

## Rereading Violence and Trauma in Post-Conflict Societies: Aminatta Forna's *Happiness*

Ernest Cole

*Happiness* explores the themes of violence and trauma as one of its fundamental concerns. In this regard, the character and role of Dr. Attila Asare, a Ghanaian psychiatrist, is crucial to understanding Forna's theorizations on trauma and advancement of a new hypothesis on its manifestations and possibilities of recovery. In laying the foundation for the articulation of his new theory of trauma, Attila gives us a window into violence in two different geographical settings: Bosnia in the winter of 1995 and Sierra Leone in 1995. It is significant that both wars occurred at about the same time and that they were both notorious for the nature and extent of the carnage that characterize them.

In the depictions of the carnage in both spaces or settings, Attila raises a number of questions regarding similar manifestations of the carnage and its extent: What are the dangers in (mis)representing its impact as physical and psychological damage? Are there possibilities of claiming or reclaiming happiness—a meaningful life and existence after violence and trauma? By bringing into perspective both wars, is Attila attempting a universal claim on the human condition and its potentials for recovery? Is he claiming that violence is not unique to African peoples and that survivors of carnage can reclaim a meaningful life in spite of trauma regardless of geographical setting?

Attila's work with the United Nations puts him in a unique position to formulate a new theory of trauma based on his clinical work in postconflict zones around the world with both perpetrators of violence and survivors of trauma. The wars in Sierra Leone and Bosnia give him a different perspective of human behavior and motivations, as well as the physical and psychological consequences of violent human actions. From his experience in working with traumatized populations in postwar societies, a number of questions can again be raised regarding the role of peace missions: Is Attila suggesting that the exclusion of the perpetrators of the crime and their focus only on the survivors in seeking redress for war crimes constitute a misplaced priority? Is he claiming that this is a missed opportunity to examine both sides of the conflict and get to the core of the causes of hostilities? Is he inferring that such acts of exclusion result in the formulation of the wrong sets of prognosis or theories to address the consequences of the carnage that resulted in trauma, especially in the form of PTSD? He stresses the point that postwar conversation is misguided in its focus on "[t]hose who were done to, those who saw what

Dr. Ernest Cole, a native of Sierra Leone, is currently the John Dick Werkman Endowed Associate Professor and Chair of English at Hope College, Holland, Michigan, where he teaches postcolonial literature. He has taught African literature at Fourah Bay College, University of Sierra Leone, Gambia College, Brikama, and the University of The Gambia. His work includes *Theorizing the Disfigured Body: Mutilation, Amputation, and Disability Culture in Post-Conflict Sierra Leone* (2014) and *Space and Trauma in the Writings of Aminatta Forna* (2016).

was done, never the doers” and lamented that “[t]hat was the way the outside world assuaged the guilt for whatever failings had been laid at its door (69). Is it realistic to point out that Attila is making a critical point: that the effectiveness of trauma theory depends on the fullness of its scope, its willingness not only to transcend geographical borders, but also to include both survivors and perpetrators? Is he arguing that a focus on survivors alone, without perpetrators, limits trauma theory to only one side of the equation: the perspective of survivors or witnesses? It seems to me that what Attila’s theory advocates is the realization that perpetrators are both survivors and witnesses, and that their perspectives—what they dream about and a clinical assessment of their actions—is crucial to formulating a comprehensive view of both violence and the recovery from trauma.

*Happiness* suggests that an understanding of human nature is critical to comprehension of violence. As Attila notes: “I’m not being cynical, just realistic. War is in the blood of humans. The kind of people who torture and rape during war, they’re always among us, every time you walk down a busy street you’re passing killers waiting to kill. War gives them license. We tell ourselves people are ordinarily good, but where’s the proof of that? There are no ordinarily good people, just a lot of people who’ve never been offered the opportunity to be anything else” (118). Attila’s conception of violence provides an attempt at understanding the reason for human atrocities in war situations. By characterizing violence as human, is Attila suggesting a universal application and justification for its occurrence regardless of spatial and temporal considerations? If violence in wars is not unique to Africans, but is rather universal and applicable to all human societies, is he saying that violence is integral to human nature?

Further, if this is Attila’s conception of violence, is he proposing a new theory of trauma? Is he acknowledging the many dimensions of trauma and the different claims, perspectives, and diagnosis and treatment they bring to PTSD? If so, what do the various perspectives of trauma—“diminished responsibility,” “hyper-vigilant state,” or “disassociation,”—demonstrate or depict in view of trauma, its manifestations, and treatment? My reading of *Happiness* suggests that trauma is manifested in a variety of ways, and it is important for practitioners of trauma to take cause and effect into consideration in defining and treating its symptoms. Could Attila’s work be characterized as redefining trauma and the work of trauma practitioners?

Clearly, in *Happiness*, Attila is proposing that the variety of ways in which trauma manifests itself has opened the door to the construction of multiple theories of trauma that make faulty and illogical claims on diagnosis and treatment. He further explains that in time PTSD expands to include claims for “bullying, harassment, or discrimination.” They were interpreted in the context of having “a psychological injury component” to them. In fact, even tantrums in children have now become “disruptive mood dysregulation disorder.” With its transformation into a lucrative business, PTSD attracted a host of professionals looking for easy money. In turn, “the number of civil claims multiplied, fed by the numerous minor workplace accidents, the rear end shunt in the car park, the trip down the marble stairs of a shopping mall, the slip on a restaurant floor, the hours spent in a malfunctioning lift” (121). As the scope of PTSD expanded and as the practitioners of trauma rises, the theories are invented and everybody is suddenly a victim of trauma. The question I would like to ask in this regard is this: Is Attila exposing the inadequacies of these invented theories of trauma by demonstrating the real motives

behind the attraction to trauma work and the tendency it creates for justification of PTSD in some of the most ordinary and typically human situations or conditions?

