## The Art of Survival: A Conversation with Dori Laub, M.D.

Featuring Ben Miller and Petra Schweitzer, Ph.D.

March 28, 2002

Ben Miller (BM): I remember reading in "Art and Trauma" that one of the difficulties in representing trauma in literature was the overformalization of the literary form, and that raised a lot of questions for me. What is being represented when trauma is represented? In the drawings from the film *Last Journey into Silence* (2001) that you showed yesterday, there was the same style of line for every one of the child figures, and I am wondering if that style of drawing represents something about the trauma that occurred to that woman.

Dori Laub (DL): I think that I can only speak more about the experience of that woman; she lost two children. It is likely that the two children were observant, religious; you see the drawings are of children with *peyes*.<sup>2</sup> What is very important to notice is that when she gives birth to a child, that is when the illness starts, that is when she is hospitalized. Somehow she is able to set aside the memory of that loss, but then for some reason, or for no reason, all of a sudden the memory comes back. And when the baby is born, she is a mother again, and then she remembers that she is a mother and that she is not only a mother, but a mother who lost. And she can no longer forget the children she's lost, or live forgetting that she's a mother. She can't live with it, this loss. She is a mother who has lost a child, and she decompensates. I think people have seen in this woman's face a lot of rage, having lost children. She refuses consolation and refuses replacement, so when the husband brings her daughter to her (the daughter is fifteen), she laughs, as if saying, "You are not going to console me. This is not an acceptable consolation, and that's where I stand, with my open wound, and I won't accept any substitution." You wonder about questions of reparation, of substitution,

and yet there is no substitution for her. And this living daughter is visiting her weekly, despite everything, but she wants to continue doing this, in spite of her mother not accepting. She established contact with her mother, not with words, but in touching, like with the nails, with doing her hair. The mother sort of laughs and says *aschen en dank* [a Yiddish and German expression meaning a beautiful thank you], and the daughter knows the uniqueness of the moment, because it is such an unusual moment, and it is short-lived. The clouds of rage part momentarily and then reassemble again.

Now what are the drawings? Are they in any way healing? I do not think so. They are an expression of the symptom of the wound, of the woundedness, and of the nonhealing of the wound—the woundedness that remains open and that continues to be reopened. These children continue, and they continue to be drawn. There is an enormous intuitiveness on the part of the filmmaker and the photographer to capture the endlessness of the drawing. There is more and more; you can see that. She keeps drawing day after day. That's a statement: "This is where I am. I will never stop drawing. I will never stop missing or hurting or feeling that wound of the children taken away from me. And I will keep them. They are not substitutions, the drawings, for the loss. They are the remembrance of the wound." Perhaps the art stabilizes something, because she doesn't get worse, and she doesn't decompensate completely. It is a sort of anchor point to the rage, and she continues to the next day. What if she couldn't draw? She might break windows, she might cut herself; I don't know.

There is a scene in the movie that I didn't show [during my lecture] where a good, well-mean-

ing artist says, "Why don't you draw different things?" And, she draws a sky, and she says, "Enough!" She pushes it away. She doesn't want to draw anything different. This reminds me of something. In the National Gallery in Washington there are two paintings almost side by side. One is by Anselm Kiefer (Zim Zum, 1990) and the other is by another German painter, Sigmar Polke, titled Knight Gathering the Clouds. One is empty and the other is full. The latter is a sort of guilt fantasy, or an attempted substitution, and I would say an obsessive substitution. It portrays a knight with a lasso trying to capture the clouds, but clouds are made of nothing. The other, the Anselm Kiefer, captures the emptiness, the vast void. It is able to substantively capture the destruction. Art has this impossible task, which is sometimes possible, to provide a certain substance to the trauma, to the "absence" of the trauma. Some artists can do it. I was talking about the artist of Maus, Art Spiegelman, who does it through the creation of multiple frames, sort of a creation of distance. By creating frames of the frames one can eventually create one that is empty. If you just create an empty frame, you don't create anything. To underscore the emptiness of the void, the absence of an object, you need to create the frame.

I think Paul Célan faced this, too, when *Todesfugue*, which was written I think in 1944–45, became very popular in Germany, because it's such a beautiful poem.<sup>3</sup> He began to realize that although readers were absolutely fascinated by its beauty, by its tonality, by its music, they didn't understand what the poem was about. The aesthetic eclipsed what it was about, so he eventually forbade its publication in anthologies, then changed the quality and language of his poetry and started writing in broken words. His poetry became broken words to reconvey the destruction of language as part of his deconstruction of structure. The aesthetic cannot be aesthetic; it has to convey the trauma, the destruction, and the void.

I do think, to my great surprise, that if one creates the right conditions to set the process in motion, one finds form in the narratives of people who give testimony. There were those who literally provided almost a form of essay, or short story, or novella. If we kept asking what came next, what happened, then they offered a beginning and a middle, a continuation and a reflection. You didn't even have to ask much. These people created, and I think that was part of their post-trauma survival, and I suspect also a contemporaneous in-trauma survival. You can call it an aesthetic, but I wouldn't go so far as to call it art. Colloquially, you can call it the "art of survival."

BM: It sounds, then, as if the "art of survival" is a creative response. If people are allowed during the testimony to take control of it in a creative way, they come up with

their own narrative. So if the conditions are right, then people respond creatively.

