Trauma Without Disability, Disability Without
Trauma: A Disciplinary Divide

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Trauma studies and disability studies have emerged over the past fifteen years as two of the most important new fields in the humanities. Given their respective subject matters, and considering the interdisciplinary character of both fields, one might think there would be frequent and fruitful connections between the two. Both, after all, are concerned with devastating injury and its lasting effects; both place individual disability and trauma in broad social and historical contexts; both focus intensively on problematics of representation. Surprisingly, however, connections between trauma studies and disability studies are nearly nonexistent. “Disability” is not a term used in trauma studies; the effects of trauma are considered in terms of a symptomology, considered as obliterating or sublimely and horrifically transformative, but not as disabling in a sense recognizable to practitioners of disability studies. Likewise, the scholarly literature of disability studies remarkably avoids any mention of trauma. Scholars in one field do not contribute to, and apparently do not read in, the other.

This mutual exclusion that constitutes a discursive abyss is worth investigating for the sake of better understanding the two fields, and perhaps also the social and intellectual conditions in which they have arisen and achieved prominence. In this essay, I will examine the premises, methods, and goals of trauma and disability studies; draw some conclusions as to why they have so little contact with each other; and consider whether each field might benefit from some mutual relation. Of particular importance in this discussion is the role of metaphor in the two disciplines. Trauma theory is, in many ways, ultimately a theory of metaphor; it is a way of thinking about how some extreme event or experience that is radically non-linguistic, that seems even to negate
language, is somehow carried across into language. Disability studies, conversely, devotes much of its practical and theoretical energy toward disputing the uses of metaphor with reference to the disabled, regarding metaphor as irremediably tied to oppressive ideological systems.

**Trauma and the Bearing of Metaphor**

Trauma studies as it has emerged in the past twenty years has several sources. First, it draws on the clinical study and treatment of traumatic injuries in war and accidents. Freud, of course, began his reflections on trauma in *Beyond the Pleasure Principle* (1919) by relating his experiences treating soldiers wounded in the First World War. More recently, the treatment of Vietnam War casualties, particularly of veterans who experienced symptoms years after their return from the war, helped initiate in 1980 the official use of the term posttraumatic stress disorder (PTSD). This term came also to be used with regard to victims of rape and childhood sexual abuse. Trauma studies in the humanities, however, has not adhered strictly to clinical approaches to trauma, tending more toward psychoanalytic ways of thinking that clinicians today largely ignore. PTSD itself is not an object of major interest in trauma studies in the humanities. Although its symptoms—flashbacks and hallucinations, compulsive behavior, amnesia, and emotional numbing—are central concerns for trauma studies, PTSD lacks resonance for the humanities, I believe, because of its association with a medical clinical practice that claims applicability only to individuals and that has no interest in problems of representation. Trauma studies, on the other hand, is attracted to psychoanalysis because of its potential for broadening from individual to social analysis, and because representation and language are always matters of contention.¹

As this description suggests, trauma studies engages with the theoretical and speculative psychoanalysis of Freud, Lacan, and Slavoj Žižek, and not with clinical psychoanalysis as generally practiced today. Trauma studies is, in general, concerned less with the effects of trauma on individuals and more with a social-historical trauma’s effects on a society’s culture and politics. Thus, trauma studies examines cultural products—novels, films, political tendencies—more than it does individual behaviors; or it examines individual behaviors as instances of broader cultural symptoms. For trauma studies, trauma is quintessentially a social and historical phenomenon; and practitioners of trauma studies, working in various departments of humanities, are quick to insist that they
are in no way clinicians of traumatized individuals, but are, rather, diagnosticians of traumatized cultures.

The third broad influence on contemporary trauma studies is the field of Holocaust studies as it has emerged since the late 1970s. The Nazi genocide of European Jews can be seen as the paradigmatic historical trauma of modernity, a physical and moral cataclysm in both Jewish and Western histories that produced an enormous and enduring range of symptomatic cultural products. The work of prominent trauma theorists such as Cathy Caruth, Marianne Hirsch, Shoshona Felman, and Dominick LaCapra often begins with, and consistently returns to, the Holocaust as its principal case in point. Žižek as well, whose range is broader, frequently relies on the Holocaust to make his arguments. Interest in the Holocaust as historical trauma coincided with, and methodologically and thematically overlapped with more general interest in issues of witnessing and testimony—that is, with interest in the narratives produced by people who survived some personal or social catastrophe.

