


## 9/11 TRAUMA, MENTAL HEALTH CONSEQUENCES, TIME AND COGNITION BASED ON NARRATIONS

### TRAUMA DO 11 DE SETEMBRO, CONSEQUÊNCIAS PARA A SAÚDE MENTAL, TEMPO E COGNIÇÃO COM BASE EM NARRAÇÕES

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**Resumo.** Uma compreensão hermenêutica do trauma cultural, interpretando-o como um processo interminável de intervenção e de construção de significado, infere que as próximas gerações continuarão a reconhecer as queixas do passado como importantes. As gerações seguintes, apesar de não terem sido contemporâneas dos acontecimentos em questão, demoram a reconhecer, expressar e conceder as feridas do passado por meio de algo que ilumina a sua identidade como grupo no presente. Neste artigo, as ramificações do Trauma para a saúde mental, ao discutir o incidente de 11 de setembro, estão sendo discutidas. Ser perturbado e onipresente, ou seja, indelével, são as características essenciais para levar um trauma a ser trauma tanto no nível psicológico quanto no cultural, uma vez que os efeitos de longo prazo do trauma “nas memórias de um indivíduo se assemelham aos efeitos duradouros de trauma nacional na consciência coletiva. Ignorar ou ignorar a experiência traumática não é uma opção razoável.

**Palavras-chave:** Trauma do 11 de setembro, saúde mental, cognição, narrações

**Abstract.** A hermeneutical understanding of cultural trauma interpreting it as an unending process of intervention and meaning-making infers that next generations will keep acknowledging grievances of the past as momentous. Succeeding generations, despite the fact that they were not contemporary to the events in question, linger to recognize, express, and concede the wounds of the past by way of something that enlightens their identity as a group in the present. In this paper the mental health ramifications of Trauma by discussing the 9/11 incident are being discussed. Being disturbing and omnipresent, that is to say indelible, are the pivotal features to lead a trauma to be trauma both on the psychological and the cultural levels since the long-term effects of trauma “in the memories of an individual resemble the enduring effects of national trauma in collective consciousness. Dismissing or ignoring the traumatic experience is not a reasonable option.

**Keywords:** 9/11 Trauma, Mental Health, Cognition, Narrations

## INTRODUCTION

Through retelling the common byword in the majority of literary productions after 9/11, the 9/11 literary works while reexamined represent how reality itself is under attack and one cannot trust the reliability of narrations. Gray's idea on 9/11 language confirms this narrative unreliability while he says, “[i]f there was one thing writers agreed about in response to 9/11, it was the failure of language; the terrorist attacks made the tools of their trade seem absurd” (Jaff & Al-Jumaili 2020). The author opposes reproducing the rhetoric of inexpressible trauma that conquers in most such readings and from lingering on the recurring absence of meaning that leads to the exceptional nature of the attack. Instead, he inspects 9/11 in the scale of the fall, a “recurrent tendency in American writing...to identify crisis as a descent from innocence to experience” (Suitt 2023), inaugurates it in the context of the national narrative and creates a hot debate about American literature since 9/11 as literature of crisis which amalgamates the strange with the familiar.

A socio-psycho-cultural study of 9/11 attack and its trauma, mirrored in the literary works of post-9/11 American writers, reveals the manipulated rubric of cognition and cultural identity and how the unreliable narrators of these narrative fictions are unwitting agents of cognitive dissonance through their socioculturally-made trauma led by the cognitive manipulation of the event of 9/11. This paper is to study the narration of the unreliable narrators represented in a selected novel by post 9/11 American writer to see whether people's cognitions, trauma, and terror in the post-9/11 era accord with what happened in 2001 or their cognitions are socio-culturally manipulated. The way the narrators and characters in the selected novel deal with the 9/11 attack represents the cleft Festinger refers to as the cognitive dissonance as an unpleasant condition led by the cognition of inconsistencies between beliefs, perspectives, or actions (Festinger & Carlsmith 1959). Individuals inherently look for consistency and are therefore provoked to reduce the dissonance between what happened and what is fabricated. A long history of research suggests that cognitive dissonance theory predicts a wide range of psychological phenomena. Whether the narrators in the novels as history tellers of the era have narrated the details of the event of 9/11 reliably or unreliably is to be socioculturally studied through the light of Festinger's theory of 'cognitive dissonance' and Elaine

