



Conscious Life presents

Children of Parents with Mental Illness

Guest: Dr Christian Kloss

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[00:00:09] Meagen Gibson

Welcome to this interview. I'm Meagen Gibson, your conference co-host. Today I'm speaking with author and corporate mental health consultant Christian Kloss.

He has a PhD in Sociology and wrote his autobiography, *Children of Parents with Mental Illness*, after his experience with his parents. Christian, thank you so much for being with us today.

I want to start by asking you, what are the impacts of growing up in a household with mentally ill parents?

Dr Christian Kloss

First of all, I would say in a nutshell, to give a general idea, it affects everything. Everything. This is because one of the most important things as a human being, I believe, is to make decisions. It's probably not what a lot of people thought I would say.

What I mean by this is, making decisions is only possible if you know what you want. Now, what you want is closely connected to your feelings because usually it's your guts telling you, this is what I like.

I'm not only talking about wanting in terms of rationally things that would be good to have, but actually what you like. Decisions like, for example, what course of study will I take? What partner do I want? What would I like as a life to live? These are things that you need to answer yourself.

You can only do this by saying, okay, there's a very strong inner convincing part that tells me that this is it, what I want. Okay, this you can only do in return if you're connected with yourself. If you're under a lot of stress, you're not able to do that.

This is what usually I would say children with mentally ill parents are in, they're in a situation of a lot of stress. An example for this stressful situation would be that my mother made a lot of noise during the night. She also did that during the day, but that was not so important.

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You can imagine how it would be to grow up as a kid, being in your adolescence and everything. There's somebody making noise outside your room, but also coming inside your room, opening the door, crying and screaming, saying things like, "they want to kill us. Make sure you got all your money," and stuff like this.

That would be a traumatic experience, which took ten years to last, or lasted ten years, because I was living with my mother for ten years. My brother was most of the time at our grandfather's for reasons, because of his school performance, and our grandfather wanted to help him.

When you're in a situation like this, and you can test it if you want to deprive yourself from sleep, like for two nights, and then make decisions. You will probably run into things like, I don't even know what I want to eat, because you just want to sleep.

Or in my case, if there was something that I very deeply wanted, that was for the world to just stop for a second, so that I could pause. That was the only real wish I had at that time.

If you're grown up in a situation like this, you're losing contact with yourself. That then leads to things like, oh, I'm going to study Sociology. I'm not saying that it was an utterly wrong decision. I had some hints and some introspection, and a lot of information about this, but I'm using these words now deliberately because they're all closely connected to cognitive things, to intellectual decision making.

It's totally different from making a decision from your heart, or from your gut. I don't know if this is what Daniel Kahneman is talking about with his, *Thinking Fast and Slow*. You know your body, or your soul, or your gut already knows what you actually want. Then you try to rationalize it, if you're talking about it, but you already actually knew it.

But you have to have the connection to these areas of yourself, and you're losing it for many reasons, one being the shear stress. I would say stress is probably the best word to sum it up, but I'm getting into details of it because it means very different things to many people.

What's part of the stress is taking over-responsibilities that you're not supposed to do. I think the word in English is parentification. In other words, you as a kid become the parent.

This leads to another aspect that I usually enter when I'm giving my workshops or talk. I usually pose the questions, confront the audience with a question, what they think what is an effect of a child of parents with mental illness?

Some of them, they're usually like 50 to 100 people or something in the room, and some of them always says, it's a sure bet, "yeah, they grow up faster, they become adults earlier." Then I'm saying it's just the opposite, it's the exact opposite.

Why is that? On the outside looking at children with parents that have a mental illness, they usually take over a lot of responsibilities that parents do. They go grocery shopping, they wash the dishes, they cook, they might clean the laundry, and everything.

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I didn't do many of these things, I want to point that out just for clarification, because my mother was still good in those departments, but I know a lot of other COPMI, COPMI being the abbreviation Children Of Parents with Mental Illness, that did all this.

The point is you're doing these things, but that doesn't mean that you're ready for it. Or to put it very differently, I believe that for me, the definition of maturity, of being grown up, is if you are able to take care of yourself. I was just looking for the word in English. In German it would be für sich selber sorgen, and in English, it's taking care of yourself.

