

Restaging Early Traumas in War and Social Violence

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Abstract: Analysis of shared national fantasies prior to wars reveals recurring fears of a poisonous, blood-sucking maternal monster. Aggressors regularly claim they were forced to go to war because they felt strangled, unable to breathe, needing *Lebensraum* – suggesting that war is a rebirth fantasy of enormous power shared by nations restaging fetal traumas on the historical stage. A review of recent research into fetal emotional life leads to the conclusion that the fetus experiences recurring developmental stresses, including receiving toxic blood from its placenta – which is likely the emotional matrix for later fears and poisonous blood. The restaging of early traumas is thus a homeostatic mechanism of the brain, achieved in the social sphere by nations through wars and social violence, during which we recapture our helplessness and inflict our traumas upon scapegoats.

Zusammenfassung: *Die Reinszenierung früher Traumen in Krieg und sozialer Gewalt.* Die Analyse gemeinsamer nationaler Phantasien vor Kriegen enthüllte das Motiv wiederkehrender Ängste vor einem vergiftenden, blutsaugenden mütterlichen Monster. Die Angreifer sagen regelmäßig, daß sie zum Krieg gezwungen seien, weil sie sich eingeschnürt fühlten, daß ihnen die Luft zum Atmen genommen würde und sie „Lebensraum“ brauchten. Dies führt zu der Vermutung, daß der Krieg eine in der jeweiligen Nation geteilten Wiedergeburtphantasie von enormer Macht ist, die fötale Traumen auf der historischen Bühne reinszeniert. Eine Übersicht über die neueste Forschung zum affektiven Erleben des Fötus führt zu dem Schluß, daß der Fötus in seiner Entwicklung wiederkehrenden Streßsituationen ausgesetzt ist, von denen eine das Einströmen von hyperämischem Blut aus der Plazenta ist, auf die wahrscheinlich das emotionale Muster für spätere Ängste vor vergiftendem Blut zurückgeht. Die Reinszenierung früher Traumen ist in diesem Sinne ein homöostatischer Mechanismus des Gehirns, der das Ziel hat, auf der sozialen Ebene von Nationen durch Kriege und soziale Gewalttätigkeiten eigene Hilflosigkeit dadurch zu bewältigen, daß wir unsere Traumen an den anderen als Sündenböcken ausleben.

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“A just war for the true interests of the state advances its development within a few years by tens of years, stimulates all healthy elements and represses insidious poison.”

Adolf Lasson

When Adolf Hitler moved to Vienna in 1907 at the age of eighteen, he reported in *Mein Kampf*, he haunted the prostitutes' district, fuming at the “Jews and foreigners” who directed the “revolting vice traffic” which “defiled our inexperienced young blond girls” and injected “poison” into the bloodstream of Germany.¹

Months before this blood poison delusion was formed, Hitler had the only romantic infatuation of his youth, with a young girl, Stefanie.² Hitler imagined that Stefanie was in love with him (although in reality she had never met him) and thought he could communicate with her via mental telepathy. He was so afraid of approaching her that he made plans to kidnap her and then murder her and commit suicide in order to join with her in death.

Hitler's childhood had been so abusive – his father regularly beat him “with a hippopotamus whip,” and once he endured 230 blows of his father's cane without a murmur³ – that he was full of rage toward the world. When he grew up, his sexual feelings were so mixed up with his revenge fantasies that he believed his sperm was poisonous and might enter the woman's bloodstream during sexual intercourse and poison her.⁴

Hitler's rage against “Jewish blood-poisoners” was, therefore, a projection of his *own* fears that he might become a blood-poisoner. Faced with the temptation of the more permissive sexuality of Vienna, he wanted to have sex with the prostitutes, but was afraid his sperm would poison their blood. Hitler then accused Jews of being “world blood-poisoners” who “introduced foreign blood into our people's body.”⁵

As is usually the case with delusional systems, Hitler's projection of his fears of his own poisonous sexuality into Jews and foreigners helped him avoid a psychotic breakdown and allowed him to function during his later life. He admitted this quite specifically in *Mein Kampf*, saying that when he “recognized the Jew as the cold-hearted, shameless, and calculating director of this revolting traffic in the scum of the big city, a cold shudder ran down my back . . . the scales dropped from my eyes. A long soul struggle had reached its conclusion.”⁶ From that moment on, Hitler became a professional anti-Semite, ordering Nazi doctors to find out how Jewish blood differed from Aryan blood, having his own blood regularly sucked by leeches to try to get rid of its “poison,”⁷ and, eventually, ordering the extermination of all “world blood-poisoners” in the worst genocide and the most destructive war ever experienced by mankind.

The success of Hitler's ability to use the group-fantasy of anti-Semitism to save his sanity was dependent, of course, upon there being millions of followers who shared his fantasies about poisonous enemies infecting the body of Europe. Much of Europe at that time shared Hitler's experience of a severely abusive childhood,⁸ and many shared his fantasy that the ills of the modern world were caused by the poisonous nature of Jews.⁹ When he used metaphors of blood in his speeches, saying the world was a constant warfare of one people against another, where “one

creature drinks the blood of another,” and that Jews were spiders that “sucked the people’s blood out,” he was cheered on by millions who shared his fantasies.¹⁰

Group-Fantasies of Poison Blood

I have regularly found “poison blood” group-fantasies in nations prior to outbreaks of war. It is usually found in conjunction with images of guilt for recent prosperity and progress that is felt to “pollute the national blood-stream with sinful excess,” making men “soft” and “feminine,” a frightful condition that can only be cleansed by a blood-shedding purification.¹¹ This fantasy of periodic shedding of poisoned blood through war is based on the same presumed cleansing effects as the bloodletting therapies physicians prescribed through the nineteenth century to cure many diseases, which also were believed to be caused by “gluttony, luxury and lustful excesses.”¹² As one military leader put it, war “is one of the great agencies by which human progress is effected. [It] purges a nation of its humors . . . and chastens it, as sickness or adversity . . . chastens an individual;” it cures it of its “worship of comfort, wealth, and general softness . . .”¹³ When John Adams asked Thomas Jefferson “how to prevent . . . luxury from producing effeminacy, intoxication, extravagance, vice and folly?” Jefferson’s answer was: “The tree of liberty must be refreshed from time to time with the blood of patriots.”¹⁴ As Sherlock Holmes expressed it in a story set in August 1914, rapid material progress until then had produced a feeling that “God’s curse hung heavy over a degenerate world, for there was an awesome hush and a feeling of vague expectancy in the sultry and stagnant air . . . [but] a cleaner, better, stronger land will lie in the sunshine when the storm has cleared . . . A bloody purging would be good for the country.”¹⁵

Wars have often been thought of as purifying the nation’s polluted blood by virtue of a sacrificial rite identical to the rites of human sacrifice so common throughout history. War, said those preparing for the bloody Finnish Civil War, purges guilt-producing material prosperity by means of the blood of soldiers sacrificed on the battlefield: “The idea of sacrifice permeated the war . . . Youth . . . have heard the nation’s soul crying for its renewal, their heart’s blood [because] nations drink renewal from the blood of the fallen soldiers.”¹⁶ Usually the blood of the soldiers is thought of as being needed to feed a maternal figure, either mother-earth or, as with the Aztecs, an actual bloodthirsty mother-goddess.¹⁷ War renewed national strength; the state was “reborn” by the soldier’s blood and war cleansed the polluted national bloodstream as if there was a “rebirth from the womb of history,” a “bloody baptism” that removed all poisonous self-indulgence.¹⁸ “A nation hath been born again,/ Regenerate by a second birth!” wrote W. W. Howe after the bloody American Civil War.¹⁹ Another American, speaking of World War I, said “It was like the pouring of new blood into old veins.”²⁰

The question immediately arises: How do such poisoned blood fears originate? And what is their connection with *birth*? The answers to this question will become more convincing only after we have examined another prior, related question: *Why is war so often depicted as a woman?*

Group-Fantasies of Dangerous Women

For the past two decades, I have collected historical material from sources such as magazine covers and political cartoons on images of war. One of the most unexpected of these was that war was shown as a dangerous, bloodthirsty woman.²¹ Despite the fact that women neither play much part in deciding on wars nor in fighting them, war has so often been depicted as a dangerous woman (Fig. 1) that a visitor to our planet might wrongly conclude that women were our most bellicose sex. From Athena to Freyja, from Marianne to Britannia, terrifying women have been depicted as war goddesses,²² devouring, raping and ripping apart her children. The image has become so familiar we no longer think to question why women are so often shown as presiding over war rather than being thought of as its victims, as they are in reality.



