Trauma Talk

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The very notion of writing traumatic experience may be nonsensical. When horror can be articulated and told as a story, no matter how terrible the story is, it becomes part of an autobiographical narrative, and as such, it has already changed character. It has become a willed repetition rather than an automatic and/or hidden one. It has gained a temporal, narrative reality, one we share with others, something made possible by our reflective self-consciousness. As a story, the experience necessarily belongs to a specific time and place we can identify. To use the Hegelian distinction, storytelling is something that is always for itself, not in itself because, unlike most animals, human beings are not bound to the phenomenal present. We can recall ourselves in the past, imagine ourselves in the future, and inhabit fictional stories. Narrative organizes the affective material of memory into a temporal, linguistic schema that is necessarily dialogical. An “I” always implies a listening “you.” Stories exist on the axis of discourse. This is true even when we are narrating our lives in inner speech, that is, when we are listening only to ourselves.

What is certain is that people do write about traumatic experiences in memoir and fiction, and we may ask: How does that work? How can trauma be conveyed to a reader? Traumatic memory is a particular kind of recollection that does not obey our everyday
experience of subjective time, the distinctions we routinely make among past, present, and future. In *The Confessions*, Augustine writes, “My memory also contains my feelings, not in the same way as they are present to my mind when it experiences them, but in a quite different way that is in keeping with the special powers of the memory.” The emotions are all there, Augustine tells us—desire, joy, fear and sorrow—and they can all be called to mind, but “if we had to experience sorrow or fear every time that we mentioned these emotions, no one would be willing to speak of them. Yet we could not speak of them at all unless we could find in our memory not only the sounds of their names, which we retain as images imprinted on the memory by the senses of the body, but also the idea of the emotions themselves” (Augustine, 1988, pp.220-221). Augustine is addressing willed memory, the voluntary trips we take into the past, and in order to do that, we need words and ideas.

3 When I was a girl, my family had a dog, Balder, who chased cars. One day he was run over by a car. Balder lived, but he lost the use of one of his legs, and after that, he became a three-legged car chaser. That accident remains a strong memory from my childhood. My sister yelled at me when, like a silly goose, I burst into tears. I remember particularly that I was not brave and felt ashamed. But when I think back on the moment, I do not re-experience the misery and fear I felt at the time. Neuroscience now tells us that memories are consolidated by emotion, and this also makes inner sense. Other routine days around Balder’s accident have vanished from my recollection entirely, and this memory, which has remained has nevertheless cooled over time and through the distance inherent to storytelling itself. The force of the emotion remains in the past. What lasts is a tale from my childhood, one I turned into a verbal narrative long ago. It is not emotionally neutral, but it is bearable. The story has been fixed in my mind, and the words have devoured and replaced most of the mental images. It happened, after all, to another person, my child self; I retain some images—mostly vague—of the road at night, our driveway, Balder lying in a black and white heap, my sister and I leaning over him, but it is in no way a traumatic memory; it has been digested into the broader story of my life.

4 We codify perceptual experiences in conscious memory through both placement—where and when it happened—and interpretation, what it means in the larger context of my life. In our autobiographical memories, we always become others to ourselves. Even if we don’t see ourselves in the third person, we have projected the self elsewhere in time. As Merleau Ponty notes in *The Phenomenology of Perception*: “Between the self which analyzes perception and self which perceives, there is always a distance” (p. 43) The psychologist Endel Tulving divided memory into three useful categories: 1. episodic memories, conscious personal recollections that can be located to a specific place and time. 2. Semantic memories: impersonal recall of information and 3. Procedural memories, unconscious learned abilities—riding a bike, reaching for a glass, typing (Roediger & Craik, 1989; Tulving, 1984, 1993). Whether these actually represent discrete systems of memory in the brain is still a matter of debate.

5 However, it is clear that certain memories are not smoothly integrated into the mind-brain and quickly turned into stories. They are retained in motor-sensory and sometimes visual form with little if any verbal accompaniment, and return unbidden. They are not willed. They repeat themselves without warning and this recurrence, I must stress, is psychobiological. In trauma, dividing psyche and soma distorts its character. And traumatic experience is not limited to human beings. It is mammalian; other animals also suffer such traumatic blasts, can be shell shocked, although they have no recourse to
talking cures. The flashback is a fascinating form of traumatic remembering. In *The Shaking Woman or A History of My Nerves* I explore emotional memory and its relation to flashbacks, and my own experience of them after a car accident.

