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WITNESSING ACROSS TIME: ACCESSING THE PRESENT FROM THE PAST AND THE PAST FROM THE PRESENT

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[Note to appear at bottom of first page:] Earlier versions of this paper were presented in April 2010 at a meeting of Division 39 of the American Psychological Association, and in April 2011 at the Massachusetts Institute for Psychoanalysis.

TRAUMA AND WITNESSING

Over the last several decades, after a long history of virtually ignoring the role of “real” experience¹ in the development of personality, many psychoanalysts have become so familiar with the impact of trauma on memory that we take the basic facts for granted. We know that the past can be frozen in our minds, its affective aspects especially inaccessible, and that under such conditions this experience cannot serve as the inexhaustible resource we otherwise depend on it to be in the course of our day-to-day creation of meaning. In one way or another, the past is foreclosed for so many of those who suffer trauma. In some cases, the entire memory is inaccessible. More frequently, though, the memory is present but affectively drained, i.e., de-animated or denatured in such a way that it has meaning only as fact, not as living experience.

One of the psychoanalytic bodies of work that makes most sense of the effect of trauma on memory is Modell’s (1990, 2005, 2006, 2009, 2011). Modell was influenced by the work of neuroscientist Gerald Edelman (1987, 1990) on neural networks and cognitive processing, and that of cognitive linguist George Lakoff and of philosopher

¹ I use the word *real* to differentiate this experience from other experience that is more internally generated. But of course there is no single version of experience that can actually be described as the real one, which leads me to use quotation marks around the word “real.”

Mark Johnson (Lakoff and Johnson 1999, 2003) on the central role of metaphor in cognition. For Modell, the past participates in the creation of present experience by means of the creation of metaphor. That is, in the present we are reminded of something about the past. We have the sense that our experience of the present is in some way analogous to our experience of some aspect of the past. In this way, a memory becomes a metaphor for some aspect of the present. What Modell calls an *emotional category* is formed: things feel as if they belong together.

Let us say I am walking down the street with a close friend who, in the course of conversation, says something that reminds me of a certain turn of phrase commonly used by my beloved, deceased grandfather. I may or may not be explicitly aware of the correspondence, but it is there in my mind. If there is a feeling-connection between the two episodes---that is, if I am feeling warmly about my friend---some of the feeling of my relationship with my grandfather may begin to participate in the way the relationship and the afternoon feel, and the day is enriched. As a result, perhaps I see something new about my friend, some experience that had always been there in a potential way, but that I had not previously formulated. I might consciously think of my grandfather during these events. But then again I might not; I believe that such events often take place outside of our awareness, leaving us with only an affective resonance that nevertheless colors our conscious experience in highly significant ways.

In this way, a link between past and present comes about, and the past becomes an unconscious resource for the creation of present meaning. The past lends something to the present; and the present, by being linked to the past, keeps alive the continuous, unconscious growth and development of our histories.

Modell (2009) characterizes metaphor as “the currency of the emotional mind” (p. 6). Elsewhere (Modell 2011) he suggests that “metaphor and metonymy are the primary and crucial cognitive tools of unconscious thought” (p. 126), and he makes the proposal, quite welcome as far as I am concerned, that “we are more liable to find common ground with neighboring fields if we take the position that the unconscious mind [is] the area within which meaning is processed as metaphor” (p. 126). A similar sensibility runs through the work of Loewald (see especially Loewald 1960), for whom the concept of transference has several meanings, one of which is the transfer of the intensity and emotional power of the unconscious and the past to the preconscious and the present.

With Modell’s orientation to metaphor in mind, let me return for a moment to that walk with my friend. It is not necessarily only that my sense of my friend has been

enriched by my memory of my grandfather. The reciprocal may also be true: my memory of my grandfather may now be just a little different than it was before, enriched by this moment with my friend. Along with Modell and Loewald, I believe that, in such a case, it should not be considered that my experience of my friend is *distorting* my memory of my grandfather; rather, this present-day experience is helping me to sense some subtle aspect of my grandfather, unformulated for me until now, that as a result of my experience in the present may be more fully realized, via metaphorical experience linking past and present, in my growing sense of who my grandfather was.

That is, we can imagine metaphor enriching not just the present, but the past as well. In this way the life of the mind remains alive and in flux. But note that this process requires both the past and the present to be somewhat plastic.²

Trauma, on the other hand, as Modell (2006) writes, “freezes” the past and thereby deprives it of the plasticity it needs if it is to connect to the present. Memories of trauma are very often rigid, unmentalized, concrete. They are things-in-themselves or singularities---in Bion’s term, *beta-elements*. Because such memories can often be only what they have been, nothing more or less, they tend to be neither adaptable nor generative – qualities they would need to have if they are to be useful in creating new experience. In other words, often the past experience of trauma simply cannot be contextualized in the present.

In these instances, the past is, as Modell (1990) says, timeless in the sense that it exists beyond the *experience* of time---beyond *kairos*, the Greek term Modell uses for human cyclical, nonlinear time, the kind of time that can turn back on itself in ways that allow meanings to change and grow. This is the form of time, for instance, in which events that come later can change the meaning of what took place earlier, such as when the birth date of a famous person accrues meaning retrospectively because of accomplishments carried out many years after the day that this person entered the world.