Auyoung's idea on 'huge cognitive leaps'. As cultural trauma is reliant on a process, an ongoing and often-disrupted challenge to constitute meaning, this meaning creation process would not be achieved without cognitive manipulation through unreliable narrators. That is the case to lead the mind to question how come these manipulations can be justified then. How do cognitive dissonance and cognitive leap in parallel with the prevailing cognition of the social events affect the unreliable narrators' manipulations? As Smelser defines, "the establishment of a collectivity's responses to a trauma is a matter of bitter contestation among groups, sometimes over long periods of time and often without definitive settlement" (Kredlow et al. 2022). Therefore, turning to Smelser's assertions, which regard trauma creation as a process involving a "continuing counterpoint of interested and opposing voices" ("Psychological" 50), the present paper contends that despite the media's hasty and unsubstantiated declarations that observed the attacks as cultural trauma, 9/11 fiction, in terms of its antagonistic role, confirms even as though it redefines its locus as cultural trauma. Through applying what Smelser and Alexander state regarding cognitive manipulation and its sociocultural effects, this study is to suggest that 9/11 narrations can be interpreted as evidence for the event's ongoing status as cultural trauma.

On the one hand this argument puts under question the simplistic perception of these events as cultural trauma, On the other hand it also challenges, (check the sentence) drawing attention to Alexander and Smelser's concentration on the on-going accumulation of engaged and opposing voices, which is considered a simplistic understanding of cultural trauma theory. Alexander et al. seek the notion of cultural trauma extensively and across multiple milieus precisely drawing attention to the meaning-creation process that pursues disastrous events, not the inherent traumatic features of the events themselves but the exploited and manipulated cognition and information pertinent to this event. Jeffrey C. Alexander contends that the establishment of cultural trauma is based on a claim making process; that is to say, mediator groups, or the so called unreliable narrators, are the ones who play a pivotal role in truth fabrications about cultural traumas. The Holocaust is an example of such cultural trauma affected by unreliable narrations as Giesen considers it "the traumatic reference for German national identity after 1945" (Giesen 2004; Abraham et al. 2021).

## METHOD

After September 11, 2001, New Yorkers along with the entire nation needed to undergo the so-called seven phases of sorrow together. Later that day making art was considered an initiative eighth stage, either as movies like *United 93* or *World Trade Center*, or literature like Jonathan Safran Foer's *Extremely Loud and Incredibly Close*. Hayden White refers to the fundamental traumatic occasions of the twentieth century—two world wars, nuclear explosions and the Holocaust—as having been unmanageable to have materialized in the centuries before and as absolute inconceivable (Kredlow et al. 2022). In accordance with what has been said September 11, 2001, started off the twenty-first century in the equivalent mode as the century before it; with large-scale belligerence and violent devastation.

The technological expansions which empowered greater and instantaneous annihilation of people and property on a worldwide scale put forward the impracticality of pre-twentieth century generations to envision the terrors of the world wars. The implausible, appalling nature of 9/11, conversely, did not arise from the use of modernized artilleries but from how "a score or so of Stanley knives" allowed terrorists to seize airplanes as though they were "missiles, each of them primed and distance and a modern way of transportation".

Many theoretical standpoints on trauma ruminate traumatic memories as infectious, disturbing, long-lasting, and ineffaceable. Through these outlooks Trauma is designated as the "traces left on the psyche" (Fassin and Rechtman 2009); by way of an "alien . . . smashing through whatever barriers your mind has set up as a line of defense" (Erikson 1976); like a penetrating or rupture of a boundary "seared directly into the psyche, almost like a piece of shrapnel" (Luckhurst 2008); as a reaction to events so devastatingly penetrating that they weaken "normal emotional or cognitive response bringing lasting psychological disruption"; as a recollection that an individual cannot "integrate into one's own experience, and as a catastrophic knowledge that one cannot communicate to others" (Caruth 1996); and also as invasive memories that are immovable in the psyche and not "altered by the passage of time, or the intervention of subsequent experience" (van der Kolk and van der Hart 2003).

The theory of cognitive dissonance (Cooper and Fazio 2007) made a substantial distinction in the history of social psychology. It confronted the established supremacy of reinforcement theory (Aronson 1992). In the mid-1950s, the reinforcement theory was prevailing in the social psychology study.

Reinforcement theorists expounded that a reliable source would be more convincing because it was more satisfying. Through the progress of Festinger's Cognitive Dissonance theory and its classic experimentation (Aronson 1992), an innovative period was released for cognitively-oriented social psychologists. Many scholars departed from reward-reinforcement based enlightenments and motivated to cognitively focused justifications, engendered from cognitive dissonance theory. It stimulated investigators to relate this theory to an extensive arrangement of topics such as approaches toward smoking, preservation of water and energy, etc. (Aronson 1992; Suitt 2023). It correspondingly stimulated enquiry in a variety of disciplines such as economics, law, philosophy and political science.

