

FREEDOM AND TRAUMA

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Felled by a massive stroke, Jean Dominique Bauby found himself completely locked-in -- unable to move his arms or legs, to speak or even swallow. If we think of freedom as the absence of limitations, he has lost that too. Yet he has not lost his freedom of choice. He can still blink his left eye – and is thereby able to write *The Diving Bell and the Butterfly*, dictating one letter at a time by blinking that eye. Choosing to write, he can and must choose his words. His book and the resultant Julian Schnabel film show that even a man completely paralyzed but for the blinking of one eye nevertheless retains freedom of thought and choice and expression. The same body that locks Bauby in a diving bell is nevertheless the indispensable means and instrument of his freedom.

The power to choose would be vacuous if there were no way to embody those choices in action. Yet the very body that makes action possible by giving me access to the world also gives the world access to me. The same body is both instrument of activity and organ of receptivity. Bauby could still see and hear. The eye that he could blink also let in the light and let him see out—into the world, while his intact hearing kept him engaged in a social world. Were it not for this receptivity of the body, my actions would blunder blindly because my choices would be uninformed about the options and dangers before me. Freedom of choice can only be realized by an embodied agent whose body belongs **in** and **to** the environing world as well as to the agent.

Evidently, the conception of freedom as the absence of limitation, or as indeterminism, exemption from causal determinism, bears closer scrutiny. In fact, it also leads to a boundary of freedom.

Imagine yourself floating loose in outer space. You have just become untethered from the space station you were attempting to repair,

Liberated from the pull of gravity, you are now free as a bird! Or are you? When you wave your arms in order to fly back to the space station-- nothing happens. You try a few strokes of the Australian crawl - to no avail! Utterly without limits for the first time in your life, you are not free, but impotent! Except that you are not without limits. For you know very well that your supply of air will run out in 30 minutes!

Fortunately, since this is only an exercise of the imagination, we can fix that. We will simply liberate you from your body. Now you are better than free as a bird. You are fancy free! You can go wherever your fancy takes you, be whatever you wish.

But be careful what you wish for - as many a victim of fairies or leprechauns has learned. For whatever you fancy, that you will be – though only as long as you think so! You have not merely three wishes, but an endless supply. But you cannot choose amongst them because you cannot choose -- because you cannot consider your options - because whatever you *think*, that you *are*. You might wish you were back on terra firma-- but without a body to hold you down, the terra can never be firm enough to locate you – and you could never gain a foothold. You would be at the mercy of your own free associations, as little in control of yourself as you are of your dreams. You could not realize your highest hopes, nor escape your worst fears -- since you could not take precautions against them without thinking of them – and

without a body *cogito* would indeed be *sum* - a sort of certainty that still left Descartes in doubt about everything else - including his own ability to survive into the next moment. And indeed, you dare not even sleep, since perchance, you may not dream-- and cannot even be sure that if you stop thinking, you will be able to begin again.

And since free choice requires a resistant world in which those choices may be realized, then freedom must have some way to apprehend the opportunities and obstacles presented by that world. But if there is no way to embody choice in action, what can count as either obstacle or opportunity? Indeed, if one cannot realize any alternative, choice itself becomes futile as Martin Pistorius, another case of locked in syndrome testifies. Awakening after four years of coma, Pistorius found that he could remember nothing and had no control over his own body. He spent years aware of everything going on around him in a world where everyone supposed he was an oblivious, helpless lump of flesh – until someone noticed that he could voluntarily direct his gaze to one item or another. Thus begins a recover of agency with the aid of computers than enable him to speak in roughly the manner employed by Steven Hawking. In the title of one of the chapters of his autobiography Pistorius complains “I Can’t Choose”. Asked to decide which model of sneaker to buy, or which breakfast cereal to purchase out of the array in a supermarket, he finds that while deprived of action by a helpless body, he lost the ability to decide, even about whether and what to eat -- because whatever his preferences, for years he could not act to realize them. Seeing that he can’t decide, his fiancée asks him to tell her what he wants to eat. “But I couldn’t even do that. I forgot long ago what it was to be

hungry or to yearn for a particular food, after teaching myself to ignore the sensation of a gnawing stomach or a craving I knew I could never satisfy,” because there was nothing he could do about it. On the other hand, blinking one eye would have availed Bauby nothing if he could not see and hear the world and other people – and he could only see and hear because the world acted upon his body, as a fusillade of photons assaulted his one open eye and air waves beat upon his eardrums.