Kairos contrasts with *chronos*, or time understood scientifically or objectively. This kind of time lies outside the realm of human experience; it cannot turn back on

² Although Freud described a different kind of plasticity of present and past than I am presenting here, in his work on screen memories, he was a pioneer in writing about the reciprocal effects of past and present on one another. He first suggested that early memories were sometimes used as screens for later events (Freud 1899). Soon thereafter he presented the idea referred to more commonly ever since---that later events are used as screens for earlier memories (Freud 1901).

itself and does not allow the future to affect the past. Rather, it leads inexorably from birth to death; it is linear, irrevocable, and without human meaning.³

In the passage that follows, Frank Kermode (1967) specifically addresses the way that fictional devices convert *chronos* to *kairos*. We can broaden Kermode's frame of reference about this temporal conversion without violating his meaning, I believe. We can say, that is, that not only the techniques of fiction, but *all* human meaning-making activities

. . . have to defeat the tendency of the interval between *tick* and *tock* to empty itself; to maintain within that interval following *tick* a lively expectation of *tock*, and a sense that however remote *tock* may be, all that happens happens as if *tock* were certainly following. All such plotting presupposes and requires that an end will bestow upon the whole duration and meaning. To put it another way, the interval must be purged of simple chronicity, of the emptiness of *tock-tick*, humanly uninteresting successiveness. It is required to be a significant season, *kairos* poised between beginning and end That which was conceived of as simply successive becomes charged with past and future: what was *chronos* becomes *kairos*. [p. 46].

Unless meaning is embedded in *kairos*---that is, unless experience can move freely between the past, present, and future---new meaning cannot come into being. New meaning just cannot root in the inexorable *tick-tock* of *chronos*---objective time, "humanly uninteresting successiveness." We need *kairos* if new meanings are to grow. We need *kairos* if life is to feel vital. In *kairos*, we circle back on our histories in ways that are routinely nonlinear and cyclical, and sometimes also capacious, endless, and oceanic. It is precisely this embeddedness in the fertile ground of *kairos* that trauma steals from us.

In Modell's understanding of Freud, if the past is to live in the present, it must be linked with contemporary perception; that is, memory must be connected to life outside the mind, to the external world, to today.⁴ To use the word Modell most often chooses

³ Along with Modell, D. N. Stern (2004) has brought the concepts of *kairos* and *chronos* into the psychoanalytic literature on the processes of experiencing.

⁴ This is a perspective that, under the rubric of dissociation and enactment, Bromberg (1998, 2006, 2011) and I (D. B. Stern 2003, 2004, 2010) have also considered. I will

for this function, if memory is to be a living presence, it must be continuously *retranscribed*. In using this word, Modell is invoking Freud's *Nachträglichkeit* (see, e.g., Bonaparte 1950; Freud 1895, 1900, 1909, 1918) – a theory of temporality more implicit in Freud's work than clearly spelled out in any one place, and limited in its application to certain special circumstances.⁵ In views of *Nachträglichkeit* that have developed more recently, our grasp and use of the past changes, retrospectively, as we encounter new experiences in the present that give the past meanings it did not have before. Faimberg (2005a, 2005b, 2007), for instance, proposes a broadening of the concept in a way that explains the retroactive assignment of new meanings of many kinds, usually via interpretation. *Nachträglichkeit*, or the retranscription of memory, in other words, by reaching back into the past and potentiating previously unimagined aspects of old meanings, is an important part of what allows the past to contribute to a new experience of the present.

Retranscription of memory, though, as I have already implied, is precisely what frequently does not and cannot happen to the memory of trauma. In traumatic memory, the reach of old experience across time (*kairos*) to new circumstances cannot take place, and so the creation and use of emotional categories, and the metaphors that arise as a result of that stimulation of meaning, are prevented. For this reason, trauma often cannot be cognized, fully known, or fully felt. Trauma, even if we remember it, is

describe some of my own work on witnessing in what follows, but it would take me too far afield here to outline the close connection between the ideas all three of us have proposed about the significance of perception, as opposed to verbal insight, in therapeutic action. I will continue to develop what I have to say about perception in these remarks on the basis of Modell's thinking. In considering the contribution of the past to the present, especially the affective contribution of the past to present experiencing, I am also reminded once again of Loewald's (1960, 1978) seminal work on the subject.

⁵ The concept of *Nachträglichkeit* was given a new explicitness and brought to significance by Lacan (1953), who assigned it a fairly limited meaning. Laplanche and Pontalis (Laplanche 1970, 1998; Laplanche and Pontalis 1967, 1968) are primarily responsible for giving the concept greater prominence and a broader frame of reference. Those who have written about *Nachträglichkeit*, incidentally, while they do not necessarily use the words *kairos* and *chronos*, often do employ the conceptions of time that correspond to these two words. Birksted-Breen (2003), for instance, argues that *developmental* or *progressive* time (the linear time of most developmental theories) and *reverberation* or *retrospective* time (the time of retranscription) inherently go together and, in fact, are requisites for one another. Dahl (2010) finds in Freud a similar distinction between *two time vectors* in *Nachträglichkeit*. One of these is "a causal process operating in the forward direction of time against the background of a factual reality," while the second is "a backward movement that permits an understanding of unconscious scenes and fantasies taking place at a primary-process level" (p. 727).

“humanly uninteresting successiveness” (Kermode 1967, p. 46). We cannot *think* with it.

Reis (1995) agrees, citing Modell (among others) and arguing that time, and particularly the concept of *Nachträglichkeit*, is essential to the understanding of traumatic memory disruption; he writes that “it is the disruption of the experience of time that goes to the heart of the dissociative disturbances of subjectivity” (p. 219).

Returning to my example of my friend and my memory of my grandfather: no matter how lovely the day was with my friend was, those hours walking down the street, those hours would not have developed some of the emotional nuance, the glow that they had, if they had not connected (beyond awareness) with my representation of my grandfather; and my image of my grandfather would have remained as it was before, important to me but not further elaborated, if I had not been able to retranscribe it within this present moment with my friend.

