SOCIAL TRAUMA AND EMOTIONAL ATTACHMENT

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Abstract. Trauma can be described as an injury that leaves permanent consequences, latent traces that can be activated in periods of crisis (Krstić, 2009). In the second part of the 20th century, the term trauma started being used ever more outside the medical and psychiatric context and entering the domain of social sciences (Sztompka, 2009). In this way, they opened the road to recognizing a new meaning of trauma, which they titled cultural or social trauma. It is known that the theory of emotional attachment states that in crisis or traumatic situations, members of a family group feel insecure, that risks in the environment can lead to lowered responsiveness of the parents, but it is less widely known if unresolved traumatic experiences of parents can be transferred to children and their later emotional attachment patterns. There is particularly little knowledge on whether significant social changes leave consequences on emotional lives of individuals and the emotional lives of their children. In this paper, we try to make a brief review of the literature on the topic, and summarize the theoretical and partly empirical knowledge in the area that exists so far.

Key words: Social trauma, psychological trauma, attachment.

INTRODUCTION

Trauma can be described as an injury that leaves permanent consequences, latent traces, that can be activated in periods of crisis (Krstić, 2009). In the second part of the 20th century, the term trauma started being used ever more outside the medical and psychiatric context and entering the domain of social sciences (Sztompka, 2009). In this area the concept of psychological trauma gained widespread use in the last decades.
Psychological trauma can be defined as a set of responses to extraordinary, emotionally overwhelming and personally uncontrollable life events (e.g. Goodman, Saxe, and Harvey 1991). Similar to this, a traumatic event would be an event that triggered the set of responses representing psychological trauma.

I. SOCIAL TRAUMA

According to the dialectical approach, the personality of an individual is defined by an interaction of its biological, hereditary factors and factors of the environment (Wang 2014). A pronounced position in this second group of factors has the influence of social, political, institutional and cultural reality on the behavior of an individual and his personal experience (de Tubert 2006). Some social changes can represent a trauma for an individual (Sztoompka 2000). Such social changes are those that have the following properties: they are sudden and fast, deep, essential, radical and all-encompassing, they are externally enforced, meaning that they come from some other party and are not caused by the individual, or were not caused intentionally by the individual, and are perceived as unexpected, unpredictable and repulsive. Such changes include, among other things, forced migrations, ethnic cleansing, genocide, mass murders, a lost war (Volkan 2009, 2001). These events may produce trauma, but need not.

Taking a constructivist perspective, Alexander (Alexander et al. 2004) writes about cultural trauma, as an experience of the members of a community that they have been subjected to a horrible event that left indelible marks on their group consciousness, making their feeling permanent, and essentially and irreversibly changing their identity. Certain events gain the meaning of trauma based on the way they are represented by social entities (e.g. mass media, bureaucracy, science and law) and on the selection of this information by entities with power in the society. Information that leads to trauma contains information about desecration of important values, about a destructive social process or processes, about infliction of injuries upon the community and about demands for emotional, institutional and symbolical reparation and reconstruction (Alexander et al. 2004).

Alexander (Alexander et al. 2004) states that events considered to be causes of trauma need not be traumatic in themselves. According to this author, trauma is attributed to “real or imagined phenomena, not because of their real harmfulness and suddenness, but because they are believed to have harmful influence on the collective identity” (Alexander et al. 2004). An event can be perceived as traumatic while it is happening; before it happens; after it happens, through reconstruction in memory; but trauma perception can also be a consequence of an imagined event, an event that never happened.

Unlike psychological or physical trauma, which necessarily include an injury and experience of great emotional pain suffered by the individual, cultural trauma refers to a dramatic loss of identity and social structure, and influences a group of people that have achieved a certain level of cohesion (Eyerman 2001). Due to this, this type of trauma need not be directly experienced by the individual or all of the members of a community. Although an event that would be a significant cause is necessary, it is important that traumatic meaning is established and accepted, and this is a process that requires time. According to Neil, a trauma like this can have permanent consequences, that cannot easily be dismissed, and events connected to it will replay again and again in individual consciousness thus becoming rooted in “collective memory” (Eyerman 2001).
This collective memory is defined as memories from the collective past, which are retained with members of the groups and are propagated forward in two possible ways. It can be in a continual process that could be called “public commemoration”, in which rituals are used to establish a collective past or through discourses specific for a certain group or collective (Eyerman 2001). This socially constructed and historically rooted collective memory has a function of creating social solidarity in the present.

