

In the Shadow of the Obersalzberg: Daughter of a SS-officer

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The offsprings of SS-fathers have not been a often research objects for many reasons; even less so have they been exposed to psychoanalytic treatment. This clinical reports portrays the complicated way of the daughter of an SS-officer that had served at Hitler's hide-a-way, Obersalzberg. Borne in 1945, she was not directly exposed to her father's involvement in the Nazi-system, but via unconscious counter-identifications her own developmental path was tinged by a heavy rejection of politics and deprecatory style in handled intimite relationships. The psychoanalytic treatment of her schizoid relationship patterns allowed her toward the end of the analysis to accept the facts of her father's involvement by checking his data in the US-military document center in Berlin.

Introduction of the analysis

The 32 year old female patient, a psychologist working at a consultation center, had applied for psychoanalytic training two years ago and was rejected. During the following months she felt humiliated by this experience and it got even worse when a colleague of her whom she knew from years of study had been admitted – it struck her all the more as he is a very mediocre character in her opinion. As a consequence she developed a severe depressive symptomatology which impaired her professional activity. When she sought analytic help two female colleagues had already conducted a first interview (who

without the patient's knowledge were in psychoanalytic training). The consent to take this patient in analysis was not given by the training committee, as one felt this constellation was not a good arrangement. So the patient was referred to me. Both interviewers had described the patient as a sympathetic, elegant yet distant.

When the patient came to me the first time, I encountered a highly attractive lady, clothed in black, elegant clothes, blonde, *consumptuous* hair, silver bracelets and rings. Her countenance was just perfect.

Her deprecatory self-presentation was well organized and professionally worked out. She was able to recount that the rejection to be accepted for psychoanalytic training was *but a last drop on her raising despair*.

Everything started when she left Munich where she had "a wonderful time with her friends". She left Munich as her husband's professional career led them to a small town close to Ulm. In Munich while being a psychology major she had many erotic and sexually gratifying relationships with men, including her later husband. The couple had shared a flat for some years before they got married. Out of many admirers she picked him as he was the only one she could share an intense pleasure in cynical remarks about God and the world. She told me that she had grown up in Berchtesgaden. She was the elder child of a blonde, beautiful, spoiled, and very young mother and a blonde and beautiful former SS-man who was one of Hitler's lifeguards on the Obersalzberg. Later I learned that her mother was the only child of a rich, catholic warehouse family ("the first address in town"). She started the relationship with the SS man against her parents wishes at the age of sixteen in 1944. Slowly I realized that in this Bavarian, deeply catholic, nationalistic family it was one thing to do business with the Nazis from the Obersalzberg, but being sexually involved was something completely different. Alas, one might think that the sixteen year old

blonde and beautiful adolescent daughter was acting out what was best for the family's business.

Immediately it occurred to me that her black death angel beauty (as she reminded me of Jean Marais' movie < Orphee >) - this shiny, yet stiff blackness of her outfit would be connected to this background. However I knew that she was born in 1946 - one year after the collapse of Nazi Germany. So all in all there would be no simple connection. When it was all over her father - the patient once characterized him as a psychopath: a primitive beast who hadn't learn't anything but killing - disappeared in the woods. He escaped from all political purges, never underwent denazification, but he must have remained in contact with the mother. Later on in the analytic work the patient started to realize that even her kind, catholic grandfather must have been involved in this survival and cleaning procedure. The patient was born eighteen months after the surrender of the Reich, the mother only just eighteen years old staying with the jobless father in Heidelberg financially supported by the grandparents.

Experiences concerning the early life are shaped by the post-war normality of bourgeois life in the small town of Berchtesgaden. On the first floor of a big building at the market place there was the shop, the grandparents were living on the second floor, and on the third floor there was the patient's family. Two years later in 1948 a brother was born and for reasons still unknown to her until today the patient was moved to the grand parents floor. She assumes that she has been a very squalling infant and a naughty toddler, her mother not being able to adjust with the radical change of circumstances. Her former lover in fancy shiny black uniform had mutated into an unqualified office clerk and remained a great believer in his former idolized leader. He was not only dependent on financial support by the parents-in-law but most probably also on their agreed upon silence concerning his former professional activity.