DL: It's a matter of regaining agency and imparting form on something that is either chaotic or at best utterly deceptive. By "deceptive," I refer not only to the part of the perpetrator but also to one's own wish not to know. Everything was against grasping and understanding what it was all about: the chaos of the situation and an unwillingness to know it, to look at the end or the grimness, to face the deadliness of it. And as to the deceptions of the perpetrator, one didn't want to know what he was doing. I think one rises above the occasion somehow to see the gestalt, even though it was evident. It wasn't such a feat, but you still have to pull yourself out from the midst of the situation in order to see it.

Again, I offer my free association here. There is a film produced by Hans Fromm (Photographer, 1998) that shows the first-known color slides, and these color slides were taken by a German photographer in Lodz. He was a financial administrator in the ghetto in Lodz who documented almost everything that went on in the ghetto, but at the same time documented as if he didn't know what was going on. This is juxtaposed with the testimony of a surviving physician from the ghetto, which is in black and white; the slides are in color. The main complaint of the man producing the slides is that he was given defective film and therefore they have a brownish tint. That's what he's so concerned about, not the people who died of hunger or the deportations. The slides are not perfect enough. They are not good enough. He documents the working conditions and all kinds of things and has a diary where he writes these things, but he doesn't know what he

documents. He documents the not-knowing.

I am speaking here of the deceptiveness, when Suchomel<sup>4</sup> speaks to Lanzmann about the transition at Treblinka from the train to the gas chambers. He describes the *schlauch* [the tunnel from the train] and how well camouflaged it was with trees and branches. People had no clue it was there, and they didn't know that the gas chambers were there. There is almost a certain pride in how well this was done. Then he said, "And you know, they learned the song there, and I know the song of Treblinka, and I may be one of the few people who know that song." And Lanzmann says, "Can you sing it?" Suchomel sings it twice, and there's pride that he is now the representative of Treblinka. He was a guard who sings the song of Treblinka. Does he know he is describing the mass murder when he sings the song? "We are here to work for Treblinka, Treblinka is our place. And when death comes, it will be a relief." It is as if he doesn't hear himself.

This blindness, deafness, and cluelessness, while ubiquitous in perpetrators, found its echo in survivors, moreso in situations of extremity. And those few who picked up what it was all about sometimes knew enough to make decisions that would save their lives.

That's what I mean by a "creative act of survival." And I've heard of such decisions in survivors. I have heard of a mother and a daughter, together in Bergen Belsen in the last days before the liberation. There is a massive typhus epidemic, and people die, and Bergen Belsen is littered with corpses. People are needed to bury the corpses. The daughter volunteers, and at the end of a day of burying corpses, she gets a bowl of soup. She goes back to find her mother to share her bowl of soup, stepping over corpses. She finds her mother and they start arguing over who is going to eat the bowl of soup. The mother says to her daughter, "You have to eat it. You are young. You have your life ahead of you. You have to live, and the British are almost here." The daughter says, "No, mother, you are feeble. You have to eat it." Then they decide they will share it, and they each put their spoons into the soup, and miracle of miracles, the soup level doesn't go down, because they take empty spoonfuls. Then the daughter says that her mother had this brilliant idea: "We will take a spoonful of soup and feed each other." This is how they consumed the food. They both stayed alive. That's a creative act, in the midst of death and destruction.

Here is what I remember about my own mother, when we were in the concentration camp. First of all, my mother never believed German propaganda. We were always told by German soldiers, "Come and join, come and get on the trucks and we'll get you better conditions. You'll live better, you'll work." Many went, voluntarily.

It became difficult to live on the outside. But my mother said, "They are going to kill us. We are not going." So we avoided it, but then they came to liquidate the whole camp, and all of a sudden there was a list made for those who could come up with enough money. We didn't have enough money, so we were not put on the list. Now this is a memory that I have. We were standing in groups, and a certain lawyer by the name of Stoller picked up his suitcase. My mother asked, "Where are you going?" He said, "Where I go, you don't." She started yelling at him, "I'm going to the same place, where you go," and grabbed my hand. My father didn't want to go but then followed us. It was her foresight. If we had taken the trucks, that would have been the end. We started running, and we came to a house that was completely boarded up, and she banged on the locked door and said, "If you don't let us in, I'll turn you over to the Germans." And they opened the door, and it was fully packed with about two hundred people. You could hear the camp being evacuated, the shooting started, probably of children and elderly. By midday we were discovered by a German patrol. They sent for the Romanian commander of the camp, who stated that we all were the specialists needed to run the camp. And in the evening we came out. Everyone was gone. We had no formal status then. My mother understood the gestalt of what was going on and made a decision that I think was a creative act. Others also made decisions. Now again, I don't want to say that everyone could make decisions and ensure survival. I think 90 percent of the time it was chance, but in some situations it was understanding what was going on, in spite of every deception and wish to be deceived, that allowed for survival, that gave a chance for survival.

Petra Schweitzer (PS): Yesterday, during your talk, something very surprising happened to me. I suddenly realized that you are always there in a dual role. You describe your role as an analyst as one who listens to the address of victims who want to be heard. Yet what surprised me is that while you are in the position of an analyst, when you listen to survivors, you are yourself a survivor with your own history. I really have several questions: Is the position of an analyst a form of your own survival? Is the moment, the temporary moment, of listening to the survivor a traumatic return to your own history? Is your position as the analyst an attempt to open up a not-knowing for yourself? I cannot even think about your work without using the term "the internal other." I wanted to know the relation of your work to survivors, to victims, and to yourself as a witness. Can you define the internal other, and how your work allows you to establish this very important relationship, which you say is necessary to survival?

