Geotrauma: Violence, place and repossession

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Abstract
Geographical interest is growing in psychological trauma from political, social, urban and ecological violences. This paper reviews temporal and spatial aspects of trauma, emphasizing Black, postcolonial, indigenous, feminist and queer analyses. These inform an idea of geotrauma, the ongoing clasping of collective traumas and place. After outlining the multiple temporalities of geotrauma, the paper identifies overlapping placings of trauma by geographers and others: memorial places, retraumatizing places, layered places, hardwired places, mobile places, places of repossession and healing places. Repositioning survivors as experts in narrating and understanding trauma enables recognition of resistance and the mobilization of place in addressing trauma.

Keywords
place, resistance, survivors, trauma, violence

I Defining trauma and trauma’s geographies
Trauma, as psychological rather than physical injury, is the disease of our times. While traumatic symptoms had been identified as aftereffects of warfare for centuries, the 20th century was widely seen as the century of trauma’s emergence, and the 21st century has become the century of trauma’s prominence (Nguyen, 2011). Western public understandings have followed, so that by the 1990s trauma was not just a medical and psychiatric concern but an everyday discourse and a distinct field of social science scholarship (Fassin and Rechtman, 2009; Sztompka, 2000). Initially identified through research with US war veterans, the newly discovered condition of Post-Traumatic Stress Disorder (PTSD) was later connected to identical symptoms in survivors of other political atrocities as well as child abuse, rape and domestic violence (Herman, 1997). Recent research in neuroscience, developmental psychopathology and interpersonal neurobiology provides a scientific basis for understanding the changes in the brain that manifest in this frequently misunderstood condition (Herman, 2015; Van der Kolk, 2014). Yet, much earlier, Black and postcolonial analyses had exposed the social and political rather than purely clinical basis of trauma, documenting the long-term and intergenerational effects of collective experiences of racism, colonization and genocide (e.g. Eyeraman, 2001; Fanon, 1953; hooks, 1989; Root, 1996).

Today multi-disciplinary analyses, with sometimes conflicting foci and theorization, wrestle with the identification, narration and...
treatment of trauma (e.g. Akbar, 2017; Alexander, 2012; Caruth, 2014a; Cvetkovich, 2003; Van der Kolk, 2014). In this diverse field, geographical analysis is quite new, largely arising from broader recent interests in psychoanalysis (Kingsbury and Pile, 2014). A relatively small number of geographers have begun to map the ways that knowledge and experience of trauma is profoundly shaped by the cultural and structural contexts in which it is located (e.g. Coddington and Micieli-Voutsinas, 2017; Loyd et al., 2018; Marshall, 2013, 2014b; Pain et al., 2020; Pratt et al., 2015; Thien and Del Casino, 2012). These analyses extend well beyond geographies of mental health, to trauma in the spaces of intimate violence, geopolitics, urban change, racial and colonial oppression, migration, natural disasters and climate change. The aim of this paper is to outline how trauma may be understood beyond individual minds and bodies, not only shaping but as part of place, which in turn is mobilized in rebuilding from trauma. The discussion here connects existing work in geography to established scholarship elsewhere in the social sciences, the humanities and social psychiatry. In particular it highlights Black, postcolonial, indigenous, feminist and queer theories of trauma which understand trauma as ‘collective, spatial, and material (instead of individual, temporal and linguistic)’ (Rothberg, 2008: 228).

In Western societies, trauma is an overused word with a number of meanings, and both traumatized people and places are subjects of cultural judgement and political contestation (Pain, 2019). In this paper, the term trauma is used to describe the psychological impacts of harmful events, explicitly recognizing that these may be experienced by both individuals and communities. Clinical trauma, or PTSD, involves a set of common symptoms experienced by individuals that arise from one or more incidents of severe harm or shock (Caruth, 1996), but there are recognized to be at least three forms which require distinct analysis (Herman, 2015). Acute or simple trauma arises from a one-off experience such as a car accident or natural disaster, producing symptoms such as flashbacks and hypervigilance which are more widely recognized as traumatic. Chronic trauma is caused by prolonged experiences of harm which are repeated and/or multiple, such as racist violence or domestic abuse. Complex trauma also arises from prolonged harm involving specific elements, such as betrayal or abuse, from a caregiver early in life (Herman, 1992; World Health Organization, 2018). The symptomology of complex trauma includes the more commonly known effects of acute trauma, but may also lead to depression, suicidality, changes in self-perception and difficulties functioning in key areas of life. These latter two forms are longer lasting, less amenable to conventional treatment, and their experience is more dependent on conditions in the long-term.

Chronic and complex trauma, which are also more likely to be collectively experienced, are the focus of this paper. A common thread in critical theories is that PTSD is too limited a frame, in reducing trauma to individual symptoms and suffering. Survivor accounts may differ drastically from those of the psychiatric profession (see Tamas, 2011): radical feminist analyses, for example, reposition symptoms as coping strategies (Burstow, 2003; Gilfus, 1999). And as we shall see, Black, postcolonial and queer analyses highlight the dispersing harm that trauma does to the social relations that we are part of and the spaces we inhabit, as well as the resistance that arises from collective experience (e.g. Brown, 2004; Cvetkovich, 2003; Fanon, 1953; hooks, 2003). Trauma is not a fixed condition where victims are stuck in repetition of past experiences, nor one that only improves with professional treatment. As these and other writers have argued, there is a political imperative for de-medicalizing our understanding.