Fig. 1. The mother of all wars

Even in later antiquity, when the god of war was male, his mother usually was imagined to have hovered above the battlefield, demanding more blood to feed her voracious appetite.²³ And even though it was almost always men who fought the battles,²⁴ women in early societies were expected to come along to watch from the sidelines, rather like cheerleaders at a sports match, shrieking their own battle-cries, heckling and insulting those warriors who held back and demanding a plentiful show of blood on the battlefield.²⁵

The Marie Antoinette Syndrome and Social Violence

The French Revolution fully demonstrates the role of the dangerous woman fantasy in social violence, being preceded by a deluge of pamphlets and newspapers picturing Marie Antoinette – actually a rather sweet-natured woman – as a sexually voracious, incestuous, lesbian, murderous “bloodsucker of the French.”²⁶ The French Revolution, Terror and revolutionary wars were accompanied by increasingly violent Marie Antoinette fantasies, centering on grotesque images of her imagined sexual perversities, while the king was pictured as merely an impotent tool in her hands. Finally, the Tribunal, whipped up by the press, declared her a “ravens beast” and chopped off her head, after she had been accused of being a “tigress thirsty for the blood of the French,” a “ferocious panther who devoured the French, the female monster whose pores sweated the purest blood of the sans-culottes,” a “vampire who sucks the blood of the French,” and a “monster who needed to slake her thirst on the blood of the French.”²⁷

I have found that media images of monstrous bloodthirsty women have preceded every war I have analyzed. Even the most popular movies prior to wars reflect this dangerous woman fantasy. The biggest movie preceding W.W.II was *The Wizard of Oz*, which is about a wicked witch and how to kill her; the second biggest was *The Women*, a movie that boasted it featured 135 dangerous women. *All About Eve* before Korea and *Cleopatra* before Vietnam had similar dangerous women as leads, and the Persian Gulf War was preceded by a whole string of dangerous women movies, from *Fatal Attraction* to *Thelma and Louise*,²⁸ including a popular TV series entitled *Dangerous Women*.

When war breaks out, these terrifying women images disappear from the nation’s fantasy life. The dangerous woman image now is *projected into the enemy*, so that the war is experienced unconsciously as a battle with a mother-figure. For example, when the United States attacked Libya, the *New York Post* reported the rumor that American intelligence had discovered that Moammar Khadafy was actually a “transvestite dressed in women’s clothes and high heels,”²⁹ even touching up a photo to show how he “might look . . . dressed in drag.” Even more often, the enemy is shown as a *dangerous mommy*, as in the Persian Gulf War when Saddam Hussein was depicted as a dangerous pregnant mother with a nuclear bomb in her womb or as the mother of a death-baby (Fig. 2).

Hallucinating dangerous feminine characteristics in one’s enemies goes all the way back to antiquity, when the earliest battles were imagined to have been fought against female monsters, often the mother of the hero, whatever her name – Tiamat, Ishtar, Inanna, Isis, or Kali.³⁰ Typical is the Aztec mother-goddess Huitzilopochtli, who had “mouths all over her body” that cried out to be fed



Fig. 2. The enemy as a dangerous mommy

the blood of soldiers.³¹ Early Indo-European warriors had to pass through initiatory rituals in order to attain full status in which they dressed up and attacked a monstrous dummy female poisonous serpent, complete with three heads.³² Although early warriors fought against men, not women, they often anally raped and castrated their enemies, turning them into symbolic women; from ancient Norse to ancient Egyptian societies, heaps of enemy penises on the battlefield are commonly portrayed.³³ In addition, according to the world's leading historian of war, "the opportunity to engage in wholesale rape was not just among the rewards of successful war but, from the soldier's point of view, one of the cardinal objectives for which he fought."³⁴ In fact, more women have been raped and killed in most wars than enemy soldiers. The hero is therefore symbolically a *mother-killer*, inflicting our revenge for early traumatic experiences.³⁵

At the same time, by restaging early traumas in wars the magical goal is achieved of *merging with the mother* in a defensive maneuver to deny her as a dangerous object. Giving one's life for one's Motherland means finally joining with her. The soldier who dies in war, says one patriot, "dies peacefully. He who has a Motherland dies in comfort . . . in her, like a baby falling asleep in its warm and soft cradle . . ."³⁶

Yet even though we understand that both the Motherland and the enemy in wars are ultimately the early mother, the question remains: what could possibly be the infantile origin of fantasies of the enemy as a *poisonous blood-sucking monster*? Why did Americans before the Revolutionary War feel "poisoned by Mother England" and fight a war rather than pay a minor tax? Why did Hitler fear "blood-sucking Jews and foreigners" and why did Aztec soldiers go to war to feed blood to a mother-goddess? Closer to today, why did Americans for so long fear their "national life-blood" was being "poisoned" by Communists? Why do so many today feel the government and welfare recipients are "sucking their blood?" Images of blood-sucking, engulfing enemies are ubiquitous throughout history. Surely our blood was never *really* poisoned or sucked out of us by a maternal monster in our past. Or was it?

War and the Fetal Drama

As I described in my *Foundations of Psychohistory*,³⁷ when I first began collecting the emotional imagery surrounding the outbreak of war I was puzzled by recurring claims by aggressors that they were *forced* to go to war against their wishes because “a net had suddenly been thrown over their head” or a “ring of iron was closing about us more tightly every moment” or they had been “seized by the throat and strangled.” I piled up hundreds of these images of nations being choked and strangled, “unable to draw a breath,” “smothered, walled-in,” “unable to relieve the inexorable pressure” of a world “pregnant with events,” followed by feelings of being “picked up bodily” in “an inexorable slide” towards war, starting with a “rupture of diplomatic relations” and a “descent into the abyss,” being “unable to see the light at the end of the tunnel” as the nation takes its “final plunge over the brink,” and even that wars were “aborted” if ended too soon. Given the concreteness of all this birth imagery, I concluded that *war was a rebirth fantasy* of enormous power shared by nations undergoing deep regression to fetal traumas.

War has long been described in images of pregnancy: “War develops in the womb of State politics; its principles are hidden there as the particular characteristics of the individual are hidden in the embryo” (Clausewitz); “Germany is never so happy as when she is pregnant with a war” (proverb).³⁸ Wars are felt to be life-and-death struggles for “breathing space” and “living room,” *Lebensraum*, as though nations were reliving the growing lack of space and oxygen common to all fetuses just prior to and during birth. Nations become paranoid prior to wars and feel they have to resort to violence in order to get out of what appears to be a choking womb and birth canal. Bethmann-Hollweg, for example, told the Reichstag in announcing war in 1914 that Germany was surrounded by enemies, and “he who is menaced as we are and is fighting for his highest possession can only consider how he is to hack his way through.”³⁹ As Hitler repeated over and over again, only a violent “rebirth” could “purge the world of the Jewish poison” and avoid it being “asphyxiated and destroyed.”⁴⁰

Now, the notion that war might be a battle against a dangerous mother is difficult enough to believe. That it in addition includes fantasies that you are hacking your way out of the engulfment of your own birth is infinitely harder to accept. But what followed then in my psychohistorical research into imagery prior to wars was a discovery that seemed to be a final step into the unbelievable, revealing a depth of regression prior to wars greater than anything yet contemplated in the psychological literature. Yet it was a discovery that for the first time seemed to explain the true origin of the poison blood imagery.

What I found was that the cartoons, past and present, of the enemy in war were dominated by an image that was even more widespread than that of the dangerous mommy: it was that of a *sea-beast*, often with many heads or arms, a dragon or a hydra or a serpent or an octopus that threatened to poison the lifeblood of the nation (Fig. 3). Most early cultures believed in this beast as a dragon that was associated with watery caves or lakes; modern wars show the beast as a blood-sucking, many-headed enemy. This serpentine, poisonous monster I have termed the *Poisonous Placenta*, since it resembled what the actual placenta must have sometimes felt like to the growing fetus, particularly when the placenta fails in its tasks of cleansing the fetal blood of wastes and of replenishing its oxygen supply. When



Fig. 3. War as a battle with the poisonous placenta

the blood coming to the fetus from the placenta is bright red and full of nutrients and oxygen, the fetus feels it is being fed by a *Nurturant Placenta*, but when the mother smokes, takes drugs or is hurt or frightened or otherwise stressed, the placenta does not remove the wastes from the fetal blood, which therefore becomes polluted and depleted of oxygen. Under these stressful conditions, the helpless fetus experiences an asphyxiating *Poisonous Placenta*, the prototype for all later hate relationships, including the murderous mother, the castrating father or the dangerous enemy. It is even likely that the fetus, like Oedipus, feels it is actually *battling* with the dangerous beast (Sphinx means “strangler” in Greek) in order to restore connections with the *Nurturant Placenta*. This battle, one that I have

termed *the fetal drama*, is repeated in death-and-rebirth restagings of traumatic battles in all wars and other social violence.

The cosmic battle with the Poisonous Placenta (the capitals are in honor of it being the prototype for God and Nation), where we repeat the fetal drama of a paradise lost, of being sucked into the whirlpool and crushing pressures of birth, and where we fight the placental dragon, is well depicted in a comic-book character, *Conan the Barbarian* (Fig. 4), although I could just as easily have used pictures and texts from ancient myths of battles with sea-beasts such as Tiamat, Rahab, Behemoth, Humbaba, Apophis, Hydra, Gorgon or Typhon.⁴¹ In this version, a baby is first shown abandoned, beginning his watery birth passage between head-crushing bones, going down the whirlpool of birth after the amniotic waters break, being choked by the Poisonous Placenta, a *black* sea-monster that tries to asphyxiate it. The hero, an imaginary powerful version of the fetus, battles with the Poisonous Placenta and frees the fetus, who reaches the safety of land. The final panel shows that the goal, however, is not birth, the arrival on land, but the *reuniting* with the placenta. That it is the Nurturant not the Poisonous Placenta that holds the baby in its embrace is depicted by its being shown as a *white* sea beast.