DL: Don't let me off the hook if I don't answer your questions completely. It's difficult, and I may answer incompletely, so keep me to the task. Is my work essential to my survival, basically? Because I look at trauma all the time, is it unknown therapy, do I have to continuously break through to it, and by breaking through to it with others, break through to my own? Yes, I do. There are things I haven't broken through yet. That is a simplistic way of thinking about it or understanding it. There are memories I cannot reach. I know I have them. I have the memory of being present at a public beating in the camp when I was five years old and being terribly interested in what this man was thinking. I was standing there and the man was crouching, with bloody streaks on his back, and what he wanted was to smoke a cigarette. I think that was the beginning of my wanting to be a listener, to be a psychiatrist. But I must have seen more things; I don't remember. And lately I have the sense I saw public executions, but I cannot reach the memory. Here is something that hit me; I could have asked my mother, who passed away in 1994, what did I see?

I was on a trip in Germany, to give a lecture. All my documents had been stolen in the Frankfurt railway station. I was without a passport or train ticket in Germany. Imagine me, on a train, in Germany, without papers, on my way to give a lecture on traumatic memories. It was at that moment that I remembered my mother's death four or five months earlier and wondered, why didn't I ask my mother what I saw in that camp? I didn't remember the lost memory, but I remembered the opportunity I missed to retrieve it. So, do I always want to find what I don't know? I think this is also what makes me a better analyst, because there's an immediacy. It's not simply gratifying my need. I really know the need for the inner other in order to face the trauma—the

absolute need for it. So I know, emotionally, what is missed by the patient facing a trauma, and I can join the search and understand the quest, the yearning for what is missed. Sometimes you cannot satisfy the yearning, but you can acknowledge it, and you can be present to it, and in that way you are already the inner other, by reflecting it and by acknowledging it. I really have no patience for something else. My work is not guided by theory. What I find, what I hear, helps me form a theory, and theory is helpful from time to time. Of course, it is very important that I have read about infantile development and about attachment theory and about the Oedipal complex and about anal struggles because it's in my mind somewhere, but that's not the place from where I ask the questions. If you experience something and the theory fits, it helps me cover ground, but that's not where the questions come from. It's what I experience. They come from what I experience. And what I observe in a testimony may not fit the classical paradigm of anal struggle; it may, for example, be an encounter with a Nazi, with an overwhelming destructive authority.

I want to make reference for a minute to September 11, 2001, because for me these attacks lead in a straight line to Hitler. It has to do with the narcissistic rage of the not-so-deprived Saudi nobility, whose honor was somehow tainted. The narcissistic rage is there to destroy the world, very graphically, very literally, and it was carried out in the destruction of the World Trade Towers. The intended motivation to destroy the West is not much different from Hitler's and Nazism's desire to conquer and reshape the world. That is why I do not want to understand narcissistic rage. I want to nip it in the bud, literally put it to death, and that's it. The

danger is such that one has to deal with it in an extreme way. That doesn't mean bombing Afghanistan. But this is the very phenomenon that raises its ugly head from time to time over the millennia.

Is it continuous with my traumatic history? Yes, of course. But I am not staying stuck in my own history. September 11 is not a repetition of the Holocaust. I don't make it my story. It's a story that is different, and I don't appropriate it. I try to understand the gestalt of the different story, while acknowledging my personal commonalities with the Twin Towers. One such commonality is that the perpetrators acted from narcissistic rage; another is that the casualties of the attack on the Twin Towers also have no graves. Their families, however, remained intact, waiting for their return and mourning them, and life continues. It has nothing in common with the concentration camps, where there was no one to return to. So these are different narratives, which is equally important. So it's not always the same. For instance, I had some contact with East Timor refugees; they have their own narrative, which is a quite different narrative, of what went on in twenty-five years under violent Indonesian oppression. The East Timorese want the violence inflicted on them remembered: how they were bombed and driven into caves, exiled and abused by their own people—the whole history of massacre and rape. They want to keep that memory alive so that a leadership and a tradition can emerge to prevent the situation from becoming "ahistorical," from turning into havoc and chaos with thugs and warlords taking over. For leaders, it's very important to keep the memory as a national memory for the nation. The Timorese narrative is, however, totally different from my own historical narrative. I have a narrative of thousands of years that comes from my own people who formed the narrative. So, yes, I go back to my own history, in listening to other refugees, but the narratives are different. There are points at which the narratives touch, but there is a need to allow the differences to evolve, because I cannot, I do not want to, make them my own. There is a temptation to hierarchically compare narratives of suffering as if they were of the same nature. I refuse to do that. I cannot equate anything with Auschwitz; it's unequatable.

Is there, for me, a drive to open up the not-knowing? Yes. The question I didn't ask—what did I witness—is pursuing me. Why do I not ask this and want to know? In a sublimatory way, I help other people ask the question. I don't get my own answer from that, but I know that I can try to help them get the answers they can get, or at least to realize the obstacles they put in their own way or that can be avoided in finding the answers they can find. I remember a rabbi came for treatment who was a son of a survivor, and his father was dying of cancer. The thing I tried to impress on him the most was to spend time with his father before he died and for them to try to speak to

each other.

PS: You also speak a lot about the blank screen, the empty part. So your work, the visibility of your work, is then the possibility of inscribing a notknowing and carrying it on, of inscribing what you have heard and passing it on, so that we can carry it on. Because I'm also thinking about the position of the witness, the third-hand witness. I refer here to your narrative after your visit in Germany, where you describe how not many people want to listen, and not many people actually want to know that your work is in Holocaust studies. I run into that these days too. So, what is it, how can one break this resistance? I'm speaking of a resistance, of a contemporary resistance, to face this historical tragedy. Some do, some don't, and some don't want to be reminded. Is there a way of breaking that resistance? Or how does one address that resistance?

