
The Trauma Question

Roger Luckhurst

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'Roger Luckhurst's *Trauma Question* is a tour de force ... His prose is lucid, his choice of examples illuminating, and his analyses consistently informative and well developed.'

—Dominick LaCapra, Cornell University

'This is the most comprehensive, intellectually exciting and elegantly written book that I have read in the field.'

—Patricia Waugh, Durham University

'Luckhurst's *The Trauma Question* covers an extraordinary range of materials in a most thorough and competent manner.'

—Sander Gilman, Emory University

In this book Roger Luckhurst introduces and advances the fields of cultural memory and trauma studies, tracing the ways in which ideas of trauma have become a major element in contemporary Western conceptions of the self.

Luckhurst outlines the origins of the concept of trauma across psychiatric, legal and cultural-political sources, from the 1860s to the coining of Post-Traumatic Stress Disorder in 1980. He then explores the nature and extent of 'trauma culture' through English and American sources from 1980 to the present, drawing upon a range of cultural practices from literature, memoirs and confessional journalism through to photography and film. The study covers a diverse range of cultural works from writers Toni Morrison, Stephen King and W. G. Sebald to artists like Tracey Emin, Christian Boltanski and Tracey Moffatt and film-makers David Lynch and Atom Egoyan.

The Trauma Question represents an important step forward for those seeking a greater understanding of this controversial and ever-expanding area of research.

Roger Luckhurst teaches in the School of English and Humanities, Birkbeck College, University of London. He is the author of '*The Angle Between the Walls*': *The Fiction of J. G. Ballard* (1997), *The Invention of Telepathy* (2002) and *Science Fiction* (2005).

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>*Sigh*<

Still, this comes your way with unbounded love.

Introduction

In 1980, the American Psychiatric Association included in the new edition of its official diagnostic manual the symptom indicators for a new illness: Post-Traumatic Stress Disorder. Those confronted with an experience involving ‘actual or threatened death or serious injury, or a physical threat to the physical integrity of the self’ considered to be outside the range of normal experience are diagnosed with PTSD if they present certain clusters of symptoms. Individuals who experience wars, disasters, accidents or other extreme ‘stressor’ events seem to produce certain identifiable somatic and psycho-somatic disturbances. Aside from myriad physical symptoms, trauma disrupts memory, and therefore identity, in peculiar ways. The first cluster of symptoms relate to the ways in which ‘the traumatic event is persistently re-experienced’ – through intrusive flashbacks, recurring dreams, or later situations that repeat or echo the original. Weirdly, the second set of symptoms suggests the complete opposite: ‘persistent avoidance of stimuli associated with the trauma’ that can range from avoidance of thoughts or feelings related to the event to a general sense of emotional numbing to the total absence of recall of the significant event. A third set of symptoms points to ‘increased arousal’, including loss of temper control, hyper-vigilance or ‘exaggerated startle response’. Symptoms can come on acutely, persist chronically, or, in another strange effect, appear belatedly, months or years after the precipitating event (American Psychiatric Association 2000: 467–8).

The arrival of PTSD helped consolidate a trauma paradigm that has come to pervade the understanding of subjectivity and experience in the advanced industrial world. Each successive edition of the *Diagnostic Manual* has expanded the categories of those who might be diagnosed with PTSD. At first PTSD was only attributable to those directly involved, but ‘secondary’ victim status now includes witnesses, bystanders, rescue workers, relatives caught up in the immediate aftermath, a proximity now extended to include receiving news of the death or injury of a relative. An understanding of the psychological consequences of trauma has percolated into many different contexts, and Western cultures have convulsed around iconic trauma events. Families might be found to conceal histories of domestic abuse, as recovered memory treatments dissolve the psychic defences of denial and amnesia and whole sections of traumatic childhoods return to consciousness in full, horrific technicolour. Collectives, whether they are political activists, survivor

groups, or ethnic, regional or national formations unite around the re-experiencing of their woundedness. Histories of gender, sexual or racial violence have indubitable reasons for finding explanatory power in ideas of trauma, yet traumatic identity is now also commonly argued to be at the root of many national collective memories. From Sigmund Freud's speculations on the buried trauma at the origin of Jewish history, one can now read up on the traumas that drive post-war Germany, post-9/11 America, Eastern Europe after Communism, or post-colonial Britain (see Santner 1990, Kaplan 2005, Butler 2004, Eyal 2004, Lindsay 2004, Howe 2003). To Andreas Huyssen, it seemed as if the entire twentieth century was marked under the sign of 'historical trauma' (Huyssen 2003: 8).

