

Remembering Collective Violence:
Broadening the Notion of Traumatic Memory in Post-Conflict Rehabilitation
Ruth Kevers, Peter Rober, Ilse Derluyn & Lucia De Haene

To cite this article: Ruth Kevers, Peter Rober, Ilse Derluyn & Lucia De Haene (2016). Remembering collective violence: Broadening the notion of traumatic memory in post-conflict rehabilitation. Culture, Medicine, and Psychiatry, (), 1-21, DOI: 10.1007/s11013-016-9490-y

To link to this article: <http://link.springer.com/article/10.1007/s11013-016-9490-y>

Abstract

In the aftermath of war and armed conflict, individuals and communities face the challenge of dealing with recollections of violence and atrocity. This article aims to contribute to a better understanding of processes of remembering and forgetting histories of violence in post-conflict communities and to reflect on related implications for trauma rehabilitation in post-conflict settings. Starting from the observation that memory operates at the core of PTSD symptomatology, we more closely explore how this notion of traumatic memory is conceptualized within PTSD-centered research and interventions. Subsequently, we aim to broaden this understanding of traumatic memory and post-trauma care by connecting to findings from social memory studies and transcultural trauma research. Drawing on an analysis of scholarly literature, this analysis develops into a perspective on memory that moves beyond a symptomatic framing toward an understanding of memory that emphasizes its relational, political, moral, and cultural nature. Post-conflict memory is presented as inextricably embedded in communal relations, involving ongoing trade-offs between individual and collective responses to trauma and a complex negotiation of speech and silence. In a concluding discussion, we develop implications of this broadened understanding for post-conflict trauma-focused rehabilitation.

Keywords: collective violence, trauma, PTSD, memory, rehabilitation

Remembering Collective Violence:

Broadening the Notion of Traumatic Memory in Post-Conflict Rehabilitation

In different regions around the world, war and armed conflict is again on the rise after a major decrease following the end of the Cold War (Guéhenno 2015). In the aftermath of conflict, individuals and communities face the challenge of dealing with memories of human rights violations, yet scholars have paid relatively scant attention to the ways in which individuals and communities react to collective violence through microdynamics of memory in relation to social practices, rituals, symptoms, and healing (Hinton and Hinton 2015). This limited exploration of practices of memory, suffering and healing in the wake of atrocity could be related to a predominant framing of processes of remembering violence within the vocabulary of posttraumatic suffering within psychiatric nosology (Summerfield 1998).

In this article, we aim to contribute to a furthered understanding of processes of remembering in post-conflict contexts by scrutinizing the dominant conceptualization of memory in psychiatric nosology and enriching this understanding with insights from social memory studies and transcultural trauma research. While memory lies at the core of posttraumatic stress disorder as main vocabulary to account for posttraumatic suffering within psychiatric nosology, scholarly literature does not yet address the implications of current criticisms raised against the notion of posttraumatic stress disorder for the notion of memory underpinning this PTSD construct. In this article, we take up this question and explore how current criticisms raised against the PTSD discourse may extend to the notion of memory. Hereto, we connect to scholarly work within social memory studies, medical anthropology and transcultural psychiatry in order to develop a broadened understanding of remembering collective violence that moves beyond a framing within the vocabulary of posttraumatic

stress. This analysis then leads to developing possible implications for post-conflict trauma care.

The predominant framing of memories of collective violence within the language of posttraumatic stress is strongly embedded within extended scholarly work addressing psychosocial sequelae and healing in the aftermath of atrocity. In the past decades, studies have consistently documented the long-term health impact and psychosocial sequelae of being exposed to collective violence, drawing attention to mental health sequelae and adverse changes in the survivor's social ecology (e.g., family separation; perceived stigma and distrust in the community) (Betancourt, et al., 2012; Bolton, et al., 2012; Verelst, et al., 2014). According to this understanding of consequences of organized violence at both the level of individual functioning as well as the broader social fabric, diverse psychosocial interventions are implemented as part of humanitarian responses (Tol and van Ommeren 2012). These interventions are increasingly characterized by a holistic and community-based approach, with an important role for prevention (e.g., training coping skills), social interventions (e.g., fostering economic development initiatives), and family and community support (e.g., promoting the restoration of community activities) (Derluyn, et al., 2013; Hobfoll, et al., 2007; Jordans, et al., 2009; Tol, et al., 2011; van Ommeren, et al., 2005). However, despite the growing interest in these broad, community-oriented psychosocial approaches, research and evidence is still largely dominated by a strong focus on alleviating posttraumatic stress (Jordans, et al., 2009; Tol, et al., 2011). These trauma-focused approaches are invoked by consistent findings of the protracted trauma-related health impact of life experiences of organized violence, with robust epidemiological surveys in conflict-affected populations documenting heightened reported prevalence of posttraumatic stress disorder (30,6%) and depression (30,8%) in comparison to the general population average (Steel, et al., 2009). Particularly PTSD, a mental health condition resulting from exposure to traumatic life-events

and characterized by the oscillation between intrusion and avoidance of trauma-related memories (PTSD; American Psychiatric Association 2013), is often connected with experiencing war and violence (Johnson and Thompson 2008; Neria, et al., 2008). Given this strong evidence of trauma-related sequelae in violence-affected individuals and communities, post-conflict trauma care remains largely trauma-focused: many interventions that are outlined and evaluated in systematic reviews and treatment outcome studies share a central focus on reducing PTSD symptomatology (Jordans, et al., 2009; McFarlane and Kaplan 2012; Neuner, et al., 2004). Here, through consistently linking trauma exposure to the psychiatric condition of PTSD, mental health interventions have located the notion of PTSD at the heart of their discourse (Breslau 2004; Pedersen 2002; Summerfield 1999, 2000), and have mainly focused on working through trauma through healing traumatic memory (Jordans, et al., 2009), in cognitive-behavioral approaches, psychiatric service, (narrative) exposure therapy, trauma counseling, or testimonial approaches (Schnyder and Cloitre 2015).

Over the past decades, these trauma-focused approaches and the related dominant notion of PTSD have become subject to a growing dissent. In this debate on the validity of PTSD as main vocabulary to conceptualize suffering and healing in the aftermath of man-made atrocity, various authors within medical anthropology and transcultural psychiatry (e.g., Almedom and Summerfield 2004; Breslau 2004; Fassin and Rechtman 2009; Hinton and Good 2015; Kirmayer, et al., 2007; Pedersen 2002; Summerfield 1996, 1999, 2001; Young 1995) have elaborated on the limitations of PTSD as model for diagnosis and treatment. First and especially pertaining to war-affected contexts, strong criticisms have been articulated to question how the PTSD discourse appears to transform systemic macro-forces of human rights violations into a medicalized micro-context of inner individual worlds (Blackwell 2005; Boyden and de Berry 2004; Brough, et al., 2013). Indeed, by strongly focusing on how traumatic events affect the individual's functioning, the PTSD discourse risks to disregard

how collective violence also pervasively affects social and cultural ways of life. Second, the psycho-medical model of PTSD has been criticized for its de-politicized logic in which traumatic events are isolated from the larger sociopolitical context (Bracken, et al., 1995). Such understanding ignores how survivors' recollections of collective violence almost invariably touch upon political themes and moral dynamics within communities (Foxen 2000; Zarowsky 2000). A third line of critique questions the application of the PTSD diagnosis across different populations and cultures, suggesting instead that screening instruments and interventions for trauma-related disorders should be preceded by an in-depth understanding of local idioms of distress and coping strategies (Hinton and Lewis-Fernández 2010; Pedersen, et al., 2008). A last point of dissent concerns the prevailing focus on symptom reduction in which social suffering is relabeled as a pathological condition, hereby focusing on vulnerability, while only limitedly addressing individual and community resilience (Almedom and Summerfield 2004; Fassin and Rechtman 2009; Isakson and Jurkovic 2013; Pupavac 2001).