Taking care does not mean, because the German term usually makes people think, yes, it's about money to support yourself financially. That's not it, or not everything. Because taking care of yourself in a mature adult way also means to know, what do I want? Where are my boundaries? And can I take care of myself to fulfill the needs that have to be met?

Not like the needs, okay, I think I need a yacht or a villa, that's not what I'm talking about. I'm talking about, I need personal contact, I need somebody to talk to right now. I need, being loved. I need this stressful situation at work to stop, or whatever.

These are things that are again, closely connected with that aspect of, are you in touch with yourself? Because if you're not in touch with yourself, you cannot tell, what do I actually want? In terms of like, in terms of need.

This then being at the core of your personality, of your character, has an effect on everything. Everything in the first place meaning any relation that you're entering.

That could be the guy at the counter at the liquor store. You notice that you're there, and are you actually able to connect with that person on the other end? Of course you're not forming a deep connection there, but are you able to read the room? This is actually what people mean, I would say, when they say, read the room, it's like sensing what's going on, and if you're not connected with yourself, your senses are just gone out of the window.

Meagen Gibson

You said so many things that I want to come back to again, you were talking about sleep deprivation, if we want to, we could talk about biology. We did a sleep conference about a year ago, and it was so pivotal how much sleep is the thing we start with in wellness.

Let's ask questions about sleep, and then figure everything else out after that, because if you're not sleeping, you're not well, as you just said. There's sleep and biology, then the impacts of stress on biology, and then how your brain actually makes sense of all of that.

I'm really connecting with how you were speaking about it, and the effects of it in adulthood, when we were talking in a different conversation, about identity, and sense of self, and what you actually need and want. These are all the impacts people don't think about when they think about children of parents with mental illness.

[00:10:21] Dr Christian Kloss

Yeah. Did I miss the question? You want me to...

Meagen Gibson

No, you didn't, I was literally just talking, here comes the question. Let me know if you agree, one of the things that we hear a lot about when people have adverse experiences, especially as children, is how resilient children are.

It's a word that makes me bristle a little bit now that I understand a lot more about childhood development, because resiliency can be formed in incredibly stressful and maladaptive situations, like growing up with mentally ill parents. But what is the cost?

For me the cost has always been abandoning yourself. I think that's what I'm hearing you say. It's like when you're trying to establish that sense of identity, the cost of having to abandon that part of your development as a child, is that you don't have that sense of self. You're abandoning yourself in favor of all these other things that you have to do to pretend you're an adult.

Dr Christian Kloss

Yeah, the resilience issue is something else than abandonment. I believe that, if you don't mind, I would go into the resilience aspect a little bit more, because that's a word that gets me angry to some extent. I want to start off with my hardcore bashing the resilience research bubble, if I may.

Because from a German perspective, which is my realm of experience mostly. I've been to a lot of talks where other people also gave speeches, and some of them were doctors or researchers in that field of COPMI, and what they're experiencing. It struck me at one point that there definitely was a strong emphasis on resilience and research on that one.

They were trying to figure out what the factors are, intelligence, and creativity, and blah, blah, blah. I figured, okay, I'm ticking all these boxes, or a lot of them. Apparently, I would say that my brain capacity might have helped me to get out of this, which is another side note that I wanted to say earlier. In terms of that when you're making decisions, but you're not in contact with yourself, all that's left is your brain.

You're looking at the outside of what's happening, and then you're trying to derive from these informations, okay, this is probably what I should do.

You know when it comes to very individual decisions, like a course of study or something, only you can answer that. Only you personally can say from all of the choices in the world that I'm having here, and there are a lot of them, it's a lot. This is why nobody can help you there, you need to figure that out yourself.

You can only do it with your emotions, it's an emotional decision more than it is anything else. If you just live with your brain, that's okay, but that might only be the straw that helps you getting out of it very slowly, while others are progressing. That's what really upset me, because I thought, I found, I felt even, I still have some connection with my feelings, otherwise I would have had a psychosis already. That's basically one of the definitions, I think.

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Why am I getting into this so much when I'm talking about resilience? Because your ability to understand things, and to observe stuff, and to analyze, and from that matter then derive some answers to what should I do? Is helping.

But when I'm looking at the research side, I sometimes found this entire focusing on resilience. Doesn't that seem to be a little bit more like that the support system is basically shifting away the responsibility again to the kids?

