 1998).

Kaplan (1996) mentions that to bear witness one must be psychologically present, but in traumatic environments, such as concentration camps, to be present causes unimaginable suffering. This level of awareness in the presence of terror can be lethal. To survive one must not be fully present during their own massive traumatization, thus one cannot truly bear witness. Thus, an *après-coup* response was triggered in children. By remaining silent, survivors try to stay sane, but silence becomes a toxic secret in the person's life and that of her offspring. In a macro context, there was also silence as a massive psychological resistance to the genocide that happened during the Second World War. Nazi regime genocide took three decades to be absorbed, and the same has happened with the sequelae of war in places such as: Hiroshima, Vietnam, Cambodia, Rwanda. "The unwitnessable and unspeakable horror of massive trauma is transmitted belatedly...at first only through images of absence and voices of silence" (Kaplan, 1996, p. 221). Nevertheless, the nightmares of survivors became the nightmares of their children. The children were enacting experiences and reporting

fantasies to their therapists that were associated with their parents' traumatic experience during the war. (Kaplan, 1996, p. 221). The children attempt to give representation to the parents' un verbalized experiences through their dreams. They try to understand what has happened in the past and make sense of frightening fantasies of their parents' past and childhood conflicts (Auerhahn, 1983). As Kaplan noted: "the child of the survivor had been sheltered from the truth. But the child was living the nightmare". (Kaplan, 1996, p. 223). To address this situation, Judith Kestenberg created the concept of *transposition*, to describe the process of unconscious transgenerational transmission of massive trauma, in which the parents' past occupies an important space in the child's experience (Kaplan, 1995).

Narcissism and Trauma

A child's self, object constancy, and self-other representations evolve gradually. With the child's increasing independence, she demands the mother's constant involvement. As the child becomes more aware of her separateness from the mother, there is an attempt to force the mother to function as a unit. Growing up, the child can no longer maintain the delusion of her omnipotence and that of parental omnipotence and gradually realizes that her love objects are separate individuals with their own personal interests. She must give up the delusion of grandeur. The ideas of separateness, loss of omnipotence in self and others, and loss of love objects are repressed in case of trauma, which disturbs the maturational process of narcissism (Cohen, 1981).

Disturbances in the regulation of self-esteem derive from narcissistic injuries and if too pervasive and frequent may cause narcissistic disorders. Some of its symptoms are: overvaluation; a need for constant admiration, attention, and self-aggrandizement; a need to devalue others; a compelling need for the self-object; a lack of self-awareness; lack of empathy for the needs and feeling of others; lack of empathy and perspective on themselves; and a precocious ego development (Buren and Meehan, 2015).

Nevertheless, during wartime, overinvestment in one's narcissism can be essential to survival. Kestenberg (1988) suggests that tertiary narcissism, a fusion of both primary and secondary narcissism, redistributing a person's libidinal energy, enabled children to resist physical and psychical threats. During the Holocaust, children had to preserve their self-esteem and self-regard in the face of enormous threats to their lives and dignity. Under continuous humiliation, torture, physical deprivation and frequent abandonment from parents and the State, children who survived needed to invest narcissistically in their bodies, their functions, and their qualities to keep themselves alive. Overinvesting narcissistically in the self increased a child's chance of survival.

Self-esteem, an individual's sense of its own value and its right to life, must eventually reconcile with the supreme narcissistic insult, which is the acceptance of aging and death. When we find ourselves prematurely confronted with this natural situation, it is necessary to appeal to a formidable reorganization of the psychic forces. In a way, it is the antithesis of fixation. Faced with continuous death threats and to a deterioration of the body which is at the same time gradual, constant and premature, the narcissistic defenses must be reinforced and organize a redistribution of the libido, both with regard to non-essential investments of the self in the body as well as the essential bodily functions and the ego ideal, all of which intensify to make effective the will to live. We call this narcissism, tertiary narcissism, to indicate that there is a passage towards a libidinal hyperinvestment in the body, satisfaction of vital needs and ego functions. The measure in which the experience of the Holocaust affected and colored the psychological growth of the children was influenced not only by the nature and the importance of the trauma by the stage of development of the child and his previous health state, but also by his ability to form and maintain tertiary narcissistic adaptations (Kestenberg and Brenner, 1988, translated by Renata de Assis).

Thus, a more nuanced understanding of the impact of trauma on children's narcissism is warranted to avoid psychopathologizing necessary narcissistic responses in face of premature terror and death. In Menachem's case, which we will discuss below, the child's grandiosity and idealization of parental figures allowed him to survive one of the most significant genocides in history and this

response should not be taken as a regression or fixation, but rather as an important coping mechanism in the face of enormous danger.

Menachem's Story

Menachem's story begins in Krakow, where he was born into a Jewish family in 1938. By 1942, the family found themselves living in the Krakow ghetto and in 1943 the ghetto was closed down and the family was sent to the Plaszow forced-labor/concentration camp. Recognizing the danger, Menachem's parents arranged for him to escape the ghetto with the help of a bribe. His parents instructed Menachem to survive outside the ghetto, and his mother gave him her student ID to help him keep her in mind. The photo became a symbol of hope as the parents promised the child they would reunite once the war ended. Unbeknownst to him, the address to which he was sent by his parents was a brothel. Upon arrival, he was offered a glass of milk. Menachem kept in his memory the image of a place completely white, with people in white clothes, a world of purity and goodness. Eventually, circumstances forced him onto the streets, where he had to rely on begging and stealing for survival. As per his testimonial: "I was just a little four, five-year-old child...I was like a 70-year-old man...I was short, but I was old, and the whole responsibility for the whole world for myself" (Vlock and Laub, 1979).