In developing an understanding of remembering collective violence, scholarly work has not yet addressed how these critiques on the individualizing, depoliticizing, universalizing, and pathologizing tendencies potentially extend to the notion of traumatic memory underpinning the PTSD discourse. Given that memory constitutes the core of posttraumatic suffering in the PTSD discourse, it seems particularly relevant to scrutinize how these lines of critique may invite to broaden the understanding of traumatic memory with insights from social memory studies and critical scholarship in transcultural trauma studies, developing into an understanding of memory of collective violence that moves beyond a mere symptomatic framing. Indeed, as existing lines of critique on the PTSD discourse fundamentally challenge its individualizing understanding of traumatic suffering, it seems particularly meaningful to turn to these social memory studies in order to explore the

intersubjective constitution of memories of trauma in the specific context of collective violence.

In what follows, we first outline how memory constitutes the core of posttraumatic suffering in the PTSD discourse and describe how this notion of traumatic memory is conceptualized within trauma-focused research and care. We then explore how this notion can be broadened with findings from social memory studies and their interconnections with critical transcultural trauma studies within medical anthropology and transcultural psychiatry. Here, the lines of critique raised against the PTSD discourse operate as an analytical perspective from which to question how the prevailing notion of traumatic memory may be enriched. In a last section of the article, we formulate implications of this broadened conception of memory for post-conflict trauma care.

Memory at the Core of PTSD Symptomatology

The diagnostic construct of PTSD as response to previously experienced war-related violence has taken center stage in psychological and psychiatric research, playing a key role in both the assessment and treatment of the mental health impact of violent conflict in both western and non-western societies (Breslau 2004; Miller, et al., 2006). First included in the third edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-III) in 1980, it later increasingly surfaced as a common psychiatric diagnosis for children and adults who have experienced war and atrocity (Almedom and Summerfield 2004).

PTSD involves the development of characteristic symptoms following exposure to one or more traumatic events and is characterized by four symptom clusters, that is, re-experiencing, avoidance, negative cognitions and mood, and arousal (American Psychiatric Association 2013). Clearly, the interaction between the intrusion and avoidance of trauma-related memories is at the core of its symptomatology (Herman 1992). Individuals who suffer

from PTSD relive the traumatic past in the form of intrusive images and thoughts, nightmares and/or a compulsive replaying of the events. Here, the invasive re-experiencing of traumatic memories in the present (i.e., in the form of flashbacks) has been identified as an important element distinguishing PTSD from other disorders (Brewin 2015). At the same time, there is a tendency to avoid activities, places, thoughts, or feelings that may trigger reliving of the traumatic experiences, or even an inability to remember important aspects of the trauma. Kirmayer and colleagues appropriately observed that “the dynamics of memory and of attributional processes are crucial for the diagnosis of PTSD because the criteria require that the person remember and attribute his or her symptoms to the traumatic event” (Kirmayer, et al., 2007:7). Medical anthropologist Allan Young first unraveled the crucial importance of memory within PTSD pathology. In his much-vaunted historical and ethnographical analysis of the rise of PTSD as a biomedical diagnostic category (Young 1995), he claims that PTSD could not exist until scientists invented the concept of traumatic memory. This conception of traumatic memory glues together the etiological event and the syndrome of intrusion, avoidance and arousal caused by this traumatic stressor. This ‘inner logic’ of the PTSD diagnosis involves an assumption of chronology and causality: it is taken for granted that a certain etiological stressor precedes and causes a consecutive set of symptoms. Within this clinical narrative, event and symptom are connected by the traumatic memory of the event, given that without a conscious, verbal memory of the traumatic event, PTSD cannot be diagnosed (Young and Breslau 2007). Therefore, the memory of traumatic events is considered as the linchpin that holds together trauma and disorder in the construct of PTSD.

Given the observation that memory is key in the symptomatology of PTSD, it is particularly relevant to further scrutinize the notion of traumatic memory as it is conceptualized by PTSD researchers. Most psychological and psychiatric scholarship on

PTSD adheres to a biomedical approach to traumatic memory, linking the formation of traumatic memories to universally similar alterations in brain structures and biological substrates (Gilboa 2014; Kato, et al., 2006; Kolassa, et al., 2015; van der Kolk 2000). In individuals suffering from PTSD, changes in brain structures can be seen to result in widespread disturbance in general memory capacity, in the contents of trauma memories, and in a variety of memory processes (Bremner 2007; Brewin 2011). PTSD researchers document the neural processes underlying such changes in memory functioning, showing how the terrorizing quality of traumatic experiences leads to their incomplete coding by the brain's episodic memory system (Kolassa, et al., 2015; Schauer and Schauer 2010), which can in turn be explained by the disproportionate engagement of neural structures such as the hippocampus and amygdala. This results in easier activation of traumatic memories on the one hand, and a lack of contextual information being incorporated into the memory on the other hand (Neuner, et al., 2008). As a result of this intrusive and fragmented reliving of the traumatic experience, the central nervous system fails to synthesize these sensations into an integrated whole. Therefore, trauma survivors are often limited in their ability to verbalize their experience in detail and chronology (Schauer and Schauer 2010; van der Kolk 2000).

Mental health interventions developed to treat PTSD symptoms are numerous and diverse, but invariably trade on this biopsychomedical concept of memory. Narrative exposure therapy (Bichescu, et al., 2007), testimony therapy (Igreja, et al., 2004), and cognitively oriented therapy (Bouwer and Stein 1998) are examples of frequently studied and evidence-based treatments for survivors of collective violence (McFarlane and Kaplan 2012). What all these treatments share, is some form of exposure to the patients' memory of their traumatic experiences. Here, the restoration of memory functions and the creation of a coherent trauma narrative appears to be a central goal of these trauma-focused treatments (Schnyder and Cloitre 2015). To this purpose, they involve an invitation to recount the memories of

traumatic experiences that were part of one's personal life trajectory: through talking about destructive experiences, the individual can re-experience the event without feeling helpless, enabling emotional processing of the experience (van der Kolk 2000). Specifically, trauma-focused treatments aim to modify the neural fear memory network that was developed during the traumatic experience (Kolassa, et al., 2015). In prolonged exposure treatment, for example, the individual is asked to revisit and recount the traumatic memories over and over again in order to incorporate new and corrective information into the fear memory structure. This recounting is assumed to have several positive effects on the individual's functioning, decreasing anxiety and enhancing one's sense of self-control and personal competence (Nacasch, et al., 2014). Apart from these types of psychological interventions, research has also demonstrated the efficacy of pharmacological trauma treatments. Interventions involving the administration of beta blockers, such as propranolol, after the reactivation of traumatic memories have shown to reduce physiologic responding during subsequent mental imagery of the events, opposing the effects of stress hormones on fear conditioning (Brunet, et al., 2008). Summarizing, in order to modify the neural fear memory network that underpins PTSD symptomatology, all interventions require some form of revisiting of one's traumatic memories.

Broadening the Understanding of Traumatic Memory

While in the fields of psychological and psychiatric trauma studies, conceptualizations of traumatic memory and interventions oriented at healing dysfunctional memory are mainly developed from this biopsychomedical perspective, this prevailing notion of memory has not gone unchallenged. Indeed, some contributions within transcultural trauma studies have argued how war-related remembering should be located within specific cultural and socio-historic contexts (Dwyer and Santikarma 2007; Foxen 2000; Summerfield 1998). Here, these

arguments have mostly been developed as part of the larger debate on the notion of PTSD (Kienzler 2008), in which criticisms have been raised against the individualizing, depoliticizing, universalizing, and pathologizing tendencies of the trauma discourse and its predominant PTSD construct.

In what follows, we aim to scrutinize how these lines of critique might extend to the dominant understanding of traumatic memory within the PTSD discourse. Hereto, we adhere to these lines of critique as an analytical perspective from which we explore how the prevailing conceptualization of traumatic memory can be broadened by scholarship within the domain of social memory studies, in which remembering collective violence is fundamentally conceptualized as a relational process that is intricately embedded in a particular sociohistorical and cultural context (Jedlowski 2001; Misztal 2003; Olick and Robbins 1998). In the following subsections, we build on insights from social memory studies and their interconnections to critical transcultural trauma research, leading to a broadened understanding of remembering in war-affected contexts that aims to hold the relational, political, moral, and cultural aspects of remembering collective violence.