To be self-determining, then, freedom must also be determined by its world. There can be no autonomy without heteronomy. Indeed, the world would not be resistant otherwise, and we would be back to floating impotently in empty space without even any definite, determinate possibilities that could serve as alternatives. In order to embody choices in action, freedom must inhabit a body that is **part of** its resistant world and that subjects it to determination **by** that world. To be receptive to the obstacles and opportunities available in its world, freedom must be passive as well as active. The world would not be resistant if it did not push back. One cannot walk on water or air.

Embodiment thus incorporates freedom into its world - and thereby locates it, establishes its point of view or perspective upon that world. And my location is not merely or primarily spatial. It would be better to say that my body defines a determinate **prospective** upon the world.

I live at the edge of a meadow in the middle of the woods in Lyme, Connecticut, population roughly 3,000. Whenever I go to the New York and emerge from Grand Central Station onto 42nd Street a very different array of options opens out before me - and a very different set of dangers closes

in upon me. Of course, I needn't stay in either place. Although I must always be located somewhere in space, exactly where, in particular, is up to me.

Or is it? When this society met at Emory, in 3011, we awoke on Sunday morning to witness the images of a Tsunami sweeping across the landscape of Japan, carrying every thing and every one before it. We need only to recall those images to recognize that the world may not allow me to choose my own location or direction. Some years ago, my car spun a hundred and eighty degrees on a patch of frost and hurtled over an embankment into a swamp. Surely, everyone has at some time found himself or herself somewhere they did not choose to be, fuming as some chosen agenda dissipated into the midst of a traffic jam or a flight cancellation. Freedom must have a body that locates it within a world in which it can realize its choices. But a world in which freedom can act can also act upon freedom - and even obliterate it.

To be free, then, is to be vulnerable. The very receptivity that gives me access to a determinate world and a horizon of possibilities also, *ipso facto* renders freedom vulnerable to determination by that world. The body that incorporates me into the world and establishes my perspective and prospective points of view -- can be pushed and flung about willy-nilly—and my prospects change as it does so. The land mine explosion that renders a soldier or a child paraplegic does not put an end to freedom of choice, but it abruptly curtails the available options. The paraplegic has to reckon with a new future, a very different set of options than before, as victims of the

Boston Marathon bomb have been reminding us this past week. But the paraplegic still can and must choose how to go on. Yet he can still go.

Not everyone can. The Japanese tsunami reminds us that not everyone survives -- and in the end, of course, no one survives. To be free is to be mortal, since there can be no freedom without a body that belongs to its world and can be destroyed by that world. The stoic might assure me that I can nevertheless choose my own death - that in a way, the ultimate form of freedom resides in my ability to dispose of my whole life in a single choice of self-sacrifice or of suicide to escape yielding to the world. "The door is always open," as Epictetus often reminded his auditors. Death is my ownmost and ultimate possibility, as Heidegger put it, and although no one gets to decide whether to die, each of us may still face the dilemma of deciding how to die. But, once you do die, you are "out of here" and the world takes over a body that is no longer yours as it molds in the grave. You pass beyond the boundaries of freedom by ceasing to exist.

But there is a fate worse than death. The vulnerability of freedom is still more desperately illustrated by the predicament of complete paralysis, where freedom is locked up within an immobilized body, so that the individual cannot move about on his own, or even feed himself, cannot change his point of view- or survive unless someone else chooses to push him around and feed him. For "all intents and purposes" he is dead, since paralysis renders all intents and all purposes so futile that it would be best not to entertain any. He might even envy Sisyphus, who could at least roll his stone up the mountain.

