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Cycles of Violence: How Unhealed Collective Trauma Leads to Armed Conflict

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Cycles of Violence:

How Unhealed Collective Trauma Leads to Armed Conflict

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Abstract

In theories of armed conflict in international relations and security studies, human psychology, namely the concept of collective trauma, is very little taken into account. However, considering that states and armed groups consist of individuals, their collective traumas might play a role in the outbreak of armed conflict. This paper articulates theoretical elements from IR, memory studies, and psychoanalysis allowing to better grasp how and why collective traumas generated by large-scale violent events may in turn engender armed conflict if they remain unhealed. This articulation leads to a refined theory and mechanism of ‘cycles of violence’, which is then qualitatively tested in two empirical cases: The United States, with 9/11 and the following invasion of Afghanistan; and Afghanistan, with the US intervention and the following insurgency. In both cases it is possible to establish with a high degree of certainty that the respective large-scale violent events caused a collective trauma which, for different reasons, remained unaddressed and participated in the outbreak of further violence. Each case thus represents a cycle of violence itself, and they represent a larger one together. Furthermore, the analysis highlights the power dynamics sometimes preventing proper healing, and sheds light on the case of Afghanistan, in which Western versions of events often dominate.



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Introduction

Armed conflict has dire consequences for the people and countries that fight them. It also causes deep suffering to the people that get caught in its midst; the everyday victims of bombing and gunshots, of loss and displacement. Armed conflict causes death and destruction – it hurts, and not just physically. Psychological wounds of war, or psychological trauma, is the hidden part of the iceberg, just like the unconscious is the hidden part of the human mind.

IR/IS provides theories of armed conflict; memory studies examine how collective traumas impact collective memory and its possible repercussions; and psychology (psychoanalysis) specialises on the notion of trauma and why it may lead to violence, mostly at the individual level – but they have not been articulated, although this would allow for a more comprehensive understanding of the phenomenon of armed conflict. This paper thus researches the following question: *How, and why, do unhealed collective traumas contribute to generating armed conflict?*

This work focuses on collective psychological trauma as both the result of large-scale violent events, such as armed conflict and terrorist attacks, and one of the factors participating in the outbreak of (further) armed conflict¹. By articulating together elements from the fields of international relations/international security (IR/IS), memory studies, and psychology, it concentrates on the idea of cycles of violence: That victims of large-scale violence may, because of their suffering, in turn become perpetrators – which, at the collective level, may contribute to generating armed conflict. A crucial aspect in that relationship is that victims' suffering – their collective traumas – is something that can be healed if it is properly addressed, but often is not.

After a theoretical integration of the three fields leading to a hypothetical refined theory and causal mechanism of 'cycles of violence', two cases are qualitatively analysed: That of the United States (US), with the terrorist attacks of 11 September 2001 as a starting point and the invasion of Afghanistan about a month later as the hypothesised outcome, and that of Afghanistan, with the 2001 US intervention and the 2003 insurgency as the hypothesised cause and outcome respectively. The hypothesised casual mechanism is tested in each of the cases through congruence analysis and process-tracing, the goal being to determine whether the cases

¹ The notion of armed conflict is purposely left open since legal and social science definitions present the risk of being too restrictive, as well as Western-centrist (Barkawi, 2016).

are illustrative of the ‘cycles of violence’ idea – not to explain everything about the US invasion and the Afghan insurgency. Indeed, collective trauma is approached as factor *contributing* to the outbreak of conflict; it is neither seen as an all-encompassing explanation of armed conflict nor as incompatible with other possible factors.

The results are promising as the hypothesised causal mechanism not only holds in both cases, but also sheds light on interesting aspects within each case, as well as for the two cases as a whole. Indeed, the analysis establishes with a high degree of certainty that on one hand, the collective trauma caused by 9/11 in the US participated in the aggressive foreign policy that led to the military intervention in Afghanistan, and on the other hand that the collective trauma caused in Afghanistan by the US invasion contributed to the following insurgency. Moreover, by exploring the case of Afghanistan this work contributes to the emerging field of trauma studies, which has so far mostly focused on Euro-American cases (Hanif and Ullah, 2018). In fact, it sheds light on the power dynamics in a case currently important for IR/IS and contributes to presenting an often unknown Afghan perspective: The analysis of 2001-2003 Afghanistan highlights how Afghans’ collective traumas have mostly gone unnoticed in IR/IS because of domination issues preventing them from being heard, and healed.

Each case thus constitutes a cycle of violence itself, and taken together they represent a larger one: Americans were victims of the 9/11 attacks; they became perpetrators by invading Afghanistan, where Afghans were the victims. In turn, part of the Afghan population became perpetrators by participating in the insurgency and attacking back. Because of competing interests and power relations, traumas often remain unhealed. Generally speaking, trauma is particularly difficult to deal with: it is horrible to go through and also horrible to remember, so silencing it often feels easier (Edkins, 2003, pp.1,7). However, the elements this paper makes apparent suggest that, had the different collective traumas been properly addressed, the cycle might have been stopped – which is particularly interesting considering how the situation in Afghanistan kept escalating and where it is at nowadays, although diving into post-2003 events would require further research.

This work thus falls within the fields of IR/IS but provides a new perspective. By focusing on the phenomenon of armed conflict, and by articulating the state, group, and individual levels, it is situated midway between the notions of traditional security – which focuses mainly on state security and external military threats – and non-traditional/human security – which focuses on individuals and a diversity of threats (Christou, 2014, pp.367-368). Furthermore, it does not contradict the idea that states or armed groups are rational actors and

armed conflict represents, in that sense, rational behaviour; however, it aligns with the notion that behind such actors are people who may not always be rational (Waldman, 2010, explaining Clausewitz). Indeed, it adds that those people may be victims of collective trauma, which may drive towards conflict if it remains unhealed.

Through its theoretical and empirical contributions, this paper represents the hope that, by bringing in an additional factor into IR/IS current understanding of armed conflict – and one that can be worked on –, it will lay the first step towards integrating the notion of collective trauma in theories of armed conflict. This could, in turn, progress towards developing more tools to prevent conflict in cases where collective trauma is a determining factor.

The next chapter reviews the relevant literature and theories in the fields of IR/IS, memory studies, and psychology. Its last section then articulates the pertinent elements from these three fields together, outlining the hypothetical refined theory and causal mechanism; it also provides the observable implications for each step of the mechanism to facilitate the analysis. The following chapters are the methodology, which also provides some background to the cases, and the analysis, which is separated in two according to the selected cases. Last, the conclusion reviews the findings and provides several openings for further research.

Literature Review and Theory

This chapter is divided into four sections, which review the literature of three different fields – international security, memory studies, and psychoanalysis – with regards to armed conflict and psychological trauma. Based on this, the sections progressively build upon each other, highlighting the complementary aspects of different theories as well as their gaps. The fourth section brings the three fields together by providing a refined theory of ‘cycles of violence’ and its hypothetical causal mechanism.

International Security and Trauma

IS, as a research field, is a subfield of IR. In turn, it contains further subfields, as well as a diversity of approaches and conceptions. From a ‘traditional’ IR realist perspective, international security mostly focuses on national security and military threats (Walt, 1991).

However, broader approaches were developed notably by the IR feminist literature, leading namely to the inclusion of the notion of human security, which also considers issues such as life within a violent context, poverty, climate change, development, and health (Tickner, 2011; Acharya et al., 2011).

This paper is embedded in the field of IR/IS as it explores the phenomenon of armed conflict – on one hand as a threat to peace and international security, on the other hand as an expression of violence that causes harm to the people having to endure it. This paper does not take part in debates around the legitimacy of armed conflict but rather focuses on the possible reasons behind it, suggesting that unhealed collective traumas may play a role in its outbreak.

A rich body of literature in IR/IS reflects on the types and causes of armed conflict posing a threat to peaceful international relations, which has led to the creation of multiple theories. Some focus on inter-state conflict (international conflicts, or armed conflicts between two states), while others are specific to intra-state conflict – where one armed group or more opposes the state, or different armed groups oppose each other (Kalyvas and Balcells, 2010). Intra-state conflicts can also become internationalised, when third states back either the government in question or one of the armed groups.

With regards to inter-state conflict, rational theories are one of the classic approaches (Fearon, 1995): building on the realist conception that states are the main actors in international relations and behave rationally according to their interests, rational theory posits that information and commitment issues prevent states from reaching bargains, and thus explain why these engage in armed conflict instead. Some scholars have also brought in the argument of human nature while others have opposed it, claiming that violence always falls within the realm of politics (Arendt, 1970). In addition, internal political dynamics have also been explored; for example within authoritarian regimes, the role of elite rivalry is seen as a possible driving factor, since engaging in armed conflict elsewhere can be a means for authoritarian leaders to distract internal elites (van der Maat, 2014).

