

# Vampire Men and Vampire Coupling

Gerald Schoenewolf PhD

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**By Gerald Schoenewolf Ph.D.**

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## ***About the Author***

Gerald Schoenewolf, Ph.D. is a New York State licensed psychologist who has practiced psychotherapy for over 33 years. He has authored 25 professional articles and 13 books on psychoanalysis and psychotherapy. His books include *101 Common Therapeutic Blunders*, *The Art of Hating*, *Counterresistance* and *Psychotherapy with People in the Arts*. He has also written and directed two feature films— *Therapy* and *Brooklyn Nights*. He lives in the Pennsylvania Poconos with his wife, Julia.

## Vampire Men and Vampire Coupling

This study focuses on a mode of relating termed “vampire coupling,” characterized by a passive-aggressive, aggressive-passive struggle in which each member of a couple frustrate each other’s oral needs for nurturing. It also looks at the vampire myth, linking it to the fantasies of dysfunctional passive-aggressive males.

Sometimes a dream holds the key of a treatment. Such was the case with the following dream.

“I was in an ambulance and I was dead. Lying beside me was a black girl and she was still alive. I took a syringe and stuck it into her neck and sucked out her blood. She died and I came alive. Then I was at my mother’s house. She was there with some of her women friends. I did the same thing to them, sucked out all their blood, and they died and I lived.”

This is not the dream of a vampire, but of a patient whose childhood circumstances left him with a phobia about women’s breasts. He could not stand them and he could not tolerate what they stood for—nurturing and intimacy. If there was any sucking to be done, it would have to be done on their necks, not their breasts, and the sucking would have violent consequences, as in the dream. He is one of a number of passive males I have treated who had such fantasies and dreams. All of them were involved with women who were much more aggressive than they were, whom they frustrated sexually and

emotionally.

His relationship with his wife was a passive-aggressive struggle. The daily theme was one of frustration and counter-frustration. She wanted to have sex often and for long periods of time, whereas he was indifferent to it. She wanted to raise children, whereas he did not care one way or the other about marriage or children. She wanted to have long intimate talks with him, whereas he wanted to have long intimate talks with his computer. As the years of their relationship mounted, he retreated further into passivity and she further into aggression. While in his dreams he sucked her blood, in real life he saw her as a vampire who was sucking his.

During the course of his individual treatment we were able to trace his passivity and his breast phobia to the deprivation he had undergone as an infant. The nature of the deprivation and aggression by his mother had caused him to repress his frustration and accompanying rage and to develop a passive-aggressive character structure. Hence his passivity had an underlying aggressive undertow. Although he was badly in need of nurturing from a woman, he could not accept nurturing from his wife and in fact passively frustrated both her attempts to nurture and to be nurtured by him. At the same time, his passive-aggression aroused in his wife a type of response which I have previously referred to as aggressive-passive (Schoenewolf, 1996). That is, she aggressed against him in such a way as to induce passivity and make

him retreat even more into his shell, which gave her the excuse to criticize him all the more and achieve the secondary gain of displacing pent-up anger from her own childhood. This process served to reinforce each of their defensive postures and keep them stuck in a duel. In effect, he induced her to behave like his mother.

His relationship with his wife became the third rendition in three generations of this kind of oral-sadistic coupling. During the course of his treatment, we found it in the relationship of his mother and father and his mother's mother and father. In each instance, the couples were apparently engaged in the same passive-aggressive, aggressive-passive duel. In each instance, a kind of vampire attitude permeated the relationship, so that instead of nurturing one another, each mate sucked life from the other. In the first two instances, the advent of pregnancy, childbirth, and nursing exacerbated the situation.

However, in the present case of "vampire coupling" when the wife of the dreamer of the vampire dream became pregnant, gave birth, and proceeded to somewhat blatantly suckle a girl child in front of her husband, things changed. His passive-aggression no longer worked, since his wife now had another object with which to satisfy her oral and emotional needs. Indeed, he not only felt powerless but also excluded (and in a sense cockolded) by the nursing child. This eventually sent him into therapy, wherein he was able to work his



way out of this syndrome and break a three-generational cycle.