What could remain of freedom when action is no longer possible? The only choice remaining to the complete paralytic might be a choice between utter despair and stoic *ataraxia*, the paradoxical freedom to accept the course of nature and therewith the absence of all freedom. For where there is no alternative to being determined by the world, freedom as self-determination has vanished. That would seem to be the barest minimum, the zero point of embodied freedom.

But it is not. For the receptive function of the body renders freedom vulnerable to a still more pernicious form of determination by the world—when one is not merely imprisoned in the body, but penetrated to the core by a traumatic experience. Psychic trauma may, but need not, result from physical trauma, since merely witnessing an atrocity such as the collapse of the world trade center may prove traumatic. Psychological trauma seems to epitomize the loss of self-determination to determination by the world. One of the hallmarks of the traumatic experiences that result in posttraumatic stress disorder is a sense of complete helplessness and loss of control over oneself and the environment. And what is most uncanny about PTSD is how stubbornly that helplessness and loss of control persist, or re-emerge long after the traumatic event and long after any physical wounds have healed. The sufferer seems transfixed by that past event, which erupts again and again, not as a normal memory, but as a sort of re-embodiment of the traumatic experience. Van der Kolk and McFarlane highlight this difference in Chapter I of *Traumatic Stress*:

Ordinarily, memories of particular events are remembered, as stories

that change over time and that do not invoke intense emotions and sensations. In contrast, in PTSD the past is relived with an immediate sensory and emotional intensity that makes victims feel as if the event were occurring all over again ...years and even decades after the original trauma, victims claim that their reliving experiences are as vivid as when the trauma first occurred. Because of this timeless and unintegrated nature of traumatic memories, victims remain embedded in the trauma as a contemporary experience, instead of being able to accept it as something belonging to the past.¹

These revivals of the traumatic event range from disconnected fragments, bits of sound or smell or vision, to bodily reenactments. In another essay on traumatic memory, van der Kolk and van der Hart cite the example of Pierre Janet's patient Irene. Irene spent a terrible night tending to her mother as she died. She attended the funeral afterwards and she acknowledged that everyone told her that her mother was dead. Yet she could not believe it. Although present at the time, she could not recall the event. Yet several times a week, when,

Irene looked from a certain direction to an empty bed, she took on a bizarre posture. She stared at the bed, without moving her eyes, did not hear anybody anymore, did not have contact with anybody, and she began to engage in stereotyped activities. She brought a glass to the lips of an imaginary person, she cleaned her

¹ Bessel van der Kolk and Alexander McFarlane, "The Black Hole of Trauma," in *Traumatic Stress*, eds Bessel van der Kolk, Alexander McFarlane and Lars Weissach 1996, (New York, the Guilford Press, 1996), 8—9. Hereafter *Traumatic Stress*, eds Bessel van der Kolk et. al *Traumatic Stress*, eds Bessel van der Kolk et. al.

mouth, she talked with this person: 'But open your mouth, drink something... Answer me' She climbed onto the bed in order to arrange the body. Then she cried: 'The corpse has fallen on the ground and my father who is drunk, who vomits on the bed, cannot even help me.' She became busy in putting the corpse back on the bed. This reproduction of the tragic scene lasted three or four hours. It ended usually by the patient looking desperate, by a convulsion, and, finally, by sleep. Irene had meticulously reproduced all the details of her mother's death.ⁱ

And yet, like many other sufferers from PTSD, Irene could not – or would – not voluntarily recall these traumatic events. But the events, thus lost in an amnesic black hole often infect the rest of the victim's experience and life nevertheless. "The first, cardinal symptom of post-traumatic stress disorder," according to Judith Herman, is the state of hyper arousal: "Once traumatized individuals become haunted by intrusive re-experiences of their trauma, they generally start organizing their lives around avoiding the emotions that these intrusions evoke...(which) is aggravated by a generalized numbing of a whole range of emotional aspects of life."ⁱⁱ This paradoxical combination of intrusion and constriction, of hypersensitivity and numbness sets up a dialectic of opposing psychological states that Herman describes as:

the most characteristic feature of the post-traumatic syndromes.