In most cultures, past and present, the actual placenta is considered very much alive after delivery; it is felt to be so dangerous to the community that unless it is buried somewhere deep the whole tribe will fall sick.⁴² The Poisonous Placenta is even present in most small groups we form. As one group analyst describes his conclusions from a lifetime of studying unconscious group images:

One of the most active, or rather paralyzing, unconscious group representations is that of Hydra: the group is felt to be a single body with a dozen arms at the ends of which are heads and mouths, each functioning independently of the others . . . incessantly searching for prey to be squeezed and suffocated, and ready to devour one another if they are not satisfied.⁴³

Obviously, full understanding of the placental source of “poison blood” and sea-beast imagery and of the fetal origins of war and social violence is going to have to wait until we investigate more fully the psychology of dangerous wombs, Poisonous Placentas and asphyxiating births – which is to say, until we understand more about both the psychology and neurobiology of fetal life.

The Origins of Fetal Psychology

After Freud initially proposed that mental life began after birth, he later admitted that he had come to believe he was wrong, saying that “the act of birth is the first experience of anxiety.”⁴⁴ Although most other psychoanalysts believed mental life began only with infancy, there were a number of exceptions, beginning with Otto Rank’s *The Trauma of Birth* in 1923,⁴⁵ which began the investigation of birth anxiety derivatives in adult life and culture. After Rank, Donald Winnicott wrote in the early 1940s a paper on “Birth Memories, Birth Trauma, and Anxiety,”⁴⁶ which, however, was little noticed, since, as he said, “It is rare to find doctors who believe that the experience of birth is important to the baby, that it could have any significance in the emotional development of the individual, and that memory traces of the experience could persist and give rise to trouble even in



The Fetal Drama Birth and the Poisonous Placenta



The fetus, abandoned...



...starts his birth between head-crushing bones.



The amniotic waters break and the whirlpool of birth begins.



The Poisonous Placenta...



...wants the fetus. The Hero must choke the Poisonous Placenta...



...to save the fetus from asphyxiation. But he might drown himself.

Fig. 4. The fetal drama

the adult.” While still a pediatrician, Winnicott saw that newborn babies varied enormously and that prolonged labor could be traumatic to the fetus, resulting in extreme anxiety – so much so that he thought “some babies are born paranoid, by which I mean in a state of expecting persecution . . .”⁴⁷ He was even able to conclude that “at full term, there is already a human being in the womb, one that



The battle with the Poisonous Placenta frees the fetus.



The fetus, at home in the water, is safely born on land.



The fetus is reunited with the Nurturant Placenta.

Fig. 4. (continued)

is capable of having experiences and of accumulating body memories and even of organizing defensive measures to deal with traumata . . .” He sometimes would allow his child patients to work through birth anxiety directly, having one child sit in his lap and “get inside my coat and turn upside down and slide down to the ground between my legs; this he repeated over and over again . . . After this

experience I was prepared to believe that memory traces of birth can persist."⁴⁸ He also encouraged some adult patients to relive the breathing changes, constrictions of the body, head pressures, convulsive movements and fears of annihilation experienced during their births, with dramatic therapeutic results.⁴⁹

After Winnicott, psychotherapists such as Fodor, Mott, Raskovsky, Janov, Grof, Verny, Fedor-Freybergh, Janus and others published extensive work showing how their patients relived birth trauma in therapy and removed major blocks in their emotional lives.⁵⁰ These traumatic birth feelings – of being trapped, of crushing head pressures and cardiac distress, of being sucked into a whirlpool or swallowed by terrifying monsters, of explosive volcanoes and death-rebirth struggles – appear regularly in the 60 percent of our dreams that have been found to contain overt pre- and perinatal images,⁵¹ although most therapists continue to overlook their connections with actual birth memories.

Perhaps one of the most important results of clinical research by therapists sensitive to perinatal trauma – as described particularly in the work of Linda Share⁵² – is how regularly early trauma produces an overwhelming fear of all progress in life. It is as though the fetus concludes, "Going forward in life led to disaster; I must remain 'unborn' all my life to avoid a repetition of this horrible start."

Fetuses that experience injuries in the womb, premature births, birth complications, and many other medical conditions as newborns regularly live the rest of their lives in fear of all growth and individuation.⁵³ For instance, one baby who was born with a congenital atresia of the esophagus, so that she choked on feedings, was seen to have multiple fears of dying all during a 30-year followup study into her life.⁵⁴ Another, who often dreamed of lying in a refrigerator, asked his parents about the image, and they told him that as a newborn the window of his room had mistakenly been left open on an extremely cold winter night, and they "had thawed him out of his urine, feces and vomitus."⁵⁵ Interpretation of this continuing fear led to a turning point in the treatment and in the patient's life. Another baby was born with an intestinal obstruction that prevented digestion, so she vomited up all her milk. Although the condition was repaired at one month, for the rest of her life she was concerned with disaster fantasies every time growth was imminent. As Share described her, "Each new opportunity for advancement stood for a metaphorical 'birth.' To be born in any kind of way meant to have to re-experience the disaster of her infancy: starvation, pain, surgery, and near-death. These, then, were the disasters she fantasized, the panic attacks each time she headed for something new and creative."⁵⁶ As with all early trauma, any progress threatened repetition of disaster.

Recent Research Into Fetal Memory

Much has changed in our knowledge of the fetus during the decades since these early pioneering excursions into perinatal psychology. Neurobiologists have made startling advances in the understanding of how the brain develops in the womb, experimental psychologists have discovered a great deal about fetal learning, pediatricians have linked all kinds of later problems to fetal distress, and one psychoanalyst has even begun to compare thousands of hours of ultrasound observations of individual fetuses with their emotional problems during infancy in therapy with

her. There are now thousands of books and articles on the subject, as well as two international associations of pre- and perinatal psychology, each with its own journal.⁵⁷ I will here only be able to summarize some of the main trends of this extensive recent research.

Biologists used to think that because the fetus had incomplete myelination of neurons it couldn't have memories.⁵⁸ This notion has been disproved, since impulses can be carried quite efficiently in the thinly myelinated nerves of fetuses, only at a somewhat slower velocity, which is offset by the shorter distances traveled.⁵⁹ Indeed, far from being an unfeeling being, the fetus has been found to be exquisitely sensitive to its surroundings, and our earliest feelings have been found to be coded into our early *emotional memory system* centering in the amygdala, quite distinct from the *declarative memory system* centering in the hippocampus that becomes functional only in later childhood.⁶⁰ These early emotional memories are usually unavailable to conscious, declarative memory recall, so early fears and even defenses against them are often only recaptured through body memories and by analyzing the consequences of the traumas.⁶¹

The fetus's nervous system is so well developed that by the end of the first trimester it responds to the stroking of its palm by a light hair by grasping, of its lips by sucking, and of its eyelids by squinting.⁶² It will jump if touched by the amniocentesis needle and turn away from the light when a doctor introduces a brightly lit fetoscope.⁶³ By the second trimester, the fetus is not only seeing and hearing, it is actively tasting, feeling, exploring and learning from its environment, now floating peacefully, now kicking vigorously, turning somersaults, urinating, grabbing its umbilicus when frightened, stroking and even licking its placenta, conducting little boxing matches with its companion if it is a twin and responding to being touched or spoken to through the mother's abdomen.⁶⁴ Each fetus develops its own pattern of activity, so that ultrasound technicians quickly learn to recognize each fetus as a distinct personality.⁶⁵ Even sensual life begins in the womb; if a boy, the fetus has regular erections of his penis, coinciding with REM sleep phases, and baby girls have been seen masturbating during REM sleep.⁶⁶

The Emotional Effects of Fetal Conditions

In addition to what we know about the disastrous effects on the fetus of prenatal exposure to drugs and alcohol,⁶⁷ we now have considerable evidence on how maternal stress and other emotions are transmitted to the fetus. When a pregnant mother is offered a cigarette after having been deprived of smoking for 24 hours there is a significant acceleration in fetal heartbeat even before the cigarette is lit.⁶⁸ The fetus has been found to be sensitive to a wide range of maternal emotions in addition to any drugs or other physical traumas she endures.⁶⁹ When the mother feels anxiety, her increased heartbeat, frightened speech, and alterations in neurotransmitter levels are instantly communicated to the fetus, and her tachycardia is followed within seconds by the fetus's tachycardia; when she feels fear, within 50 seconds the fetus can be made hypoxic (low oxygen). Pregnant monkeys stressed by simulated threatening attack had such impaired blood circulation to their uteruses that their fetuses were severely asphyxiated.⁷⁰ Alterations in adrenaline, plasma epinephrine and norepinephrine levels, high levels

of hydroxycortico-steroids, hyperventilation and many other products of maternal anxiety are also known to directly affect the human fetus. Numerous other studies document sensory, hormonal and biochemical mechanisms by which the fetus is in communication with the mother's feelings and with the outside world.⁷¹ Even baby monkeys have been found to be hyperactive, with higher levels of the stress hormone, cortisol, after birth from a mother who was experimentally stressed during her pregnancy.⁷²

While positive maternal emotions have been experimentally shown to increase later growth, alertness, calmness and intelligence – the fetus even benefits from the mother *singing* to it in the womb – and prenatal infant stimulation, particularly being bathed in pleasant music, improves fetal development compared to control groups,⁷³ maternal distress and chemical toxins have been shown to produce low birth weights, increased infant mortality, respiratory infections, asthma and reduced cognitive development.⁷⁴ Ultrasound studies record fetal distress clearly, as it thrashes about and kicks in pain during hypoxia and other conditions. One mother whose husband had just threatened her verbally with violence came into the doctor's office with the fetus thrashing and kicking so violently as to be painful to her, with an elevated heart rate that continued for hours.⁷⁵ The same wild thrashing has been seen in mothers whose spouses have died suddenly. Maternal fright can actually cause the death of the fetus, and death of the husband and other severe emotional distress within the family during the mother's pregnancy have been associated with fetal damage in large samples in several countries.⁷⁶ Marital discord between spouses has been correlated "with almost 100 per cent certainty . . . with child morbidity in the form of ill-health, neurological dysfunction, developmental lags and behavior disturbance."⁷⁷

