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## »The liquidation of the particular«: On Anxiety, the Misuse of Trauma Theory, Bourgeois Coldness, the Absence of Self- reflection of Literary Theory, and »something uncomfortable and dangerous« in Connection with Stefan Zweig's *Schachnovelle*

Unfortunately, precisely because they do reduce anxiety, these devices [certain frames of reference, methods and procedures] are often systematically transformed into veritable countertransference reactions, leading to a self-constricting acting out, masquerading as science. A thorough understanding of the neurotic use to which such devices may be put is a prerequisite for their genuinely scientific and sublimatory exploitation.  
(Devereux 1967, 83)

No research, whether in the natural or the social world, can progress on a basis that is both conceptually confused and radically departed from empirical evidence.  
(Sokal/Bricmont 1998, 206)

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Let's face it: An overwhelming traumatic experience causes anxiety. This very experience can turn everything upside down, can make you feel helpless, and it does not make you a better person. It is a burden to talk and to read about trauma. Trauma is no fun-sport.

In 2012, the *Journal of Literary Theory* published eight papers about »trauma«. These articles give a good impression of how »trauma« is understood today. In the following paper I discuss these approaches and demonstrate how literary theory absorbs, changes and misuses a certain paradigm.

### 1 Adaptations and Accommodations of »Trauma«

It is surprising how many misunderstandings and mistakes will have to be considered in these papers. This may be explained by the »little interdisciplinary curiosity« (Kansteiner/Weilnböck 2012, 149) of scholars and literary

theorists, as Kansteiner and Weilnböck put it in their paper in the same issue of *JLT*.<sup>1</sup> Let's have a look at some examples.

## 1.1 Trauma as Disease and the Problem of Counter-transference

In his paper in *JLT*, Barry Stampfl deals with mental creativity, »moving away from the disease/disorder/deficit model that is implicit in our usual definitions« of trauma (Stampfl 2012, 130). However, a trauma according to the main theorists is simply not a disease: The textbook by Fischer and Riedesser is often cited in the papers.<sup>2</sup> It defines a traumatic experience as a »vital Diskrepanzerlebnis zwischen bedrohlichen Situationsfaktoren und den individuellen Bewältigungsmöglichkeiten, das mit Gefühlen von Hilflosigkeit und schutzloser Preisgabe einhergeht und so eine dauerhafte Erschütterung von Selbst- und Weltverständnis bewirkt« (Fischer/Riedesser 2009, 395).<sup>3</sup> A person is exhausted in a special situation and cannot cope with this very situation which in his or her eyes is life-threatening. The reaction is natural, but the after-effects may be bad. These after-effects may in *some* cases (*not in all*, depending on the resources of the victim) cause a *PTSD* (a Posttraumatic Stress Disorder, and »Post« means *after* the traumatic incident).

*PTSD* is a new phenomenon, the term was first used in 1980, it is not a timeless entity, it is »a historical construct that has been glued together by the practices, technologies, and narratives with which it is diagnosed, studied, treated, and represented, and by the various interests, institutions, and moral arguments that mobilized these efforts and resources« (Alan Young in Leys 2000, 6).

This seems to be a static definition, a reification of the phenomena, as Hanna puts it in his critic on trauma-theoretical approaches in general.

[The] phenomena which would be more precisely and profoundly accounted for as dynamic processes, context-dependant, interpersonal relations, and so on, are reified as being static, isolated, natural, inherent, concrete, and so on. [...] The reifications are not so much erroneous contents of thought but rather are erroneous thought-forms (which then of course distorts the content). [...] the main problematic result of reification is that it creates a

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1 See also Weilnböck 2008, 232, on Manfred Weinberg who does something similar: Weinberg claims that »the technical aspect [of trauma] is precisely what does not interest me«.

2 Although not in the newest edition of 2009, cf. Anastasiadis 2012, 23, and Boothe/Thoma 2012, 38.

3 »The experience of a vital discrepancy between certain threatening elements of one situation and the possibility of coping with this situation in connection with feelings of helplessness and unprotected abandoning which then causes a lasting change or shock of the way someone sees themselves and the world« (translations in the footnotes by H.F.).

misleading oversimplification of phenomena, and then this misunderstanding tends to substitute for more rigorous analysis of the phenomena. [...] when a reification becomes common coin, further analysis of the phenomena drops out; the reification serves as an ersatz [a substitute] for thinking. [...] reification therefore serves the general function of making socially determined relations seem like inevitable natural realities.  
(Hanna 2003, 40–45)

*PTSD* seems to impose a monocausal connection on a certain event and a reaction of a person. Fischer and Riedesser try to avoid this reification: Modern trauma theory in their sense explains a trauma as a dialectical relation between a single situation and the resources of a single victim. Irrespective of this, even *PTSD* is a disorder, but not a disease, it is a normal response to stress. The *DSM-IV* (the major »Diagnostic and Statistical Manual of Mental Disorders«) states that a *PTSD* is »the development of characteristic symptoms following exposure to an extreme traumatic stressor involving direct personal [!] experience that involves actual or threatened death or serious injury, or other threats to one's [!] physical integrity« (DSM-IV 2005, 435). This definition was slightly changed in the DSM-5 in 2013 (»exposure to one or more traumatic events«) along with the elimination of the subjective reaction as a criterion, but stresses the individual character of the experience even more:

The directly experienced traumatic events [...] include, but are not limited to, exposure to war as a combatant or civilian, threatened or actual physical assault (e. g. physical attack, robbery, mugging, childhood physical abuse), threatened or actual sexual violence [...], being kidnapped, being taken hostage, terrorist attack, torture, incarceration as a prisoner of war, natural or human-made disasters, and severe motor vehicle accidents. [...] Witnessed events include, but are not limited to, observing threatened or serious injury, unnatural death, physical or sexual abuse of another person due to violent assault, domestic violence, accident, war or disaster, or a medical catastrophe in one's child [...]. Indirect exposure through learning about an event is limited to affecting close relatives or friends and experiences that are violent or accidental [...]. The traumatic event can be experienced in various ways. Commonly, the individual [!] has recurrent, involuntary, and intrusive recollections of the event [...]. Individuals [!] with PTSD may be quick tempered and may even engage in aggressive verbal and/or physical behavior with little or no provocation. [...] PTSD can occur at any age, beginning after the first year of life.  
(DSM-5 2013, 274–276)

In short, there simply is no »disease/disorder/deficit model that is implicit in our [!] usual definitions«, as Stampfl puts it. What is his problem?

First of all we have to differentiate between an acute trauma and a *PTSD*, a posttraumatic stress disorder, which develops, »wenn ein Trauma – oder viele Traumata – nicht verarbeitet werden kann/können«, as trauma therapist Luise

Reddemann claims (Reddemann 2011, 21).<sup>4</sup> *PTSD* is not a trauma, but a *PTSD* can occur after a trauma, it *can* occur depending on the very person and its resources. Only the after-effects are problematical.

Is trauma a new phenomenon, too? No, it isn't. Mammals have different ways of escaping a life-threatening and frightening situation.

The fear generated by a threat is relieved not by attempts to reestablish harmony with the threatener or to negotiate (or to »reason«) with it in some way; the fear is relieved by aggression which seeks to control the situation or destroy the threat. This fear/aggression response can be found in all mammals and all reptiles because it is seated in the most primitive sectors of the limbic system. So in Man, this fear/aggression conversion mechanism is, phylogenetically considered, archaic.

(Hanna 2003, 8)

The alternatives are fight or flight. If it is impossible to fight or flee (you are too weak or the opponent is too powerful), freezing might be a good solution. Freezing in no-fight-no-flight-situations may help you to survive. However, freezing has certain effects: To freeze while being tortured might be a good way to survive this very situation, but to freeze every time you see somebody wearing a white collar similar to the one the torturer was wearing would be difficult in normal life.

Wenn aber alles nichts hilft – no Fight, no Flight – dann bleibt dem Gehirn nichts anderes übrig, um der äußersten Bedrohung, nämlich der Auflösung des Selbst, zu entkommen, als: *Freeze* und *Fragment*.

(Huber 2003, 43)<sup>5</sup>

as the trauma therapist Michaela Huber puts it: To freeze means to stay motionless, and to fragment means to split up the mind (for example to forget the event). So, a traumatic reaction is a perfect tool to survive in a life-threatening situation. It is not a disease – but with possibly bad after-effects for *some* people: That is why horizontal and vertical dissociation of the mind (and *not* the vertical repression of memories in the Freudian sense) is a good technique to survive.