Since neither the intrusive nor the numbing symptoms allow for integration of the traumatic event, the alternation between these two extreme states

might be understood as an attempt to find a satisfactory balance between the two. But balance is precisely what the traumatized person lacks. She finds herself caught between the extremes of amnesia or of reliving the trauma, between floods of intense, overwhelming feeling and arid states of no feeling at all, between irritable, impulsive action and complete inhibition of action. The instability produced by these periodic alternations further exacerbates the traumatized person's sense of unpredictability and helplessness.ⁱⁱⁱ

What place does all this leave for freedom? The sufferer from PTSD seems as tightly locked in by this psychological dialectic as Bauby was locked in by his paralyzed body, which nevertheless allowed the butterfly to freely create the memoir of his encapsulation. The trauma victim, by contrast, can scarcely compose a memoir of events that she cannot even recall, yet which thus tyrannize her experiences and her choices. That tyranny is even worse for the person who has been repeatedly traumatized, the battered wife, the child forced into soldiery who has been forced to kill his neighbors or even his parents. In such cases, Herman reports, the perpetrator seeks total surrender of the victim's will through "the systematic, repetitive infliction of psychological trauma." The final step in the process is only reached when the victim "has been forced to violate her own moral principles and to betray her basic human attachments.... [t]he victim who has succumbed loathes herself. It is at this point, when the victim under duress

participates in the sacrifice of others, that she is truly 'broken'." ²

It should be said that no event is absolutely or inherently traumatic. Two soldiers may fight side by side in the same battle, two prisoners may be subjected to the same torture - and one will be traumatized and the other not. Whether such an ordeal proves traumatic depends upon what each brings to the experience. Van der Kolk defines trauma as "an inescapably stressful event that overwhelms people's existing coping mechanisms." Judith Herman writes that, "At the moment of trauma, the victim is rendered helpless by overwhelming force... Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning." ³ Which events will have that overwhelming effect vary from one person to another. But the experience of helplessness and loss of control over the world and oneself is built into the very definition of trauma. And since the reality -- or realization - of freedom resides in acting as I choose, trauma overwhelms freedom along with control.

And yet, matters are not quite so simple. For the victim may find a recourse even in the face of overwhelming force and the experience of helplessness. That recourse is dissociation. In the midst of duress and terror, an individual may not identify with that helpless person and thereby slip out of the overwhelming force of events. In its most conspicuous form, dissociation exploits the reflexive duality of self-conscious experience to develop a split between the "observing self" and the experiencing self. In

many such cases, Judith Herman writes, "they report leaving their bodies and observing what happens to them from a distance. During a traumatic experience, dissociation allows a person to observe the event as a spectator, to experience no, or only limited pain or distress; and to be protected from awareness of the full impact of what has happened."

A rape survivor describes this detached state. "I left my body at that point. I was over next to the bed, watching this happening... I dissociated myself from the helplessness. I was standing next to me and there was this shell on the bed.... There was just a feeling of flatness. I was just there. When I repicture the room, I don't picture it from the bed. I picture it from the side of the bed. That's where I was watching from...."⁴

The ability to dissociate in this way seems to be variably distributed among individuals and variously cultivated or condemned by different cultures. It may prove a valuable talent for anyone who is helplessly contending with overwhelming stress. Dissociation appears to offer freedom a refuge in the thick of the fray, an escape from coercion and constraint and terror. Indeed, it evokes the stoic recipe for freedom through indifference to external circumstances. Since you cannot control the external world, the stoics advised, you can only secure freedom by controlling yourself. "There are situations in which people simply are unable to affect the outcome of events," write van der Kolk, van der Hart and Marmar, and "in such cases,

⁴ Ibid., 43.

