

Title: **Recognising the political in the therapeutic: Trauma talk and public inquiries**

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Year: 2020

Publication: *The Routledge International Handbook of Global Therapeutic Cultures*

ISBN: 9780367110925 (chapter in this book)

Funding: Australian Research Council Discovery Early Career Researcher Award DE140100060

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**Full citation:**

Wright, K 2020, Recognising the political in the therapeutic: Trauma talk and public inquiries, in D Nehring et al. (ed.), *The Routledge International Handbook of Global Therapeutic Cultures*, Routledge, London, pp. 421-434.

# **Recognising the political in the therapeutic:**

## **Trauma talk and public inquiries**

Katie Wright

### **Introduction**

In the contemporary Global North, talk of trauma is widespread. Discussion of psychological distress extends far beyond the clinical encounter, professional practice, and academic discourse; it permeates everyday speech and shapes wider beliefs and social practices. The incitement to speak out, to give voice to experiences of suffering is a feature of our times. From tweets to blogs, podcasts to memoir, self-help to reality television, norms of disclosure now encourage the articulation and expression, rather than the silencing and dismissal, of traumatic experience. This has occurred to such an extent that what I am calling *trauma talk* has become a taken-for-granted part of public discourse. People are telling their painful stories, not only in the therapist's office and in other private spaces, but are publicly broadcasting and disseminating them as never before.

The current focus on trauma can be usefully understood as part of the broader landscape of *therapeutic culture*. Widely viewed as a predominantly late modern, Western development, therapeutic culture is a notoriously slippery concept.<sup>1</sup> In the interests of avoiding conceptual ambiguity, it should be noted that I use the term to describe the social, cultural, and political influence of psychology (broadly defined)<sup>2</sup> and the cultural diffusion of sensibilities, norms, and common-sense knowledge and

understandings typically associated with psychotherapy and counselling. Despite the problems presented by a lack of definitional precision in many accounts, and the limitations that stem from this, therapeutic culture remains an important construct for understanding social life in the present and recent past.

This chapter is concerned with therapeutic culture broadly but focuses in particular on discourses of trauma, specifically what I term *trauma talk*, which I argue is a key instantiation of contemporary therapeutic culture.<sup>3</sup> I use this term to describe the circulation of discourses of psychological trauma in everyday life, in the popular media, and in the wider culture. *Trauma talk* at once reflects and brings into being taken-for-granted systems of meaning – it embodies the explanatory power of psychological knowledge and the value attributed to practices associated with talking therapies. Examining trauma discourse throws light on important facets of therapeutic culture that have too quickly been dismissed and denigrated, for example, interpretations that equate the therapeutic with the rise of ‘victim culture’. As well as challenging reductive readings of victimhood, an analysis of trauma narratives also calls into question other arguments advanced by critics, including assertions that therapeutic culture individualises and depoliticises social concerns.

I agree with Eva Illouz (2008: p. 4) that we need ‘thick and contextual’ analyses of the uses and effects of psychological discourse and ‘therapy’. What is also needed is a conceptualisation of therapeutic culture that recognises its multiple facets and contradictory effects (Wright, 2008, 2011). Without this, the concept of therapeutic culture risks being a monolithic,

problematic, and unworkable construct. Just as terms like *governmentality*, *surveillance*, and *power* have been criticised as sweeping ‘bulldozer’ concepts that have the effect of ‘flattening the complexity of the social’ (Illouz, 2008: p. 4), when ill-defined or inadequately theorised, therapeutic culture too easily becomes the scapegoat for a range of social ills, from Rieffian concerns with cultural decline to the manifold problems of neoliberalism. One way forward, conceptually and methodologically, is to focus the analysis on particular dimensions of social life that reflect specific instantiations of therapeutic culture. Not only does this help guard against the operationalisation of therapeutic culture as a ‘catch all’ concept, as the following discussion reveals it also calls into question the excessive pessimism of therapeutic culture’s critics.

Focusing on contemporary trauma narratives as part of the wider therapeutic culture, this chapter looks closely at trauma in relation to a movement sweeping the Global North: demands for justice for historical institutional child abuse.<sup>4</sup> Therapeutic culture is deeply embedded in the suite of social changes that saw victims and survivors challenge abusive authority. The concept of trauma and psychological understandings of ongoing harm have been central to their demands for justice. That therapeutic culture prised open a discursive space in which abuse and suffering could be openly discussed, underscores the important role it has played in providing to people a language and the legitimacy to reclaim rights that had been denied to them as children (Wright, 2008). Through exploration of this case, the chapter provides a model for understanding the emancipatory impulse of therapeutic culture and its imbrication with struggles for justice.