Emotional memories appear to be processed differently in the brain from more pedestrian memories, which may explain the phenomenon of traumatic flashbacks. A neurobiological study conducted in 1996 on people who experienced flashbacks concluded that these memories are “organized on a perceptual and affective level with limited semantic representation and tend to intrude as emotional or sensory fragments related to the original event with stability over time.” This is an elaborate way of saying that what returns in a flashback is remembered not through language but through emotion and sensation. After a car accident, I had flashbacks four nights in a row. Each time I was asleep, and each time I woke sitting up in bed, terrified, my heart racing, after reliving the moment of the crash: the speeding van, the deafening noise of glass and metal exploding around me. For four nights in a row, I relived the shock of that van as it slammed into the passenger side of the car, where I was sitting. These were not like any memories I have ever had. I had not sought them, and they had not been triggered by some external stimulus—a smell or taste or sight or sound. They just came, and when they came, they were not in the past but in the present. The thing that had happened, happened again.

In *History Beyond Trauma*, Françoise Davoine and Jean-Max Gaudillière, two psychoanalysts who have done extensive work in the field, address this curious alteration of time among those who have been traumatized. “‘Once upon a time,’” they write, “becomes ‘Once upon no time.’” Trauma has no narration. Stories always take place in time. They have a sequence, and they are always behind us. Those four nights of reenactment were wordless. I could not say, *Oh yes, that happened four days ago when my husband, our daughter, our dog, and I were driving home from the country. A speeding van hit us at an intersection. The car was completely destroyed but we all survived. The experience had no context (returning from the country), no place (where Third Street and Fourth Avenue in Brooklyn cross), and was in no way diminished by distance (it isn’t happening now; it happened yesterday or the day before or the day before that).*

I know the impact was horrible, because it returned to me those four nights, but my memory of the catastrophic instant is no longer present in my mind. I remember the time after the crash, however, with heightened clarity and precision. I remember sitting frozen in the seat, remember checking to see that I was whole without moving my head. I remember looking through the shattered glass of the windshield at the sky and that everything was black and white and gray. I remember the fireman telling me that the Jaws of Life were noisy, and I remember my indifference, an indifference so profound that I actually said to myself, If you have to die now, this is not such a bad way to go. In the ambulance, the paramedic who was monitoring my swiftly dropping blood pressure as the siren screamed above us asked me if I was particularly white. I told him that because I was of northern European stock, I was indeed white, but that people did not often comment on my whiteness. No doubt, after the accident, I had turned very pale. I didn’t know then whether I had broken my neck, whether or not I would die or be injured for life, but I felt neither fear nor distress. My perceptions were acute. In fact, I told myself to be alert to everything because if I did get through it, I might be able to use the material in a novel. Under the circumstances, this now strikes me as bizarre, but my distance from potential catastrophe must have served a protective, adaptive purpose: alienation as
armor against the real. The little voice in my head continued on its narrative journey, talking away in a reasonable manner, but my emotions had shut down. (pp. 43-45)

My experience corresponds to the findings of researchers looking into the neurobiology of trauma. I could talk after the accident. I could think and narrate, but the horror of the experience was missing from my narration. I was clearly in a dissociated state. In a 1993 paper, Van der Kolk and Sapporta write of flashbacks: “These experiences may then be encoded on a sensorimotor level without proper localization in space and time. They therefore cannot be easily translated into symbolic language necessary for linguistic retrieval” (quoted in Brown, Schefflin, & Hammond, 1998, p.94). Joseph Le Doux has done compelling work on the neurobiology of fear and memory. His research does not rely on brain scans; rather he uses classical behavioral techniques of conditioning. What is clear from his research, which is vital for understanding the myriad forms of human fear—flashbacks, phobia, panic disorder—is that what scientists call cognitive or executive functions of the brain can and do modify fear responses (Debiec & LeDoux, 2009, Le Doux, 2002; Nadar, Schafe, & LeDoux, 2000). I would elaborate upon this by saying that narration itself, the organizing of autobiographical material into a temporal form, narrating in the past tense, can subdue automatic fear responses. Paul Ricoeur argues that narrative is a grasping together of elements into an order that is meaningful. It is not a record of phenomenological experience but linguistic connective tissue that leaps over, binds, and closes. I do not think narrative creates the self, however. I agree with Dan Zahavi who in his book Subjectivity and Selfhood, writes: “To put it simply, it takes a self to experience one’s life as a story. In order to begin a self-narrative, the narrator must be able to differentiate between self and nonself, must be able to self-attribute actions and experience agency, and must be able to refer to him- or herself by means of the first-person pronoun. All of this presupposes that the narrator is in possession of a first-person perspective” (114).

Translation of raw perceptual experience into an “I” or autobiographical memory implies both place and time. One must have a setting in the mind, what the Greeks called topos, a location in space. And it must be temporally marked. Last week, yesterday, when I was five, I... The event happened to me there. I remember it. But these willed memories are precisely the ones we rewrite, edit, and change, not consciously but unconsciously. Over time we re-imagine our own stories. No doubt I would be shocked by the reinventions of my memory if I could actually return to the unhappy event on the road near my childhood house where the family dog was hit by a car. What Freud called Nachträglichkeit (the shifting of recollection from the perspective of the present), what I think of as fictionalizing the past, is referred to as reconsolidation by neuroscientists. We do not retrieve an original memory, but rather the memory we retrieved last time and, with each retrieval, a new version becomes possible.

