The Specter of the Repressed: Žižek’s Symptom, Trauma Ontology, and Communist Trauma

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Slavoj Žižek frequently refers to traumatic episodes and trauma in general as examples to support his symptomatic reading of ideology and the contemporary world. However, his works seldom are fully appreciated and considered within the study of trauma. In this article, contemplating Žižek’s symptomatic reading of trauma and ideology, I consider the interactive relationship of symptom and ideology to reach a new perspective to understand trauma, particularly trauma rooted in communist catastrophes. I first assert that by introducing symptom as a master trope, Žižek bridges the gap between the Real and reality, and an individuals’ libido economy and the more general political economy, while at the same time he maintains a paradoxical voice between them. Next, I employ Žižek’s symptom as an analytic paradigm to interpret trauma as ontology. I suggest that trauma be read by a triad: the traumatic Real, traumatic text or representation, and symptom. Thereby, the study of trauma might be directed to the symptomatic dimension. Rather than exploring the hidden meaning,
historical truth, or traumatic events, trauma study focuses on how symptoms are presented in
the construction of trauma consciously or unconsciously. Finally, I combine Žižek’s theoretical
assumption of ideology and some studies of trauma (LaCapra’s “working-through” in
particular) in my attempt to establish a theoretical basis to interpret trauma rooted in
communist ideologies. I argue that for communist catastrophes per se, the mechanism of
symptom of trauma and posttraumatic stress disorder (what is called PTSD) has two
dimensions: non-knowledge (corresponding to act) and knowledge (corresponding to
experience). Symptom is performative, indicating the acting out of the unassimilated,
belatedness, or recurrence of trauma. It is also, or alternatively, a sign of “working-through,” a
process of coping with the traumatic memories. In totalitarian societies, the process of
working-through may be subject to hegemonic ideology. In addition, as Žižek’s understanding
of trauma parallels his comprehension of the Real, trauma in terms of chronology can be
perceived as being retrospective. Accordingly, I suggest that trauma study of the communist
catastrophes should focus on the form of symptom – exploring what symptoms of trauma
illustrate to us about the present is of greater significance than digging out the hidden truth in
traumatic symptoms.

**Symptom is going between**

Žižek’s conceptualization of symptom forms the basis for my primary paradigm to study
trauma. After the communist Soviet bloc collapsed with the fall of the Berlin Wall and the
division of the Soviet Union, Žižek developed an ideological theory, aiming to interpret the
phenomenon of the post-Communist society. His conceptualization of ideology starts with
interrogating symptom, and symptom is converted into “the governing trope” of Žižek’s
theoretical framework (Dean 2002: 22). In this concept, Žižek transfers the conflicts between
the Real and reality, the libidinal and the social, and the performative and the committed, into
a dialectic relationship. As I will discuss in the third part of this paper, Žižek’s symptomic
understanding of ideology provides a topography for interpreting trauma rooted in communist
catastrophes.

Etymologically, the term symptom derives from Greek σύμπτωμα, carrying with it a
sense of an accident or misfortune having occurred. The first person who utilized symptom in
philosophy is Karl Marx. As Žižek points out, “according to Lacan, it was none other than Karl Marx who invented the notion of symptom” (Žižek 1989: 11). Marx founded his materialistic approach to society and history on his appropriation of Hegelian ideas. However, what made Marx’s “epistemological break” (Gaston Bachelard) from Hegelian tradition is “symptom” (Friedman 1995: 165). By presenting symptom as he did, Marx revealed that it is the commodity, or the thing, rather than the concept of homogeneous human thoughts, which discloses the existence of capitalism.

Žižek’s parody of Marx, “A Spectral is Haunting Western Academia …, the spectral of the Cartesian subject” (Žižek 1999: 1), indicates that Žižek understands Marx’s symptom as the specter of the repressed truth. Žižek perceives symptom both as a pathological and a philosophical sign that we can easily catch by sight but cannot grasp. Symptom interposes ambivalently both the Real and the Symbolic. On the one hand, it mediates the gap between these two realms. We can see symptom directly, and this seeing may alert us to something unknown. On the other hand, it indicates the permanent discrepancy between reality (i.e., that which for Žižek is constructed by the Symbolic) and the Real. Thus, paradoxically, the symptom is always both the visible and the invisible, both the directness and the distance. It passes a message that we can perceive by our seeing and listening, but what is repressed is always beyond the curtains.