## **Trauma and therapeutic culture**

To understand present manifestations of therapeutic culture and the importance of the concept of trauma, it is necessary to look back to the 1970s. While there is a longer story to tell about the development of therapeutic culture and emergent understandings of trauma (Wright, 2011), the 1970s was a crucial period. This was of course a time of major social and cultural change (Arrow, 2019; Borstelmann, 2012). It was also a period that saw significant shifts in how the psy professions conceptualised psychological injury (Jones and Wessely, 2007).<sup>5</sup> Certain experiences had, of course, long been understood as traumatic – being assaulted, tortured, or brutalised in some way; being involved in a major accident; witnessing a horrific incident; being subject to sustained abuse. However, new understandings of the role of time and memory in relation to trauma proved to have far-reaching consequences. Of critical importance was the recognition that trauma could be long-lasting, that is, that highly stressful experiences may have a negative impact throughout a person's life, not only in the immediate aftermath of the traumatic event/s. This contrasted with earlier understandings of trauma as time limited and without lasting effects, much like a 'self-healing wound' (Jones and Wessely, 2007: p. 164).<sup>6</sup>

The changes that took place in the 1970s in psychological and psychiatric understandings of trauma were not only prompted by conceptual developments within the *psy* professions, they were also strongly influenced by wider social changes, cultural movements, and the rise of identity politics. It was a period in which psychology coalesced with activism, and this was particularly evident in the women's liberation

movement (Cloud, 1998). Consciousness raising gave voice to women's experiences and was a key tool for recognising shared and common experiences of oppression under patriarchy (Sowards and Renegar, 2004). Violence against women and children, hitherto hidden and unspoken, was brought into discourse and to public attention. Feminist psychiatrist, Judith Herman (2015: p. 2), likens this societal awakening to a critical breakthrough in therapy:

Clinicians know the privileged moment of insight when repressed ideas, feelings, and memories surface into consciousness. These moments occur in the history of societies as well as in the history of individuals. In the 1970s, the speakouts of the women's liberation movement brought to public awareness the widespread crimes of violence against women. Victims who had been silenced began to reveal their secrets.

The feminist movement offered 'a new language for understanding the impact of sexual assault' (Herman, 2015). Importantly, it was a language that drew on *psy* knowledges of trauma. In the process of bringing these two knowledges together (*psy* and feminism), justice and therapeutic concerns coalesced. Despite some antagonism, as Illouz (2008) identifies, the alliance between feminism and psychology was particularly strong at this time. Indeed, it was a key route by which therapeutic culture flourished.

Beyond the women's liberation movement new psychological understandings of trauma were also developing through the mobilisation of other groups with shared experiences and/ or identities. As Arlene Stein (2009) has documented, in the late 1970s children of Holocaust survivors

drew on feminism, humanistic psychology, and ethnic politics in developing a collective identity as the ‘second generation’. Vietnam veterans were also organising collectively and agitating – alongside antiwar psychiatrists – to have trauma recognised. This led to the inclusion in 1980 of post-traumatic stress disorder (PTSD) in the *Diagnostic and Statistical Manual III* (Campbell and Ettorre, 2011; Stein, 2009). The implications of this were far-reaching. On the one hand, it reflected the expansion of psychiatric categorisation and arguably a further pathologisation of human experience. Yet, on the other hand, in bringing trauma so clearly under the remit of psychiatry, experiences of suffering were legitimised, treatment options opened up, and new avenues for the pursuit of legal damages became possible.

As Illouz (2008: p. 169) outlines, new understandings of trauma meant that groups with shared identities like Vietnam veterans and feminists could ‘construct certain experiences as traumatic’. The cultural assumptions enabled by the shifting conceptualisation of trauma included recognition that psychological damage was distinct from physical injury and acceptance of the notion that trauma affects child development. Crucially, it also entailed new understandings of the long-term impact of psychological injury, that is, that traumatic memory persists and that trauma may present long after the episode/s that caused it (Herman, 2015; Illouz, 2008; Jones and Wessely, 2007). For people whose psychological injury could be attributed to the actions of individuals or the state, the medicalisation of trauma and the creation of the diagnostic category of PTSD led to new possibilities for financial compensation and other forms of redress.