### From the Literature

Where did the legend come from? How did it arise? This case gave rise to a psychological investigation of the vampire story. In folklore, vampires were said to be ghosts of heretics, criminals, or madmen. They returned from the grave in the guise of monstrous bats to suck the blood of sleeping persons, who then became vampires themselves. The only way to kill them was to drive a wooden stake through their hearts. In Stoker's *Dracula* (1887), the vampire slept in a coffin by day and came out at night. Vampires have traditionally been male, and their victims have primarily been innocent, virginal females. The vampire myth, looked at analytically, would seem to correspond to the fantasies and dreams of dysfunctionally passive males, and may well be an outgrowth of such fantasies. Indeed, vampires are the epitome of passive masculinity; they are so passive they are dead, and become revived only upon sucking living blood. They must kill others (turn them into vampires) in order to continue to live. In addition, through sucking the blood of innocent young women, they also attain super powers—they can only be killed in a certain proscribed way. This points to a grandiose, narcissistic component of such fantasies.

The vampire myth and dreams and fantasies that contain vampire themes have been attributed by psychological investigators to the oral-sadistic stage.

Abraham writes of the vampire-like behavior of individuals whose breast-feeding was frustrated. He notes that such individuals always seem to be demanding something, and the nature of their demands has a quality of persistent sucking. Neither the facts nor the reason can prevent their pleading and insisting. He notes that "...their behavior has an element of cruelty in it as well, which makes them something like vampires to other people" (1927, p. 401). The cruel sucking behavior of which he writes not only relates to the passive male, but might also have a link with aggress-passive females in the three generations of couples in this study. He describes such people as alternately sucking like vampires and then giving out an "obstinate oral discharge." That is, they can also use cruel words as a means of controlling and psychologically killing off adversaries.

Klein drew attention to the significance of the "bad breast" in children's fantasies. She wrote of oral-sadistic fantasies of toddlers containing ideas that the child "gets possession of the contents of his mother's breast by sucking and scooping it out" (1932, p. 128). She describes an early stage of development "governed by the child's aggressive trends against its mother's body and in which its predominant wish is to rob her body of its contents and destroy it" (1932, p. 128)

She goes on to explain that the feeling of emptiness in its body, which the child experiences as a result of lack of oral satisfaction, might be responsible

for the fantasies of assault on the mother's body, since "it might give rise to phantasies of the mother's body being full of all the desired nourishment" (1932, p. 128). Boys in particular harbor tremendous fear of the mother as castrator and their attacks on the mother's body are also directed at their father's penis, which they imagine is inside their mother's body. "He is afraid of her as a person whose body contains his father's penis" (p. 131). Ideas about the phallic woman have their origin, according to Klein's research with little boys, during the oral-sadistic stage.

Freud (1910), in a study of Leonardo da Vinci, focused on the artist's memory of a vulture-like bird that came to him when he was an infant. According to the memory, while Leonardo was in his cradle, this threatening bird came down and opened the infant's mouth with its tail and struck him again and again with its tail. Freud contended that this memory was in fact a fantasy. The fantasy conceals a memory of being suckled at his mother's breast. The fact that in the fantasy the mother is replaced by the vulture-like bird—or perhaps a hawk, according to some (Anderson, 1994)—is an indication that the child experienced this sucking as soothing menacing. Freud speculates that da Vinci was an illegitimate child, which perhaps caused his mother to cling to him all the more. This bird deprived him of a father's influence until his fifth year, and left him vulnerable to the "tender seductions of his mother," whose only solace he was. In his primitive fantasy, da Vinci saw this mother's nursing as aggressive and terrifying. At any rate, something

happened during the nursing state to create in da Vinci a phobia of breasts. This memory or fantasy of da Vinci might be seen as hinting of some kind of trauma during the oral-sadistic stage.