The unintentional remaking of memory can be seen in every family. Each person has his own version of the same event, not only a different perspective. Sometimes each family member has concocted a wholly different scenario. Recollection is not a documentary of actual events but a fluctuating personal narrative. The traumatic flashback, however, has none of these characteristics and is not subject to the dimming, mutating, or cooling effects that characterize autobiographical or episodic memory. To use the neurologist Hughlings-Jackson’s word: the flashback is an automatism, an experience without a narrator, and it is precisely the kind of memory Augustine argued no one would want to have because the emotion is not altered, but has the same power as when it happened.
How does one approach this explosive reality in fiction? How does one write the unwilled, unwanted, and un-verbalized? How can a horrifying motor-sensory, visual experience be represented?

In my novel *The Sorrows of an American*, trauma recurs as a theme. The narrator, Erik Davidsen, is a psychiatrist and psychoanalyst, so he is conversant in the languages of the wounded mind. His sister, Inga, is a philosopher who has written about, among other things, narrative and time. Narrating trauma presented me with some interesting dilemmas. I was deeply aware that traumatic experience resists words, resists telling, and when the events are related, they often result in dissociated language, a cold, unfeeling account of horrible experience. The narrator’s father, Lars Davidsen, is based on my own father, and I used my father’s experiences in The Second World War in the novel and, with his permission, quoted passages directly from a memoir he wrote for his family and friends. The novel is set in New York City after September 11th. Erik’s niece, Inga’s daughter, Sonia, saw the burning towers and people jumping to their deaths from the window of her classroom that was only a couple of blocks north of the World Trade Center. The invasion of Iraq also takes place during the course of the novel. This passage occurs shortly after the US invasion.

I had seen too many veterans during my years at the hospital to fall for the moronic patriotism they were offering the public on television: cameras and tanks rolling, flags and dust flying, eager journalists decked out in combat fatigues sputtering in excited tones about our brave troops, the sturdy families back home, sacrifice, duty, America, homeland. Inga’s book had spoken directly to this kind of grotesque spectacle, and yet I was certain that her words would be met by deafness. History is made by amnesia. In the American Civil War, they called it soldier’s heart, and over time it changed its name to shell shock, then war neurosis. Now it’s PTSD, post-traumatic stress disorder, the most antiseptic of the terms for people who witness the unspeakable. During World War I, in the barracks of field hospitals French and British doctors saw them coming in droves—men blind, deaf, hallucinating, plagued by recurring nightmares and insomnia, seeing and re-seeing what no one should see, or feeling nothing at all. Clearly they weren’t all suffering from brain lesions, so the physicians began to tag their patients NYD (not yet diagnosed) or GOK (God only knows) or Dieu seul sait quoi (God alone knows what this is).

“Dr. Davidsen,” he said. “It’s come back now all these years later. It’s not like remembering, no sir. It’s the shock, same as it was, as if I’m goin’ through it again. I wake up to the impact in my leg, no pain, just the blast, and then I see it.” A chronic alcoholic, Mr. E. hadn’t been hospitalized for trauma. He had had his ascites drained but was sent to me after he screamed at night and woke up the whole ward.

“What do you see?” I said.

He had a wrinkled red face mottled by brown spots. He rubbed his cheeks with both hands. His arms shook uncontrollably. “Harris on top of me. Rodney Harris, without his head.”

Trauma isn’t part of the story; it is outside story. It is what we refuse to make part of our story. (51–52)

The following passage is an account written by my father, Lloyd Hustvedt in his memoir, which I borrowed for Erik’s father, Lars Davidsen. Until I read about it in the memoir, I had no knowledge of this traumatic experience that returned to him in flashbacks after the war.
About two weeks after our landing, I had experience that I find difficult to recall or to discuss, my father wrote. It is the only wartime experience that returned to me in troubling ways by reliving it in dreams. Four of us were bouncing down a rural lane in a jeep. Lieutenant Madden was one of the four. We spotted a Japanese officer a distance away. We knew this because he carried a samurai sword. His manner was strange. When he became aware of us, he scurried for cover in an effeminate, short-step-tip-toe fashion. He then crouched down in some foliage, yet far better coverage was nearby. We boxed him in and then moved slowly forward. The poor devil was quite visible from all sides. He didn’t move. I hoped he would be sensible and rise with his hands up. He had taken what seemed to me to be a position of prayer. In a matter of moments, four carbine barrels would be nudging him into action. That would bring him out of his trance. Then came two rapid shots. He didn’t make a sound. He rolled over to one side, ever so slowly. There were a few twitches as if he wanted to stretch himself and that was all. Our lieutenant had done it. None of us had noticed that he had stopped and had taken a cover position, which was the proper thing to do. “He was going for a grenade, for God’s sake,” was his explanation. There was no grenade. There was a pistol, a Japanese Luger; but the holster was firmly clasped shut.