Building on Modell’s work, I have argued elsewhere (D. B. Stern 2009a) that it is clinically profitable for us to look at the process of metaphor formation through the lens of what I have called *witnessing*. This is not a new idea. In the psychoanalytic literature, Laub (1991, 1992a, 1992b, 2005; Laub and Auerhahn 1989), Richman (2006), Ullman (2006), Reis (2009), and Gerson (2009), to cite only a few, have drawn our attention to the role of witnessing in creating the possibility for affectively charged memories of trauma. Some of these writers have gone further, arguing that witnessing is a routine component of therapeutic action, especially in cases of trauma. Poland (2000) has taken yet another step, bringing the concept of witnessing into our general understanding of psychoanalytic treatment.

Most of those who have discussed witnessing in the psychoanalytic literature, including Poland, have meant the term to apply to an interaction between two real people---in Poland’s case, the patient and the analyst. While accepting that an important part of the activity of witnessing goes on between patient and analyst, I (D. B. Stern 2009a, 2009b, 2010), along with others (e.g., Laub 1991), have expanded the application of the term into the inner life. I have argued that we need a witness if we are to grasp, know, and feel what we have experienced, especially trauma; and I have argued that this witness may be internal and, in that sense, imaginary. Someone else, even if that someone is another part of ourselves, must know what we have gone through, must be able to feel it *with* us. We must be *recognized by an other* (Benjamin 1988, 1995, 1998), even if that other is now part of us. We need what I have called a *partner in thought* (D. B. Stern 2009b, 2010).

I accept Modell's contention that the use of memory in the creation of metaphor is a continuous although largely unnoticed process in experiencing. My suggestion has been that this continuous creation of metaphor requires an equally continuous process of witnessing. I emphasized in previous work that the internal witness grows from what was originally an internalization of presences that, much earlier in life, existed only outside us. I refer readers to my earlier writing for a description of the development of the imaginary witnessing presence as an internalization of early relationships with "real," external others. In my frame of reference, witnessing, like the use of memory in the creation of metaphor, is a feature of ongoing experiencing.

In the terms of a recent contribution by Poland (2011), we could say that self-analysis, on which Poland argues clinical psychoanalysis rests, is an internal conversation between parts of oneself. Parts of oneself, as Poland also seems to accept, often begin as representations of others – or, as it often seems to me, as representations of our *involvements* with others: "others can be felt as both deeply internal and clearly external" (p. 989). Internal conversation, then, or self-analysis, because it requires the recognition of one part of oneself by another, can be understood to presuppose the process of internal or imaginary witnessing, or even to be equivalent to it.

It is via witnessing that we come to know experience as our own. As we listen to ourselves (in imagination) through the ears of the other, and see ourselves (in imagination) through the eyes of the other, we hear and see ourselves in a way we simply cannot manage in isolation. I have suggested (D. B. Stern 2009b) that this is one of the primary uses of clinical psychoanalysis: psychoanalysts listen to patients in the way that allows patients to listen to themselves. In such listening, links between past and present are forged, and metaphor comes into being. Modell tells us that metaphor allows the creation of new meanings in the interaction of past with present; and, in turn, I propose that witnessing allows the creation of metaphor.

One last point of emphasis before I move on to illustrations. Perhaps I repeat myself, but the point is important enough to be worth the risk: witnessing is a relational process; it goes on in an interpersonal field, between two subjectivities. But these subjectivities, although their origins lie in relationships with the earliest caretakers, may not always be separate human beings, especially later in life. Witnesses are not necessarily real people; they can be imaginary. In fact, they are more often imaginary than "real." One part of us witnesses another part (D. B. Stern 2009b).

We can make the point in the language of contemporary theory of the multiple self: from within one self-state, we witness the experience created within another (e.g.,

Bromberg 1998, 2006, 2011; Davies 1996, 1998, 1999, 2001, 2004, 2005; Howell 2006; Pizer 1996, 1998; D. B. Stern 2010). Laub (1991), in relation to the role of witnessing in memories of the Holocaust, has said that one level of what he calls the three levels of witnessing is that of “being a witness to oneself in the experience” (p. 75). I will return to Laub’s work later on.

Some theoretical possibilities can immediately be seen here: dissociation, being the sequestering of self-states from one another, prevents imaginary witnessing within the personality---what Laub calls “being a witness to oneself.” The dissociation of two states of being from one another, that is---which simply means that these two states cannot be experienced simultaneously---makes it impossible for either state to serve as a witness for the other. The absence of such internal witnessing then prevents the creation of metaphor, because the elements that must combine to make the metaphor---memory and the experience of the present---cannot coexist. We are left with a new avenue of approach to the common observation, with which I began, that dissociation prevents the creative use of traumatic experience (D. B. Stern 2009b).

At the beginning of this paper, I also pointed out that psychoanalysts have become familiar with the effects of trauma on memory. But we are used to thinking of those effects as working from the past to the present, as if it were always the case that trauma is in the past. But what if the trauma takes place in the present? Are there instances in which the disruption of memory occurs in the other direction---from the present to the past?

I will offer several illustrations of that kind, examples in which the memory or the affective resonance of the more distant past is inhibited, dampened, or damaged in some other way by traumatic events in the present or recent past. The first of these illustrations is fictional, another is from the work of a colleague, and a third comes from my own clinical experience with a Vietnam veteran thirty-five years ago. After recounting these stories, I return to the question of memory and witnessing, with a new point to make about the relation between them.

ILLUSTRATIONS

Michael

Michael and Dukie were two teenage African American characters on *The Wire*, a five-year long dramatic series that, as far as I am concerned, is hands-down the best

programming ever made for American television. The series revolves around the illegal drug trade in Baltimore, and it shows that, for African American kids in the poorest sections, the drug trade is really the only way available to make any kind of success of yourself. By the time the series ends, Michael and Dukie are perhaps seventeen years old, have both grown up in the housing projects, and have been friends for much of their lives.

