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Blood/Lust: Freud and the Trauma of Killing in War

Nolen Gertz

While the First World War proved to be a time of unimaginable loss and tragedy that left humanity forever terrified of its capacity to annihilate, for Freud and his followers this same period was seen as a rather fertile one, as it led psychoanalysis to its greatest expansion and its most profound innovation. Though Freud's productivity was mostly due to his having received an enforced sabbatical from his patients, for the younger generation it was their treatment of soldiers during the war that made their contributions to the theoretical development of the psychoanalytic corpus possible. Thus, in September of 1918, just as the central powers were fighting their last desperate battles against the Triple Entente, and the cessation of hostility was finally coming into sight, the Fifth International Psycho-Analytical Congress convened in Budapest so as to allow these disparate practitioners to come together again to share their recent findings with each other. And it was during this reunion that Sándor Ferenczi, Karl Abraham and Ernst Simmel held a symposium to announce—before an audience that included delegations of recent converts to psychoanalysis from the German, Austrian, and Hungarian Army Commands—what they had learned from their war-time investigations.

Though these three doctors were each thrown into different areas of the conflict and had little communication with each other during the war, their reports of their individual analyses of the “war neuroses” were surprisingly similar to each other. These expositions were in fact so alike as to even share the same basic structure, with only slight modifications here and there. First they would point out the failures of neurologists whose attempts to provide a physicalist aetiology could never explain, let alone cure, the soldiers' symptoms. Then they used case studies to show how psychoanalytic methods succeeded in treating soldiers where other methods could not. And finally they would go to great lengths to argue that the onset of trauma in supposedly non-sexual situations should not lead opponents of psychoanalysis to believe they had at last defeated Freud's sexual aetiology of the neuroses. This last point was of decided importance—as sexuality could of course be said to be the glue that holds psychoanalysis together—and their arguments to defend it centered around the claims that either the predisposition to trauma or the traumatic event itself could be explained sexually. Such proof for this defense focused on their shared discoveries that the precipitating episodes were often related

to sexual trauma in childhood, that the danger of combat conflicted with soldiers' narcissistic ego-libidos, and that their symptoms could be understood, and treated, as hysterical symptoms, therefore eroding the supposed distinctions between the "war" and "peace" neuroses.

Hence the unity that can be found in the presentations of each of these psychoanalysts¹ might lead us to simply write off these contributions as either a piece of arcane fancy or just the attempts of the offspring to both protect their family and impress their progenitor. In fact, Freud's own comments in his "Introduction" to the volume also appear to force us toward such an interpretation of this work. His prefatory remarks not only predominantly serve to continue the defense of psychoanalysis as we have outlined it, but state that "the hopeful result of this first meeting was the promise that psycho-analytical institutions should be established, where medical men qualified in analysis might find the means and time to study the nature of these puzzling illnesses and the therapeutic value of psycho-analysis in them" (Jones 1921: 1). It would certainly seem then that it would not be too far-fetched to assume that this symposium was intended to show that psychoanalysis had provided an end to the debates surrounding the war neuroses, and thus their contributions would be of far greater interest for the history of the movement than for the history of ideas.

And yet it is the very solidarity of their position, the programmatic strategy of their efforts, that make the rare divergences that can be found in their presentations all the more worthy of further consideration in the present-day. This is especially clear when we realize that these deviations tend to revolve around war neuroses that took place not when the soldier was in danger, but rather when the soldier was himself the *cause* of such danger. The primary question that thus arises within these otherwise uniform contributions is: How can killing create in a soldier the same traumatic symptoms as does the fear of death?² Hence the problem of treating soldiers who developed the symptoms of war neurosis from having killed, or having been required to kill, enemy combatants, raises the issue of whether Freud's diagnostic model for the peacetime neuroses can be applied to both these situations and those where the soldier is afraid of being killed.

For if this model requires that the traumatic level of stimulation is produced when there is either, as Freud puts it, a threat to the ego of a "danger to life" or a "denial of love" (Jones 1921: 3-4), then we must delve deeper into both these problematic cases and the Freudian model itself to see if either criterion can be found with killing. Accordingly, this paper will examine the brief references to killing in this symposium³ and explore the Freudian underpinnings of their interpretations so as to try to find a way to understand how killing can traumatize a soldier as well as why this problem was seemingly ignored in the contributors' investigations. As Freud himself said of the evolution of his attitude towards aggression, "I remember my own defensive attitude when the idea of an instinct of destruction first emerged in psycho-analytic literature, and how long it took before I became receptive to it. That others should have shown, and still show, the same attitude of rejection surprises me less" (Freud 1961: 79).