The reaction is natural, the disturbance is overwhelming. That is why trauma therapists try not to blame the victim: The victim is not sick. The victim did the right thing. And the later reactions (intrusions, lost memories, flashbacks, nightmares, hyperarousal, reenactment) are normal reactions, too. Nevertheless, it

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4 »[...] if a trauma – or many traumata – could not be assimilated or handled«.

5 »If nothing helps – no fight, no flight – than there is nothing left to the brain than to freeze and to fragment to escape the disaggregation of the self.«

might be good to have a look at these after-effects. Is the victim still in a life-threatening situation? If not, it might be possible to think of changing these normal, but burdening reactions. And it is possible to change these reactions to a certain degree depending on the resources of the victim. That is why it is the main task of trauma therapy to strengthen the resources: A trauma therapy consists of six parts, as Arne Hofmann states: »Stabilisierung, Stabilisierung, Stabilisierung, Stabilisierung, Traumakonfrontation sowie Trauer und Neubeginn« (quoted in Reddemann 2003, 23).<sup>6</sup> As the American trauma therapist Peter A. Levine puts it: »A trauma is not a Disease, but a Dis-ease« (Levine 1996, 33).

That is why one should be careful not to mix up one's own problems with trauma (maybe you cannot bear descriptions of extreme suffering) with the normal reaction of a person to a life-threatening situation. Don't blame the victim because of your own reactions to suffering.

Devereux in his famous *From Anxiety to Method in Behavioural Science* calls this sort of reaction »counter-transference« (1967, 44) while using a term widely known in psychoanalysis. Freud understands counter-transference as a result of the patient's influence on the therapist's unconscious feelings. As Devereux claims, anyone who studies frightening material »seeks to protect himself against anxiety by the omission, soft-peddling, non-exploitation, misunderstanding, ambiguous description, over-exploitation or rearrangement of certain parts of his material« (ibid.). This is what Stampfl did in his paper.

## 1.2 Flashbacks, False Memory, and Sequential Traumatisation

In her paper in *JLT*, Susanna Onega cites a paragraph from a novel in which somebody depicts his experiences in a sort of stream of consciousness. She calls this a »flashback« (Onega 2012, 93). Is a stream-of-consciousness-narration a flashback? A flashback is a »plötzliches intensives Wahrnehmen von Trauma-Bestandteilen mit Wiedererlebensqualität« (Huber 2003, 69).<sup>7</sup> Somebody is triggered by a fragmented detail and lives through an old situation as vividly as if it were a real situation. He or she does not actually remember a situation (»O yes, it was like this and that and started then and then ended like that!«), but he or she is

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<sup>6</sup> »Stabilization, stabilization, stabilization, stabilization, confrontation with the trauma as well as grief and a new start«.

<sup>7</sup> »[...] a sudden and intense realization of parts of the trauma with a quality of living through it again«.

in the situation again. He or she re-enacts the authentic experience. Onega does not describe a flashback but an effort to describe such a situation via a stream-of-consciousness-narration.

On the same page Onega speaks of a person who was »not the victim of punctual trauma caused by a concrete overwhelming event« but »of terrible things that have happened to him repeatedly throughout his life, that is, he belongs to the Freudian category of trauma victim who has been in ›shock‹ most of one's life« (ibid.). I failed to find any source in Freud's work for this assertion. And what about her ›one event – one trauma? Trauma does not inevitably mean only one single event – even not for Freud (see page 173 seq. in this paper). The psychoanalyst Hans Keilson made a longitudinal analysis of Dutch Jewish children who survived the occupation and the persecution by the Nazis and who experienced a chain of traumatisations. His *Sequentielle Traumatisierung bei Kindern* (1979) was ignored for quite a long time even by professional trauma therapists, but was reprinted in 2005. His book is very interesting for any scholar because in this now famous longitudinal analysis he retells the life-stories of many children with sequential traumatisation, that means with retraumatisations as a repetition of the base-trauma reopening the old wounds over and over again.

Surprisingly, scholars always try to go back to Freud and ignore the works of Masud Kahn (cumulative trauma) or Keilson (sequential traumatisation). They go back to Freud because they seem to be interested only in the single event (see the papers of Anastasiadis, Onega, Staniliou and Markowitsch in *JLT*). In the case of trauma this is a thing one should be careful with. In Onega's case, knowledge of Keilson would have been of value.

Let's have a look at another example: Athanasios Anastasiadis mentions a woman, who »quite obviously has *false memories* or *pseudo memories*« (Anastasiadis 2012, 15). He explains that certain »aspects of her memories do not correspond to any actually experienced events« (ibid.). First of all, this implies that all memories correspond one to one to real events, which is plainly wrong as a cursory look on works on memory by Daniel Schacter or Nobel Prize winner Eric Kandel would have shown. Leaving this aside, in the discussion about false memories nobody has ever questioned which aspects of memories are ›right‹ or ›wrong‹. The point is that without further investigation one cannot differentiate between adequate and wrong, long-lost, and now remembered memories of sexual abuse in early childhood at all. As Phil Mollon puts it:

There are no known methods of reliably enhancing memory. Attempts to do so run the risk of yielding confabulated or false memories [...]. Without objective corroboration, it may be impossible to determine whether a recovered memory – that is, an experience that had been firmly forgotten and then later remembered – is essentially true or is a product of imagination. (Mollon 2000, 68)

The question is not: Are memories right or wrong? The question is: Should memories that have been forgotten and then later were recovered be treated as real memories when it is impossible to differentiate between real and false memory without further investigation? Real memories are not more vivid or more detailed or more impressive than false memories. To speak of ›false‹ memories as pseudo memories is simply wrong.

One may think that this critic is narrow-minded. Let's have a look at some other aspects.

### 1.3 Problems with Freud: Changes in Freud's Concept and his Understanding of the Role of the Therapist and »the« Trauma

As mentioned before, one should be careful when citing Freud. Why is that so? Psychoanalysis is a theory based on assumptions. It is based on experiences, inductivity and theoretical assertions. Freud was unhappy about not having hard scientific data on the brain to back up his theory. But trauma-theoretical approaches are different: They have a scientific background, for example magnetic resonance imaging. Of course, magnetic resonance imaging is not the master solution for all problems: It is only an indirect confirmation for some assumptions on activities taking place in the brain. It is always indirect, because we cannot see thoughts themselves, but only the rise of activity in some parts of the brain, and we can draw conclusions from that. However, as a result of this scientific background, a shift took place in talking about trauma.

Freud thought about trauma for a long time (for example in his early studies on hysteria of 1875, in »Jenseits des Lustprinzips« of 1920, or in his »Abriss der Psychoanalyse« of 1938). He altered the concept,<sup>8</sup> but one characteristic remained

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<sup>8</sup> For a detailed reconstruction cf. Leys 2000, Chapter I, on »Freud and Trauma«: She states that in his early papers on hysteria Freud »stressed the role of a post-traumatic ›incubation‹ or latency period of psychic elaboration, in ways that made the traumatic experience irreducible to the idea of a purely psychological causal sequence« (ibid., 19). It was »not the experience itself which acted traumatically but its delayed revival as *memory* after the individual had entered sexual maturity«; for Freud »trauma was thus constituted by a dialectic between two [!] events, neither of which was intrinsically traumatic« in connection with his concept of ›Nachträglichkeit‹ (deferred action)« (ibid., 20). After the First World War Freud changed the paradigm (as he did several times): Trauma was »thus defined in quasi-military terms as a widespread rupture or breach in the ego's protective shield, one that set in motion every possible attempt at defence even as the pleasure principle itself was put out of action« (ibid.). Obviously, the paradigm changed, and it could not easily be transferred on modern research, because if taken seriously, you have to cope with two non-traumatic events and their dialectical relationship, or the pleasure principle, or other details of Freud's theory.

salient: For Freud »kann eine traumatische Reaktion sowohl durch übermäßige Triebregungen als auch durch äußere, reale Einflüsse entstehen« (Bohleber 2011, 109).<sup>9</sup> He often concentrated on the first point, on disposition, and some of his pupils broadened this tendency to non-observance of external events, which often ended in half-cooked and even wrong explanations of neurotic symptoms only based on inner dispositions (cf. Fischer/Riedesser 2009, 40). This may lead to a »Verabsolutierung des Intrapyschischen«, a »reduktive[r] Intrapyschismus« (Fischer 2005, 143)<sup>10</sup> – or a reification, as Hanna calls this (2003, *passim*). All too often, scholars ignore this fact and start their inquiry with citing works of Freud (or Janet or Breuer or Charcot) without thinking about the consequences.