Focusing on intra-state conflict, further research has notably considered the role of economic resources, leading to the ‘grievance vs greed’ theoretical trend (Li and Tang, 2017), or that of identity – be it ethnic, religious, or national (Muller, 2008; Tibi, 2008; Gorski and Türkmen-Dervisoglu, 2013). Other trends have examined the reasons why civil conflicts that had ended start again, arguing that negotiated settlements to civil wars should not only provide benefits to both sides, but also threaten harm to successfully deter ex-combatants from taking up arms again – as well as ensure an efficient security-sector reform including former rebel

groups, as these could have attained a certain legitimacy during conflict (e.g. Toft, 2009; Arjona, 2014). Here again, elite rivalry dynamics of authoritarian regimes have been said to influence the occurrence of armed conflict (van der Maat, 2014).

Furthermore, there is an understanding that whatever its type and the reasons behind it, armed conflict is always deeply political – it represents a political claim and is itself an act of policy. Because of this, however, armed conflict may not always be rational, as the people making the decisions not always are (Waldman, 2010, explaining Clausewitz).

There is, nevertheless, no consensus as to which theories best explain why and how armed conflict arises; in fact, it is important to note that each conflict results from a unique combination of factors. Moreover, among these theories little to none take psychology into account – although considerations about human behaviour should be examined when trying to understand the occurrence of armed conflict, since it is humans who are behind the states and constitute the groups that engage in armed conflict (Shannon, 2000, p.312). The extent to which trauma, more specifically unhealed collective trauma, could affect international security is sometimes underlying (Rapoport, 2002, who mentions that states may react in destructive ways after a terrorist attack because of anger and resentment) or touched upon within area studies (Milshtein, 2009, who explores the Palestinian trauma linked to displacement and identity in the context of the 1948 conflict with Israel).

Nevertheless, the dynamics of collective traumas as one of the potential factors explaining the occurrence of armed conflict – be it inter- or intra-state – have not been extensively researched or integrated into the field of international security, despite the fact that trauma is closely related to violence. The concept and mechanisms of collective traumas should thus be brought into the field and explored more thoroughly in this context. Indeed, a better comprehension of the relationship between collective trauma and armed conflict is crucial to understanding how to best deal with collective trauma when it arises as a driving factor of armed conflict, and thus to finding appropriate solutions to avoid it. In the next sub-sections, pertinent elements from the fields of memory studies and psychology are reviewed and combined, allowing to establish the relevant theoretical relationships between armed conflict, memory studies and psychology in relation to collective trauma.

Memory Studies and Trauma

Contrary to the field of IR/IS, the notion of collective trauma has been explored to some extent by memory studies specialists. Indeed, borrowing the concept from the fields of psychology/psychiatry, they examine the impact that collective trauma can have on collective memory and argue for the importance of healing it, acknowledging that it can otherwise lead to ‘cycles of violence’. In fact, when examining the relationship between collective trauma and armed conflict, looking into collective memory is useful to determine the impact of a collective trauma on a community and evaluate if it is in the process of being healed or not. Accordingly, this section provides an overview of first, the concept of collective memory; second, the ways in which trauma can impact it; and third, the healing efforts that can be put in place at the collective level.

Regarding the concept of collective memory, it is important to note that it is complex and has evolved over time. Nowadays, it is at a stage where its multiplicity has been acknowledged. Collective memory is considered to consist of various levels or dimensions: individual, social, political, and cultural. The first two are related to bottom-up processes – they are based on communication and generational experiences –, while the last two are top-down and more ‘artificial’ – contained notably in archives and other ‘external’ means (Assmann, 2009, pp.2,6).

These different levels of collective memory interact and coexist, mutually building upon each other but also contesting each other (Assmann, 2009, pp.1,13; Confino, 1997, pp.1390-1399; Edkins, 2003, p.55). Bottom-up recollections namely add to perceptions of the past and thus to collective memory, influencing top-down narratives and in turn evolving because of these (Dossa, 2014, pp.7,15). Collective narratives, in all their bottom-up and top-down forms, are thus central to the constitution of collective memory – as on one hand individuals produce narratives for the collectivity (Olick, 1999, p.345), and on the other institutions play an important role in the crystallisation of specific collective narratives (Assmann, 2009, p.8).

Because of these interactions between different types of collective memory, it is nowadays also seen as consisting of *more* than the simple aggregation of individual memories (Olick, 1999), which contrasts with earlier conceptions (e.g. Halbwachs, 1925). Indeed, collective memory in all its forms is embedded in social processes, and is a social process itself (Edkins, 2003, p.54). There is thus a dimension, in collective memory, that consists of a

‘transitional space’ between the individual and society, drawing from bottom-up and top-down processes (Winnicott, cited by Sievers, 2016, p.70). As such, it contributes to defining both individual and collective identities (Assmann, 2009, pp.1,3; MacMillan, 2010, p.53).

Psychological trauma is closely connected to the concept of memory because its processing is rooted in the way it is integrated into – conscious or unconscious – memory. This is also valid at the collective level. Collective traumas are experiences that constitute a deep shock for an entire community², and the way they are worked-through at the collective level and integrated into collective memory is key to determining what their impacts will be.

Collective traumas are often linked to experiences of large-scale violence (Dossa, 2014, p.15), related for example to “moments of shame and guilt, which threaten and shatter the construction of a positive self-image” at the national level (Assmann, 2009, p.8), or a process of dehumanisation (Minow, 2009, p.15). Because of the shocks these induce, a collective trauma may disrupt the community’s production of collective narratives, which in turn affects collective memories around both the occurred events and the trauma itself.

Indeed, when a trauma affects an entire community, the group may not be able to integrate the traumatic event “into coherent and constructive narratives” (Olick, 1999, p.344). This probably starts as a bottom-up process, in which individuals, who usually participate in the production of narratives for the collectivity, are too traumatised to do so (Olick, 1999, p.345). As a result, the collective traumatic experience may never be included into the narratives of top-down collective memory such as national memory (Assmann, 2009, p.8) – and when this happens, the trauma cannot be properly healed. From the perspective of memory studies, it is possible to identify at least three different ways in which a collective trauma may *disrupt* collective narratives, thus the production of collective memory around the occurred events and the trauma:

The trauma may remain sharp and fixed in time, as if it were “fully present and not represented in memory”; the people having experienced the traumatic event may not be able to tell it rationally or chronologically (Webman, 2009, p.41). In this case, the traumatic event is thus not integrated into collective memory, be it conscious or unconscious. Otherwise, the traumatic event may be present in collective memory, but unconsciously: the memory of the event “is repressed and remains unhealed” (Olick, 1999, p.343). A third option would be for

² Precise definitions of psychological trauma and collective trauma are provided in the next section, which is based on psychology.

the trauma to be present in collective memory to the extent that people remember the occurred event, however it is not worked-through at the collective level and does not integrate top-down, notably national, memory (Assmann, 2009, p.9).

Without diving into the dynamics of these three possibilities, scholars of memory studies acknowledge the importance of properly healing a trauma. Indeed, they recognise that an unworked-through trauma may have significant repercussions, even with the passing of time. They can namely lead to “personal violence, revenge, perpetuation of hostilities, blood feuds, and sympathy for extreme political solutions” (Olick, 1999, p.344) – and thus “[c]ycles of violence” in which vengeance is usually disproportionate and irrational (Minow, 2009, pp.15-17). Moreover, they highlight that a collective trauma impacts even those who did not experience it *directly* (Olick, 1999, p.345), and that it can be transmitted over generations if it remains unaddressed (Minow, 2009, p.16).

Because of this, processing a collective trauma is important. This implies an effort, at the collective level, to remember and understand the occurred events (Minow, 2009, pp.15-16). More precisely, overcoming a trauma means overcoming the feelings of vengeance and hatred it may induce – in other words, getting as close as possible to the idea of forgiveness (Minow, 2009, pp.17,19). In this context, public institutions bear an important responsibility since they participate in the creation and crystallisation of narratives (Minow, 2009, p.28). Collective efforts such as setting up support networks for the victims, educational programmes, truth commissions, criminal prosecutions, or reparations, can help overcome the trauma (Minow, 2009, pp.17,19). Depending on what type of violent events occurred, notably if they happened within a state or in relation with another one, the right collective efforts will not be the same, but the underlying idea is always to work towards preventing the repetition of violence (Minow, 2009, p.28).

