Dr. Dave: Professor Brett Kahr. Welcome back to Shrink Rap Radio.

Prof. Kahr: How nice to be back on your program, David. Thank you for having me once again.

Dr. Dave: Yeah, I say welcome back because I think this is your fourth interview here. Previously, we've discussed your books, *Coffee with Freud, Tea with Winnicott* and *How to Flourish as a Psychotherapist*. And not surprisingly, you've been busy. And this year's 2020 sees you bringing out not one but two books, *Celebrity Mad: Why Otherwise Intelligent People Worship Fame* and *Bombs in the Consulting Room: Surviving Psychological Shrapnel*. So you have been busy.

Prof. Kahr: Well, thank you. Thank you so much for having me back. It's always a delight to talk with you. You're the best interviewer that we know and you'll be very pleased to know that your voice is often heard on the streets of London because not only do I listen to you as I'm walking with my headphones on, but many, many of my colleagues here in London are big fans of Shrink Rap Radio. So the voice of David is well known on this side of the pond.

Dr. Dave: Well, that's so good to hear. And really that comment dictates that we start with your book *Celebrity Mad: Why Otherwise Intelligent People Worship Fame*. And do you recall what got your thinking in that direction? Was there something going on in your life that caused you to, you know, the kind of tickles your fancy in terms of the phenomenon of celebrity fame?

Prof. Kahr: It's very interesting. I had absolutely no intention of ever writing a book on the psychodynamics of celebrity. It was not on my, on my list of must write books. But a number of years
ago, one of our professional organizations here in London asked me to give a public lecture about what is the psychology of celebrity. And it was not something at all that I thought about writing and I guess one of the delights and the privileges of being somebody who speaks at conferences and gives papers and so forth, is that sometimes some of the most interesting projects that come your way, you know, not from the research that you've been doing, but from other people's suggestions. So I thought what an interesting topic, I've never really turned my mind to this before. So I really sat down and began to think in a psychoanalytical way about why is it that we are so obsessed by celebrities and not just what is the psychology of the celebrity which I think gets everybody very excited. And you know, we all want to feel we're inside the mind of Donald Trump or we're inside the mind of Marilyn Monroe or something of that nature. But I think the book that I tried to write, called Celebrity Mad: Why Otherwise Intelligent People Worship Fame. It's about what is our psychology that we need to make stars out of these people, some of whom have, you know, no particular talents, but they become so preoccupying to us so, so what is the unconscious group phenomenon that makes celebrity so addictive?

Dr. Dave: Yeah, reading your book, trigger some ideas for me as well. Fame is quite relative, isn't it? I mean, you'd be famous, quite famous in some quarters, and utterly unknown in others and the same is true for me, but less so,

Prof. Kahr: Yes. No. Well, I mean absolutely fame is a completely relative phenomenon. And to get to the end of the book before we even start with the beginning, you know, the goal of mental health is to be famous in your own household. You know, if you are a bit a newborn baby, and you are famous to your parents, it means that mom and dad just worship you. They think everything you do is worth recording on camera, right? And if you have that kind of attentivity from parental figures, as you know only two well as a, as a parent and grandparent, then you know that your kids grow up to become, you know, superstars in the home. And I think that once that sense of intimate fame is deeply internalized in the human beings mind, you don't necessarily have the same drive to grow up and become famous, you know, “I must be famous”. “I must be the most famous dancer ever. I must be”, you know, “the most famous pop star ever”, whatever the particular strand might be.

Dr. Dave: What about the other possibility though, of getting so hooked on that attention? And as you're moving out into the world and having maybe either a conscious or unconscious sense of “Boy, you know, I want to go back to that being nurtured so intensely”.

Prof. Kahr: Yes. I think it's a really, really interesting clinical question that you asked about whether early attention giving provides enough safety so that you then don't have to seek it in a public arena or whether it actually fuels a hunger, and I can think of individuals where with both of those ideas might be relevant. You know, speaking as somebody who's still in, in full time clinical practice with patients, I do think, however, that the vast majority of people that I see who have pursued tracks of fame for example, there is always a real sense of early object loss, what psychoanalyst would call object loss, that there'd
been some bereavement or some profound series of parental miss-attunements or misunderstandings, where the child didn't always feel seen, and then wants to go and replace some of those missing experiences. So I think it's very hard to think about saying without also thinking about early separations and disappointments, early senses of loss.

Dr. Dave: Yeah. Now, you know, as somebody who's been a psychotherapist, I always have to personalize these things. So I need to ask you, did you want to be famous? Is that something that, you know, was in your psyche at some point? And how have you achieved as much fame as you might have desired?

Prof. Kahr: I think had I had a sort of a deep yearning for something called fame, I don't think I would have pursued a career in in psychotherapy, which is the least public career that I know of, I mean, everything that everything that goes on in psychotherapy, as you know only too well, takes place behind closed doors.

Dr. Dave: But you've had your own radio show on the BBC for a number of years, and I think you had some millions of listeners, and then you're on the conferences that you mentioned where you present and people are pressing you for your wisdom.

Prof. Kahr: Well, this is where I think, you know, your first comment is that famous is very relative that yes, I mean, I did work for the BBC, at one point for several years and I did speak to about I think it was about 15 million listeners per week. But that was on radio and when I walked down the streets, nobody knew who I was at all. And I must say, I must say I enjoyed it. And the small experience that I did have when I when I had done a few television documentaries, the next day I did notice after they were broadcast or the night before I did notice people sort of you know, looking at me and whispering, and it gave me just a slight taste of what you know, proper celebrities, film stars and sports stars must, must feel like and how very potentially intrusive that might feel.