To study trauma is to focus on an idea of direct experience. An event occurs; one passes through it, or undergoes it; one suffers it. The event is real, is overwhelming, and the psyche (or the culture) is, in some sense, shattered. But the direct experience of trauma is mediated in two ways, as trauma theory conceives it. First, the traumatic event is defined as being so overwhelming that it cannot consciously be apprehended as it occurs; it can only be reconstructed in retrospect, is always belated, at a distance. Second, and following from this, the apprehension of trauma involves always a study of symptoms, and so the central focus of trauma studies is not an attempt magically to reconstitute a direct experience of trauma, which must always be inaccessible even to its subject, but rather is on acts of interpretation of traumatic symptoms. Trauma studies is primarily a hermeneutics whose goal is to read traumatic-symptomatic texts.

Insofar as trauma studies aims toward the interpretation of symptomatic texts separated in time from the events they refer to, it is a study also of historical transmission. We can understand a present situation only in relation to some past event; yet, because this past event has, through its overwhelming violence and horror, obliterated itself, it can only be encountered by means of its effects in the present. And these effects are not direct: transmission is achieved through transformation and metamorphosis. Furthermore, the nature of these changes, as Žižek describes in the greatest detail, is in part determined by ideology which, in Žižek's view, is a kind of fantasy in which all traumatic damage is repaired. Yet,
ideology is itself a symptom, and contributes to further damage even as it helps maintain a semblance of social stability.

An event occurs, so destructive, so obliterating that it seems to wipe out even the symbolic means of its own representation. Jean-François Lyotard compared the Holocaust to an earthquake so powerful that it destroyed the seismographs that would have measured it. This claim is of course hyperbolic, for few crimes of this magnitude have been so amply documented. But hyperbole is part of the rhetoric of trauma studies, and indeed, in moral, rather than empirical, terms, Lyotard's claim is both evocative and valid. And yet, after this negation—figured, often hyperbolically, as absolute and definitive—comes . . . something. Trauma theory posits transmission, but it posits also the impossibility of transmission. Trauma signifies the collapse of signification. The posttraumatic world is an emergence of something from nothing. It is not transmission; it is something else. At least this is what the language of trauma studies suggests. The discourse it most resembles is that of apocalypse and post-apocalypse. The formation of symptoms, the narrative working through of these symptoms, and the ideological narrative fetishes that permit the denial of the symptoms' existence and power all become, in effect, the constitution of a new symbolic order, a new heaven and new earth. Thus, however obscurely, in the posttraumatic, post-apocalyptic landscape of symptoms and signs, the catastrophe becomes revelation. All that preceded it and all that follows after now take meaning from that single moment; the historical rupture now functions also as a distorting-revealing conduit, and transmission is renewed.

In an important sense, trauma studies can be said to articulate a poetics, a theory of making. Traces (we might say, ruins) from the destroyed world, consciousness, or society survive, and from these traces, or ruins, and from the somatic/symbolic symptoms that grow in them, new discourses take shape. Trauma studies focuses on how these posttraumatic discourses come into being. Its emphases on transmission, transformation, the creation of language and thought from a condition before a traumatic event to a condition after suggest an overarching, if implicit, concern with metaphor. Trauma theory describes the carrying-across, the meta-pherein, of subjectivity or culture across or through a traumatic crucible into a new linguistic, social, somatic world of symptoms, ruins, ideological constructs and fantasies—all of which are indirect, symbolic, metaphoric figures for what occurred during the missing, obliterated, time of trauma. Trauma studies is always concerned with objects that signify, that are signifiers, that exist materially, but are more than what
they are. The posttraumatic world is full of signifiers, but relative empty of signifieds and referents, for these have been destroyed or transformed past recognition. And yet, a world remains, and continues to take shape. Rupture and continuity coexist, and this coexistence may be both the precondition and the effective mechanism for metaphor. Something is not, but is; something is, but is something else.4

As a theory of metaphor whose goal is to express what cannot be recalled or known directly, trauma theory becomes also a vehicle for catachresis, for a saying the unsayable, or saying that for which no terms exist. Thus, in sometimes problematic ways, trauma studies merges with discourses of the sublime, the sacred, the abject, and, of course, the apocalyptic. It is understandable that such mergers take place, for discourses that posit absent referents may well tend to have overlapping vocabularies since no point of reference is there to distinguish them. This is a problem that has particularly beset areas of Holocaust studies.5

It is ethically important, however, to insist that trauma is not sacred. Trauma is utterly secular. It is simply something that happens. It has causes, which are both social and personal; and it has consequences, again both social and personal. Its devastating impacts challenge existing symbolic resources, and thus it may appear, or seem best described in terms of the sublime or the sacred or the apocalyptic. But it is not. The value of trauma as a descriptive term for historical catastrophe, it seems to me, is its lack of connotation, its negativity or blankness. It is what has happened; it brings with it no frame. It is not “tragic,” has no connotation of sacrifice, does not redeem. And yet, terminologies, narratives, and histories must change their shapes in order to accommodate the new realities that events such as wars and genocides have brought into being. Insofar as the trauma is also a crime, survivors feel ethically and legally compelled to bear witness; and their audiences feel likewise compelled to bear witness to the oral or textual witnessing through which the trauma has been transmitted.