From Individualized to Relational Understanding

Biomedical approaches to traumatic memory consider the locus of traumatic memory to be the person's mind and, hereby, understand remembering as a process linked to the inner experience of an individual. Yet, in contrast to this individualizing notion of recollections of shocking experiences and suffering, various scholars within social memory studies have documented how these memories tend to be interdependent with the memories of others (Keightley 2010; Misztal 2003), and thus indivisible from their social context. Within disciplines like cultural anthropology and sociology, remembering has since long been interpreted as inherently social, influenced by Halbwachs' (1992) *On Collective Memory*,

elaborating on the various collective influences on memory. Collective memory can be understood as “a set of social representations concerning the past which each group produces, institutionalizes, guards and transmits through the interaction of its members” (Jedlowski 2001:33). Memories are thus shaped by the conceptual structures and processes of groups one belongs to, be it family, peers, or the larger social fabric of society. Within current scholarship in social memory studies, this interest has been further elaborated through an inter-subjectivist approach, emphasizing that, while it is always an individual who remembers, his or her memory is shaped by the relations to other people (Misztal 2003). This implies an understanding of memory that is “more intersubjective and dialogical than exclusively individual, more act than object, and more ongoing engagement than passive absorption and playback” (Lambek 1996:239).

According to these social memory studies, what is remembered and forgotten is socially negotiated and depends on the particular relational context. Yet, since most conflicts are associated with wide destruction of the social fabric (Derluyn, et al., 2013), a shared collective narrative of a community’s traumatic history can be lacking. Instead, community members may hold vastly different or even polarized memories of the traumatic events they lived through. While some of these accounts of the past will be voiced in the public sphere, others may be confined to the margins, hidden behind more dominant historical contents that are hierarchically superior (Foucault 2003). Here, it is important to recognize that groups and individuals have unequal means to generate accounts about the violent past: those in power can control, frame, and eventually even mask or bury the memory a group or individual holds of collective violence. Therefore, another common social response to a traumatic past event is silence and inhibition.

This silence can result from power differences, but is equally dependent on social expectations for recollection and different contexts for retelling. For example, while

Holocaust stories involve bearing witness to what is almost unanimously recognized as human catastrophe, personal stories of sexual abuse are shameful and damaging to the individual and family and may therefore be silenced (Kirmayer 1996). Silencing memories of violence and atrocity is thus determined by social conditions and negotiated within social groups. For example, by not organizing any commemoration activities, communities may convey a wish to forget a shameful and contested past (Vinitzky-Seroussi and Teegeer 2010), even if other community members may consider this silence disrespectful to the victims' memory. On the other hand, silence may be a means for bridging boundaries and producing possibilities for maintaining and nurturing social relations and reciprocal arrangements between community members (Argenti-Pillen 2003; Eastmond and Mannergren Selimovic 2012; Igreja 2008). For example, an ethnographic study in a small town in post-war Bosnia and Herzegovina demonstrated that neighbors had cordial interactions, irrespective of nationality or religion. During these interactions, not talking about the past was considered an effective means of building peace and showing respect for those who had lost loved ones. In that way, normal life could be rebuilt, despite conflicting memories of the war (Eastmond and Mannergren Selimovic 2012).

From Depoliticized to Political and Moral Action

The biomedical understanding of traumatic memory prevailing in PTSD-centered approaches carries the risk of a certain internalization and depoliticizing of traumatic memory, as if these recollections could be separated from the survivor's political and social context that precisely forms the locus of the traumatic predicament. Indeed, by neglecting the power dynamics and political contexts that give shape to the recall of specific events and interpretations, the PTSD-centered discourse risks to oversimplify the individual's past and remembering. Findings from within social memory studies challenge this depoliticized notion

and emphasize the political and moral claims that are at stake when recalling trauma (Lambek 1996; Zarowsky 2000), broadening the perspective on traumatic memory as marker of mental health functioning into understanding how remembering also inherently positions the individual within social and political positions and dynamics.

The *political* functioning of memory refers to “the processes of negotiation about whose conception of the past should prevail in public space” (Till 2012:7). From this perspective, remembering is understood as a political act through which people actively engage with that past and negotiate what has to be remembered and what should be forgotten (Galloway 2006). Given the often contested political and moral character of wars and violent conflicts, groups of people construct scripts which omit, correct, and occasionally lie about the past. Here, the consensual silencing of those aspects of past violence that are problematic is one way in which people deal with the aftermath of collective violence (Winter 2010). While some silences are thus socially accepted and created in order to restore normal life after conflict, it often turns out that memories that challenge the legitimacy of the authority of a regime are silenced in favor of the official, institutionalized master-narratives created to rework a complex story of loss and violence into a unilateral story of war and retribution (Green 2004; Le Roy, et al., 2010).

In order to challenge such dominant interpretations of the past that seek to oppress, community members may exert counter-memories (Foucault 1977) as a hidden strategy of resistance (Foxen 2000; Kleinman and Kleinman 1994; Zur 1999). This is illustrated in Hale’s (2012) depiction of the ways in which female members of the Sudanese Communist Party remember experiences of sexual harassment and physical abuse committed by men of their party. While in public contexts, these women voice the official story of a valiant party fighting the good fight and hence silence negative experiences in order not to discredit their comrades, they challenge this positive image in private meetings, by mocking the men,

gossiping about them, and expressing their disdain about the party's patriarchal governance. Expressing dissent from dominant accounts of the war may thus demonstrate itself in the (hidden) sharing of subaltern narratives, but it may also be shown in a less literal way through, for example, the use of humor. Sheftel (2012) documented how Bosnians negotiate victimhood, the absurdity of the war, and the controversial role of the international community within it by telling dark jokes.

In aiming for historical justice, large national and supra-national projects have been set up, providing an important place for testimonies of war victims whose suffering has been previously been silenced in the public sphere (Neumann and Anderson 2014). For example, the establishment of truth and reconciliation commissions (TRC) has demonstrated that survivors may benefit from talking about their traumatic memories in a socio-political setting, rather than disclosing experiences of suffering in a medical context, as is the case in most trauma-focused treatments (Blackwell 2005). Notably after periods of covert state violence, truth commissions can be an important means of establishing state accountability and may even be empowering to those who were silenced (Shaw 2005). However, whether testifying to the TRC is valorized by survivors depends on many factors, among which the expectations survivors have around the consequences of their talking, and the local strategies of healing and reintegration that were developed throughout their history (Hayner 2000). Shaw's (2005, 2007) ethnographic study during Sierra Leone's TRC indicated that participants narrated their memories in public in order to make a claim for material benefits and reconnection to the international community. Most survivors, however, were not keen to give statements because the public hearings valorized 'truth telling' as the preferred memory practice, while ignoring the 'forgive and forget' approach prevailing in the grassroots practices of post-conflict reconstruction.

In addition to the political functioning of memory, some scholars, often drawing on the legacy of the Holocaust, have proposed memory as a form of *moral* practice. This moral meaning of remembering is primarily understood as the ethical obligation to testify to historical traumatic events one has endured or witnessed in order to redress past wrongs and avoid recurrence of such events in the future (Neumann and Anderson 2014; Simon and Eppert 1997). Kirmayer (1996) has argued that the moral function of memory is to compel us to face what we wish to leave behind, as moral life is impossible when collective history of trauma is denied. This moral life seems to relate both to a quest for justice to those who endured the catastrophic events and to aspirations for what is yet to come. In this respect, testifying to atrocities serves as an expression of both survival and loss, simultaneously aspiring to redress the injustices of collective violence and to make a better future (Bourgeois-Guérin and Rousseau 2014). Moreover, in the wake of pervasive human rights violations, the moral meaning of remembering seems to be characterized by an ambiguity, since next to the obligation to remember, survivors can experience a moral imperative to silence the violence committed during war (De Haene, et al., 2012; Rousseau 2005; Rousseau and Measham 2007). For example, a study of the oral discourses of Cambodian killing fields survivors (Uehara, et al., 2001) illustrates how these survivors, in their confrontation with complex existential questions of loss and meaning, often struggle to narrativize their suffering. Here, the chaotic content and pattern of survivors' narratives of collective violence may actually vividly express the moral nature of the suffering brought about by man-made atrocity. This may also lead to understanding of how silencing certain traumatic events may operate as a way of expressing profound meaninglessness in the face of violence and injustice (De Haene, et al., 2012; Rousseau and Measham 2007).