Abraham—The Demand of Killing

We first come across this alternative line of inquiry when Karl Abraham brings up the issue of killing in the middle of his discussion of why there was no correlation between the degree of shock a soldier experienced and the likelihood of his developing neurotic symptoms. After following the Freudian aetiological model and thus offering the soldier's prior sexual disposition as an answer, he states, "It is not only demanded of these men in the field that they must tolerate dangerous situations—a purely passive performance—but there is a second demand *which has been much too little considered,*" namely, "the aggressive acts for which the soldier must be hourly prepared, for besides the readiness to die, the readiness to kill is demanded of him" (Jones 1921: 24; emphasis added). Yet, rather than further pursue this claim that something has been lost in the treatment of the war neurotics, Abraham instead only makes some remarks later about how to understand the "readiness to kill" by relating it back to the "readiness to die," seemingly continuing thereby the very reductive trend he had served to illuminate. He writes,

At this juncture we must again refer to the previously mentioned circumstance that in our patients the anxiety as regards killing is of a similar significance to that of dying. The symptoms in part are only comprehensible in this sense. The case of a man who in the field suffered from a relapse of a neurosis which he had had six years previously is especially instructive. At that time he was taken with a tremor of his arm which arose in connection with a dream in which he murdered someone; a hand-to-hand fight in the field caused the old symptom to reappear. Hysterical convulsive attacks are not only produced through dangerous situations, terror, etc., but not infrequently an act of aggression which he has failed to carry out is expressed in them. Such an attack is especially often associated with an exchange of words with his superiors; the suppressed impulse to forcible activity finds in the expression its motor discharge. (Jones 1921: 25).

If Abraham wants to interpret the symptoms of this case as having a "similar significance" to cases in which symptoms are produced by the anxiety of death, then how can he at the same time ignore the significance of the differences between these situations by simply pointing out that "hysterical convulsive attacks" occur in both?

This question is especially perplexing since, as he points out, there is found in killing-anxiety cases an inhibited aggressive act at their root, whereas he argues that death-anxiety cases often occur as "the effect of an explosion, a wound, or things of a like nature," and thus the soldier's "narcissistic security [through the belief in their immortality and invulnerability] gives way to a feeling of powerlessness" (Jones 1921: 26). Though it may appear then that a parallel can be drawn between being unable to carry out an aggressive act and feeling powerless, we must realize that whereas

the tremors in the former case are seen as a hysterical conversion of the “suppressed impulse to forcible activity,” in the latter case, as Abraham writes, “in their symptoms they are experiencing anew the situation which had caused the neurosis to break out, and soliciting the sympathy of other people” (Jones 1921: 25). Moreover, while we can understand the feeling of powerlessness in the face of an explosion, a feeling that could generate a traumatic level of anxiety from the conflict between the urge to protect oneself and the demand to stay with one’s unit, it is difficult to see how this feeling could exist analogously in the case involving a superior officer. It would seem that in the conflict between the urge to act on one’s aggressive instincts and the demand to respect a ranking officer that a battlefield would offer the soldier many opportunities for releasing these “suppressed impulses” on the enemy. In fact, it would seem that it could be said that much of the purpose of military training is indeed to channel these urges in this very way.

Simmel—The Release of Rage

Unfortunately, as the remainder of his contribution is devoted to showing that psychoanalysis should take “therapeutic precedence” in that it “enables us to penetrate deeper than any other method into the structure of the war neuroses” (Jones 1921: 29), Abraham does not provide us with further material for continuing with these questions about how secure this structure might be, though he has at least helped to sketch for us the issues in this debate. As such, we are able to now move to Ernst Simmel’s contribution and find there some more pieces to this puzzle. Especially illuminating is his discussion of what he takes to be the relationship between military training and the war neuroses—through the medium of discipline—as well as his analyses of soldiers whose symptoms he found to be the manifestations of repressed or “undischarged” rage. Perhaps what will be most important for us however is that Simmel, like Abraham, finds that the trigger for these symptoms is often a confrontation with a superior officer, though, unlike Abraham, he will venture beyond the simple recognition of this fact and begin to ask why these confrontations can have such a traumatic impact on the soldier.