In 1944, an elderly woman who had lost her grandson took Menachem in, renaming him Maciej and providing him with a Polish identity. Narrating this during his video testimony his face lightened. While this offered him a sense of protection, he had to let go of his Judaic identity and connection to his past to fit in the role of a substitute Polish Catholic child.

After the war, Menachem was reunited with his parents. It is the first time in the testimony that Menachem mentioned that the war experience was traumatic. He felt disconnected from his parents, who were gaunt and emaciated. He saw their physical and emotional scars from torture. When Menachem was safe again, he crumbled: that is when his symptoms appeared, and he couldn't sleep and had nightmares. His helplessness finally came to the fore after the war was over. For 35 years Menachem tried to convince himself that it had never happened. Or maybe if that had happened, it didn't affect him. As he said "I walked under the rain without getting wet. This was my fantasy" (Vlock and Laub, 1979).

Years later, living in Israel, Menachem's young daughter witnessed the impact of his trauma when they watched a Holocaust movie together. It was the first time he shared his story with her, and it was a moment of realization for both as she witnessed his tears. Menachem grappled with the question of why he had survived and carried psychological effects such as denial, insomnia, nightmares, and a lack of fear. His experiences shaped his resilience and influenced his behavior as an Israeli soldier. Until 1973, Menachem never sensed what it was like to be afraid. He blocked those feelings from his experience. And as he encountered his repressed feelings and thoughts, he worried about the effect of his trauma on his children. "What are we doing to the next generations?...We will never be able to eradicate what happened...Are we transferring our anxieties, our fears, our problems to the generations to come?...And I think this is the biggest tragedy of those who survived" Menachem states at the end of his testimony (Vlock and Laub, 1979), aware of the impact of intergenerational trauma and concerned about the impact of his unresolved trauma on his children.

Menachem and the *après-coups*: impasse and resolution

Menachem's testimony offers a small snapshot of how trauma affects children's sense of self and others and impacts a child's narcissistic structure. To survive, Menachem had to develop an aggrandized sense of self, and an idealized version of his parents, which crumbled when the war was over. Reconnecting with his real parents at the war's end was portrayed by him as a key traumatic event, and it was his first moment of disillusion, his first *après-coup*. Unfortunately, this could not be resolved as he could not completely symbolize his experience and, thus, this was an impasse *après-coup* (Hirsch, 2009). The ordinary child's fantasy of having powerful, beautiful parents was suddenly undone, the disillusionment was too abrupt. Trauma unraveled the family romance and brought to

surface the loss of the object, and a narcissistic injury to Menachem, who became unable to have feelings towards his real parents (Gediman, 1974).

When Menachem finally felt safe, unmetabolized experiences of war came to his mind. He felt disorganized, usually waking up disoriented after nightmares. He was thrown in a compulsion to repeat because he could not remember and resignify his experience completely. He partially knew what had happened to him and partially denied his experiences. The split content, his fear and impotence, was continuously repeated in his conveyor-belt nightmare, where he was heading to his death and unable to stop the machine.

Jewish children who suffered the Holocaust experienced a temporal distortion and the traumatic effects of *après-coup*. This type of trauma had cumulative and heterogenous characteristics, being both individual and collective. These children needed to hide their sufferings, not protest, presenting themselves as reasonable and adapted to the dangerous and changing environment. "Unconscious repressions and foreclosures were grafted, in hidden children, on the conscious and internalized prohibition which most often sealed their period of life as a hidden child" (Hirsch, 2009, p. 1682, translated by Renata de Assis). The unconscious defenses charged with the need to obliterate perceptions and repress psychic anguish try to erase the past, which was never historicized or psychologized. The return of what was split and repressed happens under hallucinatory states in a final attempt to heal and symbolize in a circular and chaotic temporality. Functional and structural ego splits allowed Holocaust victims to pause the lived and perceived unthinkable. These splits, nonetheless, left these children at constant risk of nightmares and hallucinations, somatizations, and psychiatric decompensations. Psychic temporality is not only circular and chaotic but also annihilating (Hirsch, 2009).

Fortunately, another *après-coup* experience happened when Menachem was able, as an adult, to address his experience with a therapist while he was giving his full testimonies to the Yale Fortunoff project. He felt, then, like the owner of his own experience and could stop the conveyor belt that kept torturing him in his nightmares. A real entrance into symbolization was made possible, allowing for the mourning of his losses and hope for his healing.

Severely traumatic experiences in childhood are sensitive moments which alter the course of a child's narcissistic development, generating a need for overinvestment in the self to survive. This overinvestment is necessary in the context of life-threatening situations which can be due to diseases, violence, war, ethnic persecutions, political upheavals, poverty. As clinicians, perceiving this altered state in a child's narcissism as a necessary resource for survival, as opposed to pathology, can help us better understand the child's adaptation to extreme environments. Our work is to provide a space for the child to mourn and symbolize by bearing witness to her trauma. And in so doing, letting the child construct her narrative of the past, integrate her self-representations and allowing her to readjust to a non-traumatizing environment.

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