The ambivalence of symptom provides the space to bridge the Real and reality, the Real and the Symbolic, and the libidinal economy in psychology and the political economy in ideology. Žižek’s understanding of symptom is based upon his dialectic reading of Lacan’s three realms. Partly based on Saussure’s arbitrary connection of signifier and signified in the signs of language, Lacan claims that our reality is mostly constructed by the Symbolic, which encompasses everything from language to law. In contrast to this omnipresence of the Symbolic, the Real is non-differentiation, non-lack and non-surplus, and therefore it exists beyond and resists the symbolization. The Real suggests a mysterious world that cannot be accessible by our knowledge (Myers 2003: 25). We (the subjects) live in a world (reality) castrated from the Real, we are living in a world of empty signifiers, an appearance of the thing, but we are not present in the signifiers. We are absent in the story that represents us (Kesel 2004: 230). This absence of presence is the negation of the truth-based reality and of
the substance of the subject.

When Žižek appropriates Lacan’s three realms in his understanding of the relationship between the Real and reality, he imbuers Lacan’s realms with new understandings. Žižek posits a tension of language between commitment (which a certain language act requires one to make) and performativity (that is, a speaker performs the commitment cynically due to his/her anxiety, doubt or resistance to make the commitment that his/her language act requires) (Žižek 2008: xii-xiii). Due to this innate tension between literal meaning and intention, the Real is never fully represented. As Žižek states, the Real, which is disguised in its symptoms, is “an inert stain resisting communication and interpretation” (Žižek 1989: 75). It perturbs the Symbolic, but given that it cannot be located by endorsing it with significance, it defies hermeneutic reading. The Real is meaningless and senseless in the Symbolic realm.

However, Žižek also argues that the Real is not an “impossible thing-in-itself” (as he earlier claimed in the Sublime Object of Ideology,) since this claim “opens the way to the celebrate failure” (Žižek 2008: xii). For Žižek, Lacan’s three realms constitute an interactive triad, which consists of three modalities of the Real, the Symbolic and the Imaginary. Žižek alleges that “the entire triad is reflected within each of its three elements” (Žižek 2008: xii). In this sense, the three realms in Žižek’s understanding are not three separate realms but intimately intermingle with each other (Myers 2003: 25). The Symbolic works on the Real, distorting the Real in various ways, while the Real disturbs the smooth operating of the symbolic system now and then via its symptoms. Therefore, the relationship of the Real and the Symbolic or of the Real and reality (for Žižek, the Symbolic constructs most of our reality) is not only an analogue of Hegel’s master/slave. Thanks to symptom as the third element, the relationship is three-fold. Symptom is produced in this interactive space between the Real and the Symbolic, or the Real and reality. Although beyond the reach of the symbolic system, the Real may return via its corresponding symptom. As Žižek argues:

This real (the part of reality that remains non-symbolized) returns in the guise of spectral apparitions. .. To put it simply, reality is never directly ‘itself;’ it presents itself, it presents itself only via its incomplete-failed symbolization, and spectral apparitions emerge in this very gap that forever separates reality from the real, and on account of which reality has the character of a (symbolic) fiction: the spectral gives body to that which escapes (the symbolically structured) reality.

... What the spectral conceals is not reality but its ‘primordially repressed’, the
In Žižek’s understanding both the Real and reality exist in their differentiations of each other. Reality without the Real is not complete, while the Real appears via its symptom in reality. Symptom is an intrusive specter of the Real which interrupts the homogeneity of reality. In this sense, the Real consists of the space in which Hegel’s dialectic contradictions exist. The appearance of the Real is the one that gives rise to different interpretations, the abnormal which is opposite to the normality that we have already accepted, and the particular that possesses the power to subvert the genus.

This potentially subverting particular is the individual in Žižek’s theory. Žižek’s symptom extends beyond philosophical and psychological dimensions. Through a bombarding of examples that he draws from pop culture, film, media, and even popular jokes to prove his highbrow philosophical ideas, Žižek targets his research not to humans as the category, the genus, but rather to individuals as the particular: him, you, and me. Through this strategy, Žižek associates an individual as a particular with the societal. As Adrian Johnson points out, for Žižek as for Lacan, individual is always “trans-individual” (Johnston 2009: 86). Subject is never purely individual because there is always more than one in that “unit”. Lacan declared “I love you, but, because inexplicably I love you something more than you - the object petit a - I mutilate you” (Lacan 1973: 263). Lacan’s declaration articulates that the individual’s psychology always interacts with or is influenced by the collective psychology of a large community. Integrating Lacan’s idea with Ernesto Laclau’s and Chantal Mouffe’s political theory, Žižek considers the being of man in the contemporary constellation of the hegemonic society rather than in a void of philosophical space. Through this transference, Žižek’s interrogating the Real transcends the philosophical and psychological realms into the field of history. Žižek’s Real is not only an abstract impossibility. As Adrian Johnston also asserts, the Real for Žižek is not “ahistorical, but this real is the thing that created the history” (Johnston 2009: 87). As I will discuss in the third part of this paper, the double dimension of symptom - between the Real and reality, and the individual and the social - is pivotal to trauma study.
Symptom and trauma ontology

