

# Collective Trauma and Resilience

Key Concepts in Transforming War-related Identities

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# 1 Introduction

This contribution was inspired by Berghof Handbook Dialogue issue no. 11, “Transforming War-related Identities. Individual and Social Approaches to Healing and Dealing with the Past” (Austin/Fischer 2016). We offer it as an additional perspective on transforming-war related identities in the context of protracted violent conflicts.

We propose that a broader discussion of the terms collective trauma and resilience is needed in the field of conflict transformation, in order to fully grasp the complexities involved in transforming war-related identities. At the same time, we aim at showing that collective traumata constitute specific obstacles for transformation and that a deeper understanding of them will help to sharpen our understanding of what needs to happen in order to be able to transform war-related identities.

The comment is structured as follows: First, we discuss our underlying assumptions on collective trauma, putting forward the key insights from Berghof Handbook Dialogue 11. Second, we introduce working definitions of the concepts of collective trauma and resilience in the context of war-torn societies. The comment concludes with pointers for further research into collective trauma and resilience, which can strengthen the field of conflict transformation.

## 2 Key insights on trauma from the Dialogue & underlying assumptions

The different contributions to “Transforming War-related Identities” highlight many different dimensions and dynamics of individual trauma. They offer rich case studies by looking at transforming war-related identities in Bosnia and Herzegovina, Georgia-Abkhazia, Northern Ireland and South Africa. To a large extent, all these case studies illustrate the relevance of the socio-cultural conditions and context in analysing and understanding the specific dynamics and characteristics of individual trauma.

Yet while the articles refer to and speak of trauma and coping mechanisms on the collective level (see e.g. Hamber 2016, 14), the specific nature of the collective phenomenon remains vague in comparison with individual trauma.

Analytical differences between individual and collective trauma and possible (practical) consequences for practitioners therefore remain still unclear. And while resilience is mentioned as an empowering force for addressing trauma, we believe its implications for transforming war-related identities are not discussed in sufficient depth.

In this context, we would like to put forward the following assumptions on trauma in the context of transforming war-related identities and protracted violent conflicts. Some of them echo the insights from the contributions to Berghof Handbook Dialogue 11, some expand on them.

First, there has been an abundance of literature focusing on individual trauma and psycho-social work addressing the effects of individual trauma such as post-traumatic stress disorder (PTSD). Yet, in our reading of the key literature of the last twenty years (e.g. Hamber/Gallagher 2014) and the actual practice of conflict transformation, the field of conflict transformation hardly has dealt with *collective* trauma strategically – neither in the conflict analysis stages nor in the design and implementation of strategies.

Second, exposure to extreme stress, physical violence and atrocities does not lead *necessarily* to individual or collective trauma: One cannot and should not speak of an automatism or assume a linear cause-effect logic.

Third, the violence and trauma which individuals experience are not happening in a vacuum, but in a very specific socio-political and socio-psychological context. Without having a deep understanding of the underlying specific context of their trauma, there is a danger of pathologising the victims' traumatisation and of undermining their resilience (see also Hamber 2016, 12).

Fourth, we cannot discuss trauma without discussing the other side of the coin, namely resilience. While we still know little about why some individuals show a greater sense of resilience than others, research suggests that structures of strong emotional bonding, family ties and healthy relationships are key for recovery and trauma healing. To date, we know even less about how collective forms of resilience specifically function and how they could be enhanced.

Fifth, there is a great need to link individual and collective processes of healing while dealing with past atrocities (in reference to Bar-On, see Austin/Fischer 2016, ii). In the past, the debates on transitional justice have focused too heavily on the political-legal consequences of mass atrocities and genocide at the expense of the mental health needs and political rights of the victims (Austin/Fischer 2016, iii and Hamber 2016, 23).

Sixth, while cognitive learning or the conscious mind is a crucial factor in addressing and overcoming trauma healing, we argue that the *subconscious* mind is equally important to fully grasp the overall dimensions of trauma, especially how it affects the perception of reality as well as the transgenerational and physical expressions of trauma.

### 3 Collective trauma – a rapprochement

There is hardly a uniform definition of trauma – neither within nor outside the fields of socio-psychology and conflict transformation.<sup>1</sup> Often, it remains unclear or vague if the focus is on individual or on collective trauma. And if the term collective trauma is used, others terms such as interpersonal, intergroup, intergenerational and transgenerational, historic or chosen trauma are often used interchangeably.

Having said that, in the field of conflict transformation, socio-psychologists such as Dan Bar-On and Vamik Volkan paved the way for a better understanding of how and why traumata are historically (and hence collectively) transmitted in the context of mass atrocities and warfare.