In the discourse on cultural trauma, it is understood as a dynamic process, a process that develops over time, hence authors in the area propose the existence of traumatic sequences or phases through which social trauma and its consequences develop (Sztompka 2000). According to Sztompka, trauma includes six phases (Sztompka 2000). The first phase includes the existence of structural and cultural bases for the appearance of trauma. Conditions favorable for the development of trauma are those that lead to destabilization of basic values, beliefs and norms. Various factors can lead to these conditions: conflicts and separations within a previously singular culture; a conflict between the traditional and novel cultural norms, as in migrant communities for example; constant confrontations of cultures in multicultural communities; technological, economic, political or any other changes that, among other things, require a change of traditional behavior patterns and a reevaluation of beliefs. For cultural trauma to appear, the emergent lack of adaptation must be perceived as a problem, as something that is painful, and so requires an intervention. This intervention then happens in subsequent phases.

The second phase is the existence of a potentially traumatic event. Cultural destabilization makes people anxious and sensitive to the influence of aversive events (unemployment, inflation, crime rate rise, etc.), in this way making them vulnerable to the development of trauma symptoms. The third phase refers to a certain interpretation of the event, which also depends on the narrative created in the culture of the community or that stems from the cultural heritage. This cultural relativization is so powerful that these interpretations can not only make some real events traumatic, but can also make objectively nonexistent events be felt as traumatic. It can also make real events with real, adverse consequences be perceived as nontraumatic. The fourth phase consists of trauma symptoms, and the fifth consists of post-traumatic adaptation. How will a person respond to trauma depends on many factors like education, social support, attitudes, etc. Together with the increase in the education level, sensitivity to cultural trauma also rises, as does the range of functional strategies for coping with that trauma. Available social support and attitudes that imply tolerance rather than ethnocentrism and dogmatism also have a positive effect on post-traumatic adaptation. The last phase is the overcoming of trauma, which, in the case when strategies used to overcome trauma are not constructive, can also lead to a new cycle of traumatic sequences (Sztompka 2000).

2. PSYCHOANALYTICAL UNDERSTANDING OF SOCIAL TRAUMA

Perceiving a social system as an object, psychoanalysts consider this relationship between an individual and its social system to be similar to the relationship between a child and a mother (de Tubert 2006). This similarity manifests itself in the function of containing, about which Bion writes (de Tubert 2006). As a mother is a container for physiological and emotional needs of a child, so should society be sensitive to the needs and sufferings of an individual and group, ready to recognize their existence and solve
them through taking appropriate actions. If the social system does not perform this function, trauma appears as the result and it can be equally important as the one experienced by a child in a relationship with an unresponsive mother.

Hernandez de Tubert (de Tubert 2006) lists three types of this failure:
1. When the social system fails to contain, protect, provide aid and compassion to victims of poverty, disease, natural catastrophes, social upheavals, economic crises or wars;
2. When the social system fails to protect individuals in case of an undisputed attack on a certain subpopulation (on those in power, on the privileged or on minority groups) or on the majority of the population, like in cases of social repression, wars, racism, genocide or purges;
3. When the social system publicly supports, and clandestinely brakes current social values and laws, as in cases of corruption, fraud, lying.

If the social system negates the suffering of a victim, be it an individual or a group, and if it also, unjustly, considers the victim responsible for the suffering and events leading to it, trauma becomes even more complex (de Tubert 2006). Even if the social system is unable to provide aid, it is important that it recognizes the existence of the crime and the suffering of the victim. If justice is satisfied quickly enough, the victims will regain their hope in the survival of the community and in humanity. On the other hand, if an individual recognizes that it has been cheated by the social system, it will lose trust in it. The perception that a government does not perform its function, that it disrespects the law, or works against the community or a part of the community, produces suffering that is extremely intensive and can even lead to individuals negating that traumatic events have taken place at all. According to the psychoanalytic standpoint, intense anxiety and perception, as part of a traumatic event, are not a consequence of the event itself, but of its repression (Alexander et al. 2004). When deception becomes completely obvious, its victims can become depressive, apathic, desperate, unless they find a way to express their dissatisfaction immediately (de Tubert 2006). As individuals in power are rarely ready to recognize and accept their own errors, social trauma becomes even more complex.

