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978-1-107-06954-1 - Genocide and Mass Violence: Memory, Symptom, and Recovery

Edited by Devon E. Hinton and Alexander L. Hinton

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Introduction

An Anthropology of the Effects of Genocide and Mass Violence: Memory, Symptom, and Recovery

Devon E. Hinton and Alexander L. Hinton

What are the wounds of mass violence on various experiential levels and how might recovery occur? Despite the emergence of an international human rights movement in the period after the Holocaust and World War II, mass violence has not ended. The late twentieth-century genocides in Bosnia and Rwanda were followed by early twenty-first-century genocides in Sudan and the Democratic Republic of Congo. Civil war remains a central part of many of these conflicts, as illustrated by the atrocities perpetrated in Aceh, Colombia, East Timor, Guatemala, Liberia, Kosovo, Nepal, Peru, Sierra Leone, Somalia, Syria, and Uganda. The United States has recently entered zones of mass violence in a post-9/11 world, and with its allies has waged war in Afghanistan and Iraq while confronting terrorism at home. There is the postconflict legacy of such violence: economies and infrastructures destroyed, families and communities fractured, interpersonal mistrust, grieving, trauma, symptoms, unwanted memories, and many other forms of social suffering.

This volume explores lingering aftermaths of mass violence and the reaction to it. What are the legacies of mass violence for individuals and the social worlds in which they live and how do they seek to recover? Former zones of violence often become sites of humanitarian aid, peace-building efforts, and transitional justice, but scholars and practitioners have paid too little attention to the ways in which individuals and cultural groups react to mass violence through microdynamics of memory, social practice, ritual, coping, understanding, symptoms, and healing. Psychological anthropology should have much to say about these issues given its emphasis on taking into account various levels of human ontology such as social experience, collective representations, and sociopolitical process; brain function and psychology; the phenomenology of lived experience; and the nexus of self, memory, and emotion. But psychological anthropology has only just begun to grapple with the legacies of mass violence

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(see, e.g., Fassin & Pandolfi, 2010; Kirmayer, Lemelson, & Barad, 2007; Kleinman, Das, & Lock, 1997; Robben & Suárez-Orozco, 2000).

This book aims to fill this gap and to examine the legacy of mass violence in cross-cultural perspective and on multiple levels. How do particular individuals recall mass violence and trauma? How are the effects of such experiences transmitted across the generations in memory, ritual, symptom, and interpersonal processes? How do the legacies of mass violence continue to have effects in the form of “symptoms” and syndromes? How do ongoing justice and reintegration processes, structural inequalities, and collective representations of trauma have an impact on victims? What are local attempts to bring about cure and reintegration? How do these questions vary depending on the subgroups within the population in question, such as women, children, and the poor?

We have organized the book in terms of three key areas of scholarly research, namely, public and private memory, symptom and syndrome, and response and recovery. The section divisions are useful for organizing the volume, but most chapters could have been included in one or both of the other sections. They are closely related domains, and discussion of one usually involves the others. To give one example, memories of a mass genocide often represent a symptom (unwanted recall of the past), and recovery often entails changing the relationship to the memory and the memory’s contextual meaning, with these re-memorialization processes involving personal and public processes.¹

To enrich the volume, we purposefully sought contributors from a variety of disciplines (psychological anthropology, psychiatry, psychology, medical anthropology) and organized sessions at academic events to promote conversation. The authors presented and discussed their research at panels at the meetings of the American Anthropological Association and of the Society of Psychological Anthropology. Then there was a conference – sponsored by a Lemelson grant from the Society of Psychological Anthropology that was awarded to the current book’s editors² – at the Center for the Study of Genocide, Conflict Resolution, and Human Rights at Rutgers University, Newark. To enhance the experience-near quality of the book and to link it to an alternative mode of representation, four chapters in the volume are linked to documentary films in which given contributors were directly involved.³ In addition, many of the chapters include case presentations.

We consider the volume to have three main cross-cutting analytic frameworks. One is its division into three parts, namely, “memory, symptom, and recovery,” and an analysis of the chapters from that perspective (see this chapter). The second is the analysis of the chapters from the perspective of eight ontological dimensions (see this chapter). As a third analytic framework, at the end of the edited volume is a commentary

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chapter by Laurence Kirmayer in which he presents an alternative and complementary theoretical framework to examine the effects of trauma and attempted recovery, and that he uses to situate the chapters in respect to trauma studies. His framework posits five realms of experience (body; self/person; interpersonal relationship; communal/political; and spirit world) that may be viewed from four different perspectives, namely, descriptive languages, place of injury or rupture, idioms of distress, and sites of resistance and repair. In Kirmayer's analytic schema, the effects of trauma in each of those five ontological realms, and attempts at recovery in each of these five realms, can be traced by viewing how the impacted realm plays out when viewed from each of these four perspectives.

