Comment

On the contribution of the psychoanalytic perspective to the investigation of collective violence

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Psychoanalysis is, as many people have remarked, both a method of treatment and a way of understanding the world. As such, while it purports to observe biological and evolutionary human processes, and accordingly to draw universally applicable conclusions, nonetheless as an explanatory model, it is both a product and an instrument of a particular culture. In the article under discussion, the author is quite scrupulous to select a case from his own culture to illustrate his argument and in doing so provides a useful way of decoding otherwise inexplicable behaviour, that might be gainfully utilized in conceptualizing care and cure of the offender (and not merely punishing him), as well as in preventing other similar incidents.

The only thing I found discomfiting in his otherwise stimulating and interesting discussion was the bundling together in one analytic category all participants in forms of organized collective violence, from the soldier to the concentration-camp commander to those engaged in murderous ethnic cleansing. While I understand that for the purpose of explaining the concept 'intra-psychic compartmentalization' – that is: how the same person can in one context commit acts that in an other context would be considered barbarous and easily move between these contexts – such equivalence is warranted. Still it left me with an uneasy feeling that to do so we are perhaps contributing to the disorientation of the returning contemporary soldier. Up until the middle of the last century, soldiers were hailed as heroes, those who did gruelling work in the service of the greater good. By erasing distinctions between kinds of collective violence, a soldier is made to carry the collective ambivalence towards military engagement in such places as Iraq, Afghanistan, and (earlier) Lebanon, something that properly belongs to us all.

I would like to offer a few additional remarks. If one wants to apply psychoanalysis as a frame for understanding human behaviour and motivation, it is important to adapt the dynamic relationships that psychoanalytic theory posits to the realities of the culture one is observing. For instance, when I read the following in the above piece: "Mentalizeren ontstaat vanuit de integratie van de letterlijke en 'alsof' manier van functioneren. Deze integratie ontwikkelt zich in een voldoende veilige en speelse ouderkind relatie", as a fellow psychoanalyst I believe that to be as true as the author believes it to be. However, as a anthropologist I realize the following: that in many cultures

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there is a much broader base of 'primary caregivers' other than the two parents that are the (idealized) norm in our own culture; and that in many other cultures 'affect attunement and affect regulation' between (primary) caregivers and children are governed by social norms rather than individual ones (i.e. aimed at harmonious integration of the child into the community, rather than aimed at cultivating the individuation potential of the child itself, which, if it comes at all, comes much later, at the stage of initiation rites), and furthermore that those social norms almost always include a metaphysical component, that is the world of the divine, the spirits (benevolent and malevolent), and the ancestors.

By way of illustration: in Java where I lived a number of years, I was told that while an infant was born a human being, it only became Javanese through a process of socialization beginning at (what we, in our culture, would call) the age of two and roughly encompassing the same period during which psychoanalysis and attachment theory suggest the capacity for mentalization (also known as 'a theory of mind' in cognitive psychology) is formed. Before that, the infant is considered to be vulnerable to the entry of malevolent spirits, especially at moments of distress. Care is taken to prevent crying, and if it does happen (as a response to hunger or illness, for instance) it is the responsibility of the closest Javanese – child or adult, relative or not – to comfort the infant and stop the crying.

Again when I read about the theoretical formulation of 'a development of alien self' – especially as a response to childhood abuse or emotional deprivation and in the context of collective trauma – as a psychoanalyst I understand this to be an aspect of dissociation and a range of associated disorders, including depersonalization and fugue states. But as an anthropologist I am reminded of a number of studies that found a prevalence of spirits and spirit possession as one among several other mechanisms employed to manifest the long-term effects of exposure to war violence (Igreja 2003; Behrend & Luig 1999; Honwana 1998). In particular, these studies suggest that such spirits are carriers of meaning about the overwhelming traumatic experiences of both the individual as well as the community, and most importantly, that they include strategies for recovery.

The linkage between spirit possession and dissociative disorders has been made before, for instance by Van Duijl et al. working in Uganda. In her research, various focus groups were presented with descriptions and examples of the DSM IV classification of dissociative disorders, and these descriptions were not only generally recognized but also seen as a sign of a problem that needs to be addressed (i.e. what we would call pathology), though they were most commonly attributed to possession by an 'outside' agent, rather than an intra-psychic response to an outside event (Van Duijl et al. 2005).

Does that mean there is a set of psychic phenomena – often linked to a response to interpersonal or social stress or trauma – which is trans-culturally recognized, which we, in a biomedically mediated consensus (using the DSM IV, itself a dynamic, rather than static, tool), have agreed to call 'dissociative disorders' and people in Uganda attribute to spirit possession? Or is it that different worldviews generate fundamentally different mental disorders, in which case the DSM IV should have both the category of dissociative identity disorder and possession trance disorder?

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Because I share the psychoanalytic universalist assumptions of the author, I tend to believe the first proposition, and that Western psychiatry and psychoanalysis can learn as much from non-biomedical cultural healing practices as the other way around. Still, what is lacking is a viable, common language to talk about and compare such phenomena. Thought-provoking articles such as this one may be able to contribute to the development of such a language.

Note

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