Eyerman (Eyerman 2001) points out that, according to the psychoanalytic theory of trauma, it is not the traumatic event itself that produces the psychological consequences of trauma, but memories of that event. According to this explanation, after a traumatic experience comes a period of latency between the event itself and the experience of trauma, that is characteristic of forgetting. However, trauma, as a reflexive process, connects the past through representations and through imagination (Eyerman 2001). This can lead to disturbances in the formation of identity, where the person attributes a disproportionate importance to certain participants in the traumatic events, either victims or perpetrators. This further leads to the person becoming preoccupied with them and causes them to compulsively repeat that picture. Resolution of trauma can thus be achieved through reconstructing memories of the event. Psychoanalytically oriented authors (Aarelaid-Tart 2006) are of the opinion that social trauma exists as an unconscious emotional fear, negating the existence of collective effort to attribute responsibility to the traumatic social event that once happened. According to them, trauma will be resolved when memory about the traumatic events is “repaired” and when things “return to their rightful places” in our collective consciousness. Eyerman (Eyerman 2001) states that with social trauma, having in mind the importance of imagination and mediation, one should not consider the traumatic event itself, but the traumatic influence. Cultural trauma is also a consequence of an event
or series of events, but these need not be personally experienced. These experiences are mainly transferred through the media, and this includes a spatial and temporal distance between the traumatic event and experience. Conveyance through the media always includes selective presentation and construction of information, and the decision of someone else on the nature of the presented content. Due to this, the mentioned author states that social trauma mainly includes the meaning of struggle, suffering, events connected to the source of pain, sacrifice and a sense of responsibility.

3. CONSEQUENCES OF SOCIAL TRAUMA

Social and cultural traumas, like the ones caused by subjugation of indigenous peoples, are common when nations fight for sovereignty, when the population strives for equality or when a civilization strives for power (Famula 2007). Leaders of the society promise that similar traumas will never happen again and emphasize the need for traumas like this and events that caused them to be forgiven and forgotten as unhappy parts of history. In doing this, they do not understand or ignore the consequences of social trauma, but, as is the case with individual victims of trauma, symptoms remain with certain social groups as negative consequences of the so-called “neglected trauma” (Famula 2007). Societies influenced by a collective traumatic event develop a similar worldview, collective consciousness, that determines the way they will try to heal themselves from these traumas, but also the way in which they will face future conflicts. According to this author, many psychologists believe that traumatic events often generate future traumatic events. This happens because collective consciousness of the traumatized population transforms itself so that it accepts trauma as natural behavior. The author states that similarly to the way traumatized individuals, who were abused in childhood, are more prone to be violent in adulthood because they were unable to heal themselves from trauma, so will populations that were hurt by trauma connected to violence also react violently. Unresolved social traumas leave only negative consequences not only on the society, but also on individuals and their physical, cognitive, behavioral and emotional aspects. Regardless of whether individuals develop less pronounced or more pronounced trauma related disorders, a traumatic event in itself leaves deeply rooted, harmful results if these are not worked on (Famula 2007).

According to Volkan (Volkan 2009) the specificity of trauma resulting from war or states similar to war or from an existing destructive political system is that the enemy is recognizable and that he inflicts pain and suffering on his victims on purpose. Such trauma influences a member of a society differently than the trauma caused by natural catastrophes and accidents, in which causes are seen in destiny or “god’s will”; or traumas like the loss of a leader in which the members of society blame individuals or the government for negligence. After states of war, when a society becomes a “purposeful goal of an aggression” victims must confront five different psychological phenomena that are related between themselves:

1. Joint feelings of shame, humiliation, dehumanization and guilt.
2. Joint lack of the ability to be assertive.
3. Joint identification with tyrants (if the influence of usurpers, who restrain activities and freedom of victims lasts long enough, it becomes internalized as a joint “external superego”).
4. Joint mourning of loses.
5. Transgenerational transfer of trauma.
These phenomena permeate the lives of members of the endangered society and influence the appearance of problems such as poverty, lack of experience of a democratic way of life, corruption in the new political system, international manipulations (Volkan 2009).

4. AFFECTIVE ATTACHMENT

According to the attachment theory, interpersonal experiences with one’s significant other, one that emerged as the dominant figure of affective attachment in the early years of one’s life, are important for social and emotional development of personality i.e. the development of capacities for establishing behavioral and affective regulation (Stefanović-Stanojević 2010). These emotional experiences lead to the formation of certain beliefs about oneself and significant others, of internal working models and corresponding styles of affective attachment: secure, avoidant, preoccupied or disorganized.