Thus, in this volume we scrutinize mass violence through three broad frames of analysis: the three-part division of the volume, the eight ontological dimensions, and Kirmayer's schema.⁴ In the following we first analyze the chapters from the perspective of the divisions of the volume, and then from the perspective of the eight ontological perspectives. See the end of this volume for Kirmayer's commentary.

The Three Book Sections (Memory, Symptom, and Recovery) and Their Chapters: Key Theoretical Contributions

In the following we perform an analysis of the chapters from the perspective of the book's three-part organizational structure, highlighting key contributions to the literature.

Part I: Private and Public Memory

Part I contains chapters that focus on the memory of mass violence. Here we consider memory broadly to include the ways in which public memory is expressed in contexts such as memorials as well as individual forms of remembering such as nightmares, and we examine how private and public memory impact upon each other. Several of the essays in Part I touch on one of the key "symptoms" of trauma, namely, the unwanted recall of the past in nightmare and during waking. In a sense, Part I is a subsection of the symptom section (Part II), but it considers memory in a broad perspective that embraces public and personal memory. Part I addresses memory in the broad sense, which ranges from personal memory, to humiliation memory, to the generational memory of certain events, to public narrative memory, to hidden transcript memory (e.g., memory that is seemingly played out in an idiom of haunting), to memorial memory that holds and constitutes memory in public space. These and other sorts of memory form a key aspect of the trauma ontology.

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In Chapter 1, Heonik Kwon describes different types of representations of the war and how memory is articulated in public spaces in Vietnam. Initially after the war only heroic memory was allowed: There was a proliferation of war memorials such as those featuring a winged tower and incense burner along with a statue of revolutionary heroes and martyrs – heroic memory.⁵ But in the early 1990s many members of Vietnamese society advocated for the right to be able to grieve publicly the losses of the war without being labeled as counterrevolutionary. Seemingly addressing this need, there was increasing building and rebuilding of domestic ancestral shrines, family ancestral temples, and community temples for the deceased. At that time, too, the envisioned lifeworld of the spirits of the dead became more prominent in the public imaginary: In the area of the My Lai massacres, mother ghosts were seen tending to the wounds of their children. As Kwon describes, in Vietnam it is believed that a violent and unjust death traps the dead; they are doomed to relive their violent death continually in all its particularity and agony. In this sense, there is a mirror image of a flashback – the repeated reliving of a tragic event as if it were happening again – that is played out in the spirit world. Locals perform rituals to try to help the deceased caught in this jail of memory.

Chapter 1 raises a number of important questions. Is the pained memory of the individual impacted by the public representation of these images of horror? Is this an icon in the spiritual world of the living individual's pained memory? Do rituals that aim to transform the state of trapped spirits aid individual memory, both through the symbolism of the enactment and through the sense of relief at improving the fate of the dead? Is this spirit world a hidden transcript speaking indirectly of personal memory? Kwon's chapter suggests that trauma and its anguish – and perhaps its resolution – can play out in concerns about the spiritual state of the deceased and rituals meant to release them, can play out in concerns about spiritual security and the state of the dead.

Like Kwon in his chapter, Byron J. Good (Chapter 2, this volume) argues for the importance of hauntology, the study of the specters that visit the living in dream and in the waking state. B. Good's research focus is the collective imaginary in Aceh seen through the lens of hauntology, and how various collective specters form part of an individual's subjectivity. Hauntology studies the images that haunt individual consciousnesses in a society and how these may relate to key historical and cultural facts as well as structures of power. Trauma studies typically assess nightmare and only those nightmares that replay the "trauma event" – though in the criteria of the *Diagnostic and Statistical Manual of Mental Disorders-5* (DSM-5; American Psychiatric Association, 2013), it is now

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stated that any disturbing dream whose affect or content resembles the trauma meets PTSD criteria, unlike in *DSM-IV-TR* (D. Hinton & Lewis-Fernandez, 2011). Chapter 2 (and Kwon's [Chapter 1, this volume]) suggests that certain images that form collective images of terror may be the most dreaded type of dream – and more generally the specter may recall a collectively experienced traumatic past.