"passive" coping is not maladaptive; sometimes 'spacing out' and disengaging can help people survive. Judith Herman, too, writes that originally, she "viewed the capacity to disconnect mind from body as a merciful protection, even as a creative and adaptive psychological defense.

But before we celebrate this power of dissociation as retrieving human freedom from the grasp of necessity, it's well to recall that stoic freedom boils down to acquiescing to necessity by choosing to accept the course of nature. Escape from trauma through dissociation is not freely chosen. It is not even a "forced choice," since that means being forced to choose between two possibilities. Dissociation does not present itself beforehand as an optional alternative to coercion. It is, rather, a product of coercion, an effect of an overwhelming assault.

Moreover, in disowning the body or otherwise disengaging from the disabling force of circumstance, the trauma victim lets go of the necessary condition of any action in the world and we are back to the predicament of the disembodied astronaut who has no real choices because he cannot act. The two utter boundaries of freedom converge. then, at just this point, where the escape hatch from necessity opens out into a trap without boundaries. The disembodied spectator of her own rape is even more helpless than herself as the embodied victim.

Judith Herman goes on to explain how the escape from terror traps the trauma victim all the more terribly. For the strategy of dissociation doesn't really work of course. Out of body experiences notwithstanding,

trauma victims do not really escape from their own bodies, nor from the overwhelming experience, which comes back to haunt them and blight their lives in uncontrollable, involuntary flashbacks so vivid that they seem to be enduring the traumatizing event all over again - and again and again. The disembodied or dissociated self has not transcended the trauma, after all, but is afflicted by repetitions that are not even regular memories, but an eternal return of the same, terrifying body memories that are not even objects of recollection. In defense against these intrusive repetitions of the traumatic experience, victims typically numb themselves, constricting their ordinary consciousness and banishing the event from voluntary memory. Janet thought that post-traumatic amnesia was due to 'constriction of the field of consciousness' that kept painful memories split off from ordinary awareness.

Those who cannot dissociate resort to alcohol and narcotics to achieve that constriction by "getting stoned." But the flashbacks recur anyway, so that the abstracted, dissociated or stoned self relives its helplessness against those recursions as well.

Thus, although dissociation may seem to promise an escape of sorts, it turns out to be central to the pathology of PTSD, perhaps its very source, as has been recognized ever since Janet. The fourth edition of the American Psychiatric Association's Diagnostic and Statistical Manual's diagnosis of PTSD,

focuses on dissociation in the immediate aftermath of trauma as manifested in at least three of the following symptoms: (1) a feeling

of detachment, numbing or lack of emotional responsiveness; (2) decreased awareness of surroundings; (3) derealization; (4) depersonalization; and (5) inability to remember a significant aspect of the trauma."ix

The price paid for dissociation is high indeed. Worse yet, "People who have earlier learned to use this mode of coping with stress seem to be particularly vulnerable to using it again during acute stress. This prevents them from being fully aware of what is happening to them, and thus from 'owning' the experience; dissociating the experience means that they cannot learn from it." x

In fact, the dramatically pathological features of PTSD (or ASD) can all be seen as aspects or versions of dissociation. Herman wrote that "Dissociation appears to be the mechanism by which intense sensory and emotional experiences are disconnected, from the social domain of language and memory..."xi Intrusions of the trauma into later experience, whether as the re-experience of raw fragments or as the reenactment epitomized in Irene's case, reflect the fact that the original experience has never been assimilated into the symbolic order whereby we knit our experiences into an integrating narrative, as van der Kolk emphasizes in his early essays. And for the same reason, because the dissociated experience has never been integrated into the linguistic order, nor categorized and located into meaningful schemata, it remains beyond the reach of voluntary recall. Dissociation does not erase experiences; it compartmentalizes them in such a way that the unassimilated trauma lurks always present and

threatening. Judith Herman concludes that:

Although dissociative alterations in consciousness, or even intoxication, may be adaptive at the moment of total helplessness, they become maladaptive once the danger is past. Because these altered states keep the traumatic experience walled off from ordinary consciousness, they prevent the integration necessary for healing. Unfortunately the constrictive or dissociative states, like other symptoms of the post-traumatic syndrome, prove to be remarkably tenacious. (Robert Jay) Lifton likened "psychic numbing," which he found to be universal in survivors of disaster or war, to "a paralysis of the mind." xii

So, we arrive back at paralysis, but of a sort that traps the mind rather than the body, and does so precisely because the mind disowns its body. The escape from the body through intoxication or dissociation walls the trauma victim off from that very receptivity that makes embodiment necessary to freedom in the first place. Yet this very act of self-disembodiment is what traps him or her in the past, since it gets sustained as a defense against the involuntary intrusion of the original overwhelming experience - which occurs nonetheless, willy-nilly.

One might cite other forms of psychopathology that disable free choice. Obsessive-compulsive disorder is an obvious alternative syndrome. I have lingered upon PTSD partly because it has reached epidemic proportions in our day, but also because it focuses attention upon the necessary temporality of freedom. The sufferer from PTSD is transfixed by the past, by an episode of helplessness that has passed, but which he

cannot leave behind or transcend. Freedom must be temporal because the receptivity that subjects the body to determination by the world does not accommodate freedom as self-determination. If the self is to determine itself, it must go beyond this being in the world as a body determined by the world. To determine itself requires a supercession that introduces a novel determination over and beyond the determinations imposed upon it by a body that is receptive to the world.

Freedom can therefore only be as an advance beyond the given order of the world. Freedom must not only be in a world, but must transcend its being in that world insofar as that being-in consists in passive receptivity. In so doing, it renders that already given determinacy past. Even if I choose to perpetuate the status quo, that choice itself constitutes a novel determination because it excludes alternative possibilities. And there could be no free choice without alternative possibilities. The ability to choose, to determine oneself depends upon the ability to discover alternatives made possible by the already given world yet which are only possible for a freedom without whose chosen agency they could not be realized. Freedom can only arise within an already determinate world that it renders past by choosing a future.

Second, perhaps the most striking feature of PTSD according to the accounts that I have just summarized is the way in which it does seem to promise a kind of retrieval of freedom that has been overwhelmed by events that render it helpless, incapable of determining itself. When the vulnerability

inherent in embodied existence leaves no real alternative, the self “escapes” through dissociation, only to find that it has cut itself off from its world by dissociating itself from its world by dissociating from the receptivity of its own body, and has thereby become stuck more tenaciously than Brer Rabbit stuck himself to the tar baby.

Reflection upon PTSD has revealed how the two uttermost boundaries of freedom converge in a helplessness that locks the trauma sufferer into his or her past far more profoundly and poignantly than Jean Dominique Bauby was locked in by physical paralysis.

Neither the trauma victim nor Bauby is completely paralyzed. The rape victim or battle veteran goes on living and acting - and may seem the freer of the two, since Bauby could only blink that left eyelid. But by blinking it 285,000 times, he composed a deeply moving memoir of his own imprisonment, which inspired Julian Schnabel to create a beautiful film. So even that slight, minimal residual sliver of activity did retrieve freedom from paralysis and enabled Bauby to transcend the past by capturing it in his narrative.

By contrast, the escape from trauma that dissociation provides only traps the victim in a psychological paralysis that shackles him to the past, to the very moment whence he escaped, yet which persistently haunts the present and the future. The dissociative escape route is the very opposite of Bauby, locked into the diving bell of his inert body. For Bauby managed to integrate his physical inertia with his freedom by spelling out a narrative with the mere flutter of his eyelid, whereas dissociation never

assimilates the overwhelmed helplessness of a traumatic past. Overwhelmed by trauma, the victim only locks himself in by locking the trauma out. But the trauma remains embedded in the body. If we conceive of freedom as *autonomy*, as **self-**determination in contrast to other-determination, or heteronomy, we must not suppose that the free self is therefore indeterminate. The autonomous self is determined by its own choices and acts. If the choices that I've made in the past make no difference today, then I haven't actually determined myself after all. At the age of thirteen, I decided to smoke cigarettes in order to be cool, a decision I repeated countless times in the years that followed. Ten years later, I recognized that was a bad choice. But it took twenty years to undo the damage, to *realize* what I thus recognized. My decision to smoke had become so stubbornly embodied that the mere recognition was of little avail.