The patient's transfer to the grandparents became a pattern of her life. She assumes that the mother was glad to have a good reason to get rid of her, to send her away for her being a "plague". An intense jealousy of her brother derives from this experience and has also been a topic in our analytic work (see Thomä & Kächele 1992, patient Käthe X, chap. 2.4.2).

The grandparents reinforced the patient's firm belief that only a nice girl is a lovable girl. They continuously pointed out: „If you don't behave yourself we send you back to your ma“. This was actually put into operation from time to time. So the patient spent her early years moving between the two flats and two different atmospheres.

Nevertheless all in all life with the grandparents was much warmer than life with the over-emotionalized quarrelsome parents. Grandpa used to tell her wonderful stories, bought her all those nice clothes and called her „my wonderful doll". Grandma nurtured the patient's prudish attitude towards her body which is still typical for a traditional catholic upbringing. As a child she was not allowed to have a bath without a bathing suit so that she would not have a chance to look at herself with sinful thoughts. However, she remembers the feeling of being observed whilst having a bath. This had been the case for years. Grandpa's stories were full of angels and devils. He provided the spiritual frame for grandma's practicalities. As a child she nevertheless felt taken care of and looked after: The most beautiful thing was going to the Holy Mass with grandpa on a Sunday feeling that grandma was really jealous.

The relationship between her mother and father deteriorated rather quickly. The man castrated in all respects was not able to satisfy the unfulfilled hunger of the immature mother. She criticized him a lot and was supported by her father's grim contempt and so he left his job, worked as a salesman, and started having affairs.

Until puberty the patient had been a rather ugly young duck. Only her grandfather's eyes beautified her. This changed rather suddenly and the patient turned into the swanlike, Botticelli-appearance I tried to describe. Her mind was still asleep and her soul was confined in God - one of her favourite daydreams was pondering whether God would find the right man for her - when her father openly involved her in his sexualized world. Her strong defensive denial of his interests in her was only undermined in the crudest situations (for instance when the father took the fourteen year old to a night club in order to try out a new type of dancing). She managed to organize these experiences in line with grandfather's "gold angel" type of interactions thus denying the erotic qualities of this overinfusion of paternal love.

At the same time her mother started to rediscover her own uncompleted adolescent life in her blossoming adolescent daughter. Both women started to interact like sisters, both blond and beautiful, just eighteen years apart. The patient developed a very intense sensual relationship to her mother. She helped her with the toilet, combed her hair, and became a source of intimacy and confidence for the mother who used the patient's naivety to learn about the husband's infidelities.

When she was seventeen for the first time the patient experienced a very intense, platonic love relationship with a sensible young man of her age and upbringing. For both of them it was clear that they would enter marriage untouched and sacrifice their innocence at the altar of the sacrament of marriage. This relationship was wholly in tune with her catholic teachings and there was nothing to confess to her spiritual father, not even masturbation had been discovered yet. Parallel to this "normal" developmental involvement the described incestuous infringements were happening which continuously increased the marital tensions.

Finally the father was expelled from home with the patient clearly being on the mother's side. Then the mother formally initiated the divorce. The father tried to avoid this development (as it would have had disastrous financial consequences) by seductively talking his wife into negotiations. These resulted in his wife being pregnant again. All this made the patient feel very isolated as she had sided with the mother for all the past years. She also rejected the other's "carnal uncontrolled desires". Then the drama took another course: the mother found an unequivocal proof that the father was cheating on her all along. This resulted in an immediate stress-induced abortion. It was then that the patient's intense hatred for men appeared the first time. She pronounced her father dead and rediscovered her hatred towards her mother which had been counter-balanced by the overinvolvement mentioned above. Aged 18 the patient left for Munich to study psychology.

The change from the small town to the big city and the autonomy of being a student financially well off caused a major reorganization of her adolescent personality. Now she wanted a real sexual relationship. Her first boyfriend was not able to adapt to the new situation. After a few failed attempts she dropped him and soon discovered that the lesson she had learned with her grandpa also worked with other men: "I'm pretty good in getting men where I want them, and I know from one look whether they want me."