With its emphases on cultural hermeneutics, historical transmission, metaphor, and textuality, and its possible overlapping with discourses of the sublime, the sacred, and the apocalyptic, trauma studies as practiced in the humanities clearly stands at some distance from the study and treatment of trauma in its clinical sense. In one direction, however, trauma studies has retained some of psychoanalysis’ therapeutic terminology and energy. Some trauma theorists, though not all, stress the possibility of coming to terms with, or working through, the symptoms of trauma and arriving at a condition of at least relatively better health. Freud, of course,
contrasted a therapeutic, narrative working through against a symptomatic and repetitive acting out. Later, as he explored the processes of fetishization and denial (as well as what he came to regard as constitutional factors opposed to healing—the death drive, for example), Freud began to conclude that working through might be more problematic than he had first supposed. Psychoanalysis, he observed, in *Analysis Terminable and Interminable*, was one of the “impossible professions,” along with politics and pedagogy, and so a full working through of traumatic symptoms would be as impossible as a perfect state or education.

In contemporary trauma studies, the problematics or impossibility of working through is often given greater emphasis than any consideration of what working through might actually consist of. Žižek, for instance, following Lacan, has tended to regard any symbolic articulation as yet another symptomatic-ideological suturing of the traumatic wound of the real that is the unspeakable, abyssal center of every symbolic order. Similarly, Eric Santner has written of the “narrative fetish” that simulates a condition of wholeness and denies the continuing effects of trauma. At the same time, these writers still maintain some hope in amelioration, or at least a partial escape from a never-ending stasis of ever-shifting symptoms, fetishes, and ideology. Santner’s recent book, *The Psychotheology of Everyday Life*, rethinks ethical obligation in a post-traumatic world in terms of defining and irremediable divisions of selfhood; that is, one’s obligation is to an other who is other to himself—who, like oneself, is structured by an inner alterity. And in Žižek, the structural aporias presented by the real are partially offset by the activity—as necessary politically as it is psychically—of trying to unmask ideological fantasies as fast as they are generated. Indeed, the most crucial therapeutic effort, for Žižek, extends beyond critique and entails immersing oneself in and “going through” the fantasy, for only in that way can the fantasy be fully revealed as empty. The theorist who offers the most hopeful and also, I would argue, the most judicious view of working through is Dominick LaCapra. For LaCapra, there can be no pure narrative of working through, uncontaminated by symptoms; such a narrative could only be a fetish or fantasy of healing. Rather, some measure of symptomatic acting out is a necessary component of therapeutic working through. The problem is one of balance and proportion. And yet, if one is sufficiently in control of one’s symptoms that it is possible to regulate the proportion of acting out as if with some psycho-cultural carburetor, is the acting out then really acting out? And thus, following the theory, can the working through really be working through? Finally,
perhaps, individual or social healing cannot conform to theory, and must be approached case by case, through trial and error, and we must judge as well as we can what actions and narratives are symptomatic and what are therapeutic, and in what proportions. As LaCapra further argues, such judgment must be informed by our sense of our own transferential relations with the actions and narratives in question.

The social-historical possibilities of healing according to trauma studies are best seen, I think, in Adorno's admonition that "we will not have come to terms with [aufarbeiten: literally, to work through] the past until the causes of what happened then are no longer active. Only because these causes live on does the spell of the past remain, to this very day, unbroken" (129). For trauma studies, the world is seen as broken, shattered, wounded, even as fallen. There is something cabalistic, certainly Benjaminian, in its perspective. The world is described as obliterated. But the world is never described as disabled. Trauma studies describes a condition—of disintegration and negation, revealed and obscured by symptoms—but it does not describe this condition in terms of its possible agency or abilities, or in terms of abilities that might have been lost. Such terminology is not within the field's metaphorical range. And yet, this set of metaphors surely could be invoked. The earth, or some part of it (a given society), could be described as having the ability to create and sustain life, the ability to provide food, shelter, medical care, education, the ability to sustain a people spiritually, intellectually, economically, and aesthetically. And having posited these abilities, trauma could be described as an event in which a world or society becomes impaired or disabled. In spite of its extensive use of metaphor of damage and recuperation, and of its function as a theory of metaphor, trauma studies does not employ figures suggesting disability. In this regard, trauma studies is actually more apocalyptic in attitude than it might like to admit. Its concern is with absolute catastrophe, obliteration, absolute transformation, total alterity. It has become the most radical, most beautiful, most ethically incisive development of poststructuralism. Disability studies, on the other hand, since it has developed together with movements for disability rights, is necessarily more mundane and anti-apocalyptic. It is concerned with particularities of physical difference rather than with radical, incommensurable otherness.