Sometimes, healing efforts are also purposely limited or sabotaged (Dossa, 2014, p.15). Indeed, it may happen that the institutions responsible for collective healing efforts have an interest in keeping silent or promoting a certain version of the events and/or the trauma itself (Edkins, 2003, pp.5-7,55). In such cases, there may be a gap between top-down and bottom-up memory, and what institutions promote as healing efforts actually contributes to widening the gap (Edkins, 2003, pp.225-228). When examining collective healing efforts after a trauma, it is thus important to determine not only whether some of the possible collective efforts are being implemented, but also if these sincerely work towards *hearing and including* bottom-up versions – often those of the victims (Edkins, 2003, pp.16-18).

The literature in memory studies is thus insightful to establish a first basis of understanding of the relationship between collective violence and trauma. Departing from the concept of collective memory, as well as the different ways in which collective memories are built, this part of the literature review/theory allows to understand that collective traumas strongly impact collective narratives. Furthermore, it suggests collective ways of dealing with a trauma and shows that if nothing, or not enough, is done in this regard the trauma can lead to renewed violence – notably armed conflict. In turn, psychological perspectives help understand what a trauma exactly is, how it occurs and becomes collective, and *why* it may engender further violence. This is the purpose of the next section.

Psychology and Trauma

This section brings in specific concepts of the field of psychology that complement, on a theoretical level, what has been said so far. The field of psychology is vast in itself and composed of multiple specialisations. Although specialisations such as group or social psychology may come to mind as relevant for IR, this work argues that elements from psychoanalysis/psychodynamics are most useful with regards to the relationship between collective trauma and armed conflict. Indeed, these specialisations analyse the unconscious³ dimensions of human behaviour and have lengthily explored the phenomenon of trauma, notably why and how it can result in violence if it remains unhealed. Although these specialisations have mostly focused on the individual level, they also have, to some extent, applied their theories to international phenomena such as war and terrorism. However, not many scholars of IR/IS have sought to integrate them.

Generally speaking, a trauma occurs when a person or a group of people experience an event that is too intense for the psyche (more commonly, the mind) to deal with. More precisely, the trauma provokes “feelings of extreme fear” which result in “a collapse of central functions of the self and a fundamental shock to the entire personality” (Wirth, 2004, p.37). In turn, *collective* traumas happen when a large group of people, such as an ethnic group or a nation, simultaneously experience such an event (Wirth, 2004, p.37). This means that the issue of

³ The unconscious, in English also called subconscious, is “the complex of mental activities within an individual that proceed without his awareness” (“Unconscious”, 2017).

collective traumas could *a priori* be relevant for different types of conflict, depending on which community – a whole nation or a sub-national group – is affected.

Collective traumas are caused by a diversity of events, like events that imply an “existential threat” to a society’s “social fabric” (Plotkin-Amrami and Brunner, 2015, p.526) or similarly, the shattering of one’s feeling of safety/security (Edkins, 2003, p.4). Events that strongly threaten collective identity, be it religious, racial, cultural, or national, are also traumatic: this is the case with, for instance, forced displacement, discrimination, genocide threat, or oppression – which can be illustrated by the collective trauma that the Holocaust engendered for the Jewish community (Kira et al., 2019, pp.263-265). In addition, exposure to violence, either direct physical violence or its witnessing, can result in a trauma (Huesmann et al., 2017, p.39; Wirth, 2004, p.35). Furthermore, societal traumas can be “episodic, *event-dependent*, as in acts of terrorism [... or] *chronic* as in economic hard-times with high-rate joblessness or massive food shortages” (Parens, 2014, p.137). Here again, it is worth noting that most of these incidents and their traumatic repercussions may occur in the context of broader large-scale violence, such as armed conflict, political violence, or terrorist attacks.

Furthermore, although this work focuses on victims, it is important to stress that certain events are traumatic for perpetrators too. There is notably a growing trend of literature exploring the concept of ‘moral injury’, which implies a traumatic “betrayal of what’s right” – this has so far mostly been researched in cases of returning Western soldiers (Shay, 2014, pp.183-185; Meagher and Pryer, 2018).

Besides allowing to better grasp what types of events may be traumatic and why, psychoanalysis/psychodynamics also explain why, if a trauma is not properly healed, it may be “fend[ed]-off by turning against others in violence” (Wirth, 2004, p.11). Indeed, from a psychological perspective, processing and overcoming a trauma necessitates enough time to “go through the phase of depression and sadness”; to acknowledge the events and “psychically integrate” them (Wirth, 2004, p.43). In other words, this means being able to ‘digest’ and to some extent remember them (Bohleber, 2007, p.330), which fits with the notion that at the collective level, this necessitates an interaction between bottom-up and top-down processes.

If this does not happen, the psychological wound may express itself violently, which at the collective level could lead to the outbreak of an armed conflict (Parens, 2014, p.143). It is in this respect that “perpetrators were once victims, even though they do not appear as victims” (Lee, 2015, p.213) – or their previous generations were (Parens, 2014, p.170). Psychologically

speaking, there are several unconscious mechanisms that can explain how and why a collective trauma leads to violence. Four of them are simplified and briefly explained:

1. *Acting out* consists in the violent expression of something repressed⁴ that has built up, notably “extreme experiences, memories or emotions” than cannot be expressed otherwise – there is no “conscious awareness of the emotion” that is expressed (Lee, 2015, pp.212-213). This can happen when collective traumas are repressed (Wirth, 2004, p.14).
2. *Projection* is the “misattribution to others [of] thoughts or feelings” that are unacceptable to oneself, leading for example to hypervigilance and prejudice (Lee, 2015, p.212). In the context of a collective trauma, it can manifest itself through the projection of “everything ‘bad’ and hateful onto the enemy” as a defensive reaction to avoid dealing with the trauma – which feeds feelings of revenge and retaliation (Wirth, 2004, pp.35,43).
3. *Reaction formation* is the unconscious reaction for dealing with a narcissistic wound (related to self-love and self-perception), which can result from a traumatic humiliating experience; in such cases, feelings of shame and powerlessness can lead a person or group of people to resort to violence as a means to compensate for these feelings, thus potentially leading to cycles of conflict (Lee, 2015, pp.212-213; Parens, 2014, p.144; Wirth, 2004, p.38).
4. *Appetitive aggression* occurs in cases where mass trauma and the resulting post-traumatic stress disorder (PTSD) lead to the “perpetration of violence and/or the infliction of harm [...] for the purpose of lessening one’s pain” and compensating for feelings of loss of control – which can notably lead to the outbreak of further armed conflict (Musisi and Kinyanda, 2020, p.9). More specifically, in such cases it is the passive suffering that becomes unbearable and there is an attempt to render it active through further aggression.

This is not an exhaustive list of mechanisms, but it presents some of the most important ones and allows to understand that there is indeed a concrete link between trauma and violence. Although psychoanalysis/psychodynamics mostly focuses on these mechanisms at the individual level, the elements presented here also allow to better conceptualise what impact this

⁴ Repression, in psychoanalysis, is “the exclusion of distressing memories, thoughts, or feelings from the conscious mind” (“Repression”, 2020). It also occurs naturally with all types of information since we cannot constantly remember everything.

may have at the *collective* level, when an entire community suffers a trauma and it remains unhealed. It thus becomes clearer how this could participate in the outbreak of an armed conflict. The next and final sub-section of this chapter articulates what has been said so far in the different fields and, drawing from them, provides a hypothetical refined theory of ‘cycles of violence’.

Cycles of Violence: A Refined Theory

This chapter has so far reviewed trends of literature in three distinctive fields, showing that IR/IS scholars have mostly overlooked the notion of collective trauma in theories of armed conflict, whereas this has been explored in memory studies and psychology, albeit in different ways. This section articulates the three previous ones and presents a refined theory containing a hypothetical causal mechanism to explain how collective traumas may contribute to the outbreak of armed conflict. This is later on tested in the analysis.

The literature in memory studies and psychoanalysis/psychodynamics emphasises that ‘cycles of violence’ start, precisely, with events of large-scale violence – for instance armed conflict, large-scale terrorist attacks, mass killings or political violence. Indeed, such events may imply traumatic experiences like existential threats, threats to collective identity, exposure to violence, dehumanisation, displacement, or feelings of shame, guilt or powerlessness. These experiences are traumatic for the individuals involved, meaning they cause extreme psychical shocks – and the trauma becomes collective because a large number of individuals simultaneously experience the events.