Internal working models are acquired in early childhood and potentially influence future behavior, expectations and feelings (Stefanović-Stanojević 2005). A working model of the self represents a collection of expectations and beliefs of a child about itself, which it acquires based on the quality of its parents’ relationship towards it. The basic property of this working model is the extent to which he or she is acceptable or unacceptable to figures of attachment. The model of others is a collection of beliefs and expectations in relation to others, based on the perceived behavior of parents. The main property of this model is the expectation about who the figures the person attaches to are, where they can be found, and how they are expected to respond.

Properties of the four affective attachment styles are the following (Bartholomew and Horowitz 1991):

- The secure attachment style includes low anxiety and low avoidance. Persons with this style of attachment enter relationships with others with trust and openness. Children with this style grow up to be self-confident and autonomous persons, and their capacities to deal with difficulties of life are great and unburdened with traces of childhood. A good picture of oneself and others gives a chance to persons of this type to build authentic and open partner relationships.

- The avoidant attachment style includes low anxiety and high avoidance. These persons avoid closeness because they have negative expectations of others, but manage to maintain their feeling of self-worth through defensive negation of value of close relationships and attachment. Children with this style of affective attachment grow up into rigid, defensively focused personalities. View of others is colored by distrust. They enter partner relationships rarely and without expectations, hence their partner relations are frequent, shallow and short.

- The preoccupied attachment style involves high anxiety and low avoidance. Children with this attachment style grow up into persons that are blocked by anger, unresolved conflicts, prone to exaggerated involvement in affective relationships. Contaminated by their own expectations and disappointments they have no energy to adequately assess reality. When establishing relationships, these persons start from a position of lower value and attempt to secure unconditional acceptance from others. They are prone to symbiotic relationships and dramatization.
The disorganized affective attachment style includes high anxiety and high avoidance. Persons having this style of attachment are dependent on the acceptance of others and have negative expectations of others. This leads to the avoidance of intimacy, in order to avoid the pain of loss or rejection. Children like these grow up into people prone to excessive control of others, who attempt to secure themselves from irrational fears. Their relationships are rare and chaotic.

5. SOCIAL TRAUMA, PARENT-CHILD RELATIONSHIP, LATER RELATIONSHIPS WITH OTHERS

Internal working models may remain stable, reflecting precisely secure and insecure relationships, but an affective change in the working models is also possible (Stefanović-Stanojević 2005). Parents who used to be adequate may change for numerous reasons (disease, loss of job, war, etc.), may start behaving aggressively, may threaten to commit suicide. In every case, a child’s previous trust in them will be shaken and will lead to the reconstruction of the model of a parent.

Liotti (Liotti 2004) points to a significant relation between unresolved traumatic memories of the parents and the disorganized attachment of children, which can be primarily explained by inherited nature of interpersonal affective relations. According to this author, the theory of affective attachment states that people, like other mammals, are born with an evolutionary tendency to seek protection from members of their social group whenever there is danger and when they suffer from physical and emotional stress. This system of seeking protection i.e. attachment remains operational through person’s entire life and is activated strongly after experiencing fear or physical or psychological pain. On the other hand, an inborn tendency to provide protection to one’s closest persons enables this connection of seeking and providing to function smoothly. However, in parents that have experienced some sort of trauma, unresolved traumatic memories may “emerge to the surface”, leading to psychological pain associated with these traumatic memories, that influences their affective system and their protection providing system. Activation of systems of affective attachment in parents and the lack of a soothing response from their significant others can lead to emotions of rage and fear in the parent. This disturbs their responses to the attachment demands of their children. The combination of rage and fear that comes into existence in this way leads to fear in children and initiates their defensive escape reaction. After this, the increased distance from the parents additionally activates their system of affective attachment that is independent of parental behavior. This makes the parent figure, one that leads to the disorganized behavior, be seen as both a source of fear and a solution (Liotti 2004). Liotti states that there is no unified and coherent way of behavior in a child’s experience that is able to overcome these contradictions. Mihić cites Belski (Mihić, Zotović, and Petrović 2007) who states that stressful experiences in a developmental environment lower capacities for the sensitivity and responsiveness of caregivers, thus increasing the risk of depression and other problems that reflect on the fulfillment of the role of the caregiver and the quality of the relationship with the child. Due to lowered sensitivity of caregivers, a child has higher chances of developing some insecure attachment styles.

