

Trauma in Bonding Systems

The Multigenerational Perspective on Schizophrenia and Psychosis

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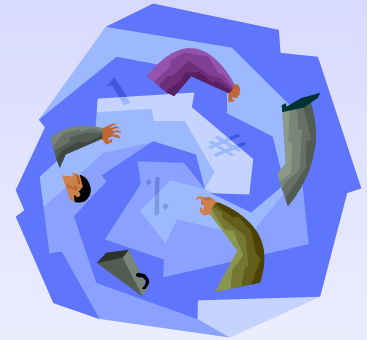
“Schizophrenia” and “Psychosis” are two of the most severe mental disorders - and the most puzzling

Salvador Dali
The Riddle of Desire



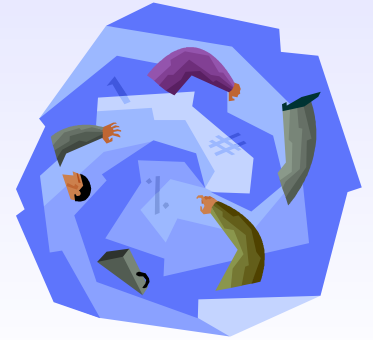
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Case Study: In his psychotic states a young man believes that he is very attractive to women, and at the same time very dangerous for babies. He thinks he has killed children and feels guilty. He is considering going to the police to confess his deeds.



The consequences of his psychosis were

- Loss of contact with reality
- Giving up his schooling
- Treatment in psychiatric hospital with medication
- Living in a residential community for the mentally ill



“My experience is like this. There is no connection with the outside world. I go for a walk, I sit in a cafe, I talk with friends, I eat with my family, I have sessions with my therapist, I experience a lot of inner states: I am angry, I am excited, I am a little sad, I fall in love a bit. But there are no real emotions, there is no certainty, no inner peace. Everything is buzzing and flickering, as if I cannot react to life around me. There are faces that trigger something within me, but everything is so weird and thick. I stick to smoking, drinking coffee, talking about my problems, painting, making music, writing. I can't connect with people. I don't know how to deal with them and I don't know how to deal with me.” (reflections of the psychotic patient in June 2005)

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Psychiatric diagnosis for this
patient: schizoaffective
Psychosis/bipolar Disorder
ICD 10, F 25.9/F 31



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Main schizophrenic symptoms

- confusion
- hallucinations
- delusions, madness
- constantly thinking and reflecting
- numbness
- lack of energy, depression

"I sit in a Cafe. As always I am watching all of my feelings and every thought. Today I feel hatred for fat people and for disgusting men. What is disgusting is sex and fat. While at the same time some men fascinate me. Cool, creative and male, outwardly strong men. For three months I have had a relationship with a girl. Sometimes I feel love. Sometimes I feel disgust and hatred. On the one hand, I am glad that I am in love with a girl – a love I have never had - on the other hand, I am always uncertain whether this love is anything else than friendship or physical excitement. If I kiss her I go out of my body, then the touching feels unpleasant (if I have had a drink I can stand it perhaps for a minute). Since my second psychosis I am continuously anxious about having sex with a girl and becoming violent in the turmoil of sexual excitement. (reflections of the patient, June 2005)



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Traditional explanations for Schizophrenia



- mutations of genes, malfunctions in the metabolism of the brain ...
- Vulnerability in combination with stress
- Projection of inner states (sexuality and aggression) onto the outside world
- Double-bind situations

**Basic assumption of a
multigenerational
perspective:
Mental Illness is the
consequence of Trauma that
can negatively influence the
process of bonding over
four generations.**

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**The bonding process is
fundamental for the
development of the human
“soul”**



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How does the human “soul” come into existence?