In this cultural context, extremity and survival are privileged markers of identity. Concentration camp inmates, Vietnam and Gulf War veterans, victims of atrocities, traumatized parents and survivors of disaster are the subject of intensive political, sociological, biological, psychiatric, therapeutic and legal investigation and dispute. Government inquiries, medical task forces, newspaper leader columns and grass-roots pressure groups contest the nature and extent – or even the basic reality – of traumatic impacts. Best-seller lists have carried sagas detailing extremities of domestic violence, rape, war atrocity, terminal illness, family deaths or the tragi-comic eccentricities of traumatic memory. Academic monographs have proliferated, often appearing to subsume the whole area of Memory Studies under the sign of trauma. 'Increasingly, memory worth talking about – worth remembering – is memory of trauma' (Antze and Lambek 1996: xii). Meanwhile, in the curious world of celebrity culture, trauma can amplify or even become the sole reason for fame. What Mark Seltzer has termed the 'pathological public sphere' (Seltzer 1997: 3) periodically develops around moments of trauma and engenders a particular kind of community. Instances might include the death of Princess Diana, cruel or unusual child murders, the inauguration of Holocaust Memorial Days, or terrorist attacks on New York, Madrid, or London. One recent commentary skirts close to open nostalgia for the New York of September 2001, when, in the wake of the terrorist attacks, there was 'the real creation of new public-sphere communities': 'I felt a connection to strangers I had never felt before' (Kaplan 2005: 2, 9). For another of the leading cultural theorists of recent years writing explicitly in the wake of 9/11, grief is now one of the best means for thinking about social collectives since it 'furnishes a sense of political community of a complex order, and it does this first of all by bringing to the fore the relational ties that have implications for theorizing fundamental dependency and ethical responsibility' (Butler 2004: 22). Welcome to contemporary trauma culture.

Trauma derives from the Greek word meaning wound. First used in English in the seventeenth century in medicine, it referred to a bodily injury caused by an external agent. What wounded and what cured shared the same term: physicians applied traumatic herbs or balsams to injuries. In early editions of the *Oxford English Dictionary* the entries for trauma, traumatic, traumatism and the prefix traumato- cite solely from sources concerning physical wounds. The one exception comes from an 1895 edition of *Popular Science Monthly*: 'We have named this psychical trauma, a morbid nervous condition'. This is an early indication of the

drift of trauma from the physical to the mental realm that would start taking place in the late nineteenth century. In the current edition of the *OED*, citations to physical wounds are reduced to three and are substantially outnumbered by those from psychoanalysis and psychiatry. The predominant popular connotations of trauma now circle around metaphors of psychic scars and mental wounds. The metaphor of a psychological 'impact' still retains the sense of a wound caused by an exterior agent. The *OED* also records a further drift into general usage of the adjective 'traumatic' for any difficult or untoward event. Trauma, however, still refers to bodily injury in medicine and, as Steven Connor observes, the focus on the boundary of the skin in ritual piercing, cutting or scarification continues to play with powerful taboos in many cultures. Trauma culture has emerged whilst the skin has been 'the visible object of many different forms of imaginary or actual assault' in the modern world (Connor 2004: 65).

Indeed, it is useful to retain a sense that meanings of trauma have stalled somewhere between the physical and the psychical. Virtually every traumatic disorder has been the occasion for violent dispute over its ultimate origin, whether industrial accident, hysteria, shell shock, survivor syndrome, combat fatigue or PTSD. Are the symptoms the result of a physical, organic disease produced by identifiable external agents, or a wholly psychical disorder constructed by simulation, suggestion, mental breakdown or inherent mental weakness? Or does it emerge from the 'nerves', that uncertain, interstitial locale somewhere between the body and mind? Nervous shock or nervous exhaustion were self-consciously produced by Victorian doctors seeking for a third term to lie between the organic and the mental realms, a switching point where the physiological and psychological converged and conversed in unpredictable ways. As Janet Oppenheim commented, 'metaphor permeated all Victorian and Edwardian discussion of the nerves' (Oppenheim 1991: 83). Arguments over the physical or psychical nature of trauma regularly refresh their grounds of argumentative authority, yet the structure of the dispute has not substantially changed for a hundred years.

Trauma is a piercing or breach of a border that puts inside and outside into a strange communication. Trauma violently opens passageways between systems that were once discrete, making unforeseen connections that distress or confound. Trauma also appears to be worryingly transmissible: it leaks between mental and physical symptoms, between patients (as in the 'contagions' of hysteria or shell shock), between patients and doctors via the mysterious processes of transference or suggestion, and between victims and their listeners or viewers who are commonly moved to forms of overwhelming sympathy, even to the extent of claiming secondary victimhood. Therapists have discussed the problem of developing 'vicarious traumatization' from listening to difficult patient material; E. Ann Kaplan has used this idea to suggest a wider problematic of the 'translation' (through the media and other routes) of trauma across different communities. Transmissibility has become a central ethical concern about the representation and response to traumatic narratives and images. Can or should the right to speak of trauma be limited to its primary victims? Who can claim 'secondary' status without risking appropriation? Dominick LaCapra, recognizing trauma's potential

‘to confuse self and other, and collapse all distinctions’ has suggested a distinction for criticism between identification, which falls into this dangerous confusion, and empathy, which preserves distance (LaCapra 2001: 21). His reiteration of this divide suggests that it is constantly under threat of being overrun.

