



Book Review

Listening to trauma: Conversations with leaders in the theory and treatment of catastrophic experience

edited by **Cathy Caruth**

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In this extraordinary enterprise, Cathy Caruth achieves what is by definition an impossibility: making familiar the unfamiliar country of trauma, the place of displacement *par excellence*; the *lieu* of an ‘erasure’, as Dori Laub would say, where language is at a loss and a new language struggles to be heard, thanks to the construction of a new channel created by the very act and presence of a totally committed listening.

But Caruth is not alone; she is in the precious company of renowned theoreticians, clinicians, and survivors of trauma who take the reader on a walk along a path where it is possible, with the right sensitivity and an extreme ethical commitment, to arrive at the ‘undiscovered country’ of a new political awareness, through the apparently simple act of giving voice to questions going beyond definition and inquiry. As in psychotherapy with survivors, what is needed is ‘simply’ a real presence, an act of listening, a stance that enables an encounter with a true companion, making possible a reconnection with a meaningful web of metaphorization, verbalization, in a word, a reconnection with the unspeakable within and without.

If it is impossible in a few pages to do justice to the intellectual and ethical experience of the volume, I would at least sketch only a few of the radical and fundamental questions Caruth poses in her restless and challenging dialogues with powerful thinkers that constitute the bulk of this volume. Each of the following points is to my mind fundamental, necessary to shed light on the delicate interdisciplinary place in which trauma meets testimony and witnessing meets survival: there is first the relation of trauma to literal survival, and therefore the centrality of death in the experience of survivorship and traumatization. Then there is the meaning of an impossible symbolization that is at once contained and disavowed in reaction to trauma, as well as the responsibility the survivor, as witness, has to the living but also to the dead (and therefore to the future and to the past through his or her present commitment).

The old question of external and internal causality in trauma, and therefore the prevalence of fantasy over reality, or vice versa, is of course equally central, the issues of ‘recovered truth’ and the question of ‘repression’ having been foundational in psychoanalysis.

In terms of treatment, the fundamentally ethical practice of bearing witness to trauma as a way of allowing the return of an original truth present in an unheard voice and the importance of witnessing as a basic form of reconnection with society for the traumatized person and for society itself

as a traumatized body is clearly another central concern. It is necessary, given the loss of the internal other, to recreate an internal dialogue in order for the internal narrative of the subject to be recreated, making for the possibility of a new form of connectedness. Trauma is an active erasure, and society typically does not want to hear the experience of trauma, so that social explanations of traumatic events such as incest, perpetrated so often in so-called 'normal' families, are strongly needed. Silencing is a fundamental structural aspect of what it means to be traumatized, and the relationship between domination and denial, and therefore how empowerment arising from therapy means a transformation of memory, acquires political relevance and provides community relief.

There is, further, the issue of what it is that creates dissociation, that is, the lack of integration and the fragmentation that is central in trauma, to the point of the creation of another self or division within the self into several parts; this question in turn raises the problems of the relation of trauma to neurobiology; the creation of a new language; and the riddle of temporality in trauma (as 'arrested time'), so that it is never over, always revived but never integrated in reality, and even carried through multiple generations.

Caruth rehearses these fundamental questions and problems with leaders in the theory and treatment of trauma and the practice of treatment for it, such as Robert Jay Lifton, Dori Laub, Françoise Davoine and J-M Guadil-lière, Judith Herman, Bessel van der Kolk, Onno van der Hart, and Shoshana Felman, to mention only a few. The dialogue with these minds is engaging and honest, like new testimony offered to the reader, capable of creating unexpected turns through the ethical and totally dedicated position of the witness in the act of giving testimony.