The traumatised individuals, who usually participate in the community’s bottom-up processes of collective memory-building, may be too traumatised to contribute. The events and their traumatic implications may thus not be represented in collective memory; or they are, but unconsciously and in a raw state; or the events are present in memory but their traumatic implications are not processed. In such cases, some individuals may be processing the trauma on their own, but the collective dimension is lacking, either in its bottom-up or top-down version, or both. This raises a red flag as it could indicate that feelings of hatred and revenge are present, which are either not addressed by public institutions or even encouraged by these.

Alternatively, collective efforts sincerely aiming at processing and healing the trauma may be put in place with the help of public institutions. The type of efforts may vary according to

the type of trauma, but their goal has to be aligned with helping victims process and understand their grief, and overall helping the community recover in a way that allows it to move towards forgiveness. In such cases, bottom-up and top-down collective narratives around these ideas should develop. Analysing a community's (bottom-up and top-down) collective narratives after a traumatic experience should thus generally provide insights as to whether the collective trauma is being healed or not.

If it is not, the collective trauma is likely to express itself in violent ways, through psychological unconscious mechanisms like acting out, projection, reaction formation or appetitive aggression. It may be difficult to determine which mechanisms are exactly at play in the cases studied, but it is important to know they may be happening. Furthermore, there can be hints such as the inability to express the trauma, behaviours of paranoia or prejudice, feelings of revenge and retaliation or of shame and powerlessness, or large-scale and untreated PTSD implying a silenced pain and sense of loss of control. Because of its collective dimension, the trauma may then lead to the outbreak of armed conflict, thus creating a cycle of violence. Depending on whether a whole nation was traumatised or a sub-national group, the type of armed conflict could differ.

Of course, this does neither mean that the possible causes of collective traumas always engender trauma, nor that a collective trauma always results in armed conflict. Psychological factors are not “ultimate explanations but aspects of a complex whole” (Lee, 2015, p.211), and their influence may depend on cultural aspects (Kira et al., 2019, p.267) or personal/societal resilience (Sousa et al., 2013, pp.235-236). However, for the (probably multiple) cases in which collective traumas do occur and remain unaddressed, thus entering the list of factors that could explain the renewal of armed conflict, it is important to better understand their mechanisms.

In the following chapters, the hypothesised causal mechanism is tested in the cases of the US after the 9/11 terrorist attacks and Afghanistan after the US invasion. First, however, it has to be dissected into more easily applicable observable implications for each step of the mechanism. The following listed observable implications for each step are not exhaustive; they can be cumulated but do not have to; and not *all* those listed for each step necessarily have to be met for the mechanism to work.

1. **Cause – large-scale violent events and their implications:** armed conflict, large-scale terrorist attacks, mass killings, political violence – implying displacement, direct experience of violence or its witnessing, bombing, sound of

alarms/guns/explosions/screams, sense of danger, food shortages, living inside ruins, loss of family members/friends/acquaintances, loss of property, destruction of cultural/daily life sites, mass rape,...

2. **Collective trauma combined with lack of healing:** for a large number of people simultaneously; existential threat, threat to collective identity (religious, racial, cultural, national), dehumanisation, shame, guilt, sense of powerlessness, fear, shock – with no sadness/depression period, no active remembrance of the events, silence, refusal to talk about what happened, no sincere collective healing efforts guided by institutions (e.g. discourses about forgiveness, commemorations, educational programmes, truth commissions, reparations, trials), discourses about hatred/vengeance/retaliation,...
3. **Psychological unconscious mechanisms leading the trauma to be expressed violently:** unexpressed feelings bottling up, perception of the group that caused the occurred violence as the absolute enemy, assumption that they are evil, paranoia, large-scale and untreated PTSD, need to prove worth/superiority,...
4. **Outcome – outbreak of armed conflict:** declaration of war, insurgency, invasion abroad – inter-state conflict if *national* reaction against another *nation*; intra-state conflict if *sub-group* reaction against the *state*; internationalised civil conflict if combination of these options.

Methodology and Research Design

This chapter introduces the chosen method for the analysis and explains why the cases of the US after 9/11 and Afghanistan after the US invasion were selected. As a transition towards the cases, a brief background is outlined.

Chosen Method and Case Selection

This work aims at showing that collective trauma, thus some concepts from memory studies and psychoanalysis, should be taken into account in theories of armed conflict in IR/IS. It also proposes a refined theory articulating these three fields. Accordingly, qualitative case analysis, more specifically the within-case analysis methods of congruence analysis and process-tracing,

are appropriate as they allow to test the validity of this refined theory. Qualitative analysis is indeed particularly indicated as the studied mechanism – collective trauma resulting from large-scale violence as participating in the outbreak of armed conflict – is not statistically measurable. In turn, congruence analysis and process-tracing are most useful since they allow to determine, respectively, whether the theoretical observable implications are empirically present in the chosen cases and if the hypothesised causal relationship holds.

The applied methods are based on Punton and Welle (2015), who notably draw from Beach and Pedersen, and George and Bennett (2005). Although congruence analysis and process-tracing are often seen as two separate processes, they are paired here, as for each step of the mechanism the sources used enable to both evaluate whether the listed observable implications are present in the chosen cases, and assess the causal relationship between each of the steps. Probability tests like ‘hoop tests’ are thus not conducted *explicitly*; the analysis is constructed as a discussion that progressively builds upon the different sources and from each step to the next. A variety of primary and secondary sources, as well as different tools (brief discourse analyses of some passages, testimonies, detailed narrative, analytical argumentation), are used in that regard.

Depending on the case, the sources and tools used vary according to the availability of resources, which is in turn embedded in a specific political context. There is an issue of power and domination in the selected cases; accordingly, it is important to be aware that the resources available from Europe are likely to be representative of this issue. Similarly, there is a risk, with the chosen concepts and methods, of applying Western ideas to a ‘non-Western’ case – that of Afghanistan. The chosen methods furthermore imply the risks of oversimplification and overdetermination, both of the cases and of the reasons behind the outbreak of the armed conflicts in question. However, these risks are minimised by the diversity of sources and tools used to conduct the analysis, as well as the consideration of possible alternative/complementary explanations – although thorough alternative theory-testing is beyond the scope of this work.

The chosen cases are on one hand the US, with the 9/11 terrorist attacks and the following invasion of Afghanistan, and on the other hand Afghanistan, with the US invasion and the following insurgency. These cases are interesting taken individually as they allow for a balance between one Western and one ‘non-Western’ case, but also as a whole, potentially allowing to stress the cyclic pattern of violence. Moreover, they form part of very recent history and their long-term outcomes are still pending.

The chosen cases allow to test the hypothesised causal mechanism for situations where the initial violent events are large-scale terrorist attacks and a military invasion respectively. Indeed, the US case starts with the terrorist attacks of 11 September 2001, while that of Afghanistan begins with the military attacks launched by the US – allied with other Western powers and specific Afghan armed groups on the ground – in October 2001. The time period is thus slightly different for each case; it is short in the first one (about a month elapsed between the hypothesised cause and outcome), whereas a few months to a year or two passed between the hypothesised cause and outcome in the second case.

Before diving into the chapter of the analysis, the next and final section of this chapter outlines the background to both cases.

Background

On the morning of 11 September 2001, two planes crashed into the World Trade Center's Twin Towers in New York. A third collided into the Pentagon – the US Department of Defence headquarters –, and a fourth crashed in Pennsylvania before reaching its hijacked goal (Maley, 2002, pp.251-252). The terrorist attacks, which killed over 4000 people, were traced back to Osama Bin Laden and Al-Qaeda (Baker, 2011, p.207). The organisation was based in Afghanistan, which was under Taliban rule, so the Bush administration “demanded of the Taliban that bin Laden and the leaders of al-Qaeda be handed over to them” – to which the Taliban replied ambiguously (Baker, 2011, pp.207-208). As a result, the Bush administration established that no distinction would be made between the terrorist organisation and their hosts (Bailey and Immerman, 2015, p.6).

Declaring a global war on terror and justifying the attack as an act of collective self-defence⁵, the US invaded Afghanistan in October 2001 with the aim to destroy both Al-Qaeda positions and the Taliban government (Bailey and Immerman, 2015, p.6; Baker, 2011, p.208; Maley, 2002, p.262). The operations started with a combination of bombing campaigns, intervention by special forces of the US, Great Britain, Canada and Australia, and support for the Northern Alliance – a coalition of Afghan armed groups, former Mujahideen, against the Taliban – on the ground (Baker, 2011, p.208). Within a few months, the Taliban and Al-Qaeda had to retreat. A number of fighters were evacuated by Pakistan while many others, including

⁵ For the specifics of which acts of force are permitted under international law, see UN Charter, Chapter VII.

Bin Laden, sought refuge in the Tora Bora mountains near the border with Pakistan, before eventually managing to cross it (Baker, 2011, pp.209-211).

