Cultural Trauma and Collective Identity

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CHAPTER 1

Toward a Theory of Cultural Trauma

JEFFREY C. ALEXANDER

Cultural trauma occurs when members of a collectivity feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness, marking their memories forever and changing their future identity in fundamental and irrevocable ways.

As we develop it here, cultural trauma is first of all an empirical, scientific concept, suggesting new meaningful and causal relationships between previously unrelated events, structures, perceptions, and actions. But this new scientific concept also illuminates an emerging domain of social responsibility and political action. It is by constructing cultural traumas that social groups, national societies, and sometimes even entire civilizations not only cognitively identify the existence and source of human suffering but "take on board" some significant responsibility for it. Insofar as they identify the cause of trauma, and thereby assume such moral responsibility, members of collectivities define their solidary relationships in ways that, in principle, allow them to share the sufferings of others. Is the suffering of others also our own? In thinking that it might in fact be, societies expand the circle of the we. By the same token, social groups can, and often do, refuse to recognize the existence of others' trauma, and because of their failure they cannot achieve a moral stance. By denying the reality of others' suffering, people not only diffuse their own responsibility for the suffering but often project the responsibility for their own suffering on these others. In other words, by refusing to participate in what I will describe as the process of trauma creation, social groups restrict solidarity, leaving others to suffer alone.

ORDINARY LANGUAGE AND REFLEXIVITY

One of the great advantages of this new theoretical concept is that it partakes so deeply of everyday life. Throughout the twentieth century, first in Western societies and then, soon after, throughout the rest of the world, people have spoken continually about being traumatized by an experience, by an event, by an act of violence or harassment, or even, simply, by an abrupt and unexpected, and sometimes not even particularly malevolent, experience of social transformation and change.[1] People also have continually employed the language of trauma to explain what happens, not only to themselves, but to the collectivities to which they belong as well. We often speak of an organization being traumatized when a leader departs or dies, when a governing regime falls, when an organization suffers an unexpected reversal of fortune. Actors describe themselves as traumatized when the environment of an individual or a collectivity suddenly shifts in an unforeseen and unwelcome manner.

We know from ordinary language, in other words, that we are onto something widely experienced and intuitively understood. Such rootedness in the life-world is the soil that nourishes every social scientific concept. The trick is to gain reflexivity, to move from the sense of something commonly experienced to the sense of strangeness that allows us to think sociologically. For trauma is not something naturally existing; it is something constructed by society. It is this construction that the coauthors of this volume have set themselves the task of trying to understand.

In this task of making trauma strange, its embeddedness in everyday life and language, so important for providing an initial intuitive understanding, now presents itself as a challenge to be overcome. We have come to believe, in fact, that the scholarly approaches to trauma developed thus far actually have been distorted by the powerful, commonsense understandings of trauma that have emerged in everyday life. Indeed, it might be said that these commonsense understandings constitute a kind of "lay trauma theory" in contrast to which a more theoretically reflexive approach to trauma must be erected.

Lay Trauma Theory

According to lay theory, traumas are naturally occurring events that shatter an individual or collective actor's sense of well-being. In other words, the power to shatter—the "trauma"—is thought to emerge from events themselves. The reaction to such shattering events—"being traumatized"—is felt and thought to be an immediate and unreflexive response. According to the lay perspective, the trauma experience occurs when the traumatizing event interacts with human nature. Human beings need security, order, love, and connection. If something happens that sharply undermines these needs, it hardly seems surprising, according to the lay theory, that people will be traumatized as a result.[2]

Enlightenment Thinking

There are "enlightenment" and "psychoanalytic" versions of this lay trauma theory. The enlightenment understanding suggests that trauma is a kind of rational response to abrupt change, whether at the individual or social level. The objects or events that trigger trauma are perceived clearly by actors, their responses are lucid, and the effects of these responses are problem solving and progressive. When bad things happen to good people, they become shocked, outraged, indignant. From an enlightenment perspective, it seems obvious, perhaps even unremarkable, that political scandals are cause for indignation; that economic depressions are cause for despair; that lost wars create a sense of anger and aimlessness; that disasters in the physical environment lead to panic; that assaults on the human body lead to intense anxiety; that technological disasters create concerns, even phobias, about risk. The responses to such traumas will be efforts to alter the circumstances that caused them. Memories about the past guide this thinking about the future. Programs for action will be developed, individual and collective environments will be reconstructed, and eventually the feelings of trauma will subside.

This enlightenment version of lay trauma theory has recently been exemplified by Arthur Neal in his *National Trauma and Collective Memory.* In explaining whether or not a collectivity is traumatized, Neal points to the quality of the event itself. National traumas have been created, he argues, by "individual and collective reactions to a volcano-like event that shook the foundations of the social world" (Neal 1998, ix). An event traumatizes a collectivity because it is "an extraordinary event," an event that has such "an explosive quality" that it creates "disruption" and "radical change . . . within a short period of time" (Neal 1998, 3, 9–10). These objective empirical qualities "command the attention of all major subgroups of the population," triggering emotional response and public attention because rational people simply cannot react in any other way (Neal 1998, 9–10). "Dismissing or ignoring the traumatic experience is not a reasonable option," nor is "holding an attitude of benign neglect"

or "cynical indifference" (Neal 1998, 4, 9–10). It is precisely because actors are reasonable that traumatic events typically lead to progress: "The very fact that a disruptive event has occurred" means that "new opportunities emerge for innovation and change" (Neal 1998, 18). It is hardly surprising, in other words, that "permanent changes were introduced into the [American] nation as a result of the Civil War, the Great Depression, and the trauma of World War II" (Neal 1998, 5).

Despite what I will later call the naturalistic limitations of such an Enlightenment understanding of trauma, what remains singularly important about Neal's approach is its emphasis on the collectivity rather than the individual, an emphasis that sets it apart from the more individually oriented psychoanalytically informed approaches discussed below. In focusing on events that create trauma for national, not individual, identity, Neal follows the path-breaking sociological model developed by Kai Erikson in his widely influential book *Everything in Its Path*. While this heart-wrenching account of the effects on a small Appalachian community of a devastating flood is likewise constrained by a naturalistic perspective, it established the groundwork for the distinctively sociological approach we adopt in this volume. Erikson's theoretical innovation was to conceptualize the difference between collective and individual trauma. Both the attention to collectively emergent properties and the naturalism with which such collective traumas are conceived are evident in the following passage.

> By individual trauma I mean a *blow* to the psyche that *breaks through* one's defenses *so suddenly and with such brutal force that one cannot react to it effectively* . . . By collective trauma, on the other hand, I mean a *blow* to the basic tissues of social life that *damages* the bonds attaching people together and impairs the prevailing sense of communality. The collective trauma works its way slowly and even insidiously into the awareness of those who suffer from it, so it does not have the quality of suddenness normally associated with "trauma." *But it is a form of shock all the same,* a gradual realization that the community *no longer exists* as an effective source of support and that *an important part of the self has disappeared* . . . "We" no longer exist as a connected pair or as linked cells in a larger communal body. (Erikson 1976, 153–54, italics added)

As Smelser suggests in chapter 2, following, lay trauma theory began to enter ordinary language and scholarly discussions alike in the efforts to understand the kind of "shell shock" that affected so many soldiers during World War I, and it became expanded and elaborated in relation to other wars that followed in the course of the twentieth century. When

Glen Elder created "life course analysis" to trace the cohort effects ou individual identity of these and other cataclysmic social events in the twentieth century, he and his students adopted a similar enlightenment mode of trauma (Elder 1974). Similar understandings have long informed approaches in other disciplines, for example, the vast historiography devoted to the far-reaching effects on nineteenth-century Europe and the United States of the "trauma" of the French Revolution. Elements of the lay enlightenment perspective have also informed contemporary thinking about the Holocaust and responses to other episodes of mass murder in the twentieth century, as Eyerman and I suggest in our respective discussions of "progressive narratives" in this volume.

Psychoanalytic Thinking

Such realist thinking continues to permeate everyday life and scholarly thought alike. Increasingly, however, it has come to be filtered through a psychoanalytic perspective that has become central to both contemporary lay common sense and academic thinking. This approach places a model of unconscious emotional fears and cognitively distorting mechanisms of psychological defense between the external shattering event and the actor's internal traumatic response. When bad things happen to good people, according to this academic version of lay theory, they can become so frightened that they can actually repress the experience of trauma itself. Rather than activating direct cognition and rational understanding, the traumatizing event becomes distorted in the actor's imagination and memory. The effort to accurately attribute responsibility for the event and the progressive effort to develop an ameliorating response are undermined by displacement. This psychoanalytically mediated perspective continues to maintain a naturalistic approach to traumatic events, but it suggests a more complex understanding about the human ability consciously to perceive them. The truth about the experience is perceived, but only unconsciously. In effect, truth goes underground, and accurate memory and responsible action are its victims. Traumatic feelings and perceptions, then, come not only from the originating event but from the anxiety of keeping it repressed. Trauma will be resolved, not only by setting things right in the world, but by setting things right in the self.[3] According to this perspective, the truth can be recovered, and psychological equanimity restored, only, as the Holocaust historian Saul Friedlander once put it, "when memory comes."

This phrase actually provides the title of Friedlander's memoir about

his childhood during the Holocaust years in Germany and France. Recounting, in evocative literary language, his earlier experiences of persecution and displacement, Friedlander suggests that conscious perception of highly traumatic events can emerge only after psychological introspection and "working through" allows actors to recover their full capacities for agency (Freidlander 1979, 1992). Emblematic of the intellectual framework that has emerged over the last three decades in response to the Holocaust experience, this psychoanalytically informed theorizing particularly illuminated the role of collective memory, insisting on the importance of working backward through the symbolic residues that the originating event has left upon contemporary recollection.[4]

Much as these memory residues surface through free association in psychoanalytic treatment, they appear in public life through the creation of literature. It should not be surprising, then, that literary interpretation, with its hermeneutic approach to symbolic patterns, has been offered as a kind of academic counterpart to the psychoanalytic intervention. In fact, the major theoretical and empirical statements of the psychoanalytic version of lay trauma theory have been produced by scholars in the various disciplines of the humanities. Because within the psychoanalytic tradition it has been Lacan who has emphasized the importance of language in emotional formation, it has been Lacanian theory, often in combination with Derridean deconstruction, that has informed these humanities based studies of trauma.

Perhaps the most influential scholar in shaping this approach has been Cathy Caruth, in her own collection of essays, *Unclaimed Experience: Trauma, Narrative, and History* and in her edited collection, *Trauma: Explorations in Memory* (Caruth 1995, 1996).[5] Caruth focuses on the complex permutations that unconscious emotions impose on traumatic reactions, and her approach has certainly been helpful in our own thinking about cultural trauma.[6] In keeping with the psychoanalytic tradition, however, Caruth roots her analysis in the power and objectivity of the originating traumatic event, explaining that "Freud's intuition of, and his passionate fascination with, traumatic experiences" related traumatic reactions to "the unwitting reenactment of an event that one cannot simply leave behind" (Caruth 1995, 2). The event cannot be left behind because "the breach in the mind's experience," according to Caruth, "is experienced too soon." This abruptness prevents the mind from fully cognizing the event. It is experienced "too unexpectedly . . . to be fully known and is therefore not available to consciousness." Buried in the

unconscious, the event is experienced irrationally, "in the nightmares and repetitive actions of the survivor." This shows how the psychoanalytic version of lay trauma theory goes beyond the Enlightenment one: "Trauma is not locatable in the simple violent or original event in an individual's past, but rather in the way its very unassimilated nature—the way it was precisely *not known* in the first instance—returns to haunt the survivor later on." When Caruth describes these traumatic symptoms, however, she returns to the theme of objectivity, suggesting that they "tell us of a reality or truth that is not otherwise available" (Caruth 1995, 3–4, italics added).[7]

The enormous influence of this psychoanalytic version of lay trauma theory can be seen in the manner in which it has informed the recent efforts by Latin American scholars to come to terms with the traumatic brutalities of their recent dictatorships. Many of these discussions, of course, are purely empirical investigations of the extent of repression and/or normative arguments that assign responsibilities and demand reparations. Yet there is an increasing body of literature that addresses the effects of the repression in terms of the traumas it caused.

The aim is to restore collective psychological health by lifting societal repression and restoring memory. To achieve this, social scientists stress the importance of finding—through public acts of commemoration, cultural representation, and public political struggle—some collective means for undoing repression and allowing the pent-up emotions of loss and mourning to be expressed. While thoroughly laudable in moral terms, and without doubt also very helpful in terms of promoting public discourse and enhancing self-esteem, this advocacy literature typically is limited by the constraints of lay common sense. The traumatized feelings of the victims, and the actions that should be taken in response, are both treated as the unmediated, commonsense reactions to the repression itself. Elizabeth Jelin and Susana Kaufman, for example, directed a large-scale project on "Memory and Narrativity" sponsored by the Ford Foundation, involving a team of investigators from different South American countries. In their powerful report on their initial findings, "Layers of Memories: Twenty Years After in Argentina,"[8] they contrast the victims' insistence on recognizing the reality of traumatizing events and experiences with the denials of the perpetrators and their conservative supporters, denials that insist on looking to the future and forgetting the past: "The confrontation is between the voices of those who call for commemoration, for remembrance of the disappearances and the tor-

ment, for denunciation of the repressors, and those who make it their business to act as if nothing has happened here." Jelin and Kaufman call these conservative forces the "bystanders of horror" who claim they "did not know" and "did not see." But because the event—the traumatizing repression—was real, these denials will not work: "The personalized memory of people cannot be erased or destroyed by decree or by force." The efforts to memorialize the victims of the repression are presented as efforts to restore the objective reality of the brutal events, to separate them from the unconscious distortions of memory: "Monuments, museums and memorials are . . . attempts to make statements and affirmations [to create] a materiality with a political, collective, public meaning [and] a physical reminder of a conflictive political past" (5–7).