From Universalized to Culture-Specific Understanding

While PTSD-oriented researchers and interventionists do not neglect that the clinical expression of PTSD symptoms may vary culturally, the similarities across different ethnic and cultural groups are emphasized (American Psychiatric Association 2013; Kolassa, et al., 2015). However, different scholars in the domain of social memory studies and critical transcultural trauma research argue how a valid understanding of remembering and forgetting necessitates locating these processes within their local cultural setting (Antze and Lambek 1996; Foxen 2010; von Peter 2009), as each cultural context has its particular notions of self, community, time, history, death, and suffering, depending on the narrative and discursive conventions implicit in the cultural model. While the notion of memory prevailing in global discourses (such as human rights) often assumes that narratives of the past represent coherent truths and enable a neat categorization of victims and perpetrators, the complexity of experiencing collective violence and atrocity rather results in a narrative style characterized by silences, ambivalences and contradictions (Foxen 2000). Related to this point, scholars challenge the universalist assumption that individuals who survived war and atrocities should ventilate their traumatic experiences if they are to recover properly (Summerfield 2000). Instead, they raise attention to the culturally diverse ways in which survivors engage with their memories of suffering.

Both the mechanisms and the functions of remembering a violent past are thus shaped by the cultural context (Alea and Wang 2015). For example, a key aspect of the trauma ontology of Cambodians who suffered atrocities during the Pol Pot period involves the experience of *khyâl* attacks, a condition that resembles panic attacks as described in western psychiatric nosology (Hinton, et al., 2010). During these attacks, traumatic memories are brought about in several ways, mostly involving somatic symptoms such as headache, dizziness, or exhaustion, pulling the person back to the emotion and memory time of the Pol Pot period. Recovering from these symptoms does not necessitate ‘talking through’ the

traumatic events, but involves complex treatments depending on the level of severity of the attacks (e.g., applying natural oils to the skin). Another example of a cultural manifestation of remembering is the case of Sinhalese women from Southern Sri Lanka who use a ‘language of caution’ when addressing memories of violence. Instead of talking about violence directly, these women use euphemisms for acts of atrocity, avoid names, use reported speech and convey a sense of doubt in order to oblige the listener to be actively involved in making sense of things (Argenti-Pillen 2003).

Hence, whether memories of violent conflict are expressed or not, does not only engage political and moral meanings, but also indicates cultural strategies in remembering man-made atrocity. Illustrative to this point is the case of a Balinese rice farmer who witnessed the massacre of several fellow villagers in the aftermath of a communist-backed coup attempt (Lemelson and Suryani 2006). The subsequent illness this man suffered from manifested itself in symptoms like social avoidance, intentional silence and visual and auditory hallucinations. Rather than framing this symptomatology as evidence for PTSD, this man’s intentional silence with regard to the bloodbath he witnessed can be partially explained by the Balinese cultural de-emphasis on the expression of negative emotional experiences and states.

In the same vein, various other scholars have documented the silencing of traumatic pasts as a cultural strategy (Eastmond and Mannergren Selimovic 2012; Isakson and Jurkovic 2013), illustrating how in different social and cultural contexts the avoidance of conversations about past suffering can be the predominant means of engaging with traumatic memories and can operate as a mechanism of coping and rebuilding life.

From Pathologizing to Strengths-Based Understanding

While the PTSD-centered approach emphasizes the distressful character of posttraumatic suffering and its impact on processes of retention and recall, scholars within social memory studies and transcultural trauma research are challenging the prevailing understanding of ‘memory as deficit’, and identify the distinctive ways in which social groups use memories and narratives in order to cope with post-conflict circumstances (Gemignani 2011; Ramsden and Ridge 2012). This focus on the ability of survivors to overcome post-conflict adversity by strategically employing memories and narratives aligns with the growing salutogenic lens in research on the impact of war and violent conflict. The strengths perspective that underpins these studies exceeds the individualized understanding of resilience that usually prevails in salutogenic research by equally focusing on its collective dimensions (Brough, et al., 2013; Nguyen-Gillham, et al., 2008; Sousa, et al., 2013).

Some authors have observed that the period surrounding war is sometimes remembered positively compared to the present, as this present is often imbued with frustration and despair with the broader political and economic structural weaknesses that often follow war and displacement. A study with displaced Somalis (Ramsden and Ridge 2012) elaborated on how parents, despite devastating memories of disruption and war, told idyllic stories of past family and community life. These stories of customs and practices that shaped their social life during the war provided them with a thread of continuity in their post-conflict lives. By drawing on these memories, they knew better how to respond to the current circumstances. In the same vein, a study by Foxen (2010) showed how Mayan Indians recounted the war not only as a time of hardship but also as a period of strong collective hope and solidarity, meaning that war-related memories not only carry despair or distress, but equally resonate the resilience of a community. Indeed, the hope that is attached to war-related memories often reflects commitments to restore social connections in the community or even dreams about macro-political change. Here, remembering collective violence does not

only reflect individual suffering but transmits a strong sense of social hope for a better future (Brough, et al., 2013).

Despite the positive roles memory work can fulfill in overcoming adversity and coping with post-conflict circumstances, it is important not to turn a blind eye to the fundamental lines of critique that have been raised against this salutogenic approach. The strengths perspective has been accused of taking an overly optimistic view of communities as forces for good. Even more importantly, it is considered in danger of blurring structural inequalities that hamper personal and social development by emphasizing individuals' and communities' ability to solve their own problems (Garrett 2015; Gray 2011). Therefore, it remains important to maintain a balanced understanding of (post-)conflict life, recognizing survivors as resilient actors, while ceaselessly denouncing the structural causes of social problems they face.

Summarizing the above, scholarship within social memory studies and transcultural trauma research suggests that remembering collective violence is a process that is socially negotiated, involving important political and moral motivations. Manifestations of memory are culturally shaped and influenced by the community's narrative and discursive conventions. Rather than being pathological signs of the past, the transmission of memories related to collective violence may also mirror the resilience communities exercise.

Broadening Practices of Trauma Rehabilitation in Post-Conflict Settings

The previous sections have illustrated how scholarship within social memory studies, transcultural psychiatry and anthropology meaningfully broadens the individualizing notion of traumatic memory prevailing within the PTSD discourse. Accordingly, it seems relevant to explore how related trauma-focused interventions in post-conflict settings may benefit from engaging more fully with the relational, political, moral, and cultural processes at stake in

traumatic memory invoked by man-made atrocity. Our analysis demonstrated how remembering traumatic experiences of collective violence is inextricably embedded in post-conflict communal relations. This understanding of post-conflict memory adheres to the intersubjectivist approach permeating social memory studies, and implies how a valid engagement with memory practices in the wake of collective violence necessitates to retain a sense of both its individual and collective dimensions (Misztal 2003). Here, it is important to recognize how trauma rehabilitation often entails changing the relationship to memories and memories' contextual meaning, with these re-memorialization processes always involving both personal and public processes (Hinton and Hinton 2015). Hence, the intersubjective, dynamic nature of memory in post-conflict contexts challenges us to imagine how trauma rehabilitation programs may build bridges between the clinical concerns of individuals and the social, cultural, and political contexts in which their suffering is embedded.