Under heavy strikes by the US and its allies, most of the country rapidly ceased to acknowledge the rule of the Taliban, and in December 2001 a new government emerged with the support of foreign powers: With the Pashtun Hamid Karzai as interim president, it was formed by the northern militias and other anti-Taliban groups, including civilian women (Baker, 2011, p.211). The International Security Assistance Force (ISAF) progressively arrived to assist the new government alongside NATO (Baker, 2011, p.211). However, before “a coherent strategy to stabilize Afghanistan could be designed and implemented”, between 2002 and 2003 the US started concentrating on Iraq, which they considered a crucial “front in the war against terror” (Bailey and Immerman, 2015, pp.6,11).

An Afghan “age-old pattern” occurred with the American invasion: The US and its allies seemed to quickly have achieved victory, after which there were about two years of (fragile) peace – but then, the insurgency that had been gaining ground in the meantime became more significant (Baker, 2011, p.213). Indeed, the Afghan government was not strong enough, allowing for a return of different warlords in certain regions and the regrouping of some Taliban members in the mountains bordering Pakistan (Baker, 2011, p.214). Moreover, the civilian population, who had suffered from the intervention by Western powers but also hoped it would help the country recover, was disappointed by the slowness or even absence of reconstruction efforts and the growing corruption within the government’s structures (Maley, 2002, pp.263-264; Baker, 2011, pp.214-216). Already throughout 2002 an important part of the Afghan population, mostly in rural areas, started longing again for the Taliban, recalling “the stability and rule of law they had brought, at whatever harsh a cost” (Baker, 2011, p.216).

The former Taliban leader Mullah Omar seized the opportunity and started recruiting again, calling for vengeance on the foreign powers (Bailey and Immerman, 2015, p.8). Supported by Pakistan – and other countries later on –, the Taliban reorganised and progressively launched an insurgency from 2002-2003 (Baker, 2011, pp.217,224). Throughout the years that followed, they increased their attacks, leading to an escalation with international troops, which implied more civilian casualties (Baker, 2011, p.220). In turn, this engendered confusion among the population as to whom they could trust, and more support for the Taliban, thus strengthening their guerrilla strategy (Baker, 2011, p.223).

Afghan people were already exhausted. Since the 1970s, they had first endured the repression and persecution of two authoritarian communist/socialist governments (Baker, 2011, p.23). Then, the country had been invaded by Soviet troops in 1979, leading to a ten-year long liberation war by the Mujahideen (Islamist freedom fighters), who were strongly supported by the population and provided with weapons by the US in a Cold War logic (Baker, 2011, pp.172-180; Dossa, 2014, p.12).

When the Soviet troops had left in 1989, “Afghanistan was abandoned” by the Western powers that could have assisted in its reconstruction, and civil conflict had broken out between the different factions among the Mujahideen, thus leaving Kabul – the capital – in tatters (Dossa, 2014, p.12). The main groups were those of commanders Dostum (ethnic Uzbek), Rabbani and Massoud (Tajiks), and Hekmatyar (Pashtun) (Dossa, 2014, p.13).

Another group from the south had started gaining importance as from 1994: The Taliban, a Sunni Pashtun group of radicalised ‘religious students’ coming from refugee camps in Pakistan or madrassas (religious schools) and actively backed by Pakistan (Maley, 2002, pp.218-223). They had taken over the country and the capital by force, but also by promising the drained population peace, justice, and order (Dossa, 2014, p.13). However, in lieu of this they had imposed an extremist Islamist rule under which women and dissenters were massacred (Maley, 2002, pp.232-240). Moreover, they had hosted Bin Laden and his terrorist training camps in exchange for money and his support in overthrowing the Mujahideen government, thus becoming even more radical themselves (Dossa, 2014, p.13; Maley, 2002, p.255).

In short, when the US invaded Afghanistan, millions of its people had already had to flee the country because of the different conflicts; millions of Afghans had lived in the midst of destruction and been killed, injured, or seen relatives and friends die (Baker, 2011, p.176; Dossa, 2014, p.13). And Afghan people had shown resilience and tried to rebuild their country multiple times already despite all this.

Analysis

The United States: 9/11 and the invasion of Afghanistan (September 2001 to October 2001)

1. Cause – large-scale violent events and their implications:⁶

In the case of the US, the initial large-scale violent events are the terrorist attacks of 11 September 2001. The attacks implied the **direct experience of violence** for the few thousands of people who were directly involved, and **its witnessing** for millions of people since the attacks were broadcast live, with the images and **sounds** implied (Maley, 2002, p.252). A description from Bailey and Immerman (2015, p.2) allows to capture this:

“the planes striking the towers, again and again, in constant replay; firefighters and police confronting a task beyond any capacity; human beings plummeting more than a thousand feet to earth; the towers collapsing in clouds of dust and debris; the faces of those fleeing the encroaching cloud; the survivors, blanc-faced and shrouded white in dust” .

The attacks also implied the **loss of family, friends and acquaintances** for many people; the **destruction of sites** that were symbolic in the US; and provoked a **sense of fear and danger** that remained in the following months (Bailey and Immerman, 2015, p.2).

2. Collective trauma combined with lack of healing:

The simple fact that the attacks had the mentioned consequences is enough to assume that they engendered trauma, since such experiences are traumatic in and for themselves. Nevertheless, this step explores more in detail why these experiences were traumatic for Americans, as well as how they were collectively dealt with.

To begin with, the attacks were profoundly **shocking** to Americans. Their consequences were perceived as abysmal, which some passages from Bailey and Immerman (2015, p.2) highlight: they describe how “firefighters and police confront[ed] a task *beyond any capacity*”, and that “the *nation as a whole* felt [the attack’s] impact” (emphases added). The way these

⁶ For clarity purposes all the possible observable implications are not listed again under each section. However, when they appear in the analysis they are highlighted in **bold**.

excerpts are phrased shows that dealing with the attacks was physically and emotionally overwhelming, not only for those dealing with them ‘live’ but for the **whole nation**.

Moreover, beyond the shock the direct victims experienced, the attacks hit home in every sense of the word. Indeed, they occurred on American soil, striking the World Trade Center and the Pentagon, symbols of the US’ financial and military power. This deeply impacted Americans’ “sense of security and self-confidence”, which formed part of their national identity (Bailey and Immerman, 2015 p.2). This was reinforced in the days/months that followed as going back to normal took time: Again, Bailey and Immerman (2015, pp.2-3) describe the “*aching* emptiness of America’s airports”, the “*deserted* malls and [...] tourist sites”, the “*anxiety* that *newly* suffused everyday life” (emphases added). The vocabulary employed here highlights that Americans were hurting because the confidence that was part of their identity and daily life had suffered a severe blow. Maley (2002, p.252) in fact states that 9/11 “caused a psychological shock comparable to the sinking of the ‘unsinkable’ ship Titanic”.

The attacks were thus not only shocking in themselves; the new sense of fear and powerlessness they brought with them were as shocking too. However, **fear and anxiety** can be traumatic on their own, which probably participated in the collective trauma. Indeed, although many Americans responded with mutual help and compassion, many others did “with fear, much of it irrational and incapacitating” (Bailey and Immerman, 2015, p.3).

Additionally, by attacking its self-sense of strength and power, 9/11 was probably deep down a **humiliating** experience for the US (Wirth, 2004, p.38). This seems to be particularly true at the decision-making level, where the Bush administration and National Security officials felt they had “failed to protect the nation” (Bailey and Immerman, 2015, p.3). Without it being explicit, it is also likely that while being shook by the events as American citizens, the administration also experienced feelings of guilt and shame for having, as representatives of the strength and power of the US, allowed the attacks to happen. It is also possible that part of the population shared these untold feelings.

Of course, aligned with the fact that ‘collective memory’ is in fact collective *memories*, 9/11 did not generate one collective trauma but several ones – the events were traumatic for different reasons to different people. However, it seems clear that they were deeply traumatic for the country overall despite these possible nuances.

In turn, it is important to evaluate how the trauma was dealt with at the collective level. The following paragraphs namely demonstrate that it was not properly healed.

The first, and basic, need to progress towards healing after a trauma is to give it enough time, to step by step process its different aspects. Considering that only a few weeks went by before the US launched its bombing campaign in Afghanistan (Baker, 2011, p.208), there was clearly **no time** for this to happen. Bailey and Immerman (2015, p.1) namely claim that the shock caused by 9/11 “made possible actions that might otherwise never have been taken – or that would, at least, have provoked longer and more difficult debate”. Indeed, an almost immediate shift took place in American foreign policy-making; not only in terms of the type of actions undertaken, but also, and perhaps most importantly, with regards to their pace. Usually, military decisions like the ones made for Afghanistan would have entailed more debate and thus taken longer (Bailey and Immerman, 2015, p.1).