Žižek’s symptomic understanding of the Real is analogous or even equivalent to his symptomic understanding of trauma. In employing the concept of trauma, Žižek transcends trauma’s empirical and psychological dimensions through perceiving trauma based on his understanding of Lacan’s three realms. For Žižek, trauma is the Real. It happens when a symptom, the specter of the Real, “perturbs the smooth engine of symbolization and throws it off balance” (Žižek 2005 b: 31). In this sense, traumatic symptoms (such as nightmares, flashbacks, and obsessions) mark the unassimilated trauma, which haunts the individuals through such symptoms. For example, Žižek’s reinterpretation of Freud’s analysis of the case of the burning child is consistent with this point. Žižek maintains that when the father woke up at the moment, in his dream, when his son said to him “Father, don’t you see that I am burning?” it is not because the dream pushed the father back to the burning candle in reality, which would burn his son’s body, as most scholars who interpret this dream have avowed. Rather, the father escapes the Real that he confronted in his nightmare: the truth is his guilt related to his son’s death. The Real, here the trauma, is articulated through its symptoms, in this case appearing in the nightmare.

Apropos of the cause of the deference of trauma, Žižek believes that the paradox of time results in recurrence of trauma via its symptoms. In The Metastases of Enjoyment, Žižek analyzes the cause of Freud’s Wolf Man neurosis as the following:

The Cause is real, the presupposed reef which resists symbolization and disturbs the course of its automaton, yet the Cause is simultaneously the retroactive product of its own effects. In the case of the Wolf Man, Freud’s most famous patient, the Cause, of course, was the traumatic scene of the parental coitus a tergo - this scene was the non-Symbolizable kernel around which all later successive symbolization whirled. This Cause, however, not only exerted its efficiency after a certain time-lag, it literally became trauma - that is, Cause - through delay: when the Wolf Man, at age two, witnessed the coitus a tergo, nothing traumatic marked this scene; the scene acquired traumatic features only in retrospect, with the later development of the child’s infantile sexual theories, when it became impossible to integrate the scene within the newly emerged horizon of narrativization-historization-symbolization. (Žižek 2005 b: 31)

This reading conveys the core of the Freudian conceptualization of trauma: at its most elementary level, trauma lies in its belatedness. (I shall leave Žižek’s paradoxical reading of
the simultaneous nature of trauma to part three of my paper). Freud applied trauma to “an experience, which within a short period of time, presents the mind with an increase of stimulus too powerful to be worked off in the normal way, and this results in permanent disturbances of the manner in which the energy operates” (Laplanche 1973: 466). Laplanche explains that Freud attributed trauma to a disturbance of energy operation. However, Freud also perceived trauma as an impact on a person’s psychological and cognitive systems.

When Cathy Caruth drew attention to the “belatedness” in the Freudian concept of trauma, she argued that trauma is both responses to and a failure to respond to the overflowing stimuli. As Caruth explains, trauma generates from “an unexpected or overwhelming violent event or events that are not fully grasped as they occur, but return later in repeated flashbacks, nightmares, and other repetitive phenomena” (Caruth 1993: 91). This interpretation highlights the quintessence of Freudian trauma, namely, belatedness. The belatedness is pivotal for Freud to locate the cause of hysteria as the early traumatic memory of sexual seduction before 1878. It is also the key for Freud to explain war neurosis. Freud noted that the patient seemed not to be aware of harm and danger during traumatic events. But after a war, a train accident, or other potentially traumatizing event, the survivor unwittingly returned to that traumatic experience in his/her flashbacks, dreams, nightmares, and obsessive behaviors. Freud called such psychological phenomenon, which is caused by the belatedness, “a compulsion to repeat,” “recurrence,” or “acting out” (Freud 1961:1, 23, and 151). The recurrence, repetition, or acting out of traumatic memories is well recognized as a symptom of trauma, which remains a basis of defining trauma and PTSD in both psychological and cultural studies of trauma and PTSD.