Nevertheless in the face of its equivocal practice in today's colloquial speech, the reading of trauma has enlightened our outlooks of victimhood alongside with the way post-traumatic suffering needs to be identified, treated, and compensated. However it is challenging to implement a linear line of attack to track the progress of trauma studies, since the definitional development of trauma "is fraught with complexities" (McNally 78). Notwithstanding the fact that there exists disputes within the field, a discrete hypothetical model of psychological trauma wins out: trauma is mostly assumed as a weakened cognitive response to a predominantly overpowering or disturbing event, which often turns up in the system of recollections, nightmares, dissociative indications, mental disorders, hallucinations, and obsession. This vision submits that the occurrence goes into the mind unpredictably and with great potency, and remains stuck in mind more or less like a part of shrapnel. As the event is so extraneous, unanticipated, and appalling, the mind is incapable of processing it as it should be and memories of the experience converted to appear unrepresentable and unspeakable. In preference to cataloging the event generally into the individual's consciousness, the victim is left with invasive recurrences of the past often in the practice of dreams and flashbacks. Consistent with this viewpoint, trauma dislocates language; thus, the only valuable reaction is to refabricate or abreact the event over and done with the narrative recall, what Freud would call "the talking cure". Following what Balaev illuminates, "trauma inherently produces a temporal gap and a pathologically fragmented self-works from a Freudian perspective of the mind that imagines normal external stimuli enter the brain in one fashion, but traumatic stimuli enter another region of the brain in a different fashion" (Cardenas, 2023; Najafi, & Nasiri, 2019). A traumatic experience consequently obstructs usual cognitive processing; the victim is powerless to chronicle the experience routinely into his or her consciousness, and the event converts frozen somewhere in mind eventually devastating or terminating the individuality of the victim.

Most intellectuals settle that this dominant model of trauma is traced in the work of Freud, J.M. Charcot, Josef Breuer, and Pierre Janet. Despite the fact that traumatizing events and traumatized victims indisputably occurred prior to this, thoughtful study of trauma as a psychological conception inaugurated with the effort of these physicians in the course of the late 1800s and early 1900s. But the attentiveness concerning trauma did not happen unintendedly for Freud and his colleagues; indeed the rising number of industrial and railway mishaps and the weakened cognitive response to these misfortunes turned out to be the promoter through which Freud and others brought into being their clinical study. The case is illuminated through the words of E. Ann Kaplan as she asserts "[t]he phenomena of trauma . . . that interested clinicians did not arise in a vacuum. The phenomena were closely linked to modernity, especially to the industrial revolution and its dangerous new machines" (25). The institution of the railway actually stemmed in countless life-threatening, dreadful accidents, often piloting to excessive physical and mental grievance for survivors. Freud chiefly concentrated on the victims of such accidents, besides other psychoanalytical patients exposing analogous symptoms. By the service of these case studies, Freud and others initiated to speculate about theories of "nervous shock."

Linguistically pondered the word "trauma" did not always signify psychological deficiency; it initially denoted a physical wound, stemmed from the Greek term implying "wound". Evidently, the word has not misplaced all of its original connotations as it is being used by the medical community to signify severe physical injury. However in large part attributable to the study of Freud and others in the late 1800s, the term trauma predominantly developed as a psychological term designating a victim's disturbed mental state as a reflection to an event so penetrating and inconceivable that it devastates and subdues normal cognitive functioning. Having been tracked its theoretical origins in Freud and his colleagues at the beginning of the twentieth century, trauma is often regarded as a modern concept associated with innumerable industrial accidents and wartime complexes that arose to befall with an increased rate of recurrence.

In their preliminary designation of traumatic neuroses, Freud and Breuer endeavored to define trauma as an extraneous figure "which long after its entry must continue to be regarded as an agent that is still at work" (6). Well ahead, in *Beyond the Pleasure Principle* (1920), Freud develops this notion more effusively,

