29 Trauma Studies

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Psychological trauma, its representation in language, and the role of memory in shaping individual and cultural identities are the central concerns that define the field of trauma studies. Psychoanalytic theories on trauma paired with additional theoretical frameworks such as poststructural, sociocultural, and postcolonial theory form the basis of criticism that interprets representations of an extreme experience and its effects upon identity and memory. The concept of trauma, itself a source of critique, is generally understood as a severely disruptive experience that profoundly impacts the self's emotional organization and perception of the external world. Trauma studies explores the impact of trauma in literature and society by analyzing its psychological, rhetorical, and cultural significance. Scholarship analyzes the complex psychological and social factors that influence the self's comprehension of a traumatic experience and how such an experience shapes and is shaped by language. The formal innovations of texts, both print and media, that display insights into the ways that identity, the unconscious, and remembering are influenced by extreme events thus remain a significant focus of the field.

Trauma studies first developed in the 1990s and relied on Freudian theory to develop a model of trauma that imagines an extreme experience which challenges the limits of language and even ruptures meaning altogether. This model of trauma indicates that suffering is unrepresentable. Quickly following the traditional model was a more pluralistic model of trauma that suggests the assumed unspeakability of trauma is one among many responses to an extreme event rather than its defining feature. The idea that a traumatic experience challenges the limits of language, fragments the psyche, and even ruptures meaning altogether set the initial parameters of the field and continues to impact the critical conversation even while alternative approaches displace this notion.

Starting with Freud

Freud's theories on traumatic experience and memory define the psychological concepts that guide the field. Psychoanalytic theories regarding the origins and effects of trauma arose in the nineteenth-century study of shock and hysteria by researchers who, in addition to Freud, include Joseph Breuer, Pierre Janet, Jean-Martin Charcot, Hermann Oppenheim, Abram Kardiner, and Morton Prince. Freud's early theories in *Studies on Hysteria* (1895) written with Joseph Breuer, and especially his adapted theories later in his career in *Beyond the Pleasure Principle* (1920), dominate trauma's conceptual employment by literary trauma critics today.¹

In Freud's early work he argues that traumatic hysteria develops from a repressed, earlier experience of sexual assault. Freud and Breuer emphasize in *Studies in Hysteria* (1895) that the original event was not traumatic in itself but only in its remembrance. Because the original event continues to inflict harm, the talking cure or abreaction is required to understand the effects of the past and gain freedom from its symptom-causing grasp. Importantly, the traumatic event is understood only after a latency period of deferred action (*Nachträglichkeit*) that delays the effects and meaning of the past (Breuer and Freud 1955: 192). It is only after a contemporary event calls forth the previously repressed event that the past event can become known in the process of remembering. Freud and Breuer write:

We may reverse the dictum "cessante causa cessat effectus" (when the cause ceases the effect ceases) and conclude from these observations that the determining process (that is, the recollection of it) continues to operate for years—not indirectly, through a chain of intermediate causal links, but as a directly releasing cause—just as psychical pain that is remembered in waking consciousness still provokes a lachrymal secretion long after the event. Hysterics suffer mainly from reminiscences. (1955: 7)

The process of remembering inflicts the psychological pain but also ascribes value to a previously repressed experience in the unconscious. This traumatic remembering is termed "pathogenic reminiscences" for the pathologic symptoms the memory causes (Breuer and Freud 1955: 40).

Trauma is thus defined in relation to the process of remembering and as an event harbored within the unconscious that causes a splitting of the ego or dissociation. The authors, citing Janet's work on dissociation, write: "the splitting of consciousness which is so striking in the well-known classical cases under the form of 'double conscience' is present to a rudimentary degree in every hysteria, and that a tendency to such dissociation, and with it the emergence of abnormal states of consciousness ... is the basic phenomenon of this neurosis" (1955: 9). The fundamental "phenomenon of hysteria" involves dissociation which the authors argue is a defense mechanism that arises from repression; another mode of defense is amnesia (1955: 248, 793). The notion that trauma causes dissociation or a gap in the psyche is taken up by Freud throughout his career. The concept of the latency period between the event and its pathological effects, along with the idea that trauma fragments the psyche, can cause dissociation, and continuously wreaks havoc or infects it, are principles that Freud adjusts later in his career but still influence the contemporary definition of trauma for literary critics.