Dukie is a sweet, bright, depressed, and hapless boy whose family is so lost to drugs that they sell absolutely anything they can get their hands on, including Dukie's clothes. In fact, Dukie is pretty much limited to the one set of clothing he has on at any particular time; and so at least part of the reason that Dukie is shunned and bullied is that he smells bad. We know from a previous episode in the series, years earlier, that Michael once saved Dukie from a humiliating beating by a gang of younger kids in the street, and then bought Dukie an ice cream. That day it became unmistakable to Michael that Dukie needed to be taken care of, and Michael more or less took on the job. Dukie came to live with Michael and became responsible for the care and the homework of Michael's beloved little brother, seven- or eight-year-old Bug. That is Dukie's job. There are no parents left in Michael's house; the father has been murdered over his pedophilia and the mother has been lost to drugs.

In the meantime, Michael, who was recognized at a young age by some of the neighborhood thugs as the most competent and intelligent of the kids in his age group, is recruited at the age of about fifteen to be trained as an enforcer and assassin for the 20-something young man who runs the local drug trade. Michael's education in killing is carried out by the two people who are the current assassins, one a man in his twenties and the other a teenage girl. These two turn out to like Michael and they befriend him. Michael is an apt pupil who progresses in his studies. In a matter of months he begins to carry out executions.

Eventually, when Michael is sixteen or seventeen, he is mistakenly blamed for being a snitch and is himself targeted for execution; but he figures out that he has been accused, and he kills the assassin sent to murder him, who it turns out was the teenage girl who was one of those who had taught him the business of execution. It is now too dangerous for Dukie and Bug to have anything to do with Michael, and so Michael moves Bug to the house of an aunt, who has agreed to take him.

We arrive now at one of the final episodes of the series. Michael and Dukie are sitting in a car on a darkened Baltimore street just after having dropped Bug off at the aunt's house. The mood is dark and sad. It is clear that life will never again be what it

was when the three boys lived together. We know without having to be told that Michael will be hunted by the drug lord until he is killed; and we suspect – correctly, it turns out – that the fact that Dukie is about to be dropped off in front of a place where a man is shooting up heroin in plain sight means that, without the family of Michael and Bug, and having nowhere to go, Dukie will follow the rest of his relatives into addiction and despair.

Dukie is trying to figure out how to say good-bye to Michael. Suddenly he seems to think of something, he smiles broadly, and he animatedly reminds Michael of that day several years earlier when Michael saved him in the street and bought him an ice cream. That life is gone, and the audience knows it as well as the characters do. But Dukie is happy at the memory. He is really happy. He asks Michael excitedly, “Do you remember that?”

Michael puts his hands on the top of the steering wheel, and bends over it, closing his eyes. “No,” he says very softly. “I don’t.” It is a shocking moment, and it stays with me as if it actually happened.

Menachem

I think, too, of another story, a true one: Laub’s (1991, 1992b) recounting of the early years of “Menachem S.,” a five-year-old boy who lived with his parents in the Krakow ghetto at the time of the Holocaust. A rumor went around the ghetto that the children were to be rounded up and exterminated. The parents of the little boy talked in the evenings about how they might smuggle out their son, and of the fate that awaited him if they could not. He was supposed to be asleep as they talked, but he heard.

One night, somehow, the guards were distracted and Menachem was sent out the gates of the ghetto by himself into the streets, with nothing more than a shawl his mother managed to wrap around him at the last minute, an address written on a scrap of paper, and a passport picture of her as a student, which she told him to look at whenever he felt the need to do so. She and the boy’s father promised Menachem that they would find him when the war ended.

The address turned out to be what Laub describes as a whorehouse, and Menachem was welcomed there. He thought of it as a hospital. Soon, though, it became too dangerous for him to stay, and he spent the remainder of the war on the

streets, often with gangs of other homeless children. Off and on, but always temporarily, he lived in the homes of sympathetic families who found him on the street. In one of these homes the mother, who Laub suspects knew that Menachem was Jewish, told Menachem that he could pray to whomever he wanted; and Menachem chose to pray to the picture of his mother, saying, "Mother, let this war be over and come and take me back as you promised." Laub tells us, "Mother indeed had promised to come and take him back after the war, and not for a moment did he doubt that promise" (1991, p. 86). "In my interpretation," Laub continues,

. . . what this young vagabond was doing with the photograph of his mother was, precisely, creating his first witness, and the creation of that witness was what enabled him to survive his years on the streets of Krakow. This story exemplifies the process whereby survival takes place through the creative act of establishing and maintaining an internal witness who substitutes for the lack of witnessing in real life. [p. 86]

It is miraculous that Menachem survived, and nearly beyond imagination that his parents actually did find him after the war. Somehow, though, this is what happened. But Menachem had lived through the war by talking and praying to his photograph of his mother as a healthy young woman. When eventually she and his father, who also survived, did locate him, they had been sent to concentration camps; they were sick, emaciated, and haggard, his mother's teeth loose in her gums. No doubt her spirit was at least as badly wounded as her body.

Laub (1992b) tells us that the mother who found Menachem "was not identical to herself" (p. 91). One wishes, of course, that Menachem was now delivered from terror; but the arrival of his parents was instead the event that finally pushed him over the edge, and he fell apart. Laub writes, "I read this story to mean that in regaining his real mother, he inevitably loses the internal witness he had found in her image" (p. 88).

Michael's story and Menachem's story are united by more than their pathos. Notice that in both of them, something from the past that has been accessible becomes *inaccessible*, seemingly as a result of the intervention of trauma. How can we understand this phenomenon? What does it have in common with the way we are used to looking at traumatic experience?

Take Menachem first, because his case is in some ways simpler. Once he was deprived of his illusion, the veil fell from his eyes and the recent past fell into place, appearing suddenly in all its brutality. He no longer had effective, or *affective*, access to what we imagine was the sweetness and gentleness of his early years with his mother.