But these two alternatives, autonomy and heteronomy, become entangled in the case of trauma. An event counts as traumatic insofar as the victim finds himself or herself helpless, as *having* no choice. Dissociation offers an escape from the traumatizing circumstances, but thereby traps the fugitive in his very flight. And he remains caught in a trap that he cannot even see, since to recognize - or re-cognize the trauma would be to *undo* the dissociation.

"To undo the dissociation!" Isn't that the recipe for cure and for the recovery of freedom? Indeed, conventional therapy for trauma victims has typically centered upon dispelling the fog of traumatic amnesia and assimilating the recovered traumatic experience into a narrative scheme of meaning that integrates the victim's subjective life and frees him from the undigested past. The sufferer from PTSD would thus *regain* his

freedom in the very way that Bauby *retained* his, by the painstaking process of constructing a narrative that appropriated his own paralysis -- by re-owning the experience that had been dis-owned through dissociation. Judith Herman and Bessel Van der Kolk both emphasize the importance of such a reintegration. But mere recognition of traumatic events may prove no more effective than my recognition of the lethal danger of smoking – and for much the same reason: because the trauma is too deeply embedded in the body for mere narrative to reach. Van der Kolk entitled his latest book, published last September, *The Body Keeps the Score* because he has found that merely verbal recall of traumatic experience “is likely to activate trauma-related physical sensations and physiological hyper – or hypo-arousal, which evoke emotions such as helplessness, fear, shame and rage,” causing the trauma victim to feel that it is not safe to deal with the trauma (.p.8) which thereby perpetuates the dialectic of intrusion and numbness characteristic of the victim’s alienation from his own body.“ This discovery, “that insight and understanding are usually not enough to keep traumatized people from regularly feeling and acting as if they are traumatized all over again (has) forced clinicians to explore techniques that offer the possibility of reprogramming automatic physical responses.” In the new book and in recent articles, Van der Kolk turns to such body centered therapies. On the one hand, to techniques that foster close interoceptive attention to one’s own physical sensations and emotional feelings, methods epitomized by Buddhist mindfulness. Receptivity to his own felt body nullifies the numbness that afflicts the traumatized self. That, in turn opens the way for action-oriented therapies whereby the victim can retrieve control of his own body from the helplessness of reliving the traumatic experience.

Jean-Dominique Bauby remained locked in the diving bell of his body to the very end. He died two days after the publication of *The Diving Bell and the Butterfly*, the work wherein he had sustained his freedom through the fluttering of an eyelid, the one bit of his body that he could control despite his paralysis. By contrast, the PTSD sufferer has been locked **out** of his body and **lost** his freedom in bondage to a past that he cannot surpass. Still, unlike Bauby, the traumatized self may outlive his psychological paralysis and recover his freedom - if he can reclaim control of his body as an organ of both receptivity and agency and appropriate the traumatic experience that has afflicted him willy-nilly.

ⁱ Bessel Van der Kolk and Onno Van der Hart, "The Intrusive Past: The Flexibility of Memory And The Engraving of Trauma" in Cathy Caruth, *Explorations in Memory*, (The Johns Hopkins Press 1995), 162. *Memory*, Press 1995), 162.

ⁱⁱ Bessel Van der Kolk and Alexander McFarlane, op. cit. note 1, 12.

ⁱⁱⁱ Judith Herman, *Trauma and Recovery*, (New York, Basic Books, 1997), 47. *Memory*, (The Johns Hopkins Press 1995), 162.