Margaret Fries has conducted 40-year longitudinal studies predicting emotional patterns that remain quite constant throughout the lives of those studied and correlated them to the mother's attitude toward the fetus during pregnancy.⁷⁸ Maternal emotional stress, hostility toward the fetus and fetal distress have also been statistically correlated in various studies with more premature births, lower birth weights, more neonate neurotransmitter imbalances, more clinging infant patterns, more childhood psychopathology, more physical illness, higher rates of schizophrenia, lower IQ in early childhood, greater school failure, higher delinquency and greater propensity as an adult to use drugs, commit violent crimes and commit suicide.⁷⁹ This increase in social violence due to pre- and perinatal conditions has recently been confirmed by a major Danish study showing that boys of mothers who do not want to have them (25 percent of pregnant mothers admit they do not want their babies)⁸⁰ and who also experience birth complications are *four times* as likely when they get to be teenagers to commit violent crimes than control groups.⁸¹ American studies also show similar higher violent crime rates correlated with maternal rejection during pregnancy.⁸²

The Neurobiology of Fetal Trauma

There are sound neurobiological reasons for this correlation between fetal trauma and social violence. Early brain development is determined both by genes and by cellular selection and self-organizational processes that are crucially dependent

upon the uterine environment.⁸³ Since fetal traumas occur while the brain is still being formed, while cell adhesion molecules are still determining the brain's initial mapping processes and while synaptic connections are still undergoing major developmental changes, memories of fetal traumas cannot be handled as traumas are later in life and instead are coded in separate neural networks that retain their emotional power well into adulthood.⁸⁴

Fetal abuse can be direct, either from drugs or from the pregnant mother being abused by her mate. According to the *Journal of the American Medical Association*, "one in three pregnant women in America is slapped, kicked or punched by their mates."⁸⁵ In addition, maternal *emotional* stress produces such biochemical imbalances as an overactivation of the pituitary-adrenal cortical and sympathetic-adrenal medullary systems with consequent increases of adrenocorticotrophic hormone (ACTH), cortisol, pituitary growth hormone, catecholamine and glucagon level. Maternal emotional stress has even been correlated with damage to the hippocampus, the center of conscious memory and self feelings.⁸⁶ Furthermore, the emotions of the mother can be directly transmitted through the hormones in her blood to the fetal blood and then to DNA-binding receptors in the fetal cells that turn genes on and off, thus programming her stress directly into the developing fetal brain. This bath of maternal hormonal imbalances can produce severe fetal traumatic emotional dysfunctions.⁸⁷ Baby rats, for instance, whose mothers had been frightened by loud noises during pregnancy were found to have copious supplies of stress hormones, plus fewer receptors for benzodiazepines and fewer GABA receptors, both needed for calming action during stress.⁸⁸

Infants traumatized *in utero* and during birth are those Winnicott referred to as "born paranoid," and can remain hypersensitive to stress, over fearful, withdrawn and angry all of their lives. Fetal traumas result in overstimulation of neurotransmitters, producing hypersensitivity and other imbalances in such important neurotransmitters as the catecholamines. The most important of these imbalances is low serotonin levels, which have been demonstrated to lead to persistent hyperarousal and compulsive reenactment in violent social behavior, including both homicide and suicide.⁸⁹ Because of this, reenactment in later life can be an even more potent source of violent behavior in the case of *fetal* trauma than it has been found to be in the case of childhood or war trauma.⁹⁰

The same neurobiological factors have been found to be responsible for the increase in violence against self. Suicide patterns are so strongly linked to birth that epidemiologists have found higher suicide rates in areas of the country that a few decades earlier had had higher birth injuries.⁹¹ Other studies have shown that even the *types* of suicides were correlated with the kinds of perinatal traumas, asphyxia during birth leading to more suicides through strangulation, hanging and drowning, mechanical trauma during birth correlated with mechanical suicide elements, drugs given during birth being correlated to suicide by drugs, and so on. The rise in adolescent drug addiction and suicide recently, mainly connected with drug use, is believed to be at least partially due to the more frequent use of drugs by obstetricians during birth in recent decades.⁹² The same principle may hold for the rise of violent crimes during the 1970s and 80s, which could be connected with the rise of the extremely painful rite of circumcision in newborn boys during the 1950s and 60s.⁹³ Violence done to children always returns on the social level.

Far from being the safe, cozy haven to which we all supposedly want to return, the womb is in fact often a dangerous and often painful abode,⁹⁴ where “more lives are lost during the nine gestational months than in the ensuing 50 years of postnatal life.”⁹⁵ Few fetuses, for instance, escape experiencing painful drops in oxygen levels when the mother is emotionally upset, smokes, drinks alcohol or takes other drugs. As the placenta stops growing during the final months of pregnancy, it regresses in efficiency, becoming tough and fibrous, as its cells and blood vessels degenerate and it becomes full of blood clots and calcifications, making the fetus even more susceptible to hypoxia as it grows larger and making the late-term fetus “extremely hypoxic by adult standards.”⁹⁶ Furthermore, the weight of the fetus pressing down into the pelvis can compress blood vessels supplying the placenta, producing additional placental failure.⁹⁷ Practice contractions near birth give the fetus periodic “squeezes,” decreasing oxygen level even further,⁹⁸ while birth itself is so hypoxic that “hypoxia of a certain degree and duration is a normal phenomenon in *every* delivery,” not just in more severe cases.⁹⁹ The effects on the fetus of this extreme hypoxia are dramatic: normal fetal breathing stops, fetal heart rate accelerates, then decelerates, and the fetus thrashes about frantically in a life-and-death struggle to liberate itself from its terrifying asphyxiation.¹⁰⁰

The Reality of Fetal Memory

That the fetal memory system is sufficiently mature not only to *learn* in the womb but also to *remember* prenatal and birth experiences is confirmed by a growing body of experimental, observational and clinical data. Neonates can remember lullabies learned prenatally¹⁰¹ and can pick out at birth their mothers' voices from among other female voices and respond differently (by the increased rate of sucking on a pacifier) to familiar melodies they had heard *in utero*.¹⁰² Sallenbach played simple melodies to the fetus *in utero*, based on four notes, and found that the fetus was able not only to move to the beat but continued to mark the beat when the notes were discontinued.¹⁰³ As evidence of even more complex memories, DeCasper had 16 pregnant women read either *The Cat in the Hat* or a second poem with a different meter to their fetuses twice a day for the last six weeks of their pregnancy.¹⁰⁴ When the babies were born, he hooked up their pacifiers to a mechanism that allowed them to choose one of two tape recordings by sucking slowly or quickly, choosing either the tape in which their mothers read the familiar poem or the tape where she read the unfamiliar poem. The babies soon were listening to the tape of the familiar poem, indicating their mastery of the task of remembering complex speech patterns learned *in utero*. Chamberlain sums up his extensive work on birth memories, which he found very reliable when comparing them with both the memories of the mother and hospital records, “They demonstrate the same clear awareness of violence, danger, and breach of trust which any of us adults might show in a similar situation . . . Even three-year-olds sometimes have explicit and accurate birth recall.”¹⁰⁵ Distress during birth is particularly able to be later remembered during dreams, when dissociated early neural emotional memory networks are more easily accessed. For instance, one child who had been a “blue baby” and near death while tangled in his umbilicus during birth and had

had a forceps delivery had the following revealing nightmare during most of his childhood:

I would be kneeling down, all bent over. I am frantically trying to untie knots in some kind of rope. I am just starting to get free of the rope when I get punched in the face.¹⁰⁶

With the number of recent experiments demonstrating fetal competence, classical conditioning and more advanced learning ability,¹⁰⁷ it is not surprising that some parents have recently begun to make the fetus a “member of the family,” playing with them, massaging them and calming them down when they thought they had communicated distress by excessive movement and kicking, and trading light pokes in return for fetal kicks, in what they call “The Kicking Game.”¹⁰⁸ One father taught his baby to kick in a circle; a mother played a nightly game where she tapped her abdomen three times and the fetus bumped back three times.¹⁰⁹ Another father who called out “Hoo hoo!” next to his pregnant wife’s belly nightly found his child pushing with a foot into his cheek on whichever side he called; father and baby played this game for 15 weeks; he found his next baby was able to learn the same game.¹¹⁰ These parents tried to avoid maternal stress, loud arguments and loud noises – especially rock music – because they became aware it usually produced fetal distress.

Recent insights into fetal learning have led to some impressive research on fetal enrichment that demonstrates that prenatal stimulation produces advances in motoric abilities and intelligence that last for years. Experimental groups of pregnant women and their fetuses who participated in prenatal stimulation enrichment were investigated in parallel with carefully selected control groups not involved in any prenatal program. The postnatal evaluation of both groups on standard developmental tests shows highly significant enhancement from fetal sensory stimulation in motoric performance, visual skills, emotional expression and early speech.¹¹¹ Even more impressive, when these prenatally induced enrichment effects are consolidated by immediate post-natal enrichment experiences, they produce improvements over the control group in Stanford Binet IQ tests *at age three* ranging from 38 percent for language and 47 percent for memory to 51 percent for social intelligence and 82 percent for reasoning, a fetal Head Start program of astonishing efficiency.