Now consider Michael. His life has become horrendous. We are not meant to believe that he was especially well suited for his job as assassin, except for the fact that he was unusually emotionally capable and intelligent in a general sort of way. We are certainly not meant to believe that Michael is bad. He is no psychopath. He is portrayed, actually, as sweet and generous, which makes his transformation all the more heartbreaking. His metamorphosis into a killer costs him dearly, despite the fact that by accepting it he has found his way to earning a living and, more significantly, to prestige. We are free to condemn him, and we do; but we are also touched by the plight of this sweet child-man, as we are touched by the vicious child soldiers of Sierra Leone and Burma, and by returning veterans of combat anywhere, many of whom have killed their equally young enemies.

Darryl

My next story is about one of those young soldiers. I once saw in psychotherapy an African-American man whom I will call Darryl.⁶ He had been a high school football star, a running back, who came back from Vietnam with paranoid schizophrenia and a left leg amputated above the knee. He must have been a powerful runner because, even when I knew him---two years after his return from combat---his thighs were of prodigious size. He was twenty-one or twenty-two years old, poorly educated, not very bright, and had always lived in the ghetto. His prospects were not good. Medication helped him with his hallucinations and delusions, but he was nevertheless often terrorized by his demons, with whom he was in fairly continuous and literal communication.

Darryl was in treatment with me thirty-five years ago at an inner-city Veterans Administration hospital, usually twice a week, sometimes three times a week. (It was more possible then than now to see people frequently; we did it whenever we could and it generally helped.) I do not know what happened to Darryl after I left that hospital. I wish I did. His family told me that he had been mild-mannered in high

⁶ For purposes of confidentiality, some of this patient's clinical picture and history have been altered in this report.

school, which did not surprise me, because he was actually quite connected and sweet with me, even while he was crazed and terror-stricken.

Darryl told me that when he got to Vietnam he took very well to killing---perhaps (I thought) because of the paranoia of his incipient psychosis. He liked sniping from a perch in a tree, and he reported being very good at it. It was strange: I knew these things, and Darryl and I could not have been a lot more different from each other than we were, but we became very fond of one another. We did not talk about that, but we both knew it.

In Vietnam, Darryl became frightened of the military compound and refused to live there with the other soldiers, insisting instead on billeting in a hut in the South Vietnamese village outside the gates of the compound. For some reason, the people of the village accepted him, even though he had by then had a psychotic break. He had a girlfriend in the village and he slept in her hut. He foraged for extra food for the villagers, both inside the compound and in the forest, where he hunted; maybe that was part of the reason they accepted him. Perhaps they also thought Darryl would protect them from the North Vietnamese guerillas who were always somewhere in the vicinity. If that's what they thought, they were probably right, although the necessity never arose.

In any case, Darryl told me that whenever his unit was ordered to go out on patrol he got wind of the plan and would show up at the gates of the compound as the unit was moving out. He always wanted to be point man, the guy in the front of the unit who looked out for the enemy and therefore took the greatest risk. I knew from other ex-soldiers I had seen, who had explained the danger to me, that the members of Darryl's platoon were no doubt only too happy to oblige him.

One day, on point, he got shot and lost his leg, and he was shipped home, feeling that his life was over. He had hoped to be a professional football player. When I met him, he was so afraid of the army and its institutional representative, the V. A. Hospital, that he couldn't get himself to drive there for his appointments with me (yes, he drove), although he wanted to attend his sessions.

For some reason, Darryl's feelings about the army did not infect his relationship with me. So we had an agreement. He would drive as close to the hospital as he could get, and if he could not make it, he would stop the car at the time of his session and call me from a pay phone on the street. Many of our sessions took place on the phone.

It seemed that Darryl's biggest current difficulty was probably the problem he was for others. He kept a number of guns, mostly rifles, which his wife told me he was in the habit of discharging through the ceiling of the family apartment whenever he was frustrated, which was frequently. He lived in a small and crowded apartment in public housing, with his wife and their several little children, whom he had fathered in quick succession when he returned from Vietnam; and so the idea of Darryl discharging his weapons terrified me even more than it might have otherwise. So far he had not hurt anyone, although as far as I could see it was only luck that he had not shot someone in the upstairs apartment.

I explained to Darryl, with my heart in my mouth, that I did not want to call the police but I would have to do so if he kept shooting. It was not so much that I was afraid of Darryl's rage, as I thought he would keep it in check with me. I was actually quite worried, though, that I would damage our relationship. But I did not. Darryl agreed to stop shooting, and his wife corroborated that he had. I counted it as a major success that by the end of my year of working in that hospital, he had taken his guns to the police department and surrendered them.

I have described Darryl because his time in Vietnam seemed to have obliterated his emotional access to certain aspects of his childhood. He remembered the factual content of many events of his early life. But he came from a warm, related family, and he just could not seem to feel that warmth any more. He knew it well enough to explain it to me in a way that convinced me it was true, and his family provided independent confirmation by their very presence; but he did not feel it. He was distant from this loving atmosphere in a way that drained it of reality for him. The years prior to Vietnam did not feel to him as if they belonged to the same life he was leading at the time I knew him. What felt most real to him was life in the Vietnamese village, and the sniping, and being on point.

I note in passing that, despite the fact that Darryl's explicit emotional memory of his early life was blunted, it was preserved and reflected in the connectedness of his relationship with me. Space does not permit me to address the strangeness of this connectedness in such a clinical picture, except to note that this was not the only time I have experienced it.

DISCUSSION

I began this paper by reviewing what we all know: when the past was traumatic, it sometimes cannot be accessed from the present, especially its affective aspects. On the basis of the stories of Michael, Menachem, and Darryl, I add to that point this proposal: when the *present or the recent past* is traumatic and the more distant past had significant nurturing and loving qualities, those good parts of the distant past may no longer be emotionally accessible from the present.