In her study Wiese (Batista-Pinto Wiese 2010) used the example of migration to study the influence of social trauma on the psychological states of individuals. Migrations have a deep influence on family history and comprise both the culturological frame of the
family and the internal psychological frame of the individual. In other words, this social change influences both the psychological and cultural identity of the parents, who convey this to their children (Batista-Pinto Wiese 2010). The parent exposed to a new culture, in the process of acculturation, can lose trust in the outside, social and cultural world. They may come to feel that the outside world is no longer safe, because they left the safety of their home. Out of this, a state of confusion about the surrounding world can also develop. Parents can transfer such a perception to their children, thus creating feelings of uncertainty and insecurity in them. Traumatized parents violate their affective basis with the child, are not able to recognize its needs, act anxiously and fearfully, thus leaving consequences for the affective development of the child. The mentioned author concludes that social changes can represent a great vulnerability factor for the parent-child relationship and emotional development of children, one that can, unfortunately, have consequences on the child’s later life and its social relations.

While studying the influence of social trauma on the lives of new generations of indigenous peoples in America, Kathleen Brown-Rice (Brown-Rice 2013) uses the concept of historical trauma, that she defines as the heritage of chronic trauma and unresolved pain among generations. New generations of these populations suffer from physical, emotional and social consequences of past traumas. This author emphasizes that this does not enable overall generalizations, but can explain some discrepancies in disease rates, abuse and neglect, poverty, family disorders in new generations of indigenous peoples of America. The reasons for these sufferings are multifold. Repeated thoughts about suffered historical losses lead to stress with which individuals have to cope, and perceptions of the new generations that they are discriminated can even lead to serious health problems.

Historical trauma of the parents is transferred to new generations over the identification of children with the suffering of their parents, where children, by indirect learning, acquire symptoms of historical loses. Another method of transfer is over the communication style with the parents, through stories about traumatic experience, descriptions of parent’s traumas, and generally over parenting style and affective relations with the children. (Brown-Rice 2013). This last method of trauma transfer is explained by the fact that problems with trust and intimacy appear in the parents, as a consequence of their experience with being victims of a traumatic event. This influences the development of their affective attachment to the child. Some people who were subjected to violence, enter “the circle of violence” with their children (Brown-Rice 2013). This compromises family stability, and develops a risk that unhealthy parenting styles and patterns of social relations will appear in subsequent generations.

Haskell and Randall (Haskell and Randall 2009) write about social, historical trauma as a historical injury, which they define as “collective complex trauma inflicted on a group of people who share ethnic, national or religious denomination. It represents the heritage of numerous traumatic events which the community experiences through generations and encompasses psychological and social responses to such events” (Haskell and Randall 2009). It can also be characterized as a collective emotional injury that appears during one’s lifetime and through generations (Haskell and Randall 2009). Studying the influence of trauma on the lives of the Aboriginal Peoples of Canada, these two authors point to the conclusion that due to a feeling of lowered security and freedom, feeling of guilt, shame and inadequacy, caused by this trauma, an altered relationship toward oneself and others may appear, and these changes can be interpreted in the frames of theory of affective attachment. Parental responses to big traumatic events, including reactions to traumas of
their personal histories can play a significant role in the mental health of their children. Children whose parents are traumatized, depressive or suffering from chronic stress may often be neglected. Traumatized parents are not capable of reliably comforting and soothing their children, due to their impoverished or unrecognized emotional states. Feelings of desperation and fear also appear, leading to a reduced ability to give an appropriate emotional response. What might be the most important, according to the mentioned authors, is that children, who were unable to establish a secure style of attachment due to these reasons, may, later in life, be less capable to utilize relations with close persons as sources of security and comfort. This also refers to compromised intimate relationships with partners, their own children and other family members.

Haskell and Randall, using the example of the Aboriginal Peoples of Canada, state that stress in children is caused not only by traumatized parents, but also by nonaccepting outside environment, teachers and peers, who play an important role in the lives of the children. More specifically, in this population, a correlation was found between the rate of child abuse and “intergenerational trauma”, that represents the result of the parents’ and grandparents’ attempts to confront the outside world, isolation, poverty, school and other institutions (Haskell and Randall 2009).