proposing that the human mind comprises a “protective shield against stimuli” (30). Traumatic neurosis is an upshot of an all-embracing rupture of this defensive armor or “a breach in an otherwise efficacious barrier against stimuli. Such an event as an external trauma is bound to provoke a disturbance on a large scale in the functioning of the organism’s energy and to set in motion every possible defensive measure” (Beyond 33). Accordingly, a Freudian standpoint realizes traumatizing experiences as intrusive and contagious, as infections of the mind housed directly into the subconscious. Through his examination on traumatic neurosis, Freud established the notion of the “talking cure”, which explains that for the intention of eradicating the destructive pathological effects of a past life-altering experience, the event must be “abreacted” or lived through again over psychotherapy and hypnosis: “The injured person’s reaction to the trauma only exercises a completely ‘cathartic’ effect if it is an adequate reaction. . . . But language serves as a substitution for action; by its help, an affect can be ‘abreacted’” (Freud and Breuer 8). Then these two scholars, Freud and Breuer, settle: “[i]t may therefore be said that the ideas which have become pathological have persisted with such freshness and affective strength because they have been denied the normal wearing-away processes by means of abreaction and reproduction in states of uninhibited association” (11). If the reminiscence of an devastating and agonizing experience is repressed and refuted, often subconsciously as a contrivance of defense (deep-rooted in what Freud far ahead names the pleasure principle – i.e. the avoidance of pain), remembrances of the event drive themselves to the surface pathologically; these recollections manifest as innumerable devastating symptoms such as nightmares, seizure, hallucinations etc. A patient can undergo some recovery of these excruciating memories by re-experiencing and reliving the incident by hypnosis and free memory, in the long run consenting the patient to develop their angle over the memory, supremely stumbling the occurrence of pathological symptoms.

Through these interpretations, Freud established the concept of “compulsion repetition,” which, Freud underscores, befalls during psychotherapy: the notion that since the patient is necessarily incapable of recollecting her entire experience, she is forced to replicate “the repressed material as a contemporary experience instead of, as the physician would prefer to see, remembering it as something belonging to the past” (Beyond 18-19). At this juncture Freud puts pressures on the unforgettable constituent of trauma and how it penetrates one’s mind with great dynamism, residues as a foreign body, and infects one’s cognitive manners.

Many theoretical standpoints on trauma ruminate traumatic memories as infectious, disturbing, long-lasting, and ineffaceable. Through these outlooks Trauma is designated as the “traces left on the psyche” (Fassin and Rechtman 2); by way of an “alien . . . smashing through whatever barriers your mind has set up as a line of defense” (Erikson, “Notes” 183); like a penetrating or rupture of a boundary “seared directly into the psyche, almost like a piece of shrapnel” (Luckhurst 3-4); as a reaction to events so devastatingly penetrating that they weaken “normal emotional or cognitive response bringing lasting psychological disruption” ( nabood toy references Vickroy ix); as a recollection that an individual cannot “integrate into one’s own experience, and as a catastrophic knowledge that one cannot communicate to others” (Caruth and Keenan 256); and also as invasive memories that are immovable in the psyche and not “altered by the passage of time, or the intervention of subsequent experience” (van der Kolk and van der Hart 172). nabood toy references

Trauma and Recovery: The Aftermath of Violence – From Domestic Abuse to Political Terror (1992) as Judith Herman’s all-encompassing and leading work on trauma, summarizes a continuum of traumatic disorders stretching from a single overwhelming event to the effects of extensive and constant exploitation, and pinpoints common configurations in both the symptoms and the retrievals of traumatic disorders. Through this work, Herman defines trauma in reasonably unassuming terms as “an affliction of the powerless,” so arousing a sense of both grievance and victimhood (33). Herman categorizes the primary predicament of trauma by mentioning that the “ordinary response to atrocities is to banish them from our consciousness,” since they are meant to be unspeakable (1). Warning signs of trauma in a survivor, such as evocations, nightmares, multiple personality disorders, dissociative personality disorders, and indiscreet memories concerning the event, are indication of the overwhelming influence of the consequences of the event(s) upon the human psyche because as Herman pinpoints an individual undergoing trauma becomes immobilized to its control which is due to existing a dominant dialectic surrounded by a victim of psychological trauma: “the conflict between the will to deny horrible events and the will to proclaim them aloud” (1). It is this dialectic and interaction, the “unspeakable” demonstration of trauma joined with the often-incontrollable necessity to re-experience the event, which in due course creates a kind of mental paralysis in victims; individuals who involve in such events, either in a straight line as a victim or incidentally as a witness, often unveil “complicated, sometimes uncanny alterations of consciousness”. Victims consider

it is challenging to “endure to be fully conscious and calm, to perceive more than a few remains of the picture at one time, to recollect all the pieces, and to fit them self-possessed”, however, they cannot overlook or expel the experience entirely (Herman 2). While they might intend to express themselves concerning the experience, they often grieve from profound psychological impairment hampering them from judging the right language or even the capability to interconnect cohesively. Pivotal to Herman’s study is her assertion on the fundamental stages of recovery for the trauma victim, that “recalling and conveying the truth about dreadful events are rudiments both for the renewal of the social order and for the reconciling of individual victims” (1). Thus, the individual healing process of a trauma target, which for Herman involves restructuring the trauma story, and reestablishing the “connection between survivors and their community. . . . challenges us to reconnect the fragments [and] to reconstruct history. . . .” (3).