Freud's later work on war neurosis and the problem of traumatic repetition in Beyond the Pleasure Principle (1920) extends and adapts his earlier theories on the defense mechanisms of the ego as well as the origin and effects of trauma upon the psyche.² Traumatic events create conflicts in the ego which "split off" from the unity of the ego and are repressed but return later often in dreams (Freud 1920: 8). The conflicts caused by trauma create traumatic neurosis, which is "a consequence of an extensive breach being made in the protective shield against stimuli" (1920: 35). The mind as an organism, according to Freud, contains outer and inner layers, with the outer layer having a "protective shield" against harmful external stimuli (1920: 35). However, when "fright" occurs, that is "the state a person gets into when he has run into danger without being prepared for it," the lack of anxiety coupled with the external stimuli cause neurosis (1920: 11, 32, 36).3 Anxiety acts as a protection mechanism against traumatic neurosis but unexpected fright carries no defense. The external stimuli rupture the barrier and enter the inner psyche without the adequate internal defense. He writes: "We describe as 'traumatic' any excitations from outside which are powerful enough to break through the protective shield ... with a breach in an otherwise efficacious barrier against stimuli" (1920: 33). Trauma is imagined as both an external agent that shocks the unprepared system and an internal action of defense against overstimulation.

Traumatic neurosis is marked by the "compulsion to repeat" the memory of the painful event with the hopes of mastering the unpleasant feelings (1920: 19). The dreams of the traumatized patient repeat the experience as a way to "master the stimulus retrospectively, by developing the anxiety whose omission was the cause of the traumatic neurosis" (1920: 37).4 Freud writes that because the patient "cannot remember the whole of what is repressed in him, and what he cannot remember may be precisely the essential part of it" the patient "is obliged to repeat the repressed material as a contemporary event instead of ... remembering it as something belonging to the past" (1920: 18, 19). The narrative of the event is crucial to recovery. According to Freud the self does not remember the actual event but only the "reproductions" of the traumatic experience that arise in dreams (1920: 19). Although Freud remains ambivalent about the processes of remembering and questions whether experiences leave permanent traces or records in the mind, he argues that through abreaction and the talking cure the patient gains a greater understanding of the past (Freud 1955-73: 150; 1959: 19, 20). Traumatic memory is abnormal and lacks the narrative necessary to integrate it into the psyche.⁵ The emphasis on narrative recall for normal integration of memory and the general idea of memory as a storehouse of experience are important points for the literary-critical conceptualization of trauma.

The medicalization of trauma was crystallized by the American Psychiatric Association's new classification of Posttraumatic Stress Disorder (PTSD) in the Diagnostic and Statistical Manual of Mental Disorders third edition (DSM-III) published in 1980. The DSM-III classified the external stressor for PTSD as "a psychologically distressing event outside the range of usual human experience" that is accompanied by "intense fear, terror, and help-lessness" and causes "significant distress in most people" (DSM-III: 236–8, 248). The current DSM-IV classifies PTSD as a trauma or stressor related disorder rather than an anxiety disorder.

Literary Trauma Theory: Caruth and the First Wave

Freud's theories—that traumatic experiences are repeated compulsively, divide the psyche, influence memory differently than other experiences, and are unable to be experienced initially but only in a narrative reproduction of the past—are key ideas informing the first development in trauma studies scholarship that address the theory of trauma and the ways that trauma influences memory and identity. This criticism and that which would follow employs psychoanalytic theories to analyze emotional suffering in texts as well as the language of loss, disruption, and fragmentation. Theories of trauma's effects on the individual psyche in this model are often employed to explore the individual experience of a collective traumatic event in a text, thus creating a link between the experience of individuals and cultural groups or between the personal and political worlds. In particular, the concepts of latency, pathology, dissociation, and infection are central to the first or traditional Freudian trauma model that suggests trauma is an unrepresentable event that fundamentally fragments the psyche.