DL: Addressing the resistance is more practical than breaking it, because when you try to break it, it strongly solidifies. I would like to separate out the question of the blank space. The mother in the film excerpt I showed will probably never quite speak about the loss of her children, but it may be possible to touch her so that she makes more contact with life and with the daughter, and I think the dogged persistence of the daughter in visiting her will reduce the space that those drawings occupy. They will continue to limit and delimit the space of the blank, but not eliminate it. Trauma, to some degree, will remain mute. The question is, how can one go about life around trauma, and around the nightmare, keeping them separate somehow—to protect life from the nightmare. When I presented psychotic patients, how can one delimit psychosis? I say, okay, now you can have your psychotic episodes; I can keep you in the family until it passes, comfort you, be with you. All right, you're afraid of going on a plane now, you're afraid of a war, but we'll stay with you. You don't have to go out. It's natural that you fear it now. Words don't do it; sometimes touching works. At the end of a nightmare, you hug; that's what you do. You wait for the emotion to rebalance itself. And these patients will stay and maybe become part of the fabric of life. It's a matter of tolerance.

I would think this is separate from the question of being willing to know. I don't have a simple answer for Germany. All I can say is that I have a German patient in treatment here in the United States whose wife is Jewish. He has children with her—they've been married only six, seven years. He is extraordinarily intelligent. He is the only patient I dictate detailed process notes for after every meeting so that I can observe the subtle movement in his encounter with me. And he struggles. He worked as a social worker in Germany, with children from many different countries who had emotional difficulties. This way he started his search (and his research) to find out what happened in his own family. I just want to give you an example. When he read Schlink's The Reader, 5 his outrage was that the woman died taking her secret to the grave: Why didn't she tell? This was outrage at the silence in his own family's past about which he knew hardly anything. And yet he reenacted, at the age of sixteen, by walking into the Foreign Legion. What did he reenact with that? There was a terror all his life that they did something. So, we are working with resistance and terror and not breaking through resistance but addressing resistance. In his dreams, he faces accusation all the time, but sometimes I am near him facing accusation, too, because we both are entering the forbidden territories, asking those questions that shouldn't be asked. Who are the executioners? That's the central question.

I think that probably the way to approach it is by asking, what is the terror of blame? I was giving a presentation to schoolchildren in the Lessing Gymnasium in Frankfurt, and I was quite direct. I showed them twenty minutes of excerpts from survivors' testimonies. To my surprise, these seventeen- to eighteen-year-olds were absolutely direct in their questions to me. And one of the questions was, "Okay, my grandfather has these stories. How can I ask him to go beyond these stories about the war? I am afraid he will die if I really push." And what I can say is: "Look, if he dies, he will die feeling less alone, because in these war stories, he is quite isolated. You know about something but it's really very separate. I do not think he will die. But he wants to talk to you about it." There is a need to know in the grandchildren, but they don't dare to speak. They are quite afraid. It's a matter of asking questions, and they are scared

because they love their grandparents; they don't want to hurt them. But they could ask. They don't need to come on in an angry, accusatory way, saying, "It's you; it's not us." That's not the way to ask the questions. To ask questions, there is something difficult, but for your sake, for our sake, for our children's sake, it's important that we know that, that we put it on the table, even though it's terribly difficult. We need to know. You cannot keep the silence. Recall my own not wanting to ask the question, which was very deep for me and a huge loss. Why didn't I ask my mother the question about what happened in that camp? And I have these thoughts, because even today, there was this man who was in the same camp I was. He is dying of cancer. A cousin urged me: maybe you can call him and he can tell you. And I called him and he didn't respond, and I didn't call him again. I still have the question: What happened in that place?

What troubles me, really, is that there is no forum in which this is written about and continuously addressed, or at least I do not know of such an ongoing forum, it is absent. There is a debate that is not a dialogue about this issue, about what is not known. Dr. R. has published a number of books, but he is very hesitant, very scientific. I once was on a panel with him, and I broke all the rules of the panel. He and I were cochairing the panel, and he was to have only fifteen minutes, and I tripled the time so that he could speak more, and pushed him, and everybody was angry with me. But I think it was the most important topic, that there be literary debates, journalistic debates, that this be a topic of ongoing exploration—not just debate, but exploration. And again, from what I know, there is no exploration of it, not even in the psychoanalytic literature.

BM: Maybe this is one way to take it: the academic discussions on this topic of what's not-known seem to hide behind theoretical terms.

DL: Yes, very much so. During that conference in Bielenfeld, Germany, a literature professor presented a video of a neo-Nazi coming to Auschwitz and challenging visitors, mostly American Jews, about the truthfulness of Auschwitz. The neo-Nazi videotaped that, then he videotaped himself showing the tape at home to his friends and also to other skinheads. And the literature professor presented this as a study in language, not in content. The attention to the language here is kind of a theoretical hiding place. I couldn't even pay attention to what he was presenting. So I think you're right. I was invited to Ludenscheid Institute for Oral History Association in January of 2000. And it was a conference on oral history as the enemy of history—a very charged topic. And the purpose of my invitation was to describe my experience as a supervisor of an oral history project in Berlin—a video testimony project with seventy-five Holocaust survivors that took place in the mid-nineties. How did I do my long-distance supervision? What exactly did I do? I found it very challenging, and I wanted to do it, but I'm an analyst, a supervisor, which means dealing with all kinds of transference, both in Protestant Germany and the United States. And I'm a survivor, and supervision is more than just telling them how long an interview should be and what questions to ask. I came to Ludenscheid, and as luck would have it, somebody on the program was one of the interviewers in the video testimony project. She had brought me six tapes from the project, and she was the interviewer in several of these. I asked her if she was willing to leave her topic aside and combine the time to present fifteen minutes of her tape along with the presentation of both her experience as interviewer and mine as supervisor.