If you're not resilient enough, then it's partly your fault, that's how I felt. I mean, I'm not saying that they didn't care at all. I just thought, why if you're talking about resilience, you're actually talking about something that you need to be resilient for. Is it for or against? I'm not really sure.

So there's some impact coming and you need to be resilient against this impact. Okay, now why isn't the very first thing that you're thinking of, taking away the impact? Because if you take away the impact, resilience is not so much needed anymore.

In other words, and this is a very delicate issue, very delicate, I'm pointing this out so deliberately, because I had a lot of experiences with this issue, touching very vulnerable and sensitive points with people.

Okay, and that having said, my bottom line would be get the kid out of the family. And you can already sense why people are going crazy, "what take away children from their parents and everything?" This is not what I said, I said, take the kid out of the family, in terms of taking the kid out of that impact area.

Every somehow enlightened therapist, or social worker, educator, or school teacher will immediately understand, of course, you have to look into every individual case closely and say, okay, what are we looking at? How can we reduce the impact here? And what is needed to make that kid feel better, and have less of these impacts that hit him or her?

This is very hard to come across with, because people are immediately in this entire thing, in Germany even more so because that has partly to do with the Nazi regime. There's this very high mother idealized picture.

This is all in a nutshell, I might not be exact on the point here, but I'm just trying to get the idea across that people are very quickly with, "oh, it's the state coming in and taking kids out by force."

That's not what I'm saying. I'm saying the perspective is to reduce the impact, and that could lead to partly taking the kid, or giving the kid the opportunity, to put it like this, I'm sorry, I'm not so delicate with words here because English is not my first language.

But the point is, what can we do to reduce those impacts so that the effects are lesser? And this does not happen, it's not happening in the discussion right now, at least not in Germany. I would say pretty much for the rest of the world. I haven't seen any efforts in terms of, okay, how can we figure out to, for example, establish other areas where the kid could go to, like foster families?

I know that the foster family situation, that would actually be the best situation. Why? Because it's the closest you can get to a family.

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Just from that perspective, it is the one solution with the highest stakes that have to be met because, sure, you need to screen those people. You need to constantly check-in. It's a very low ratio of people being taken care of, because one family, usually one kid.

It's not like one family can take care of ten kids, which you would have in other programs, for example. But these programs, on the other hand, are not that effective for that matter.

So the resilience discussion, I can totally understand why it's important. I also think that it needs to be led, and that we need the insights from this. On the other hand, we also need to think about the question of, how can we protect the kids from those impacts?

Because when I was sleeping, or trying to sleep at night, there was nothing that could help me other than being away from it. Because my mother, that's for certain, she would not have changed, not at all. She had not been diagnosed for very long, that had to do with our grandparents, because their war generation had a very insecure relation to all issues psychologically related, not to speak of psychosis.

They believed also, my grandfather definitely did, he said things like, "yeah, maybe she will get well again." Then a couple of years later, or many years later, I met a doctor who said, yeah, "we can still treat schizophrenia, but the longer people are in that, it's more difficult to get an effect with pharmaceuticals."

By this saying, I'm not saying that, yeah, the pill is the solution, I'm not. And thank God we're further than that when people were like reflexively thinking, "okay, you got some mental issue, here's a pill." That's not how it works either.

But if you don't interfere early enough, then nothing happens with the mental ill person. My mother was in pain, basically she thought she was going to be killed, and being haunted. I think that's pretty much for that.

Meagen Gibson

No, I love what you said, and I also love that you validate the fact that your mother was also in pain. That she was also suffering a lot, that's not to be dismissed. That you just explicitly stated it.

And that there is no perfect solution, we've got systems, there's problems with the systems of protection all over the world, for that matter. They were all founded and initiated with good intention, and are vastly, drastically imperfect systems, unfortunately.

You mentioned, I think what you were talking about is the stigma. And while stigma has improved, it's certainly still a barrier in most communities, between those who need help, and those who get help.

I'm thinking about children, especially in the school system. I know I had an experience where when we were dealing with this issue in my house, this was the thing we weren't allowed to talk about because of shame and stigma. It's not, "please go to school and tell your teachers that this is happening at home, and that you might need a little bit of extra help."