A flood of scholarship in the 1990s arose to examine the concept of trauma and its role in literature and society most prominently by Cathy Caruth, Shoshana Felman, and Geoffrey Hartman.⁶ This first wave of criticism popularized the concept of trauma as an unrepresentable event that revealed the inherent contradictions within language and experience.

In the traditional trauma model pioneered by Cathy Caruth, trauma is viewed as an event that fragments consciousness and prevents direct linguistic representation. The model draws attention to the severity of suffering by suggesting the traumatic experience irrevocably damages the psyche. Trauma is an unassimilated event that shatters identity and remains outside normal memory and narrative representation. Fragmentation or dissociation is viewed as the direct cause of trauma, a view that helps formulate the notion of transhistorical trauma, which suggests that trauma's essential or universal effects on consciousness and narrative recall afford the opportunity to connect individual and collective traumatic experiences. Traumatic experience and its inherent dissociation thwart the application of determinate value to that experience because the level of fright destroys the mind's ability to comprehend it and linguistically code it. Although the experience may never be narrated or identified clearly, it acts like a tumor in consciousness that wounds the self. The traumatic experience exerts a negative and frequently pathological effect on consciousness and memory that prevents the past from becoming incorporated into a life narrative. This model emphasizes the suffering caused by an external source that makes internal changes to the mind and irreversibly changes identity. The critical emphasis on trauma's unspeakability rests on the claim that extreme experience fractures both language and consciousness, causing lasting damage and demanding unique narrative expressions. The event is absent in normal consciousness but preserved just beyond the limits of understanding in a timeless, wordless state and continues to inflict pain on the psyche. Trauma's strange absence yet ghostlike presence in consciousness, its lack of normal integration into memory and narration, casts a shadow that indirectly points toward trauma's meaning and the truth of the past.

This trauma model figures most prominently in Cathy Caruth's *Unclaimed Experience: Trauma, Narrative, History* (1996) which takes a particular interpretation of Freud's trauma

theories to forward a larger poststructural concern with the referential limits of language and history. The analysis set the tone for the critical debate regarding trauma's significance in literature and the relation between individual and cultural trauma. Caruth argues that trauma's latency and dissociation disrupts the ability to fully understand or represent a traumatic experience. Both individual traumatic experiences and collective historical extreme events are ultimately never known directly but only through an interrupted referentiality that points to the meaning of the past only as a type of reproduction or performance (Caruth 1996: 11). The idea that a traumatic experience can never be known other than as a recurring absence indicates both the dissociative nature of trauma and its linguistic abnormality. In this book Caruth examines the "rhetorical potential" of recurring figures in texts that capture the splintered referentiality that points to the "knowing and not knowing" of the traumatic past, which in turn reveals the "traumatic nature of history" itself (1996: 4, 18).

Trauma's psychoanalytic conundrum for scholars, as conceptualized in this model, is its inability to be properly assimilated into the psyche and memory. Viewing trauma through the theories of Freud and Lacan as the delayed return of the repressed and a defining absence, Caruth argues that trauma is "not locatable in the simple violent or original event in the individual's past" but only identified in "the way it is precisely not known in the first instance—returns to haunt the survivor later on" (Caruth 1996: 17, 4). Trauma produces a double paradox in consciousness and language—the contradictory wish to know the meaning of the past but the inability to comprehend it, as well as the contradictory crises in the traumatic narrative between the threat of death and survival (1996: 7). Caruth explains that "Traumatic experience, beyond the psychological dimension of suffering it involves, suggests a certain paradox: the most direct seeing of a violent event may occur as an absolute inability to know it; that immediacy, paradoxically, may take the form of belatedness" (1996: 92). Since traumatic experience enters the psyche differently than normal experience and creates an abnormal memory that resists narrative representation, the unique process of this remembering results in an approximate recall but never determinate knowledge.