**Disability Studies and the Disabling of Metaphor**

Trauma theory, as I have argued, is in an important sense a poetics, a theory of making, and thus a theory of metaphor that describes how a
radically nonlinguistic event can be carried across an obliterating gap into language. It tends not to apply ethical judgments to the metaphors that emerge out of trauma, though it does try to distinguish between narratives that work through and those that are symptomatic, ideological, or fetishizing. At the same time, trauma theorists acknowledge that this distinction between therapeutic and symptomatic is unstable and that any posttraumatic narrative will partake of both features. Disability studies shares with trauma studies an intense concern with representation, but its attitude is quite different. Scholars in disability studies acknowledge the tendency of metaphors to accrue around instances of illness and injury, but they are highly critical of these metaphors. Indeed, I would argue that disability studies is in large part a critique of metaphor per se.

As the editors of the MLA’s *Disability Studies: Enabling the Humanities* note, “Disability as both image and concept pervades language and literature. English abounds with disability metaphors” (Snyder et al. 1). But these pervasive and abounding metaphors, as many scholars in the field demonstrate, almost without exception are pejorative and socially damaging to disabled people. Thus, disability studies’ critique of metaphor is directly political and is linked with disability rights movements, just as African American literary criticism and feminist theory have been linked with political movements for racial and gender justice. But in ways also similar to practices in race and gender studies, disability studies goes beyond local criticisms of particular usages to more general critique of deeper discursive habits and structures. David Mitchell and Sharon Snyder have proposed that figures of disability constitute a “narrative prosthesis” in Western culture and argue that “disabled bodies and lives have historically served as the crutch upon which artistic discourses and cultural narratives have leaned” (Introduction, 12). Using more or less Foucauldian approaches, Mitchell, Snyder, Lennard Davis, Rosemary Garland, and other disability theorists seek to demonstrate how disability becomes figured as a form of deviance by means of which norms of “abledness” are constructed. Disability, then, is not a physical or biological category so much as it is a social construction, and metaphor as prosthesis is the mechanism by which disability is naturalized and its social construction is obscured.

Disability metaphors as prostheses enable a society to construct and enforce its norms, and this will invariably be accomplished by imposing malevolent or infantilizing qualities onto disabled people. The disabled themselves are thus deprived of their own voices and of political power. Metaphors of disability are doubly mechanisms of oppression: they
create disability as deviant, and they prevent people with disabilities from speaking for themselves. Therefore, metaphor is a political danger, for every metaphor enforces norms of able-bodiedness. And these norms are false in their essence, disability studies contends, for ability and disability are merely relative positions on a spectrum. All of us are born into a condition of helplessness and dependency; all of us rely throughout our lives on technologies to augment physical abilities and compensate for physical limitations; all of us experience illnesses; most of us will grow old and will face increasing losses of physical and mental power. "Ability," then, is both relative and temporary; it is in no way an invariable norm. It is disability, rather, and the use of prosthesis, that is universal, and without the narrative prosthesis provided by cultural constructions of disability, the ideology of "ability" cannot function.

Given these premises, then, it is ethically and politically imperative that disability be presented without metaphor, as it is, in its own voice. Thus, disability studies displays a direct politics and a spirit of advocacy, as well as more personal, autobiographical, or testimonial features that are generally absent from trauma studies. Scholars in disability studies frequently identify themselves as disabled or as having family members who are disabled, while scholars in trauma studies virtually never describe themselves as having suffered trauma.

Disability studies seeks to critique and ultimately to reject the use of metaphor. It rejects the notion of disability as alterity, endorsing rather a continuum of abilities, limitations, and prostheses. The disabled, as conventionally understood, manifest differences, but they are in no way radically other. The confrontational rhetoric sometimes used in disability studies intends not to establish some unbreachable gap between the able and the disabled, but rather to force those who consider themselves "able" to confront their own continuing relation with disability and no longer define themselves in distinction from it. Disability studies, then, is concerned with ideological misuses of language, but has no interest in catechresis and the unsayable. It is different, not other; it is quite sayable, as sayable as anything else, if said in the right way—that is, in a way that respects the political and cultural autonomy of its subjects.