However, what has been ignored by trauma study is that belatedness indicates a double deferment related to the traumatic experience. First, the Real is repressed at the moment when a human being’s cognitive system shuts down due to the surplus stimuli. Later, this unassimilated traumatic experience incessantly haunts the victim in his/her pseudo-presence, denying to be posited into the past. Therefore, trauma presents a time paradox: the traumatic memory occurs in the past, but it appears as the false present in the individual’s intrusive re-experience, and it blocks the person’s future. In this sense, like the Real, trauma always returns from the future, calling for meaning and understanding.
This is what Žižek has in mind in analyzing symptom and paralleling trauma with the Real. As for symptom, Žižek defines symptom as “a return of the repressed” (Žižek 1989: 55). Echoing Lacan’s definition, “the symptom initially appears to us as a trace, which will only ever be a trace, one which will continue not to be understood until the analysis has got quite a long way and until we have realized its meaning” (Žižek 1989: 55). Žižek believes symptom has the nature of retrospective. In Žižek’s Hegel-Lacanian reading, symptom is the repressed Real which is returning not from the past, but from the future. Symptom is a sign of the unassimilated past but it is “constructed retroactively - the analysis produces the truth; that is, the signifying frame which gives the symptoms their symbolic place and meaning” (Žižek 1989: 56). This statement articulates that the significance of symptom is contingent on our interpretation once it appears. The truth is neither symbolized nor integrated into an autobiographical line as the past. This is because the trace of the truth is not located in the past, but emerges in future moments when its meaning is sought. It is this retrospectivity that induces us persistently to seek its meaning. We are always re-writing history, as Žižek maintains, so we consider the past and give the past the meaning according to the present understanding.

This retrospective aspect, or the time paradox, of symptoms is coincident with repetition and recurrence of traumatic symptoms. It is also pivotal in Žižek’s philosophical reading of trauma and the Real:

The Real is therefore simultaneously both the hard, impenetrable kernel resisting symbolization and a pure chimerical entity which has in itself no ontological consistency. […] As we have already seen, this is precisely what defines the notion of a traumatic event: a point of failure of symbolization, but at the same time never given in its positivity - it can be constructed only backwards, from its structural effects. All its effectivity lies in the distortions it produces in the symbolic universe of the subject: the traumatic event is ultimately just a fantasy-construct filling out a certain void in a symbolic structure and, as such, the retroactive effect of this structure. (Žižek 1989: 169)

The above statement shows that the time paradox is not only a binary of now and the future, but also the three dimensions merged at the same level. Trauma is triggered by the unassimilated memory, which is haunting us in the present, and it refuses to withdraw into our history. Once we step out of the symbolic boundary to grasp it, it “evaporates” (Žižek 2005 b:
The meaning is always rewriting itself for the future. In addition, putting aside for the moment the discrepancy between this ‘fantasy-construct’ characterization and certain realities based on clinical psychology, Žižek identifies trauma with the Real, pointing out that the Real is Lacan’s traumatic kernel. Both of them possess the nature of resisting symbolizing. Trauma, like the Real, is “the part of reality that remains non-symbolized” (Žižek 1994: 21). Both of them are repressed in the past but we can only approach them by looking back to examine their impact on reality.

Expanded from both Žižek’s and Freud’s conceptualizations of trauma, trauma can be regarded as having its existence in its symptom. Trauma as the Real returns in various forms of “intrusive re-experiencing,” such as nightmares, flashbacks, and repetitive actions. Therefore, reading trauma is reading its symptom.

In fact, symptom, defined by Freud as a pathological sign that indicates a disease and something new, is the starting point for Freud to study trauma. Freud was one of the psychologists around the end of the 19th century who attributed trauma to the symptom of hysteria. The analytical methodology that Freud employed in studying trauma is exactly the one that he employed in analyzing dreams (Dean 2002: 31). Through studying symptoms of hysteria – e.g., dissociation and impulsive repetition - Freud found that symptoms of hysteria were triggered by unassimilated memories from the individual’s early childhood (particularly the memory of sexual seduction), which were repressed but perturbed the individual’s later life. Although traumatic symptom is rooted in the past, it reoccurs as an intruder to lock the individual to the pseudo-presence and therefore blocks the individual’s path to the future. In this sense, Freud’s traumatic symptom also originates from the time paradox.

If so, Freud’s dream concept may shed new light on our understanding of the relationship between trauma, traumatic text or representation, and symptom, the main problem of trauma. In Žižek’s reading, what Freud focused on in his dream study is not the content of the dream but the form of the dream. This dream-work distorted the unconsciousness. Reading Freud from the perspective of a Hegelian-Lacanian approach, Žižek asserts that “the essential constitution of a dream is thus not its ‘latent thought’ but this work (the mechanisms of displacement and condensation, the figuration of the contents of words or syllables) which confers on it the form of a dream” (Žižek 1994: 297). Žižek believes
Freud’s triad of dream: the manifest dream-text, the latent dream-content or thought and the unconscious desire, is not three dimensions, but a triple structure interacting with each other. The unconscious desire “attaches itself to the dream, it intercalates itself in the interspace between the latent thought and the manifest text; it is therefore not ‘more concealed, deeper’ in relation to the latent thought, it is decidedly more ‘on the surface’, consisting entirely of the signifier’s mechanisms, of the treatment to which the latent thought is submitted” (Žižek 1994: 298). Latent thought is not unconsciousness, but an unconsciousness which has already been transferred into normal thought. Consequently, the dream form is the essence of the existence of a dream, which provides a space where unconsciousness and manifest dream text are circulating.