Looking at the Holocaust legacy, Bar-On helped us to understand how the first and second generations of victims and perpetrators struggle to deal with the war legacy and trauma in a rather similar fashion: through denial and silencing of the “indescribable” and “undiscussable”. Bar-On was one of the first to develop the idea of historically transmitted or intergenerational trauma – but did not speak of collective trauma as such. To varying degrees, all research and work with the families of the perpetrators and the survivors/victims of the Holocaust stressed the great need for healing and relationship-building on individual and collective levels (see e.g. Bar-On 1999, 2001).

Volkan did not speak of “collective trauma” either but coined the term of “chosen trauma” (see Volkan 1997, 1998, 2004). According to Volkan, chosen trauma “...refers to the mental representation of an event that has caused a large group to face drastic losses, feel helpless and victimized by another group, and share a humiliating injury” (Volkan 1998, 4).

To underline and illustrate the dynamics and characteristics of his understanding of a “chosen trauma”, Volkan refers to an “invisible spider’s web” (Volkan 2004, 2).

<sup>1</sup> For one of the few exceptions attempting to clarify the concept of collective trauma see Kühner (2002).

Some critics have argued that the term “*chosen* trauma” is highly problematic as large identity groups do not *choose* to be victimised or to suffer humiliation. And while Volkan openly engages with the critique (Volkan 2004), he underlines that large groups, in his opinion, do “‘*choose*’ to mythologize and psychologize the mental representation of the event” (Volkan 2004, 3 (emphasis in the original)). Brunner (2012) criticises Volkan’s concept of “chosen trauma” for being a deterministic one, as it suggests that in deep-rooted violent conflicts, trauma and victimhood become the key identity markers for large groups and communities. As a result, and in that logic, Volkan would portray counter-violence and revenge by respective groups as legitimate strategies. According to Brunner, Volkan’s concept falls short of capturing the complex relationship between the traumatic event itself, the individual traumatic experiences and the group or socio-psychological trauma processing (see Brunner 2012, 3).

While we agree with Volkan that political misuse of trauma by leaders and collective groups can be an important characteristic of collective trauma, we would like to stress that – dependent on the socio-political context and the specific exposure to violence – trauma partly or largely functions subconsciously and is not necessarily based on a conscious and explicit process of mythologising and psychologising. In our understanding and against the background of our experience working in conflict settings marked by past violence, collective trauma is both, a subconscious and a conscious process.

David Becker, one of the contributors to Berghof Handbook Dialogue 11, underlines in his understanding of individual trauma (2006, in reference to Keilson (e.g. 2005)) the concept of sequential traumatisation: that individual trauma and suffering have to be seen in connection with the social processes and political reality.

An illustrative example is the trauma which indigenous people in Australia went through: Research shows that the system of child removal led to a vicious circle, as traumatised parents were coping through e.g. drug abuse, which again led the authorities to remove their children from the family (see Quinn 2007). The indigenous people suffered through a repeated accumulation of emotional and psychological wounding, within a generation and beyond.

We argue that the same longitudinal understanding is necessary for collective trauma: Collectively experienced extreme situations have unique social and psychological trajectories, and their consequences may be aligned with collective responses and interpretations: hence, the traumatisation of (large) groups of individuals should not *per se* be considered a collective trauma. We suggest only to speak of collective trauma if the trauma of many individuals can be framed as a “collective identity marker”. A group of raped women suffering from severe depression and PTSD may, for example, use their traumatic experiences in public discourses and as a self-image; thereby it functions as a key identity marker.

In sum, we understand collective trauma as a not yet completely accomplished process of learning how to deal with and integrate extreme levels of stress, impacting on the social dynamics, processes, structures and functioning of a collective or collectives.<sup>2</sup> A collective here is defined as a family, an identity group or as a society (on a national, sub-national or trans-national level).

This learning and integration process of collective trauma often is hampered by a combination of four collective identity markers, which we define in the following:

- (1) collective narratives and memories of loss and despair;
- (2) collective victimhood;
- (3) collective angst; and
- (4) exclusive values, norms and mental models.

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<sup>2</sup> See Dellucci (2012) for a corresponding definition of individual trauma (oral communication and power-point presentation/course material).

While some of these factors have been discussed in the effort to understand the protracted nature of violent conflicts (see e.g. Azar 1990; Kelman 1973; Kriesberg et al. 1989; Volkan 1997 and 2004), the lens of collective trauma has not been applied thoroughly enough in conflict transformation. This lens shows us that these identity markers inform different stages of protracted violent conflict to varying degrees and, most importantly, continue to characterise the post-settlement conflict phase when the violent conflict is officially over. Therefore, in our analysis, these identity makers overwhelmingly influence the socio-psychological context for the social and political collective and constitute crucial socio-psychological barriers for transforming war-related identities and successful conflict transformation (see also Bar-Tal et al. 2015).