Caruth also relies on a neurobiological approach to explain trauma's effect on consciousness and memory, particularly the work of psychiatrist Bessel van der Kolk who argues that the neurobiological response to trauma elicits a universal response—a "speechless terror" that forecloses the possibility of narrative recall in memory since the event cannot be "organized on a linguistic level" (Van der Kolk and Van der Hart 1996: 172). The notion of trauma's unspeakability indicates a causal view of trauma and dissociation, as well as a view of memory as a storehouse of experience wherein traumatic memory is stored differently and unavailable for normal narrative recall since it remains dissociated from consciousness (1996: 160, 163). Narrative recollection marks normal memory and remains crucial for identifying and assimilating the past.

The turn in traumatic memory that precludes knowledge of the past for the individual also applies to the function of "historical memory" regarding a collective or cultural traumatic experience (15–16). Caruth writes in her interpretation of Freud's *Moses and Monotheism* that "history, like trauma, is never simply one's own, that history is precisely the way we were implicated in each other's traumas," emphasizing a universalist view of trauma that damages the psyche and evokes a shared response across time (Caruth 1996:

24). This standpoint indicates trauma's inherent transhistorical or intergenerational quality that can be transmitted across time. The infectious potential of trauma is paired with the timelessness of an extreme experience that refuses narrative assimilation into memory. From this perspective trauma's transhistorical potential means that a cultural group's traumatic experience in the historical past can be part of the psychic landscape of the contemporary individual who belongs to the same cultural group.

Connecting the individual and collective experiences of trauma forwards the notion of trauma's universal effects upon identity and memory, particularly the fragmentation or dissociation of consciousness. Dissociation and the inherent latency of trauma create a temporal gap in which the meaning and value of the experience are indeterminate. Caruth explains that trauma is "a shock that appears to work very much like a bodily threat but is in fact a break in the mind's experience of time" (Caruth 1996: 61). The dissociative break in time causes both the emotional suffering and the inability to identify or "locate" the meaning of the event. Yet, the unrepresentable past continues to orbit consciousness to create a type of absence that itself points to the event even while not being able to accord epistemological or ethical determinacy. The impact of an unrepresentable and unknowable traumatic experience upon the individual psyche is applied to the collective emotional experience of cultural groups to suggest that history fails to adequately represent traumatic events such as war or genocide, since any representation is a type of fiction (1996: 15, 49, 76).8

The idea of trauma's unrepresentability remains a core concept in the wave of scholar-ship that followed Caruth's wake in the following two decades. The emphasis in Caruth's model on the intrinsic relationship between the individual and cultural group as well as the dissociative and silencing effects of trauma continues in criticism that maintains the conceptual base of the traditional model but widens the theoretical framework to include feminist, race, and postcolonial theory. J. Brooks Bouson, Suzette Henke, Deborah Horvitz, Michael Rothberg, and Laurie Vickroy all employ the traditional Freudian-Caruthian concept of trauma and its deferred impact in criticism that often examines the relationship between individual and cultural traumatic experience.

Both Bouson and Vickroy, for example, emphasize the dissociative effects of trauma and its narrative transmission, yet each applies the model to focus on the social and cultural implications of extreme experience and traumatic memory. Bouson in Quiet As It's Kept (2000) addresses the trauma of racist institutions and practices endured by the African American community in Toni Morrison's novels. Vickroy in Trauma and Survival in Contemporary Fiction (2002) analyzes the formal innovations found in narratives of trauma in contemporary novels, pairing postcolonial and trauma theories to explore the ways in which the individual psyche of protagonists represents the collective emotional experience of a social group. Rothberg in Traumatic Realism (2000) situates his use of the traditional model within a cultural studies framework that analyzes the Holocaust in texts to argue that traumatic experience produces a "reflection on the formal limits of representation" and a social response arising from the "public circulation of discourses on the events" (Rothberg 2000: 7). For Rothberg traumatic realism is both a narrative mode and social response that brings together the normal and extraordinary qualities of extreme experience (2000: 9). In his analysis of Ruth Kluger's memoir Living on: A Youth (1994) Rothberg argues that the author's concentration camp experience produces representations that show "the extreme and everyday are neither opposed, collapsed, nor transcended through a dialectical synthesis—instead they are at once held together and kept forever apart" (Rothberg 2000: 130) through the mode of traumatic realism. Rothberg writes: "The traumatic realist project is an attempt not to reflect the event mimetically but to *produce* it as an object of knowledge and to *transform* its readers so that they are forced to acknowledge their relationship to posttraumatic culture" (2000: 140).¹¹