I am suggesting that trauma may make it difficult to access the goodness of the past for either of two reasons: because the past *was* traumatic *then*, or because the present *is* traumatic *now* (or recently). The retranscription of memory, in other words, needs to be able to proceed in both directions, not only from the past to the present. There must be a point of attachment to the past from the present *and* to the present from the past. *Kairos* must be free to fold back on itself toward either end of its axis.

Boulanger (2007) recognized the dissociation of the past from the present as a central part of adult-onset trauma. When people are “wounded by reality,” as she puts it in the title of her book, they often express the impact of the trauma by saying that they feel they have died. This metaphor conveys as powerfully as any metaphor could the disjunction of the two lives before and after the trauma. (See also the powerful testimony provided by Leed [1979] of World War I soldiers, who say exactly the same thing.) Like Michael, Menachem, and Darryl, the old lives of some of those who have suffered adult-onset trauma are gone, leaving them without the same kind of memories they had before---leaving them without a past that feels real.⁷

Retrospective Derealization

⁷ Of course, trauma does not always result in reduced vitality and decreased capacity to witness one’s own experience across time. The capacity in the aftermath of trauma to maintain one’s vitality and meaning-making ability is part of what is described as *coping*, *resilience*, or *self-righting* (see, e.g., Cyrulnik 2005; DiAmbrosio 2006; Parens, Blum, and Akhtar 2009; Schneider 2003). More than a decade ago, the *Psychoanalytic Review* published a collection of articles that directly address the resilience of persons who, like Menachem, survived the Holocaust and other violent ethnic/religious trauma (Berk 1998; Fogelman 1998; Hogman 1998; Kalayjian and Shahinian 1998; Nagata and Takeshita 1998; Rousseau et al. 1998; Sigal 1998). Valent’s (1998) contribution to this collection is specifically concerned with the resilience of certain child survivors of the Holocaust. While Ornstein (e.g., 1985, 1994) does not necessarily use the word *resilience*, she has contributed work on the response to trauma, especially the Holocaust, that is forged in the same spirit.

If two parts of ourselves separated in time are to know one another, one part in the past and one in the present, each part must feel like *me*. That is, in the terms I introduced earlier, if metaphor is to come about, each of these parts must be capable of serving as witness to the other. There are two prerequisites for this kind of internal or imaginary witnessing: (1) past and present self-states must both be capable of full-bodied, consciously felt affective experience; and (2) this affective experience in each part must be tolerable as a consciously felt and known experience by the other part.

The contribution of memory to the present, and the contribution of the present to reorganization of the past, requires a bridge of affect across time, a kind of call and response from both directions: we must be able to contextualize, feel, sense, and know the past from within the present, and we must simultaneously be able to create that same kind of grasp of the present from within our experience of the past.

We are familiar with the contention that the parts of ourselves that are dissociated for unconscious defensive reasons---that is, *not me* (Bromberg 1998, 2006, 2011; D. B. Stern 2003, 2004, 2009b, 2010; Sullivan 1954)--are associated with traumatic events in the past, and especially with disequilibrating patterns of relatedness. When the past is traumatic, being forced to experience it or to allow it to shape the present can disregulate us, disequilibrate our sense of ourselves, rob us of our continuity of being and the feeling, which we need to maintain at all times, that we are familiar to ourselves, that we know who we are (Bromberg 1998, 2006, 2011).

After trauma, we can say, our capacity to create experience is at least partially *derealized*, by which I do not mean that it is drained of reality so much as that it is drained of vitality. Derealization is much more frequently a question of actualization, in other words, than of reality testing. Very simply, post-traumatic experience---especially experience directly related to the trauma, but spreading out from those associative links as well---is likely to be less fully realized than it would have been if the trauma had not occurred.

We know these effects of trauma that has taken place in the past. But perhaps we need to broaden our view. Perhaps the distant past can be unbearable, and thus unknowable or un-feel-able, for the same kinds of reasons that trauma of the past prevents the realization of the future. Perhaps, as Boulanger (2007) tells us, when the present or recent past is dark and full of pain and terror, it hurts too much to know the goodness of the more distant past; or it becomes impossible to believe in that goodness; or the sense of that goodness actually dies.

Gerson (2009) offers the profound speculation that such a thing happened in the case of Primo Levi, the writer who survived his internment in a Nazi concentration camp and then, after the war, provided some of the most harrowing testimony to what happened there. I, for one, feel more able than I was before to understand and accept Levi's suicide, so many years after the war, through Gerson's eyes.

If such a thing happens, if the long-ago past loses its vitality and goodness because of events that took place more recently, we lose the capacity to hear the past through our ears in the present, and we lose our capacity to hear the present through the ears of a *me* in the past. Perhaps the past, that is, when it is too emotionally discrepant from the life we lead now, can feel as if it simply no longer belongs to the world within which we live.

If we adopt the term *prospective derealization* to refer to the conventional understanding of trauma---that is, the derealizing effect of trauma in the past on experience in the present---then we might refer to the effect on our experience of the *past* of more recent trauma as *retrospective derealization*. Perhaps the worlds of *now* and *then* can shatter in such a way that, like Humpty Dumpty, they cannot be put together again. Perhaps, as Gerson (2009) suggests, Freud overestimated the possibilities of mourning, and instead, as Gerson quotes a character from a novel, "The truth . . . is that nobody ever gets over anything" (Amis 2006, p. 236). Perhaps from either direction, the past and the present can be, to use Leed's (1979) precisely descriptive word, *incommensurable*.⁸

Are there people for whom a past of goodness is irretrievably lost, as the metaphor of Humpty Dumpty would suggest? I certainly would not want to claim to know that the possibility of goodness can always be retrieved. I know what all of us know about the extremity of pain and trauma that it is possible to suffer in this world; but I have been spared the despair suffered by many others less fortunate than I. And so it is probably realistic for me to say only that I nurture the hope that love and goodness are seldom, or perhaps never, completely irretrievable, even when life is as bleak and brutish as it was for those I have written about. Experiences like the one I had with Darryl, the Vietnam veteran, despite the bleakness of his life, seem to me a justification of that hope. The story of Menachem, which I will continue in what follows, is another example.