Why is this strategy so problematic? Let's invent a case example: What would you think of a philosopher who wants to write an article about the different ways of understanding time in philosophy and limits her paper by saying that she will write about time in general, but her main interest is to reread the text of Augustines *Confessiones* and ignore Kant's *Critique of Pure Reason* and Albert Einstein's theory of relativity? To ignore such major changes would make for a very odd paper.<sup>11</sup>

Let's presume the paper becomes influential. Now, everybody who wants to take part in the main discourse about time will have to cite it. The interest in reading Kant and Einstein will decline. On the other hand, only a few will read Augustine to think of Augustine's texts in a new and provoking way which may position the author of the new paper outside of the main discourse. In the end, nobody reads Kant and Einstein (or others), and nobody rereads Augustine, because citing the influential paper seems to be sufficient.

Unfortunately, according to research into trauma theory and literature, the situation is even more complex: There seem to be no other psychological theoretical approaches to literature than psychoanalytical approaches in the Freudian sense.<sup>12</sup> That is why the reproaches sound so familiar: to understand works of art as symptoms, to turn the artist into a patient (to »put him on the couch«), or to understand a character as a real person (see Fischer 2005, 19). These reproaches are deceptive because there is no »direkter Zugang zum Unbewussten [...]«. Psychoanalytische Hermeneutik muss im phänomenologischen Verstehen und Beschrei-

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<sup>9</sup> »A traumatic situation can arise through excessive drive impulse as well as by external, real events«.

<sup>10</sup> »[...] a dogmatisation of the intra-psyche«, a »reductive ›intra-psyche‹«.

<sup>11</sup> Compare this with Bronfen 1999, concentrating only on Freud.

<sup>12</sup> Compare the textbooks of Kimmich and others (2008, 147 sqq.), Schmid (2009, 266 sqq.), and Eder and others (2010, 5).



ben der Lebenswelt verankert sein« (ibid.).<sup>13</sup> The main task is to impose a dialectical connection between the single subject and a specific situation, not the cold application of some categories (let it be fear of castration, the Oedipus-complex, PTSD, flashback, or repression) as reifications of the concept. To state that such a category can be observed does not offer a new interpretation, it does not improve one's knowledge of a piece of art: It is an »undialectical« interpretation of a piece of art, as Fischer would call it (Fischer 2005, 11 and passim):

Während ›formale Psychoanalyse‹ den Gegenstand der Kunstpsychologie unter die ›allgemeinen Gesetze‹ des Unbewussten und des psychischen Apparates zu fassen sucht, wird das Kunstwerk im dialektischen Paradigma als Weg der dialektischen Erfahrung gesehen wie auch als deren Anstoß beim Betrachter.<sup>14</sup>

However, trauma-theoretical approaches have some roots in, but they are not entirely based on psychoanalysis.<sup>15</sup> Anyhow, if you consider trauma-theoretical approaches to be psychological approaches, you might get into trouble in *not* citing Freud.

Is Freud always right? The question misses the point. Modern trauma theory is different: If the stressor is strong enough, even healthy people with no experience of sexual abuse in early childhood or other early traumatic experiences can become traumatised.<sup>16</sup> That is why the new approach does not use the notion of the Freudian vertical repression (»Unterdrückung«) but of vertical and horizontal dissociation (the splitting-up of memories). According to modern trauma theory, trauma is not a deliberate pushing-down, but a moving aside of reality in a life-threatening situation. So, the difference between Freud and modern trauma theory is a qualitative difference that cannot be bridged so easily: Trauma theory is not a culturally dependant theory like Freud's psychoanalysis, another way of hermeneutics, or a

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**13** There is no »direct access to the unconsciousness [...]. Psychoanalytical hermeneutics must be rooted in phenomenological understanding and in the description of the living environment of a single subject«.

**14** »While ›formal psychoanalysis‹ tries to classify the object of psychology of art under the ›common laws‹ of the unconscious, the dialectical paradigm understands the work of art as a way of the dialectical experience and as an impulse on the observer«.

**15** That is why Bronfen's use of Freud's view of trauma about a »traumatische Urszene« (a traumatic primordial scene in early childhood which should be reconstructed) as a new scheme of interpretation for cultural studies is counterproductive (cf. Bronfen 1999, especially 157).

**16** That is the reason why you might get difficulties in saving Freud at all costs, as Prager 1998, 156, did: »The wartime events evoke the prerepresentational experience of maternal trauma [...]; war becomes modelled on the child's earliest reactions to the loss of it's mother«. Taken strictly, this means that only those who have experienced the loss of their mother as traumatic could react on experiences in wartime in a traumatic way.

deconstructionist or postmodern view. Rather, it is based upon anthropological constants, like (neurobiological) reactions, or the alteration of the behaviour of one person not only due to sexual abuse in early childhood or the loss of one's mother, but due to a »life-threatening or violent event« such as »war, terrorism, torture, natural disasters, accidents, violence or rape« (Shiromani et al. 2009, v).

Additionally, there is and always has been a solid understanding of reactions based on death-like situations and mortal fear which does not depend on a special frame like *Posttraumatic Stress Disorder (PTSD)* or *Disorder of Extreme Stress Not Otherwise Specified (DESNOS, see DSM-IV)*, sequential traumatisation, cumulative traumatisation, flashback, etc. We are able to analyse older texts (as the Bible or Shakespeare) and use trauma theory because the texts deal with anthropological constants. Neurobiological terminology might help to understand such phenomena in a better way (memories of traumatic experiences are stored in the brain a-causally and a-temporally), but as an end in itself neurobiological talk does not help in any way.<sup>17</sup> One should always keep in mind: We are talking about anthropological constants of reactions on death-like experiences that turned someone's view of the world upside down, and as for all mammals these reactions are: fight, flight or freeze, and they always have been.

Moreover, there is one fundamental difference between the way the Freudian school understands the role of a therapist and the way most of the trauma therapists think of this role today. Freud's repression-theory regards trauma as an encapsulation that can only be resolved by a psychoanalyst. So the trauma seems to be immutable without the help of the therapist. Modern trauma theory is different. As the German psychiatrist Ulrich Sachsse puts it:

Am einen Pol stände die therapeutische Überzeugung: Die Patientin ist innerseelisch ein hilfloses Kind, das sich in der und durch die therapeutische Beziehung zu einer erwachsenen Therapeutin langsam entwickelt und nachreift. [...] Am anderen Pol stände die therapeutische Überzeugung: Wir Menschen verfügen über innere Selbstheilungskräfte. Jeder Mensch kann sich nur selbst helfen, ein Therapeut kann allenfalls Hilfe zur Selbsthilfe geben.  
(Sachsse 2004, 185)<sup>18</sup>

This stands opposite to many statements of scholars and trauma-theoretic approaches which try to enjoin on a victim what he is capable and incapable of.

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<sup>17</sup> On the seductive allure of neuroscientific explanations see Weisberg et al. 2008.

<sup>18</sup> »On the one hand there is the [Freudian] therapeutic belief: The patient is a helpless child in her soul, which in and through the therapeutic relationship with an adult therapists slowly evolves and catches up in her development. [...] On the other extreme there is the [new] therapeutic belief: We people dispose of inner healing powers. Every single person can only help himself, a therapist can at least give help to self-help«.

Most of these trauma theorists speak of »the trauma« – which is a dangerous thing to do. And even worse, they speak of traumatised people as a consistent group. Here are some examples from the papers in *JLT*: »They unknowingly pass on their unresolved traumas to the second and third generation« (Anastasiadis 2012, 4; that means: *everybody* does this without knowing, and *all* the traumata are unresolved); »Können aber die Überlebenden der nationalsozialistischen Lager ein persönliches Bezugssystem erzählend gelten machen?« (Boothe/Thoma 2012, 26; that means: *all* the survivors).<sup>19</sup> Bourgeois coldness appears in some of these generalizing sentences: Omega claims that »trauma victims are caught in the dilemma of having to choose between the stigmatisation of madness and social exclusion, or integration in the group at the cost of hiding their scars and mitigating the atrocity of their experiences« (Omega 2012, 87, *all* the victims). She seems to state that a victim with *PTSD* is able to choose to conceal the wounds on his own or not – and that such a concealment (if it is possible at all) is the same as being accepted in society. If it was that easy!

Speaking of »the trauma« and »the victims« while ignoring the single case is dangerous: Jeffrey Prager in his *Presenting the Past. Psychoanalysis and the Sociology of Misremembering* states that our »society is currently in an assault on subjectivity itself, eager to replace a focus on the interpretative, meaning-making, symbolizing self with a focus on history and its determinative impact upon individuals« (1998, 132). In short: It is a reification.