The paper begins by introducing the idea of geotrauma, which I suggest as a framing for spatial analysis of trauma, identifying features
that are evident in some of the existing analyses by geographers and others and which are then developed in the rest of the paper. It then outlines its conceptual foundations, first examining scholarship that has viewed trauma as collective and multiscalar, particularly those perspectives rooted in Black, postcolonial, indigenous feminist and queer theories that point to its production at a structural level. Geographers’ engagement with these sizeable bodies of work on trauma has been relatively limited. These perspectives raise the issue of the role of survivor knowledge and experience in understanding trauma. The paper turns to the temporalities of geotrauma, which are more complex from the vantage point of these latter perspectives, including consideration of the various ways that trauma is reiterated and effects retraumatization at different scales. It then examines the relations between trauma and place, identifying seven overlapping ‘placings’ or lenses on this relationship in existing research in geography and elsewhere: memorial places, retraumatizing places, layered places, hardwired places, mobile places, places of repossession and healing places. Finally, I discuss some of the implications for how research is conducted into geographies of trauma, before returning to the framing of geotrauma in the concluding section.

II Geotrauma

Of especial interest to geographers is the notion that trauma is located not only within people’s minds and bodies, but in the social, environmental and structural contexts around us. For Bondi, psychoanalysis is full of spatial concepts, offering:

a way of thinking about how what originates outside our minds, including other people (or parts of them), the cultures into which we are born, and the material entities that surround us, gets inside, and how what is inside gets outside. (Bondi, 2014: 65)

I use the term geotrauma as a framing for spatial analysis of diverse forms of trauma. It rests on the core tenet of psychoanalytic theory, that trauma is animated externally and internally (Freud, 1954; Laplanche, 1992), in a relationship with the other that is both topographical and topological (Blum and Secor, 2014). But, crucially, in the reading of geotrauma forwarded here, the resulting processes are examined at social and collective rather than individualized levels. Geotrauma describes multiscalar, intersecting and mutual relations between trauma and place. Drawing on long-standing structural analyses, it highlights the common role of oppressive power relations in various collective forms of trauma. It pays especial attention to lived experience, the repositioning of survivors as experts in narrating trauma, and recognizes the work of reclaiming space after dispossession. The term geotrauma has appeared sporadically in ecological philosophy and literary analysis. An essential proviso is that the analysis here rejects the ‘geotraumatics’ proposed by Land, a neo-fascist philosopher (see Burrows, 2018). Instead the term here is oriented for a critical and liberatory human geography. Elsewhere, geotrauma has been used to describe interdependent relationships between people and the environment (Gasser, 2015), encompassing both ‘violent inscriptive processes . . . and the traces left by such acts’ (Merola, 2014: 123): trauma exists in psychic and worldly realms simultaneously. Nature is seen not simply as the object of human violence but, as exterior ecological relations already constitute the human realm, violence is reflected back onto humanity (Matts and Tynan, 2012). My focus here is the relations between human-made places and environments, trauma, retraumatization and repossession.

Geotrauma describes, then, the relational clasping of place with the experience and impacts of trauma. As a noun, clasp indicates the mutuality of the grip of place and trauma as an interlocking mechanism, while as a verb,
clasping implies that this grip is ongoing and continually remade. So the spatial contexts and relations around traumatized people, communities or nations may variously hold trauma in place, contribute to retraumatization, or help to establish freedom and the rebuilding of life after traumatic events. In turn, trauma and traumatized people alter those contexts and relations in ways that tend not to be very visible. For example, some recent geographical work has highlighted that different forms of trauma often co-exist and compound each other, for instance in the layering of multiple traumas in places of racial and neoliberal dispossession (see Akbar, 2017; Cahill et al., 2019; Mountz, 2017; Pain, 2019; Till and Kuusisto-Arponen, 2015), while others explore trauma’s mobilities as it moves across and alters the relations between places (Coddington and Micieli-Voutsinas, 2017; Pratt et al., 2015).

The review that follows engages with a number of interpretations of these spatial relations of trauma following different forms of violence. It includes the work of geographers and other scholars, some of whom use the term trauma and some who do not, but whose work has important things to say about traumatic experience, place and memory. Towards the end of the paper, geotrauma is illustrated through ‘placings’ of trauma: different angles on the relation of trauma to place.

III Scaling and structuring trauma

This section highlights scholarship that shifts the lens of trauma analysis away from clinical and individualized accounts, through upscaling trauma or theorizing it as a condition experienced by nations, communities and social groups. The bulk of the section will introduce ideas from Black, postcolonial, indigenous, feminist and queer studies, which are fundamental to the framing of geotrauma. I start, however, with a more recent body of work that also attends to trauma’s collective nature, but largely overlooks the insights of those earlier structural perspectives.