This uncertain, unbounded outward movement of trauma from its original wound is dramatically demonstrated by the very reach the term has now attained. To grasp its full resonances, one needs to be at least minimally aware of the history of psychodynamic psychology in the late nineteenth century including, but far from exclusively, the work of Sigmund Freud, and then the progress of the law of tort regarding recovery of damages relating to the negligent infliction of ‘nervous shock’ since 1901, and then the role of military psychiatry and pension agencies across successive wars of the twentieth century, and then the place of trauma in deconstruction and post-structuralist philosophy since about 1990, and then sociological theories of trauma as ‘a socially mediated attribution’, a form of collective memorial practice that therefore rejects the ‘naturalistic fallacy’ of psychologists (Alexander 2004: 8), and then recent studies of the brain physiology of the *locus coeruleus* and the effects on memory and emotion of catecholamines like norepinephrine when under severe stress, and then, finally, the revolution in treatments of traumatic stress using a combination of drugs focused on serotonin and cognitive behavioural therapy. Given the specialization of knowledge and the sheer volume of discipline-specific scholarship, it is a severe stretch to acquire this range of expertise, with almost inevitable lapses of knowledge and understanding. As LaCapra observes, ‘No genre or discipline “owns” trauma as a problem or can provide definitive boundaries for it’ (LaCapra 2001: 96). Trauma is also always a breaching of disciplines.

However, the dominant model for cultural trauma, my principal concern in this book, derives from a relatively narrow segment of this complex, multi-disciplinary history. The work of Cathy Caruth, one of the central figures who helped foster the boom in cultural trauma theory in the early 1990s, turns on the device of *aporia*, or unresolvable paradox. Trauma, Caruth suggested in an introduction to a special issue on ‘Psychoanalysis, Culture and Trauma’ in 1991, ‘extends beyond the bounds of a marginal pathology and has become a central characteristic of the survivor experience of our time’ (Caruth 1991b: 417). Even so, trauma was an inherently ‘paradoxical experience’ (Caruth 1991b: 417). An event might be considered traumatic to the extent that it overwhelmed the psychic defences and normal processes of registering memory traces. Trauma somehow is seared directly into the psyche, almost like a piece of shrapnel, and is not subject to the distortions of subjective memory: it is ‘a symptom of history’ (Caruth 1991a: 3). Yet precisely because of this unusual memory registration, it may be that what is most traumatic is that which does not appear in conscious memory. ‘Traumatic experience’, as Caruth formulates it, ‘suggests a certain paradox: that the most direct seeing of a violent event may occur as an absolute inability to know it’ (Caruth 1996a: 91–2). Paradoxes intensify around this critical instant of a defining yet unknowable memory lodged in the mind: under the sign of trauma, ‘a history can be grasped only in the very inaccessibility of its occurrence’, ‘its truth is bound up with its crisis of truth’ (Caruth 1991a: 7). A further Freudian

paradox is the strange temporality of traumatic memory: an event can only be understood as traumatic *after* the fact, through the symptoms and flashbacks and the delayed attempts at understanding that these signs of disturbance produce. The ‘peculiar, temporal structure, the belatedness of trauma’ is another aporia: ‘since the traumatic event is not experienced as it occurs, it is fully evident only in connection with another place, and in another time’ (Caruth 1991a: 7). For Caruth, trauma is therefore a crisis of representation, of history and truth, and of narrative time. Repeatedly, there is the claim that psychoanalysis and literature are particularly privileged forms of writing that can attend to these perplexing paradoxes of trauma.

Caruth’s small body of work has been extremely influential, and it is worth spending some time on elaborating the elements it manages so effectively to condense. It could be said to derive from three distinct lines of thought. The first invokes the work of the German–Jewish Marxist philosopher Theodor Adorno on the ruination of Western philosophy by the traumatic facts of Nazism, encompassed for him in one proper name: Auschwitz. In 1949, Adorno declared, in a famous and much misquoted statement, that ‘To write poetry after Auschwitz is barbaric’ (Adorno 1981: 34). Within his broader attempt to maintain cultural critique within a remorselessly expropriative capitalism, Adorno kept returning to, and modulating, a declaration which had begun to circulate beyond his control. In *Negative Dialectics*, he saw Auschwitz as a challenge to the very act of thought itself. ‘Our metaphysical faculty is paralysed because actual events have shattered the basis on which speculative thought could be reconciled with experience ... After Auschwitz there is no word tinged from on high, not even a theological one, that has any right unless it underwent a transformation’ (Adorno 1973: 362, 367). For Adorno, all Western culture is at once contaminated by and complicit with Auschwitz, yet the denial of culture is equally barbaric. If silence is no option either, Adorno sets art and cultural criticism the severe, and paradoxical, imperative of finding ways of representing the unrepresentable.