It is pretentious to claim to know what one was thinking in moments like this. I may have expected a humane outcome and then come apart when the reverse happened. I may have felt that you do not shoot people while they are praying. His praying position had a powerful impact on me. I became quite deranged and by soldier standards behaved badly. I lashed out at the lieutenant, saying he ought to be shot, too. I was led from the scene and slapped about a bit. I came to my senses and felt shame for what I had done. The lieutenant told us that he believed our lives were at risk. He himself might have survived a grenade, but not us. He could live, he said, with what had happened but not with what could have happened. The Japanese officer had surely become addled from earlier experiences and may have roamed for days without detection. How did he get separated from his unit? An officer at that? Why did he hide and not hide? The experience hardened me. About six months later, when I was in Japan, I began to relive the sorry spectacle, often just when I went off to sleep.

17 My father said the man “crouched” in the grass and then took on a position that made him think of prayer. I imagine him on his knees, beseeching heaven, asking for mercy. He may have had his hands clasped together. Then came the shots. *Harris on top of me. Rodney Harris without his head.* Intrusive memories. Fragments. These are the pieces that won’t fit. Sonia’s cries at night. My grandfather’s nightmares. I knew that research was confirming what I had always felt was true in my patients: their memories of war, rape, near-fatal accidents, and collapsing buildings aren’t like other memories. They are kept separate in the mind. I remember the images from PET scans of PTSD patients and the colored highlights showing increased blood flow to the right brain and to the limbic and paralimbic areas, the old brain in evolutionary terms, and decreased flow to the left cortical areas, the language sites. Trauma doesn’t appear in words, but in a roar of terror, sometimes with images. Words create the anatomy of a story, but within that story there are openings that can’t be closed. By then my father had seen many dead bodies, but this one was different. Beyond combat. I beg of you. Help me. The man had not fought back, had not gone for a grenade or a gun. I wondered if the frightened officer had reminded my father of another man who had fallen to his knees, begging for another chance, or maybe the man’s humble, frightened position was itself a visual metaphor that summoned what Lars Davidsen couldn’t put into words. (83-85)

18 My father’s smooth account of the Japanese officer’s death, which in the novel becomes Erik’s father’s smooth account, is unmarked by the trauma he admits to reliving, often
just as he was dropping off to sleep. Erik’s commentary on the story is far more emotional. The precise paternal narrative is marked by the same dissociated quality that colors my own memory of my response after the car accident. Flashbacks often return in sleep. In *Beyond the Pleasure Principle*, Freud wrote, “Now in the traumatic neuroses the dream life has this peculiarity: it continually takes the patient back to the situation of his disaster from which he awakens with renewed terror…” (13) Freud, of course, was trying to understand the nature of these horrific repetitions and understood that what the traumatized person avoided during the day often returned in dreams. Sleep made the patient more vulnerable to the pathological repetition of the original shock. In contemporary terms, this vulnerability may be reframed. Although the brain is highly active during sleep, the bilateral prefrontal cortex, often called the “executive” part of the brain because, among other things, it is involved in regulating emotion, is dormant. The traumatic experience, suppressed during the hours of wakefulness, may surge forth when the regulatory function vanishes in sleep. The memory is relived, and the body responds again to the original emergency. The person’s heart pounds, his skin grows clammy, and his mouth dry with terror. Stress hormones are released in the brain. He finds himself reliving, not narrating the experience.

Later in *The Sorrows of an American*, the traumatic experiences that have been recounted earlier begin to merge, and the fragment—the isolated phrase—that represents a piece of experience, which has not been and cannot yet be integrated into narrative form accumulates meaning because the reader has encountered it before.

My father started college at Martin Luther again, this time with money from the G.I. Bill. He was twenty-four years old. I imagine him sitting beside his friend Don at the choir concert. They are seated in a pew, because I’m guessing that that the choir sang in the college chapel. *One of the numbers*, my father wrote, “*O Day Full of Grace,* triggered in me a recall of events, pleasant ones at first that led step by step to the horror images of the unnecessary killing of the Japanese officer. To Don’s alarm, I began to tremble. I lied and said it was a touch of malaria. This was my only daytime flashback, but I lived in fear that more might come. I read these sentences to myself many times, trying to penetrate their meaning. “*O Day Full of Grace*” wasn’t listed in the red Lutheran hymnal that found its way into my possession years ago, but I wondered if perhaps somewhere in the text or in the music there was a cue that set off a train of images my father couldn’t stop.