We had a pretty complete presentation of fifteen minutes of tape, her experiences interviewing, and my experiences supervising. This was in essence an interview with somebody who lived through Auschwitz; he was slated for gassing and was able to hide in a pit for fifteen days. He escaped on the way to the gassing and then was found in the pit. He aroused so much respect in the guards that they didn't execute him. They only put a big sign on him that said, "I am a swine, Jew," and they let him live. And then he lived in the DDR and became a politician. We chose fifteen minutes to present there. The interviewer of this man spoke of her experience, and I spoke of my experience, and let me say a few things about this project. There were twenty interviewers: only three were Jews; five were of mixed descent; and the rest were non-Jews. The two

most dedicated members were the grandchildren of a camp commandant; nobody knew it at the beginning. Another one was the grandchild of a guard. Another didn't know for a long time that she was Jewish; her parents were incarcerated, she believed, because they were communists. Another interviewer was the grandchild of a Nazi censor. The truth came out, and now they were all interviewers. All had been working on the Holocaust before they came to the project. But when you ask me the question why am I doing this, there's another side to it too. It took two years until this came into real dialogue.

The focus of the discussion in the oral history conference in Ludenscheid was whether this survivor was lying or not. What was inconsistent in the story? Nothing else was addressed. I was flabbergasted. There were two analysts from Freiburg who said to me, "My God, we all know what you are talking about. We are trying for years to take oral histories from people who had been in the SS, and we are having the same difficulties we see in this audience." That was in January of 2000, and they were beginning the project. So there's hope. Some people do the work, but it's not easy. And I think some international umbrella is needed to support this work and give it a home. It is probably not enough to have it be in Germany; it also needs to be in other countries.

BM: It brings to mind the Egyptian press and the official statement in the Egyptian press, how the Mossad arranged for the terrorist acts here. The random small presses would say that it's a government conspiracy to instantiate more control of individuals. The main response to Wilkomirski's book<sup>6</sup> was to find out if he was lying, and I'm wondering if all of those responses are motivated primarily from a

desire to disrupt the holding environment that leads to these statements coming out, to people knowing, and to the wish of all these people for both themselves not to know and for those histories not to enter into the national history that you mentioned earlier as it related to East Timor. Does that seem to be the primary motivation for people to disrupt?

DL: The national histories come to full expression. This is not conscious motivation; they sort of raise the flag of truth with Wilkomirski. Wilkomirski probably was lying, but the experience was close to authentic. But the motivation was whatever it was, a lot of rage against his own father, competition, and suppression of knowledge. A historian's rage against Wilkomirski is inexplicable except if driven by the wish to not know beyond what one knows. Some historians do not know about human experience; they stop there. And that has to do with a more intimate knowledge of trauma, of testimony. And then there is a complete condemnation of testimony.

PS: So, in a way, it is a refusal.

DL: I think it is a refusal. You raised a question about the internal other; historians don't need an internal other. Psychoanalysts absolutely cannot do without it. Testimony cannot be without an internal other; it has to be there. Writers on trauma, artists on trauma, cannot do without an internal other; otherwise, it's lost.

BM: The only alternative that I remember in your work to the possession of an internal other was the constitution of a false self that pretends to be real. Is that accurate?

DL: Sometimes there are screen memories; or black-and-white ideologies that replace the pursuit of a more complex, ambiguous truth. This is a foreclosure, a simplification of something that takes its place if you don't want to reach something that's deeper. You have a flag instead of having a companion. You'd rather have a flag, a slogan, a symbol. It allows for the discontinuance of ambiguity, doubt, uncertainty, and conflict. And it stops a dialogue. I think of Bruno Schultz at the moment. This is a Jewish painter and writer, who was shot by the Gestapo in Poland, and he writes like paintings, incredible. Yad Vashem literally abducted several of his paintings from a little town in Lithuania, and there is a scandal about where they belong: are they part of the cultural heritage of Lithuania or should they be in Jerusalem? My opinion is that Yad Vashem didn't follow the rules, but the work doesn't belong to Lithuania. It is a false place; it is

the place of his death. Sometimes you take the people who are alive to Jerusalem and sometimes you take the work of art, and it is important, because there is no real repository. Europe is littered with gravestones, but no one guards or respects them. To me, Europe is a graveyard of Jewry, and I don't know in what countries there will be a revival of Jewish life, not because it won't be allowed or even encouraged or invited, but because there was so much death. The shadow of death is so enormous, it may not be possible.

PS: I want to come back for a moment to your visit to Israel, and especially to the survivor whose parents were murdered or left in Auschwitz, when you asked the question, has no one ever asked you why you refuse to eat?

DL: I didn't ask that. I asked, has no one ever asked you about your life? You see, I didn't want to ask specific questions. Of course, I could guess why he didn't eat; he wanted to die, to join them. I could guess; I didn't want to upset him and promptly left.

PS: Where are you going to go with your work as an analyst?

DL: I had to leave; I had to finish the process. I will tell him that I hope I will see him again. He may die between now and the time I come back; he is not a young man. You are right. I made an implicit promise, but so I did with every testimony I started. I think in the promise there is also a warning that the promise will not be kept. I cannot return what is lost. I think the importance is to listen. I have a very long list in my mind of people with whom the

encounter was started, and I feel I could have carried it further. Sometimes I find when I meet these people again that my sense of guilt is greater than their sense of disappointment. They are quite forgiving; they understand that I can only give so much. They are not demanding and expecting; they got something. Something started moving. I would like to do much more, but I cannot.