And yet, as I examine these two disciplines, it remains remarkable that disability studies contains no place at all for the traumatic. Not all instances of disability are traumatic, certainly not in a direct way. But many are, such as those produced by war, accident, and sudden debilitating illness, both for the individuals affected and for their families. And in cases of disabilities existing from birth, while the disabled person will not
suffer trauma since the person knew no previous condition, trauma will very likely be part of the family’s life. Disability, particularly when experienced after infancy or childhood, involves loss, and loss entails mourning. A theory of disability might well try to include a theory of loss specific to disability—that is, the loss of physical, mental, and neurological capacities. The world itself, and one’s own body, must be re-learned, processes clearly analogous to some of the central concerns of trauma studies. One would think that a theory of disability would address such questions of trauma, loss, mourning, and regeneration that seem so closely associated with many people’s experiences of disability.

Reasons for avoiding these questions are perhaps not so hard to find. The political emphasis in disability studies is on achieving equal access to full social, professional, and political lives for the disabled, and in this perspective the particularities of loss are not relevant. An advocate for the disabled might say, here we are, as we are. Our rights to full participation are matters of political obligation, not of occasional generosity, and the causes of the physical differences that deny us opportunities are no more important than the causes that create different races and genders. In its theoretical emphasis, disability studies moves primarily to deconstruct the dominant metaphorics of disability, and thereby show how, as Lennard Davis writes, “the concept of normalcy . . . is tied inexorably to the concept of disability, or rather, the concept of disability is a function of the concept of normalcy.” Thus, he continues, “the object of study of disability studies is not the person using the wheelchair or the Deaf person but the set of social, historical, economic, and cultural processes that regulate and control the way we think about and think through the body” (2). Again, the experience of injury, of damage, the potential for terror and dislocation in that moment, the fear of death, the reality of the body’s vulnerability, the symbolic transformations that must come in the wake of severe physical injury seem as irrelevant to disability studies’ theoretical as to its political discourses.

When one encounters a discursive omission that remains baffling after repeated efforts to explain it—indeed, when one’s explanations appear to be no more than repetitions of the problem (that is, disability studies does not refer to trauma or loss because these concepts are not relevant to its political or theoretical goals)—it is tempting, and at least sometimes legitimate, to turn to psychoanalytic terms. It seems to me, then, that disability studies exhibits a significant degree of denial with regard to trauma and loss. It refuses to mention them, though they would
seem to be unavoidable. There seems to me a rigidity and defensiveness in the resolutely Foucauldian or New Historicist, or deconstructive-constructivist stance taken by theorists like Davis, and Mitchell and Snyder, as if an acknowledgment of damage, or of a need to mourn the loss of an ability that was previously enjoyed, or of lasting, symptomatic effects in excess of some neutral concept of physical difference might discredit the entire discipline and even endanger the subjectivities of its practitioners. The fact of disability, obviously, is acknowledged, but its consequences are considered only insofar as they are socially constructed impediments, whether material (lack of ramps, employment discrimination, etc.) or ideological (deleterious, “ableist” representations of disability). Causes of disability that may be traumatic, and consequences of disability that may be symptomatic of earlier trauma are apparently unspeakable in disability discourse.

To show more precisely how this denial of trauma takes place, I will examine what I think is an exemplary instance of literary analysis in disability studies: David Mitchell and Sharon Snyder’s discussion of the figure of Ahab in *Moby Dick*. Mitchell and Snyder begin by observing the obvious point that critics tend to acknowledge then ignore: that the novel’s central figure, Ahab, is disabled and walks with the aid of a prosthetic leg, and that whatever is at stake in an interpretation of the novel must return to the fact of Ahab’s disability. Mitchell and Snyder observe that while the novel presents a world of demographic and semantic fluidity, without stable or ultimate meanings, in which all signs are infinitely interpretable, Ahab, the one disabled character, is static, locked in his monomania regarding the white whale. And, moreover, Ahab’s imprisonment in a singleness of interpretation, Mitchell and Snyder argue, is a direct consequence, indeed almost an emanation, of his disability. This crucial distinction in semantic status between Ahab and all other characters indicates the novel’s bias toward a physiological determinism of which the disabled character is emblem, since, for Mitchell and Snyder, all of Ahab’s character and all his actions are functions of his physical condition. “The significance of disability as a prescription for Ahab’s mysterious behavior,” Mitchell and Snyder write, “suggests that people with disabilities can be reduced to the physical evidence of their bodily differences,” and so “physical disability becomes synonymous in the text with the tragedy of a deterministic fate” (123, 138). Mitchell and Snyder propose a specific allegorical, or prosthetic, function for Ahab and his search for a fixed, stable meaning embodied in the whale who injured him:
To seek "knowledge" in the postlapsarian world of sliding signifiers means to enter into the insufficiency and discomfort of a prosthetic relation. Disabilities bear the stigma of a reminder that the body proves no less mutable or unpredictable than the chaos of nature itself. Ahab's character becomes the tragic embodiment of this linguistic equivalent to original sin, and his prostheticized limb serves as the visual evidence of his metaphorical plight. (126)