Žižek further explains that Freud’s two contributions to dream study - that a dream is meaningful, and that a dream is beyond its significance (Žižek 1994: 299) – also suggest Freud’s two seemingly contradictory ideas concerning trauma. One is that Freud first considered that hysteria is not a disease or chaos, but a symptom of trauma which derives from early traumatic memory. Hysteria is meaningful in that it relates to an abnormal memory repressed in the remote past. It deserves that we approach it hermeneutically. By this we can reduce the intensity of the traumatic memory and integrate it into our life story. As to the second aspect, hermeneutical interpretation is limited within the healing purpose. Freud never claimed finding the truth by interpretation but indicated that we should be free from locating significance. This reading may be closer to Freud’s idea of trauma since at the very beginning, Freud’s psychoanalytical techniques were actually aimed at reducing the intensity of the traumatic effect so that the victim may attain healing, rather than reach the truth behind the trauma. Further, consistent with the second point, if we were to attempt to access the traumatic Real through the meaning of symptom in the hermeneutic reading, we are doomed to disappointment. As we would not be able to dig out the unconsciousness in the dream work, we would not be able to find out hidden truth(s) of trauma in the traumatic symptoms.

Concurrent with these ideas, the traumatic Real, traumatic symptoms, and traumatic text or representation can be regarded as an interactive triad. Traumatic symptom constitutes a space to allow the unassimilated memories and possible coping with the anxiety of traumatic experience to circulate. However, as Žižek avers, trauma is “deadlock” and “the
blank, empty, non-historical spaces of the subject’s symbolic universe” (Žižek 2005 a: 29). It cannot be reduced into clear signification even through it functions as an object of desire to the hermeneutic. Therefore, although psychoanalysis locates the trace of the trauma in the symbolic system by bestowing significance on the traumatic representation, the meaning of trauma develops from representing trauma, while the traumatic Real is beyond our reach.

**The problematic spontaneousness and ideology**

Assuming the triad of trauma, symptom and traumatic representation represents trauma in philosophical and psychological realms, how do we study trauma in cultural studies, particularly those catastrophes that originated from political and ideological conflicts? Based on the trauma triad comprising trauma, symptom and representation that I develop from Žižek’s concept of symptom, I suggest that for communist catastrophes *per se*, the mechanism of trauma is that the individual constructs the meanings of the trauma while he/she confronts it in recurrence, and this process, critically, is subject to the influence of ideology.

Going back to one point in the previous section: Žižek focuses on the spontaneous aspect of trauma, e.g., intrusive nightmares, obsessions, and compulsive repetition. Is this spontaneity the only mechanism functioning in PTSD and trauma? If so, how could we understand the retrospectivity in the recurrence of traumatic memories? Does this retrospectivity purely occur merely within the libidinal economy of trauma? And how do Žižek’s two dimensions of symptom fit in the retrospectivity? Žižek’s frequently oscillates between regarding the Real as an inaccessible or anti-symbolized world and paradoxically using the phenomena in the symbolic order to hermeneutically interpret the Real. In Žižek’s frustrated endeavor of bridging them together, we can observe that the gaps between the Real and reality, and/or libido and society, are still there.

Spontaneity is not the only force that functions in the mechanism of trauma and PTSD. When Freud defined acting-out in 1914, he also called attention to working-through. Freud perceived working-through as a process of the traumatized acknowledging his/her resistance or transference yet modulating his/her compulsive repetition. Working-through was not only a
technique of psychoanalysis, but also a process allowing the individual to understand the repetition and to “overcome it, by continuing, in defiance of it, the analytic work according to the fundamental rule of analysis” (Freud 1997: 155). Freud reaffirmed working-through and its function in *Beyond the Pleasure Principle* (1920). Observing a child’s game of throwing an object away each time his mother leaves, Freud explained that, by repeating the traumatic moments, a person might turn a passive situation into an active one, and by repeating it, he/she might show that he/she does not care for the loss (Freud 1961: 10). Thus, repetition is neither an unchangeable circling nor a simple mimesis. Within the multiple repetitions the individual not only acts out of his/her traumatic memories but also gradually reduces the intensity of acting-out. Through many repetitions, the individual may develop a feeling of mastering the situation that he/she failed to do during the traumatic event (Freud 1961:10).