PS: You asked the question, and he was heard. You listened to his voice. You mentioned that they bear testimony to their own knowledge, and so you bring something.

DL: Yes, and if I come back and the project begins, I can take his testimony, except that I just found out two days ago that the ethics committee has decided I can only do it if he has a conservator. If he is too well off and doesn't have a conservator, then they will not allow me to take his testimony.

BM: Can he give permission?

DL: He can give permission, but if he doesn't have a conservator, the hospital ethics committee doesn't want to give me permission to take his testimony.

BM: And he doesn't have the right to give permission himself?

DL: That's the hospital ethics committee's decision. Sometimes you get extremely angry about these things. There are wrinkles, and this is not the only one; there are plenty. I hope I can have him speak. I hope he has the tape that he can watch about his life, because this would be a companion for him. An analyst from a major city in Germany presented the case of treating the son of an *Einsatzgruppen* commander<sup>7</sup> who came to analysis because he wanted to injure his baby. He was in charge of a homeless shelter and was a very generous and kind man; as his analysis persisted, he became more and more like his father. The analyst said, I wanted to either fall asleep or shoot him in the neck, and eventually he dropped out after refusing to donate the bone marrow that he promised to a patient. The patient died. And I kept asking the analyst, who are you? After the presentation she said, you are right: my mother was a Jew; my father was a Nazi. What the patient probably did was to pick it up and reenact the execution. I wanted for years to get together with this analyst again. I think that this encounter was very important. I wanted to present not this case, but a talk he had given about a visit to Auschwitz and the treatment of a patient who was the child of Nazis. This patient

talked about a steel gate between her and herself and said that if she opened it, demons would come out. But when I wanted to quote him, he asked me not to because he was concerned about his colleagues and what would happen to his practice. That was two or three years ago. This is another example of testimony that was started, but there was not enough opportunity or the chance to continue it. I would like to. Maybe I will have a chance. There are many unfinished testimonies. Now should they begin at all? My answer is absolutely yes. I told you, it's a broken promise. It's a sort of opening a door, a possibility, saying it's possible, and it can happen, and if I can do it, it's still a possibility.

BM: Plus it seems to provide a more real example, that the promise has to be broken, that you have to leave at some point.

DL: It provides a more real example, yes, that the promise is broken. But the realization of the promise is a real possibility, even if it's broken. You know, there is nothing more convincing to me than this daughter (from a film clip I showed) who comes to see her mother every week for the last twenty years. In that situation, there is possibility.

BM: Is that kind of persistence enough to create an environment where the mother feels that connection again?

DL: I think she does; you can see it. That look. God knows where this mother would have been without it; she would probably be dead. In the film *Last Journey into Silence*, there are three sets of daughters and mothers: two are silent and one talks. The

mother who talks begs her daughter to take her out of this rest home, back with her to Lithuania, and she begs and begs, and the daughter says, "I can't, we're too poor," and the daughter leaves. The reality is that it is this mother who dies, and she is not a silent, enraged mother.

BM: I wanted to ask about patients now, who are talking about the World Trade Center and the Pentagon and how they came in and kept on talking about it and couldn't stop talking about it, except for the ones who were, as you mentioned, the most detached from it, who didn't talk about it. For most people, they are bombarded by not-real images; they are bombarded by images and sound-clips about what happened but not by people consistently talking about it. It seems that as an analyst, you didn't have as much access in that time period to television, to radio, to all the talking heads, but to people who were simply talking about it. I'm wondering if the effect of that is different.

DL: First, I also listen faithfully to the radio and watch CNN. Second, I don't understand exactly why, but people stopped talking about it. It was the first week that they talked incessantly about it, and now they don't. I think it is okay. Maybe they are being fed by the television. Yes, I think the effect is very different. It is much more real, the terror. There was a rage. There was a very young college student who had dropped out with a substance abuse problem, a suicide attempt, and who then came back and said, I want to do something for my country; I would like to enlist, I would like to fight. This is me now. I told him that I was shortly going to Israel, implying that we had something in common. My patients talked about the dangers, betrayal, rage, and also the incomprehensibility of the vision of the World Trade Center, of the buildings, of the bodies that appeared, the unfathomable of what happened. And the grief regarding a lost way of life, and the way of life has not returned; there is no sense of safety or pleasure. This has not come back. It just seems wrong. It doesn't quite focus on the anthrax; nobody talks about the anthrax. But there's a weight that people seem to carry. Much more real than what you hear on television.

BM: The first thing you were saying was that it wasn't hyperbolic language the patients were using but emotions?

DL: Yes, there was a weight, a sort of subduedness. It's interesting that the foreign patients are much more in tune with world events and name it. Americans seem to be more in shock. American patients know what is missing, but they don't exactly know

how to name it. It's more like a grief process. They can only know what is lost in bits and pieces. In European patients, the innocence was not the thing that was lost; they didn't have the innocence. I have a patient from Kosovo, and for Kosovo, it's still very much in the center. Their world is very much in the midst of an earthquake. It's not only New York.

BM: Have they been using the rhetoric that they've been hearing? Have they been using these events as a metaphor for describing their own problems or have they been treating them as distinct historical events?

DL: I don't think they have been using them. I think when they talked about it, they were talking of historical events. It was not a metaphor for their own problems. I haven't seen that. Patients who were in extreme life crises also didn't talk about it, because they were so preoccupied. I thought that was quite appropriate.

BM: So how does analysis come to an end with someone who has been deeply traumatized?