This insightful passage suggests that Ahab's pursuit of the whale is an effort, in effect, to rebuild the Tower of Babel and rediscover the primal language of Adam in which each name stood truly and stably for its object. And yet, this effort to rediscover the Word requires violence: one must "strike through the mask" and destroy the enormous, inscrutable manifestation of ambiguity. Ahab, in this description, becomes a kind of terrorist; for him, there is only one direction, one truth, and it can only be achieved through acts of revelatory, quasi-apocalyptic violence.7

I agree with this description of Ahab as semantic terrorist, but I am not convinced by Mitchell and Snyder's argument that his status is entirely a function of his disability. Missing from their analysis are crucial roles for trauma and loss. Mitchell and Snyder acknowledge, but do not emphasize, that Ahab's monomania is linked not to his present prosthetic condition, his disability, but to the event of his dismembering. His thinking returns always to that moment of injury: of pain, violation, humiliation, helplessness—in short, of trauma. Indeed, in a manner strikingly in accord with psychoanalytic theory, Ahab seeks compulsively to repeat the moment of trauma. His disability in itself is not what concerns or motivates him. Ahab lives and works quite well with his prosthetic leg and the various technologies he has installed to help him move around his ship. When he finds himself beyond the reach of his technologies, as when he boards the Samuel Enderby, Ahab negotiates a potentially humiliating situation with relatively good humor. Yet still Ahab is tormented, so it would seem that his singleness of purpose and his compulsion to reencounter the white whale stem not from his condition of having one leg but rather from the trauma of the loss of the other.

It is striking, and I believe emblematic, that Mitchell and Snyder cannot acknowledge Ahab's condition as a condition of loss. Their single use of the word is in quotation marks: "Ahab desires nothing short of a denial of this prosthetic relation and, in doing so, situates his 'loss' as an insult to an originary whole that he longs to reinstate" (125). It is unclear to me why the fact of this loss cannot be admitted directly into the
discourse. In the novel, certainly, it is real, its circumstances violent, and its effects traumatic. Indeed, if, as Mitchell and Snyder I believe correctly surmise, Ahab’s goal is to instate a condition of fixed meanings, the traumatic loss of meaning (which must be apocalyptically reinscribed) is a function, for Ahab, of his personal traumatic loss. As trauma theory in all its forms argues, trauma disrupts meaning. And in working through trauma, one strives not for some rigid Babel of certainty—that is, some fetish or ideological fantasy of wholeness—one seeks rather to come to terms with contingency, to remember and tell one’s story with new understanding, to mourn one’s loss and eventually be able to live beyond mourning. But in order to do so, one must not put one’s loss in quotation marks, as if it were not really loss.

Striking also is Mitchell and Snyder’s elision of Ahab’s conversation with Captain Boomer of the Samuel Enderby, who lost his arm in an encounter with Moby Dick. This encounter between the two disabled captains suggests a different, less deterministic presentation of disability than the one Mitchell and Snyder claim informs the novel. Far from being monomaniacally obsessed with destroying the white whale, Captain Boomer seems far more engaged in humorous banter with his ship’s doctor. And rather than seeking to reinstate fixed meanings, Captain Boomer’s interchanges with Dr. Bunger serve as small paradigms of undecidability, as Boomer continually accuses the doctor of drunkenness while Bunger insists that he never touches alcohol. Captain Boomer’s injury did not leave the psychic scars that Ahab’s did, perhaps because it seemed to be more inadvertent, not the result of an apparently deliberate and malicious attack as was the case with Ahab. Boomer then recovered from his injury, both physically and emotionally, and—again unlike Ahab—does not hope to meet Moby Dick again. He is not caught in a cycle of traumatic repetition. “He’s welcome to the arm he has,” Boomer tells Ahab, “since I can’t help it, and didn’t know him then; but not to another one. No more White Whales for me; I’ve lowered for him once, and that has satisfied me” (533). It would seem then, contrary to Mitchell and Snyder’s claim, that it is not disability in itself that determines character in *Moby Dick*. We must look not to a character’s physical condition, but rather to his response to the traumatic event, the moment of loss, that caused the physical condition.