The Findings of Ultrasound Research

Perhaps the most impressive observational work on the personality of the fetus is being done by the Italian psychoanalyst, Alessandra Piontelli, by combining thousands of hours of ultrasound observations and clinical psychoanalytic work with young children. Her research into pre- and perinatal memories began after she encountered an eighteen-month-old child who was reported by sensitive parents as being incessantly restless and unable to sleep:

I noted that he seemed to move about restlessly almost as if obsessed by a search for something in every possible corner of the limited space of my consulting room, looking for something which he never seemed able to find. His parents commented on this, saying that he acted like that all the time, day and night. Occasionally Jacob also tried to shake several of the objects inside my room, as if trying to bring them back to life. His parents then told

me that any milestone in his development (such as sitting up, crawling, walking, or uttering his first words) all seemed to be accompanied by intense anxiety and pain as if he were afraid, as they put it, 'to leave something behind him.' When I said very simply to him that he seemed to be looking for something that he had lost and could not find anywhere, Jacob stopped and looked at me very intently. I then commented on his trying to shake all the objects to life as if he were afraid that their stillness meant death. His parents almost burst into tears and told me that Jacob was, in fact, a twin, but that his co-twin, Tino, as they had already decided to call him, had died two weeks before birth. Jacob, therefore, had spent almost two weeks *in utero* with his dead and consequently unresponsive co-twin.¹¹²

Verbalization of his fears that each step forward in his development might be accompanied by the death of a loved one for whom he felt himself to be responsible "brought about an incredible change in his behavior," says Piontelli. Similarly, Leah La Goy, an American psychotherapist, has documented seventeen children who were her patients who had lost a twin *in utero* and who "consistently create enactments of fearing for their own life [which] can and often does weaken the parent-child bonding process" because they believe their mother might try to get rid of them too.¹¹³

Piontelli, like many other child therapists, began to be struck by the frequency and concreteness of children's "fantasies" about their life before birth. Unlike most therapists, who, however, ignore their accurate observations because their training taught them the mind only begins after birth, she carefully recorded them and tried to confirm their reality, first by consultation with the family and eventually by her own extensive ultrasound observations of fetal life. The correlations and continuities between fetal experiences and childhood personality "were often so dramatic," she says, "that I was amazed that I had not been more aware of them at the time."¹¹⁴ One set of twins often stroked each others' heads in the womb through the dividing membrane; at the age of one, they could often be seen playing their favorite game of using a curtain as a kind of membrane through which they stroked each other's heads.¹¹⁵ Another set of twins – whose mother considered abortion because of her fear they might be jealous of each other – punched each other all the time in the womb and continued to do so after birth.

One fetus, who often buried his face in the placenta as if it were a pillow, as a child insisted that his mother get him a pencil case shaped like a pillow that he used similarly. Still other children played out various obstetrical distress problems in later life in dramatic detail, such as one child who had nearly died because her umbilical cord had been tightly knotted around her neck and who spent most of her early childhood wrapping ropes, strings and curtain cords around her head and neck, playing with them and licking them in a frenzy.¹¹⁶ The enormous importance of being able to use fetal insights such as these in the therapy of both children and adults for profound relief and personality change has been carefully documented by Piontelli and other therapists.¹¹⁷

The Poisonous Placenta

Piontelli's pioneering use of ultrasound to observe actual fetal behavior has, in fact, for the first time confirmed my own conclusions made from historical material about the relationship between the fetus and its placenta. Even birth therapists

have objected to my theory that “the fetus begins its mental life in active relationship with its own placenta.” Thomas Verny, author of the pioneering book *The Secret Life of the Unborn Child*, said that although he agreed that “mental life begins in the womb with a fetal drama,” he disagreed that the placenta has any role in this drama, saying, “Personally, in fifteen years of doing intensive, regressive type of psychotherapy I have never yet heard one of my patients refer in any way at all to his or her placenta.”¹¹⁸ David Chamberlain, author of *Babies Remember Birth*, agrees, saying, “I have heard complaints about all these things in hypnosis but never against a ‘poisonous placenta.’ The reaction is always against the mother herself.”¹¹⁹

Until birth is complete, the fetus, of course, has never met a “mother,” only a womb and a placenta and a umbilicus. Piontelli’s ultrasound observations reveal the complex relationship between the fetus and its placental/umbilical “first object.” Fetuses stroke and explore the placenta all the time, and grab the umbilicus for comfort when distressed. Their behavior toward the placenta and umbilicus correlates with later behavior patterns in their infancy, so that, for instance, when Piontelli watches one fetus use the placenta as a pillow in the womb, observing it “sucking the cord [and] resting on the placenta as if it were a big pillow . . . burying himself in the placenta . . . as if it were a pillow,” she then notices it has difficulty sucking the mother’s breast after birth, preferring to use it as a pillow instead: “He is not sucking . . . he is leaning against it . . . it’s not a pillow you know!”¹²⁰

Another fetus Piontelli watched *in utero* by ultrasound constantly licked her placenta and umbilicus while holding her hands between her legs on her vagina. The mother, who was both very overweight and whose “rather vamp-looking, low-necked, black velvety dress, together with her smeared and bright make-up, made her look quite ‘whorish,’ though in an outdated and clumsy way, like a character out of a Fellini film,”¹²¹ kept saying her baby girl would turn out to be “whorish” and had many conflicts about having her. The fetus responded to the maternal rejection by licking her placenta and masturbating:

She is licking the placenta now . . . look at what she is doing with her other hand . . . it is still there right in between her legs . . . licking the placenta again . . . my God . . . she is really wild this time . . . look . . . it just goes on and on . . . Look how she licks it! . . . we can almost hear the noise . . . look . . . she is pulling it down towards her mouth . . . my God! . . . her tongue is really strong . . . look she is doing it again . . . and again . . . and again.¹²²

That this “seducing” of the placenta by this fetus plus her auto-eroticism might have been defensive maneuvers designed to ward off *fear* is indicated by her later actions in therapy with Piontelli as a child. In therapy, said Piontelli, she seemed to have only two modes of being: (1) fear of everything as being persecutory and poisoning, so that she spent her early therapy sessions terrified and screaming, and (2) in “orgies,” like a “whore,” eating and licking everything and masturbating.¹²³ Apparently her mother’s rejecting attitude and poor uterine conditions had affected the fetal amygdalae, center of her early emotional memory system. In monkeys, destroying their amygdalae cause them to mouth everything they come into contact with and try to have sex with everything they meet, exactly the same mouthing and masturbating orgies this child engaged in both as a fetus and infant. So intent on licking and seducing everything was this baby that she couldn’t even suck her mother’s breast:

The breast . . . seems to be a despicable object . . . she absolutely refuses milk . . . Her mother says, "What are you doing? . . . you are not sucking it, you are playing . . . she is not sucking it . . . she is licking it!" . . . she starts licking her mother's chest vigorously with the same wild motions I had previously noticed when she licked the placenta . . . She licked any surface or fabric which came into contact with her face. I saw her licking her mother's chest, her shoulders, her chin, her arms and the clothes covering them.¹²⁴

As an alternative to her screaming and paranoid fear, the baby had developed a pattern of seducing both placental objects and herself, filling her abyss of anxiety with wild, orgiastic licking and masturbating:

She sits on the table with her legs wide open looking rather obscene. She inserts a finger inside her cup and licks it. Then she puts her hands between her legs while moving her tongue over her lips. She looks very excited and her face is all red now. I say that she's filling herself with prohibited excitement now. She puts her finger in her mouth and then almost inside her vagina, saying, "This or this, they are both nice . . ."

Piontelli's little children with fetal problems did not, of course, say their persecutors were "Poisonous Placentas," any more than did the adult patients of Verny or Chamberlain. Yet there is little question that it was the placenta that they felt had persecuted them while in the womb and that they still felt persecuted by after birth; in both cases their defensive oral and genital "orgies" were the same.

Psychotherapists regularly encounter placental images in their practice, yet, because they cannot conceive of fetal mental life in the womb, they ascribe these images to other sources. The most famous placental images are known to psychoanalysts as "the Isakower phenomenon," which often occurs when falling asleep. It consists of a sense that one is floating, with a "shadowy and undifferentiated, usually round [object] which gets nearer and larger."¹²⁵ The floating and the round object are not, as therapists have assumed, memories of the mother's breasts; breasts come in twos and are rarely found floating. Isakower himself described the image accurately as a "disc," lying on top of him, an object another person said was shaped like a "balloon." Other patients described it as follows:

I'm as small as a point – as if something heavy and large was lying on top of me – it doesn't crush me . . . I can draw in the lump as if it was dough – then I feel as if the whole thing was in my mouth . . . it's like a balloon . . . it's not unpleasant . . .¹²⁶

a small cloud . . . became larger and larger. It enveloped everything . . . Somebody said it was poisonous . . .¹²⁷

A large, black plastic container, which resembled a garbage bag . . . like a cow's udder . . .¹²⁸