When talking about the territory of the former Yugoslavia, although there are numerous studies dealing with the individual mental health of people personally victimized by war (e.g. refugees) (Porter and Haslam 2005; Fazel et al. 2012; Saadi, Bond, and Percac-Lima 2015; Steel et al. 2011), there are relatively few studies treating the issue from the social trauma perspective. It can be stated that social changes brought by the Yugoslav wars of the 1990s had great traumatic potential. In the situation of war and dissolution of the country, in which the population of the Socialist Federal Republic of Yugoslavia found itself, emotional suffering was very intensive. Feeling that the government, that was trusted, could not find a solution and avoid war, led to the increase of anxiety of the population, and the experience of a sudden change and injury of the collective identity created a cultural trauma that manifested itself as a state of shock and intense fear. In the countries of the former Yugoslavia, moral lessons of this cultural trauma have been objectified through various monuments, museums, holy places and customs, that enable the new national identity, resulting from the experienced trauma to remain deeply rooted in the community (Alexander et al. 2004). The capability of the social system to contain the emotional needs of war victims was brought into question. Also, it is questionable how much could persons in a state of extreme anxiety be a source of security for their children. A question arises of which style of affective attachment could be characteristic for these children and would it manifest itself in their partner relationships? A study conducted by Tatjana Stefanović-Stanojević (Stefanović-Stanojević 2007) in Niš (Serbia), pointed to the increase in the disorganized style of affective attachment, a style that is characteristic for children who perceive their parents as frightened or are frightened of their parents themselves. On a sample of students of service profession in Slovenia, Croatia, Serbia, Macedonia and the two entities of Bosnia and Hercegovina, Hedrih, Pedović and Pejićić (Hedrih, Pedović, & Pejićić, in press) report participants from Slovenia having the lowest average scores on Avoidance and the highest average scores on Anxiety. They also report that their samples differ in Anxiety, where, on the one hand we have Slovenia and Croatia with relatively higher levels of Anxiety compared to the samples from other countries included in the study. These differences were interestingly less related to the exposure of the country to war (according to indicators used in the study) and more to the differences in religion and economy.
Social trauma is a relatively new concept of psychological trauma in literature, although its consequences have been present for long time and are deeply rooted in many societies and cultures. Through an overview of the available literature it can be concluded that social trauma can have consequences both on society as a whole and on individuals and their cognitive, emotional, behavioral and interpersonal life. Serbian literature currently has very few references on social trauma and its consequences although the history of our country shows a very strong need for this. It is clear that social changes brought by the Yugoslav wars of the 1990s left consequences for both the society and individual personalities that were caused by intense emotional sufferings. In spite of this, there are a few research studies done on the topic of social trauma, be they theoretical or empirical. Is it because time is needed to accept the new concept or were these events forgotten? Or is the reason the fact that consequences of this trauma are deep and permanent, so the concept of avoiding the “touching of old wounds” has been transferred to the new generation? If this is the case, that is yet another indicator of the importance of studying social trauma.

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Socijalna trauma i afektivna vezanost

Trauma se može okarakterizovati kao povreda koja ostavlja trajne posledice, latentne tragove, koji u kritnim periodima ličnosti mogu biti aktivirani (Krstić, 2009). U drugoj polovini 20. veka izraz trauma počeo je sve više da se koristi i van medicinskog i psihijatrijskog konteksta, i da zalaži u domen socijalnih nauka (Sztompka, 2000). U okviru toga, jedan od upotrebe koncepta trauma je u suočavanje sa negativnim i disfunkcionalnim posledicama koje društvene promene mogu ostaviti na pojedine i društvo. Time je otvoren put ka sagledavanju novog značenja traume, koja je nazvana kulturna ili socijalna trauma. Poznato je da teorija afektivne vezanosti ukazuje na to da se u kritnim ili traumatskim situacijama članovi porodice osećaju nesigurno, da rizici u okruženju mogu uticati na smanjenju responzivnosti roditelja, ali je manje poznato da li se nerazrešena traumatska iskustva roditelja prenose na decu i njihove kasnije afektivne obrasci. Naročito je malo saznanja o tome da li značajne socijalne promene, ostavljaju posledice po pojedine, njihov, i emocionalni život njihove dece. U ovom radu pokušali smo da napravimo kratak pregled postojeće literature na ovu temu i sumiramo postojeća teorijska i delom empirijska znanja koja za sada postoje na ovu temu.

Ključne reči: socijalna trauma, psihološka trauma, afektivno vezivanje.