Traumatic memory arrives like a blast in the brain.

“I thought we were going to die in the apartment,” the young woman told me. “But a policeman found us. He got us out and we started running.” She took a breath. “We could hardly see or breathe. It was dark and we walked in this dry choking rain. And then on the ground, I saw a person’s hand. The blood was a strange color. I even thought that.” She began to breathe harder. “I had to step over it. We were running. I thought we were going to die. That’s what happens to me, mostly at night. It’s the feeling of blind running. I’m there again. I wake up with a shock, like I’m exploding, my heart beating. I can’t breathe. It’s not a dream.” Her mouth contorted. “It’s the truth.” She closed her eyes and began to cry.

That day, we waited for the injured in emergency rooms all over the city, but they never arrived. They came to us later with their wounds of indelible memory, the images that were burned into them and then released again and again in a hormonal surge, the brain flood that accompanies unbearable reality. *O Day Full of Grace.*
The choir sings. A young veteran sits in his pew and listens to the collective voice thanking a beneficent God. Perhaps he remembers a hymn he used to sing in church when he was a child with his father beside him. It is a warm memory. He recalls the low mumbling of prayers in Urland Church as the congregation beseeches the deity for forgiveness, and then there is another vision that imposes itself with brutal suddenness: a man is kneeling in the grass with his hands pressed together. He is praying for his life. (136-138)

While I was writing *The Sorrows of an American*, I had a vivid, emotional dream. When I woke up, I wondered if I hadn’t dreamt it for the book. I donated my dream to Erik, my brother self, the “I” of the novel. The transfer of oneiric material from me to Erik felt right because although Erik’s life is not mine, my writing of the novel was a journey toward my own sense of an emotional, not literal, truth that circled the mystery of my own father. One might argue that through the fictional narrative I was looking for my father. The transfer of the dream from me to Erik felt inevitable because in some important way Erik and I had the same father. What is different is our perspective. I am not Erik. The movement of material from me to Erik is not radically different from what occurs in autobiographical memory when I attach an experience to an earlier, inevitably fictionalized self. The workings of autobiographical memory, with its unconscious reinventions of the past, are similar to novel writing, which also partakes of unconscious activity that shapes the fictional events of the book, which, as the writer of the story, I must nevertheless feel are emotionally true. And, whether I retell my dream as mine or give it to Erik to retell, the narration of the dream is not the dream itself, as Freud pointed out, just as a perception is not the memory or an analysis of that same perception. The remembering and subsequent telling is a step removed, a reconfiguration of the phantasms of sleep.

That night I dreamed I was on the farm, standing near the grape arbor to the left of the outhouse, looking toward the broad rolling fields ahead of me. The dream was colorless. I saw everything in shades of gray. My father was there beside me, but I had no clear image of him, except that he was erect and still young. Although his figure was obscure, I felt him, knew that he stood several feet away from me and was also looking west. Then, as we watched, an explosion burst on the distant horizon and sent a great ragged ball of smoke into the sky. Then there was another, and then another—three huge blasts that filled the sky. From behind us, a voice I recognized as my grandfather’s said “Queak.” All at once, we were blown backward by some unaccountable force, and my father and I landed inside the house in a cramped enclosure that resembled a cellar or attic, its beams just above our heads. The room began to rock back and forth violently, and my unseen grandfather spoke again. I knew he was there, but I didn’t turn my head. This time, I heard him pronounce the word “Quake,” followed by “Earthquake.” As I woke, the walls had begun to splinter and break apart.

Dream economies are frugal. The smoking sky on September eleventh, the television images from Iraq, the bombs that burst on the beach where my father had dug himself a trench in February 1945 burned in unison on the familiar ground of rural Minnesota. Three detonations. Three men of three generations together in a house that was going to pieces, a house I had inherited, a house that shuddered and shook like my sobbing niece and my own besieged body, inner cataclysms I associated with two men who were no longer alive. My grandfather shouts in his sleep. My father shoves his fist through the ceiling. I quake. (231-232)
My dream. Erik’s dream. My father. Erik’s father. My grandfather. Erik’s grandfather. This is not a traumatic dream, but a dream about traumatic experiences that have been inherited over generations and is told through concise, potent images. (I often admire the pithy, overdetermined character of my dreams as lessons in how to write novels.) Transgenerational trauma has been widely discussed especially in relation to the children of Holocaust survivors and has usually been understood from a purely psychological perspective. But it is interesting that new research in epigenetics is examining inherited trauma as well. Epigenetics is the study of the regulation of gene pattern expression in relation to environmental influences. A 2010 paper in *Biological Psychiatry*, “Epigenetic Transmission of the Impact of Early Stress Across Generations” done on mice showed that mice subjected to chronic and unpredictable maternal separation had offspring who, although not subjected to the stress of separation, showed changes in DNA methylation. This refers to the chemical modification of a strand of DNA after it is replicated. Methylation can cause gene suppression, so the finding is significant and, with further research, we may begin to understand how such transmissions work in human beings. It is blazingly clear, in all events, that genetic expression takes place in interaction with the environment and the old nature/nurture divide is moot. One becomes the other. My dream was not neurobiological, of course, but it neatly bound three generations together, each one shuddering from explosions that by the end are ripping apart my grandfather’s house.