The Naturalistic Fallacy

It is through these Enlightenment and psychoanalytic approaches that trauma has been translated from an idea in ordinary language into an intellectual concept in the academic languages of diverse disciplines. Both perspectives, however, share the "naturalistic fallacy" of the lay understanding from which they derive. It is upon the rejection of this naturalistic fallacy that our own approach rests. First and foremost, we maintain that events do not, in and of themselves, create collective trauma. Events are not inherently traumatic. Trauma is a socially mediated attribution. The attribution may be made in real time, as an event unfolds; it may also be made before the event occurs, as an adumbration, or after the event has concluded, as a post-hoc reconstruction. Sometimes, in fact, events that are deeply traumatizing may not actually have occurred at all; such imagined events, however, can be as traumatizing as events that have actually occurred.

This notion of an "imagined" traumatic event seems to suggest the kind of process that Benedict Anderson describes in *Imagined Communities* (Anderson 1991). Anderson's concern, of course, is not with trauma per se, but with the kinds of self-consciously ideological narratives of nationalist history. Yet these collective beliefs often assert the existence of some national trauma. In the course of defining national identity, national histories are constructed around injuries that cry out for revenge. The twentieth century was replete with examples of angry nationalist groups and their intellectual and media representatives, asserting that they were injured or traumatized by agents of some putatively antagonistic ethnic and political group, which must then be battled against in turn. The

Serbians inside Serbia, for example, contended that ethnic Albanians in Kosovar did them traumatic injury, thus providing justification for their own "defensive" invasion and ethnic cleansing. The type case of such militarist construction of primordial national trauma was Adolph Hitler's grotesque assertion that the international Jewish conspiracy had been responsible for Germany's traumatic loss in World War I.

But what Anderson means by "imagined" is not, in fact, exactly what we have in mind here. For he makes use of this concept to point to the completely illusory, nonempirical, nonexistent quality of the original event. Anderson is horrified by the ideology of nationalism, and his analysis of imagined national communities partakes of "ideology critique." As such, it applies the kind of Enlightenment perspective that mars lay trauma theory, which we are criticizing here. It is not that traumas are never constructed from nonexistent events. Certainly they are. But it is too easy to accept the imagined dimension of trauma when the reference is primarily to claims like these, which point to events that either never did occur or to events whose representation involve exaggerations that serve obviously aggressive and harmful political forces. Our approach to the idea of "imagined" is more like what Durkheim meant in *The Elementary Forms of Religious Life* when he wrote of the "religious imagination." Imagination is intrinsic to the very process of representation. It seizes upon an inchoate experience from life, and forms it, through association, condensation, and aesthetic creation, into some specific shape.

Imagination informs trauma construction just as much when the reference is to something that has actually occurred as to something that has not. It is only through the imaginative process of representation that actors have the sense of experience. Even when claims of victimhood are morally justifiable, politically democratic, and socially progressive, these claims still cannot be seen as automatic, or natural, responses to the actual nature of an event itself. To accept the constructivist position in such cases may be difficult, for the claim to verisimilitude is fundamental to the very sense that a trauma has occurred. Yet, while every argument about trauma claims ontological reality, as cultural sociologists we are not primarily concerned with the accuracy of social actors' claims, much less with evaluating their moral justification. We are concerned only with how and under what conditions the claims are made, and with what results. It is neither ontology nor morality, but epistemology, with which we are concerned.

Traumatic status is attributed to real or imagined phenomena, not

because of their actual harmfulness or their objective abruptness, but because these phenomena are believed to have abruptly, and harmfully, affected collective identity. Individual security is anchored in structures of emotional and cultural expectations that provide a sense of security and capability. These expectations and capabilities, in turn, are rooted in the sturdiness of the collectivities of which individuals are a part. At issue is not the stability of a collectivity in the material or behavioral sense, although this certainly plays a part. What is at stake, rather, is the collectivity's identity, its stability in terms of meaning, not action.

Identity involves a cultural reference. Only if the patterned meanings of the collectivity are abruptly dislodged is traumatic status attributed to an event. It is the meanings that provide the sense of shock and fear, not the events in themselves. Whether or not the structures of meaning are destabilized and shocked is not the result of an event but the effect of a sociocultural process. It is the result of an exercise of human agency, of the successful imposition of a new system of cultural classification. This cultural process is deeply affected by power structures and by the contingent skills of reflexive social agents.

THE SOCIAL PROCESS OF CULTURAL TRAUMA

At the level of the social system, societies can experience massive disruptions that do not become traumatic. Institutions can fail to perform. Schools may fail to educate, failing miserably even to provide basic skills. Governments may be unable to secure basic protections and may undergo severe crises of delegitimation. Economic systems may be profoundly disrupted, to the extent that their allocative functions fail even to provide basic goods. Such problems are real and fundamental, but they are not, by any means, necessarily traumatic for members of the affected collectivities, much less for the society at large. For traumas to emerge at the level of the collectivity, social crises must become cultural crises. Events are one thing, representations of these events quite another. Trauma is not the result of a group experiencing pain. It is the result of this acute discomfort entering into the core of the collectivity's sense of its own identity. Collective actors "decide" to represent social pain as a fundamental threat to their sense of who they are, where they came from, and where they want to go. In this section, I lay out the processes that form the nature of these collective actions and the cultural and institutional processes that mediate them.

Claim Making: The Spiral of Signification

The gap between event and representation can be conceived as the "trauma process." Collectivities do not make decisions as such; rather, it is agents who do (Sztompka 1991a, 1993a; Alexander 1987; Alexander, Giesen, Munch, and Smelser 1987).[9] The persons who compose collectivities broadcast symbolic representations—characterizations—of ongoing social events, past, present, and future. They broadcast these representations as members of a social group. These group representations can be seen as "claims" about the shape of social reality, its causes, and the responsibilities for action such causes imply. The cultural construction of trauma begins with such a claim (Thompson 1998).[10] It is a claim to some fundamental injury, an exclamation of the terrifying profanation of some sacred value, a narrative about a horribly destructive social process, and a demand for emotional, institutional, and symbolic reparation and reconstitution.

Carrier Groups

Such claims are made by what Max Weber, in his sociology of religion, called "carrier groups" (Weber 1968, 468–517).[11] Carrier groups are the collective agents of the trauma process. Carrier groups have both ideal and material interests, they are situated in particular places in the social structure, and they have particular discursive talents for articulating their claims—for what might be called "meaning making"—in the public sphere. Carrier groups may be elites, but they may also be denigrated and marginalized classes. They may be prestigious religious leaders or groups whom the majority has designated as spiritual pariahs. A carrier group can be generational, representing the perspectives and interests of a younger generation against an older one. It can be national, pitting one's own nation against a putative enemy. It can be institutional, representing one particular social sector or organization against others in a fragmented and polarized social order.

Audience and Situation: Speech Act Theory

The trauma process can be likened, in this sense, to a speech act (Austin 1962; Searle 1969; Habermas 1984; Lara 1999).[12] Traumas, like speech acts, have the following elements:

Speaker: the carrier group

Audience: the public, putatively homogeneous but sociologically fragmented

Situation: the historical, cultural, and institutional environment within which the speech act occurs

The goal of the speaker is persuasively to project the trauma claim to the audience-public. In doing so, the carrier group makes use of the particularities of the historical situation, the symbolic resources at hand, and the constraints and opportunities provided by institutional structures. In the first place, of course, the speaker's audience must be members of the carrier group itself. If there is illocutionary success, the members of this originating collectivity become convinced that they have been traumatized by a singular event. Only with this success can the audience for the traumatic claim be broadened to include other publics within the "society at large."

Cultural Classification: The Creation of Trauma as a New Master Narrative

Bridging the gap between event and representation depends upon what Kenneth Thompson has called, in reference to the topic of moral panics, a "spiral of signification" (Thompson 1998, 20–24).[13] Representation of trauma depends on constructing a compelling framework of cultural classification. In one sense, this is simply telling a new story. Yet this storytelling is, at the same time, a complex and multivalent symbolic process that is contingent, highly contested, and sometimes highly polarizing. For the wider audience to become persuaded that they, too, have become traumatized by an experience or an event, the carrier group needs to engage in successful meaning work.

Four critical representations are essential to the creation of a new master narrative. While I will place these four dimensions of representations into an analytical sequence, I do not mean to suggest temporality. In social reality, these representations unfold in an interlarded manner that is continuously cross-referential. The causality is symbolic and aesthetic, not sequential or developmental, but "value-added" (Smelser 1962).

These are the questions to which a successful process of collective representation must provide compelling answers:

A. The nature of the pain. What actually happened—to the particular group and to the wider collectivity of which it is a part?

- Did the denouncement of the Vietnam War leave a festering wound on the American psyche, or was it incorporated in a more or less routine way? If tbere was a shattering wound, in what exactly did it consist? Did the American military lose the Vietnam War, or did the Vietnam trauma consist of the pain of having the nation's hands "tied behind its back"?[14]
- Did hundreds of ethnic Albanians die in Kosovo, or was it tens and possibly even hundreds of thousands? Did they die because of starvation or displacement in the course of a civil war, or were they deliberately murdered?
- Was slavery a trauma for African Americans? Or was it, as some revisionist historians have claimed, merely a coercive, and highly profitable, mode of economic production? If the latter, then slavery did not produce traumatic pain. If the former, it involved brutal and traumatizing pbysical domination.
- Was the internecine ethnic and religious conflict in Northern Ireland, these last thirty years, "civil unrest and terrorism," as Queen Elizabeth once described it, or a "bloody war," as claimed by the IRA (quoted in Maillot 2000).
- Were there less than a hundred persons who died at the hands of Japanese soldiers in Nanking, China, in 1938, or were there 300,000 victims? Did these deaths result from a one-sided "massacre" or a "fierce contest" between opposing armies? (Chang 1997, 206)

B. The nature of the victim. What group of persons was affected by this traumatizing pain? Were they particular individuals or groups, or "the people" in general? Did a singular and delimited group receive the brunt of the pain, or were several groups involved?

- Were the German Jews the primary victims of the Holocaust, or did the victim group extend to the Jews of the Pale, European Jewry, or the Jewish people as a whole? Were the millions of Polish people who died at the hands of German Nazis also victims of the Holocaust? Were Communists, socialists, homosexuals, and bandicapped persons also victims of the Nazi Holocaust?

- Were Kosovar Albanians the primary victims of ethnic cleansing, or were Kosovar Serbs also significantly, or even equally victimized?
- Are African Americans the victims of the brutal, traumatizing conditions in the desolate inner cities of the United States, or are the victims of these conditions members of an economically defined "underclass"?
- Were North American Indians the victims of European colonizers, or were the victims particularly situated, and particularly "aggressive," Indian nations?
- Are non-Western or third world nations the victims of globalization, or is it only the least developed, or least equipped, among them?

C. *Relation of the trauma victim to the wider audience.* Even when the nature of the pain has been crystallized and the identity of the victim established, there remains the highly significant question of the relation of the victim to the wider audience. To what extent do the members of the audience for trauma representations experience an identity with the immediately victimized group? Typically, at the beginning of the trauma process, most audience members see little if any relation between themselves and the victimized group. Only if the victims are represented in terms of valued qualities shared by the larger collective identity will the audience be able to symbolically participate in the experience of the originating trauma.[15]

- Gypsies are acknowledged by contemporary Central Europeans as trauma victims, the bearers of a tragic history. Yet insofar as large numbers of Central Europeans represent the "Roman people" as deviant and uncivilized, they have not made that tragic past their own.
- Influential groups of German and Polish people have acknowledged that Jews were victims of mass murder, but they have often refused to experience their own national collective identities as being affected by the Jews' tragic fate.
- Did the police brutality that traumatized black civil rights activists in Selma, Alabama, in 1965, create identification among the white Americans who watched the events on their televisions in the safety of the nonsegregated North? Is the history of white American racial domination relegated to an entirely separate time, or is it conceived, by virtue of the reconstruction of collective memory, as a contemporary issue?[16]

D. *Attribution of responsibility.* In creating a compelling trauma narrative, it is critical to establish the identity of the perpetrator, the "antagonist." Who actually injured the victim? Who caused the trauma? This issue is always a matter of symbolic and social construction.

- Did "Germany" create the Holocaust, or was it the Nazi regime? Was the crime restricted to special SS forces, or was the Werhmacht, the entire Nazi army, also deeply involved? Did the crime extend to ordinary soldiers, to ordinary citizens, to Catholic as well as Protestant Germans? Was it only the older generation of Germans who were responsible, or were later generations responsible as well?[17]

Institutional Arenas

This representational process creates a new master narrative of social suffering. Such cultural (re)classification is critical to the process by which a collectivity becomes traumatized.[18] But it does not unfold in what Habermas would call a transparent speech situation (Habermas 1984).[19] The notion of transparency is posited by Habermas as a normative ideal essential to the democratic functioning of the public sphere, not as an empirical description. In actual social practice, speech acts never unfold in an unmediated way. Linguistic action is powerfully mediated by the nature of the institutional arenas and stratification hierarchies within which it occurs.

Religious. If the trauma process unfolds inside the religious arena, its concern will be to link tranma to theodicy. The Torah's story of Job, for example, asks, "Why did God allow this evil?" The answers to such questions will generate searching discussions about whether and how human beings strayed from divinely inspired ethics and sacred law, or whether the existence of evil means that God does not exist.

Aesthetic. Insofar as meaning work takes place in the aesthetic realm, it will be channeled by specific genres and narratives that aim to produce imaginative identification and emotional catharsis.

- In the early representations of the Holocaust, for example, *The Diary of Anne Frank* played a vital role, and in later years an entirely new genre called "survivor literature" developed (Hayes 1999). In the aftermath of ethnocide in Guatemala, in which 200,000 Mayan Indians were killed and entire villages destroyed, an ethnographer recorded how, in the town of Santa Maria Tzeja, theater was "used to publicly confront the past":

> A group of teenagers and . . . a North American teacher and director of the community's school write a play that documents what Santa Maria Tzeja has experienced. They call the play "There Is Nothing Concealed That Will Not Be Disclosed (Matthew 10:26)," and the villagers themselves perform it. The play not only recalls what happened in the village in a stark, unflinching manner but also didactically lays out the laws and rights that the military violated. The play pointedly and precisely cites articles of the Guatemalan constitution that were trampled on, not normally the text of great drama. But, in Guatemala, reading the constitution can be a profoundly dramatic act. Peformances inevitably led to moving, at times heated, discussions. [The production] had a cathartic impact on the village. (Manz 2002)

As this example suggests, mass media are significant, but not necessary, in the aesthetic arena. In the aftermath of the eighty-day NATO bombing that forced Yugoslavian Serbs to abandon their violent, decade-long domination of Albanian Kosovo, Serbian films provided mass channels for reexperiencing the period of suffering even while they narrated the protagonists, victims, and the very nature of the trauma in strikingly different ways.