In Adorno’s wake, the ‘problem’ of Auschwitz is the determining catastrophe that inaugurates the trauma paradigm, for after 1945 all culture must address this question. ‘We come after’, was George Steiner’s abrupt statement (Steiner 1967: ix). Giorgio Agamben has reiterated ‘the aporia of Auschwitz’ as ‘the very aporia of historical knowledge: a non-coincidence between facts and truth, between verification and comprehension’ (Agamben 1999: 12). Jean-Francois Lyotard similarly regarded Auschwitz as a ‘sign of history’, a ruptural moment of such extremity that it challenged the premises of conventional historiography. Instead, the historian ‘must break with the monopoly of history granted to the cognitive regimen of phrases, and he or she must venture forth by lending his or her ear to what is not presentable under the rules of knowledge’ (Lyotard 1988: 57). Lyotard explicitly evoked the Freudian idea of the paradoxically registered yet unregistered trauma, portraying modernity as something insistently haunted by what it had violently suppressed or forgotten in the symptom that ‘would signal itself even in the present as a spectre’ (Lyotard 1990: 11). For post-trauma aesthetics, Lyotard turned to the theory of the sublime, where representing the very failure to process

the overwhelming event paradoxically figures its success as a work of art. Lyotard gave avant-garde art a privileged place in articulating this paradox: 'What art can do is bear witness not to the sublime, but to this aporia of art and to its pain. It does not say the unsayable, but says that it cannot say it' (Lyotard 1990: 47).

The second main reference for this aporetic thinking came from Jacques Derrida's deconstruction of philosophy and its important place in literary theory in the American academy in the 1970s and 1980s. In a late lecture called *Aporias*, Derrida reflected on how his readings had always sought out significant moments of apparent contradiction or irresolution, 'so many aporetic places or dislocations' that each text tended to reveal (Derrida 1993: 15). Derrida figured the aporia as a blocking of passage, a stalling or hesitation, a foot hovering on the threshold, caught between advancing and falling back, between the possible and the impossible. Derrida had pursued the possibility and impossibility of mourning in Paul de Man's work, the paradoxes of memory in Freud's models of psychic inscription, burnt traces or cinders of memory, and the aporia of the wound in Paul Celan's poetry (Derrida 1986, 1991, 2001, 2005). Preserving the traces of these aporia was central to Derrida's commitment to responsible thought, ethics and politics: the trauma was that most Western thought suppressed this passage of undecidability, that all metaphysics enacted a kind of violence.

Derrida's principal avenue into the American academy was through the so-called Yale School from the mid-1970s. The linch-pin of this grouping was Paul de Man, who developed a particular deconstructive reading of language. In the gap between reference and representation at least some of what we intended to mean was always open to misinterpretation or error; literature in particular seemed to foreground the slippages inherent in the act of representation, and often came to be *about* this erring. To de Man, this inevitably affected the work of literary interpretation too, which he formulated in the pithy paradox: 'The allegory of reading narrates the impossibility of reading' (de Man 1979: 77). De Man's errings and slippages between reference and representation clearly informed Caruth's formulation of the paradoxes of traumatic representation (there is a whole chapter on his theories of referentiality and language in *Unclaimed Experience* and her theory of traumatic aporia was first formulated when at the Yale English department). Yet this reading of de Man was only part of a wider move by Yale critics to trauma theory. Geoffrey Hartman, whose deconstructive rereadings of Romantic literature and expositions of Derrida's work were prominent in establishing the influence of the Yale School, started to turn his interest to the remembrance and representation of the Holocaust in the early 1990s. The Fortunoff Holocaust Video Archives at Yale, which collects the testimony of Holocaust survivors, and which Hartman co-founded, prompted him to explore this area both theoretically and autobiographically (Hartman had escaped the persecution and murder of the European Jews by travelling from Germany first to England and then America as a child). By 1995, Hartman had effectively translated his long critical career into variations on the study of trauma. If trauma marks the disjunction between the event and the forever belated, incomplete understanding of the event, then Hartman argued that this