The American Psychological Association (APA), the leading technical and certified psychological organization in North America, outlines the concept of trauma in 2013 as:

any disturbing experience that results in significant fear, helplessness, dissociation, confusion, or other disruptive feelings intense enough to have a long- lasting negative impact on a person’s attitudes, behavior, and other aspects of functioning. Traumatic events include those caused by human behavior (e.g. rape, toxic accidents) as well as by nature (e.g., earthquakes) and often challenge an individual’s view of the world as a just, safe, and predictable place. (597)

Similarly, in the DSM-IV-TR printed in 2000, trauma is well-defined as:

a direct personal experience that involves actual or threatened death or serious injury, or other threat to one’s physical integrity; or an event that involves death, injury, or a threat to the physical integrity of another person; or learning about witnessing unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate (Criterion A1). The person’s response to the event must involve intense fear, helplessness, or horror. (463)

Victims of trauma are intended to re-experience the upsetting event constantly, not in real life, but through a number of meddling thoughts, memories, dreams, and images.

To recapitulate, trauma is, hence, mostly assumed as an impaired passionate response to an appalling event; this reaction is so irresistible that it paralyzes normal cognitive functioning of the mind. Memories of the event are unforgettable, and the mind becomes obsessed on memories of the event, for all intents and purposes reliving the experience over and over again through recollections, nightmares, fantasies etc., which lead us to the work of Cathy Caruth, who is often distinguished as the most prominent scholar working on trauma but outside the field of psychology. The pivotal aspect of her standpoint is the unrepresentable eminence of trauma, that “it resists simple comprehension” (Unclaimed 6). Caruth utters trauma holds an inconsistency or “*aporia*” that the most undeviating beholding of a violent occurrence may befall as an “absolute inability to know it; that immediacy, paradoxically, may take the form of belatedness” (Unclaimed 91-92). Caruth keeps illuminating that, the repetitions of the traumatic event — which remain unavailable to consciousness but intrude repeatedly on sight — thus suggest a larger relation to the event that extends beyond what can simply be seen or what can be known, and is inextricably tied up with the belatedness and incomprehensibility that remain at the heart of this repetitive seeing (Unclaimed 92).

In other confrontations, despite the fact that an individual might be present at the time of the threatening event, the person is impotent to encounter or process what he or she observes; the psyche for that reason is incompetent to embody the event since the mind does not suitably encrypt the event in the first place. It is only after that, as a deferred experience, that remains of the event become accessible for the victim in the form of recollections and nightmares. For Caruth, then, there is a “peculiar, temporal structure” or “belatedness” to trauma, “as the event is not felt as it happens, it is effusively manifest only in association with another place, and in another time” (Trauma 7). Trauma is thus never understood openly but merely after a period of dormancy, corresponding to Freud’s notion of *Nachträglichkeit*, the German term for deferred action or afterwardsness. Having questioned “[i]s the trauma the encounter with death, or the ongoing experience of having survived it?” (7), Caruth responds by proposing that trauma is both in cooperation, which is the vacillation between a crisis of death and the associative crisis of life “between the story of the unbearable nature of an event and the story of the unbearable nature of its survival” (Unclaimed 7). Trauma consequently is the practice of an overwhelming occurrence only after the event has befallen as flashbacks, bad dream, and other experiences of cognitive impairment and recurrence.

The fundamental core of Caruth’s theories is initiated by the earlier work of Janet in the early 1900s. Janet submitted that there are two kinds of memory: narrative memory, through which a patient is competent to adapt expected appropriate (i.e. “normal”) experiences into healthy, narrative remembrances; and traumatic memory, through which a patient is incompetent to aptly assimilate the event into narrative

memory, owing to the event's appalling, often violent, features. The point is that, traumatic memory "unconsciously repeats the past," whereas narrative memory "narrates the past as the past" (Leys 105). Janet completed that acquainted and anticipated life events are effortlessly adjusted into the mind through narrative memory; unpredicted and often heartbreaking experiences, conversely, may not straightforwardly fit into surviving cognitive structures and "either may be remembered with particular vividness or may totally resist integration" (van der Kolk and van der Hart 160). Traumatic memories are deposited in a different fashion in mind, are inoperative of the indispensable narrative framework, and perform as fragments or falsifications on the surface, contrary to "narrative memory, which is a social act, traumatic memory is inflexible and invariable. Traumatic memory has no social component . . . it is a solitary activity" (van der Kolk and van der Hart 163). Yet, on the word of Janet, traumatic memories do even so occur in their clear-cut form underneath the surface of the patient's consciousness even with their struggle to recollection and narration. The goal line of the psychoanalyst, therefore, is to reawaken these traumatic memories and to disclose and depict the veridical reality that remains veiled under the surface. In accordance with what Leys enlightens, Janet also expresses the significance of "forgetting" or altering one's memories: "[t]he physician must help [the patient] stop carrying out these absurd actions, teach her to make others, give her another attitude. To forget the past is in reality to change behavior in the present" (Leys 115).