Fenichel notes that “Oral-sadistic tendencies are often vampirelike in character” (1945, p. 489). He documents a case in which an infant was breast-fed for a year and a half, while living with a doting grandmother who spoiled him, and then was suddenly removed and forced to live with an excessively severe father. This childhood is somewhat similar to da Vinci’s, with similar results. In Fenichel’s case, the man became an extremely passive-dependent personality, who throughout his adulthood lived (sucked) on his father’s money. He always felt his father had discriminated against him, favored his sister over him, and was convinced that life was unfair. He points out that the conflict between ingratiating submissiveness and an impulse violently to take what they think is theirs is characteristic of such types.

Other writers have focused on the type of aggressive-passive mothering that may produce a passive-aggressive male. Socarides, writing of the dreams of passive males of what he calls the “perverse” variety, interprets that their inner stress stems, among other things, from the “threat of imminent destructive incorporation by the mother” (1980, p. 249). Spitz (1965), in a study of mothers and infants in a clinic for unwed mothers, details cases of what he calls “primary active rejection” by mothers who, due to their circumstances

(being teenagers who were suddenly saddled with the responsibility for a child) had an extreme distaste for motherhood. He cites a case in which a mother stiffened and looked annoyed whenever she held her baby, and Spitz remarks, “During nursing the mother behaved as if her infant were completely alien to her and not a living being at all” (p. 211). Shengold (1979) has labeled a drastic form of anti-nurturing as “soul murder.” According to him, the subject of such parenting is “robbed of his identity and of the ability to maintain authentic feelings. “Soul murder,” he maintains, “remains effective if the capacity to think and to know has been sufficiently interfered with—by way of brainwashing” (p. 557). Others who have alluded to the kind of early deprivation that renders children passive include Ferenzi (1933), Laing (1971), Miller (1984), and Seinfeld (1990).

A family therapist, Satir (1967) wrote of marriages in which each partner needed the other to bolster his or her self-esteem. Such people chose a mate on the basis of the mate’s capacity in various ways to elevate their own self-esteem, and if and when that hope fails, they feel betrayed and angry. The feelings of disappointment toward their mate are passed on to their children; the children are treated as if they are the cause of the parents’ failure. Satir notes that this kind of dysfunctional family system often results in children who reject themselves. “A child needs to esteem himself in two areas: as a masterful person and as a sexual person” (p. 54). Another way of looking at it is that the parents were unable to suck life from their mates, so they sucked life

from their children.

### Vampire Coupling

John was about 30 years old at the time he had the dream reported at the beginning of this paper. He and Mary had been married for five years. As previously mentioned, their relationship had remained on a passive-aggressive level until Mary became pregnant. From the moment he found out she was pregnant, John began expressing vague feelings of annoyance and trepidation. He was not sure what he was annoyed or afraid of, until after the birth. When he caught sight of his wife breast-feeding their daughter, he discovered that what he was feeling was jealousy and rage. This jealousy and rage was brought on, first of all, by Mary's deliberate flaunting (so it seemed to him) of her nursing sessions, which he believed was her way of getting revenge for his years of frustration of her sexual and emotional needs. Second, it was aroused by a memory from the past, which had formerly been repressed, of his own oral frustration at the hands of his mother. This memory engendered a fear of reengulfment and, through the mechanism of projection, an irrational conviction that his wife's breasts were angry and dangerous things. The scene also brought back a later memory of witnessing his mother nursing his infant sister and feeling excluded from this intimacy. This in turn induced a womb-envy that was the bedrock of his later envy of, and anger at, his wife's breasts and her capacity to nurse their daughter. This theme then surfaced in his dreams.

John reported that his mother always preferred his younger sister and was hostile toward him on account of his being male. This seemed to be in part a response to frustrations she was experiencing with respect to his father, and in part due to traumas she had experienced in connection with her father (John's maternal grandfather). His mother continually complained about both men, but mostly about her husband (John's father), who would stay at work till late each night, in order, she thought, to avoid her. She complained to John, much to his chagrin, that "your father doesn't love anybody but himself," and that he not only stayed at work till late at night, but also when he came home he neglected her and his children. Often when he did come home his mother screamed at his father and the father would promise to come home earlier and pay more attention to her. But he never did. It appeared that the problems of John's mother and father trickled down and got displaced onto him through the manner in which his mother nursed him: grudgingly.

