

Perpetuated Crimes of Human Atrocity. Modifiable or Just Predictable?

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Abstract

Whatever theoretical or research paradigms we may chose , objective answers and urgently needed solutions still continue to elude us , as violence in the world grows ever more extreme and breeds more violence. Treatment and prevention paradigms that re-conceptualize the recurring victim/perpetrator dyad as a genomic imprint of mirror neuron networks , may be more effective than theories that perpetuate a polarized splitting of the dyad.

Keywords: dissociation, atrocity, violence, perpetuation, genomic imprinting, epigenetics, neuroplasticity, neuroecological, psychoevolutionary, cognitive modifiability, dyadic trauma

Introduction

Modifiability Paradigms:

The recurring Middle East crisis had not yet re-erupted in June 2013 when I delivered my thesis on the Non-modifiability of Human Atrocity at the Jerusalem Brain Conference . I had also attended the post-conference workshop on Mediated Learning , where the mood of scientific discussion of efficacy and potential in Instrumental Enrichment (1-9) seemed buoyant with all the post war optimism of Reuven Feuerstein and Viktor Frankel combined.

Effectiveness in mediated learning and in psychotherapy both rest on the practitioners' empathic commitment to the dyadic aspect of their work. Though such different dyads as mediator/learner , therapist/client and victim/perpetrator have no logical connection , they do share a synergistic perspective insofar as mirror neuron networks may be said to account for the long lasting Indelible Dyadic Imprint as in: the engaged reciprocity of mediated learning ; the transference of psychotherapy ; and the re-iterated violence between some victim and perpetrator pairs.

The following theoretical paper has bypassed old research controversies such as repression vs amnesic memory (10-12) re-enactment (13-15) and second generation resilience vs vulnerability (16-26) , to focus instead on integrating new research findings from the broader paradigms of Epigenetics, Neuroplasticity and Neuroecology. It draws on victim as well as perpetrator studies to show the similar effects of prolonged exposure to extreme threat, with neurobiological (27-32) and neurocognitive changes (33-41) and significant trans-generational effects (42-66) that may be similar for both parties.

Epigenetics and Neuroplasticity Paradigms:

For both victim and perpetrator the dissociated (freeze) experience of extreme dyadic trauma wires mirror neuronal connections of hatred and fear that are amplified and transmitted within a high dissociation phenotype in trauma affected families or regional groups (67-75). In this complexity model of multigenerational transmission, the dissociated freeze experience of extreme threat, whether actual or vicarious, is wired in the individual and cultural brains of all parties exposed to the trauma reminders (67-75). High dissociation is defined as genomic imprinting of fear/freeze response actualized into phenotype through recurring experiences of trauma including the developmental dyadic trauma imposed by emotionally impaired survivor parenting, whereby the infant brain is wired with experiences of interpersonal threat rather than empathic attunement (76-86). Unresolved Complex PTSD is thought to predispose to dissociated pathogenic parenting in both victim and perpetrator families (87-91) and early exposure to dyadic trauma (eg in child abuse) is known to disrupt development of neural and genetic structure and functioning thereby potentiating long term stress vulnerability and impaired empathy in the primary attachment bond across generations in trauma affected families and cultural groups.

Thus overarching proximal processes of genomic imprinting (131) are said to perpetuate multi generational transmission of a high dissociation phenotype in certain families, cultures and regional groups (92-97)

One of many examples of such regional groups is the Middle East where, since “Har Megiddon” (Kings viii, 29) and into modern times, recurring violence and dyadic trauma continues to reflect the biological priority of survival by destruction, with its shifting victim / perpetrator axis between Arab and Jew. By now both traumatized groups share an extreme susceptibility to the heightened emotional reactivity and distorted worldview that predisposes violence; and to the dissociated confusion that transforms all information into politics and propaganda intended to further escalate the violence. In this theoretical model centuries of exposure to interpersonal threat is said to be amplified by high dissociation phenotypes on the one hand and by cultural remembrance rituals on the other, reactivating vicarious trauma memories in each new generation. Fear and insecurity become embedded deeper into the concrete of culture, religion and politics, resistant to forgetting trauma or to processing unconscious fears.

Neurologically already primed by past trauma, the amygdala-driven impulse to re-enact polarized v/p roles and to re-experience high arousal, becomes spontaneous, indiscriminate and without conscious control for either party in the conflict (98). Trauma addiction research (99-102) suggests there may also be a primed low cortisol need to re-experience the excited arousal of chronic re-traumatization and victimization particularly in such regional groups. In Complex PTSD the neurochemical effect of the stress response releases massive secretions of neuro-hormones at the time of trauma, leading to long term potentiation and re-activation of traumatic memories that ultimately become transmittable, heritable and cultural, perpetuating violence to breed more violence in trauma affected families and in regional conflicts.

Functional MRI studies relevant to the concept of the dyadic trauma imprint differentiate between PTSD where (low) Dissociation is an innate adaptive regulator limiting

conscious fear by increased prefrontal activity ; and Complex PTSD , where prolonged Dyadic threat amplifies (high) Dissociation of non -conscious fear by increased activity in limbic networks (103-106) What gets passed on in the generational (and cultural) transmission of Complex PTSD is the predisposition to dysregulated arousal and high dissociation together with the cortical imbalance, and the distorted world view with its mirror neuron splitting of blame and denial in the victim /perpetrator dyad (107-108).