Pluralistic Trauma Theory: A New Model

Criticism also developed a theoretical pluralism that pushes directly against the traditional Caruthian model. The pluralistic model of trauma challenges the unspeakable trope in seeking to understand not only the structural dimensions of trauma that often develop in terms of trauma's dissociative effects on consciousness and memory, but also the cultural dimensions of trauma and the diversity of narrative expression. By moving away from a position that centralizes pathological fragmentation, the pluralistic model suggests that traumatic experience uncovers new relationships between experience, language, and knowledge that detail the social significance of trauma. The study of trauma within this approach provides greater attention to the variability of traumatic representations.

Criticism in this vein includes work by Ann Cvetkovich, Greg Forter, Amy Hungerford, Naomi Mandel, and myself. In this model trauma is conceptualized as an event that alters perception and identity yet in the wake of such disturbance new knowledge is formed about the self and external world. The reorientation of consciousness caused by traumatic events may include an ambiguous referentiality as well as determinate meaning. Allowing for trauma's variability in terms of its causes, effects, and representative potential demonstrates the diverse values accorded to a traumatic event and its remembrance.

The move to emphasize trauma's specificity according to a particular personal or historical event indicates the versatility of psychoanalytic trauma theory. While the application of the concept of trauma to the analysis of literary representations of the psyche on individual and collective levels may run the risk of essentializing trauma's effects to universal responses, the pluralistic model more often emphasizes the determinate values of the traumatic event and memory. This reduces the importance for the binary foundation of the traditional model that demands a dissociative quality and distended referentiality of trauma. The emphasis on the possibility for both indirect and direct knowledge of the traumatic past suggests that trauma has particular effects in certain instances of its occurrence. This approach often relies more heavily on the external stressor to show that trauma occurs in specific bodies, time periods, cultures, and places, each informing the meaning and representation of traumatic experience.

Defining trauma's effects on identity and memory as an interplay of external and internal forces as well as individual character traits and cultural factors creates a broader appreciation for the links between the singular and collective traumatic experience. The processes of memory remain central to the depiction of trauma's impact. Maintaining a concept of memory as a fixed process wherein all life experiences are stored exactly and literally lends itself to the traditional trauma model since the traumatic experience remains frozen in a timeless, haunting state. If, however, memory is viewed as a fluid process of reconstruction rather than a storehouse, then the traumatic past is not retrievable in a cryogenic state but

rather is created and recreated in moments of recollection. Psychiatrist Laurence Kirmayer for example argues that the recollection of traumatic events is "governed by social contexts and cultural models for memories, narratives, and life stories. Such cultural models influence what is viewed as salient, how it is interpreted and encoded at the time of registration, and, most important for long-term memories that serve autobiographical functions, what is socially possible to speak of and what must remain hidden and unacknowledged" (Kirmayer 1996: 191). What remains unspoken in a narrative about trauma therefore can be a result of cultural values in contrast to the traditional model that claims trauma's inherent unspeakability due to its neurobiological functions.

The pluralistic model of trauma includes perspectives that argue traumatic memory, though disruptive, may not necessarily cause pathological symptoms that prevent its retrieval and assimilation into identity. This shifts the focus to the external, cultural factors that influence the meaning of a traumatic event because the recollection process in the present moment is influenced by cultural and historical contexts that impact narrative recall and create knowledge of the past. Suggesting that remembering is a fluid process of constructing meaning rather than a static entity that can exactly reduplicate the past forwards the view that memory is shaped to a certain degree in the present moment of recollection. From this perspective traumatic memory carries determinate significance of the past event due to reflecting the values of the speaker who accords meaning in the act of recollection. The traumatic experience disrupts, yet does not foreclose memory's function or deny epistemological possibilities of the experience.