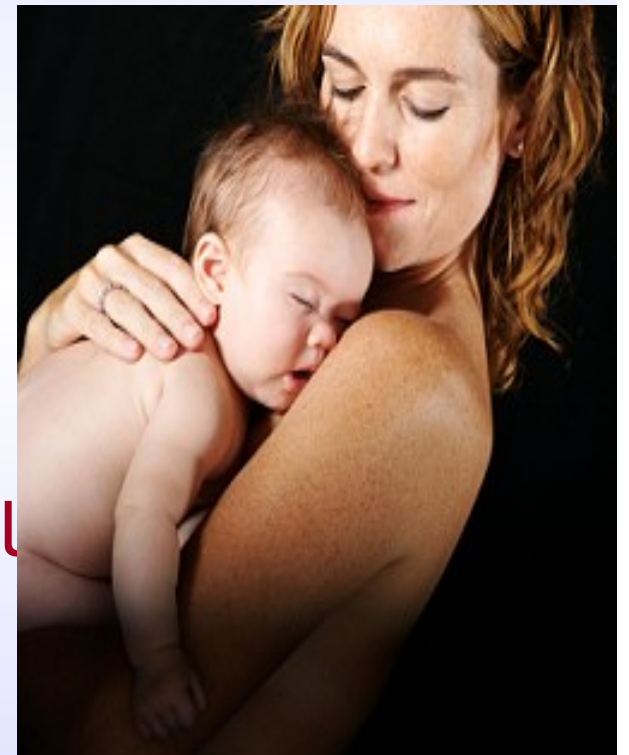
- The soul of the child is the offspring of the sexual and emotional contact between father and mother.
- A child’s soul exists and develops before birth.



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How does a human soul develop?

- The child develops in the closest possible contact with her mother.
- The child's soul is a mirror of her mother's soul.
- The bonding with her mother defines the child's basic emotional reactions to the world.
- All of this happens unconsciously.



Every child is doubly entwined with her mother:

- passively: the qualities of her mother's soul are imprinted on the soul structure of the child.**
- actively: the child clings to her mother and tries to support her mother's own stability.**



The love of a child for her mother is the strongest natural force in the child's soul.

The significance of the father for the development of a child's soul

- The bonding with the father is the second contact with reality for the child.
- Fathers support the child's movement to leave the symbioses with the mother.
- The child needs a safe bond to his father in order to become more independent.

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How does the child develop in a healthy manner?

- First his symbiotic need for contact, warmth, protection, love and belonging must be fulfilled by his parents.
- Second the child's aspirations for independence and autonomy must be supported in relation to his increasing abilities.



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Safe bonding with the parents is the basis for:

- autonomy**
- confidence in human relations**
- mental health**

(J. Bowlby 1907-1990).

Unsafe bonding leads to

- clinging
- complaining
- distrusting
- hating
- drug abuse
- mental illnesses.

The longing for a safe bonding to the mother persists for the whole of one's life.



**Mental illnesses are in
many cases the
consequence of
bonding disorders.**

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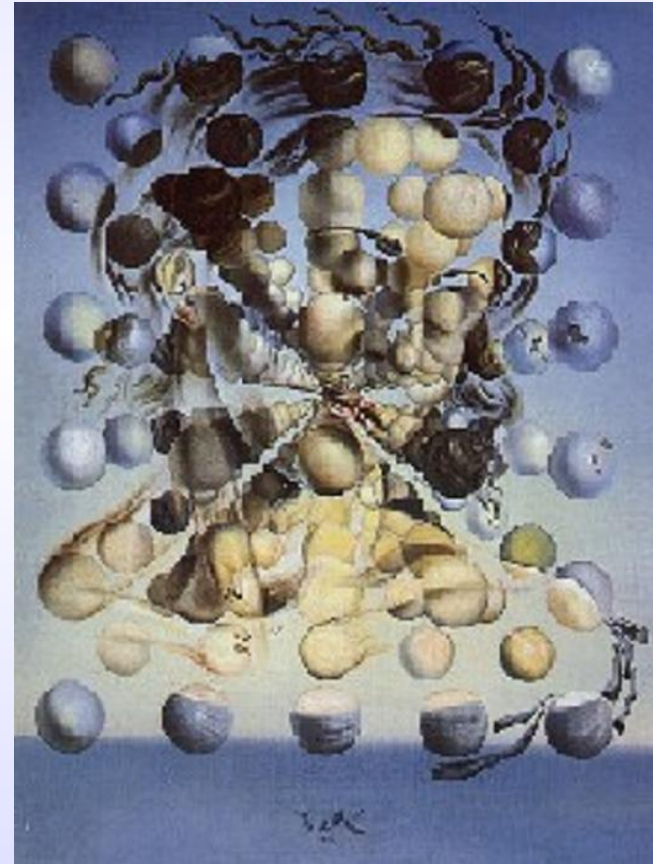
A trauma is

“... a vital experience of discrepancy between threatening situational factors and the individual’s coping capacities, that is associated with feelings of helplessness and lack of any protection, thus creating a permanent instability of the self-concept and perception of the world.”