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Now, I know if that was happening in my household now, the way that I've broken that cycle is, if something's happening in our household, I immediately let my kids teachers know, "hey, handle this one with gentle hands today, because there's a little bit going on at the house," I don't have to divulge. It's just like, "this one's going to need a little TLC today."

But we've made a lot of strides. But in a lot of communities, depending on your culture, depending on your race, depending on your ethnicity especially, it's going to still carry a lot of stigma, and that's going to be one of the blockers in trying to protect and support kids, right?

Dr Christian Kloss

Yeah, that's a very interesting point, because if I may connect the whole resilience issue, and the relief from the impact with the stigma issue. Because kids themselves, COPMI themselves, are a threshold in those solutions because of the stigma.

Now, what do I mean by this? Basically, the bottom line would be, they are not reaching out because of being afraid of being stigmatized. Stigma and taboo are very closely related. If you're not talking about things, you're basically prolonging the stigma, or maybe even reproducing it.

The problem is if you're having kids that are aware of what's going on, but they're also aware of the social impact it might have on them, in terms of like, "okay, this is the kid with the mentally ill mother." This was basically my feeling of how I perceived the world. I was living there in that small community, I grew up in a city with like 12,000 people.

I cannot put my finger on it very much because memory also gets very blurred when you're under stress a lot. It's like taking a really important exam, and then you've been asked, how was it? And you can hardly tell what happened because you're so under stress.

But there's a strong part of me that says yeah, actually, I feel like I grew up there with this notion, or with this impression, that when I was out on the street, behind the curtains of all the other buildings, the people were looking, and watching, and pointing at me like, "okay, this is the guy with the mentally ill mother." They probably didn't, but that's not the point. The point is that I felt it, and it was real enough for me to put me under stress there.

Meagen Gibson

And to incentivize you not to draw any more attention to yourself. If you already felt like that was the perception people had, you weren't going to say, "oh, by the way, I need help. Things are bad at home."

Dr Christian Kloss

Good point, I definitely did not do it in that sense, and I believe that there are many who don't do anything. They're really closing up, and not letting anybody in, and just suffer in silence.

On my end it was probably both. I leaned to the helping side, not in a sense of going to the neighbors, but I was talking a lot with friends about this. Also, the reason that I, for example,

founded the first self-helping group for grown-up COPMI in southern Germany, that's been there for a couple of years. Then Frankfurt, which was 100 km away, was then the next one. And Nuremberg, another 100 km direction, or even more, was the other group that was then founded.

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I also founded an association. I was very outspoken. But let me be clear, I didn't do this because I was so philanthropic, to be honest I did it because there was so much suffering on my end that I wanted a solution. It was basically pain driven.

It was not because I wanted the greater good or anything. I wanted answers for myself and I couldn't get them. I thought I would get them from other COPMI, and I thought I would get them from reaching out to professionals, and so forth.

Just finding in the self-helping group, I was the one who had already had at least five years of psychotherapy, while nobody else, of all the other members, had ever gone to psychotherapy. It led one guy to start it, though. There was an impact on that one.

What I want to say is that I didn't get these answers that I was looking for. Partly because the others didn't have these experiences yet that I had, at the same time they were all struggling with their own problems. The stigmatization, and the fear of being stigmatized, I'm pretty sure holds COPMI back from being more active and outreaching.

Which makes the whole situation even worse, because you already have a very terrible situation there. And then those people who are involved are not doing much to get out of it. In fact, they're prolonging it and making it worse.

Meagen Gibson

Absolutely. And just to give anybody credit, we're wired for connection. I've heard 1000 experts say this, we're wired for connection. You can't fault somebody for wanting to stay deeply connected to their family.

It's like the colloquialism, the devil you know, versus the devil you don't. We're in our family systems, and if we're a child who's experiencing a parent with mental illness, we know what that's like, that's a familiar chaos. That's predictable chaos, if chaos could be predictable.

Then to consider what life might look like, to consider a greater unknown, is almost an impossible thing to assess for a child, in a child's brain.

Dr Christian Kloss

Yeah. I was just taking a note while you were saying this because I think you wanted to go also into the issue of identity.

Meagen Gibson

Yeah, we've danced around it just a little bit. But as an adult, when you're coming into your own, around you get into psychotherapy, and you start peeling apart all the ways that you've been

affected as an adult, by these experiences as a child. How do you then reconcile, and start to establish even, your own authentic sense of identity?