I Cultural trauma and its limits

Most Western trauma theory – even that which considers trauma as a collective phenomenon – still largely constitutes it as arising from a single event that creates a rupture between before and after. Were we to draw straightforward parallels with individual experience, this model best describes acute rather than chronic or complex trauma (see, for example, Caruth, 1996). One example familiar to geographers, and more widely popular in the renaissance of trauma studies, has been the idea of cultural trauma, defined as ‘culturally defined and interpreted shock . . . [from] the damage inflicted by major social change on the cultural, rather than biological, tissue of a society’ (Sztompka, 2000: 449–50). Cultural trauma does not necessarily imply that the condition of trauma exists in the bodies and minds of those affected by such changes, nor are causative events construed as inherently traumatic (Alexander et al., 2004). Rather, the focus is on processes of mediation, naming and narrativization, so that trauma becomes a metaphor for how a group or nation defines itself. For example, terrorist attacks on Western targets since 2001 were framed as traumatic by a variety of interest groups for the purposes of political or cultural cohesion (Edkins, 2003; Hutchison, 2010; Hutchison and Bleiker, 2008), as well as a number of political geographers.

Earlier deployments of cultural trauma, such as Eyerman (2001) on the legacy of slavery and Cvetkovich (1995) in queer studies, forefronted the material and historic struggles underpinning much trauma. However, where emphasis is largely on trauma’s representational dimensions, interpretation is further removed from survivor experiences and accounts of violent events. Related constructions of trauma as spectacular rupture can be found in quite different
fields. For example, in Lahoud et al.’s (2010) notion of post-traumatic urbanism, the focus is on catastrophic events leading to temporary infrastructure breakdown in cities, and trauma is conceptualized as a new and unanticipated phenomenon. Here traumatic assaults are largely understood as originating outwith the city, rather than as discriminatory violence perpetrated by the urban political apparatus itself (see Pain, 2019). There are strands of work on cultural, geopolitical and urban trauma that leave hanging the awkward assumption that, until such ruptures, the world was experienced as essentially safe and controllable (Gilfus, 1999), and that pursue theorizations that risk ‘flatten[ing] out the specificities of trauma in a given historical and political context’ (Cvetkovich, 2003: 19).

2 Structural trauma

Black, postcolonial and indigenous analyses have critiqued this model of single event trauma, pointing to its privileging of the suffering of white Europeans and the depoliticization and dehistoricization of trauma (Andermahr, 2015; Fassin and Rechtman, 2009). Instead, postcolonial trauma theory identifies the roots of many collective traumas to lie in the violations of colonialism, racism and capitalism (Mbembe, 2010): most collective traumas cannot be conceived as metaphorical or as only animated through memory, but arise from material and embodied experiences of harm (Visser, 2015). Fanon (1953), a psychiatrist in Algeria during the anti-colonial war, emphasized these connections through drawing on his own experiences of racism and observation of the psychological effects of war on both soldiers and civilians, naming trauma as a politically constituted phenomenon. Likewise, Native American social worker and academic Brave Heart (2000) identified community trauma, relating historical unresolved grief to the contemporary faring of Native American people.

Feminist and queer scholarship also place oppressive social and political relations at the heart of trauma, and were pivotal in the 20th century in asking whose trauma is addressed in theorization and treatment, who narrates trauma and who is silent, who decides that trauma is material or immaterial, and whose assumptions are shattered by trauma (Gilfus, 1999). One key legacy of this scholarship and activism was the questioning of what is considered a legitimate traumatic event (Burstow, 2003; Humphreys and Joseph, 2004); for example, Cvetkovich (1995) recast cultural trauma as a pervasive rather than unusual or unexpected condition for minority groups. Accordingly, survivors’ outlook on the world as rife with ongoing danger is understood as rational not distorted, and so rather than look to psychiatry for answers, theorists suggested that we ‘rigorously demedicalize’ (Burstow, 2003: 1301). In particular, it is the commonness of experiences of gender-based, racist and homophobic violence that challenges assumptions of cohesion or security before or after trauma (Root, 1996). What Brown (1995: 107), drawing on Root’s earlier work, calls ‘the traumatogenic effects of oppression’ for women and non-heteronormative people arises because the perpetrator is often close beside us, rather than a strange other launching an assault from outside (Herman, 1997): ‘he is simply exposing a disease which is already latent . . . his apparent normality should actually be seen as a warning that something dreadfully wrong is normal in that culture’ (Vogel, 2009: 5). Trauma, seen through these lenses, is distinctly unremarkable.

Historical events may be generative of trauma, but the violent present is not simply haunted by them. For example, colonial violence is reflected in the actions of neo-colonial states and their ongoing control and intervention in indigenous communities and families (Clark, 2016). Black scholars have theorized slavery in the US as a psychic event, the memory of which is passed down through generations of African
American communities (DeGruy, 2005; George, 2016), and the frequent re-enactment of racist violence impacts on African American collective and individual psychology (hooks, 2003). Akbar’s (2017) account of urban trauma in the US is underpinned by ongoing racist discrimination, so that historical brutalities resonate with contemporary conditions of poverty, poor housing and violence. Akbar argues that systems of education, policing and incarceration increasingly compound trauma (see also Gilmore, 2007; McKittrick, 2006). The cumulative impact of pervasive everyday microaggressions is also regenerative of racial trauma, powerfully narrated in Jones’ (2019) account of ‘shopping while black’.