Pertaining to Adama Sheriff's case, Attila notes that regarding the death of Ibrahim, "DSM-5 recognizes the violent death of a loved one as a potential stressor for PTSD" and that the earlier kidnapping incident in Iraq "may have acted as an additional early stressor [which] later compounded by the death of the husband in a traffic accident [resulted in] a diagnosis of comorbid mental disorders of complicated grief disorder and PTSD" (157). It seems to me that Ibrahim's case offers Attila an opportunity to articulate his theory of trauma—the possibilities for victims of trauma to reclaim normal human functions and states of being including happiness after a traumatic event. His paper presented at the annual conference of psychiatrists is based on his clinical work with Adama Sheriff, Ibrahim's wife, who has been diagnosed with PTSD.

As he tells his audience during his presentation, "I want to talk to you now about a realisation that my decades of work in trauma and trauma-related fields have given me," Fornia leaves us in no doubt about his credentials (304). The impetus for his new paradigm of trauma goes back to a period of time he spent working in Cuba. At a meeting of psychologists in Cuba to address the rise in young male suicides in industrializing nations, Attila found time to dance with the local inhabitants in a town square. It seemed to him that despite the ongoing struggles of this industrializing nation, people find time to come together and dance. Fornia states, "In the years to come Attila thought from time to time about the Cuban town. It seemed to him like a place where happiness might exist" (187).

The questions for Attila (and indeed the reader) are, how can a society plagued with all the problems of industrialization (as well as political and economic woes) find happiness and evade the horrors of suicide in young males prevalent in other societies? What makes Cuba different from other industrializing nations? What is happiness and can it exist in traumatic situations? In other societies, particularly in the West, the problems of Cuba would be enough to diagnose the society with PTSD, requiring assistance of psychiatrists and psychologists, and other experts on trauma, to work with the population. And yet, in Cuba, life not only goes on, but people are happy and find time to demonstrate happiness.

From his musings on the possibilities of happiness in unfortunate circumstances and challenging situations in life, Attila proposes a different perspective of life and living in the so-called third world that make it possible to transcend what would otherwise be characterized in the West as trauma. He states, "I have never known an African who [asked why me?] . . . Our expectations of life . . . are more modest than the Europeans. What I mean to say is that the script of life for most of us is, dare I say, a great deal more fluid . . . In other words, we know shit happens" (216).

From initial responses and conference presentations on *Happiness*, it is apparent that this aspect of Attila's theory is fascinating in its connections to the human condition, and in this dimension, his work is fully comprehended and well received by Africans, and so-called third world people. Because Africans have come to see life as a phenomenon by which shit happens, they are better disposed to receive/perceive suffering as part of the human condition. And because suffering is an integral aspect of life, the focus is not on its treatment or prevention, but rather on its transcendence. Is Attila arguing that people from situations of deprivations in the third world have a

better sense of suffering and can demonstrate resilience to its symptoms and overcome them than inhabitants of Western societies? Is he hinting that instead of spending time on the diagnosis and treatment of suffering, Africans focus on engaging the conditions for containing the suffering, or if possible changing the conditions that account for the prevalence of the suffering? If so, would I be right to say that in this cultural context, coping mechanisms and other strategies are more important than focusing on the symptoms of the trauma and the medication of those symptoms? Is Attila inferring that it is in such situations or with such perspective on trauma that happiness is reclaimed?

Attila seems to be postulating that the African's realistic view of life predisposes a Cuban disposition of mind, which accounts for mental fortitude and resilience, if not stoicism, in the face of grave odds. Their acceptance of the "shit" in life as integral to the business of living enables them to cope with difficult situations. Because, in the West, there is a different sense of expectations from life, such a situation would be characterized as traumatic and in need of treatment. Is he hypothesizing that reclaiming happiness even after the horrors of war is still possible in African, or third world, societies?

On the contrary, experts in psychology in London diagnosed Adama Sheriff with PTSD, even though she did not witness the fatal accident of her husband. They contend that the "news of a death sudden and unexpected could act as a stressor for PTSD" and that the "witnessing of the death itself was considered immaterial" (217). It is clear that the cultural context in which trauma is defined accounts for the way it is perceived and predisposes the construction of different theories regarding its nature and treatment.

Accordingly, listening to witnesses of the event and reading the files of Adama Sheriff, Attila realizes that "Everything he had heard about Adama Sheriff told him she possessed strength, was a survivor if you liked. Attila had known people who could walk through fire. He'd seen them in all the places he had been, they withstood what destroyed others, even rose to it. Whatever doesn't kill me makes me stronger" (221). This conception of survival, a direct reference to Nietzsche's dictum, lays the foundation for the development of Attila's theory that trauma does not imply damage, that suffering from traumatic event is a symptom of the human condition, and that it is a normal and natural form of human emotion. Hence, the central message of the novel is that suffering from trauma should not be characterized as damage from trauma.