[00:29:08] Dr Christian Kloss

Exactly. Well, you don't, it's not happening. There might be some things that you pick up along the way. I might be idealizing a little bit when I'm saying that usually when you're in your late teens, and you're about to enter college, then you're asking yourself the questions of, okay, what do I want to do? And so forth.

It's not that I did not do this, again, the important point is, are you in contact with yourself? So much so that you can say that all the decisions you're taking are on a sound basis. You're sure why you're doing it. You might not be able to explain it on a very logical and intellectual level.

In fact, why do you? It's a little bit like trying to explain love. Well, it's just there and you're sure of it, and that's what's totally sufficient. Totally sufficient, without any intellectual clue for you to make this decision to be with that person, or that's why I love playing the saxophone, or love playing football, or whatever. These things are what is missing.

What I was going to say was, usually a kid, an adolescent, is entering this identity surge, it begins from very early on, but when the mental illness of the parent is hitting, then you're being distracted with this process, because the parent plays an inherently important role in finding this identity.

I'm drawing from Erik Erickson's model there, he basically says, from what I know, that identity is being formed, that's simplification a bit, over two ways. One way is reflecting upon yourself, and the other way is reflecting upon yourself through others. So by talking to somebody. And of course the parent situation is the best example here, then there's a feedback, and this feedback is telling you something about yourself.

Or let's put like this, in order to identify where you are, usually sailors are using their ship, and they're using the moon, and the stars, and whatever other fixed points, to static points, to locate where they are. Now, if these other points are constantly moving, there's no way of locating yourself.

So in psychological or in upbringing terms, that would be if your parent is not stable, and not giving stable, sound, and reliable feedback, you don't know what to do with that.

The worst being there's no feedback at all, which was the case with my mother, because you couldn't talk with her about anything, other than, "hey, are you hungry? And where are you going?" And then of course added, "don't go."

Meaning a mentally ill parent usually, at least my mother, tried to keep me and my brother still small, like as kids. Why? Because she knew that when we "grew up", we would leave the house. And she was, I think, just afraid of this. I didn't realize this at all when I was a kid, and an adolescent.

I just noticed later, that's probably the rationale, if you want to put it on a rational level, why she was always saying, "okay, you don't go out. You're not allowed to go out." Then when I was 16, she said, "you have to be 18." Then when I was 18, she said, "you have to be 21." And when I was 21,

she said, "you just don't do this for greater reasons." She was basically always trying to find an argument for why I should not explore my world.

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This is another aspect of identity as a child of mentally ill parents. I think your self-esteem is pretty low because you're not encouraged to explore your world. And again, this is everything. Meaning your hobbies, sexuality, my God sexuality is such a big thing. Then you're like, "no, you're not supposed to do this."

There's a lot of shame and stuff going on. I mean, this counts for a lot of other people. But I understand that mentally ill people are usually having a very disturbed relation with sexuality.

What I wanted to say was that you cannot answer those questions, what do you want to do? When you're growing up in a situation like this. So there goes your identity, down the drain, out the chimney, because you have no way of exploring, because you're holding yourself back. Then when you're supposed to be self-sufficient, and self-regulated, and strong enough to lead your own life, you're not ready.

Meagen Gibson

I want you to be explicit about it, I have a feeling I know what the answer is, but why aren't you ready? What comes up when you're finally supposed to launch into adulthood?

Dr Christian Kloss

Sorry, you mean what I believe is what makes you ready?

Meagen Gibson

No, you were saying that when you don't have an orientation to your identity, at least this is what I believe you were saying, because you've been compensating in all these ways for having a mentally ill parent, and not being able to differentiate, and develop in the ways that you were supposed to.

Then when you reach the age where you're supposed to be ready to launch off into adulthood, you can't, and you don't succeed. I just want you to explicitly say to me, in your mind, why that is?

Dr Christian Kloss

The point is you're behind, that's number one. I had the feeling, or the sense, that everybody else seems to lead their lives and I'm not. They all seem to be, at least to some extent, I'm not saying that everybody was happy, by far not.