> It is hard to see why anyone who survived 78 traumatic days of air-strikes in 1999 would want to relive the experience in a theater, bringing back memories as well of a murderous decade that ended in October with the fall of President Slobadan Milosevic. Yet Yugoslavia's feature film industry has done little else in the past year but turn out NATO war movies [some of which] have begun to cut through the national façade that Milosevic's propagandists had more than 10 years to build. [In one movie, the protagonist recounts that] "it is dead easy to kill . . . They stare at you, weep and wail, and you shoot 'em and that's the end—end of story. Later, of course, they all come back and you want to set things right, but it's too late. That's why the truth is always returning to judge men." (Watson 2001, A1–6)

Legal. When the cultural classification enters the legal realm, it will be disciplined by the demand to issue a definitive judgment of legally binding responsibilities and to distribute punishments and material reparations. Such a demonstration may have nothing at all to do with the perpetrators themselves accepting responsibility or a broader audience identifying with those who suffered as the trauma drama plays out.

- In regard to binding definitions of war crimes and crimes against humanity, the 1945 Nuremberg Trials were critical. They created revolutionary new law and resulted in dozens of successful prosecutions, yet they did not, by any means, succeed in compelling the German people themselves to recognize the existence of Nazi traumas, much less their responsibilities for them.[20] Nonetheless, the legal statutes developed at Nuremberg were elaborated in the decades following, laying the basis for dozens of highly publicized lawsuits that in recent years have created significant dramaturgy and unleashed profound moral effects. These trials for "crimes against humanity" have implicated not only individuals but national organizations.

  Because neither postwar Japanese governments nor the most influential Japanese publics have recognized the war crimes committed by Japan's Imperial war policies, much less taken moral responsibility for them, no suit seeking damages for Imperial atrocities has, until recently, ever made any substantial headway in Japan's courts. In explaining why one suit against the Imperial government's biological warfare unit has finally made substantial progress, observers have pointed to the specificity and autonomy of the legal arena.

> As a member of the Japanese biological warfare outfit, known as United 731, Mr. Shinozuka was told that if he ever faced capture by the Chinese, his duty to Emperor Hirohito was to kill bimself rather than compromise the secrecy of a program that so clearly violated international law . . . Now, 55 years later, he is a hale 77-year old. But still haunted by remorse, he has spoken—providing the first account before a Japanese court by a veteran about the workings of the notorious unit . . . That this case, now in its final stages, has not been dismissed like so many others is due in part to painstaking legal research and to cooperation over strategy by some of Japan's leading lawyers. Lawyers who bave sued the government say the fact that this case bas become the first in which a judge has allowed the extensive introduction of evidence instead of handing down a quick dismissal may also attest to an important shift under way on the issue of reparations. (French 2000, A3)

Scientific. When the trauma process enters the scientific world, it becomes subject to evidentiary stipulations of an altogether different kind, creating scholarly controversies, "revelations," and "revisions." When historians endeavor to define a historical event as traumatic, they must document, by acceptable scholarly methods, the nature of the pain, the victims, and responsibility. In doing so, the cultural classification process often triggers explosive methodological controversies.

- What were the causes of World War I? Who was responsible for initiating it? Who were its victims?
- Did the Japanese intend to launch a "sneak" attack on Pearl Harbor, or was the late-arriving message to Washington, D.C., by the Japanese Imperial government delayed by inadvertence and diplomatic confusion?
- The German "Historichstreit" controversy captured international attention in the 1980s, questioning the new scholarly conservatives' emphasis on anticommunism as a motivation for the Nazi seizure of power and its anti-Jewish policies. In the 1990s, Daniel Goldhagen's *Hitler's Willing Executioners* was attacked by mainstream historians for overemphasizing tbe uniqueness of German antisemitism.

Mass media. When the trauma process enters the mass media, it gains opportunities and at the same time becomes subject to distinctive kinds of restrictions. Mediated mass communication allows traumas to be expressively dramatized and permits some of the competing interpretations to gain enormous persuasive power over others. At the same time, however, these representational processes become subject to the restrictions of news reporting, with their demands for concision, ethical neutrality, and perspectival balance. Finally, there is the competition for readership that often inspires the sometimes exaggerated and distorted production of "news" in mass circulation newspapers and magazines. As an event comes to be reported as a trauma, a particular group as "traumatized," and another group as the perpetrators, politicians and other elites may attack the media, its owners, and often the journalists whose reporting established the trauma facts.

- During the traumas of tbe late 1960s, American television news brought evocative images of terrible civilian suffering from the Vietnam War into the living rooms of American citizens. These images were seized upon by antiwar critics. The conservative American politician Vice-President Spiro Agnew initiated virulent attacks against the "liberal" and "Jewish dominated" media for their insistence that the Vietnamese civilian population was being traumatized by the American-dominated war.

State bureaucracy. When the trauma process enters into the state bureaucracy, it can draw upon the governmental power to channel the representational process. Decisions by the executive branches of governments to create national commissions of inquiry, votes by parliaments to establish investigative committees, the creation of state-directed police investigations and new directives about national priorities—all such actions can have decisive effects on handling and channeling the spiral of signification that marks the trauma process (Smelser 1963).[21] In the last decade, blue ribbon commissions have become a favored state vehicle for such involvement. By arranging and balancing the participation on such panels, forcing the appearance of witnesses, and creating carefully choreographed public dramaturgy, such panels tilt the interpretative process in powerful ways, expanding and narrowing solidarity, creating or denying the factual and moral basis for reparations and civic repair.

- Referring to bnndreds of thousands of Mayan Indians who died at the hands of Guatemalan counterinsurgency forces between 1981 and 1983, an ethnographer of the region asserts that, "without question, the army's horrific actions ripped deep psychological wounds into the consciousness of the inhabitants of this village [who were also] involved in a far larger trauma" (Manz 2002, 293–94). Despite the objective status of the trauma, however, and the pain and suffering it had caused, the ability to collectively recognize and process it was inhibited because the village was "a place hammered into silence and accustomed to impunity" (ibid.). In 1994, as part of the negotiation between the Guatemalan government and the umbrella group of insurgent forces, a Commission for Historical Clarification (CEH) was created to hear testimony from the affected parties and to present an interpretation. Five years later, its published conclusion declared that "agents of the State of Guatemala . . . committed acts of genocide against groups of Mayan people" (ibid.). According to the ethnographer, the report "stunned the country." By publicly representing the nature of the pain, defining victim and perpetrator, and

assigning responsibility, the trauma process was enacted within the governmental arena: "It was as if the whole country burst into tears, tears that had been repressed for decades and tears of vindication" (ibid.).

- In the middle 1990s, the postapartheid South African government established a Truth and Reconciliation Commission. Composed of widely respected blacks and whites, the group called witnesses and conducted widely broadcast hearings about the suffering created by the repression that marked the preceding Afrikaner government. The effort succeeded to a significant degree in generalizing the trauma process beyond racially polarized audiences, making it into a shared experience of the new, more solidary, and more democratic South African society. Such a commission could not have been created until blacks became enfranchised and became the dominant racial power.
- By contrast, the postfascist Japanese government has never been willing to create official commissions to investigate the war crimes committed by its imperial leaders and soldiers against non-Japanese during World War II. In regard to the Japanese enslavement of tens and possibly hundreds of thousands of "comfort women," primarily Korean, who provided sexual services for imperial soldiers, the Japanese government finally agreed in the late 1990s to disperse token monetary reparation to the Korean women still alive. Critics have continued to demand that an officially sanctioned commission hold public hearings regarding the trauma, a dramaturgical and legally binding process that the Japanese government, despite its ambiguous and brief public apology to the "comfort women," has never been willing to allow. It is revealing of the significance of such a governmental arena that these critics eventually mounted an unofficial tribunal themselves.

> Last week in Tokyo, private Japanese and international organizations convened a war tribunal that found Japan's military leaders, including Emperor Hirohito, guilty of crimes against humanity for the sexual slavery imposed on tens of thousands of women in countries controlled by Japan during World War II. The tribunal has no legal power to exact reparations for the survivors among those so-called comfort women. But with its judges and lawyers drawn from official international tribunals for the countries that once were part of Yugoslavia and for Rwanda, it brought unparalleled moral authority to an issue scarcely discussed or taught about in Japan. (French 2000, A3)

Stratificational Hierarchies

The constraints imposed by institutional arenas are mediated by the uneven distribution of material resources and the social networks that provide differential access to them. The following questions illustrate this problem.

Who owns the newspapers? To what degree are journalists independent of political and financial control?

Who controls the religious orders? Are they internally authoritarian, or can congregants exercise independent influence?

Are courts independent? What is the scope of action available to entrepreneurial legal advocates?

Are educational policies subject to mass movements of public opinion, or are they insulated by bureaucratic procedures at more centralized levels?

Who exercises controls over the government?

As I have indicated in my earlier reference to the governmental arena, local, provincial, and national governments deploy significant power over the trauma process. What must be considered here is that these bodies might occupy a position of dominance over the traumatized parties themselves. In these cases, the commissions might whitewash the perpetrators' actions rather than dramatize them.

- In the 1980s, the conservative American and British governments of Ronald Reagan and Margaret Thatcher initially did little to dramatize the dangers of the virulent AIDS epidemic because they did not wish to create sympathy or identification with the homosexual practices their ideologies so stigmatized. This failure allowed the epidemics to spread more rapidly. Finally, the Thatcher government launched a massive public education campaign about the dangers of HIV. The effort quickly took the steam out of the moral panic over the AIDS epidemic that had swept through British society and helped launch appropriate public health measures (Thompson 1998).

- In 2000, reports surfaced in American media about a massacre of several hundreds of Korean civilians by American soldiers at No Gun Ri early in the Korean War. Statements from Korean witnesses, and newfound testimony from some American soldiers, suggested the possibility that the firings had been intentional, and allegations about racism and war crimes were made. In response, President Clinton assigned the U.S. Army itself to convene its own official, in-house investigation. While a senior army official claimed that "we have worked closely with the Korean government to investigate the circumstances surrounding No Gun Ri," the power to investigate and interpret the evidence clearly rested with the perpetrators of the trauma alone. Not surprisingly, when its findings were announced several months later, the U.S. Army declared itself innocent of the charges that had threatened its good name:

> We do not believe it is appropriate to issue an apology in this matter. [While] some of tbose civilian casualties were at the hand of American solider[s] , that conclusion is very different from the allegation that was made that this was a massacre in the classic sense that we lined up innocent people and gunned them down. (*New York Times* 2000, A5)

Identity Revision, Memory, and Routinization

"Experiencing trauma" can be understood as a sociological process that defines a painful injury to the collectivity, establishes the victim, attributes responsibility, and distributes the ideal and material consequences. Insofar as traumas are so experienced, and thus imagined and represented, the collective identity will become significantly revised. This identity revision means that there will be a searching re-remembering of the collective past, for memory is not only social and fluid but deeply connected to the contemporary sense of the self. Identities are continuously constructed and secured not only by facing the present and future but also by reconstructing the collectivity's earlier life.

Once the collective identity has been so reconstructed, there will eventually emerge a period of "calming down." The spiral of signification flattens out, affect and emotion become less inflamed, preoccupation with sacrality and pollution fades. Charisma becomes routinized, effervescence evaporates, and liminality gives way to reaggregation. As the heightened and powerfully affecting discourse of trauma disappears, the

"lessons" of the trauma become objectified in monuments, museums, and collections of historical artifacts.[22] The new collective identity will be rooted in sacred places and structured in ritual routines. In the late 1970s, the ultra-Maoist Khmer Rouge (DK) government was responsible for the deaths of more than one-third of Cambodia's citizens. The murderous regime was deposed in 1979. While fragmentation, instability, and authoritarianism in the decades following prevented the trauma process from fully playing itself out, the processes of reconstruction, representation, and working through produced significant commemoration, ritual, and reconstruction of national identity.

> Vivid reminders of the DK's [Khmer Rouge] horrors are displayed in photographs of victims, paintings of killings, and implements used for torture at the Tuol Sleng Museum of Genocidal Crimes, a former school that had become a deadly interrogation center . . . as well as in a monumental display of skulls and bones at Bhhoeung Ek, a former killing field where one can still see bits of bone and cloth in the soil of what had been mass graves. The PRK [the new Cambodian government] also instituted an annual observance called The Day of Hate, in which people were gathered at various locales to hear invectives heaped on the Khmer Rouge. State propaganda played on this theme with such slogans as: "We must absolutely prevent the return of this former black darkness" and "We must struggle ceaselessly to protect against the return of the . . . genocidal clique." These formulaic and state-sanctioned expressions were genuine and often expressed in conversations among ordinary folk. (Ebihara and Ledgerwood 2002, 282–83)

In this routinization process, the trauma process, once so vivid, can become subject to the technical, sometimes desiccating attention of specialists who detach affect from meaning. This triumph of the mundane is often noted with regret by audiences that had been mobilized by the trauma process, and it is sometimes forcefully opposed by carrier groups. Often, however, it is welcomed with a sense of public and private relief. Intended to remember and commemorate the trauma process, efforts to institutionalize the lessons of the trauma will eventually prove unable to evoke the strong emotions, the sentiments of betrayal, and the affirmations of sacrality that once were so powerfully associated with it. No longer deeply preoccupying, the reconstructed collective identity remains, nevertheless, a fundamental resource for resolving future social problems and disturbances of collective consciousness.