### ***Trauma talk – making private pain public***

One of the broader social consequences of the elaboration of trauma in the late 20th century was the expansion of the category of the 'victim' (Furedi, 2004; Nolan, 1998). Feminists and Vietnam veterans were crucial in 'paving the way for a variety of other political actors who were increasingly entering civil society by making claims to victimhood and psychic damage in the name of ideals of personhood that intertwined the psychic and the political' (Illouz, 2008: p. 169). The concept of trauma was central in framing the experiences of individuals and groups demanding public recognition of psychological injury. Critically, trauma became a key carrier for the development and dissemination of new public discourses surrounding the experiences of childhood abuse and its effects. In other words, people who had suffered physical abuse and sexual assault were able to legitimise their claims not only through a discourse of rights but crucially also through a therapeutic lens. This could only work to the extent that wider therapeutic discourses held cultural authority.

Feminist researcher and clinical psychologist Jeanne Marecek (1999) uses the term *trauma talk* to describe the lexicon that emerged as women began voicing what had previously gone unsaid about rape, family violence, and child sexual assault. Feminist therapists adopted the concept of trauma as a way of constructing women as injured rather than sick and as normal not abnormal. For Marecek (1999: pp. 158–159), *trauma talk* refers to a set of linguistic practices, that is, 'the system of terms, metaphors, and modes of representation for talking about the physical and sexual abuse of women'. This social constructionist approach recognises language as a social practice and trauma as a particular conceptualisation that 'exists by virtue of cultural agreements to package it in this particular way' (Marecek,



1999: p. 159). Specifically, this means shared understandings of what trauma is and accepted notions that particular experiences are (or can be) traumatic, such as physical and sexual abuse. Marecek's formulation is useful not only for thinking about the individual in clinical settings; it offers a way of conceptualising similar processes in the broader social world as new modes of thinking about and talking about psychological injury entered public discourse.

Here, I reformulate and extend Marecek's analysis of *trauma talk* from a context of clinical practice to social life more broadly. This wider sociological enquiry is animated by a desire to understand the factors that enable a topic – like child sexual assault – to shift from being hidden and unspeakable to becoming visible and speakable in everyday talk and in public discourse (Wright and Swain, 2018). The language of trauma and the increasing cultural resonance with traumatic truth telling enabled this shift. In our so-called 'age of trauma' (Miller and Tougaw, 2002: p. 1), many experiences are now understood as psychologically damaging. From extreme acts of violence and war to those forms of illness and death which are part of everyday life, the expansion of the category of trauma provided a common psychological and therapeutic frame to capture a diverse range of experiences that destabilise the self. Crucially, the concept covers events and/or experiences that are clearly traumatic at the time of the event/s but overall time-limited, as well as those experiences that may cause long-term suffering (Luckhurst, 2008).

I employ the term *trauma talk* in this chapter to capture this spectrum. My specific interest is in the ways that concepts of trauma have

been harnessed by activists to buttress claims for recognition and reparation for non-recent abuse, particularly when it was experienced in childhood and at the hands of representatives of the state or other powerful organisations, such as churches. While there is debate about the extent to which the category of trauma should be applied to stressful life experiences, there is little disagreement that abuse in childhood, and child sexual assault in particular, often results in major and long-term psychological injury. Below, I consider how therapeutic and psychological understandings of the self and trauma have been mobilised in demands for justice for ‘historical institutional child abuse’.<sup>7</sup> An analysis of *trauma talk* in relation to adult survivors of institutional child abuse throws into sharp relief key dynamics of contemporary therapeutic culture – from the explanatory power of *psy* knowledges to the imbrication of the psychological and the political.

### **Survivor activism, historical abuse, and public inquiries**

Victims and survivors of institutional child abuse are among the many groups that in the late 20th century began to mobilise and demand justice. Crimes of sexual and physical abuse in churches and out-of-home residential ‘care’ settings have been a major focus and have garnered significant media attention globally. However, claims for recognition and redress for historical abuse in childhood have also been based on experiences of other insidious and diffuse forms of brutality, neglect, and cruelty that characterised past government policies and practices, particularly as they pertained to the institutionalisation of children, the treatment of Indigenous populations, and the operationalisation of welfare measures, including those related to adoption.

Changing conceptualisations of childhood and child development, alongside shifting understandings of trauma that were informed by *psy*, laid the foundation for new ways of thinking about the impact of child abuse. The victim and survivor groups that began to organise in the late 20th century, but particularly over the last decade, emerged out of this cultural milieu. Individuals and groups were able to draw on *psy* discourses, as well as the discourse of child rights, to demand justice. The weakening of traditional authority – as embodied in the father in the family, in Christian churches, and in governments and institutions more broadly – paved the way for new kinds of questioning of authority, which had previously been unthinkable. Those who historically held little power were demanding ‘something be done’ in holding to account those who wielded power. In this process of speaking up and calling for action, the concept of trauma was critical. It provided a framework for people to make sense of their own experiences. It also provided a language to articulate the ways in which childhood abuse and neglect had lasting negative impacts.