Here, it seems important to connect to the increasing argument for community-oriented psychosocial trauma interventions (Hobfoll, et al., 2007; Somasundaram and Sivayokan 2013) and consider the fragmentation of families and communities caused by collective violence by furthering the development of systemic or group interventions. Such community-based practices of trauma rehabilitation may create a space for engaging with and talking about the plurality of memories associated with trauma and, in addition, the plurality of strategies to work through self-estrangement and social ruptures (Kirmayer 2015). In this shared space, collective strategies of memory restructuring and the collective meanings associated with trauma may be discussed. Yet, one should be wary of monolithic initiatives that advocate the constitution of a collective memory that does not embrace the multiplicity of voices (Rousseau, et al., 2005). Rather, it is important to work towards a space where a variety of meanings can coexist and where there is sufficient sensitivity for individual and collective dynamics of appropriation and distancing of trauma-related memories (Rousseau, et

al., 2001). Concretely, artistic practices could play a role in such communal processes of healing, by providing a medium that enables the representation and negotiation of a community's struggle with remembering and forgetting in the wake of horrific violence (Labrador 2010).

In addition, understanding the remembering of collective violence as a process governed by socio-political contexts and cultural models points to the importance of embedding collective interventions within existing local and cultural constructions of remembering. By including the performance of cultural rituals and through relying on traditional or religious healers, painful memories can be transformed into new, socially negotiated interpretations of traumatic events (Cole 2004; Kohrt 2015). Such focus on cultural meaning, knowledge and practice invites to share and negotiate divergent worldviews regarding healing and suffering, but may equally connect to a shared sense of humanity (Rober and De Haene 2014), to those existential and moral experiences of solidarity, indignation, disconnection and meaninglessness invoked by man-made atrocity (De Haene and Rober in press; Rousseau and Measham 2007).

Further, our analysis has addressed the dynamics of ongoing trade-offs between individual and collective responses to trauma: what may be helpful or damaging for the individual and what might serve larger social, cultural, and political values may be in tension (Kirmayer, et al., 2007). Here, it seems meaningful for trauma-focused rehabilitation programs to maintain sensitivity for how individuals may suppress personal stories of loss and suffering in order to ensure the collective survival of the community and avoid the further fragmentation of the social fabric (Zarowsky 2000). Related to this point, it seems important to carefully engage with survivors' negotiation of disclosing and silencing traumatic memories within post-conflict predicaments. Instead of merely focusing on the disclosure of traumatic memories within trauma-focused interventions, our analysis indicates a shift beyond

a one-sided emphasis on the healing power of disclosure towards respectfully acknowledging survivors' practices of silence and engaging in a joined reflection on the intricate meanings assigned to silence and speech within individual and communal worlds (De Haene, et al., 2012; Rousseau, et al., 2001).

While group interventions may contribute to processes of trauma rehabilitation supported by the community and embedded within shared memories of collective violence, we would argue that a mere reliance on collective interventions may not be sufficient. Here, it is important to recognize how the post-conflict environment is a rhetorical arena that is always heavily constrained by ongoing politics that make some narratives tolerable and safe and others provocative, dangerous, or even unthinkable (Kirmayer 2015). As a result, community interventions that mainly focus on the restoration of social bonds may risk to pay insufficient attention to the needs and suffering of individuals. For example, an individual survivor's engagement with remembering collective violence might involve negotiating a balance between the need to internalize the group's memory and collective project, on the one hand, and the wish to share a personal story that deviates from this communal narrative on the other hand (Atlani and Rousseau 2000). In order to allow the expression of individual suffering, individual trauma-focused interventions may open up a distinct space in which disclosure of collective taboos (e.g., sexual violence) is permitted, while simultaneously enabling individuals to retain a sense of group harmony (Rousseau and Measham 2007). In order to increase the legitimacy of such individual interventions, practitioners might consider collaboration with key players within the community, given that such collaboration might reduce possible barriers to access treatment and increase practitioners' understanding of cultural meanings related to the discussion of trauma-related memories. Furthermore, the exploration of memories of collective violence in a safe and private space may allow

individuals who no longer find connection to their social environment to engage with the ambiguities and uncertainties surrounding their past and future.

Summarizing, our analysis does not point to a mere refraining from individual trauma-focused interventions within post-conflict settings. Although we have explicitly attempted to broaden the individualizing notion of memory prevailing in the PTSD discourse, individual trauma-focused interventions and an engagement with practices of memory as proposed by social memory studies can mutually inform each other. On the one hand, working with war-affected communities may involve group interventions and imply the returning to indigenous strategies of helping and healing (e.g., rituals, traditions) already in place in the community (Cole 2004; Hinton and Hinton 2015; Rousseau, et al., 2001). Here, engaging with local and cultural constructions of remembering may enrich dialogue and inscribe the rehabilitation process within their local universes of meaning. On the other hand, individual interventions that allow for the private exploration of war-related memories remain vital. Here, the PTSD construct can give some individuals breathing room to express pain, sorrow and anger in a legitimate way and permit disclosure when the collective taboo becomes unbearable (Atlani and Rousseau 2000).

Acknowledging this complexity allows for new perspectives in post-conflict trauma rehabilitation, perspectives that locate the intrinsically relational processes of remembering and forgetting within the multilayered ontology of trauma survivors' subjectivity and life trajectories.

Ethical approval: This article does not contain any studies with human participants or animals performed by any of the authors.

References

Alea, Nicole, and Qi Wang

- 2015 Going Global: The Functions of Autobiographical Memory in Cultural Context. *Memory* 23(1): 1-10.
- Almedom, Astier M., and Derek Summerfield
- 2004 Mental Well-Being in Settings of 'Complex Emergency': An Overview. *Journal of Biosocial Sciences* 36: 381-388.
- American Psychiatric Association
- 2013 *Diagnostic and Statistical Manual of Mental Disorders*. 5th Edition. Washington, DC: American Psychiatric Association.
- Antze, Paul, and Michael Lambek, eds.
- 1996 *Tense Past: Cultural Essays in Trauma and Memory*. New York, NY: Routledge.
- Argenti-Pillen, Alex
- 2003 *Masking Terror. How Women Contain Violence in Southern Sri Lanka*. Philadelphia, PA: University of Pennsylvania Press.
- Atlani, Laëtitia, and Cécile Rousseau
- 2000 The Politics of Culture in Humanitarian Aid to Women Refugees who have Experienced Sexual Violence. *Transcultural Psychiatry* 37(3): 435-449.
- Betancourt, Theresa S., Ryan McBain, Elizabeth A. Newnham, and Robert T. Brennan
- 2012 Trajectories of Internalizing Problems in War-Affected Sierra Leonean Youth: Examining Conflict and Postconflict Factors. *Child Development* 84(2): 455-470.
- Bichescu, Dana, Frank Neuner, Maggie Schauer, and Thomas Elbert
- 2007 Narrative Exposure Therapy for Political Imprisonment-Related Chronic Posttraumatic Stress Disorder and Depression. *Behavior Research and Therapy* 45(9): 2212-2220.
- Blackwell, Dick
- 2005 Psychotherapy, Politics and Trauma: Working with Survivors of Torture and Organized Violence. *Group Analysis* 38: 307-323.
- Bolton, Paul, Pamela J. Surkan, Amber E. Gray, and Marine Desmousseaux
- 2012 The Mental Health and Psychosocial Effects of Organized Violence: A Qualitative Study in Northern Haiti. *Transcultural Psychiatry* 49(3-4): 590-612.
- Bourgeois-Guérin, Elise, and Cécile Rousseau
- 2014 La Survie Comme Don: Réflexions Entourant les Enjeux de la Vie Suite au Génocide chez des Hommes Rwandais. *L'Autre* 15: 55-63.
- Bouwer, Colin, and Dan J. Stein
- 1998 Survivors of Torture Presenting at an Anxiety Disorders Clinic: Symptomatology and Pharmacotherapy. *The Journal of Nervous and Mental Disease* 186(5): 316-318.
- Boyden, Jo, and Joanna de Berry, eds.
- 2004 *Children and Youth on the Front Line: Ethnography, Armed Conflict and Displacement*. New York, NY: Berghahn.
- Bracken, Patrick J., Joan E. Giller, and Derek Summerfield
- 1995 Psychological Responses to War and Atrocity: The Limitations of Current Concepts. *Social Science and Medicine* 40(8): 1073-1082.
- Bremner, James Douglas
- 2007 Does Stress Damage the Brain? *In Understanding Trauma. Integrating Biological, Clinical, and Cultural Perspectives*. Laurence J. Kirmayer, Robert Lemelson, and Mark Barad, eds., pp. 118-141. New York, NY: Cambridge University Press.
- Brewin, Chris R.
- 2011 The Nature and Significance of Memory Disturbance in Posttraumatic Stress Disorder. *Annual Review of Clinical Psychology* 7(1): 203-227.
- Brewin, Chris R.