## 1.4 The Postmodern School

Why are scholars interested in citing other theorists? Cathy Caruth formed a paradigm in combining a special understanding of Bessel van der Kolks works on memory and trauma<sup>20</sup> with the scepticism on language of Paul de Man (only

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<sup>19</sup> »But can all the survivors of the Nazi-Camps bring a personal frame of reference to bear?«

<sup>20</sup> For a critique of van der Kolk's account see Leys 2000, chapter VII, 229–265. She manifests dismay by the »low quality of Van der Kolks scientific work« because of »slippages and inconsistencies in his arguments about the literal nature of traumatic memory, arguments that are inadequately supported by the empirical evidence he adduces« (ibid., 305). For a critique on Caruth see Leys's chapter VIII, ibid., 266–297, and her conclusion, that »in the name of close reading she [Caruth] produces interpretations that are so arbitrary, wilful and tendentious as to forfeit all claim to believability«; Caruth tends to »dilute and generalize the notion of trauma: in her account the experience (or nonexperience) of trauma is characterized as something that can be shared by victims and non-victims alike, and the unbearable sufferings of the survivor as a pathos that can and must be appropriated by others« (ibid., 305).

»to support her performative theory of language«, as Leys 2009, 275, claims). As Susana Onega puts it in her paper in *JLT*, Caruth »attempted a thorough transposition of Paul de Man’s notion of linguistic slippage to the structure of trauma« (Onega 2012, 88). This is at least surprising: Why does Caruth rely on Freud and Lacan, who were interested in healing persons through the use of language – and goes in the opposite direction in stating that language is unable to help at all? And what has Paul de Man to do with trauma anyhow?

In a fascinating paper, Sharon Rosenberg writes about her disillusion about »the kind of scholarly subject in performance demanded by the modern university« (Rosenberg 2010, 250). She writes about a new ignorance trauma induces. She worries »that trauma and memory studies are being too readily incorporated into the normative and hegemonic projects of modern university« (ibid., 259). She describes a dilemma of dealing with trauma, »not to read [it] as a problem to be solved (it cannot be) but as one that demands from its practitioners creative risk in thought and practice« (ibid., 252). A solution could be to get rid of certain theoretical approaches – but Rosenberg is unable to do that. On the contrary, she tries to save the theory at all costs using mantra-like expressions, such as: »[I]f we follow Felman, Simon and Ellsworth through Lacan [...]« and »[I]f we follow Caruth through Freud [...]«. It does not occur to her that the problem might be Caruth and the others. I would call this an *idée fixe*, because Rosenberg seems to be caught in a vicious circle. One might ask: What are the benefits? What are the costs? Do we really need de Man to understand anything better? And what about Caruth herself? In Onega’s references in her paper in *JLT* Kansteiner and Weilnböck’s powerful criticism of Caruth in their contribution to the international and interdisciplinary handbook *Culture Memory Studies* is not even mentioned. Moreover, Onega cites Lacan, who »defined the traumatic as a missed encounter with the real« (Onega 2012, 85). A »missed« encounter? According to any definition of a traumatic experience, a traumatisation is not a missed, but it is an overwhelming encounter. So why should anybody cite Lacan?

Citing an authority (»a good name«) means to take part in a discourse, to borrow some of the power of the discourse to make your own argument more convincing. This may lead to problems: Remember *Fashionable Nonsense. Post-modern Intellectual’s Abuse of Science* by Alan Sokal and Jean Bricmont, published in 1998. Their book dealt with »mystification, deliberately obscure language, confused thinking, and the misuse of scientific concepts« (1998, xi). They listed some rules to escape the dangers of misuse of science: »It’s a good idea to know what one’s talking about«; »Not all that is obscure is necessarily profound«; »Science is not a text« (which means that the sciences are »not a mere reservoir of metaphors ready to be used in the human sciences«); – and: »Be wary of argument from authority« (ibid., 185–187). They give reasons why a special way of use (or

misuse) became so popular. In their eyes, it was the neglect of the empirical combined with using the prestige of the natural sciences as a means to an end and a special »traditional philosophical and literary training« (ibid., 190, 193).

This sounds familiar: Kansteiner and Weilnböck list up »five fundamental, interrelated problems« for postmodern trauma theory. Firstly a »vague, metaphorical concept of trauma, which equates the concrete suffering of victims of violence with ontological questions«, secondly a »surprising lack of interdisciplinary curiosity«, thirdly a »similarly disturbing disinterest in the empirical research on media effects« of trauma, then an »almost paranoid fear of narratives based on the axiom that all narration has distorting and normalizing effects and thus destroys the fundamental pre-narrative insights revealed by trauma«, and finally a »valorization and aestheticization of trauma, high art and philosophy as sites of intangible, ethereal authenticity« (Kansteiner and Weilnböck 2008, 237).

All these problems can be found in the papers in *JLT*. The lack of self-critical reflection is astonishing. On the contrary, in these papers you often find the same sort of broadening one concept with a very different theory which has nothing to do with trauma in exactly the same way as Caruth did with de Man: Onega tries to explain the »achronicity and chaotic arrangement« of a certain text (2012, 89) with Walter Benjamin's concept of constellation. Is there a benefit in using Benjamin's notion? And Stampfl uses in his paper about »Traumatic Creativity« Peirce's »Abductive Inference«:<sup>21</sup> In the traumatic experience when all the learned strategies fail one has to adopt new ways of dealing with something similar to abductive inference. Why doesn't he refer to Jakob von Uexküll or Umberto Maturana? Constructivist thinking has always played a major role in trauma theory (cf. for example Fischer/Riedesser 2009, 78 sqq.), but not Peirce. Why should anyone cite Peirce at all?

## 1.5 Trauma as a Collective Phenomenon

The enlargement of the notion of trauma by Caruth and others tries to get rid of the single overwhelming event, tries to avoid the single traumatising of one person. This seems to be a reification, the founding of a generalizing, static, new concept. If different clinical definitions of trauma or *PTSD* are taken seriously, there cannot be anything like a collective trauma. Keane defines *PTSD* according to the *DSM* as a phenomenon that stems from an event »in which one [!] is exposed to a serious threat of injury or death and then experiences extreme fear,

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<sup>21</sup> Peirce is a well known figure in literary theory, see for example Packard 2006.

helplessness, or horror« (Keane et al. 2009, 2). A single person is exhausted in a special situation and cannot cope with a situation that in his or her eyes is threatening his or her life. That is why a whole people, nation, or generation can never be such a single person with specific properties.<sup>22</sup> On the other hand, there is a strong need to label groups as traumatised. How can collective traumata be compared with one another? Which categories should be used? As a matter of fact, how can the subsuming of different destinies to one collective trauma do justice to the individual experience (cf. Kühner 2007, 24)? And how can we escape the dangers of reification? However, it might be very interesting for a single traumatised person to embed his or her own single experience in a history shared by others: What happened to me is systematic, is part of a collective experience (cf. *ibid.*, 25). Now, the question is: Do we really need the notion of trauma when we talk about collective experiences? The DSM-5 highlights some restrictions when defining Posttraumal Stress Disorder (*PTSD*): »Indirect exposure through learning about an event is limited to affecting close relatives or friends and experiences that are violent or accidental [...].« (DSM-5 2013, 274)

The psychologist Barbara Kühner differentiates between *collective traumata*, *collectivized traumata*, and *traumata that are collectively mediated via symbols*. Her first concept, *collective trauma*, concentrates on the traumatisations which were experienced in reality, for example a mass-trauma. Her second concept, *collectivized trauma*, stresses the process with which a shared event becomes part of the collective identity of a group. Her third concept concentrates on the part of the collective which is not traumatised in a narrow sense: The collective is heavily shocked due to the closeness to and partial identification with the victim via symbolisation (*ibid.*, 27). Her differentiation is helpful, because the idea of a collective trauma may help a single person not to feel left alone. On the other hand, the expansion of the approach may result in oversimplification and generalization of experiences which cannot be generalized at all.

9/11 shocked the USA. Is it correct to say that actually *every single US-American citizen* is traumatised? Does *every single person* have *PTSD*? Maybe it is more convincing to understand the anger and pain and the acting-out of the American people as a narcissistic reaction to the loss of one's dream of omnipotence and invulnerability, which has nothing to do with trauma or even with collective traumata. Do we need the concept of trauma in this big picture? Hans-Jürgen Wirth supposes that narcissism, power, and paranoia played important roles in the second war against Iraq. The national identity of America was damaged because of a narcissistic humiliation (cf. Wirth 2006, 95, 99, 106). In 2002 he predicted:

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<sup>22</sup> For this culture-as-person-metaphor see DeRosa 2012, 47.