Dr. Dave: It can cut both ways, can’t it? It can feel very good but…

Prof. Kahr: I'm sorry, David?!

Dr. Dave: But too much of a good thing can be very bad.
Prof. Kahr: Well, I think so. I think a lot of a lot of people who have become, you know, very properly famous, really, you know, recognized public figures in the entertainment industry, in politics and so forth, they do feel a sense of persecution. But when you talk to these people in the privacy of the psychotherapy consulting room, and they say, you know, I really hate being stared at by, you know, that gaggle of teenagers or what have you, yes, I can imagine that that would be very intrusive, but at the same time, there's always some other person staring at them in their minds that happened long ago. And it often brings up a free association of a time when their mother was looking at their diaries for example, or, you know, their father was watching them, you know, get out of the show and they thought the door was closed. Some early experience of exposure always gets evoked in those kinds of situations.

Dr. Dave: What are those sort of negative experiences that you're referring to? They sound like they might be.

Prof. Kahr: Often quite negative experiences. That's right, often quite negative experiences.

Dr. Dave: But one of the things I'm interested in talking about a little bit is this time that we live in. And you certainly make reference to that in your book. The internet and what the internet has done to... I see the internet as this big amplifier. And, you know, things that might have gotten lost in the corner in years past and not noticed, or even a bit of what would have been celebrity in the past is so magnified today by the internet.

Prof. Kahr: Yes.

Dr. Dave: And we see people who are famous for being famous. For example the Kardashians. They don’t have any other claim to fame other than that they are Kardashians.

Prof. Kahr: Yes. Sometimes they're called in the literature because as you probably know, there's now a whole academic literature on celebrity. I've encountered so many professors here in London who work in the humanities or the social sciences and they're all working on studies of celebrities. So it's, it's now become an academic discipline in its own right. And these, you know, flash in the pan celebrities are sometimes known as micro celebrities. You know, they might they might have a blog, on the internet and you know, 60 million Facebook friends or something of that nature.

Dr. Dave: Or podcast! I have to speak up for the micro.
Prof. Kahr: But your podcast, you know, is so important because it spreads psychological knowledge. And in this very disconnected era of human history, partly through it, the technologization, we do need to be brought together. The mental health community, you know, just the psychological community needs to be brought together in a very, very powerful way because we're now spread out all over the world. And we're all talking in different psychological accents. I recently read an article which estimated that there are now over 1260 recognized types of therapy that members of the public can purchase and enlist in, which is just extraordinary. So you might say, well, this really shows the therapies taken off and there are so many different ways of doing it, but it may also be an indication of how fragmented the psychological professions have become. So I think Shrink Rap Radio is a really good way for us to learn about one another's work and to meet people that we would not ordinarily meet.

Dr. Dave: Yeah, yeah, certainly that was that was my intention when I started. I really wanted to, I really wanted to expose people to the breadth of approaches to psychotherapy that, you know, and discovered that indeed, there are people who are interested in learning about that. I'm wondering, you know, again, going back to the internet, you know, on the sort of, again, I see these things, cutting both ways. And another way that I'm thinking of the internet is as a social contagion machine. And I'm wondering if there's any relation to mob psychology.

Prof. Kahr: That's very, very interesting. I'd like to hear you talk more about that. Maybe we need to interview you for one of your shows rather than you interviewing us!

Dr. Dave: I was hoping to get your thoughts on that. These are just, I tend to think a little short thoughts. A little short thoughts that came to mind, you know, thinking about what about social contagion in the way that ideas are what it was referred to for a while as memes can become almost like a virus. When also thinks about viral, the virality of the internet and the web. And false ideas can really catch hold. I was talking, I don't want to embarrass this listener, but I was talking to someone on the phone recently and she was telling me things about you know, that she'd learned on the internet that struck me as... Oh, what's the word that I'm looking for here? I'm blocking on the word will come to me later. But so some of the some of the false information that's propagated on the

Prof. Kahr: Yes, yes, yes. I know what you mean.

Dr. Dave: And this is a person who, you know, is intelligent and educated and so on, but totally subscribing to this place that I couldn't go there for myself. Yeah, your thoughts?
Prof. Kahr: It's such a big subject and such a complex subject. Certainly, we human beings we know from historical research have had a group mind and function in often toxic group styles since the beginning of recorded history, if not earlier than that. But the question is whether technologization in its current form, has taken it to a new level. And it may well be that it does. I don't want to claim any expertise because I have none in the field of cyber psychology per se. I'm not naturally a technological person, I still write with a pen and a piece of paper, believe it or not. I'm very old school in that respect. But I do hear from my patients on an hourly basis, how technology burdens their lives. So I have some patients who come in really, really forlorn, it even depressed at times, feeling that the whole goal of their day is simply to get to their list of emails.

Dr. Dave: Oh yeah. I can relate to that.

Prof. Kahr: That they feel that if they've answered each email, they've had a full day of work, but it ultimately it feels like a meaningless day. It's all these tiniest, it's not satisfying. It's all these tiny little pieces of communication. And it's almost as though the goal of answering an email is to then evacuate that person from your mind saying, you know, “Dear Mr. Jones, thank you for your email, I'll deal with that”, you know, and then you take us off your list. So I although emails have brought us in touch with millions of people we would not have met otherwise, one does wonder whether just the sheer volume of communication that we're having to process, then attacks intimacy in a way. You know, I have a I have a colleague who is an historian of the Tudor period, 16th century England, and she said to me once just during an ordinary conversation, she said, “You know, people nowadays in the 21st century don't fully appreciate that compared to people Tudor times”. You know, go back to the days of Henry the 8th, “people in Tudor times, they received no news”. You know, maybe once a decade, some courier would ride off from London on a horse and would tack a little note to a tree saying “The king is dead”. But you know, nowadays, she said, “we probably receive more news in an hour than someone from the Tudor era would have had to process in their entire lifetime”.