was at the heart of Romantic poetry. Figurative language is a form of ‘perpetual troping’ around a primary experience that can never be captured. Whether it is Coleridge’s *Ancient Mariner* compulsively repeating his tale, or William Wordsworth’s account in *The Prelude* of how poetic subjectivity is created through wounding events, Hartman proposed that trauma theory was a key expository device. Hartman had always emphasized that poetic discourse induced a proliferation of meanings; trauma was now the motivating ‘nature of the negative that provokes symbolic language and its surplus of signifiers’ (Hartman 1995: 540). An interview with Caruth confirmed this reorientation of his work around trauma (Caruth 1996b). Another important Yale critic, Shoshana Felman, also undertook this translation of deconstruction into trauma theory at about the same time. Felman is justly famous for her 1977 essay on Henry James’s *The Turn of the Screw*, which explored how this ghost story had driven successive generations of literary critics to a form of interpretive madness. Rather than attempting to solve the enigma, Felman examined how the text generated ambiguity, placing the emphasis not on positive knowledge but on where ‘meaning in the text *does not come off*, that which in the text, and through which the text, *fails to mean*’ (Felman 1977: 112). In 1991, Felman was still writing about the limits of interpretive knowledge, but this time in relation to Holocaust testimony, publishing a study of Claude Lanzmann’s nine-hour film, *Shoah*, a collation of survivor testimony that builds up a picture of how the genocidal machine of Nazism carried out the ‘Final Solution’. Felman was still interested in paradoxes and the limits of knowledge, but this time there was a language of crisis and urgency about taking responsibility for the historical truth, given that ours is ‘an *age of testimony*, an age in which witnessing itself has undergone a major trauma’ (Felman 1991: 41). She understands Lanzmann’s documentary project to capture the fragility of surviving witness in now familiar aporetic terms: it is ‘to make the referent come back, paradoxically, as something heretofore unseen by history; to reveal the real as the impact of a literality that history cannot assimilate or integrate, as knowledge, but that it keeps encountering’ (Felman 1991: 76). The following year, Felman published *Testimony* with the psychoanalyst Dori Laub, a text in which the trauma of the Holocaust prompts almost obsessively repeated and anxiously underlined aporetic formulae. The Holocaust is presented as ‘a radical historical *crisis of witnessing* ... an event eliminating its own witness’ (Felman and Laub 1992: xvii). ‘The *necessity of testimony* ... derives ... from the *impossibility of testimony*’, they reiterated (Felman and Laub 1992: 224).

Felman also theorized a new pedagogy of trauma, in which the effectiveness of the textual material was measured by its ability to ‘*break the very framework of the class*’ (Felman and Laub 1992: 48). Felman discovered that she had inadvertently induced a ‘crisis’ in her students, but then actively sought this disturbance as a measure of the material in communicating trauma. ‘Teaching’, Felman argued, ‘must in turn *testify*, make something *happen*’ (Felman and Laub 1992: 53). This activism presumably aimed to incite affect in students for the ultimately cognitive ends of learning, even though trauma was defined as an aporia that disarmed cognitive grasp. The classroom was a significant space through which to theorize

the affective transmission and circulation of traumatic emotions: *Testimony* headed the boom in the transformation of Yale deconstruction into trauma theory which then travelled across literary and cultural studies. Felman's theory of education appeared first in Caruth's special issues of *American Imago*, where Caruth spoke approvingly of 'the possibility of a truly pedagogical encounter ... [which] creates new ways of gaining access to a historical catastrophe for those who attempt to witness it from afar' (Caruth 1991b: 422). The academic influence of these works actively demonstrated the transmissibility of traumatic affect.

The third and most explicit source for theories of cultural trauma is psychoanalysis. That Lyotard, Derrida, Felman and Caruth all engage with trauma via Freud suggests that his work is the unavoidable foundation for theories of trauma, and this is undoubtedly the case for cultural studies. Freud's engagement with the traumatic neuroses was actually rather intermittent, and Ruth Leys comments that 'Freud's writings on trauma and the mechanisms of defence are disorganized in ways that seem to invite, or necessitate, critical discussion' (Leys 2000: 274). As a result, Freud's three major interventions have each provided models that are not always compatible but which persist into contemporary discussions. 'On the Psychical Mechanism of Hysterical Phenomena', co-authored with Joseph Breuer in 1893, regarded traumatic hysteria as a psychical disorder of memory, encapsulated in the famous epigram '*Hysterics suffer mainly from reminiscences*' (Freud 1895: 58). Traumatic memory is puzzling, '*completely absent from the patient's memory when they are in a normal psychological state*', but which persists below the threshold of consciousness 'astonishingly intact' and with 'remarkable sensory force' (Freud 1895: 60). The sketch of their treatment turned the hysteric's body into a cryptogram, each bodily or mental symptom to be traced back to a 'tormenting secret' and to be cured by '*bringing clearly to light the memory of the event ... and in arousing its accompanying affect, and when the patient had described that event in the greatest possible detail and had put the affect into words*' (Freud 1895: 57). In *Studies on Hysteria* these traumatic events related, as in the famous case of 'Anna O.', to the death of the father and repressed guilt. Three years later Freud insisted that these traumatic secrets 'in the end ... infallibly come to the field of sexual experience' (Freud 1896: 199), a position inextricably linked to the origins of psychoanalysis itself, the term Freud coined in 1896. This produced a different emphasis in theorizing the traumatic origins of hysteria. Freud's sexual theories supposed a two-stage development, an early phase of infantile sexuality that was repressed for a period of childhood 'latency' and which returned with puberty and the emergence of adult sexuality. Sexual neuroses and perversions were ascribed to deviations of the sexual aims that resulted from infantile disturbances (this normative language is Freud's own, in his *Three Essays on Sexuality*). In other words, early traumas in childhood would be forgotten in latency, but re-emerge in adults. Sexual disorders therefore acted like clues hinting at a hidden crime buried in infancy: interpretive excavations to uncover the sexual secret became the basis of Freud's case histories. This two-stage theory of trauma, the first forgotten impact making a belated return after a hiatus, has been central to cultural trauma theory. The psychoanalyst Jean Laplanche has translated Freud's term for belated or deferred action as 'afterwardsness', a deliberately awkward

word that foregrounds the odd temporality of an event not understood as traumatic until its return (Laplanche 1999). No narrative of trauma can be told in a linear way: it has a time signature that must fracture conventional causality.