Most of the time dream experience happens to us, but in French, you say, *j’ai fait un rêve*. In English we say, *I had a dream*. The French understanding is active, the English passive. Both reveal something true about dreaming. My quaking dream was not a lucid dream. I did not know I was dreaming, but sometimes I do and can direct the outcome of the story. My dream was emotional, one of many dreams I had about my father after he died. Of course, it was my decision to use it in the book, to reinvent it as dream in the novel. For me, this created a greater sense of narrative ownership—the dream made me. Now I remake the dream.

Furthermore, I was well aware when I woke up that I had dreamed about my own bodily quakes and shudders, which in the dream had been transformed into literal explosions in the landscape and expressed in the words *queak* and *quake* spoken by my grandfather. I began writing about my undiagnosed seizure symptom immediately after I finished *The Sorrows of an American*. In *The Shaking Woman or A History of My Nerves*, I chase the symptom through multiple disciplinary lenses in an attempt to fix it somewhere on the psyche/soma divide. The first shaking incident occurred while I giving a speech in memory of my father at a ceremony in his honor two years after his death. I opened my mouth to begin my talk and began to shake violently and uncontrollably from the neck down. I finished the speech. The shaking stopped, but I had no idea what had happened to me.

I was not so naïve as to believe that my symptom could be permanently fixed as either a psychic or somatic disorder. The separation is artificial. At the same time, after years of reading in various fields—psychoanalysis, medical history, continental and analytical philosophy, psychiatry, and neuroscience—it had become eminently clear to me that the same symptom looks different depending on one’s point of view, that the only possible route to knowing and understanding anything is to employ not a single model, but many models, which, by definition, means that there is no final answer, that tolerating ambiguity is the price of theoretical sophistication. If this sounds as if I am advocating some late twentieth century version of the constructed self, or the human being as purely
a creature of history and ideology—I am not. I am also not advocating a reductive evolutionary sociobiology that is blind to the immense complexities of culture and language and their profound influence on human beings. In The Shaking Woman, I take a stab at articulating the ambiguities involved in negotiating the mind/body and inside/outside borderlands.

While helpful, cutting the inside of a person (the neurological and the psychological) off from what is outside him (other people, language, the world) is artificial. The differences revealed by these incisions are a matter of focus, how to see and interpret an illness of symptom. Even if my tremor were hysterical, a form of dissociation, a personal metaphor for the unspeakable or for mourning or for an emotional conflict with my father that I have repressed, which then appeared as a psychogenic seizure, I doubt it would have taken that particular form if I didn’t have a neurological predisposition to it, perhaps because of my feverish tremors as an infant, my seizure as a young woman in Paris before the long migraine, perhaps for some as-yet-not identified reason. Many people—actors, musicians, surgeons, trial lawyers—are subject to a hand tremor before or at the onset of a performance, and many of them calm the quivering with a drug. My fits may simply be an extreme version of that more prosaic physical manifestation of anxiety. On the other hand, let us say that hidden somewhere in my brain, undetected by the MRI, or somewhere in my unexplored cervical spine area, there is a lesion that could be designated as the cause for shaking. I still don’t believe I would have started shuddering if I had not been speaking about my father or standing on that old ground of memory or if I hadn’t been facing family friends I had known since childhood. I would not have shaken that day if there had not been some strong, if hidden emotional catalyst. Genuine epileptic seizures are often triggered by powerful emotion. And what about the shudder in the Pyrenees? I climbed too fast in the thin air and lost my breath, which sent my already vulnerable system into convulsive motion. Hyperventilation can bring on seizures. Every person has a seizure threshold. Mine might be lower than average. On the other hand, I might be wrong about all of this.