Re -conceptualizing these split roles as being one potentially synergistic network may open up new dyadic treatment models based on emerging dyadic fMRI research using Interactive Social Imaging (109-112) and treatments like Dyadic Developmental Psychotherapy.

Early life exposure to traumatic stress inhibits a child's neural development (113-114). Common denominators like attachment disorders and symptoms of complex PTSD have been reported in some offspring of both victim and offender (115-121). Cross culturally German Psychiatrist Radebold (122) studied both German and Jewish second generation Holocaust survivors and found that both the German and the Jewish offspring showed similar level symptoms of Complex PTSD and disorders of attachment.

Psycho- evolution Paradigm

Authors like David Biale (123) observe that the history of Jewish Passivity and Powerlessness may represent an opposite and non-violent legacy of the Holocaust. This idea of (chosen) exclusivity perpetuates the unilateral victimized role, a common distortion in all the literature on trauma and abuse. By contrast the proposed concept of a Dyadic Trauma Imprint seeks to integrate rather than split the opposing yet synergistic roles of victim/perpetrator. Biale's hypothesis of Jewish passivity can be seen as a parallel form of adaptation to the survival of extreme recurring threat (124-126), illustrating the evolutionary principle of Reciprocal Altruism, which postulates that the fittest organism is the one who avoids active fighting altogether (127).

In the face of recurring threat, the adaptive extremes of passivity/powerlessness on the one hand and violent human atrocity on the other hand can both be seen as dysregulated high dissociation responses to the ancient and perhaps inescapable threat of Perpetuated Human Atrocity... Whether Modifiable or Predictable, it just may not ever go away, despite the best and latest from pharmacology, psychotherapy, and even Feuerstein's Mediated Learning Instruments for healing.

Neuro-Ecological and Complexity paradigms for Prevention:

The Dyadic Trauma Imprint is a neuroecological concept which borrows from the research about high dissociation and high arousal in Post Traumatic Stress. It proposes the unpopular hypothesis that victim and perpetrator of extreme violence may be inextricably linked by their shared exposure to the catastrophic stress inherent in their shared experience.

The hypothesis aims to differentiate those conscious forms of conflict that are mostly causal and resolvable; from the "strange antagonistic attractors" inherent in extreme,

dissociated violence, reflecting victim/perpetrator patterns of denial and blame that are predictably self-perpetuating and not resolvable, and therefore too complex to be controlled or understood within traditionally linear paradigms.

Mathematical complexity models, visually computerised, illustrate that such “predictability sets” and self “perpetuating patterns” exist within any complex system. Both aspects need to be accounted for in prevention research if we are ever to reduce the incidence of violence. Cohen (128) argues that these two approaches of dynamics and causality, are not mutually exclusive or incompatible as earlier statisticians and philosophers have thought (129).

Viewed from the “internal topography” perspective, researchers and therapists have tended to bifurcate rather than integrate the victim/perpetrator polarity and have failed to see that the commonalities of prior stress exposure predicts the dual impairments of high arousability and high dissociation suggesting that both roles may become neurobiologically imprinted for each party during some acts of extreme violence. Existing research needs to be integrated so that future studies can draw on findings from “victims” research (e.g. C-PTSD studies on permanent neurochemical and neurocognitive impairments in holocaust or combat survivors) as well as similar findings from “perpetrator” research (e.g. repeat offenders impaired frontal lobe dysfunction and dysregulated affect in transmitting of family violence and sexual abuse, multigenerationally).

Viewed from the “external topography” perspective of trauma’s cultural ecology, research on extreme violence has been hampered by the inherent complexity of multicultural and transgenerational variables and their interactive dynamics, making empirical studies difficult but not impossible to design.

Part of the difficulty with studying such complex variables is that our memory and perception of the violent trauma becomes fragmented and subjectively skewed by multiplier agents examples of which can be found at every level of society.

.Amongst researchers and clinicians we can observe that some idealize the victim vulnerabilities while others stigmatize survivors as untreatable borderlines or normalize the perpetrators as being “ordinary men”.

Amongst some families we can observe that guilt-denying perpetrators may spawn generations of addicts and abusers who perpetuate the violence towards others and themselves.

Amongst some professional gurus and institutional cults we observe repeat offender teachers, priests and judges exploiting victims who have lesser powers.

Amongst world war generals and politicians, we can observe how easily fear and hatred of the perpetrator can be manipulated in the service of the military/industrial complex and intentionally confused with grief, by the use such powerful mottos, as “Lest we forget”.

Amongst some of the world’s most struggling nations, we can observe scarce resources

wasted on historically continuous violence in regions like the Balkans, Cambodia and the Middle East.

And the penultimate examples of dissociated violence is the Post-modern Virtual War since '911' in which remote-precision digital destruction is pitted against the suiciding human bomb, programmed since infancy to dissociate from fear and embrace glory. This link between infant dissociation and extreme dyadic trauma has been identified in the research literature (129) as a neurodevelopmental imprint capable of generationally transmitting the C-PTSD symptoms of heightened arousal and heightened dissociation from parent to offspring within certain cultural groups..

Whatever theoretical or research paradigms we use, objective answers and urgently needed solutions continue to elude us, as violence in the world grows ever more extreme and breeds more violence . Treatment and prevention paradigms that reconceptualize the recurring victim/perpetrator dyad as a genomic imprint of mirror neuron networks, may be more effective than theories that perpetuate a polarized splitting of the dyad.(130-135)

References

The references are numerically and contextually annotated in their order of appearance. A full reference listing can be emailed upon request sent to:
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