DL: In one word, it doesn't. I don't think that certain blank spaces or blank circles are ever filled. But life continues around the wounds, and they are contained, and children are raised, and relationships are built, and sublimations are formed. Sometimes you find that medications help with the nightmares. But I think trauma leaves traces, and I think it's a matter of living with it and not letting it interfere in relationships and be reenacted. That may involve going early to bed, or exercising more, or building life in such a way that you don't get vulnerable to traumatic situations. I had a patient with whom I

started treatment while in a hospital. He was a child in Europe and fled from the Nazis and came to South America in 1943. I saw him as an inpatient for several months and then he continued as an outpatient for years. And he got married, and there were children, and then he stopped treatment. So I said to him, "When you're ready for an analysis, come back," and he came back and he lasted a year and a half on the couch, and it just became too frightening. He came to really hate it and said, "I've had enough of this." Five years later he came back, and so we started Prozac, when Prozac was discovered, and it helped, and off and on I've seen him for thirty years. The last time he finished was five months ago when he retired, and I may see him again. I try to use the medication to a minimum, but I don't want to keep him in treatment on a regular basis. But the agreement is that he should call me every few months so we can meet. This is true for other patients too; they sort of keep in touch. This has been a hidden secret; clinicians didn't speak about it because they were embarrassed. Traditional analytic dogma is, you pronounce the case finished and resolved. It is "inappropriate" to see a patient for life. They go to managed care instead. And if you have a relationship with that patient, you don't talk about it. We became quite open about it, and I may have mentioned a reunion of patients and staff at Austen Riggs a few weeks ago. For the first time in hospital history anywhere, patients and staff met together for a weekend two or three weeks ago in the Berkshires. It was wonderful; you saw all these accomplished lawyers, physicians, and artists who were our patients. They talked about their experience in the hospital, and we talked about our experience treating them, though not always directly. It was a wonderful exchange, and what came out is that many were in treatment for many, many years. One decision that was made was that the hospital, which is an academic institution, would publish on this long-term treatment relationship that often goes off and on for life. It shouldn't be a secret, because it's very helpful. And I think such a relationship is of particular relevance to the trauma imprint, especially if you face it early in life.

BM: The way that you phrase it, to contain the symptoms?

DL: No, to protect the rest of the family and the community from the impact of the symptom or the psychosis. They live it; the effect is minimized through behavior, hygiene, sometimes medication, through relationships mostly, through tolerance, tolerance with yourself, accepting yourself.

BM: Tolerance with the transference that occurs.

DL: Yes.

PS: I am wondering about the suicide. I am thinking especially about Célan, Amèry, Levi8—one never knows why one commits suicide. But in the case of Célan, I am asking you, perhaps as an analyst, is there any possibility of an explanation other than perhaps hopelessness or despair, which is quite stereotypical? As an analyst who has experience with traumatized victims, I am wondering about and returning to the internal other, because that seems to be a crucial point as a form of survival.

DL: I will try to give different kinds of answers. One is cynical: that the artist is more vulnerable to suicide. That is, that his defenses are less effective; he feels too much. That is why he is an artist; there are areas of his unconscious that are more reachable, more accessible. That is why the poetry and the music come. That's why the internal other, or the real other, may be insufficient to protect, because there is so much more that he knows, including atrocity, loneliness, the limits of language—with Célan, the breakdown of language. The depth of those feelings is what is in the poetry. The other answer, which is much more empirical, is that the list is much longer. The list of creative people who wrote about it and committed suicide is very, very long. You would assume that they would be able to come to terms because they were able to sublimate and to write. What stuns me to no end is that I don't know of one doctoral thesis that has been written on this topic that seriously tried to look into their life histories and address them. This is such a vital question, and it's been mentioned, but not seriously addressed,

and even that nonaddress is a part of the silence of trauma. It is very threatening. Why do these luminaries who were able to formulate it kill themselves? We are afraid of it, because if they did it, then how can anybody else live? I don't know the answer. But it's a question that merits very thorough study. Primo Levi mentioned, I think in *Survival in Auschwitz*, a dream that he claims he had in the camp and remarked that other inmates said they had too. In the dream, he comes home and everybody walks out; somehow, at some point, the internal other leaves. Figuratively, there is no longer an internal other in dealing with the trauma.

PS: So then it would be the failure, the impossibility, of using art as a supplement.

DL: [A failure] of the companion to accompany all the way, and therefore he ends up without him.

BM: That makes sense, because if the art fails in that way, then it seems like a direct repetition of the failure of the other to hear at the moment of the . . .

DL: . . . of the execution, of the perceived execution. That's right.

PS: That is actually very important. When you say that trauma is, on the one hand, the possibility of representing something that cannot be represented but then also speak of art as a possibility, there is a double movement there. What is really interesting is when you said, in your article on Célan and the *Todesfugue*, that Célan realized that the *Todesfugue* was too aesthetic and then tried to frame it or write in a nonaesthetic way. So then the issue would really be, trauma also ruptures his way of expressing himself as an artist.

DL: If art is aesthetics, it is no longer a companion to trauma.

PS: Language, then, becomes very important. It is not only the silence; it goes all the way. That's the imposed closure.

BM: It would seem that the most successful works of these artists who committed suicide were the ones that repeated that inability to hear the other. The hope then is that they have gotten to a position where they can know others' failure to respond to them. The function of analysis for those artists would be to bring them to a point where they

can know that, yes, sometimes people will not listen, so that when they create these works of art, that art is successful in that they represent the trauma and repeat the failure of the other to hear them, and so that failure of the other to hear them doesn't lead to this complete disconnect from life. What comes to mind are the drawings of the woman in the film that you showed yesterday where there is a different relationship to the drawing. It represents in some way, but it also defers in some way, so that she can continue to live because she keeps on drawing that drawing. As opposed to someone like Célan, who can't continue to live because he keeps on writing and his repetition of the writing must in some way recreate the sensation of not being heard at that moment of execution.