B. Good's chapter argues for the need to assess the types of dream visitors and collective specter imagery and determine what that imagery indicates about broader social and cultural forces. Trauma sufferers may consider their main problem to be spiritual and therefore cast it in that idiom (on this, see also D. Hinton et al., 2009; D. Hinton, Field, et al., 2013; D. Hinton, Peou, et al., 2013). The traumatized individual may have a sense of great ontological insecurity in respect to the spiritual realm. B. Good's chapter explores this issue in Aceh and how the individual's sense of spiritual insecurity may relate to broader unresolved issues in the social, cultural, and historical realms – be this structural violence or gendered inequality or untold histories of unacknowledged violence. The goal of hauntological analysis is to trace the specters – and the uncanny within a society – and to determine whom they haunt, what state of consciousness they haunt (e.g., sleep in the form of nightmare or the awakening state in sleep paralysis), how they haunt persons in different social classes and genders, and how they haunt classes of psychologically disturbed persons, for example, the person who has "PTSD" in the form of nightmare or the person who has psychosis in the form of hallucination. Such research needs to investigate how such hauntings are cured and protected from and to analyze what those specters mean from a colonial, historical, and cultural perspective (Chapter 10, this volume). Here the question is how the person and the society itself are haunted and the meaning of that haunting as scrutinized through these various analytic frames (see also Crandon-Malamud, 1991).

As B. Good shows, literature, artistic creation, and various performative arts are important sources and sites of production of the imaginary of specters. These are artistic zones where imagery can be created that articulates unspoken fears and quandaries, and this imaginary potentially has an invigorating and healing effect (on how art can serve as a depiction of fear in the abstract and act as a healing and a cure, see also Good & Good, 2008). What does it mean to articulate and experience trauma's effects in a spiritual idiom, particularly in a society with a history of mass deaths, or even genocide, where mass violence events cannot be spoken about openly because of the dangers of speaking about them, because the perpetrators still hold power, because the perpetrators are your neighbors? Hidden transcripts may be spoken in a spiritual idiom.

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In Chapter 3, Conerly Casey writes about a society with high rates of PTSD: In one study in postinvasion Kuwait, 70 percent of surveyed children had moderate to severe PTSD. A common complaint is being afflicted by trauma memory during waking and dream. These memories are of mutilated bodies shown on television, bodies dumped in the streets, people disappearing, burning oil wells. Casey suggests that the category of PTSD obscures various key ontological securities that Kuwaitis often treat through substance abuse and other dysfunctional means. She suggests something like a trauma cohort. It is a cohort whose sense of security has been shattered in a profound way owing to the 1990 invasion of their country and the post-9/11 U.S. invasion of Iraq.

The way in which events and external landscapes trigger memory and how trauma recall causes bodily complaints (see Part II for further discussion of how somatic complaints occur in trauma victims) are also foci of the chapter. Memories are triggered by smells and by any image of present-day destruction such as places that have been left in a state of ruin as memorials. Casey describes how reminders of the recent war joined with continuing violence in neighboring Iraq led to multiple types of insecurity: gender-based violence, concerns about poisonous fires, a landscape of destroyed buildings, lack of food, and the constant threat of kidnapping and death. Health complaints were common after the Iraqi invasion of Kuwait. These were of high blood pressure, tension, and somatic complaints such as shortness of breath and gastrointestinal distress. Casey discusses how fear of contamination – from uranium, oil fires, and other sources – led to a hypervigilant surveying of the body that resulted in prominent shortness of breath and other symptoms linked to supposed poisonings, and how fear of contamination led to constant recall of chemical fires and other experienced pollutants. Recall of the time of invasion triggers a sense of extreme insecurity, a sense of extreme betrayal, and fear of permanent body contamination. So there is a further lack of physical health ontological security: the bodily itself has been invaded by a pathogen.

Casey suggests that the burning oil well in Kuwait is a hypersemiotized memory image. It has many symbolic meanings and multiple associations to collective trauma. These webs of significance explain why the burning oil well has deep affective impact. It is a rhizome memory image⁶ that is connected to multiple meanings. The “burning oil well” encodes the space-time (chronotope)⁷ of the Iraqi invasions and the many traumas and insecurities of that time. It is a space-time evoker that encodes multiple memories: It evokes the idea of violation of space. It evokes ideas of bodily contamination with pollutants that have led or will lead to illness and bodily complaint. The image acts as a self-scape memory that evokes

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a sense of vulnerability, chaos, contamination, violation, and insecurity (on self-scape in dream, see Hollan 2004). (Analogously, the tattoo of a Holocaust victim [Chapter 5, this volume] conjures the memory of a person being treated as an animal through branding and of other acts of humiliation perpetrated by the Nazis, so that the tattoo acts as a rhizomic trauma image; likewise, among Rwandan trauma victims, the memory of impaled bodies may serve as a rhizomic trauma memory owing to semiotic networks [Chapter 13, this volume; see also Hagengimana & D. Hinton, 2009].)