⁸ Once again, Freud was the first to discuss reciprocal modifications in experience across time---modification of the present by the past and the past by the present---in both his description of *Nachträglichkeit* and in his concept of screen memories (see footnote 2).

The Dead Third

Before I turn back to Menachem, let me say a bit more about Gerson's (2009) work on the *dead third*. Gerson's perspective is one that, while having basic therapeutic implications for victims of trauma, does not necessarily depend on hope at all, but on the acceptance of its absence. Or perhaps Gerson would prefer to say that the acceptance that hope has vanished is, at least to begin with, the closest thing to hope that we can offer certain victims of severe trauma, such as genocide. Gerson describes the results of genocide as *the presence of absence*, by which he means that all that can be felt or known is the "not-there-ness" of what had been present. There is no presence. The third – the witness that, had it survived, might have made it possible to remember what was real and to feel what has been lost – is itself dead.

Gerson cites the absence of a culturally located witnessing presence for the victims of the Holocaust. We remain shocked by, among many other things, the absence during the Nazi years in Europe (and in most of the rest of the world, too, for that matter) of a broad social recognition of the horrors of the Third Reich, a recognition that would have made it possible for the atrocities of the Reich to have been witnessed--for the victims to have felt that someone knew and cared. The victims of the Holocaust, if the third had survived inside the Reich, could at least have imagined their treatment through the lens of what should have been a culturally sanctioned condemnation and horror.

But there was so little of this attitude that, for Gerson, the third actually died, and all that could be experienced as real was its absence. Gerson is convincing and moving in his understanding that, for victims of genocide, having a witness to this presence of absence---a witness to the very absence left by the death of the third---can be the only form of human interchange that remains restorative.

CLINICAL IMPLICATIONS

I am not going to address exactly how we embed whatever hope we have for the retrieval of some aspect of goodness in our clinical technique or theories of therapeutic action. I have addressed questions of technique and therapeutic action elsewhere (D. B. Stern 1997, 2010), with many clinical illustrations, and each time I have addressed these matters, my answer has depended not on any particular conception of what to do with

our patients, not on a prescription for conduct, but on a way of understanding the unformulated aspects of clinical process and an attitude about how to work with them.

Just as in therapeutic work with trauma that took place in childhood, or at least long ago, working with retrospective derealization---trauma in the present that robs us of the goodness of the past---requires that we conceptualize how the special qualities of analytic relatedness somehow make possible a new, affectively vital interpenetration of past and present. We must especially understand how analytic relatedness makes it possible for dissociated experience, which is unformulated, to be articulated (or transformed into *alpha elements*, in the Bionian frame of reference) in a way that makes it possible to *think* it. The outcome of this kind of clinical work is a renewed, revitalized, or even newly created capacity for the patient and therapist to witness one another---and, for that matter, to witness themselves.

Menachem Across Time

It turns out that Menachem, the little boy who fell apart when he finally saw his mother after the war, grew up to be a high-ranking officer in the Israeli military. The reason Laub (1991) knew Menachem and the story of his childhood in Krakow was that, as an adult, Menachem spent a sabbatical year at Yale University, during which he contributed his memories to the "Video Archive for Holocaust Testimonies," located at Yale and co-directed by Laub. Laub's seminal work on the significance of witnessing, and about the "restoration" that can occur when one is witnessed, grew from his experience of directing the archive, an experience from which he concluded that the Holocaust destroyed the very possibility of witnessing:

The very imagination of the *Other* was no longer possible. There was no longer an other to whom one could say "Thou" in the hope of being heard, of being recognized as a subject, of being answered When one cannot turn to a "you," one cannot say "thou" even to oneself. The Holocaust created in this way a world in which one *could not bear witness to oneself*. [Laub 1991, p. 80, italics in original]⁹

⁹ Here we see Laub's work link with Gerson's (2009) understanding of the presence of absence, a commonality also noted by Gerson.

Menachem had grown up believing he was invulnerable. In battle, he walked through hails of bullets believing that he could not be hit by them, and he rescued other soldiers under circumstances that seemed to those around him to spell virtually certain death. He lived through it all, though, without even being injured, and he considered himself not at all brave, merely un-killable. Laub (1991) sees this as the “denial of the child victim in himself” (p. 87). I would say that any sense of helplessness or vulnerability was *not me* for Menachem – the kind of unbearable or intolerable experience that would make him unrecognizable to himself, and that was therefore dissociated.

Laub’s invitation to Menachem to contribute his testimony to the archive at Yale provoked a crisis because Menachem had never told the story of his childhood to anyone other than his wife. One evening, she tried to convince him to tell the story, thinking it might help with his anxiety and his lifelong nightmares of being on a conveyor belt moving toward rolling presses that would inexorably crush him. In this repetitive dream, Menachem was helpless and terrorized, knowing he would die horribly.