- 2015 Re-Experiencing Traumatic Events in PTSD: New Avenues in Research on Intrusive Memories and Flashbacks. *European Journal of Psychotraumatology* 6.
- Breslau, Joshua
 2004 Cultures of Trauma: Anthropological Views of Posttraumatic Stress Disorder in International Health. *Culture, Medicine, and Psychiatry* 28: 113-126.
- Brough, Mark, Robert Schweitzer, Jane Shakespeare-Finch, Lyn Vromans, and Julie King
 2013 Unpacking the Micro-Macro Nexus: Narratives of Suffering and Hope among Refugees from Burma Recently Settled in Australia. *Journal of Refugee Studies* 26(2): 207-225.
- Brunet, Alain, Scott P. Orr, Jacques Tremblay, Kate Robertson, Karim Nader, and Roger K. Pitman
 2008 Effect of Post-Retrieval Propranolol on Psychophysiologic Responding During Subsequent Script-Driven Traumatic Imagery in Post-Traumatic Stress Disorder. *Journal of Psychiatric Research* 42(6): 503-506.
- Cole, Jennifer
 2004 Painful Memories: Ritual and the Transformation of Community Trauma. *Culture, Medicine, and Psychiatry* 28: 87-105.
- De Haene, Lucia, and Peter Rober
 in press Looking for a Home: An Exploration of Jacques Derrida's Notion of Hospitality in Therapeutic Practice.
- De Haene, Lucia, Peter Rober, Peter Adriaenssens, and Karine Verschueren
 2012 Voices of Dialogue and Directivity in Family Therapy with Refugees: Evolving Ideas about Dialogical Refugee Care. *Family Process* 51(3): 391-404.
- Derluyn, Ilse, Sofie Vindevogel, and Lucia De Haene
 2013 Toward a Relational Understanding of the Reintegration and Rehabilitation Processes of Former Child Soldiers. *Journal of Aggression, Maltreatment, and Trauma* 22(8): 869-886.
- Dwyer, Leslie, and Degung Santikarma
 2007 Posttraumatic Politics: Violence, Memory, and Biomedical Discourse in Bali. *In Understanding Trauma. Integrating Biological, Clinical, and Cultural Perspectives.* Laurence J. Kirmayer, Robert Lemelson, and Mark Barad, eds., pp. 403-432. New York, NY: Cambridge University Press.
- Eastmond, Marita, and Johanna Mannergren Selimovic
 2012 Silence as Possibility in Postwar Everyday Life. *The International Journal of Transitional Justice* 6: 502-524.
- Fassin, Didier, and Richard Rechtman
 2009 The Empire of Trauma. An Inquiry into the Condition of Victimhood. Princeton, NJ: Princeton University Press.
- Foucault, Michel
 1977 Language, Counter-Memory, Practice: Selected Essays and Interviews. Ithaca, NY: Cornell.
- Foucault, Michel
 2003 "Society Must be Defended". Lectures at the Collège de France, 1975-76. New York, NY: Picador.
- Foxen, Patricia
 2000 Cacaphony of Voices: A K'iche' Mayan Narrative of Remembrance and Forgetting. *Transcultural Psychiatry* 37(3): 355-381.
- Foxen, Patricia

- 2010 Local Narratives of Distress and Resilience: Lessons in Psychosocial Well-Being among the K'iche' Maya in Postwar Guatemala. *Journal of Latin American and Caribbean Anthropology* 15(1): 66-89.
- Galloway, Anne
 2006 Collective Remembering and the Importance of Forgetting: A Critical Design Challenge. PDF document, http://purselipsquarejaw.org/papers/galloway_chi2006.pdf, accessed April 23, 2015.
- Garrett, Paul Michael
 2015 Questioning Tales of 'Ordinary Magic': 'Resilience' and Neo-Liberal Reasoning. *British Journal of Social Work* 2015: 1-17.
- Gemignani, Marco
 2011 The Past if Past: The Use of Memories and Self-Healing Narratives in Refugees from Former Yugoslavia. *Journal of Refugee Studies* 24(1): 132-156.
- Gilboa, Asaf
 2014 Functional Neuroanatomy of PTSD: Developmental Cytoarchitectonic Trends, Memory Systems, and Control Processes. *In* *Future Directions in Post-Traumatic Stress Disorder: Prevention, Diagnosis, and Treatment*. Marilyn P. Safir, Helene S. Wallach, and Albert Rizzo, eds., p. 213-241. New York, NY: Springer.
- Gray, Mel
 2011 Back to Basics: A Critique of the Strengths Perspective in Social Work. *Families in Society: The Journal of Contemporary Social Services* 92(1): 5-11.
- Green, Anna
 2004 Individual Remembering and "Collective Memory": Theoretical Presuppositions and Contemporary Debates. *Oral History* 32(2): 35-44.
- Guéhenno, Jean-Marie
 2015 10 Wars to Watch in 2015. *Foreign Policy*, January 2. <http://foreignpolicy.com/2015/01/02/10-wars-to-watch-in-2015/>, accessed April 23, 2015.
- Halbwachs, Maurice
 1992[1952] *On Collective Memory*. Chicago, IL: The University of Chicago Press.
- Hale, Sondra
 2012 Memory Work as Resistance: Eritrean and Sudanese Women in Conflict Zones. *Comparative Studies of South Asia, Africa and the Middle East* 32(2): 429-436.
- Hayner, Priscilla B.
 2000 *Unspeakable Truths: Confronting State Terror and Atrocity*. New York: Routledge.
- Herman, Judith Lewis
 1992 *Trauma and Recovery. The Aftermath of Violence – From Domestic Abuse to Political Terror*. New York, NY: Basic Books.
- Hinton, Devon E., and Byron J. Good, eds.
 2015 *Culture and PTSD: Trauma in Global and Historical Perspective*. Philadelphia, PA: University of Pennsylvania Press.
- Hinton, Devon E., and Alexander L. Hinton, eds.
 2015 *Genocide and Mass Violence: Memory, Symptom, and Recovery*. New York, NY: Cambridge University Press.
- Hinton, Devon E., and Roberto Lewis-Fernández
 2010 Idioms of Distress Among Trauma Survivors: Subtypes and Clinical Utility. *Culture, Medicine, and Psychiatry* 34: 209-218.
- Hinton, Devon E., Vuth Pich, Luana Marques, Angela Nickerson, and Mark H. Pollack