The inevitability of such routinization processes by no means neutralizes the extraordinary social significance of cultural traumas. Their creation and routinization have, to the contrary, the most profound norma-

tive implications for the conduct of social life. By allowing members of wider publics to participate in the pain of others, cultural traumas broaden the realm of social understanding and sympathy, and they provide powerful avenues for new forms of social incorporation.[23]

The elements of the trauma process I have outlined in this section can be thought of as social structures, if we think of this term in something other than its materialist sense. Each element plays a role in the social construction and deconstruction of a traumatic event. Whether any or all of these structures actually come into play is not itself a matter of structural determination. It is subject to the unstructured, unforeseeable contingencies of historical time. A war is lost or won. A new regime has entered into power or a discredited regime remains stubbornly in place. Hegemonic or counter publics may be empowered and enthusiastic or undermined and exhausted by social conflict and stalemate. Such contingent historical factors exercise powerful influence on whether a consensus will be generated that allows the cultural classification of trauma to be set firmly in place.

TRAUMA CREATION AND PRACTICAL-MORAL ACTION: THE NON-WESTERN RELEVANCE

In the preceding pages, I have elaborated the middle-range theory that informs the case studies in this book. In doing so, I have modeled the complex causes propelling the trauma process. In illustrating this analytical argument, I have referred to traumatic situations in Western and non-Western, developed and less developed societies—in Northern Ireland and Poland, the United Kingdom and Cambodia, Japan and Yugoslavia, South Africa, Guatemala, and Korea.

It would be a serious misnnderstanding if trauma theory were restricted in its reference to Western social life. True, it has been Western societies that have recently provided the most dramatic apologias for traumatic episodes in their national histories. But it has been the non-Western regions of the world, and the most defenseless segments of the world's population, that have recently been subjected to the most terrifying traumatic injuries. The victims of Western traumas have disproportionately been members of subaltern and marginalized groups. The empirical case studies that follow deal with the legacies of annihilated Jews, enslaved African Americans, defeated German nationals, and dominated and impoverished Poles. It should hardly be surprising, in other words, that the theory developed in relation to these empirical cases can

so fluidly be extended to the experiences of trauma outside of Western societies. In the course of this introduction, I have mentioned also Gypsies, Mayan Indians, American Indians, Kosovar Albanians, Chinese city dwellers, and Cambodian peasants.

The anthropologist Alexander Hinton has suggested that, "while the behaviors it references have an ancient pedigree, the concept of genocide . . . is thoroughly modern" (Hinton 2002, 25). Indeed, it is the very premise of the contributions he and his fellow anthropologists make to their collective work, that by the latter half of the twentieth century this modern framework had thoroughly penetrated non-Western societies. "On the conceptual level," Hinton writes, "terms like 'trauma,' 'suffering,' and 'cruelty' are linked to the discourses of modernity."

> In the mass media, the victims of genocide are frequently condensed into an essentialized portrait of the *universal* sufferer, an image that can be . . . (re)broadcast to *global* audiences who see their own potential trauma reflected in this simulation of the modern subject. Refugees frequently epitomize this modern trope of human suffering; silent and anonymous, they signify both a *universal humanity* and the threat of the pre-modern and uncivilized, which they have supposedly barely survived . . . Particularly in the *global* present, as such diverse populations and images flow rapidly across national borders, genocide . . . creates diasporic communities that threaten to undermine its culminating political incarnation. (Hinton 2002, 21–22; italics added)

There is no more excruciating example of the universal relevance of trauma theory than the way it can help illuminate the tragic difficulties that non-Western societies have often experienced in coming to terms with genocide. Because genocide is more likely to occur in collective arenas that are neither legally regulated, democratic, nor formally egalitarian (Kuper 1981),[24] it is hardly surprising that, in the last half century, the most dramatic and horrifying examples of mass murder have emerged from within the more fragmented and impoverished areas of the non-Western world: the Hutu massacre of more than 500,000 Tutsis in less than three weeks in Rwanda, the Guatemalan military's ethnocide of 200,000 Mayan Indians during the dirty civil war in the early 1980s, the Maoist Khmer Rouge's elimination of almost a third of Cambodia's entire population in its revolutionary purges in the late 1970s.

The tragic reasons for these recent outpourings of mass murder in the non-Western world cannot be our concern here. A growing body of social scientific work is devoted to this question, although a great deal more needs to be done (Kleinman, Das, and Lock 1997). What cultural

trauma theory helps us understand, instead, is a central paradox, not about the causes of genocide but its aftereffects: Why have these genocidal actions, so traumatic to their millions of immediate victims, so rarely branded themselves on the consciousness of the wider populations? Why have these horrendous phenomena of mass suffering not become compelling, publicly available narratives of collective suffering to their respective nations, let alone to the world at large? The reasons, I suggest, can be found in the complex patterns of the trauma process I have outlined here.

In fact, several years before the Nazi massacre of the Jews, which eventually branded Western modernity as the distinctive bearer of collective trauma in the twentieth century, the most developed society outside the West had itself already engaged in systematic atrocities. In early December 1938, invading Japanese soldiers slaughtered as many as 300,000 Chinese residents of Nanking, China. Under orders from the highest levels of the Imperial government, they carried out this massacre in six of the bloodiest weeks of modern history, without the technological aids later developed by the Nazis in their mass extermination of the Jews. By contrast with the Nazi massacre, this Japanese atrocity was not hidden from the rest of the world. To the contrary, it was carried out under the eyes of critical and highly articulate Western observers and reported upon massively by respected members of the world's press. Yet, in the sixty years that have transpired since that time, the memorialization of the "rape of Nanking" has never extended beyond the regional confines of China, and in fact barely beyond the confines of Nanking itself. The trauma contributed scarcely at all to the collective identity of the People's Republic of China, let alone to the self-conception of the postwar democratic government of Japan. As the most recent narrator of the massacre puts it, "Even by the standards of history's most destructive war, the Rape of Nanking represents one of the worst instances of mass extermination" (Chang 1997, 5). Yet, though extraordinarily traumatic for the contemporary residents of Nanking, it became "the forgotten Holocaust of World War II," and it remains an "obscure incident" today (ibid., 6), the very existence of which is routinely and successfully denied by some of Japan's most powerful and esteemed public officials.

As I have suggested in this introduction, such failures to recognize collective traumas, much less to incorporate their lessons into collective identity, do not result from the intrinsic nature of the original suffering. This is the naturalistic fallacy that follows from lay trauma theory. The failure stems, rather, from an inability to carry through what I have

called here the *trauma process*. In Japan and China, just as in Rwanda, Cambodia, and Guatemala, claims have certainly been made for the central relevance of these "distant sufferings" (Boltanski 1999).[25] But for both social structural and culture reasons, carrier groups have not emerged with the resources, authority, or interpretive competence to powerfully disseminate these trauma claims. Sufficiently persuasive narratives have not been created, or they have not been successfully broadcast to wider audiences. Because of these failures, the perpetrators of these collective sufferings have not been compelled to accept moral responsibility, and the lessons of these social traumas have been neither memorialized nor ritualized. New definitions of moral responsibility have not been generated. Social solidarities have not been extended. More primordial and more particularistic collective identities have not been changed.

In this concluding section, I have tried to underscore my earlier contention that the theory presented here is not merely technical and scientific. It is normatively relevant, and significantly illuminates processes of moral-practical action. However tortuous the trauma process, it allows collectivities to define new forms of moral responsibility and to redirect the course of political action. This open-ended and contingent process of trauma creation and the assigning of collective responsibility that goes along with it are as relevant to non-Western as to Western societies. Collective traumas have no geographical or cultural limitations. The theory of cultural trauma applies, without prejudice, to any and all instances when societies have, or have not, constructed and experienced cultural traumatic events, and to their efforts to draw, or not to draw, the moral lessons that can be said to emanate from them.

NOTES

1. Whether the lay perception of events as "traumatic" was at some point in historical time confined to the West, or whether the language was also intrinsic to the preglobalization cultural discourse of non-Western societies, is an issue that merits further investigation. It does not, however, concern us directly here. The premise of this book is that, in the context of modern globalization, members of both Western and non-Western collectivities do employ such a framework. The claim, then, is that the theory of cultural trauma presented here is universal in a postfoundational sense, and throughout this introductory exposition I will illustrate the model with examples from both Western and non-Western societies.

The notion that this theory of cultural trauma is universally applicable does not suggest, however, that different regions of the globe—Eastern and Western,

Northern and Southern—share the same traumatic memories. This is far from the case, as I remark upon in chapter 6.

2. The ultimate example of such naturalization is the recent effort to locate trauma in a specific part of the brain through P.E.T. scanning, the brain color imaging that has become a research tool of neurology. Such images are taken as proof that trauma "really exists" because it has a physical, material dimension. We would not wish to suggest that trauma does not, in fact, have a material component. Every component of social life exists on multifold levels. What we object to is reduction, that trauma is a symptom produced by a physical or natural base. In this sense, trauma theory bears marked resemblance to another naturalistic understanding that has permeated contemporary social life, namely the notion of "stress." According to contemporary lingo, persons are "placed under stress," i.e., it is a matter of their environments, not of the mediation of actors who construct an environment as stressful according to their social position and cultural frame.

3. A more distinctively sociological representation of the psychoanalytic approach to trauma is Jeffrey Prager's (1998) study of repression and displacement in the case of a patient who claimed sexual harassment by her father. Prager goes beyond lay trauma theory by demonstrating how the individual's memory of trauma was the product, not only of her actual experience, but also of the contemporary cultural milieu, which by its emphasis on "lost memory syndrome" actually presented the possibility of trauma to her.

4. For a nonpsychoanalytic, emphatically sociological approach to memory, derived from the Durkbeimian tradition, see the important statement by Paul Connerton, *How Societies Remember* (1989).

5. For an analysis of Lacan in the psychoanalytically informed humanities, see specifically Caruth's "Traumatic Awakenings: Freud, Lacan, and the Ethics of Memory," 91–112 in Caruth 1996.

6. See particularly Giesen, chapter 3, in this volume.

7. For another illuminating and influential work in this tradition, see Dominick LaCapra, *Representing the Holocaust: History, Theory, Trauma* (1994).

8. All quotations are from pp. 5–7.

9. Piotr Sztompka emphasizes the importance of "agency" for theorizing social change in *Sociology in Action: The Theory of Social Becoming* (1991) and in *The Sociology of Social Change* (1993). See also Alexander 1987 and Alexander, Giesen, Munch, and Smelser 1987.

10. The concept of "claims" is drawn from the sociological literature on moral panics. See Kenneth Thompson 1998.

11. In relation to issues of cultural change and conflict, Weber's concept has been developed further by S. N. Eisenstadt in "The Axial Age: The Emergence of Transcendental Visions and the Rise of Clerics" (1982), and, most recently, Bernhard Giesen in *Intellectuals and the Nation* (1998). Claim-making groups correspond also to the concept of "movement intellectuals" developed, in a different context, by Ron Eyerman and Andrew Jamison in *Social Movements: A Cognitive Approach* (1994). Smelser (1974) illuminated the group basis for claim making in his reformulation of Tocqueville's notion of "estate." See also Bjorn Wittrock 1991.

12. The foundation of speech act theory can be found in the pragmatically inspired interpretation and extension of Wittgenstein carried out by J. L. Austin in *How to Do Things with Words* (1962). In that now classic work, Austin developed the notion that speech is not only directed to symbolic understanding but to achieving what he called "illocutionary force," that is, to having a pragmatic effect on social interaction. The model achieved its most detailed elaboration in John Searle's *Speech Acts* (1969). In contemporary philosophy, it has been Jurgen Habermas who has demonstrated how speech act theory is relevant to social action and social structure, beginning with his *Theory of Communicative Action* (1984). For a culturally oriented application of this Habermasian perspective to social movements, see Maria Pia Lara, *Feminist Narratives in the Public Sphere* (1999).

13. He also speaks of a "representational process." Stuart Hall develops a similar notion, but he means by it something more specific than what I have in mind here, namely the articulation of discourses that have not been linked before the panic began.

14. For the contingency of tbis process of establishing the nature of the pain, tbe nature of the victim, and the appropriate response in the aftermath of the "trauma" created by the Vietnam war, see J. William Gibson 1994.

15. This thesis is developed in chapter 6 in this volume.

16. See chapter 4 in this volume.

17. See chapter 3, following.

18. Maillot's representation of the difficulties of tbe Northern Ireland peace process combines these different aspects of the classifying process:

None of the "agents of violence" would agree on the reasons for the violence and on its nature. In fact, only the supporters of the IRA and, to a much less extent, part of the nationalist community, would agree that there was an actual "war" going on. For a substantial section of the Unionist community, the IRA is entirely to blame. "Our whole community, indeed our whole country, has been the victim of the IRA for over 30 years," said Ian Paisley Jr. . . . As all the other issues discussed in the run-up to the signing of the Good Friday Agreement, the question of victims proved highly emotional and controversial . . . one that enabled all participants to vent their frustration and their anger, and one that revealed the different approaches each side was to take. Indeed, the very term *victims* proved controversial, as participants disagreed on the people who constituted this group.

19. The notion of transparency, so necessary for creating a normative, or philosophical, theory of what Habermas has called his "discourse ethics," is debilitating for creating a sociological one.

20. See Giesen's chapter, this volume.

21. Smelser described how state agencies and other agents of social control make efforts to "handle and channel" what we are here calling the trauma process.

22. Insofar as such memorializations are not created, the traumatic suffering has either not been persuasively narrated or has not been generalized beyond the immediately affected population. This is markedly the case, for example, with the 350-year enslavement of Africans in the United States. In chapter 3, Ron Eyer-

man demonstrates how this experience came to form the traumatic basis for black identity in the United States. However, despite the fact that white Americans initiated what has been called the "second Reconstruction" in the 1960s and 1970s, and despite the permeation among not only black but white American publics of fictional and factual media representations of slavery and postslavery trauma, white power centers in American society have not dedicated themselves to creating museums to memorialize the slavery trauma. A recent letter to the editor in the *New York Times* points eloquently to this absence and to the lack of black-white solidarity it implies:

> To the Editor: The worthy suggestion that the Tweed Courthouse in Lower Manhattan be used as a museum to memorialize New York City's slave history . . . evokes a broader question: Why is there no *national* museum dedicated to the history of slavery? One can only imagine the profound educational and emotional effect a major institution recounting this period of our history would have on *all* Americans. Perhaps President-elect George W. Bush, in striving to be a uniter of people, would consider promoting such a project in our capital? (*New York Times*, December 19, 2000, sec. 1).