Balaev encounters traditional considerations of trauma by signifying that they invalidly regard the self as collective, that all reactions to trauma are comparable, and that "universal neural-hormonal changes occur in response to a traumatic experience" (9). Traditional prototypes of trauma such as the above-mentioned ones undertake an outstanding, all-purpose, and in due course worldwide response to an event in a way to explain that the event penetrates the defensive guard of the mind; the object is powerless to express the event in his or her memory properly; the experience is made identified to the individual only diagnostically over recollections, nightmares, and hallucinations; and the victim is incapable of catching the language to signify the event, changing him or her wordless. Balaev disputes that these models lean towards universalizing the dissimilar responses to and imports of traumatic involvement, "suggesting that terrifying events affect all people in the same fashion due to its neurobiological basis" (9). She maintains as a replacement for a model of trauma that justifies for the discrepancy in traumatic responses, and distinguishes that people can and definitely do react in a different way to wounding events liable on their age, status quo, temperament, values, society, etc. She resists that there exists too much dependence on a model of trauma, expressly in the arena of literary studies, that "claims trauma is a speechless void, unrepresentable, inherently pathologic, timeless, and repetitious" (3). For Balaev, this model is too restraining in that it mistakenly guarantees a "monocular view of memory". Ergo the upshot is a restricted method of elucidation that "fails to adequately address the complex phenomena of trauma in literature" (Balaev 3).

The point mentioned above by Balaev, is akin to what Freud and Breuer admitted as the role presented by context and the insightful inspiration of certain alleviating contextual dynamics on one's trauma. They advocate that "[a]ny experience which calls up distressing affects – such as those of fright, anxiety, shame or physical pain – may operate as trauma of this kind; whether it in fact does so depends naturally enough on the susceptibility of the person affected" (6). An event can and does move people differently, reliant on the susceptibility or inclination of the victims in question. Supplementary to this, Freud highlights the system in which the effects of trauma are in need of certain justifying reasons in each individual. He reasons that the age of the survivor at the time of the event is associated with the event's detrimental effects since traumatic experiences are all historically momentous for the reason that "they occur in times of incomplete development and are for that very reason liable to have traumatic effects" ("Introductory" 361).

As a final point, Freud took precise consideration in his work to the role of make-believe, sexuality, and/or assault, discarding the perception of having a cause and effect connection between an event and the indications that later arise. As an alternative, Freud accentuated how the peripheral indicators, or trauma of an individual, "developed its potency and effectiveness exclusively from inner psychological processes of explanation, processes that were assumed to be primarily molded by "earlier psychological desires, fantasies, and conflicts" (Leys 21). Or in illuminating words of Susannah Radstone, "it is the unconscious production of associations to memory, rather than qualities intrinsic to certain events, that is understood to render a memory traumatic" ("Trauma" 17). The consequences of an irresistible event are not exclusively controlled by exposure to the event itself, better to say, to what materializes on the "outside"; they are also controlled by memories, fantasies, and other aspects of one's internal processes, i.e. what actually happens on the "inside."

## RESULTS

### Psychological Trauma

The concept of trauma is currently loosely regarded and used in the vernacular to imply a series of agonizing experiences, either extreme or mild. Ruth Leys running a genealogical review of trauma studies takes recent alterations towards the prevalent norm of the term into consideration by placing alongside two recounted incidents of Post-Traumatic Stress Disorder (PTSD), both of which befell in the Spring of 1998: the first one implicates about three thousand Ugandan girls distressing from symptoms of PTSD succeeding their kidnap and assault by the militant group, the Lord's Resistance Army (L.R.A.); the second one takes in Paula Jones, an ex- U.S. state member who sued U.S. President Bill Clinton in 1994 for sexual harassment. Jones's public prosecutors declare that on account of the trauma of her assumed sexual annoyance by President Clinton, Jones underwent "post-traumatic stress with long-term symptoms of anxiety, intrusive thoughts and memories, and sexual aversion" (Balaev 2012). Then Leys determines that on the one hand, this case in point validates the "absolute indispensability" of the concept of trauma through which a recognition of trauma, and in detail a diagnosis of PTSD, might lead to a more profound understanding of the excruciating experiences of victims, like those of the abducted children in Uganda. On the other hand, once reflected within the milieu of Jones's legal issues, it is perceived that how the notion of trauma has converted into "debased currency". Leys's illustration here devotes on how trauma is now unconcernedly engaged with predictable use in intellectual, expressive, authorized, social, unexpected, and political discourse, mainly for political or legal advantages that regardless of its grim early development in the late 1800s through the work of Freud and others, it has become an unobstructed catch-all for all varieties of suffering and stress.