But I believe that there's some actual sound progress going on with these other people. I always felt like I'm left out of the game, and I probably was, but partly. If you look at it on the action level, where people are actually doing their actions, and cause and effect. I was producing this situation myself, because I was not going to get my degree, because I was afraid of entering the work world, the labor world. You could even go so far, and I would not argue against it, to say that me pursuing

the PhD in sociology was probably also a strategy to avoid the situation of being in a normal, conventional employee situation.

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In other words, all of a sudden you find yourself at a certain age and you figure, okay, where's the job? Where is the partner? Where is everything else? In a sense, and it's an utter feeling of not being grounded in a good sense of the word. There's no real contact with a stable basis to start from.

This in turn will also lead to you having bad relations, in every sense of the word, because of this strong need. There's this concept of the inner child, I'm pretty sure that most of the viewers will be familiar with it to some extent at least. And if not, it's pretty easy to explain. It means that you're still having needs that are coming from way back, and they're still demanding to pay attention to.

One of the major needs that I found is, of course, it sounds stupid when you put it like this, yeah, I wanted a parent. I wanted a mother.

So if you then, with this deep, deep need and necessity, if you're entering other relations, or relationships, you can imagine that you're hitting walls. Because your boss is never going to treat you like the child that you're presenting him with. It's not obvious, but if deep in you, you want that he sees you, and that there's attention, and that there's acknowledgment, and then there's gratification, and everything.

All these things that go wrong on so many levels anyhow. There's a lot of research in labor sociology, and sociology about labor, and organizational sociology. What's all going wrong with capitalism?

Then you're coming there with your very high need of, yeah, I want attention, I need to be acknowledged that I might need some time for myself, and for all these emotional issues that I'm coming in. You're f'ed. It's really bad.

It's bad for your side the most, because there's no solution. You will never find a workplace. Not even the sanest person, and the most healthiest person in the world will probably find a workplace that's meeting all his, or her needs, because it's just not there. That's life, I hate to say it, but of course there's a lot of room for improvement. I'm not saying that it's the best world we could get, that what we're in, by far not. But when you're coming from the COPMI perspective, these shortcomings hit ten times as hard.

Meagen Gibson

Absolutely. Yeah, so we don't leave everyone on a hopeless note.

Dr Christian Kloss

No, we don't.

[00:40:41] Meagen Gibson

I want to talk about if you know someone who's the child of a parent with mental illness, or are in a relationship with someone, what is the best way to support a child of a parent with mental illness?

Dr Christian Kloss

First of all, it's always an individual situation. Conventional wisdom, not much help, but yeah, you need to keep that in mind, because if you are in the situation, you want to help somebody, you might go over their head if you're just like, yeah, this is what I need to do.

Let's answer the question maybe a little bit differently. I already touched briefly on this issue of foster families. Why I brought it up is simply because I'm usually being asked something like the same, similar question you just asked. What is the best treatment? Or what is the best solution?

When I'm giving workshops or talks, and there's a lot of professionals, or people who are coming into professional roles to those workshops. They want to know, they're having a family and there are kids, and we're having this program. Okay, now what does Mr. Kloss think about this? And what would he recommend?

I'm saying, okay, everything you're doing is good. It's better than nothing. But the most optimal situation would be having a foster family, in order to compensate for what's missing in the first place. And that's a family.

I already elaborated on the fact that this is the solution that also has to meet the most prerequisites, and takes a lot of money, and takes a long time. You get the best out of it, but you also have to put in a lot of resources.

Now thanks for the question, because I've never been asked that, what would you do in a private situation? So you meet somebody, and you know there's mental illness, blah, blah, blah. First, how old is the child that you're talking to?

Different if it's an 11 year old, or a 5 year old, or a 25 year old, or a 40 year old. Maybe, to be honest, when it really comes to very young kids, there's, at least in Germany, very little you can do. I think the same in the states, because there is, I don't know if the word prerogative here is the right word, but the parents are in charge. So they're by law allowed to decide on behalf of their kids.

To put it more blatantly, there's no way getting around the parents because if you're doing that, you're basically interfering with law, and you might get in big trouble then. But what you could do, if you have some contact with the social environment of that kid, you could tell the teachers, you could tell the kindergarten teachers, you could tell other friends, that this is there, and there might be a lot of stress that this kid is in.