23. There are, in other words, not only empirical but also moral consequences of this theoretical disagreement about the nature of institutionalization. For example, the routinization of recent trauma processes—those concerned with the democratic transitions of the last decade—has produced a body of specialists who, far from being desiccated and instrumental, have worked to spread a new message of moral responsibility and inclusion. As this book went into editing, the *New York Times* published the following report under the headline "For Nations Traumatized by the Past, New Remedies."

> From temporary offices on Wall Street, a new international human rights group has plunged into work with 14 countries, helping them come to terms with the oppressions that mark their recent past. The International Center for Transitional Justice opened its doors on March 1, incubated by the Ford Foundation and led by Alex Boraine, an architect of South Africa's Truth and Reconciliation Commission. The South African commission was the first to hold public hearings where both victims and perpetrators told their stories of human rights abuses in the era of apartheid. With a growing number of countries turning to truth commissions to heal the wounds of their past, many governments and human rights groups in Asia, South America, Africa and Europe are now asking for advice, information and technical assistance from those that have been through the process . . . The foundation . . . asked Mr. Boraine . . . to develop a proposal for a center that would conduct research in the field and help countries emerging from state sponsored terrorism or civil war . . . "The day we got our funds, we were actually in Peru, and it has been a deluge ever since." (July 29, 2001, A5)

24. For one of the first and still best sociological statements, see Kuper 1981.

25. This insightful work, by one of the most important contemporary Frenсb sociologists, develops a strong case for the moral relevance of mediated global images of mass suffering, but does not present a complex causal explanation for why and where such images might be compelling, and where not.

CHAPTER 2

Psychological Trauma and Cultural Trauma

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The objective of this chapter can be appreciated only by keeping in mind the context in which it appears—in a book on cultural trauma. I will focus on psychological trauma (and to a lesser extent on its sister idea, psychological stress) not so much as a phenomenon in itself, but as one that has relevance for and generates insights about cultural traumas. Several implications follow from this emphasis:

- My treatment of psychological trauma will be selective, not exhaustive. Part of this strategy is out of self-defense on my part, because the study of trauma is by now an industry and its literature is mountainous. In addition, however, not all aspects of psychological trauma (strategies for clinical treatment, for instance) are relevant; I will concentrate on what has theoretical and empirical value for the analysis of cultural trauma.
- Some conceptual muddiness in the concepts of trauma and stress must be noted at the outset. On the surface, trauma seems to connote a sudden overwhelming experience and stress a more prolonged aggravating condition. However, both concepts suffer from multiple definitions and they overlap, as suggested by the ideas of "acute stress," "traumatic stress" (van der Kolk et al. 1996), and "successions of partial trauma" (Freud and Breuer 1955 [1893–95], 288). Indeed, the currently reigning clinical classification—Posttraumatic Stress Disorder (PTSD)—includes both terms. Given

this confusion, I will have to deal with selected aspects of the range of phenomena rather than search for "true" definitions and empirical referents.

- Of necessity I will stress both the promise and the limitations of theory and research at the psychological level for understanding at the cultural level. Above all, it is essential to avoid psychological reductionism (via which the cultural level evaporates) and uncritical analogizing (a sin that recalls ancient fallacies associated with biological models of society and conceptions of the group mind).
- The most promising avenues of insight appear to be in the definition of trauma; its status as negotiated process; the roles of affect, cognition, and memory in traumas; and the roles of defense against, coping with, and working through traumas.
- At the end of the chapter I will step back from the idea of trauma, "objectify" it as a social and political process, and comment on both the scientific evolution and scientific degeneration of the concept.

These qualifications observed, I add unashamedly that this exercise has been intellectually profitable for me, and I hope that readers may be persuaded of its value.

ISSUES OF DEFINITION AND CONCEPTUALIZATION

The starting point of this section will be Sigmund Freud's writings between 1888 and 1898, when he and Breuer focused so intently on psychical trauma and its relation to hysteria. This focus is admittedly arbitrary; work on trauma predated Freud, notably in the French psychiatric tradition, and Freud subsequently altered his views, notably in the dramatic reformulation that assigned childhood fantasy such an important etiological role. The focus is justified, however, in that it yields the needed fruit for discussing implications for cultural trauma.

Working within the scientific/medical model that was so important in his thinking in the 1890s (Freud 1956 [1895]), Freud conceived of hysteria as having a definite cause, course of development, outcome, and cure. With respect to cause, he identified "a passive sexual experience before puberty" (Freud 1962a [1896], 152), usually molestation or seduction by a father, sibling, or household servant. The memory and affect associated

with the event are subsequently repressed from consciousness and consigned to a status of prolonged latency or incubation. Freud characterized the memory of the trauma as "a foreign body which long after its entry must continue to be regarded as an agent that is still at work" (Freud and Breuer 1955 [1893–95], 6). Sometime after puberty, and with appropriate precipitating conditions or events, the affect associated with the trauma—usually fright—returns, is defended against, and ultimately is converted into an organic symptom such as the paralysis of a limb, the loss of a function such as eyesight, or an inhibition. Freud went to special pains in emphasizing the importance of affect: "In traumatic neuroses the operative cause of the illness is not the trifling physical injury but the affect of fright" (Freud and Breuer 1955 [1893–95], 5–6). The putative cure, effected through the psychotherapeutic techniques used at the time, was the disappearance of the symptom after "we [Freud and Breuer] had succeeded in bringing clearly to light the memory of the event by which it was provoked 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 and Breuer 1955 [1893–95], 6). The occurrence of the disorder results from "an accretion of excitation" (Freud 1956 [1887–88], 137) caused by the trauma, first blocked by repression, stored up, expressed in a symptom, and then relieved by catharsis and verbal working through. We note that even this skeletal account involves reference to event, memory, affect, and a cognitive process ("putting the affect into words").

A close reading of Freud's texts indicates that even at this early phase of formulation he was struggling toward a more complex account of trauma-induced disorders. He noted that the traumas of childhood "are all the more momentous because they occur in times of incomplete development and are for that reason liable to have traumatic effects" (Freud 1963, 361)—implying that at a later developmental stage, that is, in a different context, the traumas would not be so severe. Moreover, as early as 1888, he doubted that an event (trauma) in itself constituted a sufficient causal condition for the development of hysterical symptoms. True, he said that a particularly intense psychical assault would be traumatic, but he added immediately that it might also be "an event which, *owing to occurrence at a particular moment,* has become a trauma" (Freud 1963, 361, italics added). Later he noted that the memories produced by the patient were often those "which we should not have judged worthy in themselves of constituting traumas" (1956 [1892]). This qualifying language constitutes an implicit though important confession that a

trauma can be event plus context. To put the point blankly, Freud was beginning a journey that would lead to the conclusion that a trauma is not a thing in itself but becomes a thing by virtue of the context in which it is implanted. (Freud's subsequent modification concerning sexual fantasies as content of traumas went further and suggested that trauma could be a nonevent, but instead all context [i.e., general infantile sexuality]). More recently, de Vries (1996) has reminded us that individuals in different cultures (for example, those with fatalistic religious traditions) may be less susceptible to "traumas" as they are understood in Western countries.

Freud again evoked the logic of context in referring to the appearance of hysterical symptoms when he took note of concurrent (or auxiliary) causes. Among them he mentioned "emotional disturbance, physical exhaustion, acute illness, intoxications, traumatic accidents, intellectual overwork, etc." These are not the primary causes; those are the traumatic assaults. At the same time,

> fairly frequently they fill the function of agents provocateurs which render manifest a neurosis that has previously been latent; and practical interest attaches to them, for a consideration of these stock causes may offer lines of approach to which a therapy which does not aim at a radical cure and is content with repressing the illness to a former state of latency. (Freud 1962b [1896], 148)

Elsewhere he identified "precipitating events" as playing a role. For a person with a latent neurosis, an adult experience such as "actual sexual violation to mere sexual overtures or the witnessing of sexual acts in other people, or . . . receiving information about sexual processes" (1962b [1896], 166) will trigger the outbreak of symptoms.

Within a decade after these formulations, Freud had moved even further from the "cause-effect" (i.e., infantile sexual trauma-hysterical neurosis) by developing his theories of drive and defense. On the one hand, he began to treat hysterical symptoms not merely as a "breaking through" of excitation but being—"like other psychical structures"—(Freud 1959 [1908], 163), the expression of a wish fulfillment. In addition, he recognized that symptoms constitute compromises "between two opposite affective and instinctual impulses, one of which is attempting to bring to expression a component instinct or a constituent of the sexual constitution, and the other is attempting to suppress it" (Freud 1959 [1908], 164).

By this time, Freud had arrived at a scientific point where he was

employing identical psychic dynamics to account for almost everything of interest to him—dreams, parapraxes, jokes, neurotic symptoms, character traits. These dynamics were conflict over impulse expression, strong associated affect, defenses against both impulse and affect, and outcome. Noting this, one can appreciate the inner tension in his theory that would drive him in the direction of developing a more complex theory of the defense mechanisms, constituting as they would the key factors in determining the choice of symptoms or behavior patterns. To focus on defenses would prevent his theory from degenerating, as it was in danger of doing, into a common explanation of everything.

The sure conclusion arising from the above line of reasoning is that, even in Freud's preliminary formulations, the idea of trauma is not to be conceived so much as a discrete casual event as a part of a process-in-system. To put the conclusion in its briefest form, trauma entails some conception of system. As Freud proceeded to include one qualification after another—most of them apparently suggested by the ongoing accumulation of clinical information—this system came to include the idea of drives (mainly sexual at this stage) located in a psychological structure at some stage of less-than-complete development (prepubertal in the theory of hysteria), affected over time by a diversity of external and internal causes (primary traumatizing event, concurrent causes including the general health of the organism, precipitating events), all playing out in the context of a continuing struggle between an instinctive apparatus versus a defensive apparatus. This idea of system was further informed by a number of postulates including hydraulic (economic) assumptions about the flow of psychic excitation and the conversion of psychic conflict into both psychic and motoric symptoms.

IMPLICATIONS FOR THE STUDY OF CULTURAL TRAUMAS

Historical Indeterminacy

I begin with a radical proposition, one that follows from the discussion of context above. The proposition: No discrete historical event or situation automatically or necessarily qualifies in itself as a cultural trauma, and the range of events or situations that may become cultural traumas is enormous. In his essay for this volume, Sztompka, tying cultural traumas to the effects of processes of social change, is able to produce a formidable list (pp. 00–00) that includes mass migrations, wars, mass unemployment, and dislocations associated with rapid social change. This list

is helpful, but both Sztompka and we acknowledge that not all of them necessarily constitute cultural traumas and that it would be possible to add more to his list. The radical aspect of this proposition rests on the fact that we are normally accustomed to think of some events—catastrophic natural disasters, massive population depletion, and genocide, for example—as in, by, and of themselves traumatic. They are nearly certain candidates for trauma, to be sure, but even they do not qualify automatically.

Several corollary observations follow from the proposition:

- The theoretical basis for the proposition is that the status of trauma as trauma is dependent on the sociocultural context of the affected society at the time the historical event or situation arises. A society emerging from a major war, suffering from diminished economic resources, experiencing rampant internal conflict, or having shaky social solidarity is more trauma prone than others that are more solid in these respects. Historical events that may not be traumatic for other societies are more likely to be traumas in afflicted societies.
- Several definitional accomplishments must be made before an event can qualify as a cultural trauma. It must be remembered, or made to be remembered. Furthermore, the memory must be made culturally relevant, that is, represented as obliterating, damaging, or rendering problematic something sacred—usually a value or outlook felt to be essential for the integrity of the affected society. Finally, the memory must be associated with a strong negative affect, usually disgust, shame, or guilt. Looking at the sweep of American history, the memory of the institution of slavery appears to qualify most unequivocally as a cultural trauma, because it comes close to meeting these three conditions. The seizure of Native Americans' lands and the partial extermination of their populations is another example, but at the present time its status as trauma is not as secured as is slavery.
- A given historical event or situation may qualify as a trauma at one moment in a society's history but not in another. Without doubt the regicides of Charles I in England in the mid-seventeenth century and Louis XVI in the French Revolution constituted major cultural traumas for decades afterward but are no longer dealt with in contemporary political or social discourse. Even so catastrophic a phenomeuon as the black death, fully traumatic for decades after it occurred, is not currently regarded as traumatic for the societies it affected, even though historians are fully aware of its traumatic consequences at the time.

We conclude, then, that cultural traumas are for the most part historically made, not born. This fundamental point leads us to the issue of the mechanisms and agencies involved in the process of making, to which we will turn presently.

System

If the definition of a cultural trauma—like a psychological trauma—depends above all on context, what kind of context is this? In the example above, taken from Freud's early writing, the personality system is represented as an environmentally open system (i.e., capable of being damaged from outside), possessing the capacity to internalize (through memory) this damage, capable of defending against it by a partially successful repression, but ultimately vulnerable to its impact.

What kind of system is a culture? I do not want to tread on the shaky analytic ground of comparing personality, social, and cultural systems—a common enterprise in the 1950s (Parsons and Shils 1951; Sorokin 1962) but one that is all but defunct nowadays—but a few words can be said. A social system refers to the organization of social relations in society; its main units are social roles and institutions, and these are normally classified along functional lines—economic institutions, legal institutions, medical institutions, educational institutions, family institutions—though the idea frequently includes systems of ranking (stratification) into social classes, racial and ethic groups, and so on.

It is possible to describe social dislocations and catastrophes as social traumas if they massively disrupt organized social life. Common examples would be decimation through disease, famine, and war. The Great Depression of the 1930s can also be regarded as a social trauma, because it crippled the functioning economic institutions of those societies it affected, and it often led to strains or even breakdowns in their political and legal systems. The important defining characteristic of social traumas is that the affected arenas are society's social structures.

As a system, a culture can be defined as a grouping of elements—values, norms, outlooks, beliefs, ideologies, knowledge, and empirical assertions (not always verified), linked with one another to some degree as a meaning-system (logico-meaningful connections, in Sorokin's words).