The (re)discovery of child abuse in the 1960s and the naming of ‘battered child syndrome’ (Kempe et al., 1962) was an important step in the process of recognising and publicly acknowledging the many ways in which children are subjected to violence. In the 1970s in the context of second wave feminism, child sexual assault was put onto the public agenda alongside adult rape and other forms of violence in the private sphere (Kitzinger, 2010). The 1970s and 1980s was also an era in which children’s legal status and rights came to the fore, reflected, for example, in the introduction of new legislation to protect children (e.g., mandatory reporting). The United Nations (UN) Convention on the Rights of the Child was a touchstone

(Cohen, 1990). Through an international treaty, it set out the civil, political, economic, social, health, and cultural rights of children, and signatory nations were bound to its terms by international law. It also provided a lens through which the past treatment of children increasingly came to be viewed (Sköld and Swain, 2015).

In the 1980s, *institutional abuse* was ‘discovered’, that is, understood as a systemic problem that required a societal response (Daly, 2014). Building on earlier developments in understandings of children and their rights, this was a crucial first step in moves towards justice for people who experienced residential ‘care’ as children. It acknowledged, legitimised, and importantly, named the distinct *absence of care* provided to many children and the brutality which they were subjected to at the hands of the state and religious and charitable organisations. During the 1990s, the concept of *institutional abuse* became more widely known (Daly, 2014) and the activism of ‘care leaver’ groups garnered media and political attention in a number of countries (Daly, 2014; Golding, 2018; Musgrove, 2013; Wright, 2017).<sup>8</sup> Through public inquiries and other official investigations, the practices and cultures of out-of-home ‘care’ settings were exposed as thoroughly deficient in some instances and criminal in many others. As revealed through multiple reports internationally, the brutalisation of children was not an aberrant problem. Rather, it formed part of the everyday operation of institutions that were ostensibly set up to care for children who could not be looked after by their own families (Swain, 2018).

The work of care leaver populations in the late 20th and early 21st centuries formed one strand of advocacy for recognition of historical

institutional child abuse (Wilson and Golding, 2015). Another major area of activism developed in response to child sexual assault by the clergy. As with care leavers, people affected by abuse in religious institutions also mobilised, forming advocacy groups, engaging with the media, and speaking publicly about their experiences. They sought justice through civil litigation and redress schemes established by churches (Daly, 2014). By the early 2000s, the child sexual abuse scandal in the Roman Catholic Church brought the issue of the sexual exploitation of children to global attention. Escalating claims of victimisation meant that clergy abuse could no longer be explained away as individual cases of malfeasance, that is, the ‘bad apple’ theory. What was revealed instead was that the Catholic Church was itself a ‘bad barrel’ (Death, 2015). Indeed, it is now widely known that the Church has a long history of complicity in the protection of paedophile priests and the cover-up of their crimes (Terry, 2008).

What, then, brought the issue of historical institutional child abuse to public attention across many nations in the Global North? It may have been assumed that prior to the late 20th century people were reluctant to make complaints to the authorities. Yet it has been revealed through many public inquiries and painstaking research that reports of physical and sexual assault of children were indeed made to authorities throughout the 19th and 20th centuries and official investigations and public inquiries were sometimes established in response (Swain, 2014; Swain, Wright, and Sköld, 2018). However, the issue failed to gain traction in the way that it would later. Undoubtedly, major differences are discernible in relation to people’s preparedness to speak about such matters publicly and, critically, the existence of a cultural climate in which such stories were ‘speakingable’ (Wright

and Swain, 2018). The media played a critical role. By the late 20th century, victims and survivors demanded to have their voices heard. They demanded justice. Allegations escalated and an accumulation of evidence increasingly supported their claims. Importantly, the form of official public inquiries also changed. The approach taken by inquiries that emerged at the century's end was qualitatively different from that of the inquiries in the earlier period. Victims were not only speaking but they were being heard. As Shurlee Swain (2014: p. 9) has argued, the turn to victim testimony radically changed the nature of such investigations:

The practices of individualising accusations of sexual abuse, discrediting witnesses and minimising reporting in the interests of public morality were successful only while inquiries looked to experts rather than victims for the answers to the problems they were addressing. The inquiries since the late 1980s, which have actively sought survivor testimony, have broken open such silences.