In Chapter 4, Behrouzan and Fischer address a series of questions. How does the Iranian cultivation of the poetics of depressive affect, which seemingly centers on the memory of Karbala, shape the course of trauma? How too does the layering of memory in dream along with local dream hermeneutics affect the course? How too can trauma's effects be seen from the perspective of the memories of those in an age cohort? The chapter's title echoes that of the edited book *Culture and Depression* (Kleinman & Good, 1985) and recalls the chapter on Iran in that volume, which describes the elaborate cultivation of depressive affect in Iranian culture anchored in the Karbala commemorations and imagery (Good, Good, & Moradi, 1985). In the Behrouzan and Fischer chapter, we see the trajectory of that affect through the lens of trauma and dream. In the Iranian context, is depressive affect a sort of "work of culture" (Obeyesekere, 1990) through which trauma is managed, as exemplified by the well-described Karbala events (a sort of collective mytheme or historeme that is an "affecteme," a collective image evoking a certain set of affects) and the cultivation of a culturally specific bittersweet melancholia? At the heart of Karbala is a trauma image – namely, that of the dying martyr who was the Prophet's grandson – and associated rituals of self-flagellation and repentance honoring that event. The conjured affect is that of sadness, of tragic death, of the betrayal of the Prophet and Islam. Can trauma be funneled into depressive affect to try to reach resolution (see Chapter 11, this volume, for a description of trauma's wounds cast in another religious idiom, an image of Jesus)? May this cultural cultivation of an affective form go awry and lead to true clinical depression and suicide? If the depression is too great, may upsetting dreams overpower? How successful is the attempt by Iranians to treat trauma's depressive dysphoria through dream pondering, psychopharmacology (Prozac™), and new self-help movements that teach skills like emotional acceptance, and how do these treatments influence the course of trauma-related disorder?

Behrouzan and Fischer describe how among Iranians living abroad that trauma perdures in sedimented anxiety and dysphoria. The authors

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show how this layered sedimentation is most visible in nightmare, where memory fragments – for example, of test exams, siren sounds recalling the bombings in Iran, images of Khomeini – coalesce into nightmare. Nightmares and their imagery bring about palpitations, suffocation, and panic. Sonic memory is particularly prominent in Iranian trauma dreams, and this includes dirges, sirens, bombing sounds, parts of sermons that were mandatory listening, and phrases that were slogans of death against the West and slogans that exhorted the young to give their life in sacrifice for Khomeini. Bombing imagery also seems to be a particularly important aspect of the iconography of dream. Past images enter dreams and take on new significance by resonating with current events and other distant events and so form new assemblages, new affective configurations. *Nachträglichkeit* (after the fact) – old memories take on new meaning; their meaning is not fixed. Behrouzan and Fischer describe a dream hermeneutics among Iranians that seeks memory and meaning in dream. There is a cultivation of dreams as self-objects, as self-scapes. There is a dream-based trauma subjectivity in which melancholia is cultivated through dream poetics. Dreams become a key place of self-making and affect making. (On dreams among trauma victims, see also D. Hinton et al., 2009; D. Hinton, Field, et al., 2013; D. Hinton, Peou, et al., 2013.)

The authors also argue that the iconography of trauma varies by age cohort. They emphasize the importance of analyzing an age cohort's traumas in cultural-historical context. The traumas of each generation vary, and so too do the manner of socialization and the stock of images that resonate with current trauma. An Iranian generation was made to watch cartoons that represented a depressive dystopia of orphans, dead parents, and children seeking out missing parents, cartoons that were rendered in gray tones and whose soundtrack was lugubrious music. A generation was flooded with images of young men committing a martyr suicide in a state of religious intoxication, rushing out to fight against Iraqi troops. This same generation experienced multiple types of representations of the Karbala. Further layers of that space-time (chronotope) are images and sounds of bombing, the recurrent sirens, and other aspects of the sonic landscape described previously. The chapter details an archaeology of traumas and scrutinizes how these archaeological levels are taken up and remixed in dream as current life events call up past images in the process of *Nachträglichkeit*. The chapter also shows how these processes differ by age cohort.