John noted that his mother had a problem with breast milk, during the time she was nursing him and had to abruptly change to bottle-feeding, despite his vehement protests. And she would put the bottle in a holder rather than holding him in her arms when he sucked from the bottle. This first trauma was later reinforced when he witnessed his mother breast-feeding his sister. Although he could not put it into words at the time, he felt that she had milk for his sister because she was female, but none for him because he was a bad male (like his father). When he wanted to join in on the action (she had an extra

breast did she not?) she would shame him: “You’re not a baby anymore. Run along and play.”

John’s mother, like his wife, had apparently flaunted her nursing of John and his sister in front of the father in an aggressive-passive way. Unconsciously, she was being aggressive to produce even more passivity in her husband. The more he sank into a jealous rage and retreated into passivity, avoiding her and the kids, the more she could complain about him, scream at him and vent all the frustration she had repressed from her childhood. From the husband’s side of the struggle, his passivity was unconsciously intended to provoke greater and greater aggression from the wife, so that he had the excuse of retreating further into his work world and could like an innocent victim to the children while making her look like a vampire monster.

John was forced to “swallow” everything: the oedipal guilt, the separation anxiety, the fear of maternal reengulfment, and the sibling jealousy. There was no soothing from his mother, nor a chance to ventilate or work through anything. Instead, he was made to feel that his feelings were wrong, stupid, or masculine. This constituted another layer of frustration added to the original layer of frustration during the oral stage, reinforcing the early repression.

His marriage was almost a carbon copy of that of his mother and father. He treated Mary similarly to the way his father had treated his mother. He



became passive-aggressive, fearing that his wife (his mother in the transference) would control and oppress him (suck his blood) rather than nurturing him. She was aggressive-passive, believing that she had to constantly nag him and shame him in order to get any semblance of love or consideration from him. And so they remained at odds, both needing nurturing, each depriving the other of it.

In the sexual sphere, this manifested itself in her being grabby and in his being withholding. She would continually demand sex and complain that he did not satisfy her—sort of like the vampire-like people described by Abraham. He would perform sex as he might perform a duty, like mowing the lawn (or, like a zombie mowing the lawn). She suffered from frigidity and blamed it on him. He suffered from premature ejaculation and blamed it on her. A huge sticking point of their sexual relations was his absolute refusal ever to kiss or suck her breasts. Almost weekly she would complain about this, and almost weekly he would refuse. He was as afraid of her breasts as he was of castration, but he did not understand any of this. All he understood is that her breasts to him were ugly. She was, naturally, wounded by this attitude and spent a good deal of effort in trying to shame him into submission.

John's mother's parents represented the third generation of oral-sadistic (vampire) coupling. For all I knew it might have gone further than that, but this is as far as we could trace it in therapy. From his mother's complaints about his

father (John's grandfather), he deduced that this man too had been passive-aggressive (both at his wife and daughter), while his mother's mother had also been aggressive-passive, prone to temper tantrums that caused John's mother "to run from the house." And once again, in this third generation, the birth of a child had apparently brought about a variation in the relationship; during the grandmother's pregnancy and for a year or so afterward, the grandfather had an affair.

### The Clinical Picture

The man who became my patient was depleted of vitality and lived almost entirely in his dreams and fantasies. His fantasies were so important to him that for a long time he was reluctant to tell them to me or anybody. Indeed, the world of his fantasies was more real and more important to him than the real world. For the most part these fantasies were benign and bore no indication of the cruelty that would show up in his dreams at a later stage: trips to foreign planets where he became a heroic savior; inventions that made him famous; speeches before the United Nations that roused people to action. These fantasies—which had a Walter Mitty flavor—were indicative of his stage of narcissism, which was almost at a delusional degree in the beginning of treatment.