Melville’s text suggests as well that the traumatic moment, while negating a prevailing symbolic system, generates others. From Ahab’s trauma comes a central metaphor, a metaphysics, and even a politics, for Ahab cannot act on his new world view without enlisting the support of
his crew. Symptoms of past trauma become the symbols that structure the posttraumatic world. A similar process occurs with Pip, the young deck hand who is traumatized into madness through his abandonment on the ocean after he jumps from a boat during the pursuit of a whale. According to Ishmael’s narration, the abyssal isolation Pip experiences has “drowned the infinite of his soul.” But out of this negation, a new and extraordinary imaginative world emerges. Revealed to Pip are “wondrous depths, where strange shapes of the unwarped primal world glided to and fro” and “joyous, heartless, ever-juvenile eternities. He saw God’s foot upon the treadle of the loom, and spoke to it; and therefore his shipmates called him mad” (525). As with Ahab, an overwhelming, unassimilable experience of pain and loss generates a totalizing vision that more than compensates, that excessively compensates, the failure of previous modes of understanding. In this episode, we see vividly once again that a theory of trauma is a theory of metaphor, of the generation of new forms out of failure and obliteration.

At the same time, however, if we accept this claim that metaphors and other new symbolic forms are, at bottom, elaborations of traumatic symptoms, then we must acknowledge also that the particular forms the emerging metaphors take will be especially malleable to pressures of ideology—itself, in effect, the master symptom and metaphor. Thus, while I have criticized Mitchell and Snyder for eliding any mention of trauma or loss in connection with Ahab’s disability, it remains the case that Melville chose a physically disabled character to embody the traumatized, totalizing, apocalyptic vision that dooms the world as represented by the Pequod—and chose a diminutive African American, Pip, as the other principle victim of trauma. It would seem that disability (or racial difference) in Moby Dick is the sign—the “material metaphor,” in Mitchell and Snyder’s terminology—of trauma, an omen, in effect, of some imminent apocalyptic breakdown. Even after we account for trauma, then, as a generator of metaphor, it seems we must return to disability studies’ critiques of metaphor and ask why it is that Melville needed a physical injury and disability to represent what is essentially a spiritual or metaphysical condition—thus both drawing on and reinforcing social stigmas attached to physical disability.

Trauma and Disability: Common Ground, Separate Ways?
The foregoing indicates to me that, at least in some of their more prevalent directions, trauma studies reveals certain theoretical blind spots in disability studies, while disability studies suggests political inadequacies
in trauma studies. The theoretical blind spot is the denial of trauma and loss. The political inadequacy is a certain universalizing of trauma that inhibits attention to particular present injustices and ideological distortions.

There are as well important overlaps between the two fields that I have not mentioned. Both, I believe, participate in a broad theoretical tendency over the past twenty years or so (though with antecedents far older) to explore concepts of the nonlinguistic—what might be called a counter-linguistic turn. Trauma theory posits a negation of language as one of trauma’s primary features. Disability theory’s focus on the body—Jim Swan refers to a “somatic turn”—suggests an other of language, a call that “compels us to consider bodies as such” (Swan 287) or as Mark Jeffrey writes, an acknowledgment “that there is some physical reality beyond culture” (34). Furthermore, in its less theoretical, more autobiographical discourses which constitute an important part of the field, disability studies is less reluctant to acknowledge a role for trauma.

On the whole, though, the two fields have different premises, different goals, and different limitations. They share certain interests, but very little in the way of critical vocabulary. It may be that at present their most fruitful interactions will involve pointing out each other’s limitations. Disability studies’ close links to political advocacy for the disabled, and the fact that many scholars in disability studies are themselves disabled or have disabled family members creates a theoretical rigidity and defensiveness that results in a refusal to admit to any traumatic element in disability. Scholars in trauma studies generally are personally far removed from any of the historical traumas (for example, the Holocaust) they discuss, but feel ethically or otherwise emotionally compelled to remain in the symbolic, culturally symptomatic shadow of the trauma. For this reason, perhaps, trauma studies is subject to tendencies toward elegaic, sublime, sacerdotal, and prophetic tones that disability studies, with more immediate concerns, is able to avoid.