For a national society—my main reference point in this essay—we expect that there exists a culture with national reference that manifests variable degrees of unity and coherence. By unity I refer to the degree to which there is general consensus about the culture in the society, and the degree to which subcultures, countercultures and cultural conflicts compromise that consensus. By coherence I refer to the tightness or looseness of the meaningful relations among the elements of the cultural system.

A cultural trauma refers to an invasive and overwhelming event that is believed to undermine or overwhelm one or several essential ingredients of a culture or the culture as a whole. The Protestant Reformation qualifies as a cultural trauma because of the fundamental threat it posed to the integrity and dominance of the Catholic cultural worldview. The imposition of Western values on colonial societies in the nineteenth and twentieth centuries provides additional examples. The exposure of migrating groups to the cultures of the host societies into which they migrate provides still more.

Some historical events qualify as both socially and culturally traumatic. I mentioned the case of the Great Depression as a social trauma. In addition to its disruptive social effects, it also constituted a crisis for the culture of capitalism (free enterprise, the private property system, the profit system, and ideology of progress and material plenty) and shook the faith of those committed to it as an ideological system.

Several other points about the concept of cultural trauma can be advanced. National cultures in complex societies are typically problematic with respect to unity and loose with respect to coherence. It follows that a claim of traumatic cultural damage (i.e., destruction of or threat to cultural values, outlooks, norms, or, for that matter, the culture as a whole), must be established by deliberate efforts on the part of cultural carriers—cultural specialists such as priests, politicians, intellectuals, journalists, moral entrepreneurs, and leaders of social movements. In most cases the process of establishing is a contested process, with different political groups divided with respect to whether a trauma occurred (historical contestation), how its meaning should be regarded (contestation over interpretation), and what kinds of feelings—pride, neutrality, rage, guilt—it should arouse (affective contestation). Furthermore, once a historical memory is established as a national trauma for which the society has to be held in some way responsible, its status as trauma has to be continuously and actively sustained and reproduced in order to continue in that status. These features mean that a cultural trauma differs greatly from a psychological trauma in terms of the mechanisms that

establish and sustain it. The mechanisms associated with psychological trauma are the intrapsychic dynamics of defense, adaptation, coping, and working through; the mechanisms at the cultural level are mainly those of social agents and contending groups.

The Salience of Affect

At the psychological level, the active elements in both the traumatic situation and the process of coping with are negative affects. Freud ultimately came to focus on anxiety as the key emotional response to danger and threat (Freud 1959 [1926 {1925}]; Freud 1955 [1923{1922}], 236), but one could easily expand this to include guilt, shame, humiliation, disgust, anger, and other negative affects. For Freud, anxiety (and affects more generally) is an inner language that serves to communicate between the perceptual apparatus (which recognizes both internal and external dangers) and the organism's adaptive apparatus. It is the motive force for mobilizing both ideational and motoric responses to the threat.

Generalizing this principle, we may conceptualize both negative and positive affects as having mainly a "readying" function with respect to purposive behavior. Contrary to utilitarian formulations that regard actors as seeking pleasure and avoiding pain as end states, both pain (threat) and pleasure (gratification) are best regarded not as accompanying ideational and motoric activity, but, rather, as anticipating that activity and mobilizing the organism to participate in it or avoid it.

Furthermore, because every human being, from the beginning of life, maneuvers his or her way through a world that is actually and potentially both threatening and gratifying, every human being also experiences every variety of anticipatory negative and positive affect. By virtue of this, affects constitute a kind of universal language, the symbolic representations of which operate as effective means of communicating among individuals. Unlike other language structures, however, the language of affect involves fewer difficulties of translation from one language to another, because it is a product of universal experience. As Epstein observes:

> Much of everyday social intercourse involves the expression of affect: we must be alert to the feelings of others just as we are careful what we disclose of our own. In negotiating these encounters we also come to recognize, if only subliminally, that how and what we feel is transmitted not just verbally but by nonverbal cues as well, cues that may indeed carry the more vital information: in a given "message" tone of voice, a raising of the eyebrows or some other involuntary movement of the body may count as much as,

> or even more than, verbal content. Nor of course is it only in the context of such personal interaction that the important role of affect is to be seen: it is indeed difficult to think of any human activity or social event that is not ordinarily accompanied by some degree of emotional expression. (Epstein 1992, 1–2)

A further implication of this theoretical representation is that affects, once experienced, can generalize and endow meaning to events and situations that need not necessarily have occurred or existed. One telling range of relevant evidence on this score is the finding (McCann and Pearlman 1990; Pearlman and MacIan 1995) that trauma therapists (that is, psychotherapists who specialize in dealing with patients with posttraumatic stress disorder) often themselves experience traumatic affects and symptoms in the course of therapy. This has been called "vicarious traumatization." These effects are experienced more vividly among therapists who have themselves had traumatic experiences in their own backgrounds, but the self-esteem of those who have not had a personal history of trauma is also adversely affected. This principle also explains why individuals who are passively watching or reading thrilling, gripping, or frightening movies or books can be temporarily "traumatized" by them even though they are completely fictional. They attach the affects that would have been excited by actual events to fictional situations. This implies further that trauma can be experienced by attaching appropriate affects to imagined situations.

Affect also occupies a position of centrality in our understanding of cultural trauma. A cultural trauma is, above all, a threat to a culture with which individuals in that society presumably have an identification. To put it differently, a cultural trauma is a threat to some part of their personal identities. As such, this threat, if experienced, arouses negative affects. We may go further: if a potentially traumatizing event cannot be endowed with negative affect (e.g., a national tragedy, a national shame, a national catastrophe), then it cannot qualify as being traumatic.

The language of affect thus provides a notable link and continuity between the cultural and psychological levels. In a not-well-known passage, Parsons described "affect" as a symbolic medium of interchange and argued that for that reason "affect is not in the first instance primarily a psychological medium but rather one whose primary functional significance is social and cultural" (Parsons 1978 [1974], 316). Not surprisingly, Parsons focused on love and other positive affects as they relate to social solidarity; but negative affects can readily be included in this formulation. I would not, however, go so far as Parsons has. Affects are

significant at both the psychological and psychocultural levels; they constitute a language that links those levels.

To conclude this line of reasoning: those interested in establishing a historical event or situation as traumatic must speak in a language that will reach individual people. And since affect plays such a salient role in alerting individuals to threatening and traumatizing phenomena, experiencing the language of negative affect is a necessary condition for believing that a cultural trauma exists or is threatening. This is not to reduce affect-laden cultural representation to individual psychological experiences, or vice versa, but to point out that it is the medium that links the two levels.

Embeddedness in Personality

A notable feature of a psychological trauma is its embeddedness or indelibility in the structure of personality. Once lodged, it will not go away. More than a century ago, Charcot (1887) described traumatic memories as "parasites of the mind." Freud spoke of the traumatic memory as a "an indelible imprint" (Freud 1962a [1896], 153), as a "foreign body . . . an agent that is still at work" (Freud and Breuer 1955 [1893–95], 6), as something which the nervous system "has been unable to dispose of" (Freud 1956 [1887–88], 137), and as producing "permanent effects" (Freud 1956 [1893], 153). Caruth referred to trauma as a wound that is "not healable" (Caruth 1996, 4). In a more detailed description, van der Kolk described this fixation as follows:

> When the trauma fails to be integrated into the totality of a person's life experiences, the victim remains fixated on the trauma. Despite avoidance of emotional involvement, traumatic memories cannot be avoided; even when pushed out of waking consciousness, they come back in the form of reenactments, nightmares, or feelings related to the trauma. . . . Recurrences may continue throughout life during periods of stress. (van der Kolk 1996, 5)

This characterization must be regarded as relative. The degree of indelibility varies according to the severity of trauma, the helplessness of the victim, and whether the traumatic event is experienced as one of "human design." Nonetheless there is general consensus on the issue of long-lastingness in the clinical literature.

Students of collective trauma have stressed its indelibility at the sociocultural level as well. According to Neal's account:

> The enduring effects of a trauma in the memories of an individual resemble the enduring effects of a national trauma in collective consciousness. Dismis-

> sing or ignoring the traumatic experience is not a reasonable option. The conditions surrounding a trauma are played and replayed in consciousness through an attempt to extract some sense of coherence from a meaningless experience. When the event is dismissed from consciousness, it resurfaces in feelings of anxiety and despair. Just as the rape victim becomes permanently changed as a result of the trauma, the nation becomes permanently changed as a result of a trauma in the social realm. (Neal 1998, 4)

Confirming examples of this indelibility can be easily produced—the memories of the Nazi Holocaust, American slavery, the nuclear explosions at Hiroshima and Nagasaki. However, other traumalike events mentioned by Neal himself, such as the Challenger explosion, the Watergate affair, and the Cuban missile crisis do not seem to qualify quite so readily or completely. We should say more precisely that in the case of a collective trauma, there is often an interest in representing the trauma as indelible (a national shame, a permanent scar, etc.), and if this representation is successfully established, the memory does in fact take on the characteristics of indelibility and unshakeability.

If the element of indelibility becomes fixed in the cultural definition of a trauma, it then becomes difficult to imagine that it will be "worked through" in any once-and-for-all way. The psychological literature on trauma sometimes suggests the possibility of virtual disappearance through cure or psychic work. Freud's formula of cure through catharsis plus putting the affect into words is described as a "cure," and the idea of "grief work" after traumatic loss of a loved one through death suggests returning to normal functioning and reconstituting a new social world. In the case of full-blown cultural traumas, however, a more appropriate model would be one of constant, recurrent struggle—moments of quiescence perhaps, when some convincing formula for coming to terms with it takes root, but flarings-up when new constellations of new social forces and agents stir up the troubling memory again.

Claim on Psychic Energy

Being indelible in important ways, a psychological trauma has an insistent claim on the person's psychic energy. It becomes a part of the psyche. However, as we will stress later, one of the major patterns of defensive or adaptive activity on the part of the person is to deny, to become numb, to avoid situations that might reactivate the memory of the trauma, and to develop dissociational symptoms (Horowitz 1976, 4–5). These reactions might be regarded as efforts—never completely successful, because of the

indelibility principle—to remove the traumatic memory from the psychic system.

The counterpart of these reactions at the collective level is collective denial or collective forgetting, though we should take care not to suggest that this formulation involves some kind of "group mind" at work when the fact is that many individuals in a collectivity, as individuals, deny a historical event. A better way of expressing the idea is to say that in order for a historical event or situation to become established as a collective memory, there must be assumed or established, as a logically prior condition, a claim for common membership in a collectivity—for example, a nation or a solidary subnational population such as an ethnic or religious minority. For example, to establish the Nazi Holocaust as a relevant cultural trauma for Germany and Germans, there must be a meaningful membership group recognized as Germans. To say this may appear to be announcing the trivial or obvious, because, with the commanding power of the idea of the nation as membership group, to use the word "German" almost automatically implies a meaningful cultural reference and membership group. However, it should not be forgotten that the link between trauma and national membership can be a contested one. For example, for several decades the East German communist regime adopted a more or less official ideological policy that the Holocaust was a product of the workings of capitalist bourgeois forces, and that they, as Germans to be sure, but as Germans disassociated from and inimical to those forces, were not called upon to bear responsibility for the trauma. According to that story, the Holocaust was not their memory, even though they were Germans.

Collective Trauma and Identity

A further corollary, following immediately from the preceding, is that a collective trauma, affecting a group with definable membership, will, of necessity, also be associated with that group's collective identity. Put simply, a meaningful cultural membership implies a name or category of membership, and the social-psychological representation of that category produces a sense of psychological identity with varying degrees of salience, articulation, and elaboration:

> All collective traumas have some bearing on national identity. While in some cases national trauma results in enhancing a sense of unity within a society, there are other cases in which collective traumas have fragmenting effects. . . . Through the epic struggles of the American Revolution and the

> American Civil War we came to recognize more clearly what it means to be an American. . . . The social heritage provides us with an everyday blueprint and a sense of social continuity. A serious crisis of meaning surfaces when we can no longer make assumptions about the continuity of social life as it is known and understood. (Neal 1998, 31)

Any given trauma may be community- and identity-disrupting or community- and identity-solidifying—usually some mixture of both (Erikson 1994). In any event, this line of reasoning suggests why the ideas of collective trauma, collective memory, and collective (e.g., national) identity are so frequently associated with one another in the literature on sociocultural trauma.

We may now advance a formal definition of cultural trauma: a memory accepted and publicly given credence by a relevant membership group and evoking an event or situation which is a) laden with negative affect, b) represented as indelible, and c) regarded as threatening a society's existence or violating one or more of its fundamental cultural presuppositions.

The obvious observation to add at this point of transition is that if a historical event or situation succeeds in becoming publicly identified as a cultural trauma, then this certainly imparts an air of urgency—a demand for those who acknowledge it as such to come to grips with it. This leads us immediately to the topic of defense.

DEFENSE, SYMPTOMS, AND COPING

One standard word used in characterizing a psychological trauma is that it is an "overwhelming" experience (Prince 1998, 44). A more detailed version of this idea is found in McCann and Pearlman (1990, 10), which lists the following identifying ingredients: [a trauma] "(1) is sudden, unexpected, or non-normative, (2) exceeds the individual's perceived ability to meet its demands, and (3) disrupts the individual's frame of reference and other central psychological needs and related schemas." This is an accurate characterization of many of the events that constitute trauma (near-death on the battlefield, rape, witnessed murder of a parent), but this definition must always be considered a beginning. While it is possible to conceive a situation that is completely overwhelming, it is almost always the case that an exposed individual "fights back" against the experience and its effects, however primitively. This reactive ingredient was present in Freud's earliest formulations and leads directly to the notions of defense and coping.

Some years ago I attempted a systematic classification of the psychological mechanisms of defense (Smelser 1987), the literature on which was plagued by vagueness, overlapping, repetition, and confusion of different levels of generality. In the first instance, and consistent with the psychoanalytic tradition, I classified these defenses as reactions against an internal threat, that is, instinctual arousal. This model, based on Freud's representation and formalized later by Rapoport (1951), constructs a highly generalized sequence, beginning with mounting drive tension, which, when its gratification is delayed, gives rise to psychic drive representations, characteristic discharges of affect associated with these representations, and characteristic hallucinatory representations of potentially gratifying objects. The tension is reduced when the drive is gratified by some kind of motor activity leading to a change in the state of the organism.