For example, I don't know if it's really fitting anecdote, but I'm telling it anyway because that was the first one I ever experienced, a teacher being a little bit baffled about what's going on there. A friend of mine, she used to be an arts teacher, and she knew of my situation. She also knew of this one kid at school that she had, and that he apparently had some, one parent at least, was mentally ill.

[00:44:43]

They played something, I can't remember the details here, but the idea was they had to lay down on the floor, and then they were supposed to put their bodies in a state, so they could shift each other around. I really don't remember the details. The point was this kid was lying there really concentrating and being very stable.

The kid's reaction was much more mature than the other ones, because he knew if I do this, then the best result would be for the game, in order to win the game. While the others were still very kiddy-like in that regard. She said, but why did that happen? I said, because he knows that he needs to fulfill a function in order that the whole thing works. He's totally in this thinking mode, I have to function.

She said, okay, interesting, because that didn't come to her mind. Then I told her, maybe you want to... Because that also meant a lot of stress for him, he was so tense in order to fulfill the needs that he needed to meet.

Then I told her, maybe you want to talk to him in basic words, try to get this idea across, that he does not need to put so much effort into everything. Because these kids want to make it right, and they're usually overperforming.

If they are still mentally sane and stable, in a sense they're usually overperforming. This is also one of the reasons why they're not being seen. First of all, sorry if I get back to this again, but it just fits so perfectly.

First of all, they're not reaching out because of the fear of stigma, and then they're not even obviously misbehaving, and being problematic, because they're fitting in so well. This in turn is a huge disguise which makes people think, oh, they're just fine. Well, they're not.

I would say one of the answers also, along the lines of, what do you do? First of all, be aware. Meaning if there is a kid that's really performing well, this might be because they're compensating with this. They're not doing it because there's so much fun. They're doing it because they've been taught, and already have taught themselves, or have learned how to fit in, and how can I fulfill all the expectations here? In the end, what they have learned is, that's my experience.

I found at one point I am fulfilling expectations, because deep down it might not be related to what's going on currently, and what this task, what I'm at is about, but deep down, I believe that if I'm making it right, then it will stop. If I fulfill what's been needed from my end, then I will be fine, and then there will be salvation in the end. But it's never coming.

This performance thing makes the surroundings believe, this kid is doing just fine. He'll go his way. I remember situations like this with the neighbors of our grandfathers, grandmothers, grandparents saying, they asked me, when I was maybe 14 or something, what do you want to do, as a kid, when you're growing up? I was like, I don't know, I don't know. I said something like, with computers, just to give them something, but I wasn't sure, and I felt it. Then they said, you find your way.

I thought, I have no clue, I don't know, actually I need help for this. I don't know. But of course, you don't reach out like this, because these thoughts that I'm just telling you were very diffused, and not really clear there. Maybe I didn't want to talk to that specific neighbor also.

[00:49:12]

My point is that there is a lot of uncertainty, although it doesn't look like, and there is a lot of suffering, although it doesn't look like. So being aware is probably the best you can do, and develop a sensitivity for what's going on behind these kids. Then you have to decide individually.

Now, if you're talking to a 40 year old, or older, very old, much older person that is a COPMI. If you're lucky, you find somebody who has already done a lot of therapeutic work, they're very good at self-reflection, and then you might be able to meet on a level that you're probably not with many other people.

I'm pretty sure that you also bought into a situation that you are then better interested in psycho talk, because in the end, I believe that this is what it is, it's basically like psychotherapy.

I'm saying this with the notion of, it's not in a professional sense here, but what's going on there means that the COPMI will probably for the rest of his, or her, life be confronted with their issues in one sense or the other. Because things are just deep down, and they're aware of it, they want to deal with it, and they need exchange over these matters.

What you could do there, if you want to help, you can be willing to get into those conversations. At best, you already did a lot of work yourself, and not necessarily psychotherapeutically, there are also a lot of natural talents out there, which I would say is just the same human being, in terms of I'm aware of my feelings, I'm aware of my fears, and I can talk about it, and I also don't know all the answers, but that's what it is.

You constantly confront yourself with, or being confronted with issues, that you have to work through, and a COPMI with therapy experience is pretty much the same.

If you then meet a COPMI who has not had psychotherapy, and who is not willing to do so, that'll be tough. Let me make a rather harsh comparison here. Let's take your conventional male. Boys are not used to growing up with talking about emotions, pouring their heart out about whatever bothers them. They're very much on that route of, I'm just proving myself through performance.