As Shoshana Felman magisterially illustrates in the last conversation in the book, to bear witness or to testify is a performative utterance that acts in specific ways. Quoting Elie Wiesel, Felman stresses how the unique position of the witness is inextricably linked to the necessity of and responsibility for telling a story that no one else can express. "If someone else could have written my stories, I would not have written them" (p. 321, cited from Wiesel, 'The loneliness of God', in *Dvar Hashavu'a*, 1984; "No one can replace me in my death" (p. 323)). The witness speaks for a place of death, as Lifton states at the very beginning of the book: the survivor is someone who has encountered his or her own death, and remained alive, but condemned to testify to a death that is not his or her own but one that he or she has witnessed. As Felman stresses, to be a witness means to take responsibility for truth not only for the living but for the dead, to speak in their *lieu*, as impossible as it might seem. It means using one's memory or experience to address another – a human being or a community – and to make an appeal, which is also an oath. Such an appeal necessarily goes beyond the individual and personal, and has a political impact. This would seem to be a paradox insofar as the process of bearing witness comes from a place of loneliness; but this is precisely its specificity and its precious gift to the one rendering it, to the listener, to the community.

As Felman underlines with her story about her childhood friend Israel Menachiem, who had always been silent about his past until the moment

when he rendered testimony for the Fortunoff Archive, where Felman encountered her old friend's truth for the first time after years of knowing him, "I realized that giving testimony produced a sort of revolution in people, in their lives, in their destinies" (p. 125). The position of witness by its very structure creates a bridge from the place of loneliness to another side, where it is possible to reach someone outside the loneliness, and into the community and a merger with historical existence.

This is precisely what Dori Laub, in his extraordinary interview, clarifies and exemplifies with utter simplicity: for the witness to become one, there must be an apt companion, "a totally present listener who creates the holding space for them to do it" (p. 48). Testimony is not possible in a void; there needs to be that internal-external other which was destroyed by the traumatic experience; this break in the empathic dyad is, in Laub's definition, the lack of the internal maternal good object. Testimony is "a healing way to put fragments together. But to get it out in the interpersonal space there has to be a companion. Basically I think it's the necessity for an internal companion, because the process of symbolization and formation of a narrative only happens within an internal dialogue. And a listener temporarily takes the place of that internal other, that addressee" (p. 48). For Laub there has to be a certain amount of ego structure, a certain amount of object relationship, a certain connectedness (p. 49).

It was just this that was missing in the hospitalized Holocaust survivors in Israel, considered psychotic, who had kept silent for 30 years: what they needed, Laub argues, was precisely a listener from outside "to help create an internal audience" (p. 49).

Laub has called this the need for a 'testimonial community' to be created in society; but in order for a testimonial community to be created, there needs to be an entire community ready to perform this fundamental act of listening to the untold story of atrocity and survivorship. In the words of Arthur Blank, who recounts his own denial and the denial in society when he tried to speak about his experience in Vietnam, "if I am to understand what has happened, there has to be another who can understand" (p. 268). This other helps recreate an internal good object that had undergone devastation. This vital necessity for an internal saved or surviving object that makes life and experience possible for the subject – that is, meaningful and speakable – is stressed in the first pages of this volume by Robert Jay Lifton, whose work on Hiroshima, Vietnam, and the Holocaust in the 1970s and 80s opened the path for further studies. Speaking of the psychology of the survivor, "a psychology that gives death its due" (p. 3), Lifton underlines how death, although central to the experience of the survivor, "gets taken out of most psychological thought very readily" (p. 4). This is what Freud himself has done; but for Lifton, "death transforms anything and everything. It's the single consistent fact of life"; it defines what is meaningful in life – "what counts" (p. 5).

Lifton focuses on meaning instead of instinct as fundamental in the psychic: "anything that is psychological has to exist in relation to meaning. In that sense, meaning is the broadest kind of entity. When one considers a life-death model or paradigm, it has to exist in relation to meaning, or in

relation to how we symbolize our life process and our vitality, on the one hand, and our prospective end or individual death, on the other” (p. 7). The knowledge of the survivor is a precious kind of knowledge of death, which for Lifton is the utmost psychoanalytic knowledge, the real transformation of one’s life (as opposed to the traditional view of the resolution of the Oedipus conflict and the final confrontation with the father). Trauma allows room, Lifton argues, for a new theory of the self: “extreme trauma creates a second self; sense and identity are made different. “I was a different person after Auschwitz”, as many people say, rings true for Lifton. Finally, Lifton defines atrocity as “a perverse quest for meaning” (p. 12), seeing the process of victimization in society in this light. “We assert our own vitality and symbolic immortality by denying their right to live and by identifying them with the death taint, by designating them as victims. So we live off them. That’s what is false witness” (p. 13). “What is perverse is that one must impose death on others in order to reassert one’s own life as an individual and as a group” (p. 14). In the wake of recent atrocious events brought about by global terrorism, these words sound uncanny.