Die amerikanische Gesellschaft könnte in die Versuchung geraten, das erlittene kollektive Trauma dadurch abzuwehren, dass sie sich auf das Trauma fixiert und es zum zentralen Bezugspunkt der nationalen Identität macht. [...] [So] käme es zur Ausbildung einer nationalistischen Ideologie, die Verfolgungs-, Rache- und Größenphantasien zum Inhalt hat. Diese haben die Funktion, die erlittenen narzisstischen Verletzungen des Selbstwertgefühls wieder gutzumachen und die Demütigungen durch Rache auszugleichen. (Wirth 2002, 381 seq.)<sup>23</sup>

This is an interesting statement. The question is: Why does Wirth need the notion of collective traumata anyhow, when he is talking of a narcissistic slight?

In some of the papers in *JLT* you might get the impression that there is no interest in the single case of a traumatised person, but that we always have to talk of groups of traumatised people.

## 1.6 Trauma as the Hidden Sacred: a Gesture of Bourgeois Coldness

In connection with the notion ›collective trauma‹ it became clear that moral intuitions play an important role when dealing with trauma. If we have a look at literature written by traumatised people, should this kind of literature be dealt with a different approach? In this case, there is an underlying motivation at work: It shows the need for moral regulations.

For Caruth, the traumatic experience is inexplicable per se. Nobody should try to verbalize these horrible experiences, otherwise the uniqueness of these experiences will be degraded. This is an anti-Freudian statement, as I mentioned earlier (see page 177 seq.). She claims that »the possibility of integration into memory and the consciousness of history thus raises the question ›whether it is not a sacrilege of the traumatic experience to play with reality of the past‹« (Caruth 1995, 154). And these traumata are infectious, that means, they have an afterlife: You do not have to experience a trauma to be traumatized. In generalizing this way, »trauma becomes unlocutable in any particular individual«, as Leys claims (Leys 2000, 17). What a twist – from an overwhelming situation for a single person with its special

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**23** »The American society can be tempted to ward off the collective traumatisation with a fixation on the trauma itself while making it the main benchmark for their national identity. It may come to the composition of a nationalistic ideology which consists of fantasies of persecution, revenge and greatness. They have the function to heal the narcissistic violations of self esteem and to cope with the humiliation through revenge.«

resources to something that nobody can talk about and which everybody has got!

As Caruth puts it, to integrate a trauma into memory is the same as playing a game and it is also a sacrilege: The historian Dominick LaCapra thinks that in this case, according to Caruth, »the real or literal traumatic, inaccessible and inherently incomprehensible or unrepresentable, [...] can be represented or addressed indirectly in figurative or allegorical terms that necessarily destroy and betray it«. He speculates, that »the further displacement (as well as distortion and disguise) involved here may be with respect to a variant of religion in which the Hidden God is radically transcendent, inscrutable (or unreadable), and, in a secular context, dead, invariable, lost or barred« (LaCapra 2001, 107–109, footnote). The consequences can easily be drawn: »All representations of such an absolute are sacrilegious or prohibited.« In the context of trauma, »trauma may itself be sacralized as a catastrophic revelation or, in more secular terms, be transvalued as the radical other or sublime« (ibid.). In contrast to Caruth, LaCapra distinguishes between *acting-out* (you just repeat things; Levine calls this »re-enactment«, cf. Levine 1997, 31) and *working-through* (in working-through you might be able to understand what has happened and you need not always have to act things out without noticing it). Of course, this is a Freudian concept (cf. for example his *Erinnern, Wiederholen, Durcharbeiten*). Now, Caruth seems to forbid working-through, according to LaCapra:

The difficulty is that this frame of reference may either foreclose any attempt to work through problems or immediately conflate the latter with necessarily Pollyanna or redemptive dialectical *Aufhebung* [German in the original]. By contrast, one may conceive of working through as a limited process of integration or introjection of the past which may never fully transcend the acting-out of trauma or achieve full integration and closure. (ibid.)

I would call Caruth's view a perverse gesture of forbidding the traumatised to formulate her or his life story as an effort to cope with a traumatic experience. I would call this way of response a gesture of bourgeois coldness, as the educational theorist Andreas Gruschka puts it. He refers to Adorno's *Minima Moralia*, where Adorno attacks Hegel: »mit überlegener Kälte operiert er [Hegel] nochmals die Liquidation des Besonderen. Nirgends wird bei ihm das Primat des Ganzen bezweifelt« (Adorno 1984, 15).<sup>24</sup> This »liquidation of the particular«, this reifica-

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<sup>24</sup> »With serene indifference he [Hegel] opts once again for liquidation of the particular. Nowhere in his work is the primary of the whole doubted« (Adorno 1991, 17).



tion, is responsible for bourgeois coldness, which shows itself in the thinker's indifference towards the individual, as Gruschka states: »Kälte zeigt sich also insbesondere in der Indifferenz des Denkenden gegenüber dem Leben der je besonderen Menschen, in deren Subsumtion unter Prinzipien, die als verallgemeinernde ihnen Unrecht antun« (Gruschka 1994, 47).<sup>25</sup> In other words, restrictions and rules ignore the individual case.

In contrast to that, the individual case is the very subject matter of trauma theory. That is why Bronfen's understanding of trauma as a »neues Deutungsmuster für Moderne und Modernität« (»a new pattern of interpretation for modern times and modernity«, Bronfen 1999, VII) is harmful, because trauma simply isn't such a pattern. One thing is clear: Requirements for restrictions and regulations because of a special status of a special kind of literature have consequences.

## 1.7 »Betroffenheitspathos« and Holocaust-Kitsch

Unfortunately, you might get the impression of an overwhelming moral pressure put on you if writing on trauma (cf. Fricke 2006, *passim*). Boothe and Thoma speak in their paper in *JLT* of the »erfahrene Qual«. This anguish becomes »zu einer, die alle Menschen gleich erfahren würden; Individualität und persönliche Einmaligkeit sind suspendiert« (2012, 31).<sup>26</sup> When discussing a text by Jean Améry, they state that he »tragischerweise [...] Hand an sich legen musste, als er glaubt, dass seine Vitalität, seine Denkfähigkeit schwinden« (2012, 32).<sup>27</sup> It seems to be impossible to challenge these points because of the moral pressure this »Betroffenheitspathos« (pathos of concern) puts on the reader. This very pathos is one of the main sources of Holocaust-Kitsch.<sup>28</sup>

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**25** »Coldness shows itself especially in the indifference of the thinker on the life of the single human being in subsuming it under principles which perform injustice to them because of its tendency to generalise«.

**26** »[...] experienced anguish« which becomes »one that is experienced by all men in the same way; individuality and personal uniqueness are suspended«.

**27** »[...] tragically was forced to commit suicide, because he thought that his vitality and his ability to think declined«.

**28** One good example for Holocaust-Kitsch, where the Holocaust is transformed »into an object of consumption« (Koepnick 1999, 50), is one of the final scenes of »Schindler's list« by Stephen Spielberg: Schindler sits among the Jews in an elevated position which seems to be a mixture of messiah and mater dolorosa. All too often, you get the same impression of pathetic staging in papers on trauma.

## 1.8 Where is the Benefit?

If you have a look at the endings of some of the eight papers in *JLT*, you may be surprised about the outcome: »The texts under discussion share a further important common characteristic. The narrators transform their post-memory process into a novel, thus they produce and shape cultural memory« (Anastasiadis 2012, 22). »Die Untersuchung gibt Hinweise darauf, dass horrifizierende Extremerfahrungen der episodisch durchgestalteten Narrativierung zugänglich sind« (Boothe/Thoma 2012, 36).<sup>29</sup> »My approach to the understanding of trauma would bring support for an affirmative reading of the novel's conclusion from a different direction: the recognition of the mental creativity at the core of the process of traumatization« (Stampfl 2012, 145), which was the starting-point of his paper.

»[M]ay help«, »gives hints«: I have the suspicion that all too often, one is led to find the eggs in the basket which were hid in the beginning. There are few surprises and not much to be learnt. This may be because of the taking part in a new master narration called trauma: You just have to cite Freud, Lacan, Caruth, and others. Then you take part in the discourse, which seems to be sufficient. These interpretations only make sense, because such »reifications simply arise and circulate where they do because they »make sense«, i. e. they mesh with the given state of affairs and present no challenge to it« (Hanna 2003, 176).

## 2 Missing Interest in Authors and Characters

In the papers about trauma in *JLT*, one can observe a certain shyness in talking about fiction and characters. No paper tries to explain the behaviour of a fictitious character in a novel in the light of trauma theory. When fiction is added, it is mostly for the sake of giving an example (»Look here! It is the same in fiction!«). However, there is no new interpretation to shed a new light on the text: The text stays unchanged, untouchable. Why is that so?