We could propose, facetiously, that disability studies is marked by an inability to mourn, and trauma studies by an inability to stop mourning; but each discipline’s particular attitudes toward loss are only part of their stories. I will close this essay with a final instance of commonality. Trauma studies and disability studies share an interest in reform, seen as a radical remaking of social structures, institutions, and norms. For disability studies, the Americans with Disabilities Act was necessary and beneficial, yet only a beginning step toward creating new conceptions of person and agency. Unlike trauma studies, the rhetoric of disability
studies is not utopian, but, rather, for the most part, reformist and pragmatic. But I think its agenda ultimately approaches the hope implicit in much of trauma studies for a kind of tikkun, a healing of the world. Both approaches are necessary. One can critique (or try to work through) particular metaphors (or symptoms), and also explore how metaphors arise out of social trauma. One can try to correct particular damages and injustices and also address the more enormous wounds whose effects still structure our thoughts and institutions. In fact, both disciplines attempt all these activities. The two fields, then, do not, or need not, exclude each other, though each probably will continue to appeal to different groups of adherents with different needs and sensibilities.

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Notes

1. See Ruth Leys for a cogent historical treatment of the study of trauma from Freud and his antecedents to the present. Leys is overly harsh, I believe, in her assessment of recent work in trauma studies, especially the work of Cathy Caruth, overstating, in my view, the extent to which Caruth’s work relies on the neurological research of Besel Van der Kolk, which Leys regards as highly questionable.

2. See Dominick LaCapra’s work since the early 1990s for insightful commentaries on the hyperbolic language of poststructuralism, which he regards as often an acting out of trauma which the text cannot address directly. See also my After the End, chapter three.

3. See After the End for a detailed account of the relations between the languages of trauma and apocalypse.

4. In addition to the theorists already mentioned, Michael Rothberg has made an important contribution to trauma studies as a theory of representation with his concept of “traumatic realism,” which describes ways in which excessive moments of suffering which are at the same time morally unintelligible are given textual forms. Realism with regard to the Holocaust, Rothberg argues, must, on one hand, include the mundane as well as the unrepresentable, and, on the other hand will include elements of aesthetic styles conventionally regarded as anti-realist—modernism and postmodernism, for example. Traumatic realism, then, in order to be an effective, adequate, and impossible mode of representing trauma, must be a kind of formal tour de force that allows both the use and the shattering of conventions and genres. Art Spiegelman’s Maus is Rothberg’s most compelling example.

5. Alain Badiou’s theory of the “event” is a useful reference in this regard. Badiou’s event constitutes a definitive break with normative ways of thinking, a kind of eruption in the social-symbolic fabric; and its result is a new truth. Ethics,
which is Badiou’s primary concern, consists of fidelity to this emergent truth.
Though Badiou does not use the language of trauma, Žižek, in On Belief, recognizes the affinities between the two discourses. And the event, for Badiou, does take on a quasi-sacred status.

6. A fascinating exception to this distance, or reticence, is a recent book, Trauma at Home: After 9/11, edited by Judith Greenberg, in which prominent scholars in trauma studies combine theory with more personal responses in relation to the September 11 attacks, writing between four and eight months after the events. It was striking to me how often (though not in every case) a professional, theoretical stance still predominated, in spite of the editor’s invitation to more personal approaches. Something in the discipline, in the subject matter, in the terminologies that have developed, militates toward distance, or into passion that feels most at home in theoretical language.

7. See Steiner, Eco, and Genette for historical accounts of efforts to create, discover, or rediscover some perfect or primal language. See also Berger on the possible theoretical relation of such efforts to terrorism (“Falling”).

8. See Berger (2004) for a discussion of a contemporary counter-linguistic turn that would include a variety of theoretical discourses on body and materiality; the “ethical turn” in poststructuralism, especially its attention to Levinas’ presentation of the other; the shift in Lacanian theory from a focus on the symbolic and imaginary to a focus on the real; in the most general terms, the interest from a variety of directions in radical alterity. In disability studies, Lennard Davis’ theory of the “deafened moment” is of particular interest for its presentation of sign language as occupying “the interstice where space and silence come together . . . the locus where the body meets language.” Unlike written and spoken language, which rely “on naturalizing effects to make words seem to be things” sign language “is not a feint but a bodily presence” (117) and so avoids the Derridean impasse of infinite deferral.

9. See Tom Couser for a valuable study of personal narratives by disabled writers. Oliver Sacks is an important, though controversial, figure with regard to narrative and disability. He has been criticized by some in disability studies for appropriating the lives of disabled people (see Couser and Shakespeare), but his work can also be seen as evocative and humane. His personal narrative, A Leg To Stand On, seems to me especially important both because it describes his own injury and recovery and because it sets the terms for his subsequent case studies of others.

Works Cited


——. *Unclaimed Experience: Trauma, Narrative, and History.* Baltimore: Johns Hopkins UP, 1996.