Interestingly, Edkins (2003, pp.216) mentions that “the state authorities leapt in with memory practices” already *while* the events were occurring – but she reads this as a “desperate attempt to repossess power”, implying that the practices in question did not aim at acknowledging the trauma; in fact, she even suggests that they precisely aimed at avoiding dealing with it because of specific Western power dynamics. The exact reasons why the administration went down that path are beyond the scope of this paper; however, it is important to note that although it may seem like public institutions rapidly engaged in ‘**memory practices**’ like **collective discourses**, these **did not imply addressing and processing the trauma**. In line with this, although the Bush administration first requested from the Taliban that the Al-Qaeda instigators be handed over to be put on **trial**, there was no room left for possible negotiations – in fact, the requirements made were a non-negotiable list, the only other option being a military intervention (Baker, 2011, pp.207-208).

Furthermore, different sources report that a few weeks after the attacks, a significant number of **Americans were angry and demanded retaliation, to which the administration responded favourably** (Maley, 2002, p.258; Bailey and Immerman, 2015, p.5). On 20 September 2001 president Bush declared, in a speech to Congress, that Americans’ “grief [had] turned to anger and anger to resolution” (CNN, 2001). This ‘resolution’ was linked to a peculiar conception of ‘justice’ that implied making the instigators pay. By directing efforts towards military operations, Bush attained in that period 92% of approval – the highest popularity rate in the US so far (Bailey and Immerman, 2015, p.3). In other words, the population wanted revenge and the public institutions that could have encouraged de-escalation fed the idea of revenge instead.

9/11 thus generated a collective trauma for Americans as a nation, linked to the deep shock, the extreme fear and the (less explicit) humiliation the attacks provoked. Furthermore, the trauma was not dealt with in a way that would have allowed to slowly overcome it: First, the time elapsed between the attacks and the start of military operations was simply not long enough for the nation to acknowledge these traumas; second, the responsible institutions did not engage in serious healing efforts; third, they even encouraged retaliation when the population demanded it. Potential bottom-up collective healing efforts were thus not given enough space, and the top-down response was inappropriate. Therefore, in the weeks following the attacks the dominant collective narrative crystallised around the idea of revenge.

3. Psychological unconscious mechanisms leading the trauma to be expressed violently:

This part of the mechanism is delicate since unconscious psychological mechanisms are hard to measure. This part of the analysis thus draws on elements allowing to determine as closely as possible whether the mechanisms occurred.

In this regard, some passages from Maley (2002) are insightful when subjected to discourse analysis, considering that the book in question was published in 2002 – not long after the first US operations, when it seemed like they had crushed the Taliban. He namely explains that the 9/11 attacks had “produced a *righteous* and *awesome wrath* which demanded *prompt retaliation* [,] Al-Qaeda and the Taliban [being] the targets” (Maley, 2002, p.258, emphases added). The vocabulary employed here demonstrates that responding to the attacks with anger and vengeance was perceived not only as fair, but also as moral and great. It also depicts how Al-Qaeda and the Taliban were framed as the **evil enemy** by being the justified targets of this **good and admirable revenge**. This is reinforced in the following description of the fall of the Taliban, where Maley (2002, p.267, emphases added) claims that among the reasons behind this, “most important of all was the *sheer might* of the USA, which confronted the Taliban with an *opponent formidable beyond their darkest dreams*”. He also stresses the illegitimacy of the Taliban government. The US invasion is thus justified as a punishment by the ‘pure’ befalling the ‘corrupt’.

Excerpts from Bush’s address to Congress of 20 September 2001 (CNN, 2001) further demonstrate how the situation was simplified by depicting a black-or-white world in which people and nations are either friends or enemies, good or evil, and the only solution to terrorism is punishment and destruction: he states that terrorists “hate” democracy, claims the “only way

to defeat terrorism as a threat to [Western] way of life is to stop it, eliminate it and destroy it where it grows”, and tells nations across the world that they have to choose whose side they are on. Retaliation thus provided Americans not only with a quest perceived as morally justified, but also with the **illusion that it would re-establish safety and security** on American soil. In other words, it was a **defensive reaction** based on the irrational fear 9/11 caused.

Additionally, 9/11 was perceived as an **insult to American power** in the world. In his discourse, Bush (CNN, 2001) asserts that “[w]ith every atrocity, [terrorists] hope that America grows fearful, retreating from the world and forsaking [its] friends”. In the US, there was a sense that the response to the attacks would thus have to reassert its position in the world, as well as its power, values, and interests (Bailey and Immerman, 2015, p.4). Bush (CNN, 2001) in fact affirms: “We’re in a fight for our principles”, and that as long “as the [US] is determined and strong, this will not be an age of terror [; it] will be an age of liberty [in the US] and across the world”. It therefore seems clear that in the US, because of the scale and symbolic dimension of 9/11, there was a collective **need to prove the superiority of the country’s values and strength**.

9/11 and the (unhealed) collective trauma it engendered thus seems to, in turn, have provoked psychological mechanisms like projection and reaction formation. The first implies that an unhealed trauma leads to the perception of the enemy as being the incarnation of evil, which fuels feelings of revenge. The second is a way to compensate for unconscious feelings of shame and powerlessness engendered by a traumatic humiliating experience. In both cases, the violent reaction is defensive as it is easier than acknowledging and confronting deeply traumatic feelings. It is also worth noting that the increased likelihood these two mechanisms occurred does not rule out other ones, such as appetitive aggression (lessening psychological pain and loss of control by perpetrating violence) or acting out (violent expression of repressed feelings). In fact, it rather seems likely that they somehow entered into the equation.

4. Outcome – outbreak of armed conflict:

What is considered as the outcome in this case is already known – the start of **military attacks in Afghanistan** by the US and its allies, which can be seen as the outbreak of a conflict despite the fact that its status is legally complex.

Of course, multiple factors likely entered into the equation. Edkins (2003, pp.225-228) namely argues for power dynamics in Western states and societies; moreover, elements like

cultural aspects, electoral reasons, the fact that Al-Qaeda had already bombed two US embassies in the past (Maley, 2002, pp.248-250), and geopolitical or strategic interests come to mind. However, the aim of this analysis is not to determine all the reasons behind the US invasion of Afghanistan or to judge its legitimacy/efficiency with regards to the terrorist threat; neither is it to determine one all-explaining factor since armed conflict is usually the result of a combination thereof. The aim of this step is to reflect on the last causal link of the ‘cycles of violence’ mechanism; in other words, how likely it seems that among the reasons that pushed the US to declare a war on terror and invade Afghanistan, the unhealed collective trauma resulting from 9/11 played a role.

In fact, all the steps of the mechanism hold thus far. It is clear that 9/11 engendered a national trauma for the US and that the first steps that could have been taken towards healing at the collective level were not. This allowed alternative psychological mechanisms for dealing with the trauma to develop, which allow to better explain why Americans were largely in favour of a violent reaction to the terrorist attacks – a military intervention in Afghanistan, against Al-Qaeda for instigating the attacks and the Taliban for hosting the organisation.

The dynamics between bottom-up and top-down processes of dealing with the traumas, thus the way collective narratives around the events developed, are particularly interesting here. Indeed, beyond the idea that the executive possibly responded to the population’s need for revenge because of political reasons, it is important to take into account the fact that as American citizens and representatives of the state, they were probably profoundly shaken too by the events and were affected by the collective trauma. Moreover, their actions were embedded in it no matter which angle is taken here.

It is also worth noting that once the conflict started, it continued to be portrayed by Western media from a one-sided perspective: information was usually aligned on official versions, partly censoring delicate issues such as casualties (on both sides), and still promoting a dichotomised approach to the conflict – “West/East, civilized/barbaric, North/South, and developed/underdeveloped” (Campbell, 2017, p.28; Lucaites and Simons, 2017, p.14).

From what precedes, it is thus possible to say with a high degree of certainty that the unhealed collective trauma that affected Americans because of 9/11 contributed to the invasion of Afghanistan, so to the outbreak of an armed conflict. This means that, had more time been allowed before such a reaction, and had collective efforts aiming at processing and slowly overcoming the trauma been put in place, *maybe* the following aggressive foreign policy and

the suffering it inflicted could have been avoided, or at least reduced. The next case, that of Afghanistan with the US invasion as a starting point, dives into the consequences.