Most literary theorists seem to be afraid of thinking of fictional characters as real characters,<sup>30</sup> because the »reception of characters is quite different from the direct encounter with real people« (Eder et al. 2010, 11). Readers »cannot interact with the represented person but [only] can think about their meaning«, and »the

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<sup>29</sup> »The study gives hints that the horrifying and extreme experiences are available to an episodic narration«.

<sup>30</sup> For a brief and helpful summary on this topic, see Eder et al. 2010 *passim*.

symbolism and the communicative mediation of characters mark fundamental differences to the observation of persons in reality« (ibid.). Of course, fictional characters show »ontological incompleteness« (ibid.): They are not described in every detail. The colour of their hair, or the shape of their fingers might not be specified in the text, and in a film you might not know the exact number of children the character has. As a matter of fact, characters are always incomplete. However, this is the same with real people. We know a lot about our friends – but do we know everything?<sup>31</sup> Two salient questions come up: Why are theorists afraid of characters at all, and why do readers like them?

## 2.1 Literary Research and Problems with Fictional Characters

As mentioned before, Eder and others only mention »psychoanalytic approaches« (Eder et al. 2010, 5) when discussing literary psychology. These approaches try to explain »the inner life of characters, as well as the reactions of viewers, users, and readers, with the help of psychodynamic-models of personality (e. g., those developed by Freud and Lacan)«. If we want to »understand the text, film etc. in its historical context, we need to find out about the psychological and anthropological knowledge *that was available to the author and her or his contemporaries*« (ibid., 12, my emphasis).

If this is taken seriously, any interpretation of any older text which uses a trauma theoretical approach is false because the author simply could not have read Fischer and Riedesser's handbook. This »Anti-Psychologismus« (counter-psychologism) just allows »einen Beschreibungs- und keinen Erklärungsanspruch« (a right to describe, not a right to explain, WeInböck 2007, 23): The work of art has to stay autonomous, inexplicable and sacrosanct at its very core. This is very unconvincing, to say the least.

WeInböck describes two main areas in literature which depend on a certain psychological logic, because first of all, characters were invented by an author who used all of his inexplicit and explicit knowledge about the emotional setup of

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<sup>31</sup> Cf. Stolorow and Atwood on the myth of the isolated single mind: They prefer to talk of intersubjectivity which »brings to focus both the individual's world of inner experience and its embeddedness with other such worlds in a continual flow of reciprocal mutual influence instead« (Stolorow and Atwood 1992, 18). As Prager claims, one's »self (or even one's selves) is never static, its formation never complete« (Prager 1998, 125). The non-fictional self is at least comparable with the fictional self.

people and their ways of reacting, and secondly, the psyche of the character must be refreshed or actualised and mentally adopted by the reader. That means: »Fiktionale Figuren existieren gar nicht eigentlich außerhalb von menschlichen Psychen und menschlichen Prozessen der mentalen (Re-)Konstruktion, die in AutorInnen und LeserInnen ablaufen [...]« (ibid.).<sup>32</sup>

This is just one side of the medal: To try to forbid psychological interpretation does not only exclude the reader and the author, it asserts that fictional characters are different per se. This is a sign of an »erstaunliche epistemologische Naivität [...], mit der davon ausgegangen wird, man könne die Aussagen einer empirischen Person ›definitiv‹ verifizieren, während für ›fiktive Gestalten‹ ein Status der ›prinzipiellen Indeterminiertheit‹ gelte« (ibid., 25).<sup>33</sup>

Is trauma theory limited to certain times in history and to special sorts of texts? Surprisingly, this seems to be the case: Holocaust and non-fictional texts are the main topics. Why is that so? Popular trauma culture is part of a special Holocaust-discourse, as Anne Rothe puts it: The Holocaust was »transformed from an event in European history into a core constituent of American memory«, because »it was appropriated on a national level« (Rothe 2011, 7). That is why the Holocaust is such a big theme. That is why 9/11 is so interesting, and why personal witnesses are so important: Rothe claims, that the »genealogy of popular trauma culture includes an analysis of the transition in rhetoric from testimony to so-called victim talk and the survivor figures rise to hero status« (ibid., 5). This recycles the »Christian suffering-and-redemption trope of spiritual purification through physical mortification in trauma-and-recovery-narratives and encodes a latently voyeuristic kitsch sentiment as the dominant mode of reception« (ibid., 4, 2). Aren't we all a little traumatized? The single case is not to be taken seriously, everything is just the same.

Trauma, on the other hand, has a solid scientific background and can be applied regardless of the age of a text. Unlike Freud's theory, it is not culturally dependent. The notion of *PTSD* and *DESNOS* might be new, but the ways how people and characters tried to come to terms with traumatic experiences were always the same: it was fight, flight, or freeze. Today, we only have different and better tools to be able to better understand the structures at work, for example the

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<sup>32</sup> »Fictional characters do not exist outside of human psyches and human processes of mental (re-)construction which take part in authors and readers at all«.

<sup>33</sup> »It is an astonishing epistemological naïveté to claim that the statements of an empirical person can be verified ›definitively‹, whereas for fictitious characters a ›general indeterminacy‹ counts«; see the discussion about the memory of real persons which is described as being adequate all the time, in this paper page 172 seq.

neurobiological background, behavioural patterns, or the concept of a trauma scheme.<sup>34</sup> The question is not whether fictional characters are exactly the same as real characters, but rather if they react in a way we can understand because that is the way people (can) react.<sup>35</sup>

Why is this so important? The rejection of fiction and fictional characters is just the other side of the coin of the reluctance of postmodern theorists to concentrate on the single case and on narration. Fictional texts can help traumatised people: Homer, who is a truly venerable author, is proof that everybody is capable of writing about traumatic events without knowing the theory. Jonathan Shay, a psychiatrist working with Vietnam veterans in Boston, is the author of two books about the heroes of the Homeric epics, *Achilles in Vietnam* and *Odysseus in America*. Naturally, Achilles never was in Vietnam, just as Odysseus never was in America. Shay has managed to carve anthropological constants out of these old texts, namely the characteristic behaviours of heavily traumatised soldiers. His patients were fascinated: It helped them a lot to know that Odysseus, a fictional character from ancient times, had had the same problems. Re-reading Homer, Shay has found a fresh interpretation of these old texts, too: He sees the home-ward journey of Odysseus which lasted ten years as an allegory of the inability of a veteran who has already come home to live a civilian life. The episode in the *Lotus Land* can be interpreted as an allegory of drug-taking, Odysseus clinging to a branch over the whirlpool between Scylla and Charybdis is an allegory for the inability to do anything at all in civilian life, or the episodes with Calypso and Circe can stand for the flight into sexuality. Shay tries to decode Odysseus's »adventures in wonderland – the most famous part of the epic – as an allegory of real problems of combat veterans returning to civilian society« (Shay 2002, 2). In this respect, the reproach »ontological incompleteness« of a character, the fictional structure of a story or other theoretical problems does not hit the target.

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34 According to Fischer/Riedesser, a trauma scheme is a »zentrales, in der traumatischen Situation aktiviertes Wahrnehmungs-/Handlungsschema, das im Sinne von Trauma als einem unterbrochenen Handlungsansatz mit Kampf- und Fluchttendenz die traumatische Erfahrung im Gedächtnis speichert«. It has »die Tendenz zur Wiederholung, [...], in diesem Falle verstärkt durch die Tendenz zur Wiederaufnahme unterbrochener Handlungen« (2009, 395–96; »a central scheme of perception/action in the traumatic scene, which (in the sense of a discontinued action with a fight-flight-tendency) stores the traumatic experience in memory« and which has »a tendency to be repeated, in this case strengthened by the tendency to recapture actions that have been disconnected«). The notion of trauma scheme is a powerful tool in literary research (see page 189 in this paper).

35 See Jannidis 2006 and Currie 2010 for a different point of view.

Unsurprisingly, none of the papers in *JLT* or (as far as I know) of the postmodern school cited Shay. His work stands opposite to the popular trauma culture.

## 2.2 Life Stories

Why do we read stories about traumatised characters at all? If we define a traumatic experience as an experience that overburdens or makes a person unable to integrate it into his or her view of the world and the self and which is difficult to tell, then the life of a traumatised person seems to be the biggest challenge for the formulation of a life story ever, it is the most fascinating »cognitive experiment«, as Lisa Zunshine calls the novel in general (Zunshine 2006, 22). The traumatising experience cannot be integrated, but it must be.