This is also what LaCapra has in mind when he adopts Freud’s concept of working-through into his study of history. LaCapra attributes working-through as an autonomous process for the individual to acknowledge the trauma and its aftermath, rather than a therapy. LaCapra avers that acting-out partially functions in the mechanism of trauma and PTSD because working-through interrelates with acting-out as a counterforce. In his further clarifying the relationship between the two, LaCapra affirms that working-through is not the opposite or binary of acting-out; rather these two interact in trauma and PTSD. That is, repetition that is or becomes associated with working-through involves repetition that does not occur at the same intensity as at the moment of traumatizing, wherein the individual consciously or unconsciously mitigates the intensity of the recurrence by knowledge held in their cognitive system.

As for the tension between personal and societal, a similar gap exposed by Žižek in his effort to bridge the libidinal and societal can be observed in trauma study. Spontaneity, which closely relates to libidinal and personal aspects, has long been the focus in trauma studies. As to trauma study broadly, Ruth Leys argues that the first hundred years of trauma studies oscillated between two paradigms: one is mimesis, which means that the subject can only imitate the traumatic event; the other is anti-mimesis, holding that the traumatic event imprints in the memory so that the subject sooner or later can recall it (Leys 2000: 298). Leys’ brilliant study seems to direct trauma merely to the different ways the individual presents traumatic memory. This limits the understanding of trauma at a personal and psychological level.
However, as Judith Lewis Herman observes, the history of trauma study in psychology has been closely influenced by sociopolitical movements and trauma recovery partly relies on social support (Herman 1997: 9). Particularly, when we study trauma in cultural products, such as a literary recounting of trauma and traumatic symptoms in testimonies and/or by witnesses, we draw trauma into the social context. This goes beyond the pure clinical and personal exploration of trauma. In fact, as an individual is always transindividual (Lacan), personal trauma is never purely personal and libidinal. A recent tendency of psychological studies indicates that the sociopolitical factors should be given serious consideration. Some studies demonstrate that although PTSD presents similar symptoms in different cultures, nevertheless the interpretations of these symptoms are different according to cultural tradition and customs (Kirmayer 2009: 323-331 and Hollan 2009: 331-322). Personal factors which affect the degree of traumatization are also recognized in psychological trauma studies. The same event will not always be traumatic for different people if their worldviews, personal backgrounds and other personal factors are not similar (Juliet Mitchell 1998: 122). Laura S. Brown goes further by suggesting that a “culturally competent psychotherapy” is required to integrate cultural diversity into therapies (Brown 2008: 65). Although their influence is still limited, these studies promise to extend the psychological study of trauma to more culturally accurate analyses of trauma in other cultures. Trauma study then becomes a discourse in which many aspects of human life and culture are involved. Personal traumatic experience, even in cases of sexual abuse and child abuse, is never purely the history of the self. It is also the sign of the historical-political-social phenomena.

Therefore, except for the libidinal aspect, regarding elements which function in working-through, we should bear in mind the social, political, ethical and ideological dimensions. This point was partly articulated in LaCapra’s discussion of working-through. For LaCapra, working-through is “a self-critical process bound up with critical thought and practice having social and political import” (LaCapra 2004: 143). The ethical and sociopolitical agency is more involved than libidinal agency. This understanding of working through is convergent with Žižek’s symptomatic reading of trauma, even though LaCapra explicitly denounced Žižek’s symptomatic approach. In his critique of Žižek, LaCapra asserts that Žižek homogenizes desire and symptom (LaCapra 2004: 9) and structuralizes the Holocaust (LaCapra 1999: 721). For LaCapra, phenomenon is not universal, but particular, and
phenomenon is not only symptom (or acting out,) but also working-through, which is a critical and transformative process.

However, this critique puts LaCapra and Žižek on the same page. Although Žižek does not explicitly develop the concept of working-through in his understanding of trauma, he indicates this process in his concept of symptom. As I demonstrate above, for Žižek, the libidinal and the social interact with each other in the space of symptom. Traumatic symptom is the returning of the repressed, and in this returning the meaning of the repressed is constructed. The constructing meaning in the returning of the Real may involve working-through in the language of trauma. This idea reveals a similar critical process that LaCapra argues in his conceptualization of working-through. For LaCapra, working-through enables the individual to articulate "affect and cognition or representation, as well as ethical and sociopolitical agency, in the present and future" (LaCapra 2004: 119). Working-through is a critical process in which a compulsively literal mnemonic repetition is changed and new meanings are disclosed. The interaction between spontaneity and critical distance in repetition enables experiential interplay between past and present, as well as reflective movement from the past to the present and from there to the future. As LaCapra puts it, working-through opens the future by critically responding to the past. This understanding conveys three points that Žižek articulates in his conception of trauma and symptom. One is that working-through is a process of reconstructing the meaning of trauma in the compulsive repetition. In this process, when the past is uncontrollably revived, the individual can gaze at his/her performance from a certain distance. He/she is a performer and an observer, an audience of his/her own drama. The second point is that the hermeneutic of repetition doesn't lead to approaching the truth of trauma, but to the meaning of trauma in the present and to the opening of the individual's future. The last point is that working through trauma and PTSD involves ethical and sociopolitical agency. Hence, the mechanism of traumatic symptom has both a personal dimension and a sociopolitical dimension. Traumatic symptom is the returning of the repressed, but this returning also may instigate the process of working-through. In the space of symptom the libidinal and the social interrelate with each other.