### Cultural Trauma

Context possesses a pivotal position in how trauma influences entire communities. Although, sociologists Alexander, Eyerman, and Smelser evidently use theories of psychological and individual trauma in their considerations of how cultural trauma functions, (Luckhurst 2008), they diverge from models that deliberate the reaction to traumatic events as unrepresentable and/or universal. As a substitute, current theories of cultural trauma, such as those proposed by Alexander et al., associate with Balaev (2012), and are relatively all-encompassing in latitude, underscoring the decisive starring role performed by meaning-making carrier groups within the community, and the multiplicity of responses engendered.

Theories of Essential to contemporary cultural trauma is the effort of sociologist Kai Erikson, one of the leading scholars to pay thoughtful attention to the bond between trauma and community, and one of the first to propose a feasible meaning of cultural trauma. In his 1976 book, *Everything in Its Path*, Erikson arranges for a pilot theory of what he names as collective trauma, the one Alexander later terms as a "path-breaking sociological model" (Luckhurst 2008). In this book, Erikson tracks the overwhelming effects of a flood in a small Appalachian society known as Buffalo Creek during the winter of 1972. During the time he spent with the victims of the very flood, Erikson revealed that folks reveal symptoms and symbols of trauma — "It was as if every man, woman, and child in the place ... was suffering from some combination of anxiety, depression, insomnia, apathy, or simply 'bad nerves'" — and it also looked as if the community itself, as a "social organism," was vastly traumatized, which is illuminated through the following lines (Luckhurst, 2008):

... when the community is profoundly affected, one can speak of a damaged social organism in almost the same way that one would speak of a damaged body. . . . The people of the hollow still had memory, kinship, contiguity in common, so there were materials to build with. But for the moment, at least, they were torn loose from their cultural moorings — alone, adrift, floating like particles in a dead electromagnetic field (Carbonell 2022).

### 9/11 Paradoxical Time: What Happened vs. What Broadcast?

To concisely reiterate, cultural trauma theory emphasizes that an event needs to be first known and acknowledged as communally detrimental in order to be categorized as cultural trauma. While the communal wounds of cultural trauma may undeniably encompass individual suffering and pain, they are pigeonholed as destructive to collective identity and/or collective values since "trauma is not the result of a group experiencing pain. It is the result of this acute discomfort entering into the core of the collectivity's sense of its own identity. Collective actors 'decide' to represent social pain as a fundamental threat to their sense of who they are, where they came from, and where they want to go" (Rahmani, & Nojournian 2023).

Ergo, cultural trauma is determined not by the events themselves but by the generating claim-making procedure that pinpoints these events as ruinous to a collective identity.

### **Manipulation and cognition**

Manipulating people encompasses manipulating their minds, that is people's views, attitudes and principles which consecutively govern their activities. There exist profuse systems of discourse-based mental stimulus, such as enlightening, instructing and persuading that also alter people's awareness and views. This means that manipulation necessitates being differentiated from other forms of mind supervision in terms of the context of discourse. With the intention of being competent to make a distinction between authentic and unlawful mind control, it is first needed to be much clearer about how discourse has initially the potentiality to influence the mind.

Knowing that the mind is astonishingly multifaceted, the fashion discourse may guide it unavoidably implicating complicated procedures that can only be accomplished in actual time by relating well-organized strategies. For the intentions of this paper, such an interpretation will be streamlined to a few rudimentary codes and classifications of cognitive analysis. There exists an infinite number of cognitive studies illustrating how understanding could be under the influence by innumerable contextual or textual 'manipulations', but it is yonder the latitude of this paper to scrutinize them all.