Structural trauma from chronic and routine forms of violence has a common symptomology in wider society, that ‘relegates an individual (or population) outside of hegemonic notions of normative subjectivity’ (Carter, 2015: 6). Western cultural attitudes to trauma include widespread misunderstanding and blame, and a common trope in which traumatized people are stuck in passive repetition denies their lived experiences and agency (Alcoff and Gray, 1993; Paper Dolls Research Group, 2019), and so the cultural norms and stories about the nature and experience of trauma that are present in many societies must also be navigated every day by survivors (Pain et al., 2020). State provision and actions also compound trauma: in the normalization of violence so that the state is complicit with individual abusers (Wright, 2011), in ‘institutional betrayal’ in failing to ensure justice (Platt et al., 2009), and through the effects of austerity on possibilities for healing and rebuilding (Pain, 2019; Sanders-McDonagh et al., 2016). In different ways, then, the prevalent attitudes to trauma in society and culture often magnify and amplify material and embodied experiences of trauma to make it a more harmful and enduring condition (Burstow, 2003).

While highlighting the social nature of trauma, work in Black, postcolonial, queer and feminist theory rejects any binary between intimate and collective. This is clear in feminist scholarship on the psychic nature of domestic abuse and warfare (Pain, 2015), in the intimate knowledge of the minds and thoughts of colonized peoples in processes of colonization and occupation (Marshall, 2014a; Thiong’o, 1986), and in the ‘deadly intimacy’ of political torture that uses psychological tactics to achieve its goals (Schwab, 2010). Furthermore, while Western trauma theory has been critiqued for its emphasis on negative affects such as melancholy and fragility that weaken identities and communality, analyses from other locations highlight resilience, survival, healing and activism (Visser, 2015), which are examined towards the end of this review. Together, these bodies of work expose that trauma theory, just like trauma treatment, can itself be a site re-voking trauma (Caruth, 2014a; Nguyen, 2011), a point that has implications for the process of research that I also return to.

Geographers’ engagement with these sizeable bodies of work has been relatively limited. However, as I go on to detail, many of our interests in trauma have points of connection, and the spatial contexts with which we engage are permeated with the sets of relations theorized. Examples that explicitly engage these perspectives include Pratt et al.’s (2015) account of translocational trauma which is informed by postcolonial trauma literatures, while Marshall’s (2013, 2014b) work on trauma in Palestine theorizes from the ground and an anti-occupation standpoint. Likewise, Lloyd et al. (2018) highlight the ways that the medicalization of traumatized refugees depoliticizes their trauma and their inclusion or exclusion from states as geopolitical subjects. Tamas’s (2011) exceptional study of domestic abuse critically engages a range of feminist and other perspectives. However, most synergies with the arguments above are found in the growing field
of Black geographies that develops connected framings (e.g. McKittrick, 2011; Jones, 2019). Rather than fetishizing or objectifying suffering, Black geographies reframe to focus on lived experience and resistance, pursuing analyses that in Tuck’s (2009: 409) words suspend ‘damage-centered research’.

**IV Stretching and layering: Temporalities of trauma**

These structural accounts complicate questions around of the temporalities of trauma. Trauma has always been seen as latent, a time lag existing between violent events and the manifestation of psychological harm (Fassin and Rechtman, 2009); indeed, for Freud only when an initial traumatic experience is relived does it become traumatic and internalized (Freud, 1954). This interplay between the internal and external over time became an important dialectic in Freud’s later work, and then for many other psychoanalysts (Bondi, 2014). Trauma was seen as lying within a new time period of ‘afterwardsness’ (Laplanche, 1992) which becomes a condition of life for traumatized people, a brake on moving forward as fearful associations continue unrooted in time-space (Van der Kolk and Van der Hart, 1995). As McGeechan (2014: 829) puts it in a review of historical geographies of the First World War, trauma effects a ‘complex erasure of time and distance, between the then and now’.

Later in the 20th century, the temporalities of trauma became understood as more diverse, reflecting growing awareness of collective experiences informed by subaltern perspectives (as we saw in the last section), and recognition of chronic and complex forms of trauma (Herman, 1992). Trauma, as unpredictable, unfixed and multiscalar, exhibits ‘the multiple temporalities and unfoldings of presences in pasts and possible futures’ (Till, 2012a: 22). For Morrigan (2017: 50–1) as a child abuse survivor, the ‘queerness of trauma time’ means that rather than experiencing time ‘as a straightforward, orderly procession . . . the future and past are intimately entwined, the present produced in their merging’. Traumatic time is simultaneously lived as past and anticipatory, looking to present and future environments for signs that danger is reappearing (Morrigan, 2017). Because of fragmented and partial memories, many survivors have difficulty narrating violent events in sequence, a symptom that fosters the common disbelief of others (Freyd, 1994; Herman, 2015).

A number of terms were adopted in the late 20th century for alternative collective temporalities of trauma. ‘Historical trauma’ was coined by Brave Heart (2000) for trauma responses among Native Americans she found were analogous to those of Holocaust survivors and their children. Its features include slippage between past and present eras – for example, transposition (living simultaneously in the past and present), emotional and psychological identification with past suffering and the dead, and survivor guilt – that challenge the pathologization of psychological and physical ill health among indigenous communities in the present. Sometimes overlapping, ‘intergenerational trauma’ describes trauma transmitted from parent to child, often unconsciously or silently. Western scholarship has explained this transmission variously as occurring via patterns of parent-child attachment affected by trauma (Van der Kolk, 2015), through fragmented ‘postmemory’ where a child works with scraps of knowledge and insight about a parent’s unspoken trauma (Schwab, 2010), and through epigenetic pathways (Shulevitz, 2014). Indigenous explanations of intergenerational trauma, however, do not see relationships with ancestors as closed off after death, but intergenerational transmission as having spiritual dimensions (Quinn, 2017).