Afghanistan: the US intervention and the insurgency (October-December 2001 to 2002-2003)

1. Cause – large-scale violent events and their implications:

The starting point for this case is the US invasion in the last months of 2001, more specifically the combination of the Western bombing and special forces operations and the Afghan armed groups on the ground (the ‘Northern Alliance’, former Mujahideen), against the Taliban and Al-Qaeda.

For the Afghan population the conflict implied **experiencing and witnessing violence, mass displacement, loss, and dispossession** (HRW⁷, 2002). US forces notably used cluster bombs, which implied civilian casualties, and used excessive and indiscriminate violence during arrests (HRW, 2002; Sifton, 2004). Testimonies collected by Dossa (2014), who interviewed Afghan women in Canada and Afghanistan between 2006 and 2009, allow to better picture the situation, notably the **sounds and sensations**:

“God knows that we have seen the killings of people, our neighbours, other people and relatives. Seen them dying. I have suffered so much” (p.66); “They took everything from us. Everything was destroyed, even our homes were bombed. Three or four times we had bombs [come down on] our house. For a minute, all houses were shaking. Mirrors got broken and shattered glass came like rain on our head. Blood everywhere” (p.67); “No electricity, no lamp, nothing. You cannot see. You are scared. All the noise, all the bombs were over our heads” (p.67).

Moreover, in the case of Afghanistan it is important to note that it was not just about the violence inflicted by the US invasion and its direct implications; it was also the **repetition and prolongment of all these things**. Indeed, the population had already accumulated traumatic experiences of large-scale violence in the previous decades, with an oppressive socialist regime, the Soviet-Afghan war, the civil war between the Mujahideen, and the extremist Taliban rule. These episodes had already come with death, displacement and bombardments, to name only a

⁷ Human Rights Watch.

few (Maley, 2002, pp.154-155; Dossa, 2014, p.12). When the US invaded, people were already living among ruins, landmines, and poverty (Dossa, 2014, pp.20,43).

Certainly, the violence that came with the US invasion was not only provoked by American attacks and its allies; before surrendering, the Taliban fought across the country, leaving destruction in their wake (HRW, 2002). However, this happened in the context, and because of, the US intervention. No matter where the violence came from exactly, people felt that Afghanistan was being destroyed, and its people forgotten (Dossa, 2014, p.77).

2. Collective trauma combined with lack of healing:

As for the case of the US with 9/11, the experiences linked to violence that were mentioned in the previous step are largely sufficient to know that the US invasion was traumatic for the Afghan population. However, this step dives into the details of the collective trauma and examines if collective healing efforts were put in place.

The large-scale violence and its consequences implied severe **shocks** for Afghans, reinforced by the repetition thereof. Indeed, the shock generated by the US attacks must be understood with the country's background in mind; notably, people felt that they were disproportionate in relation to the state the country was in. A dramatic description by RAWA⁸ (2002) captures this: "A captive, bleeding, devastated, hungry, pauperized, drought-stricken and ill-starred Afghanistan was bombed into oblivion by the most advanced and sophisticated weaponry [...]. Innocent lives, many more than those who lost their lives in the September 11 atrocity, were taken". Moreover, if for the US it was clear that they were targeting Al-Qaeda and Taliban bases and leaders, this was not necessarily clear to civilians, for whom the invasion implied casualties and destruction either way.

Afghans themselves mention the repeated shocks they suffered, including from the US invasion, and have a sense that the **whole population** experienced them: From her interviews, Dossa (2014) reports sentences like: "[t]he wars were a very bad shock to every Afghan person" (p.48) and "[w]hat I have to say is something that we have all experienced [, m]y story is not that different from theirs" (p.57).

⁸ Revolutionary Association of the Women of Afghanistan.

Furthermore, beyond the **fear** that the bombing generated (Dossa, 2014, p.67), the fact that the US collaborated with the former Mujahideen was **anxiety**-provoking for the population, who was afraid to re-experience the violence of the civil war (RAWA, 2001). This was reinforced when, after the fall of the Taliban, the government that Western powers helped put in place gave access to power to leaders of the Northern Alliance, who additionally did not eliminate violence within the new government (RAWA, 2002;2004).

What is more, the repeated shocks endured by Afghans went mostly unacknowledged. This is probably partly due to the fact that the notion of ‘depression’ did not form part of Afghan vocabulary and cultural norms pushed not to show suffering, already after the Soviet-Afghan war (Maley, 2002, p.154). However, the US invasion, as well as its collaboration with the armed groups that had caused great suffering already, exacerbated this: It did not acknowledge the population’s distress and even normalised it. Most Afghans dealt, and still deal, with untreated mental health issues; they also feel they have lost everything (Dossa, 2014, pp.47,52). With the US invasion, it became normal for Afghan women to “sweep the debris from a bomb blast [when going] about [their] daily chore of sweeping the floor” (Dossa, 2014, p.6). Because of the cumulation of traumas and the lack of recognition thereof, as well as the perception that the attacks were disproportionate, it seems that feelings of **helplessness** and **dehumanisation** also participated in the collective trauma Afghans suffered.

The issue of working through the trauma and its cumulative effect is closely related to what precedes. Indeed, the country’s history and the effects the invasion had for the population remained unaddressed after the fall of the Taliban, both by the newly established Afghan government and the Western powers present. Neither the shocks, fear, anxiety, helplessness and dehumanisation the US intervention implied for Afghans, nor the fact that they had **not yet recovered** from previous violence when all this happened, were taken into account (RAWA, 2014B).

An important element, following the US invasion, is thus **silence** with regards to the population’s suffering. This occurred on one hand from a bottom-up perspective. Indeed, different sources highlight that violence was experienced at a very intimate level throughout the conflicts; people helped each other, but the knowledge that everyone was affected seems to have been mostly *implicit* (Maley, 2002, p.154; Dossa, 2014, pp.48,50). Nevertheless, the testimonies collected by Dossa (2014, pp.48,50) also demonstrate that when given the opportunity, people – in this case women – were willing to share their stories.

Top-down dynamics thus seem to, on the other hand, have played a central role in maintaining silence. In the case of Afghanistan, after years of conflict and the US invasion, the ‘institutions’ that were responsible for addressing the collective trauma were not only the newly established government, but also the international powers responsible for the situation, who were still present and claimed to be assisting with reconstruction. None of them worked towards putting the necessary collective healing efforts in place. Indeed, the new government, composed in part by former Mujahideen (Baker, 2011, p.211), were allied to the invading power, so it was **not in their interest to address the consequences of the attacks**. Neither was it for them to **engage in reconciliation efforts** with regards to the 1989-1996 civil war. In fact, the new government partly slipped back into dynamics similar to the past – instead of healing efforts, they engaged in assassinations, rape, and censorship (RAWA, 2002). The US and international allies could have used their influence to help establish healing efforts; had they been more aware of the country’s recent past, the effects of the invasion could have probably been mitigated (RAWA, 2014A). However, the situation in Afghanistan was embedded in **specific power relations implying that Western-constructed versions of the events were dominant and hindered local collective memory work** instead of encouraging it (Dossa, 2014, p.6). Official international **discourses contradicted what Afghans felt they had been through** instead of acknowledging it (Dossa, 2014, p.53).

Lastly, although the Taliban are a phenomenon to be analysed separately and at that time did not represent an important part of the population, it is worth noting that they were **not allowed to take part in the negotiations** related to establishing the new government and the country’s reconstruction (Baker, 2011, p.211).

The US invasion thus implied a collective trauma for Afghans, stemming from the shocks, anxiety and dehumanisation it engendered, which were also related to the cumulation of such events. The invasion added a layer of violence for a population that had already not been able to catch its breath between consecutive violent events, and this was unacknowledged. Bottom-up dynamics of healing the trauma were only fledging, but the public efforts that could have encouraged them were absent. Despite supposed efforts to include civilian voices into the new government, serious healing efforts from a top-down perspective were purposely avoided.

3. Psychological unconscious mechanisms leading the trauma to be expressed violently:

As for the other case, the occurrence of unconscious psychological mechanisms is hard to determine without psychotherapy *in situ*, so this step aims at getting as close as possible to determining this.

In the case of Afghanistan, establishing whether such psychological mechanisms occurred at the collective level is even harder, precisely because American and more generally Western versions predominate – at least in the sources available for this paper. For instance, much more research was done on American soldiers' PTSD when returning from Afghanistan (e.g. Elbogen et al., 2012; van Voorhees et al., 2012) than on Afghans' PTSD as a result of the US intervention.