For Simmel, the purpose of military discipline is to make the individual soldier into part of a fighting unit. Yet, rather than serving to insulate the soldier and provide him with security, as we may expect, he argues that “it is comprehensible that under the pressure of years of discipline, which limits the personality and thereby prevents every individual reaction to events, the disposition to repression is extraordinarily favored” (Jones 1921: 31). It is this thought that leads Simmel to locate military discipline within the constellation of factors that can lead to the onset of war neurosis. While this might make it seem therefore that he is presenting us with a more non-sexual picture of the neurosis than his Freudian compatriots, he actually finds a sexual source to the “pressure” of maintaining the required level of discipline. Simmel writes, “Also many soldiers who have broken down solely under the pressure of discipline show even in this abortive form of analysis an attitude of father defiance in consequence of an infantile mother fixation as the subconscious condition of their need for opposition” (Jones 1921: 31).

This discovery of unresolved Oedipal issues existing behind the soldier's problems with discipline allows Simmel to connect this "need for opposition" with the repressed rage he finds exhibited in the convulsive attacks of the war neurotics. Though the soldier's convulsions can be found often to be the repeated expression of his defensive reactions at a time when he was overcome with fear for his life, Simmel argues that the violence of these attacks can also lead back to a time when the soldier was overcome with violent rage. He writes,

A soldier who has once been paralyzed for a time through the emotion of terror in his conscious ego is in many ways no longer in the position to satisfy consciously the repression which the pressure of discipline demands. It is almost always anger towards his superiors which brings on further convulsive attacks. During hypnosis, which lifts the curtain of this originally hallucinated dream-action during the attack, we see again and again the patient struggling with his highest superiors. He strikes, bites, stabs and shoots them, treads them under foot with terrible oaths. He here lets free the fiercest instincts against persons who restrained his conscious ego. (Jones 1921: 39).

As a result of the intensity of these repressed aggressive instincts, Simmel points out that in the treatment of these soldiers even their abreactions can take on violent forms. He tells us that "as regards the war neurotic an abreaction by means of words is mostly not sufficient ... on account of this I have for a long time proceeded to construct an upholstered dummy against which the neurotic fighting in his primitive human instinct victoriously frees himself" (Jones 1921: 40).

We should be careful to avoid interpreting all of the cases that Simmel provides of enraged soldiers as having had their convulsive attacks triggered by conflicts with Oedipal substitutes. Though Simmel does go to some extent further in this direction—particularly in his conclusion, where he details the case study of a soldier whose dreams revealed a connection between seeing his comrade blown up beside him and his troubled relationship with his father—we must not overlook the instances where the soldier's attacks have been caused by what took place in battle. One such case in particular stands out, involving a soldier who suffered a relapse into "states of excitement and convulsive attacks" months after having been treated by Simmel. He writes,

During hypnosis on his second admission the patient said that he still had the feeling as though "someone was behind him." This feeling of anxiety often increased so terribly that he would have a convulsive attack. In this attack he constantly saw a dead Russian in a white shirt who threateningly demanded back a gold ring which the patient had taken from the Russian after killing him. This occurrence the patient had completely forgotten, but after I had talked it over

with him when he was awake he became changed, alert and keen to work, and was now permanently cured of his convulsions. (Jones 1921: 41-42).

Here again we see the killing-anxiety that we found with some of Abraham's patients above. What is of course different though is that in this case the patient's aggressive act was not suppressed, but carried out, with the memory of the act having been repressed and replaced with the feeling of being pursued or haunted. We can see in the vision of the dead Russian who demands the return of his gold ring the personification of the soldier's guilt at having killed—especially if we take the ring to be a wedding ring and thus symbolic of the Russian's lost life—and yet it would appear that any feelings of guilt were a later phenomenon. The fact that the soldier stole the ring in the first place, and arguably took it as a trophy, suggests that he was feeling something far from guilt at the time of the kill.