In Chapter 5, Carol Kidron gives examples of how the sudden reliving of the past traumas may not simply be in the form of visual images. The flashback may be multisensorial and additionally enacted: The person

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may enact the scenes of the past like eating a potato skin when starving. Her chapter shows that hunger – and related sensorial experiencing such as seeing, cutting, and smelling potatoes – may act as a somatic marker of the past that brings about its reliving. Hunger, food, or even skinniness in oneself or one's children may be sufficient to evoke the chronotope of the Holocaust time – and here hunger may also serve as a metaphor and symbol of emptiness. Such memories show the imprint of the past not in the form of heroic memory, or martyrdom memory, or humiliation memory,⁸ but rather in the form of desperation memory (on chronotopes triggered by sensorial experience, see also D. Hinton, A. Hinton, & Eng, Chapter 9, this volume).

Desperation memories are memories that evoke the emotional space experienced when there was constant threat of death during a given period that was a desperation chronotope, a dystopia, a lifeworld of desperation. Kidron's chapter describes how those memories are evoked, and so too other chapters reveal how desperation chronotopes are recalled to mind: Behrouzan and Fischer (Chapter 4, this volume) show how sirens and bombing were repetitive background events of a space-time that if heard now have the power to evoke not just a particular event but an entire period; Casey (Chapter 3, this volume) reveals how the image of burning oil wells plays a similar role; and D. Hinton, A. Hinton, and Eng (Chapter 9, this volume) detail how neck tension and pain were the embodied background of the Pol Pot period (on smell's ability to act as a chronotope marker; see D. Hinton, Chea, Ba, & Pollack, 2004).⁹ To put it in Langer's (1991) terms, chronotope memory is "deep memory" as compared to "common memory." It is a memory that recalls the self as it was in a period in the past and reveals a "doubling of self," the self as it is now compared to the self during Auschwitz – deep memory returns the Auschwitz self. In this case it is a flashback-like remembering not of just an event but of an entire time and a certain sense of self – the sense of self as it was experienced when in a particular event, location, and time.¹⁰

There is also wounded-body memory. Kidron describes the permanent inscription of a trauma event on the surface of the body. A tattoo, the scar from a gunshot wound, or two toes that were frostbitten and now paralyzed: These are permanent memorials of the genocide time. It may be through these body memorials that children most deeply understand a parent's Holocaust ordeals. The child's iconic memory of the Holocaust may be the parent's bodily wound along with the events that the child imagines gave rise to the wound: the memory of a parent's tattoo paired to the mental picture of the parent's arm being branded and the sensorial imagining of the heat of that branding. Or the child's iconic memory may be the parent's bodily wound along with the parent's

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demonstration of the limitations posed by the wound: the memory of the parent's disabled frostbitten toes paired to the memory of the parent demonstrating that the toes do not move. This is wounded-body memory. There are also world-danger memory and inconsolable-wound memory. Children may hear of some danger that the parent survived, such as a death walk in bare feet, and imagine that to be an imminent danger: The child may place walking shoes beside the bed for fear that the Nazis may come. Here the child's sense of ontological security is greatly threatened as a parent's memory becomes an imagined future. This is world-danger memory. As another evoker of the past, Kidron gives the example of a child's memory of a mother often crying upon awaking from a bad dream that the child presumes to be of the Holocaust. This is inconsolable-wound memory.

A parent may have one or more of these types of memories and may pass them on to his or her child. The child of the trauma survivor may also have a doubling of self: the self as it is now and the self as it was when it experienced a parent reliving the Holocaust. This witnessing of a parent may be a kind of trauma. This memory of the younger self and the affect experienced at that time constitute part of the memory of the parent's trauma. As another form of memory and transmission, each generation hypothesizes their parents to have passed through certain events that are part of collective representation of the trauma in question. This might be called hypothesized trauma, which may well be a sort of memory of some depiction of the event such as a film representing the events of the mass violence.¹¹ These might be called second-order memories, or genocide-representation memories, that is, memories of depictions of the genocide, which may include novels, autobiography, movies. As another kind of second-order memory, there is a parent's recounting of those events, that is, parental representational memories (see also Hirsch, 1999).¹² The various types of memories discussed above may come to be a core part of the person's sense of self and provide an explanation for his or her own actions and those of family members – a transgenerational frame and sense of self. Kidron's chapter suggests that an important aspect of an anthropology of mass violence is the study of these kinds of memories, how these memories are transmitted across generations, how the memories are recalled to mind, and what effects these memories have.

In Chapter 6, Vincent Crapanzano outlines how among the Harkis, who are the former allies of the French military in Algeria, that trauma experiencing is shaped by the conception of fate and the cultural value of endurance (*sabr*) and accepting destiny (*qda*). He demonstrates how these values influence the particular trajectory of the intergenerational