The four markers can be further explored (see also Bar-Tal 2013):

- ≡ *A collective narrative and memory of loss and despair* is widely shared by many if not all group members. This narrative may be invented or correspond to the real trauma(tisation) of the group members, or some mix of both. The members of this group continuously refer to “the past” and topics of “atonement and guilt” of “the other”. At the same time, there is a silencing of shame, guilt and responsibility on the side of one’s own identity group: the own narrative becomes highly selective and prejudiced, presenting the own history in an exclusively positive light. An example is the dominant narrative after World War I (in policy and media circles), which portrayed the Treaty of Versailles and reparations that Germany had to pay as a humiliating punishment. Hitler mobilised the masses among other things by appealing to and addressing this collective narrative of loss among many Germans.
- ≡ *Collective victimhood* becomes the point of collective reference of a particular group, sustained by “narratives of loss and despair”. The narratives of collective victimhood are used to explain and justify the own wrongdoings, acts of revenge in the form of extended violence and the sought-after compensation for the own suffering and loss from the alleged perpetrators. In protracted, violent conflicts, a competition for greater victimhood among collective (ethnic, religious and/or political) groups can often be observed, making it more difficult to de-escalate and transform the conflict. An illustrative example here is the “competition for victimhood” among Jewish Israelis as the survivors of the Shoa and the Palestinians as survivors of the Nakba.
- ≡ Due to “*collective angst*”, a group finds it difficult to trust other groups and does not believe in a positive vision or a brighter future. Archaic motives are evoked, for example, “...we need to defend ourselves against a tyrannical world”. Conspiracy theories are often propagated by greater numbers of identity groups and/or the wider social public. “Collective angst” among the constituencies of the different conflict parties feeds into deep mistrust and the dismissal of positive visions of the future. Illustrative examples are the post 9/11 rhetoric of then US President George W. Bush initiating a “war on terror” along with the presentation of several Muslim countries as the “axis of evil”, and the latest travel ban on Muslims (from selected Muslim countries) by the current US President Donald Trump.
- ≡ There are *exclusive values, norms and mental models* that are characterised by a rigidity of thinking, beliefs in “one” truth, “black-white thinking”, scape-goating, stereotypes, “tunnel vision” and transferences on “the other”. Mental models such as “you cannot trust anyone (anymore)”, “do only X, as it is normal, but not Y”, “we are *the* people because of past atrocities” dominate social norms, public discourses, media coverage and education. Most of those mental models implicitly give often much needed and longed-for moral or social orientation. At the same time, as these mental models are perceived as “normality”, it becomes extremely difficult to question behaviours and ideologies. Conflict parties often use “black-white thinking”, scape-goating and stereotypes to legitimise their own behaviour and ideologies and to boost their war or violence propaganda. Exclusive mental models often form a breeding ground for conspiracy theories among the wider population, conflict parties and stakeholders, further enhancing “collective angst” and other negative emotions among the general

population. Illustrative examples are speeches given by US President Bush post 9/11 and President Trump in 2016-2017, which were full of stereotyping about Muslims.<sup>3</sup>

While all four characteristics influence or mutually reinforce each other, not all four features have to be necessarily in place at a given time to speak of a collective trauma.

### **Transgenerational trauma**

Transgenerational trauma is understood as a particular form of collective trauma: traumata (including their consequences) transmitted from one generation to the next.<sup>4</sup> One characteristic feature of historically transmitted trauma is that the body-related memories and the knowledge of what happened in the past are disconnected from the emotions of anger, fear and/or guilt and responsibility. Both can be passed down through the generations independently of each other.

While not all collective traumata lead necessarily to transgenerational trauma, all forms of transgenerational trauma are an expression of collective trauma, as not individuals but larger groups of individuals or communities are affected over generations (to be further explained below).

In the context of protracted violent conflicts, transgenerational trauma works mainly on three levels:

Firstly, individuals may be exposed to traumatic experiences, which may lead to the transgenerational transmitting of trauma in larger identity groups or within families. Insufficient coping mechanisms with highly stressful and traumatic experiences become a (difficult) psychological legacy. The psychological consequences of and for sexually abused family or society members are one example: on the one hand, the sexually abused man or woman may continue to sexually abuse others or attract sexually abusive or abused partners. On the other hand, family members, e.g. daughters of the raped Bosnian women, may experience flashbacks and may suffer from a severe loss of self-worth and anxiety while not having been raped themselves. While their mothers may silence the past, their own pain and deep shame, the daughters become the “containers” of the past and hence of the issues of loss, fear and shame of the mother.