Perhaps if the convulsive attacks were related to the anxiety over the pursuit of the ghostly Russian, then it could be the case that the "states of excitement" that the soldier was also suffering from were related to this "something else" the soldier was feeling after the kill. Simmel argues that "the condition of excitement" or "frenzy," is the "positive side" of the neurotic attacks ("to the negative one of the convulsions"), and that it is produced by the "neurotic displacement" or "projection" of the rage felt towards a superior officer onto someone similar enough in appearance who the soldier can instead attack (Jones 1921: 40-41). And as we saw earlier, this rage practically explodes once it is finally unleashed, whether it be on a dummy or possibly on a Russian soldier, which could explain the constant appearance of agitation before being allowed the violent abreaction. But why did the soldier's "state of excitement" persist *after* the kill?

Jones—The Call to be Cruel

In order to try to answer these questions, and to better understand how a soldier can go from the Oedipal "need for opposition" to "strikes, bites, stabs" and other "fierce" reactions towards superior officers, we must proceed to the contribution from Ernest Jones. For it is Jones who will make the final move from recognizing the suppressed rage found in soldiers and its connection to military discipline to looking at where these violent urges come from in the first place. As Jones points out, "The manhood of a nation is in war not only allowed, but encouraged and ordered to indulge in behavior of a kind that is throughout abhorrent to the civilized mind ... All sorts of previously forbidden and buried impulses, cruel, sadistic, murderous and so on, are stirred to greater activity ... In all directions he has to do things that previously were repugnant to his strongest ideals" (Jones 1921: 48). It is this conflict between the person's "ideals" and what he is called to do as a soldier that we must now investigate, as it will become clear that an ideal develops only after what was once pleasurable has been turned into something "repugnant" through the process of moralization, thus making the call to reawaken one's "forbidden and buried impulses" for the sake of duty a potentially traumatizing event.

Jones begins his defense of Freud before the British Royal Society of Medicine by arguing that the previous conceptions of war neurosis as either “shell-shock” or “war strain” could not account for the fact that universal categories, such as shells or strain, were incompatible with the particularities found in the afflicted. Hence to understand the individual circumstances surrounding symptom-formation in specific cases Jones advocates investigating the possible factors that could predispose some soldiers to suffering in situations where others do not. Following Freud’s economic model of trauma, Jones writes, “The question whether a neurosis will result in a given case is essentially a quantitative one. The mind has the capacity of tolerating without harm a certain amount of stimulation from these internal impulses and desires that are not in unison with the ego, and when this limit is passed the energy derived from them flows over into neurotic manifestations” (Jones 1921: 49). Thus, as Jones explains, this model describes how the ego can protect itself from over-stimulation by sublimation—“deflection of the energy in question from its primitive and forbidden goal to another one in harmony with the more social standards of the ego”—or by repression, “guarding itself against its influence by erecting a dam or a barrier against it, known as a reaction-formation” (Jones 1921: 49).

What is interesting here is that in introducing the Freudian model of the neuroses to the lay audience Jones provides non-sexual—i.e. violent—applications for this sexual schema. As such, though he explains that sublimation is a “process of deflection” that occurs when sexual energy is put toward a non-sexual goal, Jones suggests that “there are similar refining and modifying processes at work in connection with all anti-ego impulses—e.g., cruelty” (Jones 1921: 49). Similarly, to clarify what is meant by repression, Jones once again provides cruelty as an example. He states, “Thus in the case of primitive cruelty, a cruel child may develop into a person to whom the very idea of inflicting cruelty is alien and abhorrent, the original impulse having been quite split off from the ego into the unconscious, and its place taken in consciousness by the reaction-formation barrier of horror and sensitiveness to pain and suffering” (Jones 1921: 49). What is important for Jones, and why he is making this repeated connection, is that the person who has been forced to “refine and modify” his childhood desire to act cruelly has not only lost these urges but has so successfully barred their access to consciousness that he no longer remembers ever having had such impulses and is even repulsed at any sign of their existence in others. And yet, though such refinement is of course expected of all members of society, it also the source of conflict for the sadist-turned-upstanding citizen-turned-soldier.