Nevertheless, the previous steps demonstrated the depth of Afghans' cumulated collective traumas. Whole families suffered from **PTSD**, which manifests in different ways (Dossa, 2014, p.51). In the private sphere it namely expressed itself through intimate partner violence (Jewkes et al., 2018, p.1). The feelings of **helplessness** mentioned in the previous section are in fact aligned with PTSD, which may involve passive suffering and a sense of loss of control – and when these psychological wounds become unbearable, they may notably lead to the mechanism of appetitive aggression, a violent way of coping with them.

In turn, two other facts come into the picture: that such feelings were not properly addressed at the collective level because of the different interests at play, and that throughout 2002 there was a growing dissatisfaction with reconstruction efforts (Baker, 2011, p.216). Indeed, this discontent mostly occurred in rural areas, where people (a significant part of the Afghan population) least perceived the benefits (Baker, 2011, p.216). Although it is hard to determine how *those* people exactly felt because of the limited resources, the testimonies in Dossa (2014, pp.48,57) speak for the misery of the collectivity. It thus seems likely that the hurting did indeed become **unbearable** at a collective level – maybe not at the scale of the whole nation, but in areas that were heavily affected and had even **less resources to cope** with the consequences.

Additionally, given how the population's suffering was ignored, even denied, both by the US and the new government, it is possible that many traumatic aspects were **forcefully repressed**. Repression does happen naturally and can be a way not to deal with painful emotions – however, the previous section established that if collective healing efforts had been properly put in place, people may have been able to address and process their suffering. It is thus also likely that, because of how the traumas remained unhealed at the collective level, the

extreme **memories and emotions bottled up** for part of the population, leaving them with no choice – at a psychologically unconscious level – but to express them violently.

Lastly, stemming from the different aspects of the trauma, as well as aligned with the large-scale PTSD and the unrecognition of the traumas, it seems that the population in rural areas started perceiving the US and its allies as the **enemy causing their country harm**. Indeed, people in rural areas had already suffered from the invasion and the attacks, and they had not received any help afterwards (RAWA, 2001). When the Taliban began regrouping and calling for **revenge** against the invaders, that message was appealing to many people, who by 2002-2003 started joining the movement or providing support (Baker, 2011, pp.216-217). Furthermore, many local villagers developed their own militant groups along the same lines (Baker, 2011, p.223). The fact that when the US and allies later reinforced their troops and launched the counter-insurgency, violence only escalated, engendering more civilian casualties, thus more anger among the population and more support for the insurgency (Baker, 2011, pp.217-223), seems to reinforce this.

The simple facts that a collective trauma occurred and it was not properly healed increases the likelihood of psychological mechanisms leading to violent ways of dealing with the trauma. In turn, the elements presented here allow to establish that the likelihood they occurred was indeed high. Of course, many people tried to engage in reconstruction efforts with the new government and many showed an inconceivable amount of resilience – namely many women, who kept providing for their families despite mental health issues and poverty (Dossa, 2014). Besides, for other people these psychological mechanisms possibly materialised in the private sphere, notably in the form of violent behaviour against family members. Nevertheless, this section shows that at least the mechanisms of acting out, appetitive aggression, and projection probably happened at a collective level.

4. Outcome – outbreak of armed conflict:

In this case, the identified outcome is the insurgency that began gaining ground from 2003. It is less straightforward than in the previous case since an insurgency does not suddenly break out; it progressively builds by rallying soldiers, weapons, and the support of the population.

In Afghanistan, both the cause and the outcome are more diffuse than in the case of the US with 9/11. The different parties involved in the whole process, as well as the country's history, make the situation very complex. The unhealed collective trauma was certainly not the

only reason for the insurgency; the Taliban as an extremist phenomenon, Islamic fundamentalism in general, the involvement of yet other powers (Dossa, 2014, p.70), the weakness of the central government, and cultural norms related to resisting foreign invasion (Baker, 2011, pp.15-17) must notably be taken into account.

However, it seems highly likely that the collective trauma the US invasion engendered for the Afghan population and the way it was disregarded played a role too. Indeed, although it was the Taliban who launched the insurgency, local villagers also developed their own armed groups, thus complexifying it (Baker, 2011, p.223). Moreover, it was the population who provided the different groups with the support networks any insurgency requires to be successful (Baker, 2011, pp.216-217). Certainly, not all Afghans participated; but in that regard, it is important to remember that the same way ‘collective memory’ is really collective *memories*, the way a community reacts to a collective trauma is not necessarily homogenous.

Conclusion

This work has demonstrated the pertinence of taking into account the dynamics of collective traumas with regards to the outbreak of armed conflict. Through the qualitative within-case analysis of two cases, it showed that the proposed theoretical articulation of elements from three fields – IR/IS, memory studies, and psychoanalysis – is relevant. The ‘cycles of violence’ refined theory based on this articulation indeed helps uncover collective trauma as a factor participating in the outbreak of armed conflict in the two cases studied – the US after 9/11 and Afghanistan after the US invasion.

More precisely, the first part of this work provided an overview of existing IR theories of armed conflict, situating the research within the subfield of IS; it showed that human psychology in general, more specifically the notion of collective trauma, has been little taken into account and suggested that it should. It then reviewed and displayed interesting insights from the fields of memory studies and psychoanalysis with regards to this concept: what a (collective) trauma exactly is, what events may cause one, how it impacts collective narratives and thus collective memory, which collective efforts can help heal it, its repercussions if it is not addressed, and the reasons why in such cases it may lead to violence. The final theoretical section then suggested an articulation and application of these elements to the phenomenon of

armed conflict. A hypothetical refined theory and mechanism of ‘cycles of violence’ emerged from this.

The second, empirical part of this research examined the applicability of this refined theory in the cases of the US after 9/11 and Afghanistan after the US invasion. In the first case, the hypothesised outcome was the invasion of Afghanistan, while in the second case the hypothesised outcome was the insurgency that started in 2003. By using congruence analysis and process-tracing, as well as a diversity of sources and tools, the analysis examined whether the proposed mechanism helped explain the relationship between the cause (a large-scale violent event) and the outcome (the outbreak of armed conflict) in each of the cases.

The analysis showed that the proposed mechanism works in both cases, thus helping to understand why the US invaded Afghanistan and why an insurgency started gaining ground in Afghanistan after the US invasion. Furthermore, it helps to understand how, and why, unhealed collective traumas can be one of the factors generating armed conflict. Each case represents a cycle of violence in itself, and because of this they represent an even broader cycle of violence taken together.

In this work, collective trauma is approached as a *participating* factor in the outbreak of armed conflict, which the analysis of the cases seems to confirm – further research focusing overall on one single case could seek to determine all the factors and their respective importance. However, establishing the concept of collective trauma as a contributing factor to generating armed conflict is promising itself, since collective trauma is, as this work demonstrated, something that can be worked on. Indeed, the consequences of collective trauma can be prevented if it is properly addressed; and if at least one of the factors contributing to the outbreak of a conflict can be removed, that is at least one step closer to avoiding it along with the consequences it implies for people on the ground.

This work represents a very first step towards bringing the concept of collective trauma and its dynamics into the field of IR/IS and theories of armed conflict: much more can be done. Further research should namely test the proposed mechanism in other cases so as to further refine it, explore other traumatic aspects of large-scale violent events, and look into societal differences in terms of coping with a collective trauma (gender differences, city/countryside, etc.). It could also focus on generational trauma – when the violent reaction occurs one or two generations later –, or on how such events impact *perpetrators* and whether the mechanism then unfolds in a similar way. Furthermore, it would be interesting to research the proposed

mechanism in cases of other types of large-scale violence, such as political violence and mass killings.

Generally speaking, different specialisations in psychology could be applicable to violent phenomena studied in IR/IS, so it is worth further exploring that field for a renewed perspective and complementary understanding. This could apply to how *individual* trauma, namely of leaders, may have collective repercussions – for instance, Green (2008) mentions how broken attachments are traumatic and may lead to political violence –, or to conflict from the perspective of social psychology – which notably analyses decision-making, intergroup relations, beliefs about war and systems of values (Larsen, 1993).

Going back to the cases studied here, it would be interesting to reanalyse them from the perspective of more recent years and events, as the reasons behind the outbreak of a conflict are not necessarily the same as those behind its continuation. Similarly, it would be worth looking into long-term developments of the collective traumas examined in this work; namely, recent American perspectives and efforts with regards to 9/11, and the stance of the current Afghan government with regards to the US invasion and previous events. Furthermore, given the sources available for this paper, establishing a more balanced perspective on the US invasion and the conflict in Afghanistan requires further effort. Exploring further ‘non-Western’ cases of collective trauma would also contribute to shedding light on the power dynamics at play.

These suggestions were, unfortunately, beyond the scope of this paper; however, its results pave the way for broader and deeper investigations.

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