One principle of defense mechanisms is that they can be activated at different stages in this process, beginning with instinctual arousal and ending with behavior (motor activity). That is to say, the drive representation can be defended against (e.g., repression), the associated affect may be defended against (e.g., suppression of affect), the object of gratification can be distorted (e.g., displacement), and the gratifying behavior can be defended against (e.g., inhibition).

Furthermore, I identified four separate modes of defense:

1. to block the threatening intrusion (e.g., denial),
2. to reverse the threatening intrusion into its opposite (e.g., to convert contempt into awe),
3. to shift the reference of the threatening intrusion (e.g., projection), and
4. to insulate the threatening intrusion from its associative connections (e.g., depersonalization).

Combining the four "stages" of gratification and the four "modes" of defense into a single grid produces the classification of defense mechanisms found in Table 1. The table represents a more or less exhaustive "repertoire" of defenses available to an individual in fending off threatening internal intrusions. In any struggle against an unwanted intrusion, the individual typically employs a multiplicity of defenses, a "layering" (Gill 1961). With respect to trauma in particular, clinical evidence reveals that a victim of trauma may more or less simultaneously rely on, for example, denial, blaming or scapegoating others (projection), avoidance, defining the trauma as a "valuable" experience (reversal), displacing the

TABLE 1. THE MECHANISMS OF DEFENSE CLASSIFIED IN TERMS OF BASIC MODES AND DEVELOPMENT PHASES OF BEHAVIOR

Stages	1	2	3			4
			Psychic Representation (Hallucination) of Gratification Situation			*Behavioral Outcome*
Modes			*3a. Cognitive representation drive*	*3b. Relevant affect*	*3c. Relevant object*	
Blocking	Libidinal tension	Delay of gratification	Repression	Suppression of affect	Withdrawal, denial	Inhibition
Reversal into opposite			Change of instinctual aim	Reversal of affect	Reversal from other to self as object	Reaction formation; undoing
Shift in reference of			Projection of impulse	Projection of affect	Displacement; identification; rationalization	"Acting out"
Insulation from associative connective			"Splitting" or isolation of impulse	Isolation of affect	Depersonalization of experience	Isolation of behavioral event

threat to another source, and rationalizing. Speaking of an unwanted memory of a trauma, Freud described this complexity: "[The precocious event (i.e., trauma)] is represented . . . by a host of symptoms and of special features, . . . subtle but solid interconnections of the intrinsic structure of the neurosis . . . the memory must be extracted from [resistances] piece by piece" (1962 [1986], 153).

The next step in my analysis was to suggest that this repertoire of coping strategies is not limited to fending off internal threats (the dominant approach to defenses in psychoanalysis) but can apply to external threats as well. Thus, in the face of danger (for example, environmental toxicity), the individual can resort to denial (the threat does not exist), to suppression of affect (it may exist, but there is nothing to worry about), to displacement of threat (it is a threat only in Third World countries), "acting out" (engaging in ritual protections against the threat), and so on.

At this moment I should confess that, in the light of the foregoing passages, I am not altogether happy with the terms "defense," "defensive," and "defense mechanisms," even though I will continue to use the terms for reasons of consistency with past usage. The term "defensive" has the connotation that the user of defenses is on the run, or has his or her back against the wall, in the face of threats. The statement "don't be defensive" certainly suggests that. Because, however, to employ these strategies as often as not involves active adaptation and mastery—even exploitation—of one's situation, I prefer the more neutral term of "coping mechanisms," or even the awkward "ways of coming to terms with external and internal threats and intrusions."

It is a part of the human condition that life is a continuous struggle, in the sense that any individual is forever experiencing, defending against, capitalizing on, and coming to terms with both external and internal dangers and threats of danger. For that reason it is possible to treat the repertoire of coping strategies, like affect, as a kind of universally—certainly generally—recognized language that can be communicated and shared by individuals and in collectivities. Everyone knows what it is to deny, to blame, to accuse (project), and to love what one has previously hated and vice versa (reversal), because these modes of coping are part of everyone's experience—even though every individual has a distinctive and preferred pattern of modes in his or her individual armory. This postulate of generality and shareability is—as in the case of affect—a necessary one if we are to be able to speak of collective coping as an ingredient of cultural traumas. Representations, in order to be collective, must be mutually understood and shared.

I now turn to a number of specific observations about coming to terms with cultural traumas as such.

Mass Coping Versus Collective Coping

It stands to reason that a historical event with penetrating if not overwhelming significance for a society will also constitute a major situation to be coped with on the part of many individuals in the society, even if it does not constitute a personal trauma for them. I have in mind the imposition—by virtue their very occurrence—of a need to give definition to Nazism and the Holocaust in Germany, the ending of slavery in the United States, the imposition of Soviet-dominated communist rule in Poland—to choose examples included in this volume. Many (though not all) Americans were similarly called upon to come to terms—in different ways and at different times—with major events such as Pearl Harbor in 1941, the internment of Japanese-Americans in 1942, the dropping of the atomic bombs on Japanese cities in 1945, and the Cuban missile crisis of 1962. Under the pressure of such events, moreover, many people in the respective populations coped with the same or similar reactions—such as fighting off their anxiety, dismissing or denying the significance of the event, depersonalizing, and so on. We call this aggregation of individual responses a mass phenomenon because it involved many people having the same reactions and assigning the same meaning.

However, we should be careful not to refer to such mass responses as a collective response or defense. To bring them into the latter category, some or all of the following ingredients of "collective memory work" have to be accomplished.

- The response must be highlighted as a response to a trauma that affects all members of the relevant collectivity. In his speech following the Japanese attack on Pearl Harbor, President Roosevelt announced that the treacherous assault established "a date that will live in infamy"—a statement that proclaimed indelibility, an assault on the whole of the American people, and an outrage to be feared and detested. The speech worked to crystallize the sea of mass responses to the event into a collective response. The chorus of utterances by national leaders, black and white, proclaiming the assassination of Martin Luther King Jr. in 1968 as a national shame, worked toward the same end.

- The collectivization of coping responses is rarely, however, achieved by a proclamation by political leaders. It frequently involves these, of course, but it is more often a prolonged process of collective groping, negotiation, and contestation over the proper historical meaning to be assigned, the proper affective stance to be adopted, the proper focus of responsibility, and the proper forms of commemoration. For example, the initial response to the death of President Roosevelt in 1945 was a mixture of mass sadness on the part of those who loved the president, guilt on the part of those who were secretly pleased to be rid of the hated man, and confusion on the part of those who were apprehensive about the loss of leadership amid the uncertainties of the war and the peace to follow (de Grazia 1948). This initial confusion and groping was channeled into a semiofficial national response of mourning, carried in the words of leaders such as Vice President Truman and Eleanor Roosevelt, by the highly publicized solemn journey of the train bearing Roosevelt's coffin from Warm Springs to Washington, and by the official conferring of presidential power on Truman ("the king is dead, long live the king").

- Most often the establishment of a collectivity's responses to a trauma is a matter of bitter contestation among groups, sometimes over long periods of time and often without definitive settlement. The issue of how to remember slavery and the American Civil War has never been completely resolved among groups of African Americans who continue to come to terms with its meaning for their cultural identity, among many in the North who want to remember it as a heroic obliteration of a national curse, and among many southerners who want to remember it as a simultaneously heroic and tragic end to a distinctive southern way of life. To choose another example, the post–World War II years have involved continuous and sometimes bitter debates among those who regard the dropping of the A-bomb on Japan as a military triumph, as a fully justified way of saving American lives in the war, as a regrettable necessity, as a savage act, and as a national travesty (Linenthal 1989). Those involved in such debates often have specific interests to promote or protect (the armed forces, political parties, social movements for peace and countermovements against them, and so on). Insofar as these

contests are chronic and never come to a point of consensus over meaning, appropriate affect, and preferred coping strategy, we do not have a completely official version of a collective trauma, but rather a continuing counterpoint of interested and opposing voices.

- Many contestations can thus be regarded as largely symbolic struggles over different ways in which historical events should be remembered and what affective stance (positive or negative) ought to be assumed. This is certainly true with respect to struggles over commemorative rituals, monuments, and museums. The nature of these struggles, moreover, will change over time, as different constellations of interested groups with different agendas emerge on the scene. In many cases, of course, public insistences on how events and situations should be remembered are at the same time thinly disguised claims for improving a group's economic position, political recognition, and social status. For example, veterans of quasi wars and military actions short of wars have an interest in being remembered as veterans of heroic struggle because of the array of legal privileges and material benefits available to them. As we will note below, certain advantages also accrue to individuals and groups who succeed in having themselves diagnosed (remembered) as victims of traumas.
- Symbolic struggles over the proper remembering of traumas often have a generational dimension. Giesen's treatment of Holocaust memories reveal an accusatory stance (mainly in the 1960s) by children who had not experienced the Holocaust but whose parents had. Many hawks in the Vietnam war period were older citizens who bitterly "remembered" Chamberlain's appeasement strategies before World War II (and were convinced that the same mistakes should not be made again); whereas many doves were younger persons who had not had that generational memory imprinted on them or who "remembered" it differently from the older generation.

The Issue of Collective Repression

Freud regarded repression as a special defense mechanism in coping with trauma, and, in his later writings, with neurotic conflict more generally. It was an initial, general response of the prepubertal child (presumably not equipped with a full repertoire of defenses at that developmental phase) in dealing with trauma. In principle, repression is an extremely effective defense in dealing with threats, because, if successful, it banishes the threat and obviates the need for additional defensive activity. For Freud, however, repression was typically not successful. It only succeeded in incubating, not obliterating the threat. The occasion for new and heightened adult defense against the memory of trauma was the failure of repression, the breakthrough of anxiety, and the mobilization of a whole array of other defenses, including in the last analysis, symptom as defense. In current diagnoses the phenomena of defensive repression, denial, and avoidance are typically included in the diagnosis of posttraumatic stress disorders.

It seems inadvisable to seek any precise sociocultural analogy for the psychological repression of trauma. Certainly one dominant response to a trauma can be mass denial, unwillingness to remember, and forgetting—as demonstrated by the situation in West Germany immediately after the Holocaust and the case of slavery among blacks in the immediate postemancipation period (see Giesen and Eyerman, this volume). It is difficult to imagine anything like the complete success of an organized political effort to ban a major historical event or situation from memory, largely because it is impossible to control, even with extreme efforts, private oral intercommunication among citizens, between parents and children, and so on. Thus the idea of "cultural repression" in any full sense does not make social-psychological sense, even though determined totalitarian governments (Hitler's Germany, Stalin's Soviet Union, and Mao's China) have made massive attempts to cover up and rewrite history.

By the same token, it does not seem advisable to seek a precise analogy for the idea of psychological incubation—the notion of a repressed, highly charged, under-the-surface force ready to break into the open at all times. The reason this "smoldering volcano" imagery seems unsatisfactory is that the "active" or "inactive" status of cultural trauma is so contingent on forever changing and ongoing social and political conditions and on ongoing processes of negotiation and contestation among groups. I make this assertion in full knowledge of the fact that interested groups (including governments) often represent cultural traumas as indelible marks or scars, forever nagging at the body social and the body politic. The very status of "indelibility," however, is itself subject to constantly changing historical circumstances.

The Universality of Blame and Scapegoating

At the psychological level this mechanism is an obvious one. It involves both displacement and projection—assigning responsibility and blame on others for unwanted internal or external intrusions, especially if these intrusions evoke the possibility of self-blame or guilt (including survivor guilt). If extreme enough, these reactions crystallize into a solidly established paranoia that defies considerations of empirical reality and logic.

Similarly, when any kind of accident, disaster, shock, public disgrace, or breakdown of social control occurs, an almost inevitable first (and even continuing) response is to assign responsibility and blame. Sometimes this reaction is more or less institutionalized—the firing of the manager of an athletic team during or after a losing season, the cashiering of the captain of a naval vessel after a navigational failure (no matter whose fault it actually was), the firing of a chief executive officer when corporate profits fall or the company founders. With respect to unanticipated failures or disasters, the tendency to seek responsibility and blame is nearly automatic. It is virtually assured if there is any indication that the failure is "man-made" as opposed to natural (earthquakes, floods, hurricanes, natural forest fires). Even the latter produce hostile reactions toward agents who were supposed to forecast or prevent it or who are responsible for reacting to it once it occurs (Smelser 1962). The same scapegoating effect is a regular feature of "moral panics"—collective hysteria in response to uncertainty and threat—in which some inimical agent is identified as attacking something held sacred (Thompson 1998).

Cultural traumas, when defined and accepted as such, do not escape this tendency. In every one of the case studies of cultural trauma detailed in this volume, the assignment of responsibility is salient. Who is at fault? Some hated group in our midst? Conspirators? Political leaders? The military? Capitalists? A foreign power? We ourselves as a group or nation? Earlier I noted that the very effort to establish a cultural trauma is a disputed process, as are debates and conflicts over "preferred defenses." Perhaps even more divisive ingredients of the cultural-trauma complex are finger-pointing, mutual blame, and demonization. Furthermore, when these conflictual consequences appear on the scene, they themselves become potential sources of trauma, and typically result in the mobilization of efforts, mainly on the part of political authorities, to calm the scene—whether by publicly proclaiming a responsible agent and joining in the attack, by launching "impartial" investigating commissions to settle questions of responsibility in a cooler and more neutral way, or otherwise attempting to calm the waters by "working through" the issues of blame and responsibility.

Attraction and Repulsion and the Establishment of Ambivalence

One of the peculiarities that has been noticed in connection with acute psychological traumas is a very strong dual tendency: to avoid and to relive (Freud 1964 [1939 [1834–38]], 35–63). At the ideational level one main defense is some form of amnesia (numbing, emotional paralysis [Krystal 1978] actual forgetting, denial, difficulty in recalling, or unwillingness to contemplate or dwell on the traumatic event). At the same time, the trauma has a way of intruding itself into the mind, in the form of unwanted thoughts, nightmares, or flashbacks. These apparently antagonistic tendencies have presented themselves to some as a paradox (Caruth 1995, 152). At the behavioral level the same double tendency has been observed: a compulsive tendency to avoid situations that resemble the traumatic scene or remind the victim of it, but at the same time an equally strong compulsion to repeat the trauma or to relive some aspect of it (van der Kolk 1996, 199–201).