- 2010 Khyal Attacks: A Key Idiom of Distress among Traumatized Cambodia Refugees. *Culture, Medicine, and Psychiatry* 34: 244-278.
- Hobfoll, Stevan E., Patricia Watson, Carl C. Bell, Richard A. Bryant, Melissa J. Brymer, Matthew J. Friedman, Merle Friedman, Berthold P. T. Gersons, Joop T. V. M. de Jong, Christopher M. Layne, Shira Maguen, Yuval Neria, Ann E. Norwood, Robert S. Pynoos, Dori Reissman, Josef I. Ruzek, Arie Y. Shalev, Zahava Solomon, Alan M. Steinberg, and Robert J. Ursano
- 2007 Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence. *Psychiatry* 70(4): 283-315.
- Igreja, Victor
- 2008 Memories as Weapons: The Politics of Peace and Silence in Post-Civil War Mozambique. *Journal of Southern African Studies*, 34(3): 539-556.
- Igreja, Victor, Wim C. Kleijn, Bas J. N. Schreuder, Janie A. van Dijk, and Margot Verschuur
- 2004 Testimony Method to Ameliorate Post-Traumatic Stress Symptoms: Community-Based Intervention Study With Mozambican Civil War Survivors. *British Journal of Psychiatry* 184: 251-257.
- Isakson, Brian L., and Gregory J. Jurkovic
- 2013 Healing After Torture: The Role of Moving on. *Qualitative Health Research* 23(6): 749-761.
- Jedlowski, Paolo
- 2001 Memory and Sociology: Themes and Issues. *Time and Society* 10(1): 29-44.
- Johnson, Howard, and Andrew Thompson
- 2008 The Development and Maintenance of Post-Traumatic Stress Disorder (PTSD) in Civilian Adult Survivors of War Trauma and Torture: A Review. *Clinical Psychology Review* 28: 36-47.
- Jordans, Mark J. D., Wietse A. Tol, Ivan H. Komproe, and Joop V. T. M. de Jong
- 2009 Systematic Review of Evidence and Treatment Approaches: Psychosocial and Mental Health Care for Children in War. *Child and Adolescent Mental Health* 14(1): 2-14.
- Kato, Nobumasa, Mitsuhiro Kawata, and Roger K. Pitman, eds.
- 2006 PTSD. Brain Mechanisms and Clinical Implications. Tokyo, Japan: Springer.
- Keightley, Emily
- 2010 Remembering Research: Memory and Methodology in the Social Sciences. *International Journal of Social Research Methodology* 13(1): 55-70.
- Kienzler, Hanna
- 2008 Debating War-Trauma and Post-Traumatic Stress Disorder (PTSD) in an Inter-disciplinary Arena. *Social Science and Medicine* 67: 218-227.
- Kirmayer, Laurence J.
- 1996 Landscapes of Memory. Trauma, Narrative, and Dissociation. *In Tense Past. Cultural Essays in Trauma and Memory*. Paul Antze and Michael Lambek, eds., pp. 173-198. New York, NY: Routledge.
- Kirmayer, Laurence J.
- 2015 Wrestling with the Angels of History: Memory, Symptom, and Intervention. *In Genocide and Mass Violence: Memory, Symptom, and Recovery*. Devon E. Hinton and Alexander L. Hinton, eds., pp. 388-420. New York, NY: Cambridge University Press.
- Kirmayer, Laurence J., Robert Lemelson, and Mark Barad, eds.
- 2007 Understanding Trauma: Integrating Biological, Clinical and Cultural Perspectives. New York, NY: Cambridge University Press.
- Kleinman, Arthur, and Joan Kleinman

- 1994 How Bodies Remember: Social Memory and Bodily Experience of Criticism, Resistance, and Delegitimation Following China's Cultural Revolution. *New Literary History* 25: 707-723.
- Kohrt, Brandon A.
 2015 The Role of Traditional Rituals for Reintegration and Psychosocial Well-Being of Child Soldiers in Nepal. *In* Genocide and Mass Violence: Memory, Symptom, and Recovery. Devon E. Hinton and Alexander L. Hinton, eds., pp. 369-387. New York, NY: Cambridge University Press.
- Kolassa, Iris-Tatjana, Sonja Illek, Sarah Wilker, Alexander Karabatsiakakis, and Thomas Elbert
 2015 Neurobiological Findings in Post-Traumatic Stress Disorder. *In* Evidence Based Treatments for Trauma-Related Disorders: A Practical Guide for Clinicians. Ulrich Schnyder and Marylène Cloitre, eds., pp. 63-86. Cham, Switzerland: Springer.
- Labrador, Angela M.
 2010 Review: So That All Shall Know/ Para Que Todos Lo Sepan. *Landscapes of Violence* 1(1).
- Lambek, Michael
 1996 The Past Imperfect. Remembering as Moral Practice. *In* Tense Past. Cultural Essays in Trauma and Memory. Paul Antze and Michael Lambek, eds., pp. 235-254. New York, NY: Routledge.
- Lemelson, Robert, and Luh Ketut Suryani
 2006 The Spirits, *Ngeb*, and the Social Suppression of Memory: A Complex Clinical Case from Bali. *Culture, Medicine, and Psychiatry* 30: 389-413.
- Le Roy, Frederik, Christel Stalpaert, and Sofie Verdoodt, eds.
 2011 Performing Cultural Trauma in Theatre and Film. Arcadia. Berlin, Germany: Walter de Gruyter.
- McFarlane, Colleen A., and Ida Kaplan
 2012 Evidence-Based Psychological Interventions for Adult Survivors of Torture and Trauma: A 30-Year Review. *Transcultural Psychiatry* 49(3-4): 539-567.
- Miller, Kenneth E., Madhur Kulkarni, and Hallie Kushner
 2006 Beyond Trauma-Focused Psychiatric Epidemiology: Bridging Research and Practice with War-Affected Populations. *American Journal of Orthopsychiatry* 76(4): 409-422.
- Misztal, Barbara
 2003 Theories of Social Remembering. Maidenhead, England: Open University Press.
- Nacasch, Nitsa, Lilach Rachamim, and Edna B. Foa
 2014 Prolonged Exposure Treatment. *In* Future Directions in Post-Traumatic Stress Disorder: Prevention, Diagnosis, and Treatment. Marilyn P. Safir, Helene S. Wallach, and Albert Rizzo, eds., p. 245-252. New York, NY: Springer.
- Neria, Y., A. Nandi, and S. Galea
 2008 Post-Traumatic Stress Disorder Following Disasters: A Systematic Review. *Psychological Medicine* 38: 467-480.
- Neumann, Klaus, and Dan Anderson
 2014 Introduction: Violence, Justice and the Work of Memory. *International Journal of Conflict and Violence* 8(1): 4-15.
- Neuner, Frank, Claudia Catani, Martina Ruf, Elisabeth Schauer, Maggie Schauer, and Thomas Elbert
 2008 Narrative Exposure Therapy for the Treatment of Traumatized Children and Adolescents (KidNET): From Neurocognitive Theory to Field Intervention. *Child and Adolescent Psychiatric Clinics of North America* 17: 641-664.
- Neuner, Frank, Margarete Schauer, Christine Klaschik, Unni Karunakara, and Thomas Elbert