A kind of similar false witness unfortunately occurred even with Holocaust survivors in therapy; their story was often not heard – another way of denying death in therapy, another sort of numbing or erasure. To have an open mind to death-related issues is fundamental when it comes to trauma, as is the ability to symbolize. In order to perform appropriate listening to the survivor it is necessary to form imagery in one’s own mind of what the patient is saying. Lifton expresses his profound respect for those with whom he worked when he states, “with me it was very openly dialogue. I was never doing therapy with survivors of Hiroshima or of Auschwitz. It was dialogue with them, and it was very powerful” (p. 17).

Françoise Davoine and Jean-Max Gaudillière, in their path-breaking work on madness and trauma in relation to Europe’s war history, term survivors the “people of an arrested time”. These patients are in another temporality that makes it impossible to witness their condition in words. The denial they encounter in analysis is also maintained by society, a mechanism of affirming death over life: “Denial. These histories have been expelled from time by denial. And then we go to perversion. Which is an active discourse, which is an active erasure of the social link. It’s not only that you forget” (p. 90). So madness in a way is a protest and a living force: “Madness is always a fight against denial, double language, and manipulation, and falsification” (p. 95). These authors testify to the fact that the second generation of survivors have the implicit task of “doing the work” that the parents could not do; nobody works on trauma by chance.

In her innovative and profound work on incest, abuse, and societal responses to them, Judith Herman has underlined not only how incest in “the most extreme of a traditional family pattern . . . the furthest point in a continuum, an exaggeration of patriarchal family norms”, in which incest victims, mostly women, become a sort of “archetypically feminine women, well prepared for conventional femininity” (p. 133), while trauma and inbuilt shame creates in them a “secret identity”, “a defiled self that is kept secret” (p. 137), because “compartmentalizing can be lifesaving” (p. 133).

As Caruth argues in her dialogue with Herman, “trauma exposes various modes of domination and is thus met with various modes of silencing and denial” (p. 134). This leads Herman to talk about the disempowerment of traumatized people caused by such silencing. In the very formulation of the notion of PTSD, according to Caruth and Herman, the original understanding of trauma has been dulled, resulting in a form of silencing as PTSD becomes a ‘disorder’ without any consideration of the social and political elements involved, a domesticating of the cycle of violence and domination implicit in trauma. Herman wishes for the creation of an ecosystem that fosters recovery on both the individual and the societal level, “a safe place to tell the truth” (p. 144). This is similar to Laub’s ‘testimonial community’. For this to come about, a fundamentally relational process needs to be established with another who validates the experience and enables the transformation of memory as it occurs in therapy.

On the basis of his remarkable expertise in the neurophysiology of trauma and trauma therapy, Bessel van der Kolk highlights how trauma is about dissociation and fragmentation, because the integrative function of the thalamus is impaired by the experience itself. Nightmares in the traumatized, for instance, are attempts at integration that get disrupted. The right side of the brain, the site of spatial and emotional functions as well as of implicit memory, is the side most involved in trauma. Therefore, he concludes, “we need to have right-brain therapies for right-brain problems” (p. 165).

Onno van der Hart in his pioneering work on the treatment of dissociative disorders describes what happens in a victim when an apparently normal part of the personality (ANP) is separated in daily life from the emotional part of the personality (EP). And I have had to omit a discussion of the contributions of many others, such as Geoffrey Hartman and Mieke Bal. The process of listening to the flux of questions and answers that constitutes this volume itself bears witness to an unrelenting desire to give voice to truth, finding words and language for an unconscious historical testimony, restoring pieces of truth that have been denied.

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