This convergence of LaCapra and Žižek does not only provide a legitimate basis to combine these two, it is also the presupposition of my theoretical point: working through trauma of communist catastrophes is paradoxically interacted with ideology. Although
LaCapra mentions the ethical, political, and social dimensions in the process of working-through, he does not explicitly provide an answer to a question: when the victim consciously or unconsciously (LaCapra seems to be vacillating between these two) works through the post-trauma symptom so that he/she counteracts the compulsive repetition, what is the main force that affects this process? In other words, LaCapra considers working-through as an important process of trauma, but he does not explain how this process functions. For the trauma of communist catastrophes *per se*, Žižek’s ideological framework suggests a useful perspective to answer this question. Also, the paradoxical relationship between working-through and ideology explains Žižek’s paradoxical point of ideology, about which Žižek does not provide a persuasive answer.

According to Žižek, ideology is "*jouissance*," that is, "they know very well what we are doing, but still, they are doing it" (Žižek 1989: 33). We are living inside the false consciousness and we are enjoying this ideological false consciousness. Due to this *jouissance*, we not only live in a world of symptoms interpreted by a prevailing ideology, but also in an ideological fantasy. We internalize ideology through the following stages: we accept certain ideological ideas which are reinforced by Ideological State Apparatuses (government, policy, etc.) and then we act out the ideology (Žižek 1994: 9). Due to these stages, ideology is a form or a pool in which all the aspects of human thoughts are liquidated into circulating signifiers. Once one element becomes a *point de capiton*, it “quilts” into a certain ideological content (Žižek 1989: 123). In this understanding, ideology is non-fixed and liquid-like. When we take one element and fix it, this point dominates the other elements and it forms a certain way of representing and perceiving life, and then a certain content of ideology is formed around it. Moreover, as we externalize ideology by our daily actions, ideology is not a problem of knowledge, but a problem of action. Hence, Žižek maintains that the ideological paradox is “that the stepping out of ideology (what we experience as) is the very form of our enslavement to it” (Žižek 1994: 6). The very moment we believe we step out of ideology, we go back to it. This paradox is due to ideological interpellation.

Transplanting Žižek’s ideological framework into trauma study, I consider that ideology interacts with working-through paradoxically. The critical process of working-through is enclosed within a framework of ideology. When the traumatized creates the counterforce to
the repetitive returning of trauma, ideology formulates his/her perspective. Through this perspective, he/she transforms the traumatic symptom into a significance accepted by his/her current cognitive position. Further, due to this operative basis of working-through, a shift to a new and different ideology may precipitate, facilitate, and bolster (at a number of levels) the working-through process. Ideological shift provokes fundamental changes in the individual’s worldview and therefore may elicit the repressed memories to come up, calling for assimilation. For coping with the anxiety provoked by the traumatic memories, the individual is required to readjust and reconstruct his/her worldviews and therefore he/she may welcome a new ideology. This new ideology provides a perspective to recognize trauma and helps to relieve his/her anxiety, pain, confusion, and guilt. Such ideological requirement by working-through partly explains what Žižek called the paradox of ideology.

A test case of this understanding is the Chinese Cultural Revolution (1966-1976). For many Chinese people, the revolution was a unique experience which as to some aspects differed from the sudden encounters with death in natural disasters and other human catastrophes, such as earthquakes, genocides, traffic accidents, conventional warfare, nuclear warfare, child abuse and sexual abuse. Many Chinese people who were branded as “class enemies” experienced physical torture in public trials and concentration camps, the ordeal of harsh living conditions, and/or the shock of witnessing numerous incidents of violence and death. Many others not so branded also experienced some of the latter conditions. The political cause, which was the original source of these personal afflictions, directly lay in the so-called “class struggle” and “permanent revolution” which permeated Mao Zedong’s adaptation of Marxism. In this case, personal traumatic experience is closely correlated to the social, political and particularly ideological aspect.