Secondly, a “collective memory and narrative of victimhood” is transmitted through mental models from one generation to the next: this occurs on any of the three collective levels introduced and defined above (see page 4). An illustrative example on the societal level can be observed in the education system, politics and public discourses in Israel which refer to and are based on these “collective narratives of victimhood” (see Caplan 2012).<sup>5</sup> A personal individual trauma may further re-inforce a personal belief in victimhood and in turn re-inforce the “collective memory and narrative of victimhood”.

Thirdly, individuals of the second or third generation may not necessarily have experienced trauma, and yet still subscribe to the overall “collective memory of victimhood, loss and despair”. Illustrative examples are the third or fourth generations of survivors of the Armenian genocide or members of the Jewish or the Palestinian diaspora: while they have not been exposed to the atrocities in the past or present and may have never experienced personally any form of individual trauma, they may subscribe to and hold on to a “collective memory and narrative of victimhood” as key identity markers.

<sup>3</sup> Concerning the latter, see for example [www.huffingtonpost.com/entry/donald-trump-racist-examples\\_us\\_56d47177e4b03260bf777e83](http://www.huffingtonpost.com/entry/donald-trump-racist-examples_us_56d47177e4b03260bf777e83).

<sup>4</sup> Some extensive and ongoing research on (historically) transmitted or transgenerational trauma has been conducted in Germany, Australia and Canada, and among diaspora communities. This psychological, trauma and historical research focused on individual members of different generations in families and communities – in Australia and Canada of the indigenous communities (see e.g. Bombay et al. 2009) and in Germany and Israel of victims/survivors and perpetrators of the Holocaust and Nazi regime (see Bar-On 1995 and Reddemann 2015).

<sup>5</sup> See also for example [www.haaretz.com/opinion/1.604998](http://www.haaretz.com/opinion/1.604998).

## 4 Resilience – a rapprochement

Similar to the concept of trauma, there is no easily agreed definition of resilience in the fields of trauma research, social psychology or conflict transformation.

We define resilience as the individual and collective given and/or (newly) gained capacities which facilitate and support a constructive learning experience. Resilience is also considered a form of post-traumatic learning and personal development – the idea being that overcoming an individual trauma can make one stronger if one has access to (internal and external, not necessarily material) resources, personality, attitude and know-how.<sup>6</sup>

In light of the current research on trauma and resilience, three enabling factors or dynamics for resilience in the context of transforming war-related identities stand out:

Firstly, most trauma researchers agree on the importance and relevance of *strong emotional attachments and bonds*, that is a secure psychological context: several studies in trauma research have underlined how secure emotional attachment contributes to the enhancement of emotional resilience (see e.g. van Jzendoorn et al. 2003).

Secondly, Brunner underlines that irrespective of the existence or loss of individual bonds and emotional attachments, *a shared ideology* may also inform and secure the psychological structure (see Brunner 2012, 202): soldiers and civilians in a totalitarian state, for example, are more resistant and immune to trauma than in socio-psychological contexts without a shared ideology (see *ibid.*, 202-203).<sup>7</sup>

Thirdly, the *actual opportunity for healing* and learning how to process and integrate the trauma experiences in the individual biographies during the so-called “post-trauma” phase may be more relevant and powerful than the trauma events themselves. To integrate here means to learn what has not yet been learned, to mourn for what has not happened and to let go of what will not be possible or feasible anymore. A case in point is Hans Keilson’s research on Jewish orphans and their trauma and survival of the Holocaust regime: all children emotionally suffered and some of them experienced the post-war phase as equally brutal as the actual phase of the Holocaust. Yet Keilson (2005) showed in this research that the post-war opportunity to continue living in foster families as opposed to orphanages was key to the children’s personal healing and for processing and integrating their traumatic experiences of personal and collective loss of family members, food and shelter, of hunger, fear and death threats. A secure and emotional home in families had a greater impact on the prospect of healing than the actual severity of incidences experienced during the Holocaust. The relevance of emotional bonding combined with forms of solidarity and emotional support also has been highlighted by more recent research on traumatised refugees (Frick-Baer 2013; Baer/Frick-Baer 2016).

Figure 1 below sums up the core of our argument on transforming war-related identities by focusing on collective trauma and resilience as post-violence learning processes.

<sup>6</sup> With this definition, we establish a positive connotation of resilience – in contrast to understanding resilience as a capacity to regain the original state, which would oppose any learning process.