Dr. Dave: And have we had enough time to adapt to that, you know?

Prof. Kahr: And have we had time to adapt to it? Exactly! And can we process it? And what is it doing to our sense of intimacy? So I know from my patients that although at the beginning of therapy, many of them often complain, gosh, you know, I am not sure I can carve out 50 minutes once a week travel time, you know, I have so many work responsibilities and 17 children at home. But once they then get, you know, immersed in the process and see how very valuable that protected time is, they all do say, “Oh my god, this is so wonderful. This is the only space I have where I don't have to rush. I don't have to do homework. I don't have to answer emails. I can just really say honestly, what is on my mind”. So I think in some ways therapy culture has thrived not only because it is a very powerful… in good hands, it is a very powerful intervention, the treatment technique, call it what you like. But I think it's also for many people a refuge from this deeply non intimate, overwhelming world of too much communication.
Dr. Dave: Let me break in here for a moment to tell you about today's sponsor, betterhelp.com and online therapy site. Did you know that better help is the largest online counseling platform worldwide? They changed the way people get help with facing life's challenges by providing convenient, discreet and affordable access to a licensed therapist. Better help makes professional counseling available anytime, anywhere through a computer, a tablet or a smartphone. You'll get timely and thoughtful responses. Plus, you can schedule weekly sessions, so you won't ever have to sit in an uncomfortable waiting room. Also, you can log into your account anytime and send a message to your counselor. I like to test out the services I recommend. And so I had a number of video sessions with better help therapists Marjorie Fagan, I was really impressed by her deep listening. Better help wants you to start living a happier life today. Visit their website and read their testimonials that are posted daily. For example, here's one from Today: I quote “the biggest achievement I've made is truly fighting for myself. Through working with Ico and taking the time to discuss various issues with her, I've become a bigger advocate for myself, and I'm so proud of that” close quote. That's better. H. E. L. P. betterhelp.com and join the over 500,000 people taking charge of their mental health. With the help of an experienced professional, Shrink Rap Radio listeners get 10% off your first month at betterhelp.com/shrink. Once again, that's better help.com/shrink. Now back to the interview.

Dr. Dave: You know another place where my mind went as I was thinking about fame and celebrity was... wondering about the evolutionary advantage. Like, I think that you know, I'm coming from the place of thinking there must be an evolutionary advantage... that we would have an unconscious need to, to be seen to be recognized to be valued. And I think it relates maybe even to in the animal kingdom, as well as... we are those as well.

Prof. Kahr: Well, listen, you and I both come from an old school psychology background. So I know you're more than familiar with the work of the famous Harry Harlow.

Dr. Dave: Oh yes.

Prof. Kahr: You know when you when you're in his for those listeners who are not familiar with how those work, he was one of the greatest American comparative psychologists and studied what happens when you take little baby monkeys away from the mummies. And the consequences as we know are not good. The monkeys become forlorn. They become they become depressed and even if they have a little wire monkey given to them as a substitute, they cling on, because we all need those kinds of very basic primary objects that we can, you know, hold on to who can make us feel safe. So I think that I think that in many ways, one of the functions of celebrity in the unconscious mind is that we try to create these people to become familiar figures for us. Yes. And even though sometimes the celebrities are hated, they become a vehicle for the discharge of our hatred. You know, a lot of people slag off and insult either politicians whom they don't know personally, or you know, film stars. I mean, I was just having a conversation with somebody who mentioned a particular film star said “I'd never go to see that film. I
“hate that actress she just drives me crazy”. And I thought, well, you know, “You've never met this actress Why is she driving you crazy? What has she done that's so terrible”. But we choose these public figures as, as vehicles into whom, on to whom we can project our most toxic internal emotions, you know. Freudian old school would call that simply the act of projection… that you have something unpleasant inside yourself, generally angry feelings or frightened feelings, and then you locate it in somebody else.

Dr. Dave: Yeah. And of course that dynamic is partly... again, going back to the internet, you see people attacking other people being very, very negative and saying things to them that they would probably never say in person,

Prof. Kahr: That’s right.

Dr. Dave: But because that’s anonymous, they can get away with it.

Prof. Kahr: Absolutely, absolutely. Now, I have I have worked with a number of people who, who have, you know, done things in public, either written books or perform something somewhere or be in as a public event. And there's a whole feed of people saying, you know, “Oh, I can't believe he wore that coast”, or, you know, “How could she have said something so stupid” or what have you. And I think the more experienced and more robust of them realize that this is just part of the deal that, that if you are seeing or heard in some way, everybody's going to have an opinion. But I think people who are encountering that kind of response for the first time can get really, really very hurt by it very... hurt indeed.

Dr. Dave: Yes. We see young people committing suicide because they've been defamed on the internet or somewhere.

Prof. Kahr: Yeah, no, I think it's I think it's I think it's, I think we're getting our heads around understanding the benefits of this advanced form of a technologized culture. But also, I think it comes with many warning signs as well. That you and I and fellow mental health workers are starting to see in the consulting room on a very, very frequent basis indeed.