Part of the change became the habit of wearing elegant black and only black clothes. "I'm a specialist in black" she said, "there are so many shades in black, so many nuances". So we discovered that the patient's presenting image of being a super attractive, seducing person was the outcome of a betrayal which had many forerunners in her life history. Alas, from that time onwards she reversed the active and passive role, from then on she never would be in the passive situation again. When this connection had been cleared up we

understood her depressive mood changes as a loss of control and identified her typical defensive ways to counteract depression by initiating seductive relationships with men: whenever she felt lonely, deserted by her very successful engineer - who was sent around the world - one or another of her former friends would show up eager to console her.

After one year the patient felt balanced again and was about to leave treatment. By pointing out to her that she had used me like all the other men, to fill in a gap, to get back control, but had avoided to investigate the reason for her having become such a monstrous black angel, she was able to redefine the goals of the treatment and continued with the analysis.

The Jew

While the patient was a student in Munich the still juvenile looking 40 year old mother regularly came to spent Fasching with her daughter. On one of these festivities the two of them met a Jewish looking businessman. The patient vividly remembers that she had the conviction that he was a Jew - which turned out to be a false assumption later on - and this conviction was connected with a feeling to undo an injustice in which her father had been involved in some undeterminate yet cruel way. Out of this acquaintance developed a very intensive sado-masochistic relationship (besides all her other superficial short-life one night quickies) which was still alive in a way when the patient came for treatment. To please this "Jew" - who in fact had his origin in Lebanon even though she continued calling him "my Jew" - she started to buy extravagant, black underwear/lingerie as he seemed to appreciate these on her very white-reddish skin. The relationship was totally unilateral insofar as she never knew when he would be around in Munich. As soon as he phoned her she would drop everything else to spend a weekend in an underworld out of time and space. At

first the sexual experiences were most exstastic for her and they satisfied something "deep inside of me" as the patient was able to formulate late in treatment. When she finally realized that there was no Holocaust victim in her "Jewish lover's" family she felt deeply disappointed. However it took awhile before this influenced their relationship. Finally his praising of the German philosemitism as something very profitable for his business helped her to slowly get disentangled. At the time when the analytic treatment began the patient was not yet able to clearly disentangle herself from this man. When he rings her up from time to time he still gets her into sexual intercourse though the exstastic qualities have gone for a long time. There is something coercive in this relationship.

When the patient first talked about this strange relationship in the seventh session she remembered a recurring dream she had dreamt the first time when her parents got divorced: "The father moves into the family, I am pushing him out again, I am astonished how little resistance he displays but then he is back again".

A few sessions later she reported another dream that underscores her desparate battle against intrusion: "A doctor wants to anesthetize me for surgery. I do not know the reason for the surgery. Whatever the physician tries, I remain awake and keep telling the doctor that I am not yet sleeping". The patient was surprised because she had never had a problem when an anesthesia was necessary. On the contrary she likes the very thought of a deep and dreamless sleep. However she does not like her lovers to stay overnight, and so she has to throw them out. The transferential aspect of the dream needs no further comment besides mentioning that many years later the patient was able to tell me that from the very first moment she had entered my room and had seen me, she had known that she would not fall in love with me.

What is the role of the "Jew" in the patient's unconscious relationship role model? I think the patient herself pointed out the functional value: to undo something very important. Politically the patient had never done more than to read the weekly and fairly left-winged magazine SPIEGEL and certainly had never undertaken any activities to work on the past of her father. She pronounced him dead and she has never seen him again until we were able to work on the topic. Instead of the dead father she had engaged with a living victim.

For the first time we encountered the full psychological significance of the repressed past of her father during the third year of the analysis. Up to then we had done a lot of work mainly referring to the basic problems of her self-esteem, of her not being in control of space and objects therefore acting defensively by being cool, distant, and overcontrolling herself.

In March 1982 I told the patient that I would be abroad for ten weeks in the summer. For some countertransferential reason I told her directly that I would go to the University of Chile in order to teach there. I suppose I wanted to excuse myself for being away so long by pointing out my importance to her. Whatever the reasons the patient plunged into a deep, long silence. After awhile she was back, back into her most delicate, sharp voice with which she had come to treatment: „So you, too!“ No longer a question just a statement. I didn't understand at all. All I understood was that she felt deeply betrayed. Even though I tried to communicate this affect and connecting it to the fact that this betrayal also entailed the feeling of being deserted for a long time, the patient left ten minutes early commenting: "I'd rather cry on my own".