<sup>7</sup> This, in turn, raises the broader question if resilience is always geared towards progressive human development. To which extent can and should we speak of empowering and disempowering forms of resilience? These and other questions appear to us as important areas for research and debate.

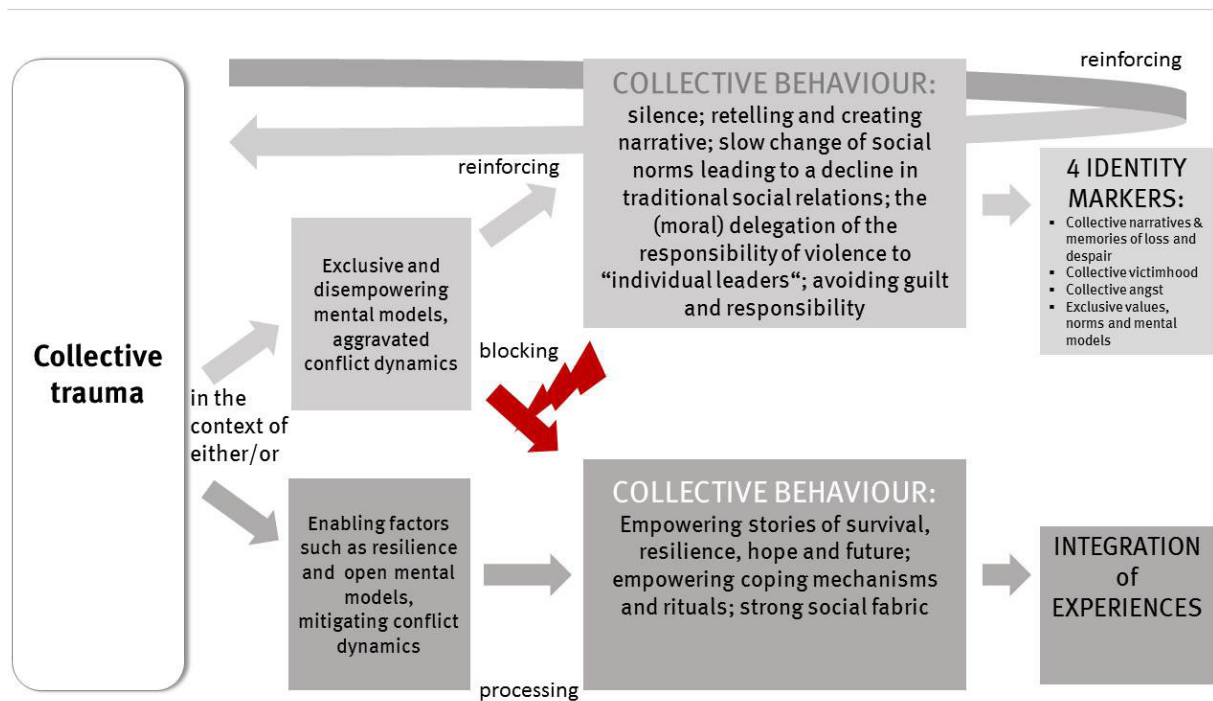


Figure 1: A model of collective trauma as a learning process.

## 5 Conclusion

In our comment, we have discussed how the concepts of collective trauma and resilience may offer a valuable additional perspective on transforming war-related identities.

By sharpening the collective trauma lens, we would like to steer further structured reflection in the direction of socio-psychological, subconscious and emotive dynamics within collectives in the context of deep-rooted violent conflicts. A particular focus should be on the enabling and limiting factors that enhance or hinder resilience and on constructive coping mechanisms on an individual and a collective level. Analysing the local culture and context-specific coping and resilience mechanisms must provide the basis for tailor-made interventions. It also brings into the fore important cultural differences in expressing and dealing with trauma. As has often been pointed out, for example, in highly collectively-oriented cultures, the very idea of taking the space and room to talk about one's own personal suffering, pain and conflicts within the collective frame of identity might seem bizarre and out of place.

At the same time, these cultures may offer greater protection for the individual and his/her trauma-specific sufferings and mental health issues. Depending on the role of religion or spirituality, healing processes are influenced by respective world views, e.g. Buddhism in Cambodia or shamanism in various cultures that favour collective rituals. A collective trauma lens helps to develop a more comprehensive understanding of identity- and roles-formation and allows for identifying particularly vulnerable groups. By better grasping the complexity of identity-formation, the field of conflict transformation may offer a richer understanding of human agency and multiple identity trajectories during and after violent conflicts.

As the subconscious level of trauma is considered to be as important as the conscious level, both in terms of the actual traumatisation and the trauma healing processes, further research into the nexus between the conscious and the subconscious factors in transforming war-related identities is needed.



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