Obviously, we cannot stand a fragmented and orderless life story, because we always want life stories to make sense (and in my opinion this is the main reason why postmodern theorists characterize narrating a trauma as a sacrilege). The stories should explain why it is worth living. Dan P. McAdams defines what a good life story should look like. He sums up six categories which make a story credible: »coherence«, »openness« (you can go on), »credibility« (there are no »gross distortions«), »differentiation«, »reconciliation between and among conflicting forces in the story« because »[h]armony and resolution must prevail«, and »generative integration«, which means that in »mature identity, the adult is able to function as a productive and contributing member of society« (McAdams 1993, 111–112). All these categories stand opposite to a-causal and a-temporal stored traumatic experiences as experiences of senselessness. For McAdams, the main reason to write an autobiography is »the desire to accomplish some meaningful personal integration« (ibid., 32). Hence the reason why we are so interested in stories about traumatic events might be that we want to read or watch them because we want to see how the worst case is incorporated in one life story. The worst must make sense, somehow. That is why we like happy endings, too. Traumakitsch perverts this very need.

## 3 Stefan Zweig's *Schachnovelle* – A Case Study

It is easy to criticize, it is more difficult to offer better interpretations. What can you do to avoid the bourgeois coldness and the reifications of postmodern trauma theory? It may help to concentrate on one single text, to concentrate on the single fate of an author, or the fate of a single character, and always to be aware of a

benefit of the interpretation.<sup>36</sup> This does not mean that I want to offer a fully-fledged new theory of interpretation, quite the contrary. I want to show how it is possible to offer a new interpretation of a text only by using trauma theory as one tool among others. Offering an interpretation of a text by a special and new trauma-text-theory would make the same mistake as the postmodern view of trauma, e. g. it would install a new master narration or master technique by presenting a single case to be paradigmatic for »the« trauma or for all cases of trauma.<sup>37</sup>

A trauma is a special challenge for the victim of a life-threatening situation. It is possible that the trauma theory approach reveals an underlying trauma scheme, or it can also show how a character has been formed so that his special traumatic experience is made bearable. The notion of trauma scheme is fascinating (see footnote 34 in this paper): Trauma schemes often determine a character. Maybe there is a connection between the life of an author who has had traumatic experiences and his or her work?

Stefan Zweigs *Schachnovelle* is his most famous text. He finished working on the text in 1942, after he had escaped from national socialist Germany to Petropolis in Brazil via England and the USA. He luckily had a residence permit for Brazil. He had sent four copies of *Schachnovelle* to several publishers and friends before he and his wife committed suicide. After his death, the novel was first published in Brazilian and then in 1943 in German in the famous publishing house of Bermann-Fischer in Stockholm.

Dr. B., the protagonist of the novel, was caught by the Nazis. They locked him away in a hotel because they wanted to extort some information from him. After some time, Dr. B. had the opportunity to steal a book about famous chess-games from one of his wards. In his cell, he played chess against himself, getting a »Schachvergiftung« (a contamination with chess). This happened a long time ago: Now Dr. B. is on a ship, where he tells his story to the narrator. The world champion of chess, Czentovic, is also on board of the ship. Dr. B. helps a group of passengers to gain a draw against the master. He is enthusiastically asked to line up against Czentovic for a second time, now on his own. He wins and immediately starts a third game although he promised to stop playing after the second round. While he is playing, Dr. B. has a flashback, a typical sign for a traumatised person. He starts walking up and down the room: »Und schaudernd erkannte ich, es reproduzierte

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<sup>36</sup> See my »Batmans Metamorphosen«, where I tried to carve out the trauma scheme of Bob Kane, one of the inventors of Batman: As a child, he became severely injured in a fight with a street gang and formed Batman as a sort of »Rettungsphantasie«, a fantasy of rescue in the Freudian sense, in combining various concepts as Jekyll and Hyde, Zorro, Dr. Moireau, Sherlock Holmes, and others.

<sup>37</sup> See Neukomm 2005 and Thoma 2005 for a different approach.

unbewusst dieses Auf und Ab das Ausmaß seiner einstmaligen Zelle; genau so musste er in den Monaten des Eingesperrtseins auf und ab gerannt sein« (the narrator in Zweig 2013, 71).<sup>38</sup>

There are fascinating parallels between Dr. B.'s fate and the fate of Zweig.<sup>39</sup> Putting aside the biographical background (why did Zweig's wife commit suicide, too?) and the obvious flaws of the story (for example the wrong details about chess), one strange thing about the novel has been overseen so far: At first sight, the scenario in the hotel resembles a kind of torture which was (partly) invented about 20 years later and became part of a wider concept of the US secret services. The American psychiatrist Albert Bidermann developed his so-called »3-D-System« after he examined several US-soldiers who had been tortured in the Korean War: Every torture depends on the three big »Ds«, dependence, debility, and dread. Methods to break the victim are isolated imprisonment, the monopolisation of experience (the victim can only experience what he is allowed to), total devastation, humiliation, beating, little favours, and useless actions like standing on your feet for a long time or shovelling sand from one side to the other. In the 1960s, Bidermann's concept was refined: The CIA financed research in Montreal on sensory deprivation as a new technique of torturing. The psychologist Donald O. Hebb found out that the identity of the proband began to dissolve after two or three days of wearing headphones and clothes filled with rubber foam (compare this with the pictures of the inmates in Guantanamo).

What does that mean? Is Zweig a specialist for techniques of torture? Since this is unlikely, one might suspect a trauma scheme at work: Maybe, Dr. B. is the projection of Zweig's desperation as a traumatised refugee? In Zweig's autobiography *Die Welt von Gestern* (»The World of Yesterday«) there are passages which resemble the »torture« in *Schachnovelle*:<sup>40</sup>

Wenn ich zusammenrechne, wie viele Formulare ich ausgefüllt habe in diesen Jahren, Erklärungen bei jeder Reise, [...] wie viele Stunden ich gestanden in Vorzimmern von Konsulaten und Behörden, vor wie vielen Beamten ich gesessen habe, [...] wie viele Durch-

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**38** »With a shudder, I realized that this pacing back and forth unconsciously reproduced the dimensions of his former cell; in the months of captivity he must have marched up and down like a caged animal« (Zweig 2006, 76).

**39** For further details see Fricke 2006, passim.

**40** »If I reckon upon the many forms I have filled out during these years, declarations on every trip, [...] the many hours I have spent [the translation »have spent« misses the point, it must be »have stood« for the German »gestanden«] in ante-rooms of consulates and officials, [...] the many examinations and interrogations at frontiers I have been through, then I feel keenly how much human dignity has been lost in this century [...]« (Zweig 1953, 411).



suchungen an Grenzen und Befragungen ich mitgemacht, dann empfinde ich erst, wieviel von der Menschenwürde verlorengegangen ist in diesem Jahrhundert [...].  
(Zweig 2003, 264 seq.)

After having left London, Zweig waited in Bath »wehrlos wie eine Fliege, machtlos wie eine Schnecke [...]. Da saß man und harrte und starrte ins Leere wie ein Verurteilter in seiner Zelle, eingemauert, eingekettet in dieses sinnlose, kraftlose Warten und Warten« (Zweig 2003, 486).<sup>41</sup> Dr. B. describes the same situation in *Schachnovelle* (Zweig 2013, 45–46): »[Sie] ließen einen warten, sinnlos-sinnvoll warten, eine Stunde, zwei Stunden, drei Stunden vor der Vernehmung, um den Körper müde, um die Seele mürbe zu machen. Und man ließ mich besonders lange warten [...], zwei geschlagene Stunden im Vorzimmer stehend warten«. <sup>42</sup> For Zweig, this seems to be a traumatising situation experienced over and over again. Waiting and feeling helpless formed a trauma scheme, fight as well as flight was impossible: He could only freeze. This might be a case of sequential traumatisation, as defined by Hans Keilson. Fischer and Riedesser give an overview:

Die sequenzielle Traumatisierung bezeichnet über eine zeitlich verteilte Polytraumatisierung hinaus eine in sich kohärente Verlaufsgestalt der traumatischen Erfahrung. Dies wird verständlich, wenn man bedenkt, dass jede neue Verfolgungswelle wieder die alten Wunden aufreißt und eine zeitlich zwar verteilte, subjektiv jedoch kohärente Verfolgungssituation erlebt wird.

(Fischer/Riedesser 2009, 151)<sup>43</sup>

It is the experience of being pursued which is interpreted as a situation that inevitably re-occurs again and again and again. And that's how it goes.

Taking this into account, why was Zweig's novel that successful (in sales and as a literary work)? He himself had thought that it »was not suitable so much for the large public as for a smaller circle«, as he mentioned in a letter to

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**41** »[D]efenceless as a fly, helpless as a snail. [...] There one sat, waiting and staring into the void like a doomed man in his cell, immured, enmeshed in this senseless, helpless waiting and waiting« (Zweig 2003, 430).