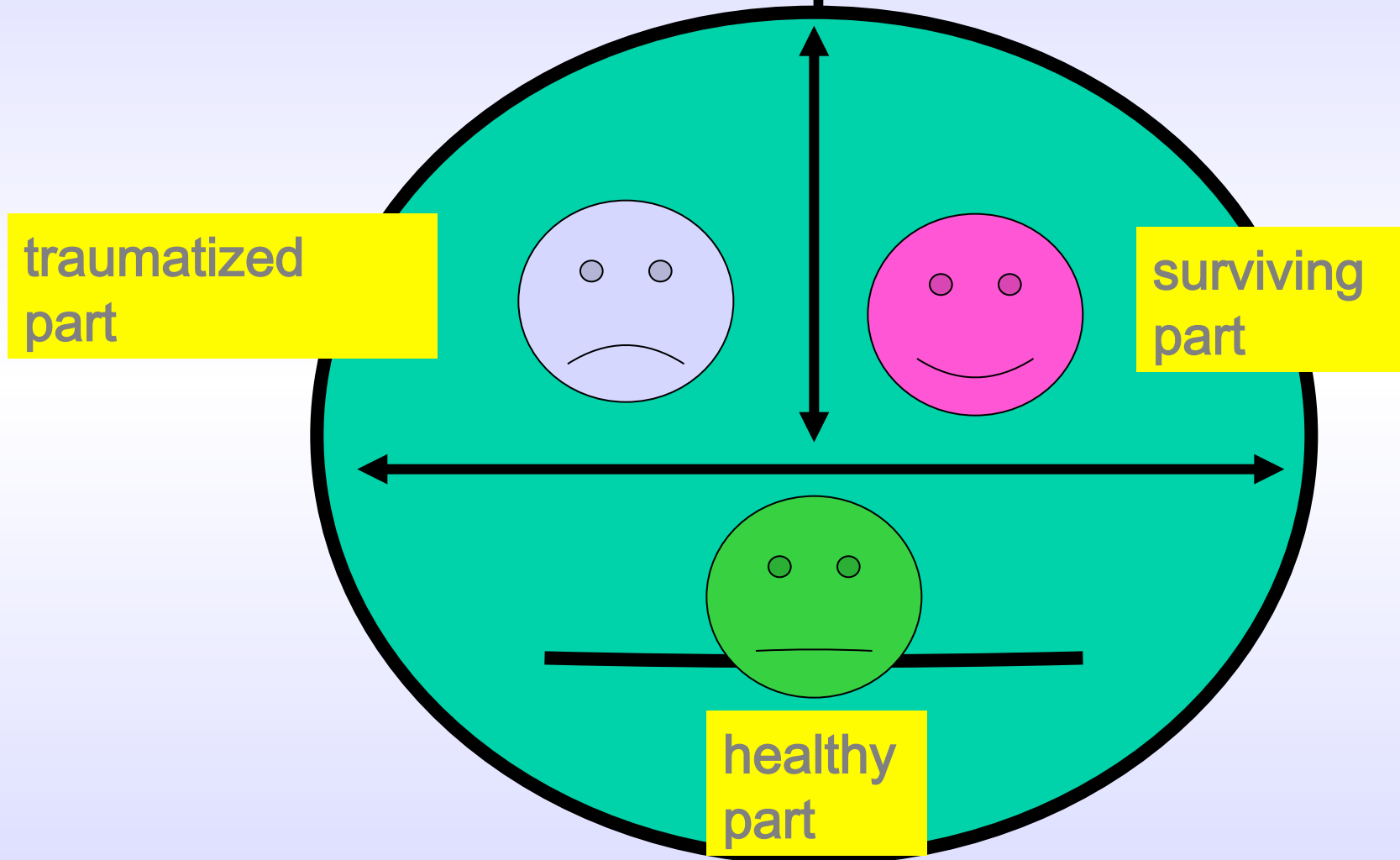
(Fischer und Riedesser, 1999, S. 79)

“Trauma” and “Soul”

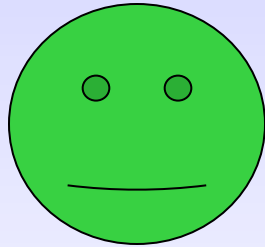
- Traumatic experiences destroy the wholeness of the soul.
- They lead to splits in the personality structure.