Besides the regression involved in falling asleep or hallucinations on the analytic couch, overt placental images are also found by clinicians in deeply regressed patients, who often hallucinate blood-sucking monsters persecuting them. Most of these monster-phobias are extremely frightening, the patients fearing blood-sucking spiders or vampires or octopuses or Medusas or sphinxes.¹²⁹ It simply makes no sense to call these blood-sucking beasts and spiders "phallic mothers," as Freud and Abraham did,¹³⁰ particularly when they are accompanied by umbilical droplines.¹³¹ The vampire as a blood-drinking woman is another widespread fantasy; even when the vampire is Dracula, he is feminized by wearing a black satin cloak.¹³² Only the memory of the Nurturant Placenta can fully explain why

we drink Christ's blood, and only the memory of a Poisonous Placenta can explain why devils are blood-red. Often both images are present at the same time in psychotics, as in the following description by Wilhelm Reich of his schizophrenic patient's hallucination of drinking from a bloody, round table:

They were drinking gallons of blood in front of me. The devil is red because of that and he gets redder and redder and then the blood goes to the sun and makes it on fire. Jesus was dripping blood on the cross by drops and this was being swallowed then he was seated on the side of the devil and drinking too – the table was round oblong of flowing thick blood (no feet on it). Mother Mary was at the corner watching. She was white as a sheet – All her blood had been drained off and consumed. She saw her son drinking that and suffered.¹³³

Rosenfeld finds that images of being drained of blood are frequent in regressed patients, involving concrete “primitive psychotic body images” based on the notion that “the body contains nothing but liquids or blood and is enveloped by one or more arterial or venous walls . . . the experience of draining of blood and being emptied corresponds to the breakdown of this psychological image of a wall or membrane containing liquid or blood.”¹³⁴ A better image of the placenta cannot be imagined, though Rosenfeld didn't notice its uterine source. These patients often imagine that the analyst or others are literally sucking blood out of them. Mahler described a typical young patient of hers:

He was preoccupied with the fear of losing body substance, of being drained by his father and grandfather, with whom his body, he believed, formed a kind of communicating system of tubes. At night the father-grandfather part of the system drained him of the ‘body juices of youth.’ Survival depended on who was most successful in draining more life fluid from the others . . . He invented an elaborate heart machine which he could switch on and connect with his body's circulatory system so that he would never die.¹³⁵

The Fetal Dramas in History

However disguised, the Poisonous Placenta and the Suffering Fetus are the most important images of the fetal drama, and the restaging of their violent encounter is the central religious and political task of society. I suggest that this battle with the persecuting placental beast constitutes the ultimate source of war and social violence, traumas that must be restaged periodically because of the neurobiological imperatives of early brain development. The center of society is wherever the fetal drama is restaged – as at Delphi, it is often called the “navel of the world,” and is associated with World Tree worship.¹³⁶ The evolution of society occurs as this fetal drama moves from the tribe to the kingdom to the nation and is enacted with larger and larger numbers of people entrained by its sacrificial rituals.

Ancient societies used to believe that because of growing pollution the universe periodically threatened to dissolve in primordial waters, and unless a war was fought between a hero – an avenging fetus – and an asphyxiating sea-monster, the world would disappear.¹³⁷ The purpose of war and all other sacrificial blood-letting, says Frazer, was believed to be “to reinforce by a river of human blood the tide of life which might grow stagnant and stale in the veins of the dieties.”¹³⁸ We believe the same right up into modern times, with most nations repeating the cleansing war ritual four times a century for as far back as historical records have survived.¹³⁹

The Results of Early Trauma

The neurobiological effects of trauma and the compulsion to restage early traumatic violence and inflict it upon others and upon one's self are becoming fairly well understood through recent advances in neuroscience. Inescapable dangers and intolerable stresses subject the brain to massive secretions and subsequent depletions of a variety of neurotransmitters, including norepinephrine, dopamine and serotonin, which lead to hypervigilance, explosive anger and excessive sensitivity to similar events in the future, which are experienced as though they were as dangerous as the earlier incident.¹⁴⁰ In addition, the hormones that flood the brain to mobilize it in the face of threats, especially cortisol, have been found to be toxic to cells in the hippocampus, a different part of the brain that is the center of the neural network for consciousness, actually killing neurons and reducing the size of the hippocampus, making retrieval and therefore modification of early traumas nearly impossible.¹⁴¹ It is this process that constitutes "repression," which is really an inability to retrieve memories rather than an active forgetting. Thus, without the ability to remember and then modify early traumas through new experiences, the brain continues to interpret ordinary stressors as recurrences of traumatic events long after the original trauma has ceased.

Paranoid results are particularly true of the earliest traumas of fetal and infantile life. This is so because the hippocampus is quite immature until the third or fourth year of life, and therefore the early trauma is encoded in a separate *emotional memory system* centering in the amygdala, the center of conditioned fear in the brain, memories which have been described as being nearly "impervious to extinction."¹⁴² Early traumas, coded in thalamo-amygdalan-cortical early emotional memory system, record fearful feelings that remain powerful for life, long after the cognitive memories of the traumatic event itself are forgotten.¹⁴³ Infants, for instance, who experience premature births or eating disorders at birth often fear *all* new experiences in later life – indeed, fear all new arousals – as though a new job or a new lover represented the same threat to life as birth once did.¹⁴⁴ Thus Piontelli's fetus who licked her placenta and masturbated *in utero* continued compulsively to lick her mother's breast and masturbate after birth, warding off her earliest uterine dangers. It is also relevant to our hypothesis that early emotional traumas are intimately linked with social behavior that the amygdala – where these early trauma are recorded – is recognized as playing a central role in the social behavior of animals. For instance, removal of the amygdalae produces social isolates in most nonhuman primates, while having devastating consequences on their ability to mother, often resulting in death for their infants.¹⁴⁵

In addition, the continuing *low serotonin levels* produced by trauma decrease normal aggressive inhibitions (serotonin being the main soothing neurotransmitter) to such an extent that low serotonin has been reliably shown by extensive evidence to be central to social violence of both humans and other primates. Monkeys who have early separation traumas have low serotonin levels, and are "nasty, hostile, crazy," often killing their peers for no reason,¹⁴⁶ while traumatized children with low serotonin have more disruptive behavior¹⁴⁷ and compulsively restage their traumas in their play and with peers, both in order to maintain some control over its timing – anything to avoid re-experiencing their helplessness – and also because they can thereby identify with the aggressor.¹⁴⁸ Others repeat

their original traumas by self-injury, as did the patient who tried to commit suicide by putting his head beneath his car and causing it to crush his skull, saying God had told him “to kill myself to be reborn,” thus concretely restaging his earlier experience of having his head stuck in the birth passage.¹⁴⁹

Later traumas of childhood are then recorded in the same amygdalan early emotional memory network laid down by fetal traumas. Evidence for this is everywhere to be found, only we have so far been unfamiliar with its meaning and overlooked it. For instance, when a gunman came into Cleveland Elementary School in 1989 and fired wave after wave of bullets at children in the playground, killing many of them, the trauma was “seared into the children’s memory . . . Whenever we hear an ambulance on its way to the rest home down the street, everything halts . . . The kids all listen to see if it will stop here or go on,” said one teacher.¹⁵⁰ But the childhood trauma also stirred up the fetal level of fear, that of the Poisonous Placenta: “For several weeks many children were terrified of the mirrors in the restrooms; a rumor swept the school that ‘Bloody Virgin Mary,’ some kind of fantasized monster, lurked there.”¹⁵¹

History as a Homeostatic Mechanism

The restaging of early trauma, predicated upon damaged neural networks, is thus a homeostatic mechanism of the brain, achieved in the social sphere by nations through wars, economic fluctuations and social violence. Each of us constructs a separate neural network for these early traumas and their defenses, a dissociated, organized personality system that stores, defends against and elaborates these early fetal and infantile traumas as we grow up. The specifically *fetal* basis of the organization of these traumas is obvious as we become socialized. Children’s playgrounds are full of fetal objects, from swings that repeat amniotic rocking to birth tunnels and slides – all used by children who must *remember* their fetal life, consciously or unconsciously, since they generally have not as yet been told about where babies grow. Infants cling to pillows and Teddy Bears and watch television programs like “The Care Bears” that feature baby bears with rainbow umbilicuses coming out of their tummies and features an evil “Dr. Coldheart” who tries to push black, poisonous wastes into their rainbow-umbilicuses. Growing children organize fetal games, hitting, kicking and throwing around placental membranes (one, the football, even egg-shaped, that we rebirth through our legs), reenacting birth when passing them through upright legs or vaginal hoops. We likewise relive our birth when we celebrate Christmas as a rebirth ritual, complete with a placental tree and a Santa Claus – a chubby blood-red fetus going down his birth chimney attached to his placental bag – not to mention such thrills as bungee-jumping our rebirth at the end of a long umbilicus or throwing ourselves into mosh pits to be reborn at rock concerts.¹⁵² Similarly, all religions contain at their center the Suffering Fetus and its Poisonous Placenta, whether it is the dismembered, suffering Osiris or the bleeding Christ on his placental cross or the dead Elvis, at whose grave a mass veneration takes place beneath a giant placental heart and a soundtrack of him singing the song “Hurt.”¹⁵³ The central religious aim of reuniting with the placenta can even be seen in the origin of the word religion – “re-ligare,” that is, “to unite again.”

History as a homeostatic mechanism needed to regulate the emotional disfunctions of the brain is a central concept of my psychogenic theory. I consider it impossible to understand historical events without an understanding of modern neurobiology. For instance, the fact that damaged amygdala function is found in paranoid schizophrenics¹⁵⁴ leads one to question if the paranoid mood of nations before and during wars may be related to real, measurable diminished amygdalan functioning which, combined with reduced serotonin levels and other neurotransmitter imbalances, appear to cause our periodic searches for enemies. The leader's function is, in this view, similar to that of a psychiatrist administering prescriptions for wars and depressions as psychological "uppers" and "downers," designed to restore homeostatic equilibrium in the brains of a nation ravaged by surging hormones and neurotransmitters.