Freud's sexual economy of psychic life reached an impasse in 1918, when he was forced to return to the problem of trauma a second time, at the end of the Great War. His dynamic model of the psyche could not apparently account for the symptoms of war neurosis in soldiers, which was typically marked by an obsessive return in waking thoughts and nightmares, to the pain and terror of traumatic battle scenes. This active pursuit of unpleasure forced Freud reluctantly to return to what he called 'the dark and dismal subject of traumatic neurosis' (Freud 1920a: 283). *Beyond the Pleasure Principle*, first published in 1920, was Freud's highly speculative attempt to understand what he termed this 'repetition compulsion'. In essence, the psyche constantly returned to scenes of unpleasure because, by restaging the traumatic moment over and over again, it hoped belatedly to process the unassimilable material, to find ways of mastering the trauma retroactively. In a lucid metaphor, Freud envisaged the mind as a single cell with an outer membrane that does the work of filtering material from the outside world, processing nutrients, repelling toxins, and retaining the integrity of its borders – just as the conscious mind did. A traumatic event is something unprecedented that blasts open the membrane and floods the cell with foreign matter, leaving the cell overwhelmed and trying to repair the damage. 'We describe as "traumatic" any excitations from outside which are powerful enough to break through the protective shield', Freud said.

Such an event as an external trauma is bound to provoke a disturbance on a large scale in the functioning of the organism's energy and to set in motion every possible defence measure. At the same time ... there is no longer any possibility of preventing the mental apparatus from being flooded with large amounts of stimulus, and another problem arises instead – the problem of mastering the amounts of stimulus which have broken in and of binding them, in the psychical sense, so that they can be disposed of.

(Freud 1920a: 301)

The compulsion to repeat was a rearguard action to manage the traumatic impact, Freud reverting to the original sense of trauma as a wounding intrusion from outside. Observed in children (who staged the distressing absence and return of the mother in obsessive games), Freud conjectured 'that children repeat unpleasurable experiences for the additional reason that they can master a powerful impression far more thoroughly by being active than they could by merely experiencing it passively' (Freud 1920a: 307). Repetition compulsion has become a cultural shorthand for the consequences of traumatic events: individuals, collectives and nations risk trapping themselves in cycles of uncomprehending repetition unless the traumatic event is translated from repetition to the healthy analytic process of 'working through' (see Freud 1914).

Third, Freud's late work, *Moses and Monotheism* (1939), was given over to Freud's speculations on the origin of Judaism by using the analogy of the effect of trauma

on the individual for an entire race. Freud proposed that the Jews carried a hidden traumatic secret in their infancy, the murder of their founder and law-giver Moses. After a period of latency, the Mosaic law of the one vengeful god returned, reaffirming Judaism as a monotheistic religion, which for Freud was the ambiguous onset of civilization. Largely ungrounded speculations such as this on prehistory were typical of Victorian anthropology, but Freud pressed for a structure of explanation from a 'remote field', applying the traumatic neuroses of the individual to the group. 'In it we once more come upon the phenomenon of latency, the emergence of unintelligible manifestations calling for an explanation and an early, and later forgotten, event as a necessary determinant. We also find the characteristic of compulsion' (Freud 1939: 72). In one of his clearest summations of the aetiology of traumatic neurosis, Freud argued that the compulsions deriving from a forgotten traumatic kernel displayed 'great psychological intensity and at the same time exhibit a far-reaching independence of the organisation of the other mental processes'. They act, he claimed, 'like a State within a State' (Freud 1939: 76). This analogy evoked the prejudice against Jews as unassimilated foreign bodies in European nations, and *Moses and Monotheism* was explicitly marked by the disruptions to writing caused by the rise of Nazism in Germany, the invasion of Austria, and Freud's exile in London. The book has been read as a barely encrypted autobiographical reflection on expulsion and exile.

For Caruth, *Moses and Monotheism* 'can help us understand our own catastrophic era, as well as the difficulties of writing a history from within it' (Caruth 1996a: 12). Whilst Caruth emphasizes the aporia of a history driven by an inaccessible traumatic pre-history, general notions of collective cultural traumas derive in large part from Freud's speculations. Kai Erikson defined 'collective trauma' as 'a blow to the basic tissues of social life that damages the bonds attaching people together and impairs the prevailing sense of communality' (Erikson 1991: 460). 'The communal dimension of trauma', Erikson concludes, 'is one of its distinctive clinical signatures' (Erikson 1991: 471). There is a strong counter-tradition in sociology that objects to modelling societies on the individual psyche: starting with Maurice Halbwachs, and continued with work by Paul Connerton and Jeffrey Alexander, collective memory is regarded as a set of changing social practices rather than exteriorizations of psychic structures. Yet Freud's elision of neurotic and national history has been another important place where psychological trauma has become delimited and easily transmissible by analogy, providing a set of models in general circulation.

