

Revolution in the Times of Coronavirus: Lebanon and Cumulative Trauma

Nayla de Coster

A present trauma can activate unconscious internal conflicts but also form external traumatic experiences. Past traumas will telescope into a present traumatic event. We know from psychoanalytic literature that present trauma affects the memory of the past. The unconscious does not obey time as past and present merge, so any threat or possibility of a destructive attack in the present reactivates the trauma of the past.

People across the world today are discovering the difficult reality of living in confinement, separated from their loved ones. As the world confines itself the present shrinks. For the people of Lebanon, this pandemic has reactivated memories of a very traumatic time during a sectarian civil war that lasted from 1975 to 1990.

In a recent session on the telephone during the Covid-19 pandemic a patient said to me:

I have come to regret the years of the civil war. In 1975, I was 12 years old. War came into my life and never left since. Today, we have lost it all, we are humiliated, we lost our savings and we have been deprived. But now, with the pandemic we are deprived of each other ... deprived of the ones we love, deprived of touch. I miss those days in the shelters, the birthdays we celebrated there ... at least, we could hug each other for comfort ... it all came back to me at once, the children huddling together while bombs were being dropped everywhere ...

Since October 2019, Lebanon has been experiencing a financial and economic meltdown. People have lost their savings as banks have installed capital controls and the local currency has devalued sharply. Unemployment, too, has risen along with the cost of living. On October 17th 2019, a widespread social revolution ignited protests and civil unrest against a failing and corrupt government in an attempt at reparation. Riots and violence led to blocked roads and made it difficult for us to receive patients in our offices.

The outbreak of Covid-19 has since shattered any hope that the revolution might provide an outlet to mourn the horrors of the civil war and re-build a new nation. The struggle against the financial meltdown and the social breakdown of the nation became a struggle against mourning. With the Covid 19 pandemic, the Lebanese have been experiencing the 'apres coup,' the suffering of a shared transgenerational trauma. Many patients use military and wartime vocabulary to express their fear of going out as most familiar places have turned into potential 'killing fields' and the virus can attack like 'shrapnel'. However, unlike during the civil war, the mighty invisible enemy can now be a loved one, a close friend, a son, a daughter, a parent. 'As it is linked to past horrors, the present terror takes on the quality of childhood fears and nightmares' (Kogan, 2007, p.215). This threatens to confuse the boundaries between external and internal, fantasy and reality. Inner spaces are no longer able to contain the inner world.

Most of my patients in remote analysis were complaining of feeling persecuted and terrorized. They had difficulties making representations of the virus. They described people walking around in masks as zombies or faceless ghosts. Bion spoke of 'bizarre objects' that destroy meaning and leave the subject in a mysterious meaningless world: In practice, it means that the patient feels surrounded not so much by real objects, things-in-themselves, but by 'bizarre objects' that are real only in that they

are the residue of thoughts and conceptions that have been stripped of their meaning and ejected (Bion, 1962b, p. 99).

My patients spoke of feeling trapped, cornered, confined but not contained. Most described a fear of breaking down and other primitive agonies such as fear of disintegration and the feeling of fragmentation. 'They may become (in an intimation of shrapnel) "minutely fragmented" and violently split off, encapsulating external objects, which in turn attack the self' (Bion, 1967).

Annihilation anxieties triggered by survival threat are residuals of psychic trauma and are seen in regression of functioning, disorganization: regression to anal and oral stages by stocking huge amounts of food and toilet paper, dissociation and splitting, eating disorders, panic attacks, nightmares, sleeping disorders and violence in the home. Under the impact of overwhelming and unbearable trauma, the boundaries between subject and object are blurred and confused. How can we, as analysts, hear the patient's internal world when the external reality is so overwhelmed by a shared condensed and cumulative trauma? (Kogan, 2007). How can we maintain the containing and holding environment when the analyst is subject to his or her own regressions to primitive anxieties induced by the 'return of the repressed'? How can we protect the asymmetrical relationship crucial to the analytic process and regulate the presence/absence of the object/analyst in times of de-confinement and possible re-confinement when the pandemic is not yet over and a second wave is looming and when social strife and the spectre of the civil war are looming?

The psychological catastrophe of war results from the collapse of mental and emotional containment and the release of terrifying un-metabolized proto-emotional mental states. Some patients spoke of being overwhelmed by a 'nameless dread.' Bion describes a state of meaningless fear that comes about in the context of an infant with a mother incapable of 'reverie', a concept that derives from Bion's theory of containing (Bion, 1962a, p. 116). Our practices were once transitional spaces, areas of play, where the body of the analyst and the setting formed a holding environment. Because of the political and financial meltdown, our patients had to deal with a failing environment inside and outside. Amidst the Covid-19 pandemic, remote analysis helped reinforce an 'erratic frame', and face attacks on thinking and on linking (Bion). 'Trauma destroys the ability to think, whether it happens to an infant whose mother cannot contain his bits of thought, or to an adult whose own developed ability to contain his or her associations is destroyed by trauma,' (Levine, 2011).

Covid-19 shattered the dreams of the revolution, which had once presented an opportunity for the survivors of the civil war and their offspring to process, elaborate, and finally mourn the horrors of that war in order to re-build a new nation. The question now is whether the pandemic will kill the hope for integration and creative transformation.

As we know from our practices, in order to work through a conflict, there must be an internalized good parent and a containing environment. In Lebanon, there is neither, as the political leadership is perverted and failing. Will the Covid-19 pandemic help widen the deep faults between the various ethnic and religious groups in Lebanon and trigger more violence? Or will it bring together its citizens in a shared 'reservoir' or 'ego skin' that would allow them to have the nation they dream of? (Volkan, 1997). 'An anxious or regressed group clings more stubbornly than usual to its ethnicity, nationality, or religion because these connections provide a netlike support that protects the group from deeper regression or disintegration.' (Volkan, 1997, p.146). However, this could also become the real danger that Lebanon, as a nation, will face in the near future: disintegration and a return to violence in a compulsive re-enactment of the civil war.

References

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