The therapy relationship was a replica of his relationship with his wife and

with people in general: passive-aggressive. In the beginning he was ingratiatingly submissive, giggling almost every time he spoke. If I asked him, "What are you feeling right now?" he would respond, "I don't know," and giggle. He dutifully brought in dreams, talked about his life, his work, his history, without any emotion except the giggle. At the same time, he had a great deal of problems paying me for sessions, and at one point there were ten bad checks in about twelve weeks.

Over several years, due to the working-through of the transference, his relationship with me gradually changed into a more truly cooperative one, and the passive-aggression diminished. I encouraged him to confront his wife's demands rather than retreating into his world of fantasy, and his relationship with her began to change too, as well as his relationship with his parents. Note: this change was, as I said, very gradual and moderate. He still remained passive, but the aggressive quality had gone down as he got in touch with feelings.

Toward the end of four years of therapy, he had the dream recounted at the beginning. He had a number of other dreams with vampire themes. We interpreted the first dream as follows: the ambulance was a womb, and the syringe was a phallus and the black woman was his sister, who in a wish that represented a reversal to what had actually occurred, became the "black sheep" of the family. The dream alluded to both his angry incestuous feelings

toward his sister and the infantile notion of a powerful phallus that could rape and kill. Later when he likewise injects his mother and her friends with his powerful but deadly phallus, it again may represent a wish for the reversal of what he felt had been done to him.

In another dream he was in a bus (another womb) and touched the thumb of a woman sitting next to him with his thumb (his phallus) causing her to tremble and die. In yet a third dream he was swimming in a rough sea, and there was a wall separating the sea from the land, and the wall had a long tunnel in it (the vagina). To get to the tunnel, he had to walk on the backs of several female swimmers ahead of him (his sister and her friends), causing them to drown. Finally he made out of the tunnel (he was born, his sister wasn't).

Aside from the vampire motif, the dreams had other layers of meaning. In the first dream he is dead, which might also be linked to his feeling that his birth wasn't wanted. The first two dreams, in which he injected a syringe into a woman's neck and touched another's thumb with his thumb, causing them to die, might also be an allusion to his womb envy or an introjection of his mother's and sister's scorn of his masculinity. In the third dream he was out in a rough sea and a wall separated him from land; this may denote his feeling of being excluded by women, separated from his mother's womb. The instances of poisonous penises in the dreams might also have been meant to assuage

his castration fear. We considered all these possibilities and they all led to fruitful discussions.

I considered these dreams to be significant signposts in his therapy. They were sharper, and more emotionally tinged than earlier dreams, indicating to me that previously taboo material about the extent of his oral rage was coming to the surface. By being held up in relief, the dreams seemed to clearly show the oral-sadistic underpinning of his personality.

Prior to these vampire dreams, he had not been able to get in touch with his anger. The only person toward whom he could feel anger was his father, who happened to be the only person his mother allowed him to feel anger towards. He was misled by the mother into believing that the father had abandoned him and had chosen not to visit him after the divorce. In actuality, the mother refused to allow his visits, but the father passively accepted this refusal without putting up a legal fight. Hence John, in identification with his mother, would often express resentment toward his father: "If only he had not left, things would have been different." In addition, through a negative identification with his father, he saw both himself and his father as bad, somewhat pathetic figures.

Along with the emergence of the dreams came a release of repression. He began to express more and more anger at his mother, his wife, and me.

Much of the early work of therapy consisted in helping him individuate and separate from his mother. During this phase, he began to drop the submissive, giggly false self and to verbalize the distrust and anger underneath. He began to treat me as though I were going to latch onto him, make him totally dependent on me, and suck his blood (the mother transference). He became suddenly concerned about the fee, whereas previously he had paid no attention to it. He expressed the view that I was financially and emotionally exploiting him, that my interpretations were hostile reproaches and that the only reason I wished to keep him in therapy was to gratify myself at his expense. By verbalizing these things and analyzing them, he was able to pull himself out of the passive-aggressive, oral-sadistic defensive mode.