Whatever the truth may be, the ups and downs of my own nervous system and my encounters with doctors illustrate the ambiguities of illness and diagnosis. The philosophical ideas that lie beneath calling one thing by one name and another by another often remain unexamined, and they may be determined more by intellectual fashions than by rigorous thought. The New York Times headline “Is Hysteria Real?” upholds the conventional belief: if you can see it, it’s real and physical. If you can’t, it’s unreal and mental. Or, rather, most scientists agree that what’s mental is really physical but can’t describe how that works. Then again for other scientists, there is no physical reality than can be understood as if we could leap out of our own heads and become objective; everything we live is given to us via the mental. The world is mind. Whatever the case may be, on a more pedestrian “level,” there is no simple identifiable cause and effect to illuminate what exactly is wrong with me, no linear motion from one thing to another, but a number of factors that may or may not play a role in the vagaries of the shaking woman’s path. (186)

I have been arguing that remembered narrative is a subjective phenomenon, owned by a teller, and can be willed to consciousness, as Augustine argued. The traumatic flashback, the conversion paralysis or seizure, on the other hand, are somatic and speechless, outside the axis of discourse and subjective time and location. My point is that there is something fundamentally un-owned, involuntary, and un-mastered about these bodily
experiences of horror. They are not part of the autobiographical summoning that is
evoked by the words, “I remember.” In my particular case, the act of writing about my
seizures, whatever their cause, was a bid to master their involuntary, alien, indeed
horrific, quality. Writing about my shaking did not cure me of the symptom, but it did
give me a greater sense of control and agency. In this sense, writing the book transformed
the experience and, by the end, I had given myself permission to own it. The last words of
the book are: “I am the shaking woman.”

And yet some narratives seem to emerge without an owner, from nowhere, as it were.
Think of the phenomenon of automatic writing studied by many researchers in the late
nineteenth and early twentieth centuries. Pierre Janet used automatic writing as a tool
for treating hysterical patients. In that period, automatic writing implied that the writer
was unaware of what the hand was doing. From the scribbling hands of Janet’s patients
came involuntary texts and stories, evidence of what he understood as a psychobiological
split in the wounded person. Writing is not speaking. The mouth is part of the face, the
locus of every person’s identity, crucial to the face-to-face, eye-to-eye encounter between
an “I” and a “you.” And yet, sometimes the hand can say what the mouth can’t. The hand
is some distance from the face, after all, more easily alienable from the “I”, as is clearly
seen in the neurological phenomena of anarchic hand syndrome, various forms of
neglect, and in somatoparaphrenia, the denial of ownership of a paralyzed limb (most
often the left arm.) Some patients insist that their own arm belongs to a spouse, sibling,
or child, doctor, or even a corpse.

In automatic writing, the motor-sensory systems of brain to hand become vehicles to tap
what is unknown to the writer herself. This is an extremely interesting phenomenon, and
more work should be done on it. With a few exceptions, automatic writing has been
abandoned by science, and literary people often believe it was a Surrealist invention, but
the Surrealists took their inspiration from Janet and of course knew they were writing.
When I was a volunteer teacher for psychiatric inpatients in New York, I noticed that
when the patients were able to relax and write freely, material emerged that could never
have appeared in my conversations with them.

There is a felt rhythm that happens in writing, an underground to articulated narration
that may burst forth into words that suddenly become conscious. The words do not feel
willed. They are simply allowed to appear by the writer as if an alien presence is guiding
the narrative. The writing “I” has vanished, and stories, poems, formulas, or musical
compositions appear to make themselves. Sometimes only after the fact does the artist
recognize what she has done and subsequently take it in as her own. In such a case,
ownership of the text comes after the fact.

I believe the narrative self is rooted in an earlier self, which is in part created through the
bodily rhythms of our earliest social exchanges, the gestural, vocal, and tactile back and
forth that takes place between mother and child. Infant and attachment researchers often
refer to this as mutual “attunement,” a harmonious dialectical relation between parent
and baby (Stern, 1985) Although crucial to our learned emotional and cognitive
development, and to the neurochemical, synaptic, and hormonal functions and
maturation of our brains, not one of us can remember this dynamic relational history
(Jaffe et al., 2001). It is nevertheless coded in our bodies, part of a bodily memory that can
never become conscious, but which can nevertheless influence our affective lives, and I
think it lies beneath the rhythms of our stories and the music of our prose. Over time, this
dialogical attunement acquires the symbolic structures that make telling and writing
possible. And much of what is learned becomes automatic, part of a vast unconscious, which can then be unleashed in narratives.

38 Trauma can be understood as a disturbance of psychobiological rhythms—as an explosive cacophony in the human organism. It cannot be understood in purely psychological terms or in purely neurobiological terms. Trauma resists language, and when it is represented, its character is changed. As Julia Kristeva writes when discussing Proust’s sadistic voyeurism in her book *Time and Sense*, the movement in Proust is one that begins with overwhelming sensation and ends in representation. Writing trauma must also move from unbearable sensation to representation. And that journey requires a form of reflective self-conscious alienation in language that is missing from the traumatic experience itself. I often think of one of Charles Dickens’ characters, Mr. Dolls, in *Our Mutual Friend*. This poor alcoholic ruin never uses the word “I” in his sentences, a startling and efficient sign that his “I” has been lost and along with it, his agency. “Circumstances over which had no control,” is his refrain. In the case of Mr. Dolls, the absence of the personal pronoun does immense work in the text. The sentence fragment, ellipses, as well as gaps or holes in a story may all be used to represent traumatic experience. And what about the smooth, unfelt, dissociated recitation of horrible events? Can this kind of account represent trauma when the trauma itself is absent? One can surely say that the reader will feel in the voice on the page one of the forms traumatic experience may take in its aftermath: preternatural calm.