Love is the same, like being acknowledged for performance. Basically, actions speak louder than words, stuff like this. And most of all, don't show your feelings, don't be a pussy, or whatever.

A lot of people have met these kinds of people, and now think about yourself, how close can you get to them? And how can you convince them in order to open up? It's hard. It's even harder the older they are. Because there's also a boomer generation issue there, in Germany, I know for a fact that the Association of Psychoanalysts, they've been trying to push for years now, that we should work through, and openly talk about the trauma of World War II.

Because from what I know from trauma research, we're now down to secondary trauma, meaning experiencing the situation, or the personalities of those people who have been traumatized in the first place. Like all the war generations, they're passing their problems, or their issues on, and causing new ones on a different level with their descendants.

And now they're having to deal with what it was like to have a father that was basically emotionally unavailable, because of his trauma, because he was in the trenches in a world war, or whatever, being hit by a bomb, or witnessed whatever traumatic experience.

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The bottom line would be, you probably need a lot of patience if you really like that person, and you want to be there, and given some hints about there's help out there. Be bold now, show your strength that you're having, because honestly, this is where the actual strength is needed. This is the actual daring task, to go there, because there's a lot of pain, and I can feel this still. There's a lot of grief, and a lot of tears that are there, and they're constantly coming up, or often coming up.

I'm actually crying very often, but I find this also a good thing, because then I always feel like, okay, something's happening. If I don't really understand why the tears are coming up, then I just wonder why that is? And just let it happen.

With my experience, and I also want to point out, to connect with what I said at the very beginning when I was introducing myself. My situation telling my therapist that I talked to, is really extreme. It's not like your conventional COPMI experience, having two suicides in the family. I think I forgot to say that.

My mother then later killed herself also, 20 years later after her husband. I was 31 at that point, apparently with sleeping pills. What I want to say is that, in my case, I have a lot to work through, really a lot.

I also know that I need this, which in turn poses me with a lot of difficulties finding a partner, because that's like what I just said about the boomer male, counts also for a lot of women. I mean it's just natural.

Unfortunately, I believe that the human beings, we're wired for compensation. In other words, if there's something that we have to work through, or that gives us inner pain, we're more likely to grab the chocolate bar than going to see a therapist.

The chocolate bar being the metaphor for shopping, alcohol, sex, sports, changing relationships, any addiction you can think of. This compensating issue is fine. I think biology has actually a very good trade here, because we were not supposed to live longer than in our 30s or 40's anyhow.

So before burnout and everything else hits, we would have been dead by default anyways in ancient times. Compensating is pretty cool from a biological perspective. Unfortunately, we're becoming 80 now, that means things will hit the ground at one point.

There are two famous trauma books out there, one says *The Body Keeps The Score*, the other says *The Body Says No*. Here's the body saying, here's the bar going up, and then the other book says, okay, this is what happens when the bar is up there, is out, yeah, you're out.

The problem is it's really hard to find somebody to connect on that level, because if you're in the dating game, and you find there's a lot of people who are basically not there and able to have what is considered as deep talk, and opening up, and being emotional about it, and self-aware, and all this stuff, then it's really hard to find someone. I don't know how I ended up there.

[00:58:37] Meagen Gibson

I think when we're talking about supporting people, romantic relationships definitely enter into that. I'm really glad that you said it because I think a lot of people, obviously anybody with any empathy, wants to be able to support somebody regardless of their circumstances, especially if there's a spark, and if we have feelings for somebody.

So just acknowledging that it's worthwhile, but that it might be a tough road if they haven't already started that healing journey is one that needs explicitly stating, I'm sure.

Christian, we are out of time, but how can people find out more about you? And if they're lucky enough to speak German, your book?

Dr Christian Kloss

I have a website, it's christiankloss.de, for Deutschland. I'm actually about to have it mirrored as an English version also, but you can still use Google Translate.

There's an email address on it, as well as my other contacts, and a form you can contact me. I'm happy to hear from anybody who has some interesting questions to ask, or needs some support, or whatever, so we can talk about that. Thanks for giving me the opportunity to say that here.

Meagen Gibson

Thank you so much.

Dr Christian Kloss

You're very welcome.