That night, after talking with his wife and deciding that it might indeed be a good thing to offer his testimony, Menachem had the nightmare once again. But this time it was different, as he described to Laub in his own words:

For the first time in my life, I stopped the conveyor belt. I woke up, still feeling anxious, but the anxiety was turning into a wonderful sense of fulfillment and satisfaction. I got up; for the first time I wasn’t disoriented. I knew where I was; I knew what happened I feel strongly that it has to do with the fact that I decided to open up. [Laub 1991, p. 88]

Laub comments that “it is this very commitment to truth, in a dialogic context and with an authentic listener, which . . . makes the resumption of life . . . at all possible” (p. 89). He ends this powerful article with these words:

It is the realization that the lost ones are not coming back; the realization that what life is all about is precisely living with an unfulfilled hope; only this time

with the sense that you are not alone any longer---that someone can be there as your companion---knowing you, living with you through the unfulfilled hope, someone saying, "I'll be with you in the very process of your losing me. I am your witness." [p. 89]

This is witnessing in the literal sense: one person tells his story to another. Literal witnessing goes on in psychoanalysis and psychotherapy, of course; in fact, as I noted, one of the points I have made in writing about the ubiquity of witnessing in clinical work is that analysts listen to patients in a way that allows patients to listen to themselves (D. B. Stern 2009b). But much of the witnessing I have referred to here in this essay, and much of the witnessing that goes on in clinical work, is more accurately described as *implicit*--what I have called imaginary or internal witnessing. This is certainly the case in witnessing from one self-state to another across time.

LAST THOUGHTS

Like most psychoanalysts and psychoanalytic psychotherapists, I could tell many stories that substantiate, within the broader frame of reference of psychoanalytic treatment, the conclusions Laub offers regarding the restorative effects of Holocaust witnessing; and these restorative psychotherapeutic effects, in my experience, are the outcome of both literal and implicit witnessing. I will content myself here, however, with allowing Laub's work to speak for me on this subject, for the most part.

I will offer just one concluding thought about the nature of psychotherapeutic help of this kind. In fact, this thought is a claim I have already made: *witnessing in psychotherapy and psychoanalysis allows past and present to link through metaphor, via affect categories*, as Modell (1990, 2006) has described. In this way, dissociation is breached, trauma thaws and can finally be dreamed and thought, and traumatic experience returns to *kairos*, liberating the interchange of meaning across time.

I have one last thing to say about Menachem. We know that his early, apparently secure childhood succumbed to the retrospective derealization that took place when he fell apart after the war, at the time that he was first reunited with his mother. But by the time he grew up and met Laub, something more and different had happened. Because he was now an adult looking backward in time, his experience in the streets of Krakow had become a trauma of the more conventional sort---that is, a

trauma from the distant past. Inevitably, trauma of the present becomes trauma of the past, so that the effects of the trauma reach from the time of the traumatic experience not only into the past, as in the retrospective derealization suffered by Michael, Menachem, and Darryl, but also into the future and the succession of present moments that the future becomes as it arrives in the here and now.

I believe that Menachem's healing had to do not only with the witnessing of his past trauma from a self-state in the present; I believe his healing also involved the reawakening of his capacity to witness his long-ago, traumatic *present*---the present in which he fell apart just after the war---from within the warm and protected self-state of his secure childhood with his mother. I believe we can learn something about the healing of the retrospective derealization that took place in Menachem's childhood, in other words, from the restoration provided by Menachem's willingness to allow himself a witness all those years later.

In other words, Menachem's healing was due not only to the thawing of his frozen past, as we are used to conceptualizing trauma of long ago. That factor is there, true enough. We can see that it is, since from Menachem's perspective in the present, his decision to allow himself a witness did indeed thaw the past. But Menachem's healing was also due, I think, to the way in which his decision to tell his story allowed the little boy who *was* Menachem in the streets of Krakow---and who, in some part of his being, remained a little boy even at the time of his Holocaust testimony so many years later---to restore some of the goodness and safety that was offered to him by that photograph of his beloved, protective mother.

Menachem's decision as an adult to tell his story freed him to bring to bear some of that early childhood goodness on *the very time from which it disappeared*---that time in the warehouse and on the streets of Krakow which was a present moment long ago. The goodness of Menachem's image of his mother could not vanquish the evil---not then and not now---but Menachem's new willingness to link past and present perhaps restored the power of some part of that maternal goodness to once again coexist with the little boy's sense of helplessness and despair. The witnessing that at least partially healed Menachem, in other words, linked parts of himself across time, and in both directions.

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Rhetorical Witnessing in Global Contexts. In a time of global pandemic, fire, and flood, how we live together depends more than ever on how we symbolize trauma. Bearing witness is rhetorical action in search of a shared world. This symposium considers the hows and whys of our more. In a time of global pandemic, fire, and flood, how we live together depends more than ever on how we symbolize trauma. Bearing witness is rhetorical action in search of a shared world. Respondents reporting witnessing trauma had elevated odds of mood and anxiety disorders, but not substance use disorders. Witnessing trauma is common in the South African population and results in increased risk of mood and anxiety disorders. Interventions aimed at reducing the burden of trauma and its outcomes must now increase their focus on bystanders and other observers, rather than just focusing on those directly affected. Discover the world's research. 17+ million members. Reading Testimony, Witnessing Trauma's innovative examinations of raced-gendered intersections open and speak with those works that promote dual-witnessing through the fraught (literary) histories of race and gender relations in America. To explicate how dual-witnessing converses with American literature, race theory, and gender criticism, the book analyzes emancipatory narratives by Sojourner Truth, Harriet A person can experience trauma after any situation that they find distressing or threatening. Learn the causes, symptoms, and treatments. Psychological trauma is a response to an event that a person finds highly stressful. Examples include being in a war zone, a natural disaster, or an accident. Trauma can cause a wide range of physical and emotional symptoms. Not everyone who experiences a stressful event will develop trauma. There are also various types of trauma. Introducing the concept of the "healing witness"™, Sheryl Brahn explores the vital importance of witnessing in the mediation of self-narratives (and the self). According to Brahn, the healing witness is a willing and capable listener, someone who makes room for a time of remembrance so that meaning and self-narratives can emerge from the undigested, raw experiences of suffering.