

Three

America, a Nation of Victims

An interesting thing happened during the latter half of the nineteenth century. For the first time, the word *trauma* took on a psychological meaning. Prior to that time, trauma referred to a physical injury or blow, a wound that required physical repair. Of course, this way of understanding trauma is still with us: At hospital trauma centers throughout America, medical personnel repair broken bones, stop blood flow, patch gashes, run CAT scans, and do all sorts of other things to mend damaged *bodies*.

For most of us, though, this meaning of trauma is not the one that readily comes to mind. When we hear the word trauma now—which we do with remarkable regularity—we more often think of a psychological wound, the damaging effects of distressing events. We recognize the truly tragic meaning of the word trauma when we see the haunted look on the faces of soldiers returning from war, the stunned gazes of survivors in tornado ravaged towns, and yes, each of us on September 11 as we watched the World Trade Center towers crumble. At the other end of the spectrum we encounter more trivial uses of the word trauma: the times people describe

what is simply a mildly unpleasant experience as traumatic. Someone might call a moment of brief social embarrassment traumatic; a teenager might say she was traumatized when her parents, on prom night, imposed a curfew earlier than that of any of her friends. As currently used, trauma can refer to serious psychological injury, to less weighty discomfort, and to everything in between. Whatever the scenario, when we hear the word trauma these days, we know we are entering some form of the narrative involving psychological pain and, perhaps, the efforts to heal that pain. During the late nineteenth and early twentieth centuries, Americans increasingly turned to “the psychological” as the beacon of hope and power in their quest for happiness and self-fulfillment. Naming and overcoming the traumas that inhibited unbridled development—the traumas that generated psychological pain—were central elements in the patient’s story of wounding and healing.

The transition of trauma from physical injury to psychological wound entered the cultural landscape via Freud. From his point of view, a patient’s early sexual wounding—an event which left no *physical scar*—was the trauma. Freud was not alone in placing the emphasis on the psychic level, though. Many other late nineteenth century doctors and healers, such as Jean Martin Charcot in France and Freud’s Austrian colleague Josef Breuer, were also moving in this direction. This development occurred, in part, because hypnosis was becoming the curative tool of choice for mental troubles. Across the board refinements were being made in the use of hypnosis for ailments which seemed to have no physical basis, such as hysteria and obsessional neurosis. The widespread reliance on hypnosis to cure non-physical ailments helped make possible the understanding of trauma as a psychological reality. Much as possession and exorcism go hand-in-hand in a religious context, repressed trauma and hypnosis began to go hand-in-hand in the world of psychology.

At the same time, a quite different cultural development helped fuel the transformation of the meaning of trauma. The coming-of-age of the railroad brought with it a phenomenon known as “railway spine.” For the first time in history, high-speed travel in a machine brought with it the possibility for high-speed collisions. These high-speed collisions were sudden, intense, and destructive in a way falling off a horse, for example, could never be. While very real physical injuries occurred in connection with railroad collisions, people who had been in railway accidents *but had not sustained physical injury* also began to complain, sometimes days later, of terrible pain. The term “railway spine” was coined to refer to this growing phenomenon, a situation where reports of pain seemed to have no recognizable basis.

The familiar term “whiplash”—coined in 1928—is the direct descendent of railway spine. We now know that the headaches following an auto accident may be caused by soft tissue injury, damage to the muscles, tendons, and ligaments in the neck. Even so, sometimes a person may be accused of malingering or faking his pain because his injuries don’t show up as skeletal damage on an X-ray or MRI. The complaint of excruciating pain in the absence of physical damage was even more mysterious in the late nineteenth century.

As time went on, the notion that the pain was caused by the *memory* or *emotion* connected with the accident gained credibility as doctors tried to explain “railway spine” in order to cure their patients and as lawyers involved in lawsuits following rail collisions grappled with causes in the legal arena. Ultimately, many patients were suspected of suffering from the psychological condition of “hysteria,” that is, suffering from that form of *amnesia* in which a forgotten trauma is the source of current pain. The phenomenon of railway spine was one stream feeding the swelling cultural river of belief that the psychological was a vast, mysterious dimension of human experience and the related belief that the patient is a person troubled by experiences outside present awareness and in need of help with curative recall.

Freud's notion of the psychology patient and his case histories detailing the cure of those patients relied heavily on the idea of amnesia. The concept of amnesia—memory loss—produced by a blow to the head was nothing new. What began to intrigue people in the late nineteenth century, though, was amnesia produced by a *psychic shock* of some sort. The concept that a patient—psychoanalytic patient or railway accident patient—could forget a psychological wound and then be healed through a process of remembering was grounded in this potential for psychic shock. The ideas that human suffering is rooted in psychic shock and that *forgetting* is a predictable response to psychological trauma were being woven into the cultural fabric. Another thread that was weaving its way into the fabric was the idea that the curative process of remembering forgotten pain required the explanatory power of diagnostic categories in order to be successfully managed through rational scientific principles.