The split in the personality structure after a traumatic experience



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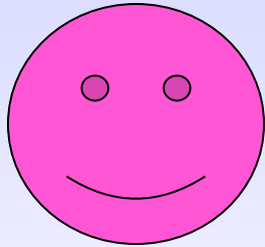
Characteristics of the healthy part of our personality

- Open-minded towards reality
- Capable of expressing and regulating feelings
- Shows genuine empathy
- Able to make safe bonds
- Able to resolve destructive bonds
- Shows adult sexual behaviour
- Has a complete memory
- Is ready for self-reflection
- Shows self-responsibility
- Seeks for clarity
- Has basic confidence



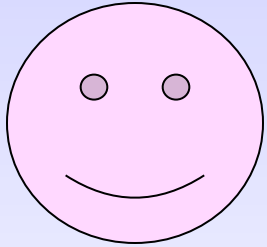
Characteristics of the traumatised parts

- stores the **memory** of the trauma
- is always the **same age** as they were, when the trauma occurred
- is continually **engaged** with the traumatic experience
- can unpredictably and suddenly be **triggered**



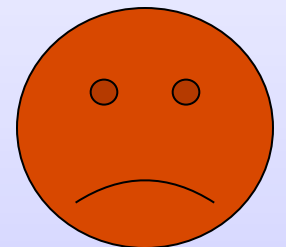
Characteristics of the surviving-parts

- constructing and guarding the split
- denying and suppressing the trauma experience
- avoiding
- controlling
- compensating
- producing illusions
- producing new splits



The surviving part is
the antagonist
of the traumatised part.

The more **extreme** the trauma
experience, the more **extreme** the
development of the personality
structures that help survival.



What is the relationship between Bonding and Trauma?

- Trauma destroys the bonding capabilities of the parents
- Through the bonding process the child assimilates the traumatized parts of his parents into his own soul.

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Four types of traumas of the soul



- Trauma of existential threat (being involved in a life threatening event)
- Trauma of existential Loss (losing a person to whom one is deeply bonded)
- Trauma of Bonding (being rejected by the mother and/or violated by the father)
- Trauma of a bonding system (caused by murder, sexual violence, incest)

A bonding system (e.g. a family) is traumatized, if something happens in the bonding system, that is contradictory to it's very purpose.

Rudolf Kraft
Liebe und Tod

- Killing of one's own child
- Responsibility for the death of parents, siblings or near relatives
- Incest between father and daughter
- Child of a concealed father

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**What can drive a
person mad?
If she/he does
something so negative
that she/he feels
absolutely guilty and
deeply ashamed.**

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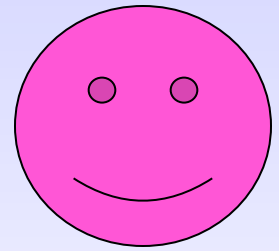


The traumatized part of the perpetrator stores the memory of his deed/crime, all the sensations, pictures, thoughts, often including also compassion for the victim ...

This part cannot find a solution or any inner peace.



Survival strategies of a perpetrator who suffered a bonding system trauma

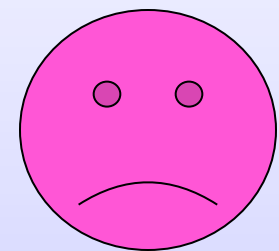


- Denying the reality of the deed
- Diverting attention from the deed
- Numbing, suppressing feelings e.g. by compulsive working
- Staying in the bonding system without going into any other emotional contact
- Creating a false appearance of normality
- Trying to be ultra honest
- Accusing and silencing others