**42** »[They] kept you waiting, a deliberately pointless wait of an hour, of two hours, three hours before the interrogation itself, to tire your body and wear your mind down [...]. I waited standing in the ante-room for two full hours« (Zweig 2006, 47).

**43** »Sequential traumatisation characterises a coherent course of the traumatic experience, surmounting a polytraumatisation which is spread over time. This is easy to understand if you keep in mind that every single new wave of persecution reopens the old wounds again, and a situation spread over time subjectively is felt to be a coherent situation of persecution«.

Ben Huebsch (quoted by Berlin 1999, 255). At the end of the story, Dr. B. has a flashback, and the narrator calms him down:

Ich sagte nichts als: »Remember!« und fuhr ihm gleichzeitig mit dem Finger über die Narbe an seiner Hand. [...] »Um Gotteswillen«, flüsterte er mit blassen Lippen. »Habe ich etwas Unsinniges gesagt oder getan ... bin ich am Ende wieder ...?«  
 »Nein«, flüsterte ich leise. »Aber Sie müssen sofort die Partie abbrechen. Es ist höchste Zeit. Erinnern Sie sich, was der Arzt gesagt hat!<sup>44</sup> [...] Nur ich wußte, warum dieser Mann nie mehr ein Schachbrett berühren würde, indes die andern ein wenig verwirrt zurückblieben mit dem ungewissen Gefühl, mit knapper Not etwas Unbehaglichem und Gefährlichem entgangen zu sein [...].  
 (Zweig 2013, 76–77)<sup>45</sup>

The message is clear: Keep your mouth shut, and don't you ever talk about the past and your traumatising experiences because this single fate is too »uncomfortable and dangerous« for the public. In 1967, the German psychoanalysts Margarete and Alexander Mitscherlich published their ground-breaking study of the German inability to grieve. In the case of *Schachnovelle*, not to be able to grieve does not hit the target: It is not the inability to grieve, but the fear of remembering. That is the reason why such a text written by a Jew was warmly welcomed in Germany in the 1950s, because it forbids remembering.

My interpretation of *Schachnovelle* offers a benefit. In answering several questions it makes use of trauma theory to understand the behaviour of one person (Zweig) and of one of his characters (Dr. B.) in using the notion of flashback and sequential traumatising, and it offers an explanation for a paradox: Why does Zweig describe a technique of torture which was invented 20 years later? My proposal is: He translated a trauma scheme, e. g. his traumatic experiences as a helpless refugee on the fate of Dr. B. Additionally, I offer an answer to the question why *Schachnovelle* was so successful although Zweig rated it a minor work, because it forbids remembering and could easily become a fragment of Holocaust-Kitsch.

Is there any other use in this interpretation? I hope that it makes more sensitive for the problems of refugees and for the use of the Holocaust as a means to an end: In 2011 Günter Franzen in a radio programme proposed a different way

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<sup>44</sup> The doctor forbid him to ever play chess again.

<sup>45</sup> »All I said was ›Remember‹, at the same time running my finger over his scar on his hand. [...] ›For God's sake‹, he whispered, his lips pale. ›Have I said or done something absurd ... can I after all have gone ...?‹ / ›No‹, I whispered quietly. ›But you must break this game off at once. It's high time. Remember what the doctor told you!‹ [...] Only I knew why the man would never touch a chessboard again while the others were left, slightly confused, with the uncertain feeling of having only just avoided something uncomfortable and dangerous« (Zweig 2006, 82–83).

of remembering the 9<sup>th</sup> of November 1938 (the date of the »Kristallnacht«) and mentioned a new edition of the letters between Stefan Zweig and Joseph Roth:<sup>46</sup>

Man muss kein geschichtsvergessener Anhänger der Schlussstrich-Theorie sein, um angesichts des alljährlich von der politischen Klasse unseres Landes inszenierten Gedächtnistheaters nur noch peinlich berührt zu sein. [...] [Die Briefe von Roth an Zweig sind eine] Geschichte des Untergangs einer Welt. [...] Joseph Roth starb am 27. Mai 1939 in einem Pariser Armenhospital an Lungenentzündung. Stefan Zweig und seine Frau Charlotte Altmann nahmen sich am 22. Februar 1942 im brasilianischen Petrópolis mit einer Überdosis Veronal das Leben. Zwei von sechs Millionen, deren Schicksal uns an diesem 9. November des Jahres 2011 nicht kalt lassen kann. [...] Die Zukunft einer generationsübergreifenden Erinnerungskultur liegt in der stillen und unaufdringlichen Verlebendigung von Einzelschicksalen.

Two of six million? Neither the Zweigs nor Roth died in a concentration camp. On the contrary, the letters show the very peculiar relationship between the two authors. Both had their problems: Zweig was afraid to have lost his audience, was terrified by his displacement; Roth had to fight alcoholism and needed money. Zweig had difficulties with Roth's behaviour; Roth despised Zweig because of his financial success as a writer. Their letters show their personal problems and shine a light on their peculiar relationship. So, why should this relationship with its special entanglements serve as an example for six million murdered Jews? To generalize these two fates is exactly what Franzen blames the political speech makers for. And there is an assertion in Franzen's speech which aims in the same direction: He stated that Stefan and Charlotte Zweig committed suicide using Veronal. This is wrong, because only Stefan took Veronal, but Lotte took formic acid (the poison of the poor) later and died after a severe death struggle. Again, Franzen created Holocaust-Kitsch.

When writing my first article on Zweig's »Chess« I became more and more upset. Zweig had asked his first wife Friderike if she was willing to commit suicide together with him, just as his role model Heinrich von Kleist and Henriette Vogel had done. Friderike refused, and later on Stefan married again: Lotte. I discussed my paper several times with my father, the trauma therapist Peter Fricke, on the telephone: How could Zweig do that? And why does nobody want to know the

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46 »One needs not to be an ahistorical follower of the dogma of drawing the line under history, to be embarrassed by the staged theatre of remembrance by the political class of our country. [...] [The letters of Roth and Zweig are a] history of the decline of a world. [...] Joseph Roth died of double pneumonia in a hospital for the poor in Paris on May 27<sup>th</sup> 1939. Stefan Zweig and his wife Charlotte Altmann committed suicide on February 22<sup>th</sup> 1942 in Petropolis through an overdose of Veronal. Two [Roth and Zweig] out of six million, whose fate cannot leave us cold on this November 9<sup>th</sup> 2011. [...] The future for a culture of remembrance for all generations lies in this quiet and discreet revival of individual fates.«

details?<sup>47</sup> My father calmed me down by saying over thirty times »But what a poor guy!«. Only after these slow-downs I became able to face my counter-transference. Only after that I was able to try to understand Zweig's single fate as a chain of traumata, as a sequential traumatisation. Something unexplainable became explainable – in a dialectical way, as Fischer might put it.

## 4 Résumé and Guidelines

Considering that applying a (new) theory should result in a valid and new interpretation of a text (which itself should be open for questions) and not in inaugurating a new master narration, I think that we can benefit from the use of trauma theory in a special way: It endows us with a solid scientific background which enables us to approach a single (sometimes often well-known) text in an empathetic, flexible and at the same time reserved way, ideally without any moral presuppositions. This way of approaching may be able to explain why we respond to certain texts and especially to certain characters the way we do regardless of the age of the texts. This way of dealing with fates and persons and characters is not cold, but empathetic, and it is politically relevant.

Five guidelines might help you when applying trauma theory (which is nevertheless a difficult, challenging and dangerous task):

1. Be careful to generalize and to reificate (»the« trauma, all the victims, the perpetrator, the survivor). Concentrate on the single case.
2. Be careful whom to cite (Freud, Lacan, Caruth, and others).
3. Be careful in using any normative prescriptions (»The victim is not allowed to do this and that«).
4. Always think of the aim and the benefit of your own interpretation: What do you want? Do you really need trauma theory?
5. Be careful with yourself and be aware of your counter-transferences: Trauma means extreme suffering. Trauma theory is no fun-sport, and if taken seriously, it will change you, as Friedrich Nietzsche knew: »He who fights with monsters should look to it that he himself does not become a monster. And when you gaze long into an abyss the abyss also gazes into you.«<sup>48</sup>

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<sup>47</sup> Cf. my »Verstreute Perlen in viel Aspik«, a review of Oliver Matuscheks *Drei Leben. Stefan Zweig – Eine Biographie*. Frankfurt/M.: S. Fischer 2006. Matuschek's work on the life of Zweig is often dominated by pathos of concern and seems not to be interested in asking critical questions.

<sup>48</sup> Nietzsche 1973, 84 (Aphorism 146 from *Beyond Good and Evil* [1886]).

In memoriam of my parents, for Andreas Gruschka, with thanks to Katrin Sonnenschein.

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