39 The last pages of *The Sorrows of an American* were written in a trance. I knew without knowing, and the pages are nothing but a series of fragmentary thoughts that reprise what has already happened in the text, a text in which I began to understand that the secrets the characters are looking for cannot and will not be found—that the secret of the father will never be solved. The book does not end by closing down a coherent narrative because no plot cannot contain the meanings that have escaped. Without having read the book many of the references will be obscure, but the form will not. I will leave you with them—they are bits and pieces pulled together, hesitantly, by Erik, who cannot truly bind together these fragments of his reality but lets them stand—as a train of associations that accumulate meaning as they go on. This is the final passage of the book:

40 ...Deadlocked. People need to be seen. Mr. R. looks up and sees the rug on the wall in my office. Something had broken inside him. *The Depression never seemed to end*. I see my father walking across campus with his long strides, and he doesn’t recognize me. He passes his son, but he’s not looking for me at that moment. He’s too sad to see me, absorbed in old sorrows that return again and again. *It’s something about Dad*. Inga is talking about Max. *We have different selves over the course of a life*. My father is telling his story about the farm, his army days, his travels, and his work, about the people he knew and loved, and about us, about my mother, Inga and me. The speech seems to be over. My father pauses. His eyes are gleaming with humor. “And that is why,” he says, “I answer to the name of Lucky.” It’s new, Sonia says, about being in love. It’s new. The New World. A dugout on the prairie. The vanished. His vacant corpse had lost the man I knew. Joel will never know his father. Kyss Pappa. My young mother bends over the body of her father. The war is still going on. The wars are raging. Men and women are raging. My father sleeps in a hole on the beach as the rocket fire booms above him. *Our brave young men and women in uniform fighting for freedom*. A log house goes up in flames. A little girl is rescued from a burning house. *We cleaned up them graves real nice, didn’t we?* The towers are burning. Bad people burn up. No, they don’t. My father cuts down trees. His fist slams
into the low ceiling above his narrow bed. My grandfather cries out in his sleep and his small son shakes him awake. Lane saw it in me. He saw the violence, the violence my father wanted to walk off but couldn’t. The road isn’t long enough. A Japanese officer falls over in the long grass. Sarah jumps. Eggy falls. Sonia watches from the window. People are jumping, falling. They’re on fire. The buildings fall. Wo ist mein Schade Star? The dead are speaking and Mr. T is listening. We hear voices. I hear my father saying my mother’s name. He says Marit. He says it again. I see him as he leans over his coat in the narrow room in Oslo, methodically picking the pale fluff from the dark material. “If I could have one memory...” I stand and watch the snow, and it is all happening at once. It cannot last, I say, this feeling cannot last, but it doesn’t matter. It is here now. In the drawing, the little girl has wings. The coma is lightening. My sister is lying in the grass. Kiss me, kiss me, so I can wake up. And then I see Ms. W. at the end of our session. She is smiling at me and she uses the word again: reincarnation. “Not after death, but here when we’re alive.” She puts out her hand and I take it. She says, “I will miss you.” “I will miss you, too.”

BIBLIOGRAPHY


At the crossroads between theoretical reflections, autobiographical and fictional writings by the author, memories and dreams, not to mention essays by philosophers, psychoanalysts and neuroscientists, this extremely personal and creative paper aims at defining the specificity of trauma narratives – such an endeavor being conceived as essentially paradoxical. Notably, it delves into the representation and the conceptions of memory and time and their relations, as well as their inscription in the body.

Mêlant les réflexions théoriques aux écrits personnels, les souvenirs et les rêves ainsi que les conclusions de divers philosophes (Aristote, Augustin, Merleau-Ponty…), de psychanalystes (Freud, Davoine et Gaudillière) et les travaux les plus récents des neurosciences, cet article vise à dégager la spécificité des écrits fictionnels ou autobiographiques qui se donnent le trauma pour sujet, dès lors que pareille entreprise est d’essence paradoxale. Il s’attache à approfondir cette question autour de celle de la représentation et de la conception du temps, et autour de l’ancrage spécifique dans le corps.

INDEX

Mots-clés: Trauma, autobiographie, répétition, mémoire, Trouble de stress post-traumatique (TSPT), narration

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