Dr. Dave: Yeah. So, let's go to the psychoanalytic sphere. And I was interested that you, you know, you found letters from Freud and also in some of his writing that Freud actually was interested in fame. Tell us a bit about that.
Prof. Kahr: Freud, Freud was interested in fame, I think, you know, he did have a yearning, burning passion to be recognized. You know, he didn't want to go on, you know, America's Got Talent! It wasn't fame in that way. But let's not forget that Freud was himself the Son of a very, very impecunious mid-19th century Jewish wall traitor, you know, the family. The family struggle just to eat. And, and the family moved to Vienna and I think Freud had a real appetite to, to make a mark. And he was he was very, very aware… he was he was very much loved and supported by his mother. I think that gave him a great sense of confidence. She used to call him “Mein goldener Ziggy” my golden Sigmund! And it gave him the kind of boost that allowed him to have a sense of authorization. And then as a young man, he was very blessed to have attached himself to some important mentors. And we know that the mentoring process is like an honorary parental process for someone who is training. You know, he worked in Paris with the great neurologists Jean-Martin Charcot and he had Josef Breuer in Vienna, who was with Freud, the progenitor of what we now call the talking cure. So Freud had a lot of people who looked after him. And I think it gave him the confidence to then share his ideas in a in a wider way. But he did have very grandiose fantasies. He did write to his German colleagues Wilhelm Fliess, and said “I am a conquistador”. You know, “I want to be a Conquistador of human psychology”. So, so he was very, he was very open and very frank about, about this wish to be recognized. And then of course, he produced so much work and so much brilliant work, it must be said. I think Freud has become famous and I think he deserves his fame only too much. He really, really does. But yes, I think he pursued fame in a very serious way. And I think one of the real pieces of genius of Freud in becoming famous is that he didn't work as an isolated practitioner, saying, “here's my new book on dreams. It's brilliant”. You know, “Make me be famous”. He didn't do it in that way. He cultivated a wide community. Freud was a great host. Because in in 1902, he invited four fellow Jewish physicians to his home in in Vienna and he said, “Guys, you know, we're going to meet every other Wednesday night. come round. I serve your black coffee will smoke endless cigars” as was the style in those days. And “we'll study my work in detail”. And Freud really created his own royal court. And this just grew and grew. So the little study group that started in 1902, with four members, then in 1908, 6 years later, became the bedrock for the Vienna Psychoanalytical Society. And then Freud said “I need a bigger community. So I'm going to do something really radical. I'm going to allow women to join the Vienna Psychoanalytical Society”. This was completely unheard of that women would be allowed to join a private male medical organization. And in 1910, there was a big debate at one of the meetings of the Vienna Society when a woman by the name of Margarethe Hilferding, a female physician, one of the first women to train medically in Vienna… was a very radical, brave undertaking. She wanted to become a member and most of the guys in the group said “No, no, no! We can't possibly have women”. But Freud as the leader of the group put his fist down and he said, “Dr. Hilferding is going to join”. So the name is very little known nowadays. But Margarethe Hilferding was the first official, female mental health professional in world history. Certainly the first psychotherapeutically orientated female. And very, very tragically died, I'm afraid, on routes to the concentration camps during the Second World War.

Dr. Dave: I love the detail of your historical research and it provides us with so much so much richness. And he's even beyond that to include non-physicians at some point.
Prof. Kahr: Yes, yes, of course, of course, yes. He began by male physicians, then he brought in the women. And then he brought in people from other backgrounds. And he said that, “to facilitate the talking cure is not primarily a medical intervention. It is a psychological intervention”. So Freud loved people who came from backgrounds in the arts or literature and so forth. So he really, I think, did a great deal to humanize psychological medicine, as it would have been called at that time. And I think he did so partly because he really did have the data. He really did come up with a method for how to work through neurotic and psychotic constellations. But I think he also did too because there was a tremendous appetite in him to be recognized and, and I think he did it on behalf of other persecuted Jews. I don’t think Freud… I don't think that Freud's voyage towards becoming the most famous psychologists in world history was simply a grandiose, narcissistic personal journey. I think he became the voice of literally millions of marginalize people saying, you know what, the world is not run by Austrian, Catholic, Caucasian males! That would have been the white male equivalent of Freud's arena. The Austrian empire at that time was completely dominated by Catholicism, by the monarchy. The Emperor Franz Josef was sitting on the throne. And women had very little place in the Empire, Jews sadly had no place at all in the empire. They'd only recently been given citizenship, and had been persecuted for zillions of years and would soon become persecuted again for many years more in really grotesque, absolutely grotesque ways. So I think Freud's quest for recognition was not just, you know, a man saying, hey, I've got to be famous so that I can get my autograph here and there. I think he was speaking on behalf of all the marginalized people in town. And don't forget David that when Freud advanced his theory about the psychological origins of mental illness, he did something really, really radical because he challenged the very predominant theories of brain degeneration as most late 19th psychiatrists believe that you if you were crazy, it was because there was something very profoundly wrong with your brain. And this was a form of discourse that got very, very poisoned with anti-Semitic rhetoric. So most of the medical periodicals at this time put forward the view that Jews had very, very high rates of mental illness and word was because they had inferior brain structures. So Freud really challenged that he said: You know what folks? We've all got the same unconscious. We were all brought up by mommies and daddies. We've all struggled in the intimacy of a little nuclear family arrangement. That's what drives you crazy. So he did something, I think, quite humanizing. So I think Freud's relation to fame is in a different category to people who go on these quick talent shows or who need to become recognized because of their wonderful you know, website or what have you?