In the next session she was able to query why I was going there with me. She made clear that she was convinced that I was a right-wing radical supporting Pinochet's dictatorship. It turned out that her husband had lost the youthful anti-

establishment attitude in the course of years and mutated into a solid conservatist bourgeois; his father had been a Nazi too. "I was hoping I'd never meet this kind of people again". I pointed out that up to now since the analysis had started she had been very successful in avoiding meeting "this kind of people". The great shock that was caused by my information must be due to the fact that these kind of people still inhabit her mind without her acknowledging it. The session ended with her discovery that Salvador Allende was a psychiatrist and her assumption that probably there are some, just a few non right-wing people, too.

It took another two years (September 1984) before we got the next chance to tackle the shadows of her past – it was embedded in our work on her resistance against a positive-erotic transference towards the analyst - a very conscious, well developed resistance. At the end of the fourth year we found out that she maintained a representational world where men are either very soft, maternal, reliable like her grandfather with no open erotic qualities allowed or where men are brutal, sexual, beasts, criminals. For the first time she took to the idea that her father should have been arrested for his crimes.

„What kind of crimes?“ I asked.

P.: "The crimes he must have committed to get the job on the Obersalzberg, I mean, there has certainly been a gratification for being very effective in the concentration camps".

She then remembered a childhood memory when she had spattered him with holy water having in mind that he would go to hell like a devil as she had learned from her religious teachings that this is the way you identify devils.

A: „Who told you that he is likely to be a devil?“

P: „Grandma was telling it all the time.“

It turned out that the patient from an early age had been imbued with the idea that there was something very bad about her father; the grandparents had related it to his poor social behavior and his womanizing habits, but she had always felt that there was more to it.

The patient was splitting the representational world into good and bad guys with her father belonging to the category of the bad which would exclude any erotic quality for her was finally relieved six months later (April 1985). She reported a dream:

„I go into my father’s room. He is half asleep in his bed. There is a shower in the room. I wonder whether I should undress or whether I can keep my nighty on as the Thai women do. I keep the nighty on and I am soaping myself under the shower. I have a clear sensation of sexual pleasure in the dream“.

The associative work concerning the dream focused on her activity regulating closeness and distance. She was clearly afraid that if she were to get involved with the analyst something dirty about him would appear or that she would lose the regulatory power in that particular relationship.

The next dream dealt with two lovers chasing her. One is Eli the “Jew”, the other one is her husband who follows her to Israel (1985). Her first association was directed at her husband: him always being the wrong person at the wrong time and place. Whilst working on the transference implications of the dream, she was reminded of a terrible dream - a nightmare that she had dreamt during her summer holidays in Berchtesgaden.

Key-Dream:

„I am standing on the balcony of our house and movie-like I observe a great number of naked, dirty people, ready for deportation. Many people are on their balcony, as it is at Corpus Christi or any ecclesiastic festivity, but no one is doing anything about it. I am also doing nothing, but I feel very bad about it“.

In her association the patient soon identified the people as Jews. She herself also felt like someone who is not looked after in an adequate way. She then proceeded talking about her total abstinence from politics which she rationalized as the only way to cope with the helplessness.

We were able to parallel her retreat from bi-personal engagement into her syndrome of being the active deserter with her retreat from political engaged activity. In this context the patient was able to approach the issue whether she should inform herself in more detail what had happened in the concentration camps. She remembered from her adolescence in Berchtesgaden that she once found a weapon with the swastika on it. The father proudly exclaimed that he had used it to kill Russians. During the following sessions the patient's work on these issues continued. She inquired of her mother how the father had survived the times immediately following the disaster. Her mother's family provided a false identity card in order to protect her and hide her involvement in it. Her mother followed her husband to Heidelberg against the will of the family. There quite a few of the old guards had found ways to survive in the neighbourhood of the American army. My line of interpretation caused confusion in the patient: herself being a victim of the domestic disruptions she identified with the victims and was well advised to hide her true feelings. The patient then cried a lot and reported another dream:

"Yesterday I observed how cattle was transported to the butcher. The guilelessness of the animals - not anticipating what was waiting for them - made me cry even in the dream".

This was the feeling she also connected to the dream with the Jews.

A: „It is your own guilelessness, your not knowing what your father and your mother were doing to you that made you so vulnerable. So you had to learn to

avoid looking too close in order not to be confronted with another example of maltreating you and your feelings“.