This can be best understood if we look at Jones’ description of what occurs when such individuals who have had to repress their violent urges enlist in the military. He emphasizes that the individual’s capacity for learning how to be a soldier—what he refers to as a period of “readjustment”—will be based on how well the first adjustments in childhood were carried out. Jones writes,

Such a man may well have unusual difficulty in adapting himself to the cruel aspects of war, which really means that his long-buried

and quite unconscious impulses to cruelty, impulses the very possibility of whose existence he would repudiate with horror, are stimulated afresh by the unavoidable sights and deeds of war. In bayonet practice, for instance, the man is taught how best to inflict horrible injuries, and he is encouraged to indulge in activities of this order from the very thought of which he has all his life been trying to escape. He now has to deal afresh with the old internal conflict between the two sides of his nature, with the added complication that there has to take place an extensive reevaluation of his previous standards, and in important respects an actual reversal of them. He has to formulate new rules of conduct, to adopt new attitudes of mind, and to accustom himself to the idea that tendencies of which he had previously disapproved with the whole strength of his ego-ideal are now permissible and laudatory under certain conditions. (Jones 1921: 50).

According to this picture, in military training the recruit is taught not only how to carry out the duties incumbent upon a soldier, but is also given license to “indulge” in these activities, to partake in the violence of combat. Though he may have been socialized to consider stabbing or shooting a stranger to be a savage, vicious act, the soldier discovers that when on the field of battle—even if only on the practice version—such brutality can be seen as “permissible and laudatory,” and if carried out in the right circumstances has even been described as “heroic.” This is what is meant by “extensive reevaluation” therefore, as, to paraphrase Nietzsche, the soldier is taught that cruelty is not in itself wrong, but only when done towards the wrong person at the wrong time.⁴

The disparity between the standards of peace-time and war-time is of course pushed to its logical extreme when it is realized that it is the Commander, the militaristic “father-figure,”⁵ who is both training the soldier how to rediscover “the two sides of his nature” and praising him for letting loose these “long-buried and quite unconscious impulses to cruelty.” Yet, as Jones does point out, commanding officers do not simply let their units run wild, but instead impose rigorous demands of discipline on soldiers. Thus he argues that “the process of re-adaptation in regard to war consists of two distinct sides: on the one hand, war effects an extensive release of previously tabooed tendencies ... and on the other hand the acquiring of a strict discipline and self-control,” which is why Jones suggests that “perhaps the risks attaching to indiscipline are related to the release of imperfectly controlled impulses that war deliberately effects” (Jones 1921: 51). Here we see that what Jones refers to as the “extreme punctiliousness” of military discipline can be understood to be functioning as a conduit offered by the Commander for redirecting the soldier’s anxiety toward committing cruel acts, therefore providing the soldier with a way to release the tension produced by the “process of re-adaptation” occasioned by warfare.

To try to explain how this process could still result in neurosis for the soldier, Jones likens this situation to that of the “more familiar problem” of a woman with

repressed sexual urges entering into marriage. This woman's repression of her desires will have resulted in the reaction-formation of disgust and hostility towards sexuality—just as we saw earlier with the child who repressed his cruel impulses and came to find violence revolting—thus allowing her to maintain a distance from any possible conflict through amorous temptation. However, as the once cruel child was forced into conflict in becoming a soldier, so too will the woman have to confront her prudish conversion if forced into becoming a wife. Jones writes,

If now she gets married, it may happen that she will find it impossible to effect the necessary reconciliation, and that, being deprived of the *modus vivendi*—namely, the keeping sexuality at a distance—which previously made it possible to maintain a mental equilibrium, she develops a neurosis in which the repressed sexual desires achieve a symbolic and disguised expression. Similarly in a war neurosis when the old adjustment between the ego-ideal and the repressed impulses is taken away, it may prove impossible to establish a fresh one on the new conditions, and then the repressed impulses will find expression in some form of neurotic symptom. (Jones 1921: 51).

If we were to push this parallel further, then we could suggest that just as the discipline found in the military is intended to allow the soldier to believe that he commits violent acts for the sake of the nation rather than for personal desire, so too can the wife believe that she participates in sexual acts out of matrimonial duty rather than out of lust. It is therefore when this offer of sublimation—which in both cases is the idealization of one's action as the fulfillment of social obligation—cannot establish an "equilibrium" with one's urges that neurosis takes place.