Dr. Dave: Oh yes. And you know, they say pioneers get arrows in their back and his work definitely brought… it was a mixed blessing. It brought…

Prof. Kahr: It was, it was. He'd had a lot of admiration, a lot of loyalty and a lot of hatred and attack. And the whole time I've been in this field I've met, you know, so many pro-Freudians and so many anti-Freudians. So I think that in some ways, Freud as a psychological celebrity, gives us an indication of how people you know… There's nobody living today who ever met Sigmund Freud everybody who knew him personally and could speak from personal experiences is now deceased. With the exception of, I believe, one of his nonagenarian grandchildren, but pretty much everybody who new Freud is, is now dead. But,
you know, we use is an object inside in some ways, how we treat Freud as a celebrity, whether we idealize him and worship him, whether we denigrate him, or whether we simply treat him in a more ordinary way, I think very much depends on our own state of mind as human beings.

Dr. Dave: You know, in your book, you point out that speaking of the mixed blessing, his fame actually saved him from the whole costs that… You pointed out that he was able to immigrate to England were less famous people would not have been able to get out of the country, and particularly Jews who saw what was coming on the horizon and he was able to move to England.

Prof. Kahr: Yeah, I'm so glad you brought that up. I mean, it is both a source of great relief for those of us who have a great affection for Freud and pleased that he survived, but it is also a very sad and very, very tragic story that he got unique treatment as a celebrity Jew. No other Jews that I know of at that period of time in 1938 was looked after and protected in the same way. Most succumbed to the Nazis. You know, I mean Freud… when the National Socialist Party started to infiltrate Germany, many of the early psychoanalysts in Berlin and in Vienna, they could see the writing on the wall, and quite a number of them fled by 1933, 1934, 1935. Freud… Don't forget he was already… by the time Hitler invaded Austria and annexed Austria during the so called Einflus and made Austria part of the German empire, Freud was already in his 80s. He was very elderly. He was very debilitated with a very advanced, very painful cancer of his jaw. He had multiple surgeries and, and very primitive radiotherapy treatment. So he wasn't rushing at that at 81 to start packing his bags. His colleagues pleaded with him, and he just refused to budge. But eventually it became clear that if he did not get out of Vienna, something ghastly would happen. And very shortly after the Nazis infiltrated Vienna in March of 1938, they invaded Freud's home. They stole all his money. They questioned his daughter, Anna Freud, the great child psychoanalysts, they brought her into the Gestapo headquarters and the inquisition. Her they A rifle to his set his eldest son Martin Freud's belly, and threatened to kill him. So Freud knew that this was now getting really, really into a serious danger. So he agreed that he would emigrate. And the only reason that Freud got out of Vienna, alive, especially at that late days when he finally left on the 4th of June 1938, is because he had the protection of Franklin Eleanor Roosevelt and Winston Churchill, who were kept briefed on his status. And he had tremendous intervention from three of his closest disciples and associates: the French princess Maggie Bonaparte, who was a great grandniece of the famous Napoleon Bonaparte, and she was married to Prince George of Greece and Denmark and also a distant relative of the British royal family, and she had an enormous fortune and she her fortune to bribe the Nazis to let Freud out. So she was a great ally. One of Freud's patients was the American ambassador, William Bullitt, who was very, very close to all the people in the American government and he worked very hard to campaign to get Freud released. And the great Welsh psychoanalyst, the founder of the British psychoanalytical society, Dr. Ernest Jones... He was a champion skater in his spare time. He loved skating. He even wrote a book on the Psychology of Ice Skating. And one of the people he knew from his local skating rink was the one of the members of the British cabinets Samuel Hall. And they got together to arrange the special entry permit for Freud and his family to come to London. So with all of these high powered people, keeping an eye on Freud as a celebrity Jew, he was finally given permission to leave Nazi infested Vienna. And that is how he got out. It was his celebrity status that saved his life.
Dr. Dave: This is feeling contemporary for me in an odd way, which is that I've been listening to an audiobook form to a novel set in 1936 by Philip Kerr. It's a detective novel. And, and I don't know if you've ever read any of his books. He wrote a three, I think a three book series about that period and the private eye is a guy named Bernie Gunther, and he's 1936 and it really details of some of what occurs in this novel with a detective. They actually ended up Going to Dachau before it was placed of mass... It was already a bad place in 1936, even though the mass deportations and so on hadn't really gotten in full swing at that point. But he brings it all very much to life.

Prof. Kahr: Oh, thank you for that recommendation. I'm familiar with the name of Philip Kerr but I haven't read any of his books, but I shall do so now. Thank you for that recommendation.

Dr. Dave: I think it'll put you right there. And some of it is a little difficult to stomach because that period was so horrible.

Prof. Kahr: So horrible.

Dr. Dave: And he does a good job bringing it to life.

Prof. Kahr: I think it's not accidental that so many of us still want to and need to keep telling the story in one form or another whether through an academic historical narrative, through a fictional narrative, talking about it on radio on podcasts... It was it was so traumatic worldwide.

Dr. Dave: And it's so important not to forget.

Prof. Kahr: I think we're still processing it. Yes. And as you say, important not to forget, absolutely.

Dr. Dave: It shows us what human beings are capable of and it's not good. It's not a pretty picture. But getting back to the psychodynamics a bit of, you know, of fame and let's talk about those. So, you know, one of the places I went to is the one that you were touching on earlier the desire for attention from parents. And then I think somehow it gets generalized to peers and then maybe beyond one's peers.
Prof. Kahr: Yeah. I mean, one of the key theories of celebrity which I've tried to elaborate in this short book is what psycho analysts called the primal scene. It's a very ancient Freudian concept but it's so incredibly basic. And Freud as both an analyst to patients, but also as a father of six children and grandfather to many more, he really made us aware for the first time as psychology practitioners, how curious little children are about what goes on in the parental bedroom.