The Leader as Phantom Placenta

Because the fetus's umbilicus is like a pulsing fifth limb and because the placenta is the fetus's first love object, I believe we so deeply experience the loss of our umbilicus/placenta that we walk around feeling we have still a "phantom placenta" – the same phenomenon as the "phantom limb" experienced by amputees¹⁵⁵ – and are constantly looking for a leader or a flag or a god to serve as its substitute. Just as gods are imagined as beings "from whom all blessings flow," leaders are seen as beings "from whom all power flows." In ancient Egypt, people saved the actual placenta of the Pharaoh and put it on a pole which they carried into battle; it was the first flag in history.¹⁵⁶ We still ritually worship our placental flag – with its red arteries and blue veins at the end of a umbilical flagpole – in public gatherings. In Baganda, they put the king's placenta on a throne, pray to it and receive messages from it through their priests.¹⁵⁷ We do the same when we look to the sky for UFOs – high-tech placental disks – that we hope might have messages for us.¹⁵⁸ Lawson has even experimentally correlated UFO abduction scenarios with the actual birth experiences of the abducted, those who had normal vaginal births imagining tunnel experiences during abduction while those who had caesarean births experienced being yanked up by the UFO without the tunnel images.¹⁵⁹



Fig. 5. The leader as a poison container

The yearning for a phantom placenta – a “poison container” for our dangerous emotions – to be our leader, and the search for a Poisonous Placenta to be our enemy with whom we can fight, are the central tasks of all social organizations, prior to any utility they may have. Leaders are not mothers or fathers, and they are not always idealized. They are *poison containers* for our feelings. We ascribe to them all kinds of magical placental significances, including the power to cleanse our emotions, which are felt to be like polluted blood in accordance with their fetal origin. When the leader appears unable to handle these emotions, when our progress in life seems to involve too much independence and we re-experience our early abandonment by our placenta, we begin to look for enemies to repeat our traumas upon.¹⁶⁰

War as a Sacrificial Ritual

War, then, is the final chapter of our restagings of early traumas that we practice in so many of our social activities, from the 18 000 murders the average child sees on TV to the games we play in which we practice the mental mechanisms necessary to turn others into “enemies” – the truth reflected in the saying that “British wars are won on the Rugby fields.” It is not easy to get soldiers to inflict our traumas upon others in wars – only perhaps two percent enjoy killing enemies¹⁶¹ – so we must train them from childhood how to switch into the group trance state necessary to produce sacrificial violence.

That war is sacrificial, not utilitarian, and aims at reducing progress and prosperity is shown by the finding that major wars almost always occur after an economic upswing. Not only are there many more wars after periods of prosperity, but they are much longer and bigger, “six to twenty times bigger as indicated by battle fatalities.”¹⁶² Wars sacrifice our youth – symbols of our potency – because it is our youthful, independent self that we blame for getting us into trouble in the first place. Most wars start “for the sake of peace” because we really believe we can have *inner peace* if we don’t progress and individuate, if we sacrifice our striving self. Only if we can *stop growing* can we protect ourselves from our most horrible fear – the repetition of our early traumas.

War, then, is a ritual sacrifice that is staged as a four-act drama:

1. *We begin to reexperience our early traumas when we feel too much individuation* – wars are usually fought after a period of peace, prosperity and social progress produced by a minority who have had better childrearing, a progress which is experienced as threatening by the majority whose childrearing is so traumatic that too much growth and independence produces fears of a persecutory mother-figure, a defensive merging with the engulfing mother and then fears by males of having been turned into a female (homosexual dread).¹⁶³
2. *We deify a leader who is a poison container into whom we can pump our frightening feelings, our “bad blood”* – you can see this blood-transfer concretely when Nazis stiffly put up their arms like an umbilicus and project their bad feelings – their “bad blood” – into Hitler for cleansing, while he catches their feelings with an open palm, standing under a swastika (the ancient symbol of the placenta) imprinted upon a blood-red flag; the hypermasculine leader becoming

- society's protector by finding an enemy to persecute rather than the nation re-experiencing its early horrors.
3. *We restage our early helplessness, humiliation and paranoia with another nation who needs to act out their violence* – minor incidents are now experienced as so humiliating that even a holocaust can be worth their revenge – as President Kennedy said as he considered whether to risk nuclear war in the Cuban Missile Crisis, “If Krushchev wants to rub my nose in the dirt, it’s all over.”¹⁶⁴
 4. *We go to war by restaging our terrors in the social sphere, inflicting our traumas upon our most vital selves, our youth* – wars are not, as often said, “outlets for human aggression” – in fact, nations usually feel calm as they go to war, just as wife-beating husbands become calm and righteous as they beat up their spouses for childhood humiliations;¹⁶⁵ nations, too, experience a joyous manic strength as they fight to destroy the poisonous placental enemy and provide an “antidote for the poisons of idleness and . . . directionless depression,” as John Steinbeck characterized America’s entrance into WWII.¹⁶⁶

These four stages can be monitored through fantasy analysis of media images. Whether they can also be confirmed by changes in neurobiological markers – for instance, whether nations prior to wars experience measureable surges in adrenaline and noradrenaline stress hormones that are initially experienced during birth – is yet to be investigated.

The imagery of war as a rebirth experience is ubiquitous. Consider just the birth imagery surrounding the nuclear bomb. When Ernest Lawrence telegraphed to his fellow physicists that the bomb was ready to test, his cable read, “Congratulations to the new parents. Can hardly wait to see the new arrival.”¹⁶⁷ When the bomb was exploded at Los Alamos, a journalist wrote, “One felt as though he had been privileged to witness the Birth of the World . . . the first cry of the newborn world.”¹⁶⁸ When President Truman met with world leaders at Postdam just before dropping the bomb on Japan, General Grove cabled him reporting that its second test was successful: “Doctor has just returned most enthusiastic and confident that The Little Boy is as husky as his big brother . . . I could have heard his screams from here . . .”¹⁶⁹ When the Hiroshima bomb, named “Little Boy,” was dropped from the belly of a plane named after the pilot’s mother, General Groves cabled Truman, “The baby was born.” Even the survivors of the Hiroshima explosion referred to the bomb as “the original child.”¹⁷⁰ Similarly, when the first hydrogen bomb, termed “Teller’s baby,” was exploded, Edward Teller’s telegram read, “It’s a boy.”¹⁷¹ Obviously nukes are felt to be *powerful babies* – perfect avenging fetuses. With them, our revenge for – and restaging of – our early traumas can now be infinite. War finally can destroy every “bad mother” on earth. One can see why Truman, hearing that the world’s first nuclear bomb had just been dropped, exclaimed, “*This is the greatest thing in history!*”¹⁷²

Internal Social Sacrifices as Self-Destructive Rituals

Just as effective as sacrificing mothers and children in wars is the *internal*, institutionalized wars against mothers and children that nations conduct as social policy. Economic recessions, for instance, hurt and kill more mothers and children as sacrificial victims than most wars.¹⁷³ As in foreign wars (external sacrifices), pol-

icy wars against mothers and children (internal sacrifices) are regularly conducted during periods of peace and prosperity. These internal wars parallel the regressive images we have been discussing; for instance, as William Joseph found in studying the 1929 and 1987 stock market crashes, images of dangerous women proliferated in the media, indicating that the time for internal sacrifice was near.¹⁷⁴

In America today, after a period of peace and prosperity – and particularly after the demise of The Evil Empire, so that we lack a real enemy whom we can blame for our emotional disorders – dangerous women images have again multiplied in the media, we look for enemies inside rather than abroad, and reductions in food, welfare, education and health care for women and children have become the national goal of the mid-90s. After being obsessed with watching for an entire year the trial of someone accused of being a mother-murderer, O. J. Simpson, it is no coincidence that Americans were then united in wanting to cut welfare for mothers and their children, acting out our own mother-murder scenario. Indeed, the entire Western world during the mid-90s began imagining that the Welfare State – imagined as a dangerous, engulfing Mommy – was an enemy that had to be destroyed. That women and children were the real enemies of the “G.O.P. Revolution” was not denied. As Newt Gingrich put it, “The Welfare State has created the moral decay of the world. We have barbarity after barbarity . . . brutality after brutality. And we shake our heads and say, ‘Well, what’s going wrong?’ What’s going wrong is a welfare system which subsidized people for doing nothing . . . And then we end up with the final culmination of a drug-addicted underclass with no sense of humanity . . .”¹⁷⁵ Simpson and Gingrich, both our delegates, representing the Hero as mother-murderer, may be distanced from us and somehow uncanny, but nonetheless carry out our unconscious murderous group-fantasies all the same.

That America has arranged to have more people on welfare – Gingrich’s dreaded “underclass” – than any other industrialized country is a clue to why nations need poor people to punish for their prosperity. Since it is prosperity and threats of intolerable individuation that trigger the restaging of trauma, it makes psychohistorical sense that America today – the most prosperous and freest nation of any in history – has more women and children living in poverty than any other industrialized nation. Nor is it coincidental that the world’s wealthiest country has the highest child homicide rate¹⁷⁶ and the most newborn boys circumcised,¹⁷⁷ both indices of society’s hostility towards children.