Though Jones does not here identify the neurosis as traumatic, it would appear that it could be argued that the soldier is traumatized when carrying out his duties causes him to experience a level of "stimulation" that can no longer be accounted for by his patriotism, thus creating this inability to sublimate his violent urges. As we have seen in the cases provided by Abraham and Simmel, such a traumatic influx of excitation can be expressed in feelings of anxiety or hostility, which result in the hysterical symptoms of convulsive attacks or states of excitement. However, as it presents a possible departure from these cases, we should return to our investigation of Simmel's patient who was found to be suffering from both convulsive attacks *and* states of excitement after having killed a Russian soldier.

It was suggested earlier that the frenzied state of the patient was produced by an unexplained emotional response felt at the time of the kill, which persisted even after this supposed "projection" of rage (from the soldier's superior officer on to the Russian) had been "discharged." Though at the time we could not explain this situation, we can now put forth the claim that what was experienced at the time of the kill was akin to the "victorious" feelings of the soldiers that Simmel gave an "upholstered dummy" for them to "free" themselves upon. Yet, while attacking the dummy provided them with a curative, though violent, abreaction, for the soldier who killed, this victory—symbolized in the "trophy" of the stolen gold ring—brought

about feelings that we can now argue were not of anxiety or hostility, but of pleasure. It was this pleasure from having killed, and thus not from having served his country, that led to trauma, since, as Jones has made clear, military training inculcates in the soldier the paradoxical injunction to “indulge” in barbarity only to the extent that this can be done in a “civilized” manner, in accordance with duty and discipline. Hence we can ask if the soldier was haunted not by the ghost of the Russian he killed, but by the guilt of having enjoyed it.

While Jones has focused far more on the problem of killing than the other contributions we have looked at, he, much like Abraham, makes the move from killing to fear of killing without elaborating on whether the former actually fits the Freudian aetiological model as well as the latter. However, while making this transition, Jones does provide us with a way to conceptualize the division between these types of traumatic factors. He writes,

So far as I can judge, the specific problems characteristic of the war neuroses are to be found in connection with two broad groups of mental processes. One of these relates to the question of war adaptation considered above, the other to that of fear. The latter is hardly to be regarded as a sub-group of the former, inasmuch as there is no readjustment or transvaluation of values concerned, as there typically is with the former ... So that the problem of fear, which we all agree plays a central part in connection with the typical war neuroses, seems to be apart from that of war adaptation in general as expounded above. (Jones 1921: 51-52).

It would appear that in the process of switching his focus from killing to fear, Jones has also converted to the perspective of his compatriots who, as we have seen, tended to relegate killing—as Jones does here by referring to it first as a characteristic “problem,” then as a “question,” and finally as something simply “apart” from the centrality of fear—to an inferior concern. This then raises the question of whether we are to consider killing, here understood as “war adaptation,” as on the periphery of the “typical war neuroses” or rather as perhaps central to what might be called the *atypical* war neuroses.

Freud—The Trauma of Killing

We have now reached the point where we must turn to Freud if we are to try to conclude our investigation. For it was Freud’s comment—that the war neuroses are caused by the trauma of a “danger to life” or a “denial of love”—in his “Introduction” to the symposium that helped lead us to pose at the outset the problem of the relation between killing and the war neuroses. Hence if we are going to find a solution to this problem we must try to locate evidence for the existence of either of these traumata in the case studies we’ve looked at so far. While it would appear safe to argue that we have not found any indication that fear of death plays a part in the traumatic aspects of killing, which would also be supported by Jones’ statement that fear cannot be

seen as a “subgroup” of killing, the “denial of love” does appear to possibly play a factor in the cases here under consideration. To determine the possible relationship between love and killing we must first attempt to better understand Freud’s theory of the Oedipus complex since both Simmel and Jones argued that the superior officer’s role as Oedipal substitute is what triggers the soldier’s anxiety or hostility.