Dr. Dave: It's true!

Prof. Kahr: I don't have to elaborate on the details. But, you know, talk to any parent who's got a five year old or a four year old at home at the moment. You know, first thing that happens on the Saturday morning, little kid wakes up before mommy and daddy wake up or - we need not be heterosexist about it - before mommy and mommy wake up or daddy and daddy wake up. It could be any combination nowadays. But you know, this child will wake up and will run into the parental bedroom. And where does the child position himself or herself? Not at the side, not at the foot of the bed. They generally, you know, lunge themselves between parent A and parent B. And partly they do so because it's warm and toasty. They hope that both parents will want to love them up and unfold them. But they also have an unconscious desire to split up the parental couple, to make sure that a. they're not focusing on themselves rather than on the child and b. to make sure that they're not producing another annoying little sibling in mommy's tummy. So there is something about this real yearning to get inside the parental bedroom and find out what is going on. And I think that when reporters go, you know, absolutely full blast to, you know, look at people like you know, used to be Princess Diana in this country. Now thereafter Prince Harry's wife, the actress, Megan Markel, you know they want to get inside the bedroom and find out, you know, who has she been sleeping with? What did she eat for supper? What's in her rubbish bin and you know all of that. I don't know who the current American, you know, pop star or film star young celebrities are that the photographers are just chasing down the boulevards, but every generation has one where they're just hounded by the paparazzi. I suppose Princess Diana comes to mind very viscerally in recent memory because we don't even know whether, you know, what exactly happened when her car crashed that night, that fateful night in Paris, whether she was you know, being chased by paparazzi who just wanted to get a picture of her with her current boyfriend. So I would regard that at the unconscious level as a real expression of the primal scene. That Princess Diana was for many Britons and people worldwide... she was like an honorary mummy figure, you know. She was the age of most people's mummies when they were when they were young kids in their 20s or early 30s. And then there's just this wish to be inside her mind, inside her body, inside her bedroom, you know, inside her diary and so forth. And I think that's one of the functions of just, you know, stalking celebrities... because we do know that serious celebrities are at great risk of being stalked and I reported a few cases in my book of some pop stars, who were actually murdered. There was one pop star who was actually killed by the person, you know, not a crazy stranger patrolling the streets, often his or her head on drugs, but this popstar was killed by the president of her own fan club.

Dr. Dave: Oh my goodness, oh my goodness.
Prof. Kahr: Which just shows that there is a very toxic, very pathological side to that celebrity worship syndrome because actually, at one level, you hate the celebrity that you claim to admire, because there’s tremendous envy of them for their capacities in many cases. But also, you want to be their object of desire. Not some other fan.

Dr. Dave: Yes, yes. I've wrote in my own notes here, the darker side of jealousy and envy. There's so much more here. But we were going to try to cover two books in one session. So we're going to skip it. You know, I had thought we might talk about the dynamics of identification and projection, the role of narcissism and exhibitionism. And you wrote about the contributions of Freud and Winnicott. I'm going to jump you to, to the bottom line, to summarize your own psychodynamic theory.

Prof. Kahr: Yeah, I mean the good… you're quite right. We can't, we can't possibly cover all the different points in a relatively short interview, David. But the good news about this particular book called Celebrity Mad is that it is rather a short book, I think it's only 100 pages. So if there are people listening to work, who are keen to learn more about the underlying unconscious dynamics was one can read it very reasonably efficiently. But what I tried to demonstrate really, I suppose bottom line in the book, is that, I think it’s the psychology of the viewers that's much more interesting than the psychology of the specific celebrities because we use these people in an unconscious way to take care of some of our uglier emotions. And we use them to fall in love with them. So that that gives us some opportunity to try to have a primitive experience of falling in love with a mommy figure or a daddy figure that we feel we've never quite got enough contact with. So you know, young women are at very high risk of being used and abused to celebrities, because they are the people who are most reminiscent of mummies who are still most people's primary caregivers, right.

Dr. Dave: Yeah.

Prof. Kahr: So I think there is that element of it that we we want to, you know, get inside their bodies. We want to see them naked, you know. We want to follow them down the street, that kind of celebrity stalking quality. But I think there's something far more toxic, far more invasive, far more deadly, which is how I link celebrities, to infanticide and I talk about, you know, the famous ancient myth of the young, beautiful people who were sent to the Minotaur. You remember the old ancient Greek myths. And they were sacrificed literally. The most beautiful celebrity boys and girls in the village was sent to be killed by the Minotaur until Theseus took on the Minotaur and flew him. But there's something about these television programs for example. I don't know what… I didn't watch them, so I'm not up to date on all of them. But I know there are literally hundreds and hundreds of them. I think there's one called “America's Got Talent” isn't there, that’s very popular where all these very, you know, attractive people go on and show off their skills and so forth and then the public votes, who should be elected and who should be
kicked off the program and so forth. They have singing competitions and dancing competitions and all of
that we have those here in the United Kingdom, as well. And they're extremely popular and very, very
financially successful. And I think in some ways, we both want to fall in love with the celebrities, but
then we want to kill them.

Dr. Dave: Well, I tell you to, to underscore that point. One of the classes of soul celebrities that they bring
on… because I do watch America's Got Talent from time to time. They bring on acts that involve physical
danger. And the judges are actually pushing them further and further to… Well. Okay, what you were
doing what you did last time was very exciting, very dangerous, but when you get here next time, you're
going to have to take it up a notch.