Economic success gives people increased opportunities for individuation; national prosperity is therefore very dangerous (“mommy will *kill* me when she finds out how much I’m selfishly enjoying myself.”) Periods of prosperity therefore always require children as sacrificial victims, whether in Hebrew or Aztec ritual sacrifice of children yesterday or in today’s economic cycles. In America’s current good economic times, legislators, with the support of the majority of citizens, are religiously cutting all kinds of aid to women and children. In New York City, 39 percent of the children are on welfare; in Chicago, 46 percent, in Detroit, 67 percent, and anti-welfare legislation is everywhere being passed.¹⁷⁸ With the largest Gross Domestic Product of any nation at any time in history, current American legislation anticipates cutting nutrition assistance for 14 million children, Social Security for 750 000 disabled children, Medicaid for 4 million children, and cuts in

school lunches, Head Start, child protection, education, child health care and aid to homeless children, what the president of the Children's Defense Fund describes as "an unbelievable budget massacre of the weakest."¹⁷⁹

Periods of prosperity can be anxiety-producing. *The Atlantic Monthly* cover of October 1995 that showed a depressed Uncle Sam with the headline "If the Economy Is Up, Why Is America Down?" could more accurately have been worded, "Because the Economy Is Up, America Is Feeling Down."¹⁸⁰ Cutting funds for Head Start is necessary to punish the striving child in ourselves. Sen. Patrick Moynihan, calling the legislation "an obscene act of social regression that visits upon children the wrath of an electorate," predicted the cuts in Aid to Families with Dependent Children alone will put millions of children on the street.¹⁸¹ "It is beyond imagining that we will do this," Moynihan said. "In the middle of the Great Depression, we provided a Federal guarantee of some provision for children, dependent children. In the middle of the roaring 90's, we're taking it away."¹⁸² But scapegoating children in prosperous times isn't paradoxical; it's a psychohistorical regularity.



Fig. 6. Government as devouring vampires

That the group-fantasies behind the cuts in benefits for women and children are similar to the blood-sucking fantasies discussed above can be seen in any of the flood of vampire movies featuring bloodthirsty mother figures or in the fantasies of those in Congress and the media who claim welfare recipients are "bleeding us dry" and "sucking the blood out of the citizenry [like] a giant leech" – punishment for which is for the government to "suck the blood" out of welfare recipients (Fig. 6).¹⁸³ As Presidential candidate Sen. Phil Gramm said, "If we continue to pay mothers who have illegitimate children, the country will soon have more illegitimate than legitimate children," all feeding off of *him*, a scenario that is his projection of the needy "baby Phil" demanding "MORE!" Bad, sinful babies are seen as deserving to be punished as scapegoats for the country's guilty prosperity. In fact, during every period of prosperity and peace in American history (such as in the 1850s and the 1890s) there has been legislation by the newly wealthy to stop welfare for what they called "the undeserving poor." Anti-welfare legislation, now as then, has nothing to do with saving money; in fact, the cuts would cost a hundred times more than their savings through increases in drug addiction, theft

and murder. Each time legislators condemn “moral decay” and “a breakdown in family values” – code words for fear of freedom – they only mean that in fantasy social collapse can be avoided by “ending dependency” – code words for punishing poor children, symbols of their own dependency needs.

That punishing children, not saving money, is the aim of the legislation becomes clear when the effects of each cutback is actually costed out. For instance, the cuts in the Federal Supplemental Security Income program not only reduce allowances for poor crippled children by 25 percent, it also throws hundreds of thousands of disabled children off the program; this means, as one commentator put it,

Their families are so marginal economically that the additional cost of caring for a child with spina bifida or profound mental retardation is literally unbearable. So the kids will get dumped into state homes, thus costing the taxpayers significantly more than the allowances that enable their families to care for them. Not only cruel, but dumb as well.¹⁸⁴

But legislators are not dumb at all, only cruel, purposely cruel, for the sake of all of us. Which is why we elect them to “balance the budget,” that is, to conduct a restaging of all the early cruelties done to us, a warding off of the punishment we expect for our prosperity, inflicting our early terrors upon society’s scapegoats, helpless, vulnerable children. Like war, the current sacrifice of women and children is promised to result in a magical “rebirth of national vitality” that is well worth the difficult “labor pains” of passing the new welfare legislation.¹⁸⁵

Ending Child Abuse

Although these conclusions about the relative permanence of early trauma and its inevitable restaging in war, social violence and economic injustice admittedly appear to be discouraging, an awareness of the source of human violence can actually be enormously hopeful. For if early traumas rather than “human nature” are the cause of our violence, then efforts to radically reducing these traumas can be reasonably expected to reduce war and social domination. If, rather than continuing the millennia-old historical cycle of traumatized adults inflicting their inner terrors upon their children, we try *kindness* instead, effectively *helping* mothers and children rather than burdening, abandoning or punishing them, we will soon be able to end our need to reenact our traumatic memories on the social stage. Let me describe why I believe this radical reduction of violence is possible in our society today.

The studies that I cited earlier on maternal rejection included solid statistical evidence showing that when babies are unwanted by their mothers and have birth complications they will, when they become teenagers, commit four times the number of violent crimes as those who are wanted. If this four-to-one ratio holds for most restagings of early trauma, then reducing this trauma to just a small fraction of what it is today can be expected to save almost 75 percent of the cost of social violence. I estimate the yearly cost of American social violence, external and internal sacrifices combined, to be over \$ 1 trillion per annum, adding up the cost of most of the military, the interest on the debt, which is all for recent wars, most of the criminal justice system, the loss of life and property in crime, and so on.

The savings, then, would be 75 percent of \$ 1 trillion, or \$ 750 billion per annum. The only question is: How is it possible to eliminate most early trauma and child abuse, and what would it cost to do this?

The answer to this crucial question is no longer merely theoretical. A decade ago, a psychohistorian, Robert McFarland, M.D., reasoned that if my psychogenic theory of history is right, he should be able to improve both the health and the wealth of his community in Boulder, Colorado by reaching out to every new mother *before* her baby was born and help her to welcome and then parent her child, a task society usually believes does not require help from the community. An entire issue of our *Journal of Psychohistory*, entitled "Ending Child Abuse," was devoted to the results of McFarland's experiment – which has since been replicated in Hawaii¹⁸⁶ – describing such activities of his center as outreach to new mothers, prenatal services, parenting discussion groups, baby massage courses, single mother help, fathering courses, puppet shows, lectures on how to discipline without hitting, psychotherapy referrals and so on. All these are provided on a shoestring budget, mainly with volunteer help, using local community resources. By providing this pre-natal and early childhood help in a Community Parenting Center, child abuse – as measured by physical and sexual abuse reports, hospital records of injuries, and followup studies – has been drastically reduced in Boulder County.¹⁸⁷ No new mother or father *wants* to reject or abuse their baby, the formula for baby battering being, "I had my baby to give me the love I never got; but instead she cried and sounded like my mother yelling at me, so I hit her." What McFarland and his associates found was that providing new parents with help and hope simply allowed their underlying affection to replace the abuse that comes from fear, abandonment and despair.

The cost? Since McFarland stresses local community resources and volunteer labor, very little. Even when he has expanded the centers to include day care facilities, he expects a local sales tax of one-tenth of one percent to be sufficient to run the entire enterprise, a very small "children's tax" that would represent the community's commitment to invest in their children's future. A similar sales tax in every community in the nation would produce .1 percent times \$ 5 trillion in yearly sales in America or \$ 5 billion a year in tax revenues, about the cost of two of the B2 bombers the military is now building that they admit are not needed.

The savings, then, 15 to 20 years from now, if we should decide to save our children from early traumas, would be \$ 750 billion per year saved, less \$ 5 billion invested, or \$ 745 billion net savings, enough to end poverty in America. This does not even consider the additional trillions we currently spend on hard-core drugs, gambling, smoking and other wholly neurotic adult activities needed to handle the pain of early traumas, activities which are likely to wither away without their traumatic underpinnings.

Investing in the Real Wealth of Nations

We regularly decide to invest hundreds of billions of dollars in technology hoping for future benefits, under the notion that material investments invariably produce prosperity. But Adam Smith was not radical enough when he said the wealth of nations lay in its investment in technology. The *real* wealth of nations is its chil-

dren, since every scientific and technological revolution has been preceded by a childrearing revolution. Investing in the mental and physical health of children by preventing damage to their brains from early traumatic experiences must accompany investments in material technologies, or else any resulting prosperity will continue to be destroyed in wars and social violence. Few people realize that the cost of eliminating poverty entirely for all children in America is only 39 billion dollars, one-half of one percent of our gross domestic product, or about the same amount as we waste financing the CIA.¹⁸⁸ A healthful, loving childhood without trauma isn't expensive; it's only the most important goal of mankind.

In the past two prosperous decades, we have purposely brought about through our social policies an *increase* in the percentage of children living under poverty in America by one-third, from 15 percent to 20 percent, thereby making life in America far more violent than it had been when we were much less prosperous. The connections between early trauma and violence are everywhere, yet we continue to insist on policies that are guaranteed to increase social violence and undo the progress and prosperity we work so hard to achieve.

It may seem reductionist to conclude that all human destructiveness is the restaging of early traumas and that what we must do if we wish to put an end to war and social violence is teach adults how to stop abusing and neglecting and to begin respecting and enjoying their children, but I believe this is precisely what our best scientific evidence shows.

Our task, then, is clear and our resources sufficient to change our violent society in the coming decades. All it takes now is the will to begin.

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