Complicating these temporalities of collective trauma, different traumas often work not in isolation but layer up and accumulate, not simply adding to the intensity of trauma but
enabling interaction between traumas over time (Pratt et al., 2015). Trauma winds on through time, switching between people and shifting shape, but always moving in what elsewhere Laurie and Shaw (2018) call conditions of violence. Not only material effects of trauma, but multiple violences may continue over time for survivors of both intimate and state violence (Pain, 2019). Where there is no discernible before or after to danger, a particular form of psychological harm is produced. Lasting trauma may come to public attention at certain points, often after a long process where survivors demand recognition and reparation (Fassin and Rechtman, 2009), but it is a continuous underlying condition (hooks, 2003).

Schwab’s (2010) ‘transgenerational trauma’ describes a traumatic temporality that is more expansive still. As trauma moves between the scales of individual, family community and nation, Schwab points to the intersectionality and interdependency of differently-placed violent histories such as colonialism, slavery, war and torture. Expanding the psychoanalytical concept of interpersonal transference, she also suggests that it offers a resource for understanding and healing: ‘histories of violence can be put in a dialogical relationship with each other... psychic and political struggles must go hand in hand lest political action be haunted by an unprocessed past’ (Schwab, 2010: 29–31; see also Pratt et al., 2015).

These various traumatic temporalities help us to understand how past experience makes itself known in the present and continues to have harmful effects. In recent years geographers have utilized the idea of haunting, often drawing on Gordon’s (2008) work, where the past enters the present in particular moments and places. But when we understand violence itself to be continuing in the lives of individuals and communities, haunting is insufficient; the present is not safe, after all (Tamas, 2011). Gordon (2011) argues that haunting has liberatory potential, whereas trauma is stuck and disenabling; but as structural trauma theories emphasize, survivors and communities with trauma are active and resistant, forging methods of healing (Paper Dolls Research Group, 2019).

Adams-Hutchison (2017: 111) writes of post-earthquake conditions in New Zealand: ‘trauma is embodied, not haunting with a ghostly and unwarranted contingency but with possibilities to connect with others in meaningful practices’.

Just as traumatic time is non-linear (Laplanche in Caruth, 2014c; Morrigan, 2017), histories of violence are coiled and jagged, echoing and reanimating trauma (Pain, 2019), and so geotrauma is sustained, entrenched, reduced and reiterated as time goes on. This unevenness over time sits in relation with the stretching of trauma across space, an interplay that informs its experience and impacts at particular coordinates in the present day (Jones, 2019). I turn now to trauma’s closely entangled relations with place.

V Placings of trauma, retraumatization, repossession and healing

The key question underpinning geographers’ work in this field has been understanding places of trauma. Trauma distorts and transforms our ideas about space as well as time (Blum and Secor, 2014). As Coddington and Miceli-Voutsinas (2017: 52) put it, in a recent collection that firmly establishes trauma on geographers’ agenda, ‘trauma has a productively complex relationship to space...it is both rooted in place, yet defies geospatial logics’. Below, I outline seven angles on this relationship, or ‘placings’: ways in which the question of trauma and place has been approached by geographers and others, moving from places of trauma and retraumatization to places of spatial repossession and healing. Of course, this is not a neat typology, as these places and placings overlap.
1 Memorial places

First, scholarship has focused upon memory-spaces, attending to specific sites of past traumatic events and their ongoing implications. This work varies from considerations of what becomes of remembered sites of individual memorialization, or ‘traumascapes’ that leave the past open in the present (see Collins and Opie, 2010, on roadside shrines), to issues around collective displacement, the loss of place and its reformulation in traumatic memory (see Kuusito-Arponen, 2014, on wartime evacuations. Common themes include historical sites of traumatic experience as ‘ruins’ in the present day (see Trigg, 2009, on Auschwitz), the instability of the spatial contexts of memories as time progresses (see Till and Kuusisto-Arponen, 2015, on Camp Westerbork), and the ways that memory-spaces may enact reconciliation and hope for the future (see Johnson, 2012, on sites of terrorism in Northern Ireland).

2 Retraumatizing places

Second, the diffuse nature of sites of trauma is exposed by the lived experiences of people experiencing trauma. In particular, the immediate experience of retraumatization, the time/space slippage it involves as ‘the event [is] relocated again and again’, appeals to a geographical sensibility (Blum and Secor, 2014: 105; see Thien and Del Casino, 2012, on war veterans). Such slippage is triggered by the fragmented way that traumatic events are stored in the brain, causing involuntary physiological effects (Knox, 2013; Van der Kolk, 2015) so that one ‘mentally and physically re-experience[s] a past trauma in such an embodied manner that one’s affective response literally takes over the ability to be present’ (Carter, 2015: 4). Incidents, actions, images, sounds, smells and interactions in particular environments may act as triggers in this way, so that retraumatization occurs far away from the original traumatic site. This profoundly affects the everyday navigation of space for people with trauma, some of whom live with the precarious risk of sudden dissociation from the immediate surroundings (Morrigan, 2017; see Willis et al., 2016, on child sexual abuse).