The complications of Chinese social psychology after this ten-year catastrophe illustrate the two points discussed in the previous parts. One is the interaction of acting out and working through traumatic symptoms. Chinese people expressed their resentment, regret, anger, and grief toward their loss and distress in the revolution in collective telling and communicating through recounting their traumatic memories in literature, social discussions, and public demonstrations, which to a great extent bore the signs of psychological acting out of trauma. Meanwhile, through these social activities, many Chinese people recognized the personal calamities that they had repressed during the Cultural Revolution as trauma, and
moving beyond this recognition, they sought answers to key questions, such as whom should we blame, why a disaster such as this occurred, and how they learned lessons through it. Broaching these questions may have confused them when they confronted trauma, in part because of the radical shift of ideology and worldview. Nonetheless, this critical process can be regarded as working-through.

The other point is the paradoxical entanglement of ideology in working-through. Similar to Russians’ and Eastern Europeans’ post-communist experience, in which, as Žižek observed, people entered into believing another ideology after the ruin of the former communist one, Chinese people eccentrically welcomed Deng’s pragmatic socialism, which fundamentally deviated from the previous socialist utopianism. The whole country fervently launched a socialist modernization movement. The unpleasant emotions were paradoxically mixed with the excitement and joy of going forward together to the New Era (1979-1989). This bizarre optimism of devotion to Dengist socialism - another deviation of Marxism - indicates the ideological functions in working-through. By interpreting the previous experience in the framework of the new ideology (which was actually based on debasement of the old ideology), individuals were able to reach an understanding of why they did what they did or received maltreatment under the former ideology. A typical example is that Mao’s widow and another three top leaders during the Cultural Revolution were widely recognized as scapegoats. They were interrogated in public court and later were sentenced to a capital penalty or life-long jail sentence. In this sense, the Chinese people required a new lens to reconstruct their cognitive system so as to read, to know and to comprehend their recurring past.

On the other hand, the new ideology also provided a shelter for individuals to defend themselves from the overwhelming emotions and to alleviate anxiety and the fear of confronting the trauma. Deng’s socialist modernization provided an object to redirect their libido, regain both ideological and personal love and affiliation, and at the same time, forgiveness was reached. The new ideology was thus welcomed. This ideological requirement in working-through exemplifies what Žižek called the paradox of ideology: Chinese people fell into Dengist modernization immediately when they stepped out of the Maoist Utopia.
Conclusion

To sum it up, apropos of Žižek’s ideology theory, there are two key points that I draw out into my suggestions about interpreting trauma. One is that our reality is distorted by ideology, like the distortion of a dream. We enjoy it, albeit cynically. We know what we are doing, but we still do it. Ideology is internalized in both our knowledge and action so that the process of working-through is subject to ideological control. The other point is that although Žižek’s symptom is the appearance of the Real, symptom presents an antagonism developed by the tensions between the Symbolic and the Real, and the libidinal and the societal. Overall, for Žižek, with symptom the reality is enclosed in the framework of ideology. This ideology framework is what Žižek employs to interpret the communist catastrophe. Žižek observes that in Yugoslavia, after the trauma of decades of communist rule, the communist ideology was not destroyed, but assimilated new members. Thereafter, Yugoslavia fell into another ideological trend of nationalism. A similar phenomenon happened in China. After the trauma of the Cultural Revolution, Chinese people were obsessed by the ideology of socialist modernism, even though this fetish soon led the country toward another trauma: the Tian’anmen Massacre in 1989.

Transplanting this ideological framework in the language of trauma, for the trauma related to communist ideologies, traumatic symptom provides the traumatized individual with a space where he/she may act out the traumatic memory and work through it through an ideological lens. Therefore, the framework of traumatic symptoms bridges both the personal and the societal. Ideology is not only involved in inducing trauma; it also is involved in working through trauma. This working-through through an ideological lens is indicative of what is happening now. Trauma is transited as it is being reconstructed. We cannot deny the traumatic experience, however, it is this negation of the negation of trauma that draws us to a notion that trauma is not static, but a historical entity which is influenced by ideology and ever-evolving shifts in ideology. Therefore, rather than searching for a hidden meaning behind the symptom, I suggest focusing on the appearance. Because the symptom is there, calling our attention to the truth that it carries. This truth, however, is always slipping out of our hands once we attempt to catch it. The Real, like a firefly sparkling in reality, reminds us of its existence, but it also reminds us of the limits of our knowledge. On the other hand, trauma is
also a complex phenomenon which is related to and arguably transformed by social, political, ideological, and historical influence. So that when we approach it, we are not seeing the past. What we see more is the present and its meaning for opening the future. And perhaps, this is the essence of the study of trauma in its cultural sense.
References


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