DL: I don't know the circumstance of Célan's death. He jumped in the Seine. It may have been translated into something more concrete, into abandonment, I don't know. I really don't know how to address the question. It is theoretical. The drawing of the woman, I don't think that anybody sees the drawings. I think the woman in some way is dead. She draws the children that she had before, who they were, the religious boys. Cathy Caruth9 said something very important: no one in the movie addresses what happened. No daughter asks her mother, what happened to your children? So Célan's poems and Primo Levi's books were read and, at some point, maybe not read enough or not enough for the writers. They couldn't convey what they had to convey; they felt not heard enough, and they took their lives. It was a failure at some point. I think this woman doesn't even start; she has given up. She tried maybe early on, but she produces drawings endlessly; no

one heeds them.

PS: But what is very interesting is when she started painting, I thought she would just draw the fences of the concentration camp. And then suddenly you have the faces. Then this moment of awakening when the daughter painted her hands and the sounds came out.

DL: But there is no attention to who are these children? There are two children who died.

PS: But then you would perhaps come back to your point, perhaps she wasn't heard ever.

DL: No, she wasn't heard. Maybe if you ask her now, maybe she would say, Why didn't you hear me before? Maybe she's too angry now; it's possible.

PS: What a trauma for her daughter—the transmission of this trauma.

DL: I don't know whether it is possible for the daughter—to ask if she would respond. The daughter's interest may communicate something to the mother about her interest. Maybe that's enough.

BM: When you mentioned they had tried to get her to draw other subjects, I was reminded of a "squiggle game," where you draw back and forth with the child. And I was wondering if it would be possible to get her to draw with someone else. That she wouldn't draw anything else seemed to preclude that—that she would be too angry to focus on anything other than that loss, and that lack of hearing, or lack of a listener. The reason I think you would come to this project is because there are people who needed to be heard, but then it would seem that with this specific project there was an institutional desire not to listen to these survivors. Do you think that's one of the reasons that you were so drawn to this project?

DL: No. I went through a period of time when I myself didn't ask any questions. I find patients to be extraordinarily human. I find their anger speaking to me. I want to cry about it; it's too late. It moves me immensely, even though I can only say for their anger, you're right. Those who want to speak, I find it urgent that they do speak. They

really touch me. There is not much I can do, but I can hear, and I can record, and I can give them back the recording, and I can get something. And I think they have some things to say. Maybe some people have things to say that make it very difficult to live a normal life for anybody, with what they saw and what they lived through. But we have to hear it. It's like they are muzzled; there is a prohibition. I want to break open that seal. It's my own freedom, too, to hear it finally. To ask my mother, what did I see? I was told repeatedly by people in the hospital, those people don't talk, you'll never get a testimony from them. The closer I come, the more I see that they want to talk. Endless dangers were pointed out to me, but I don't see that. I think the fear is in us. I see it in the Berlin interviewers of Holocaust survivors; they were so afraid it would damage them. The survivors have to take care of the interviewers. I don't come to this project in order to prove something or rebel, but because it's such an enormous loss as they die off; so many already have died. And after having been in a place, I have an inkling that this was going to be something. They are so warm and they want so much attachment. I cannot provide for their loss, I know that. But I don't think they have such unrealistic expectations of me.

## **Notes**

- <sup>1</sup> Dori Laub and D. Podell, "Art and Trauma," *International Journal of Psychoanalysis* 76 (October 1995): 991–1005.
- <sup>2</sup> Side-locks worn by traditional Jewish men.
- <sup>3</sup> Paul Célan (1920–79), born Paul Ancel, was a Romanian-born Jewish poet who survived the Transnistria forced-labor camp and lost both his parents. All of Célan's poems are written in German. *Todesfugue*, or *Deathfugue*, is a celebrated work of his.
- <sup>4</sup> Franz Suchomel was a guard at the Treblinka death camp whom Claude Lanzmann interviewed for his 1985 documentary *Shoah*. The nine-and-a-half-hour film chronicles the ghetto, deportation, and death-camp experience through the voices of survivors, perpetrators, and bystanders.
- <sup>5</sup> Bernhard Schlink, *The Reader*, trans. Carol Brown Janeway (New York: Vintage International, 1997).
- <sup>6</sup> Benjamin Wilkomirski, *Fragments: Memoirs of a Wartime Childhood*, trans. Carol Brown Janeway (New York: Schocken Books, 1996). Although well received at the time, Wilkomirski's memoir of a child's survival in the death camps later proved to be a false testimony.
- <sup>7</sup> Mobile killing units of the German army that operated primarily on the Russian front executing mass numbers of Jews.
- <sup>8</sup> Primo Levi was an Italian Jew who survived Auschwitz. His most famous book, *Survival in Auschwitz* (New York: Simon and Schuster, 1993), chronicles his time there.
- <sup>9</sup> Cathy Caruth is the Winship Distinguished Research Professor in the Department of Comparative Literature at Emory University. Caruth has authored numerous ground-breaking books and articles on trauma, including *Unclaimed Experience: Trauma*, *Narrative, and History* (Baltimore: Johns Hopkins University Press, 1996) and, as editor, *Trauma: Explorations in Memory* (Baltimore: Johns Hopkins University Press, 1995).

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