Like trauma itself, retraumatization can be understood as a social as well as an individualized process. Embodied and emotional experiences of trauma always intersect with wider societal discourses (see Moss and Prince, 2017, on military trauma). The embodied geographies of retraumatization are both misunderstood and judged, both belittled and anticipated to follow a trajectory of heroic recovery (Carter, 2015; Herman, 1997; see Tamas, 2011, on domestic abuse survivors). Furthermore, institutions and organizations that might be expected to provide support to survivors often retraumatize (see Freyd and Smith, 2013, on child sexual abuse; see Loid et al., 2018, on forced migrants; see Sherman, 2015, on war veterans). In Carter’s (2015) contemporary analysis of the campus trigger warning debate, survivors are disabled by societies that fail to understand the experience of retraumatization. Hence the location of the problem shifts further from the original sites of traumatic events to the wider environments and social relations that stigmatize and exclude.

3 Layered places

Third, as we saw when considering traumatic temporalities, at many sites of trauma previous or new violences continue into the present. Recent scholarship therefore explores places not just as points where trauma has happened or has become fixed to in the past, but as active locations where trauma is renewed and reshaped. This work often employs grounded feminist methodologies to excavate layered traumas. George (2014) examines women’s peacebuilding activities in the Pacific Islands in the face of gendered and military violence, encompassing immediate forms of violence and
the slower risks of sea-level rise and masculinized politics that, together, create women’s insecurity. In a study of gender-based violence during cyclone disasters, Rezwana and Pain (2020) unravel violence of disaster events, climate change, poverty, domestic and child abuse, which operate on ostensibly different but closely intersecting temporal and spatial scales. Mountz (2017: 75) conceptualizes the layering of violence and trauma as sedimentation, so that trauma is ‘built and stored as the ground on which we live’. In her study, the terrain of migrant detention facilities contains layers of colonial history and current day regimes of oppression. Trauma occasionally surfaces and becomes visible during ‘affective eruptions…revealing moments wherein the past erupts into the present, rendering more visible the haunting of geopoliticized fields of power’ (Mountz, 2017: 75).

4 Hardwired places

Fourth, just as aspects of place are hardwired in trauma, most obviously when environmental cues cause triggering, because trauma is mobile it may become hardwired (again) in the material, social and emotional ecologies of place (Pain, 2019). Recent geographical work understands trauma to be materialized in bodies and in sites of violence while also having a shifting and fleeting nature (see below). This twofold character is borne out by neurobiological research which shows that the hardwiring of trauma in the brain that causes future repetition is not immovable, as is often assumed (Van der Kolk, 2015). These neural pathways have plasticity, the internal workings of trauma shifting in relation to the exterior world. In a study of the managed decline of social housing in a former coalmining village in northeast England, I have argued that long-term trauma has become hardwired, latent in the material fabric of decaying housing (Pain, 2019). The auction of social housing retraumatized a community that felt the ricochet of state violence around the coalmine closures several decades earlier. Relatedly, McKinnon et al. (2016) identify the traumatic erasure of queer communities’ material history in the Christchurch earthquake in New Zealand, while Hartal and Misgav (2020) develop an account of queer urban trauma arising from public and private anti-LGBT violence taking distinct shape in Tel Aviv and Jerusalem.

5 Mobile places

Fifth, and perhaps the most distinctive angle taken by geographers, is analysis of the mobilities of trauma across space, place and time (Coddington and Micieli-Voutsinas, 2017). These mobilities apply to individual biographies of trauma, to travelling sites of trauma, and to damaged social relations that stretch across multiple places. For Coddington (2017), trauma is contagious and always relational, so that witnessing or hearing may bring up unrelated past traumas from elsewhere, and neither trauma nor research processes are contained (see also Drozdzewski and Dominey-Howes, 2015, and Tamas, 2011, on impacts on and of research). Memory-spaces, too, may reinvoke other traumas for visitors, as Micieli-Voutsinas’ (2017) work on the New York terrorism memorial shows. Pratt et al. (2015) provide an innovative account of trauma’s mobilities, flagging its multidirectional nature. Examining how narratives of trauma travel between the Philippines and Canada, they describe how their theatre performances about migrant family separation gathered other traumas. Trauma becomes ‘a medium for linking different places and times’ with the local histories and politics at each site of performance (Pratt et al., 2015: 2), and the transmission and reception of trauma narratives are always uneven. Recognition of such collective processes moves us, again, beyond the idea that trauma is fixed or stuck in repetition. Just as Schwab (2010) envisions transference between different historical traumas writ large across
generations, Pratt et al.’s (2015) work shows how trauma is always changed through repetition across space.

6 Places of repossession

The sixth approach, one that has seen relatively little attention in geographers’ work on trauma, concerns the place-based reconstruction and repossession that traumatized people and communities perform. As we have seen, ‘trauma is characterized by a loss of grounding’ (Burstow, 2003: 1303), both psychologically and materially. Willis et al. (2016) outline some of the spatial strategies used by adult survivors of child sexual abuse in order to regain control over the environment and cope with trauma. This is not to say that people with trauma are prisoners of space, rather that there are diverse spatialities to survivorhood. For McKittrick (2006), the plantation, a crucial site of the development of capitalist accumulation and racialization, is reiterated in racial violence and in contemporary urbicide, place destruction and containment (see also Fullilove, 2005; McKittrick, 2011; Shabazz, 2015). But traumatic futures are not inevitable, as Black experience exceeds these sites and conditions, engaging spatial struggles and resistances in the present (Jones, 2019; McKittrick, 2011).