The narrative of traumatic memory thus creates different claims to the past since multiple determinacies of value arise which are not bound to the concept of a speechless absence. Pursuing an approach without being bound by the traditional model's view of language allows an interpretation that establishes language's ability to multiply depict the various meanings of traumatic experience. The linguistic potential to specifically identify the particular origin and impact of trauma thus permits a particular view of the psyche and identity. The narrative that depicts trauma's specificity in textual representations demonstrates direct knowledge of the event. To a certain degree, then, trauma's variability in both concept and form within the pluralistic model reveals the diversity of values that change over time to define trauma's impact, rather than revealing an essentialized and indecipherable absence that both marks and remains ambiguously unclaimed by the individual or group. However, the type of trauma definition employed is unrelated to the narrative potential to locate determinate knowledge of the traumatic past, which is to say that the unspeakable model of defining trauma remains dominant even while the attention of criticism is focused on determinate value in textual representations. The shift in criticism to focus on trauma's specificity came along with a renewed interested in the relationship between individual and collective experiences of violence and suffering most prevalent in a cultural studies oriented approach.

Examining the cultural context of an individual or collective group's experience of trauma enables greater attention to representations of extreme experience such as rape, war, the Holocaust, the Gulag, American slavery, colonial oppression, and racism. Scholarship in Holocaust studies as well as feminist studies and postcolonial criticism deals with a network of social and cultural factors that influence the linguistic and ethical terms of representing trauma. Ann Cvetokovich, Naomi Mandel, and Greg Forter demonstrate in

their work a pluralistic trauma model that although influenced to greater or lesser degrees by the foundational Freudian concepts of trauma extend a critical analysis beyond the shattering trope, in large part by emphasizing the cultural dimensions of trauma.

Naomi Mandel's Against the Unspeakable: Complicity, the Holocaust, and Slavery in America (2006) argues that the traditional concept of trauma as unspeakable is a "discursive production" that evades moral responsibility in representing atrocity by privileging the "problems inherent in speech" rather than addressing the "ethical obligations involved in such representations (Mandel 2006: 4, 5). In her analysis of trauma and the paradoxes of memorialization in Toni Morrison's novel Beloved, Mandel writes that "silence and forgetting are as much a strategic and self-conscious gesture on the part of the subjugated as they are the product of the subjugating culture's demands and requirements" (2006: 172).

Ann Cvetkovich's An Archive of Feelings: Trauma, Sexuality, and Leshian Public Cultures (2003) establishes a view of traumatic experience beyond that of pathology by examining trauma's specificities and variations in butch-femme discourses and the public culture that arises around trauma. Her analysis examines sexual trauma and focuses on lesbian culture to argue that "affect, including the affects associated with trauma, serves as the foundation for the formation of public cultures" (Cvetkovich 2003: 10). Cvetkovich acknowledges the potential for trauma to be unrepresentable and dissociative but focuses on the ways that traumatic experience, specifically sexual trauma, creates new value in representations and cultural practices.

Greg Forter's early work in Gender, Race, and Mourning in American Modernism (2011) employs and adapts the Freudian-Caruthian trauma model to emphasize the difference between "punctual" trauma or a once occurring catastrophic event and non-punctual trauma or an ongoing and everyday event in his analysis that examines the political and historical dimensions of extreme experience in modernist and postcolonial fiction (Forter 2011: 98). He expands the theory of trauma to incorporate the idea of "signification trauma" that allows for a transformative realization of the experience thus locating its meaning (2011: 116). Forter's theoretical advancements of the trauma model in his recent work is applied to postcolonial novels that extend the focus on the social, political, and cultural forces at work in representations of trauma. Rather than engaging in therapeutic and anti-therapeutic approaches to analyze colonial trauma which function to analogize the relations between psychic and social worlds, Forter examines the dialectic between such worlds, including the causes and social conditions of trauma (2014: 76). This view of the dialectic relationship between specific psychic and social worlds in novelistic representations places a different emphasis on the causation of trauma and its effects on subjectivity because it allows for an exploration of how trauma is produced and reproduced through colonial institutions, which underscores the "irreducible particularity of suffering" (2014: 77). Forter argues that "[t]he 'unrepresentable' character of trauma is thus due not to its being 'originary' and hence, beyond history and representation. Rather, it has to do with the enforced rupture with precolonial pasts and the prohibitions against remembrance enforced by particular regimes of power" (2014: 77). The traumatic past of social violence is representable and narratable in Forter's analysis through formal strategies in the novel that demonstrate the ethical tension of portraying the oppression from, and resistance to, hegemonic power in a representational order that attempts to silence the subject.