### **Cognitive Dissonance: A Manipulative Approach**

The theory of cognitive dissonance first ascended from a study envisioned to comprehend the communication of rumors. While reviewing the literature regarding the distribution of rumors, Leon Festinger and his colleagues encountered a study with some baffling consequences. Prasad (1950) chronicled rumors ensuing an earthquake in India. The earthquake was tough and manipulated over a large area, but the consequential destruction happened in only a small region (Festinger et al. 1959). Prasad recorded chitchats among people being outside of the damage-affected zone. These personalities felt the earthquake, but did not witness any destruction from its effects. Startlingly, rather than being comforted that the earthquake had done and no destruction ensued in their region, these individuals scattered rumors about imminent doom. Festinger claimed that these rumors functioned a fear-justifying tenacity indispensable to lessen dissonance felt by these people. After the earthquake, occupants outer of the damaged zones were highly likely terrified, but with no discernible motive to sense this way. It means that the cognition of "I'm terrified" was inconsistent with the cognition "we felt no damage so have naught to be terrified about." According to dissonance theory, the circulation of fear- $\neg$  affecting rumors, which is the likelihoods of future tragedies, functioned to rationalize how the occupants felt and eventually moderate their experience of dissonance. Conversely, to determine that dissonance theory precisely elucidated these rumors it would be obligatory to file rumors from people within impaired areas. These individuals perceived disastrous losses and destruction, and consequently partook an intention to feel scared. While Chhetri, (2023) did not accumulate such documents, they were brought together in an analysis of rumors by Sinha following a landslide in Darjeeling, India. In accordance with dissonance theory, onlookers of the landslide's disturbing effects did not distribute rumors about imminent mischance, seemingly because their fright did not require to be vindicated.

### **Huge Cognitive Leap from Reality to Fiction: Reducing Cognitive Dissonance through Unreliable Narrators**

A subject experiencing dissonance cognitively tries to moderate, and supremely exclude the dissonance. Festinger defined three rudimentary methods that individuals follow to lessen the feelings of dissonance: through altering a cognitive behavioral component, through shifting an environmental cognitive component, and through accumulating new cognitive components (Cognitive Dissonance). Changing one's behavior is considered one of the most undeviating ways and means of decreasing dissonance in order for the knowledge of that behavior to no longer struggle with other cognitive rudiments. Take Susan concerning about animals and feels dissonance because she consumes meat and, however, has faith in that animals feel pain when farmed and slaughtered for food, she may reduce her dissonance by no longer eating meat. Nevertheless, numerous aspects can work against altering one's behavior in an attempt to reduce dissonance. Changing one's conduct might be demanding; it may encompass loss or pain; it may generate new dissonance; the existing conduct may be sustaining; or altering the behavior may not be thinkable. Considering these teething troubles, people may determine to reduce dissonance by shifting an environmental cognitive element; to be precise the reality of one's society. Back to the above-mentioned



instance, the individual could keep on eating meat and moderate her sensitivity of dissonance by varying one's perspective concerning animals. She might value farm animals more adversely and merely have a caution for pet animals. Her dissonance might be alleviated through shifting her cognition, exclusively in the case of being supported. On the other hand, this person could carry on eating meat, but concern about farm animals if she accepts new cognitions supporting her deeds and diminish the extent of her dissonance. For instance, this person could strive for information that advocates eating meat is vital for good health, while dynamically circumventing information that would oppose this position. This approach can also lessen dissonance and maybe a quite stress-free technique to do so. Last of all, having new cognitions perchance will give the individual the chance to shrink the significance of her viewpoint toward farm animals by justifying that other humans' behaviors are more imperative, ergo their conduct of farm animals is negligible (Cooper, J. and Fazio 2007; Festinger 1957).

## CONCLUSION

Cultural trauma theory emphasizes that an event needs to be first known and acknowledged as communally detrimental in order to be categorized as cultural trauma. Ergo, cultural trauma is determined not by the events themselves but by the generating, claim-making procedure that pinpoints these events as ruinous to a collective identity. In case a cultural trauma stresses that "members of a collectivity feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness" (Chhetri 2023), the events of September 11 indeed meet the requirements owing to arousing a devastating sense of shock and distrust among American citizens and prompted an extensive collective outburst of grief. In New York, closely after the events, people impulsively grouped in parks and city squares to memorialize the losses with temporary cenotaphs besides the photographs, and reminders of "the missing" taped all through the city. Likewise, the numerical index, "9/11," which swiftly established as kind of poetic shorthand for the occasions, was promptly implied as unforgettable. In fact, the repeatedly echoed portrayal of 9/11 as "the day that changed everything" turns out to be one of the most common reactions to the day's events that the phrase is currently measured a "9/11 cliché".

Much before prospective psychological traumatic paraphernalia were recognized, it became common to sniff traumatic sense in the air, such as George W. Bush's words to identify the very day's events as collectively and for all time traumatic as he said: "Time is passing. Yet for the United States, there will be no forgetting" (Chhetri 2023); besides Kofi Annan, former secretary-general of the United Nations, brought up the concept of collective grief by asserting that, "[w]e are all traumatized by this terrible tragedy" ("Reaction from Around the World"). Considering all of these references and declarations 9/11 could be read as a "recitation of the textbook features of cultural trauma as we have come to understand them" (Carbonell 2022).

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