Prof. Kahr: Oh Gosh, oh my goodness!

Dr. Dave: And sometimes my wife closes her eyes. She doesn't even want me to watch those things. And
I say, “Well, nothing… you know, it wouldn't be on TV if it happened”, but it's just a hair's breadth away
from being the Roman Colosseum and actually...

Prof. Kahr: The Roman Colosseum. That's a very astute point. David. I always learn a lot when I talk to
you. I think that's absolutely right, that there is a way in which we put these people on display, so that we
can then do something to them. We can use them in one or more, what I would call unconscious ways.
We're not aware of it, you know. Consciously we say, “Oh, I really like watching this actress because
she's so pretty”. Or “I really like watching this dancer because he's so talented at dancing”. And that's
ture. I'm not disputing that. But there's an underlying layer, there's a deeper layer, which is that there is a
wish to turn them into parental objects into whose bedrooms we can then cuddle up. But there's also a
wish to then put them in in dangerous situations by stalking them or by making them do more dangerous
things, for example.

Dr. Dave: yes. Going back to my earlier mention of mob psychology, another dimension of this is
fandom. So if I'm a big fan then I am, I am banding together with brothers and sisters, we could say or
something like that, with other people who share this high.

Prof. Kahr: That’s right. And I think for many very lonely people joining a fan club is a way of attempting
to connect and it may have its helpful aspects I'm not disputing that. It may be that, you know, if we all
join the Katharine Hepburn worship society, we might make some good chums through the process. So
it's not inherently pathological. But it does also make you wonder whether by putting somebody else in
the venerated position, you attack your own sense of agency and individuality and potentiality.
Dr. Dave: Yes, yes. Well, let's talk a bit about the other book if, you know, just switch a little bit, you know... Your hundred page book is so rich that we could have many discussions about it. So you've written one that's called *Bombs in the Consulting Room*, very sexy title, *Surviving Psychological Shrapnel*. And I get the impression that that this one is a collection of essays, chapters, talks, that you've kind of pulled together into a book.

Prof. Kahr: Yes, yes, it is a collection of different talks. I think a couple have been published in earlier versions, but all have been rewritten and expanded and updated. And there is a very powerful theme, which links it all, which is really an attempt to explore the uglier side of psychological practice. That, you know, we do need to be very, very clear that the vast majority of people who come to see us in our role as clinicians, as therapists of one form or another, the vast majority of the people who come to see us whether we call them patients or clients or analysands or customers or just people who come to see us, they're good people. Would you agree? I think you would agree with that. They're honorable people. They come. They listen to what we have to say. They know that we listened to what they have to say. They work hard, you know, they honor their appointment times. They pay their invoices. They're decent people. But we do encounter quite frequently, people who are much, much more troubled, much more ill, who can be menacing, who can be threatening, who can be verbally threatening, who can be completely in a disturbed and broken down state, and can be physically threatening as well. And these are patients who hurl what I call psychological bombs into the consulting room. These are patients who can suddenly explode. These are patients who have done truly explosive things, and then come and tell us about them. These are patients who can knock over your bookcase in a state of rage. These are patients who can even, this may be very unpleasant for listeners, but experienced clinicians who have worked with the developmentally disabled and severely brain damaged and handicapped patients will know that there are patients who will even urinate, defecate and smear menstrual blood in the course of a psychotherapy session. Now, that's not the usual behavior of most people who come to see their therapists. You know, most people come in and they're very bodily clean and they leave in a bodily clean state and so forth. But there are patients who can literally hurl bodily bomb at the therapist.

Dr. Dave: Well one of the essays, maybe we can just highlight one of these essays, is the pedophile who threatened your life.