It is striking that whilst the trauma theory pursued by Felman, Caruth and others excavated and redeployed these models from the history of psychoanalysis, there is little acknowledgement in their work of the violent disputes that erupted around Freud in the 1980s and 1990s, arguments that fundamentally re-examined the contribution of psychoanalysis and inevitably coloured the reception of any theory of trauma tinged with Freudianism. In these years, Freud was never far from the controversies over the nature of traumatic memory. In 1984, as feminist theorists advanced the thesis that sexual abuse was widespread and structural within the patriarchal family, Jeffrey Masson published his interpretation of

previously unpublished materials in the Freud archive. Masson's *Assault on Truth: Freud and Child Sexual Abuse* argued that Freud had come to the realization that all of his women patients had been sexually abused by their fathers. Although Freud had published these findings in 'The Aetiology of Hysteria' in 1896, Masson suggested that this paper had precipitated a professional and theoretical crisis, played out mainly in letters to his friend Wilhelm Fliess. Over the next two years Freud discarded the so-called 'seduction theory' for an account of the universal sexual *fantasies* of sons and daughters – the seed of the Oedipus complex that would be Freud's foundation for his psychodynamic theory of the universal development of the subject. In Masson's melodramatic account, Freud had come across a traumatic truth that he could not countenance and suppressed with a theory that turned actual abuse into structural fantasy if not fabrication. A significant strand of feminist cultural theory had relied on psychoanalysis, but Masson's Freud was a patriarch intent on suppressing the truth of women's experience. Masson's thesis generated an outpouring of heavily invested attacks and defences (see, for instance, Borch-Jacobsen 1996, A. Scott 1996, Malcolm 1997).

A corollary to this dispute began to develop in the late 1980s, when advocates of recovered memory therapies claimed to be unearthing pristine memories of repressed or dissociated childhood traumas many years after the fact in vast numbers of patients. This relied on the conviction that traumatic memory was preserved in pristine form outside conscious recall, but could be recovered complete with appropriate therapeutic intervention (called Recovered Memory Therapy, or RMT). Some claimed this to be based on Freud's model of the repression of traumatic memory. Recovered memories of abuse led to criminal proceedings and imprisonments, even changes to the statutes on limitation in some American states, the legal arguments often hinging on psychiatric expertise about the specific peculiarities of traumatic memory. The iconic legal case was the imprisonment of George Franklin in California in 1990, on the sole evidence of his daughter who had, with her therapist, recovered repressed memories of the murder of a childhood friend from 1969. Psychiatric expertise that confirmed the ability to recover repressed memories in pristine form was presented by Lenore Terr; equal and opposite psychiatric expertise that traumatic memories were unusually malleable and open to revision was presented by Elizabeth Loftus. Both published popular accounts of their involvement in medico-legal wranglings over recovered memory, part of a vast psychiatric literature (Loftus and Ketcham 1996, Terr 1994).

Already highly controversial, RMT techniques were thrown further into question by a series of cases that alleged to recover extensive networks of ritual or 'satanic' abuse. At its peak, passionate advocates claimed that 50,000 babies had been murdered in black magic rituals in America. Lawrence Wright attacked the basis of Paul Ingram's imprisonment for ritual abuse of his daughters in the *New Yorker* in 1993, his book *Remembering Satan* appearing a year later. Two high-profile cases in England claiming organized Satanic abuse collapsed in Rochdale in 1990 and Orkney in 1991. Meanwhile, at the outer fringes of this cultural imaginary, Whitley Strieber published his best-seller *Communion* at the height of these disputes, detailing his hypnotic recovery of profoundly traumatic memories of

kidnap and sexual abuse by alien creatures. A slew of alien abduction narratives followed, including the globally successful television series, the *X Files* (see Luckhurst 1998). Because therapists were anxious not to deny the reality of traumatic testimony, and thus place themselves in the position of the reality-denying Freud, these efflorescences had to be upheld as literally true. This helped the cause of counter-movements like the False Memory Syndrome Foundation (set up in 1994), which argued that traumatic memory might be iatrogenic, the product of the very therapy used to treat it.