- 2004 A Comparison of Narrative Exposure Therapy, Supportive Counseling, and Psychoeducation for Treating Posttraumatic Stress Disorder in an African Refugee Settlement. *Journal of Consulting and Clinical Psychology* 72(4): 579-587.
- Nguyen-Gillham, Viet, Rita Giacama, Ghada Naser, and Will Boyce
2008 Normalising the Abnormal: Palestinian Youth and the Contradictions of Resilience in Protracted Conflict. *Health and Social Care in the Community* 16(3): 291-298.
- Olick, Jeffrey K, and Joyce Robbins
1998 Social Memory Studies: From “Collective Memory” to the Historical Sociology of Mnemonic Practices. *Annual Review of Sociology* 24: 105-140.
- Pedersen, Duncan
2002 Political Violence, Ethnic Conflict, and Contemporary Wars: Broad Implications for Health and Social Well-Being. *Social Science and Medicine* 55: 175-190.
- Pedersen, Duncan, Jacques Tremblay, Consuelo Errázuriz, and Jeffrey Gamarra
2008 The Sequelae of Political Violence: Assessing Trauma, Suffering and Dislocation in the Peruvian Highlands. *Social Science and Medicine* 67: 205-217.
- Pupavac, Vanessa
2001 Therapeutic Governance: Psycho-Social Intervention and Trauma Risk Management. *Disasters* 25(4): 358-372.
- Ramsden, Robyn, and Damien Ridge
2012 ‘It Was the Most Beautiful Country I Have Ever Seen’: The Role of Somali Narratives in Adapting to a New Country. *Journal of Refugee Studies* 26(2): 226-246.
- Rober, Peter, and Lucia De Haene
2014 Intercultural Therapy and the Limitations of a Cultural Competency Framework: About Cultural Differences, Universalities and the Unresolvable Tensions Between Them. *Journal of Family Therapy* 36: 3-20.
- Rousseau, Cécile
2005 Diving Into Complexity: John Sigal’s Work on the Long-Term Consequences of the Holocaust. *Clinical Child Psychology and Psychiatry* 10(2): 262-265.
- Rousseau, Cécile, and Toby Measham
2007 Posttraumatic Suffering as a Source of Transformation: A Clinical Perspective. *In Understanding Trauma. Integrating Biological, Clinical, and Cultural Perspectives.* Laurence J. Kirmayer, Robert Lemelson, and Mark Barad, eds., pp. 275-293. New York, NY: Cambridge University Press.
- Rousseau, Cécile, Elena de la Aldea, Musuk Viger Rojas, and Patricia Foxen
2005 After the NGO’s Departure: Changing Memory Strategies of Young Mayan Refugees Who Returned to Guatemala as a Community. *Anthropology and Medicine* 12(1): 1-19.
- Rousseau, Cécile, Maria Morales, and Patricia Foxen
2001 Going Home: Giving Voice to Memory Strategies of Young Mayan Refugees who Returned to Guatemala as a Community. *Culture, Medicine, and Psychiatry* 25: 135-168.
- Schauer, Maggie, and Elbert Schauer
2010 Trauma-Focused Public Mental-Health Interventions: A Paradigm Shift in Humanitarian Assistance and Aid Work. *In Trauma Rehabilitation after War and Conflict. Community and Individual Perspectives.* Erin Martz, ed., pp. 389-428. Portland, OR: Springer.
- Schnyder, Ulrich, and Marylène Cloitre, eds.
2015 Evidence Based Treatments for Trauma-Related Psychological Disorders: A Practical Guide for Clinicians. Cham, Switzerland: Springer.

Shaw, Rosalind

- 2005 Rethinking Truth and Reconciliation Commissions: Lessons from Sierra Leone. Special Report, 130. United States Institute of Peace.

Shaw, Rosalind

- 2007 Memory Frictions: Localizing the Truth and Reconciliation Commission in Sierra Leone. *The International Journal of Transitional Justice* 1: 183-207.

Sheftel, Anna

- 2012 'Monument to the International Community, from the Grateful Citizens of Sarajevo': Dark Humor as Counter-Memory in Post-Conflict Bosnia-Herzegovina. *Memory Studies* 5(2): 145-164.

Simon, Roger I., and Claudia Eppert

- 1997 Remembering Obligation: Pedagogy and the Witnessing of Testimony of Historical Trauma. *Canadian Journal of Education* 22(2): 175-191.

Somasundaram, Daya, and Sambasivamoorthy Sivayokan

- 2013 Rebuilding Community Resilience in a Post-War Context: Developing Insight and Recommendations – A Qualitative Study in Northern Sri Lanka. *International Journal of Mental Health Systems* 7(3).

Sousa, Cindy A., Muhammad M. Haj-Yahia, Guy Feldman, and Jessica Lee

- 2013 Individual and Collective Dimensions of Resilience Within Political Violence. *Trauma, Violence, and Abuse*, 14(3): 235-254.

Steel, Zachary, Tien Chey, Derrick Silove, Claire Marnane, Richard A. Bryant, and Mark van Ommeren

- 2009 Association of Torture and Other Potentially Traumatic Events With Mental Health Outcomes Among Populations Exposed to Mass Conflict and Displacement. A Systematic Review and Meta-Analysis. *Journal of the American Medical Association*, 302(5): 537-549.

Summerfield, Derek

- 1996 The Impact of War and Atrocity on Civilian Populations: Basic Principles for NGO Interventions and a Critique of Psychosocial Trauma Projects. London, England: Relief and Rehabilitation Network.

Summerfield, Derek

- 1998 The Social Experience of War and Some Issues for the Humanitarian Field. *In* Rethinking the Trauma of War. Patrick J. Bracken and Celia Petty, eds., pp. 9-37. London, England: Free Association Books.

Summerfield, Derek

- 1999 A Critique of Seven Assumptions Behind Psychological Trauma Programmes in War-Affected Areas. *Social Science and Medicine* 48: 1449-1462.

Summerfield, Derek

- 2000 Childhood, War, Refugeedom and 'Trauma': Three Core Questions for Mental Health Professionals. *Transcultural Psychiatry* 37(3): 417-433.

Summerfield, Derek

- 2001 The Invention of Post-Traumatic Stress Disorder and the Social Usefulness of a Psychiatric Category. *British Medical Journal* 322(7278): 95-98.

Till, Karen E.

- 2012 Wounded Cities: Memory-Work and Place-Based Ethics of Care. *Political Geography* 31: 3-14.

Tol, Wietse A., Corrado Barbui, Ananda Galappatti, Derrick Silove, Theresa S. Betancourt, Renato Souza, Anne Golaz, Mark van Ommeren

- 2011 Mental Health and Psychosocial Support in Humanitarian Settings: Linking Practice and Research. *The Lancet* 378: 1581-1591.

Tol, Wietse A., and Mark van Ommeren

- 2012 Evidence-Based Mental Health and Psychosocial Support in Humanitarian Settings: Gaps and Opportunities. *Evidence Based Mental Health* 15: 25-26.

Uehara, Edwina S., Martha Farris, Paula T. Morelli, and Anthony Ishisaka

- 2001 'Eloquent Chaos' in the Oral Discourse of Killing Fields Survivors: An Exploration of Atrocity and Narrativization. *Culture, Medicine, and Psychiatry* 25: 29-61.

van der Kolk, Bessel

- 2000 Post Traumatic Stress Disorder and the Nature of Trauma. *Dialogues in Clinical Neuroscience* 2(1): 7-22.

van Ommeren, Mark, Shekhar Saxena, and Benedetto Saraceno

- 2005 Mental and Social Health During and After Acute Emergencies: Emerging Consensus? *Bulletin of the World Health Organization* 83(1): 71-76.

Verelst, An, Maarten De Schryver, Lucia De Haene, Eric Broekaert, and Ilse Derluyn

- 2014 The Mediating Role of Stigmatization in the Mental Health of Adolescent Victims of Sexual Violence in Eastern Congo. *Child Abuse and Neglect* 38: 1139-1146.

Vinitzky-Seroussi, Vered, and Chana Teeger

- 2010 Unpacking the Unspoken: Silence in Collective Memory and Forgetting. *Social Forces* 88(3): 1103-1122.

von Peter, Sebastian

- 2009 The Concept of 'Mental Trauma' and its Transcultural Application. *Anthropology and Medicine* 16(1): 13-25.

Watters, Charles

- 2001 Emerging Paradigms in the Mental Health Care of Refugees. *Social Science and Medicine* 52: 1709-1718.

Winter, Jay

- 2010 Thinking About Silence. *In Shadows of War: A Social History of Silence in the Twentieth Century*. Efrat Ben-Ze'ev, Ruth Ginio, and Jay Winter, eds., pp. 3-31. New York, NY: Cambridge University Press.

Young, Allan

- 1995 The Harmony of Illusions: Inventing Post-Traumatic Stress Disorder. Princeton, NJ: Princeton University Press.

Young, Allan, and Naomi Breslau

- 2007 Troublesome Memories: Reflections on the Future. *Journal of Anxiety Disorders* 21(2): 230-232.

Zarowsky, Christina

- 2000 Trauma Stories: Violence, Emotion and Politics in Somali Ethiopia. *Transcultural Psychiatry* 37: 383-402.

Zur, Judith

- 1999 Remembering and Forgetting. Guatemalan War Widows' Forbidden Memories. *In Trauma and Life Stories: International Perspectives*. Kim Lacy Rogers, Selma Leydesdorff, and Graham Dawson, eds., pp. 45-59. London, ON: Routledge.