In Lecture XXXII of his *New Introductory Lectures*, Freud provides us with an excellent overview of how he originally conceived (i.e., before World War I) of the Oedipus complex and how he later (i.e., after the war) came to alter this theory. Though the primary structure of the complex—“While he is a small child, a son will already begin to develop a special affection for his mother, whom he regards as belonging to him; he begins to feel his father as a rival who disputes his sole possession” (Freud 1966: 256)—has remained the same since its earliest elaborations; what has changed according to Freud is his understanding of how the son experiences the threat of punishment for these feelings, or what is known as “castration anxiety.” Whereas previously it was thought that “it was a libidinal cathexis of the boy’s mother as object, which, as a result of repression, had been changed into anxiety and which now emerged, expressed in symptomatic terms, attached to a substitute for his father,” Freud here tells us that his research has instead found the following to take place:

It was not the repression that created the anxiety; the anxiety was there earlier; it was the anxiety that made the repression. ... It is true that the boy felt anxiety in the face of a demand by his libido—in this instance, anxiety at being in love with his mother; so the case was in fact one of neurotic anxiety. But this being in love only appeared to him as an internal danger, which he must avoid by renouncing that object, because it conjured up an external situation of danger. ... The danger is the punishment of being castrated, of losing his genital organ. (Freud 1989: 777).

Hence it is not the case that once the child represses his urges that any subsequent libidinal excitation is converted into anxiety for fear of such an “internal danger,” but rather that anxiety in the face of an “external situation of danger,” such as being castrated, is what caused the child to have “made the repression” in order to protect himself.

It is then this distinction between the earlier and later theory of anxiety that can perhaps both clarify the reductionist strategy employed by Freud’s followers in the symposium and why this has caused so much confusion for us here with regards to the status of killing. If we return to Jones’ exposition, we find that he argues that the anxiety that soldiers exhibit is caused by the repression of their “shameful” wish “for escaping from the horrors of warfare” (Jones 1921: 53). However, this “horror,” according to Jones, is not caused by the “real” danger of dying, but rather by the “ego’s fear of the unconscious” (Jones 1921: 57)—it’s fear of giving in to the narcissistic demands from the “ego-libido” or “self-love” (Jones 1921: 58)—which, in conflicting

with the soldier's "ego-ideal" become inhibited, with whatever "narcissistic sexual hunger" remaining being "discharge[d] in the form of morbid anxiety" (Jones 1921: 58).

Thus, not only is killing no longer to be considered as itself a source of anxiety, but neither is death, for as Jones states in opposition to such superficial views, "I greatly doubt, on the contrary, whether the fundamental attitude is either a fear of death in the literal sense or a desire for death ... and there is every reason to think that unconscious mind is totally incapable of such an idea" (Jones 1921: 59). And if there was still any doubt that this explanation was based on Freud's earlier views on anxiety, we need only look to Jones' helpful suggestion that, for further information, we should look at none other than "the latest discussion of the subject ... found in Freud's 'Allgemeine Neurosenlehre,' 1917, chapter xxv, 'Die Angst'" (Jones 1921: 56*n*), which is the lecture Freud cites at the opening of Lecture XXXII. Fortunately for our considerations, Freud's post-war revisions have provided us with a way to challenge these conclusions and restore killing to a more prominent position relative to the war neuroses.

According to Freud's model of the "twofold origin of anxiety," while anxiety experienced by the child is a "direct consequence of the traumatic moment," there is also to be found in adulthood anxiety that functions "as a signal threatening a repetition of such a moment" (Freud 1989: 783). Hence, though we might expect our infantile fears to dissipate as we grow up, which of course does happen for some, for others "a few of the old situations of danger...succeed in surviving into later periods by making contemporary modifications in their determinants of anxiety" (Freud 1989: 779). Though Freud here gives "syphilidophobia" as an example of such "contemporary modifications" with regards to castration anxiety, we shall instead propose an alternative that fits the militaristic context with which we are working. For while the parents "threaten [the child] often enough with cutting off his penis" (Freud 1989: 777) if he cannot follow their rules, the Commander-as-father threatens the soldier with being discharged from the military if he cannot carry out his duties, e.g. kill, in accordance with discipline. Thus what the soldier is afraid of losing is no longer the organ that provides him with sexual satisfaction but rather—as we saw with the case of the soldier who killed the Russian—that *organon* which provides him with the pleasure of cruelty, i.e. his gun.⁶

It would appear that we can now argue that the killing-anxiety discovered by Abraham is not produced by the soldier's fear of killing, but rather by the soldier's fear of enjoying killing too much, insofar as this reawakens in the soldier the childhood fears of punishment for not being able to behave appropriately in the face of such pleasure. This parallelism perhaps also explains the hostility found in Simmel's patients, as the aggression the child felt toward the father has now become the suppressed rage of the soldier toward the superior officer. Thus, much as the child was told by the father to love his mother, but not in the "wrong way," it could be argued that in the circumstances of war, so too has the soldier been told by his Commander to love his nation, but within the bounds set forth by military standards and regulations. This then points to the conclusion that the cause of the "atypical"

war neurosis could be found in the motivation of the soldier.