When seeking an analogy at the sociocultural level, we discover such dual tendencies—mass forgetting and collective campaigns on the part of groups to downplay or "put behind us," if not actually to deny a cultural trauma on the one hand, and a compulsive preoccupation with the event, as well as group efforts to keep it in the public consciousness as a reminder that "we must remember," or "lest we forget," on the other. A memorial to an event, it has been pointed out, has elements of both reactions: to memorialize is to force a memory on us by the conspicuous and continuous physical presence of a monument; at the same time a memorial also conveys the message that now that we have paid our respects to a trauma, we are now justified in forgetting about it. These two reactions are most vivid in Giesen's account of the array of attempts to come to terms with the Holocaust in postwar West Germany. The preoccupation with and controversies over memorials of the Holocaust continue to be conspicuous phenomena in Germany and to a lesser extent in the United States. The great public controversy over memorials to the Vietnam war, especially the one in Washington, D.C., reveals the same dynamic of double memory—the compulsion to remember and the compulsion to forget (Scruggs and Swerdlow 1985; Wager-Pacifici and Schwarz 1991; Glazer 1996). One major qualification on psychological analogizing, however, should be stressed. At the psychological level the battle between

the two tendencies goes on within the psyche; at the cultural level, there may be instances of alternating between compulsive avoidance and compulsive attraction in some individuals and groups, but the major manifestation is a conflict among different groups, some oriented toward playing down the trauma and others in keeping it alive (Geyer 1996).

A closely related defense against trauma is to convert a negative event into a positive one. In some cases this is relatively unproblematic. The American Revolution, potentially if not actually a trauma in American history (and certainly a trauma if it had failed), has been almost universally remembered as a positive, heroic myth of origin for the American nation (Neal 1998, 22–23). In other cases the shift is more problematical. Some Poles remember some aspects of the Communist era (e.g., security of income) with nostalgia, particularly in the context of unemployment and other costs of a market economy (see Sztompka, in this volume; see also Wnuk-Lipinski 1990). Eyerman's chapter demonstrates decisively that many African American intellectuals in the late nineteenth century revived the memory of slavery as a historical blessing in the sense that, even though a trauma, it gave black Americans a positive basis for identity in a world that had revoked the postslavery promise of full citizenship by the imposition of Jim Crowism in the South and discrimination in the North. Even the German remembering of the Holocaust, in which it seems almost impossible to find anything positive, shows a glimmer of this element: to remember it strengthens our resolve not to permit it to happen again.

In all events, this double tendency, once it appears in the memory and memorializing of traumas, firmly establishes one of their most remarkable characteristics: ambivalence toward them. Like psychological ambivalence, its manifestation at the sociocultural level sets the stage for the frequently observed tendency for generation after generation to engage in compulsive examining and reexamining, bringing up new aspects of the trauma, reinterpreting, reevaluating, and battling over symbolic significance. These are the ingredients of what might variously be called cultural play, cultural fussing, even culture wars. Ambivalence lends strength to the assertion of indelibility: cultural traumas can never be solved and never go away. Over time the repeated and relived cultural activity yields a reservoir of hundreds of different renditions of the memory—some dead, some latent, some still active, some "hot," but in all events many that are available for resuscitation. This produces a fascinating type of cultural accumulation—a nonending, always-expanding repository consisting of multiple precipitates (both negative and positive) of a continuous and pulsating process of remembering, coping, negotiating, and engaging in conflict.

Once thus endowed with status of ambivalence, finally, cultural traumas manifest a tendency toward producing political polarization and sharply divided debates. All the elements necessary for this characteristic have by now been mentioned—a threatening if not overwhelming assault on cultural integrity and an event or situation endowed with powerful, ambivalent affects. This combination produces the familiar effect of "splitting," whereby one side of the ambivalence is more or less completely denied, negated, or repressed and the other side made to be the whole story. Political polarization results when two or more political groups—each having adopted rigid, opposing modes of splitting—confront one another and have at it in either-or struggles over the meaning and assessment of the trauma.

EXCURSUS: THE SCIENTIFIC EVOLUTION AND DEVOLUTION OF TRAUMA

It is of interest, in concluding, to call attention to an engaging theoretical/methodological/ideological observation about the century-long scientific history of the notion of psychological trauma. This observation is not meant to be an exhaustive survey of conceptualization and research on the topic, but rather a general commentary on the fate of a scientific concept.

From a medical point of view the idea of trauma, both for adults and for children, traces to the labors of psychiatrists in nineteenth-century Europe, and the explanation-sketches developed by the French pioneers Janet and Charcot (van der Kolk, Weisaeth, and van der Hart, 1996, 52–53; Kahn 1998, 4–5). Freud's work on hysteria crystallized this interest and offered several new elements. In his formulations during the 1890s, summarized at the beginning of this chapter, Freud developed a scientifically precise proposition: a distinctive event (passive sexual experience in childhood) occasions repression of both affect and memory, a period of incubation, and subsequently the appearance of specific conversion symptoms. This formulation soon proved limited and inadequate for Freud himself. Early he distinguished between the "actual neuroses," created by an objective, overwhelming physical experience, and "psychoneuroses," arising from the infantile sexual experiences. Subsequently, he developed two separate models of trauma, one the "unbearable situation" model, derived from his work on the war neuroses of World War I, and the "unacceptable impulse" model, arising from his increasing stress on the role of infantile sexual fantasies in the development of the psychoneuroses (van der Kolk, Weisaeth, and van der Hart 1996, 55).

The feature of Freud's work I wish to take as a starting point in this excursus is his formulation of trauma and symptom in conversion hysteria. It was a precise formulation, however unsatisfactory and fleeting it proved to be. The subsequent history of both trauma and its consequences can be told as a vast multiplication of events regarded as traumatic, a corresponding multiplication of symptoms associated with trauma, and a curious politicization of the phenomenon. The results of his history yield a paradoxical mix of scientific advance and scientific degeneration.

The concern with "shell shock" in particular and the war neuroses in general during World War I firmly established battlefield experiences as a species of trauma. World War II added new interest and knowledge (Grinker and Spiegel 1945). After World War II much attention focused on the traumatic experiences of both child and adult survivors of concentration camps (Krystal 1988). The Korean War yielded the "brainwashing" experiences of prisoners of war (Hyde 1977), the Vietnam war a prolonged concern with battle-related traumas (Lifton 1973; Dean 1992). Traumas arising from death and loss have been a continuing concern in psychoanalysis (Freud 1957 [1917]; Klein 1986 [1940]; Loewald 1980 [1962]) and psychiatry (Lindemann 1944), and these figure significantly in the literature on trauma. Also of relevance are the psychological impacts of natural catastrophes such as earthquakes, floods, and accidents (Erikson 1976). More recently, and associated with the increasing recognition of domestic violence as a social problem, traumas of child abuse, application of extreme discipline, spousal battering, incest, rape, and traumatic sexual mistreatment—and the witnessing of all of these (Pynoos and Eth 1985)—have been added.

The accumulation of clinical and psychological knowledge resulted in the naming of a disorder and its formal inclusion in 1980 as "posttraumatic stress disorder"—a subclass of anxiety disorders—in the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders. This gave rise to an "explosion of scientific research" (van der Kolk 1996, 62) on PTSD of industry proportions, producing thousands of research reports, new journals such as *Journal of Traumatic Stress*, *Dissociation*, and *Child Abuse and Neglect*, as well as handbooks (e.g., van der Kolk, McFarlane, and Weisaeth 1996; Yehuda 1998), and entire books on the methodology of measurement, assessment, epidemiology, and treatment (Wilson and Keane 1997). The National Institute of Mental Health founded a Violence and Traumatic Stress branch.

To indicate how far the idea of anxiety disorders has penetrated into the conditions of everyday life, I reproduce an e-mail directed to faculty and staff at the University of California, Berkeley, at the time I was drafting this chapter:

> FREE SCREENINGS FOR ANXIETY DISORDERS. May 6, 11 a.m.-2 p.m., 3rd floor of the Martin Luther King Student Union. Faculty or staff members who feel they may have symptoms of an anxiety disorder can participate in this free, confidential screening program. The screening program will include viewing a short video, completing a screening questionnaire and discussing the results with a mental health professional. Referral for follow-up evaluation and treatment will be available.
>
> This screening is being sponsored by the Alameda County Psychological Association and UC Berkeley's University Health Services and the Association of Psychology Undergraduates.

As might be expected, the recent official definition of posttraumatic stress disorders is very inclusive:

> The development of characteristic symptoms following exposure to an extreme traumatic stressor involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity; or witnessing an event that involves death, injury or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate (American Psychiatric Association 1994, 424).

The number of potentially traumatic events involved is even more comprehensive, including but not limited to:

> military combat, violent personal assault (sexual assault, physical attack, robbery, mugging), being kidnapped, being taken hostage, terrorist attack, torture, incarceration as a prisoner of war or in a concentration camp, natural or manmade disasters, severe automobile accidents, or being diagnosed with a life-threatening illness. For children, sexually traumatic events may include developmentally inappropriate sexual experienced events without threatened or actual violence or injury. Witnessed events include, but are not limited to, observing the serious injury or unnatural death of another person due to violent assault, accident, war, or disaster or unexpectedly witnessing a dead body or body parts. Events experienced by others that are learned about include, but are not limited to, violent personal assault, serious accident, or serious injury experienced by a family member or a close friend; learning about tbe sudden unexpected death of a family member or close friend; or learning that one's child has a life-threatening disease. The disorder may be especially severe or long lasting when he stressor is of human design (e.g., torture, rape). The likelihood of developing this disorder may increase as the intensity of any physical proximity to the stressor increase. (American Psychiatric Association 1994, 424)

With respect to level of intensity and complexity, Early has suggested a nine-category system of levels ranging from invasive events in a defenseless state to "a state of cataclysm which would overcome everyone" (e.g., atomic explosions) (Early 1993).

The scientific research on symptoms associated with posttraumatic stress disorder has also produced an impressive array:

> recurrent and intrusive recollections of the event, . . . recurrent distressing dreams during which the event is replayed . . . dissociative states . . . [i]ntense psychological distress, . . . physiological reactivity which occurs when the person is exposed to triggering events that resemble or symbolize an aspect of the traumatic event (e.g., anniversaries of the traumatic event; cold, snowy weather or uniformed guards for survivors of death camps in cold climates; hot, humid weather for combat veterans of the South Pacific; entering any elevator for a woman who was raped in an elevator) . . . [avoiding] thoughts, feelings, or conversations about the traumatic event . . . [avoiding] activities, situations, or people who arouse recollections of it . . . amnesia for an important aspect of the traumatic event . . . [d]iminished responsiveness to the external world ("psychic numbing" or "emotional anesthesia") . . . diminished participation in previously enjoyed activities . . . feeling detached or estranged from other people . . . markedly reduced ability to feel emotions . . . a sense of a foreshortened future . . . persistent symptoms of increased anxiety . . . difficulty falling or staying asleep . . . exaggerated startle response . . . outbursts of anger . . . difficulty concentrating or completing tasks. (American Psychiatric Association 1994, 424–25)

If we regard the history of the concept of trauma in this constructed journey, we note a progression from the simple (and as it turned out, erroneous) causal connection contained in Freud's theory of conversion hysteria to a vast number of possible (not necessary) traumatic events and situations all funneling into a single clinical entity (posttraumatic stress disorder), which is manifested in an equally vast number of possible (not necessary) symptoms. The overall result is an enormous gain in recognition of comprehension and complexity, but a loss of formal scientific precision. The progression of conceptualization, research results, and treatment has produced a classificatory jumble, and as a consequence, a formal degeneration in the status of scientific thinking about the concept. At the very least, this sprawl calls for a disaggregation of subtypes and a search for processes specific to each.

In discussing trauma in cultural perspective, de Vries took notice of the fact that the appearance of posttraumatic stress in the diagnostic manuals of the American Psychiatric Association amounted to a legitimization of the phenomena, in that it categorized it as an "exogenous event," that is, one that "happens" to an individual in such a way that he or she is not

responsible for it, or is a "victim" of it. This observation raises the larger social—economic, political and moral—aspects of that symptomatology. Let us consider first the war neuroses. To label combat stress as a disorder, or a medical phenomenon, is not only a diagnostic act, but also a decision that entitles the veteran to treatment (usually free of charge) in a Veteran's Administration Hospital. At the very least this diagnosis creates an economic incentive for the veteran to possess that label (perhaps even outweighing the psychic cost of the stigma of being labeled mentally disturbed). Such diagnoses, considered in the aggregate, may also constitute an important cost consideration for the providing hospitals.

The traumatic disorders emanating from domestic violence pose even more complexities. While not passing judgment on the actual traumatic status of exposure to child abuse, rape, and battering, it is important to point out that the medical, legal, and social status of their effects has been an object of interest and political activity on the part of victims' groups organized on behalf of the victims. (Many of these groups have been offshoots of the more general feminist movement.) In the process the effects have taken on additional significance. If they are classifiable as a medical symptom, the victims acquire a real or potential claim on physicians, insurance companies, and other payment systems for compensation of treatment. If defined as sufficiently serious, these effects may also be the occasion for lawsuits on the part of victims against parents and other perpetrators. Finally, they may become the basis for individuals and groups to claim that they are in a wronged category, thus establishing a certain—though often ambivalently regarded—claim for moral recognition and status as victims. In this connection, we have even witnessed the growth of a national group of parents wronged by falsely accusing children. Numerous related controversies have sprung up, such as that concerning the legal status of recovered memories, and the debate about the moral legitimacy or nonlegitimacy to be accorded to the psychoanalytically derived claim that experiences of being wronged may be the product of fantasy, not real experience.

The process involved in making a symptomatology (trauma) into a political resource is an interesting subject in and of itself, and deserving of scientific understanding. The point I wish to make, in concluding this excursus, is that the tendency for the notion of trauma to sprawl and include ever-new ranges of phenomena—plus the economization, politicization, and moralization of trauma—has, from a scientific standpoint, created a jungle that defies attempts at scientific formulation and understanding.