

**Valerie Sinason**

**The Truth  
about Trauma  
and Dissociation**

*Everything  
You Didn't Want to Know  
and Were Afraid to Ask*



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## PREFACE

*....And when we speak we are afraid  
Our words will not be heard  
Nor welcomed  
But when we are silent  
We are afraid*

*So it is better to speak  
Remembering  
We were never meant to survive*

*The Black Unicorn* by Audre Lorde; © 1978, 1992 by Audre Lorde

*Everyman,  
I will go with thee,  
and be thy guide,  
In thy most need  
to go by thy side.*

From an anonymous medieval play, said by Knowledge  
and used for each Everyman book from Dent publishers.

It can be hard to speak in difficult times, as well as hard to hear. The voice of trauma, even when whispered, can hurt

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the speaker and the listener. We need to be accompanied at difficult and dangerous times in our lives. We need this, whether our attachment figures are human, spiritual, bird or other animals. Or, in our current time, as a brave and traumatised adult told me, there are also non-animate companions and guides. ‘There is my iPhone. It is my brain, my heart, my memory and my guardian angel. It puts on a torch light when it is dark. It lets me call safe people. It provides music and pictures; tells me the time and it is always there. Not like therapy. Not like social services. Not like refuges. It doesn’t close at Christmas.’ Or the child, clutching his worn teddy bear, ‘Teddy went into the bad places with me and the bad man hurt him worse.’ We all need company in these complex days and especially when thinking about trauma.

This book is a guided tour of pain, of trauma that comes into us from the outside and its internal and external consequences that can continue for generations. It is a guide given by a wounded healer, who has been educated by the professors of pain, those with lived experience, as we all are also to whatever degree. We know it. We recognise the landscape. We have heard it and felt it and yet we do not wish to know what we know. Reality is too painful. As Philips stated (1995, p.34), ‘the analyst has to enable the patient to know what he already knows’; and the patient/client has to drip-feed

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trauma to check out the capacity of the analyst or therapist until the words and thinking break through the relational mind.

Follow the path of this book with me as I try, within the limits of my own capacity, to stay mentally present with the contradictory enormity and simplicity of this subject.

The same points that we know and don't want to know appear and reappear in different ways and different layers to try to bypass our dissociative defences.

Dip in and out. Look after yourselves.

Thank you for being willing to try to hear.

There are rewards for this journey. We appreciate the world in a real, non-delusional way, and we appreciate the kindness of others even more.

# 1

## The coronavirus and other plagues

*Lord! How sad a sight it is to see the streets so empty of people.*

Samuel Pepys, 16 August 1665

*I did endeavour all I could to talk with as few as I could, there being now no observation of shutting up of houses infected, that to be sure we do converse and meet with people that have the plague.*

Samuel Pepys, 14 September 1665

*I am fain to allow myself [alcohol] during this plague time ... my physician being dead.*

Samuel Pepys, 15 September 1665

As this book was being written, the conditions in which I wrote were of shielding. I and my husband are over 70 and therefore more vulnerable to our 2020 plague – coronavirus.

Most of us, whatever our age and background, are facing,

with a twenty-first-century plague, something that we never expected. For those of us lucky enough to not live through a war, this is a close second, even though the enemy is invisible and we do not see bloodshed in the streets or hear the explosion of bombs. Instead, the nightly mortality lottery, in which the numbers of the newly dead are reported, can be viewed dissociatively in the comfort of one's own home. What do the numbers of dead mean to us? Faces of loss and anguish flit before us, sandwiched by scientific and political discourse.

The British Prime Minister has been using the language of war, and so is the National Health Service (NHS) because the coronavirus kills wherever it can. It needs no passport and initially appeared to recognise no national, religious, gender, age or class boundaries. It has great productivity and works hard day and night to protect itself and expand its territory. Indeed, if it was not so lethal to us, we could admire it! However, although all of us risk death, the consequences are not equal, and nor are the chances of being infected. We hear of age and underlying conditions increasing vulnerability but very few mentions of mental health conditions, loneliness, poverty, terror of bankruptcy, stigma, living with abusers, bringing up children with no resources ... Poor areas have a greater risk, and so do people from BAME (Black, Asian and minority ethnic) backgrounds. In a strange way, the earliest and most effective containment for the



country was provided by those over the age of 90 – the Queen, David Attenborough, Vera Lynn and Captain Tom. Great-grandparents were needed, let alone grandparents.

Faced with something so unprecedented, there was a longing for wise, elderly people who had lived through a war, were self-contained and stoical, and told the truth. Perhaps the death wish to the over-70s ('Oh, it is only people over 70 dying a little earlier than usual') is atoned for by being grateful for those who have survived death wishes and death! Perhaps too, in an age of disinformation and fear of transparency, the retired and old people were the only voices to trust in this time of change.

Whatever our family circumstances, whatever our situation, the medical appointment, the meeting, the get-together, the social event of the year, the wedding, the party, the sports event, the conference, the walk together, travel and holidays, holding the new baby, all these issues through which our identities have been formed, reconfirmed and enriched, have been on hold. Even touch, the most basic need for intimacy, has been compromised. All intimacy becomes cyber-intimacy. Orbach's seminal work on bodies (2002) takes on further meaning. She wondered if we would be the last generation to have bodies that were familiar to us. She looked at how, although the body is observed with more intensity than ever before, it is also dematerialised. Coronavirus has added to

this. The body is weak and can die but it is so powerful it can kill others, just by coughing. Will knife crime go down now that a cough can become a lethal weapon?

How have we dealt with this? If we are lucky enough, we carry a sense of the future and how we expected it to be. We planned our finance, our holidays, our way of loving, living and dying. All of that is impacted on by the coronavirus and any plague. We have had to learn how to be separate from our children, our partners, our friends and family. We give birth in isolation and we die in isolation. We mourn in isolation.

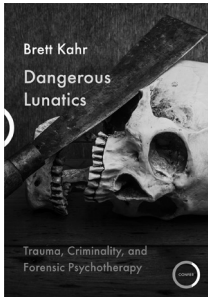
The impact of this experience will take years to monitor and understand. Harlow *et al.* (1965) shocked the world half a century ago with their research on touch and communication in primates. Using methods of 'social distancing' and maternal deprivation, Harlow provided infant monkeys with the choice of a wire mother who had a bottle of real milk, or a cloth mother who provided softness but no milk. Infant monkeys spent significantly more time with the cloth mother, using the 'cold' mother only for quick feeds. With a cloth mother present, the infant could face impingements, but without a cloth mother, the infant would show signs of fear. Coming as it did in the midst of the 1960s' awareness of the needs of babies and children, this transformative paper aided major changes. Parents, who had been kept out of children's hospitals, were now allowed to stay with their children. This change did not come out of the

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Brett Kahr



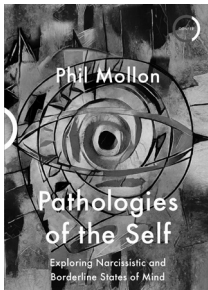
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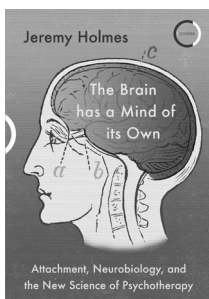
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