P: „It is true, I knew that he was in Dachau, nothing more, and I have never asked. I even never have been to Dachau“.

A: „So by not knowing you tried to protect yourself; at the same time you had to protect yourself from thoughts and surmises which led to your very self-estranged way“.

The patient then reported that she had attended a physician in Günzburg and stated: „Didn't Dr. Mengele come from Günzburg, so how can I know that this doctor didn't experiment on me?“

My interpretation connected the acute paranoid feeling with the acute transference issue if I would experiment on her by trying to make her face the terrible issue in her biography. Our experiment was about finding out whether it would be possible to convince the patient that her negative experiences with close relationships do not necessarily have to continue.

P: „I am reminded of the story of the little prince and the fox. The little prince has tamed the fox but what will happen when they depart? Is the little prince not going to suffer? Wouldn't it be better if the prince hadn't gotten involved with the fox“?

I joined in and continued the story:

A.: „The fox said to the little prince: the colour of the wheat will remind me of you. If you need me again you will remember me and you may return“.

Parallel to working through her suppressed anxieties concerning the father's criminal involvement in the Nazi regime the patient changed in different ways that even her colleagues in the consultation center noticed. She became more open and relaxed, was less controlled and to her own great surprise she became pregnant. She was surprised as she had never taken great care of birth control.

She had been convinced that she would not conceive. During her pregnancy she visited her father who had settled down with another woman. He was suffering from a carcinoma and it was certain that he would not live for much longer. At least she could find out that he was now taking care of his step-daughter and she found out that me too was a caring father of three daughters.

After the delivery of her baby - a daughter - the patient insisted on reducing the frequency of sessions and also insisted on sitting face to face. Again she had to be the one in control in order to find out whether I was a reliable person.

It was obvious. The patient was moving into a strong positive transference which she had to keep under control. She initiated the idea of terminating the treatment as the idea of separating was calming and disturbing at the same time. A series of dreams followed. In the dreams to me she was always second to some other woman. After having worked through these topics for a reasonable amount of time the patient was ready to enter the phase of termination.

Both of us were surprised about the severity of depression that overwhelmed the patient. She was possessed by the idea of losing me again, of losing her favourite position due to her baby which would get all the attention she had wanted for herself. One more time the patient recapitulated the deep loss she had suffered at the age of two when her brother was born. We finally arranged an agreement: she might continue on a "feeding on demand basis" - a somewhat less analytical technique which in my experience works with patients traumatized by repeated separations.

The patient left in May 1986 (512 sessions). One year later she consulted me again as she was having repetitive dreams. She dreamed she was in the gas chambers hearing the gas pouring into the room. She woke up and found herself crying endlessly. My immediate reaction to these very oppressive dreams was to ask whether her father had died. Indeed he did and the patient had noticed that

she didn't want to go to his burial after she had heard about his death. Instead these dreams menaced her. It took another six months of again working through the kind of experiences the father might have had. I assumed that these dreams pointed out what she was afraid to find out about him now that he was dead. In this phase of treatment I encouraged her (accompanied by a good friend) to visit Dachau to actively inquire about her father's career which she finally did. For the first time in her life her inquiry at the US Document center in Berlin provided her with an accurate account of what kind of activities her father was involved in at Dachau. However he had not been in Auschwitz, but due to his physical properties been delegated to the Obersalzberg in 1940.

Without belittling his deeds, the nightmare of non-remembering came to an end. She finally became sad about being the daughter of such a father who had never shown any signs of remorse. Her mother was disgusted with her activities and the patient decided to diminish the contact to her to a non-significant degree.

I forgot to mention that during all this battle for remembering the things of the past the patient gave up her habit of wearing those black festive garments. I am not sure whether I have made a convincing case: To me this way of expressing her enmeshment with a family world full of guilt and disruption was based on a private unconscious identification composed of being in mourning for the loss of her family. Her strong hysterical involvement with both parents made her receptive for the notions of death prevailing in the Nazi world: *Der Tod ist ein Meister aus Deutschland* (Death is a master from Germany).

Thomä H, Kächele H (1992) *Psychoanalytic Practice. Vol. 2: Clinical Studies.* (2, Bd 2) Springer, Berlin, Heidelberg, New York, Paris, London