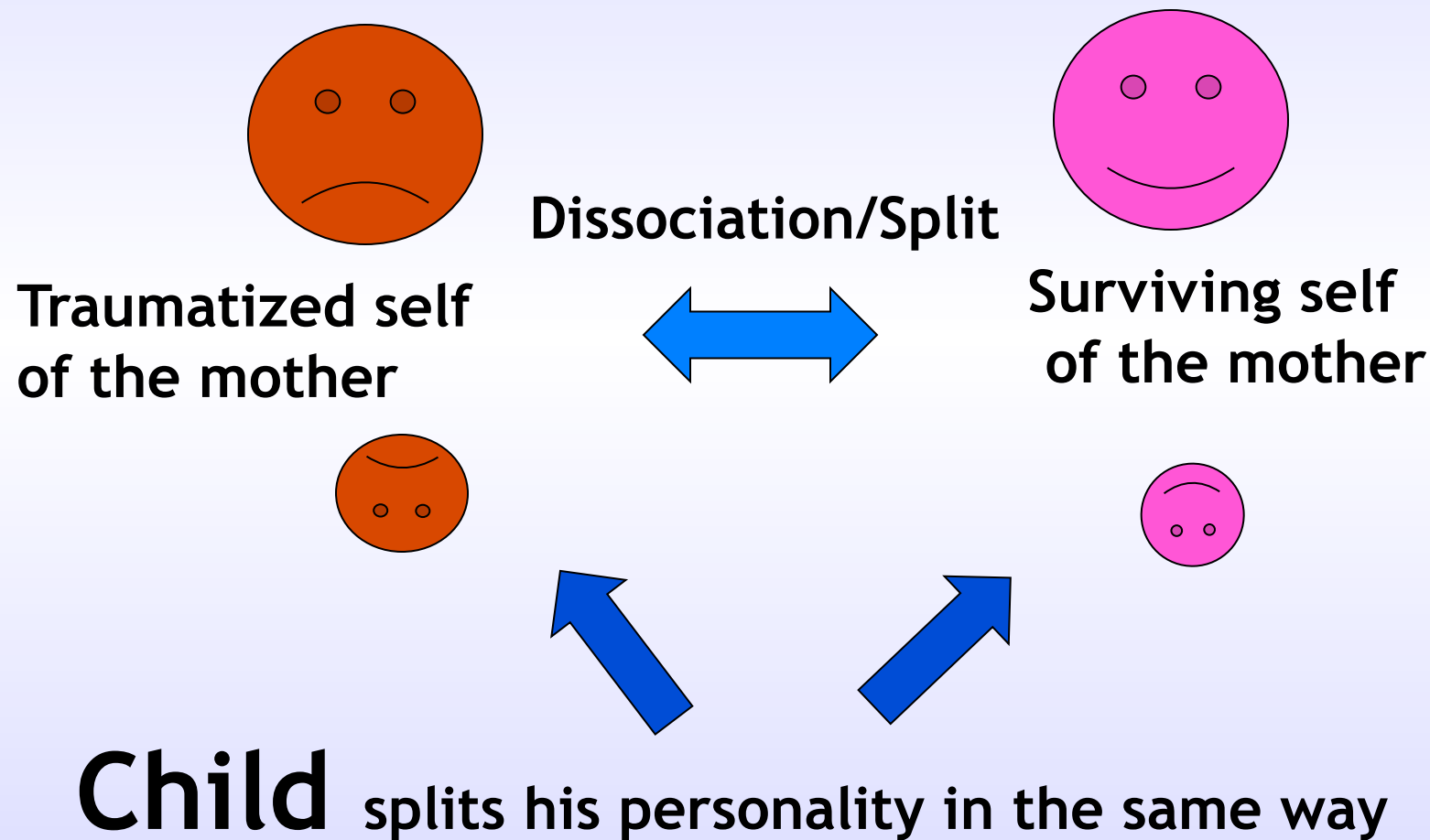
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If these survival strategies do not work,
then there are other attempts not to
acknowledge what had happen

- Drug abuse
- Becoming chronically sick
- Going mad, retreating into
psychiatric care
- Suicide



Mother with a split personality after a traumatic experience



**The surviving part of the child
is loyal to the surviving parts of
the other family members and
so perpetuates the family
secret.**



In psychotic states the child of a perpetrator (or grandchild or great-grandchild) is in deep contact with the traumatized part of the perpetrator.

In psychotic states the truth of the denied trauma shows up.



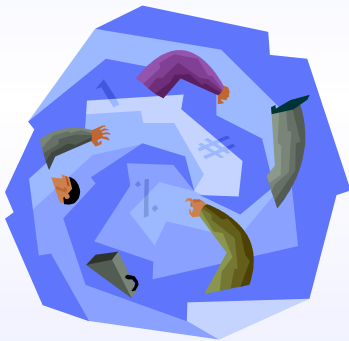
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Psychotic states are triggered by

- falling in love
- drugs (e.g. marihuana)
- events that parallel the original trauma (e.g. giving birth to a child)



Traumatising events in the life and family history of the patient mentioned before



- Sexual violence and abuse of children in the family over many generations.
- His mother's sister was the child of his grandmother and a secret lover, and was killed by the grandmother.
- His mother was sexually abused by her father.
- He himself was sexually abused by his father and a neighbour.

A mother or father who wants to help their psychotic and schizophrenic child must first face their own trauma.



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Schizophrenia - what can help?

- Reality and an end to secrets:
The truth heals delusions.
- Understanding: The
perpetrators often were victims
themselves.
- Liberation from the symbiotic
entanglement
- Accepting the pain of one's
own traumatization

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