Freud's name was regularly if often inaccurately invoked in these disputes. The campaigning anti-Freudian, Frederick Crews, regarded recovered memory as the 'stepchild' of Freudianism and which helped confirm that 'psychoanalysis was the paradigmatic pseudoscience of our epoch' (Crews 1997: 14, 9). Crews' attacks tended to be scattergun, constantly shifting their ground. Freud might indeed have figured traumatic memory as a hidden truth that could be released from repression and brought to light. However, as Richard Terdiman has pointed out, there are two models of memory that exist in productive tension in Freud's work. The unconscious might seem to preserve pristine memories, but as soon as that 'eerie fixity' reached consciousness the traumatic memory 'exhibits a positively wanton disloyalty to the truth' (Terdiman 1993: 290). As early as 'Screen Memories', Freud recognized that childhood memories were highly malleable, subject to ceaseless revision and interpretation:

It may indeed be questioned whether we have any memories at all *from* our childhood: memories *relating to* our childhood may be all that we possess. Our childhood memories show us our earliest years not as they were but as they appeared at later periods when the memories were aroused.

(Freud 1899: 322)

The difficulty that recovered memories could be constructions or confabulations had already been anticipated by Freud. However, Crews' tendentious anti-Freudian journalism was backed by a host of serious scholarly and scientific interrogations into the founding premises of psychoanalysis at this time (Sulloway 1992, Kitcher 1992, Webster 1995). Reflecting the shift away from the kind of psychodynamic models that underpinned Freud's thinking, psychiatry began to legitimate itself by an appeal to the biochemistry and neuroendocrinology of the brain from the 1970s on. This biologization, Allan Young has argued, in fact helped produce the very term 'post-traumatic stress disorder', and certainly its key symptom clusters. In fundamental ways the scientific basis for PTSD was incompatible with psychoanalysis. Thus, whilst archivists and historians exploded the myths of the origins of psychoanalysis, the reorientation of psychiatry had also marginalized Freud.

Freud's pervasion of certain parts of the humanities and his effective absence in the social and natural sciences has led to strands of trauma theory that continue along parallel tracks with only the vaguest (usually contemptuous) awareness of each other. For Caruth at least, trauma is a challenge because it is an aporia that

tests the limits of the psychoanalytic frame, even if Freud's work remains the central corpus through which to articulate the traumatic paradox. Yet, to her credit, there are signs that Caruth acknowledged the changing locus of authority. Her view of traumatic memory as a registration 'outside' registration in fact owed much to the neurobiological speculations of Bessel van der Kolk, whose work on the literal 'engraving of trauma' on the mind Caruth included in her *American Imago* special. Van der Kolk has attempted to isolate the physiological basis for the peculiar, eidetic intensity of traumatic memories and their location outside conscious recall by tracking the release of hormones in the brain at times of extreme stress. The hypothesis is that these discharges intensify emotional states (which can be re-experienced later as terrifying returns to the initial traumatic scene), but block cognitive processing and so are unavailable to narrative memory. Caruth suggests parallels to her own theorization of the unknowable fragment of history lodged in the unconscious. In a forceful critique, Ruth Leys has taken aim at Caruth's unlikely elision of poststructuralist literary theory, neurophysiology and psychoanalysis, arguing that Caruth and Van der Kolk reference circularly to each other's speculations in order to bolster up a naively literal model of trauma's psychic imprint. Leys places Caruth and Van der Kolk at the 'mimetic' pole of trauma theory, in which trauma is the unprocessed fragment of the thing itself. It is undermined by the 'antimimetic' pole, in which traumatic memory is always representational, available to memory, and therefore open to constant revision. The oscillation of these poles dominates the history of trauma back to its genealogical origins in the nineteenth century. For Leys, it means 'current debates over trauma are fated to end in an impasse' (Leys 2000: 305) since equal and opposite theories hold court. After this mauling, it might be tempting to discard Caruth, were it not that the length of Leys' critique acts as a strange sort of monument to its importance. It is still the work where the lines feeding notions of cultural trauma converge: the problem of aesthetics 'after Auschwitz'; the aporia of representation in poststructuralism; the diverse models of trauma developed by, and in the wake of, Freud.

In another 'genealogical' study, Wulf Kansteiner has charged that 'the most severe abuses of the trauma concept currently occur in the abstract, metaphorical language of cultural criticism' (Kansteiner 2004: 215). He takes aim at the 'aestheticised, morally and politically imprecise concept of cultural trauma', a loose notion that 'turns us all into accomplished survivors' (Kansteiner 2004: 194, 203). He examines a critical trajectory from Adorno through Lyotard to Caruth and into cultural studies that generalizes traumatic experiences and turns it into a problem of media signification: 'Just because trauma is inevitably a problem of representation in memory and communication does not imply the reverse, i.e. that problems of representation are always partaking in the traumatic' (Kansteiner 2004: 205). It is this reversal that has allowed trauma to saturate contemporary culture. Kansteiner's outrage is driven by his sense that there has been an appropriation of the epoch's inaugural historical trauma: the Holocaust. Any comparisons, any sense of trauma's transmissibility, its outward movement from the wound, turns brute historical fact into cheaply traded tokens of degraded 'survivor culture'. This exceptionalist stance has been a significant strand in writing on the Holocaust,

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