Though Simmel suggested that military discipline was a tool of repression, we have instead, following Jones, found it to be a means of sublimation. This view can now be supported through Freud's revised model of anxiety, and the claim that the soldier's anxiety is not produced by the repressive structure of the military, but rather by these measures not being strict enough. Thus so long as the soldier can believe his actions to solely be motivated by patriotism, and not by pleasure, he can evade the upsurge of anxiety that causes him to try to repress his urges himself. For, according to Freud's "picture [of] the process of a repression under the influence of anxiety,"

The ego notices that the satisfaction of an emerging instinctual demand would conjure up one of the well-remembered situations of danger. This instinctual cathexis must therefore be somehow suppressed, stopped, made powerless. We know that the ego succeeds in this task if it is strong and has drawn the instinctual impulse into its organization. But what happens in the case of repression is that the instinctual impulse still belongs to the id and that the ego feels weak. (Freud 1989: 779).

Hence with the proper training and discipline that can help the ego to bring "the instinctual impulse into its organization," in the form of patriotism, such traumatic situations where the "ego feels weak" and is overcome with anxiety could be avoided.

As possible proof of this model, S. L. A. Marshall—veteran of World War I and military historian during World War II—discovered, after interviewing countless companies after battle, that "on an average not more than 15 per cent of the men had actually fired" their weapons. He continues, "The results appeared to indicate that the ceiling [on the ratio of active firers to non-firers] was fixed by some constant which was inherent in the nature of troops or perhaps in our failure to understand that nature sufficiently to apply the proper correctives" (Marshall 1947: 56-57). We can now argue then that Freud can indeed provide clues to better understand the "nature of troops." Therefore, though Marshall's findings led to changes in military training that have increased the rate of fire,⁷ it is hoped that further research into military applications of Freudian psychoanalysis, such as we have attempted here, can lead to better methods for helping to reduce the suffering of soldiers.

¹ Which includes Ernest Jones, whose "War Shock and Freud's Theory of the Neuroses", delivered before the Royal Society of Medicine in London on April 9, 1918, was reprinted in Jones 1921.

² While it may appear that this is merely a matter of trying to understand how the passivity

generally attributed to trauma can occur when the victim is the active agent of the trauma, we must keep in mind that Freud's definition of trauma was "economic," thus replacing the issue of victimization with that of stimulation. As Freud explained, after introducing the "traumatic neuroses" by referencing their "special frequency" in the war, "...the term 'traumatic' has no other sense than an economic one. We apply it to an experience which within a short period of time presents the mind with an increase of stimulus too powerful to be dealt with or worked off in the normal way, and this must result in permanent disturbances of the manner in which the energy operates" (Freud 1966: 340).

³ As Ferenczi's paper was concerned with laying out the differences between neurologists and psychoanalysts with regards to the war neuroses, which is predominantly carried out through a study of the "materialistic" literature, it will not be considered in this investigation.

⁴ "For we must not underrate the extent to which the sight of the judicial and executive procedures prevents the criminal from considering his deed, the type of his action *as such*, reprehensible: for he sees exactly the same kind of actions practiced in the service of justice and approved of and practiced with a good conscience..." (Nietzsche 2000: 518).

⁵ "The Commander-in-Chief is a father who loves all soldiers equally, and for that reason they are comrades among themselves. [...] Every captain is, as it were, the Commander-in-Chief and the father of his company, and so is every non-commissioned officer of his section" (Freud 1959: 33-34).

⁶ In response to the possible criticism about our drawing a connection between the penis and cruelty, we can find support for this linkage in what Melanie Klein refers to as "urethral sadism." She writes, "In analyzing both grown-up patients and children I have constantly come across phantasies in which urine was imagined as a burning, dissolving and corrupting liquid and as a secret and insidious poison. These urethral-sadistic phantasies have no small share in giving the penis the unconscious significance of an instrument of cruelty and in bringing about disturbances of sexual potency in the male" (Klein 1932: 186).

⁷ For a discussion of how this has also led to an increase in PTSD, see Baum 2004.

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