The field of trauma studies continues to develop and adapt the foundational poststructural approach as well as incorporate new perspectives from postcolonialism, feminist theory, ethnic studies, and ecocriticism in scholarship that examines trauma's significance in literature and society. Recent collections such as *Contemporary Approaches in Literary Trauma Theory* and *The Future of Trauma Theory* include further exploration of sociocultural and semiotic implications of trauma in literature (Balaev 2014; Buelens et al. 2014). The breadth of current criticism attests to the versatility of trauma studies and its relevance to literary theory.

Notes

- 1 Additionally, in *Moses and Monotheism* (1939)
 Freud develops a concept of historical trauma by adapting his theories on latency and repetition of traumatic memory for the individual patient and applies it to the Jewish culture in order to explain their cultural psychology and history. Freud argues that the "traumatic experience" of Jews can be viewed as a historical trauma arising from the return of the repressed and the delayed effects of the original ancient trauma, the murder of the "father" Moses (Freud 1939: 65).
- 2 In attempting to move beyond his theory of the unconscious based upon sexual drives, Freud argues that the unconscious is also shaped by death drives that create conflicts within the ego.
- 3 In addition to "fright" causing traumatic neurosis Freud adds also the "threat to life" (1920: 35).
- 4 In Beyond the Pleasure Principle, the act of psychanalysis also calls forth the "compulsion to repeat" because psychoanalysis requires "the patient to confirm the analyst's construction from his own memory," yet the suffering patient is unable to fully remember the traumatic experience other than in a repetitious "reproduction" (1920: 18, 19). Freud writes, "In order to make it easier to understand this 'compulsion to repeat," which emerges during the psycho-analytic treatment of neurotics, we must above all get rid of the mistaken notion

- that what we are dealing with in our struggle against resistances is resistances on the part of the *unconscious*" (1920: 19–20).
- See Janet (1976). Breuer and Freud's notion that traumatic experience cannot be fully remembered or integrated yet nonetheless infects the patient aligns with the theories of Pierre Janet especially regarding the idea that that "traumatic memory" significantly differs from "normal memory" (1976: 661). Janet explains: "Strictly speaking, then, one who retains a fixed idea of a happening cannot be said to have a 'memory' of the happening. It is only for convenience that we speak of it as a 'traumatic memory.' The subject is often incapable of making with regard to the event the recital which we speak of as a memory" (1976: 663). The ability to remember and place the event into a narrative recall helps cure the patient, yet at other times Janet emphasizes the need to forget in order to heal. In addition, Janet's view that memory is a storehouse where all experiences are recorded emphasizes the importance of narrative recall in the normative remembering process insofar that the ability to narratively recall the past allows its integration into normal memory.
- 6 See Berger (1999), Granofsky (1995), Tal (1996), and "collective trauma" in Kai Erickson (1976). Herman's Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror (1992), which examined the symptomatic

- similarities between single-event and prolonged traumatic events, was another important source in early trauma studies scholarship.
- 7 For example, in her analysis of the 1959 French film, Caruth writes: "What we see and hear, in *Hiroshima mon amour*, resonates beyond what we can know and understand, but it is in the event of this incomprehension and in our departure from sense and understanding that our own witnessing may indeed begin to take place" (Caruth 1996: 56).
- 8 See also Caruth (2014), *Literature in the Ashes of History*, a follow-up book that largely

- recapitulates her theoretical stance in *Unclaimed Experience*.
- 9 See Ruth Leys in *Trauma: A Genealogy* (2000) and Dominic LaCapra in *Writing History, Writing Trauma* (2001) as historians provide important critiques and interventions to the Caruthian model of trauma.
- 10 See Suzette Henke (1998); Deborah Horvitz (2000).
- 11 See also Rothberg's use of postcolonial and trauma theory in his book Multidirectional Memory: Remembering the Holocaust in the Age of Decolonization (2009).

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