Prof. Kahr: Yes, yes. The opening chapter is about a young man with whom I worked many years ago. The cases are very detailed David, but the identities have been carefully disguised for reasons of confidentiality. But they are very true stories. And they are all of old patients that I saw literally decades ago. So it would be very, very difficult for anybody to identify these individuals. But yes, I begin with the case of a man whom I call him the book: Alfonso. And he was a teenager who had raped three very, very little children. I mean, he literally abducted them from the school playground, and then penetrated their tiny, tiny bodies. It was an absolutely horrific crime. But you know, I'm afraid to say those of us who've
worked in the forensic mental health field, we do you encounter these kinds of cases, on a not infrequent basis. So a man with this degree of violent capacity… because you have to be a pretty violent human being to do that to do that to an adult is pretty cruel. To do it to a child is almost unspeakably cruel. It is unspeakably cruel. So the likelihood that he was going to come in and treat me in a gentlemanly way was very, very slim, shall we say? So I knew from my previous work in the forensic mental health field, and by forensic mental health for those of your listeners who are not familiar with it, we mean patients who have engaged in illegal activities, so murderers, pedophiles, arsonists, rapists, thieves, anybody who puts their psychopathology out in the public sector, and breaks the law in one of those very, very destructive ways. So I had been working at the Tavistock clinic here in London on a special project. That was partly funded by the British Department of Health to work with young pedophiles, teenage pedophiles, in the hope that if we caught them early and got them into therapy early, we might do a sufficiently good intervention that would then prevent them from turning into career pedophiles, what is what is known in the literature as the invariant pedophile. Because by the time, you know, you're already in your 20s or 30s, your sexual perversion is very tightly sealed in your mind. And there are many pedophiles who across their careers have harmed and raped literally hundreds of children. So we were trying to do an early intervention by getting to them right at the beginning of the experience of criminality. So I’d worked with this, this young, teenage pedophile Alfonso and he was a very frightening man to work with. First of all he was he was nearly twice my height. He was about six feet seven inches tall, extremely, extremely tall. And you know, if he had attacked me physically, he could have he could have done horrific, horrific damage. But he was very menacing and very threatening. He did knock over a bookcase at one point. And he did at one point, come in with his fingers tucked into his trouser pocket, telling me that he had a gun in his pocket, and then he was going to shoot me and he kept playing around with his finger sort of poking it through the trousers. I think symbolically the poking finger through the trousers was his attempt to show me how he communicates with his genitals, because it was like it had a very dangerous penis like, phallic like structure in his pocket. And then at one point, he said… he simply just put his hand deep into his trouser and then pulled it out very quickly and aimed his fingers at me as though he was shooting me. And for a few seconds, I literally didn't know whether he was pretending to shoot me or whether he really did have a gun. I thought as he was living in a in a secure facility and he was brought to my office each week by a probation officer, I knew that the likelihood that he had a real gun was very slender. But he was able to generate a tremendous amount of terror and a tremendous amount of menace. And that had never happened to me before with a patient and has never happened to me since with a patient. But it's an example of what I would call a psychological bomb where a patient just hurls something at you both as a sadistic attack on you because I think a lot of our very, very violent disturbed patients hate the fact and envy us for not being as disturbed as they are. I think we do become sources of envy. But it's also, I think, at the base level, a really profound way to communicate. Look at what's going on in my mind. Look at what I do to other people helped me to understand this. It was it was almost a way of bringing his pedophilic perversion into the room in a very dramatic way. And what emerged after that, I mean, obviously it took me a few seconds to catch my breath and experience the relief that I hadn't been shot with a gun in his trouser pocket. But he did reveal to me for the first time how his father had died when he was a young boy. I knew that the father had died from heart disease that was part of his history. All the social services reports included that. But there are heart attacks and there are heart attacks as we know. And what Alfonso hadn't told anybody previously, but which he did tell me when I began to ask what was going on, you know, beneath this very violent action that he'd thrown into the consulting room in this
symbolic form. I learned that when he was literally about seven years old, he was sitting in the family kitchen while his mummy and daddy were having a huge fight and at one point, David, very heartbreakingly, the mother went to the kitchen drawer, pulled out a very large carving knife and held it above the father's head, threatening to stab him. She didn't stab him. But he was so frightened he just started to have a massive coronary episode. And he literally keeled over and died in the little boy's presence.

Dr. Dave: Wow.

Prof. Kahr: It's one of the most horrific stories and one of the most tragic, literally heartbreaking stories. I think that episode did break the Father's heart in a fatal way. And I think in a way it gave Alfonso permission to say, “Okay, I'm going to use my own knife. I have a penis, and I'm going to now harm, you know, innocent people and scare them half to death”.

Dr. Dave: My goodness. So to jump ahead, did you end up feeling that you had any degree of success with him? I know you were hoping to get serial offenders to not be serial offenders.

Prof. Kahr: Yes, absolutely. We had a long psychotherapeutic journey together. And during the time that we worked together in psychotherapy, we really tried to unpack the deep roots. And this particular traumatic episode was of course, a big causative factor, a big etiological factor, I think, in the development of his violence towards young people because as a young boy, he had had to endure something very violent, which resulted in the death of his father. So we work very hard. And I'm pleased to say that during the time that he was in treatment with me, he did not reoffend at all. He'd already been apprehended and was in a secure, carefully managed facility. But from what we know from follow up, he has remained a loyal citizen, and has stopped harming little children. And this project was a really, really important project and I must give credit to the senior colleague at the Tavistock clinic who really engineered this project, Dr. Eileen Vizard who's one of our most distinguished forensic child psychiatrists in this country and this was entirely her plan and I had the privilege of being one of the one of the members of staff who worked on this project. But with all of the patients who were under Dr. Vizard’s care and those members of the team, as far as we know, nobody reoffended while they were undergoing psychotherapy. They were able to put their violent feelings towards children into words in the session, rather than acting them out concretely with little people. But the price that we as therapists had to endure is that we had to deal with their bombs. Because many of them could be quite, quite menacing, quite threatening, even physically threatening with us. So this is an ugly book if I can describe it that way. It's not like reading but my colleagues, I'm pleased to say, have really, really embraced this book. And in some ways, I think this book is, is reaching people more than some of my others have. I thought that nobody would read this, but actually colleagues are recognizing that they... Everybody has their own version of being bombed in some kind of way, in some kind of psychological way. And that this is part of the challenge of working in the psychotherapeutic profession because we do get to see the most
vulnerable parts of people, the most disturbed parts of people, indeed, often the ugliest parts of human beings, and it's got to come out so that we can then use our calm intelligence, our calm clinical intelligence, to help analyze it and give it meaning and make sense of it and then transform it from action into words.

Dr. Dave: Wonderful, wonderful. That's a wonderful summary. And I do highly recommend both of these books to my listeners. And Professor Brett Kahr, it's been delightful as always, and I want to thank you for being my guest again, on Shrink Rap Radio.

Prof. Kahr: Thank you, David. It's an honor to be one of your guests. I do listen to this podcast constantly. And I always learn so much. And you are a man of tremendous graciousness. And I'm so pleased that the American Psychological Association has recognized the contribution that you have made because you have really been pioneering the fields of media psychology and spreading the knowledge in a very generous way and bringing us all together. So thank you for doing what you do.