Indeed, trauma itself may be viewed as a colonial technology (Clark, 2016). In a related analysis, Marshall (2014b) critiques NGO humanitarian aid trauma programmes in Palestine, arguing that the Western models of PTSD deployed construct children in conflict zones as traumatized and passive, obscuring both children’s political agency and the political context of occupation. In his research, children instead ‘emphasize stories of resilience…with strengths in store for inspiring others in other parts of the world’ (Marshall, 2014b: 293). His account brings to mind Anzaldua’s (1987) theorization of the US-Mexican borderlands, both as a wound site with a collective traumatic history that marks contemporary relations, and as an active site where resistance has the potential to displace trauma. In contrast to widespread objectifying discourses, survivors are never stuck in the past, whether living in the same changing rather than ruinous places, or displaced to places where new forms of violence and trauma are felt and resisted. The work of rebuilding from trauma often involves re-establishing the material and emotional qualities of place. From the quiet protection and regeneration of home by domestic abuse survivors (Pain, 2014), to street activism by minority young people protesting police brutality (Cahill et al., 2019), wherever the effects of violence are amplified by the temporalities and spatialities of trauma there is also spatial repossession. And, as is clear from geographers’ accounts of urban neoliberal dispossession and the place-based activisms generated in response (Angelouvski, 2013; Cahill et al., 2019; Pain, 2019; Till, 2012b), resistance and healing largely originate within traumatised communities.

7 Healing places

Finally, then, how is healing possible, when the violences that produce geotrauma so often work through the destruction or reappropriation of place and loss of the networks and resources that most of us draw upon to survive? As we have seen, where violence continues there is no distinct afterwards, and so healing constitutes not forgetting but integrating experience, connecting with others and with activism. Given that the environmental context for healing is important, external interventions to support the regeneration and recreation of place may play a role (Angelouvski, 2013). Recent work on trauma-informed care and environments also provides impetus for creating more compassionate spaces that support rather than retraumatize (e.g. Bloom and Farragher, 2013), although this must be done in ways that neither pathologize
survivors nor sidestep the structural contexts of trauma (Ginwright, 2018).

However, in common with radical feminists (Burstow, 2003; Gilfus, 1999), Morrigan (2017) rejects the framing of trauma (in common with the framing of many disabilities) as awaiting a cure from others. Instead, drawing on crip theory, she argues for the recognition of trauma as ‘a different way of being in the world, a creative, flexible, and nonlinear way of relating to time’ (Morrigan, 2017: 56). Tamas (2011) also critiques the expectation that survivors will eventually reach self-knowledge about what happened to them, be empowered and recover, a process of ‘enlightenment’ that for Alcoff and Gray (1993) and Carter (2015) carries the danger of political silencing. A longstanding principle of feminist trauma theory is that interventions must be survivor-centred and strengths-based (Gilfus, 1999; hooks, 2003). While conventional Western treatments focus on fixing the individual, especially in neoliberal and austere times (Tseris, 2013; Sanders-McDonagh et al., 2016), the recognition of shared experience has always been at the heart of feminist approaches: ‘in order to have an ecosystem that fosters recovery, you need one that supports the truth-telling function, both on the individual and the social levels’ (Herman in Caruth, 2014b: 144). Schwab (2010) cautions that where the hidden and silenced nature of traumatic memory mean that mourning and redress do not take place, the danger of historical repetition increases. Non-Western and indigenous perspectives involve long traditions of collective healing from trauma, often harnessing creative and embodied methods (Brave Heart, 2000; Quinn, 2007; Rothenberg, 2008; Van der Kolk, 2014). Disrupted by colonial violence, today ‘contemporary healing justice movements reclaim and reimagine ancestral ways of naming, witnessing and addressing trauma and the body’ (Jones, 2019: 1085; see also Clark, 2016). A vital part of healing, too, is combatting structural violence itself, through grassroots activism and policies to tackle the entangled and layered violences that underpin geotrauma (see Piedalue, 2019).

VI Knowing and telling: Prospects for geographical research

How does our work as researchers recognize and approach trauma, especially in light of the perspectives on understanding and healing trauma reviewed here? Many areas of trauma theory have in the past been limited by their predominantly white, Western, masculinist and heteronormative orientation. As this review has shown, when survivors reposition as narrators of trauma, the perspectives that ensue can be transformative of trauma theory (Burstow, 2003; Cvetkovich, 2003; hooks, 1989, 2003). Tseris (2013: 30) warns of the danger of fetishizing trauma in academic research, as the cachet of being involved ‘helps concretize some deep anxiety and fantasy of repair’. Rather than pursuing ‘analyses of injustice that re-isolate the dispossessed’ (McKittrick, 2011: 960), geographers might instead contribute to the creation of safe spaces of listening (Till and Kuusisto-Aronen, 2015) and pursue research that contributes, in some way, to trauma justice.