He was then able to explore how the same dynamics had come into play in his relationship with his wife, and to reach a state of aliveness and realness with her. He first expressed to me, then to her, his fears of her sucking his blood, and underneath this an even bigger fear of allowing himself to be nurtured by her (and become dependent and devoured by her). As he worked through this material he became less passive-aggressive. Unfortunately, his wife, who was not in therapy and was resistant, retained her aggressive-passive defensive posture. However, the changes he made helped to reduce the struggle with her. Since he was less defensive, there was less for her to fight against. This change also fostered a better relationship with their daughter.

## Conclusion

This study focused on how a certain mode of relating—vampire coupling—was passed on from generation to generation. In this mode of relating, characterized by a passive-aggressive and aggressive-passive struggle, each member of the couple frustrated the other's oral needs for nurturing. It appears this kind of coupling results in childrearing that tends to pass onto children the parents' inherent frustration and discontentment. That is to say, orally-deprived, sadistic parents tend to produce orally-deprived, sadistic children. The early psychoanalytic writing on oral sadism by Freud, Klein and Abraham still seem valid to me and allude to the vampire-like behavior of individuals who have developed certain types of fixations in the oral stage and provide some theoretical base for understanding extreme forms of orality. However, these early analysts were more concerned with drive theory and did not adequately analyze the significance of maternal aggression, paternal passivity, and its impact on the child's fantasies and subsequent development. I have tried in this paper to fill in this gap.

Regarding the vampire myth, it would seem to be an outcome of the passive, perhaps schizoid, fantasies and dreams of both males and females. The fact that it has been present in Western culture since Medieval times shows that it may be a universal phenomenon that serves as a grandiose compensation for the collective fears of humanity, fears related to castration

and oral frustration and reengulfment. The myth is also perhaps an expression of narcissistic rage. This myth, like the vampire dreams, affords a symbolic enactment of some of humankind's collective fears, harking back to early oral deprivation. It may serve to dissipate some of that rage, just as dreams serve to dissipate the accumulated frustrations of the day. As such, it is a close relative of other similar myths about witches, dragons, and werewolves.

### *References:*

Abraham, K. (1927). *Selected Papers on Psycho-Analysis*. New York, Brunner/Mazel, 1979.

Anderson, W. (1994). Leonardo da Vinci and the slip that fooled almost everybody. *Psychoanalysis and Contemporary Thought*, 17-483-515.

Fenichel, O. (1945). *The Psychoanalytic Theory of Neurosis*. New York, Norton.

Ferenczi, S. (1933). Confusion of tongue between adults and the child. In *Further Contributions to the Theory and Technique of Psycho-Analysis*, pp. 126-147. New York, Brunner/Mazel, 1980.

Freud, S. (1910). Leonardo da Vinci and a memory of his childhood. *Standard Edition*, 11:59-138.

Klein, M. (1932). *The Psychoanalysis of Children*. New York, Delacorte Press, 1975.

Laing, R. D. (1971). *The Politics of the Family*. Hamondsworth, England, Penguin Books.

Miller, A. (1984). *For Your Own Good: The Hidden Cruelty in Childhood and the Roots of Violence*. New York, Farrar, Straus & Giroux.

Schoenewolf, G. (1996). *The Couple Who Fell in Hate*. Northvale, NJ, Jason Aronson.

Seinfeld, J. (1990). *The Bad Object*. Northvale, NJ, Jason Aronson.



- Satir, V. (1967). *Conjoint Family Therapy*, Revised Edition. Palo Alto, CA, Science and Behavior Books.
- Shengold, L. L. (1979). Child abuse and deprivation: soul murder. *Journal of the American Psychoanalytic Association*, 17:533-560.
- Socarides, C. (1980). A unitary theory of sexual perversions. In *On Sexuality*, ed. By T. B. Karasu and C. W. Socarides, pp. 161-188. New York, International Universities Press.
- Spitz, R. (1965). *The First Year of Life*. New York, International Universities Press.
- Stoker, B. (1887). *Dracula*. London, Hogarth.