Locating our efforts among the diverse approaches to the places of trauma outlined above, geographers are well versed in methodological approaches that, used sensitively, are helpful in eliciting survivor knowledges: particularly place-based, participatory and arts-based methods. Innovative work to date engages methods such as theatre (Pratt et al., 2015), creative writing (Tamas, 2011), poetic methods (Jones, 2019) and song (Pain et al., 2019). Different forms of autobiographical research and writing provide another valuable approach (Coddington, 2007; Jones, 2019; Tamas, 2011). This work with and as survivors is challenging, posing specific ethical issues of engagement with participants and navigating the political implications of research (see...
Coddington and Micieli-Voutsinas, 2017; Drozdzewski and Dominey-Howes, 2015); it demands a careful reflexivity and attention to power, subjectivities and meaning (Jones, 2019). There is much to learn from Black and feminist trauma-informed research epistemologies and methodologies (see, for example, Jones, 2019), and from trauma-informed pedagogies that are better established outside geography (Carter, 2015; hooks, 2003). A key issue for research is that trauma is often characterized by ‘speechless terror’ (Van der Kolk and Van der Hart, 1995), which we might think of as simultaneously a neurobiological, physiological and societal effect that is reiterated by perpetrators of many forms of structural violence through intimidation against speaking out (Paper Dolls Research Group, 2019). Not assuming that researchers will be trusted, but trying to conduct trustworthy research, is paramount, as even where research does not retraumatize its subjects it may unconsciously reflect trauma’s dynamics, silencing, power and control (Caruth, 2014a). Some researchers draw on the ground rules and insights of psychotherapy, while remaining aware of the risks in confusing the two roles (Bondi, 2013; Pain, 2014). Finally, as Schwab (2010) makes clear, no historian’s (or geographer’s) work is unaffected by their own subject position in relation to the collective violent histories at stake. Silence is not simply broken by gathering the facts of trauma, but requires emotional engagement which can be passed on, to get through the psychic skin of audiences and, perhaps, to enlist them in the work of mourning and reparation (Schwab, 2010).

VII Conclusion

This attempt to review scholarship spanning psychiatry, the humanities and social sciences on the temporal and spatial nature of psychological trauma must inevitably be concise and partial, given the breadth of trauma theory. But in highlighting some of the insights of Black, post-colonial, indigenous, feminist and queer analyses of trauma – which in themselves are diverse areas of scholarship with distinct foci and theoretical roots – I have suggested that we pay them more attention in geographical work on trauma. Parts of the growing body of recent work in geography on trauma are inflected by these approaches, but we have not always been explicit about the important groundwork they provide.

While some research on forms of cultural, geopolitical and urban trauma focuses on a sudden and singular rupture that divides the past from the future, I join those who investigate trauma as it far more commonly manifests: a chronic, ongoing condition often situated in collective histories of violence. This has distinct implications for its characteristics, causes, treatment and research. Many traumas are structurally rooted in oppressive power relations and involve ongoing, layered or transferred violence. They are simultaneously collective and intimate experiences, manifesting not only in individual but social and political symptomologies.

Trauma also involves multiple temporalities, which must be understood not only with regard to the timelag between event and symptoms, but in the ways that violence and trauma stretch, coil, jag and intersect across time and space. Often, multiple traumas layer up and compound each other, reflecting the ways that collective harms both mark and sever the progression of pasts to presents to futures. Such traumas involve precarious work of navigation by survivors in everyday and institutional environments.

Forefronting these insights, the paper has suggested a framework of geotrauma to underpin understanding of the relations between place and diverse forms of trauma. Place is involved in trauma far beyond resurfacing memories and immediate encounters with situational triggers. I have identified seven overlapping placings of trauma by geographers and others: memorial places, retraumatizing places, layered places,
hardwired places, mobile places, places of repossession and healing places. This mapping of geotrauma makes clear that it is both intimate and social, both psychic and political, both material and mobile, reflecting the interplay between interior and exterior worlds at multiple scales. Geotrauma describes the relational clasp of place with the experience and impacts of trauma. It not only shapes places but becomes part of place, hardwired but still with plasticity. Its clasping is ongoing and dynamic, continuously being reformed. Trauma disperses and fixes elsewhere, it bounces back, it is amplified or dampened. The social and political problem of trauma is precisely this interplay of embodied experience with spatial context: the ways that trauma may be reflected back, compounded and manipulated, or challenged and transformed by the environments that it inhabits. But in turn, place is mobilized in addressing trauma, and this idea of geotrauma demands a focus not on harms that are endlessly relived by passive incumbents, but on the ways that survivors and their communities resist violence and harness emotional and place-based resources to rebuild.

While geotrauma describes this derivation from and diffusion of trauma into the world around the survivor, the very intimate conditions of trauma should also be placed centre stage. Accounts that, in different ways, divorce trauma from survivors’ conscious minds and positioned bodies have significant limitations. Rather than analysed as bodies disembodied from their humanity (the contradictory effect of some academic scholarship), researchers can do more to represent survivors’ lived and deliberate accounts and understandings of geotrauma. This alternative approach, evident in many of the critical perspectives reviewed here, has transformed trauma theory.

Recognizing that trauma has diverse forms and impacts that should be of interest across many of the major fields of human geography, there is far more to explore in the relations between trauma and place – in particular, and taking a lead from, Black geographies - honouring the processes of rebuilding and healing that survivors undertake, and the ways in which the efforts of others support or undermine these. There is much to learn from Black and feminist epistemologies, too, about research practices that respect healing and promote trauma justice. Finally, geographers have been slow to explore trauma-informed care and environments. What would trauma-informed geographies, research and pedagogy look like?

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