The turn to testimony had a significant influence on the way in which inquiries operated and, in turn, it shaped their findings. Importantly too, the narratives of abuse and trauma that have been central to official inquiries in the present and recent past are increasingly circulating in the public sphere. This may be understood as an outcome of the educative aims of such inquiries, but it also reflects a public receptive to this discourse. Not only are the stories provided by victims and survivors picked up by the media, but large public inquiries, like Australia's Royal Commission into Institutional Responses to Child Sexual Abuse (2013–2017) and the UK's Independent Inquiry into Child Sexual Abuse (2015–), have made people's

stories readily accessible through webcasts and transcripts. Public inquiries into historical institutional abuse reflect *trauma talk* in action. Recent inquiries into historical institutional child abuse may therefore be understood as having both justice and therapeutic objectives (Wright, 2018).

In the current era, official inquiries reflect particular agreed upon ways of understanding historical and institutional abuse. There is now an established 'mode of representation' (Marecek, 1999) for talking about abuse, its traumatic effects, and appropriate forms of recompense and justice that should follow. The cultural conditions of the late 20th century and early 21st century laid the foundation for this: understandings of childhood had shifted; people felt empowered to speak out about their own victimisation; groups formed to take action; and governments responded to demands from victims, survivors, the public, and the media with the establishment of criminal investigations and major public inquiries (Wright, Swain, and Sköld, 2017).

Activism, public disclosures, media coverage, court cases, and official inquiries have all contributed to growing public understanding that a range of institutions have shocking histories of violence against children.<sup>9</sup> Revelations continue to reverberate globally, sparking criminal cases, major public inquiries, and in the process irrevocably changing the discursive, cultural, and material construction of the civil sphere (Alexander, 2019). To conclude this discussion, I note some particularly high-profile examples of public disclosures that have had major ramifications in recent years.

In Britain, in the early 2010s, allegations emerged about the

widespread sexual assault of minors by BBC personality, Jimmy Savile. Five women initially recounted their experiences of victimisation on an ITV programme in 2012. Following police investigations, hundreds of people came forward, and over 200 criminal offences were recorded (Gray and Watt, 2013). In 2016, also in the UK, professional footballers made public allegations that they had been assaulted by coaches in the 1970s, 1980s, and 1990s. A special investigation was established and 849 victims have come forward thus far (Taylor, 2018). Meanwhile, in the USA at the same time the football scandal emerged, allegations were aired against a prominent team doctor with USA Gymnastics, Larry Nassar. This became yet another high-profile case of institutional child abuse, with 265 women accusing Nassar of sexually assaulting them when they were children (*BBC News*, 2018). At his sentencing hearing, 150 women publicly confronted him, with many recounting their own experiences of abuse and its effects (Lutz, 2018).

Public allegations of child sexual assault have emerged within a cultural climate that encourages victims and survivors to speak out. The contemporary social milieu is one in which there is a lower tolerance of abusive authority and less preparedness to stay silent (Wright, 2017). In a similar pattern to the revelations of the sexual victimisation of children, public disclosures that sparked the #MeToo and #TimesUp movements leave little doubt that institutional cultures of silencing, covering up, and minimising sexual assault, harassment, and exploitation are being radically challenged. Importantly, despite all their problems, online spaces have provided new platforms for mobilisation and activism. From the elite and privileged domain of Hollywood and the entertainment industries to the more conventional workplaces of the majority, people are speaking up and



speaking out as never before. Across the spectrum of discourses that have emerged as people disclose experiences of victimisation, trauma commonly informs the language. Yet, like the women's liberation movement in the 1970s, this is no culture of victimhood. These are the voices of individuals and groups of people fighting for justice and social change.

### **Therapeutic culture: Three problems?**

One of the chief concerns of critics of therapeutic culture, particularly those in what may usefully be defined as the 'cultural conservative' camp, is that we have witnessed, since the late 20th century, a descent into 'victimhood'. According to this line of analysis, an unusual and problematic state now exists wherein the status of the victim is reified, and the claims being made by one victim group incite others to assert their own victim status (Furedi, 2004; Nolan, 1998). The finger of blame is pointed squarely at the *psy* disciplines and professions and their various forms of psychotherapy, as well as the broader therapeutic culture which has fostered apparently unbridled concerns with the self and individual suffering.

To understand the antagonism of many critics of therapeutic culture, it is necessary to trace the ways in which early scholarship set the agenda, both for understanding the nature of therapeutic culture itself and interpretations that were brought to bear on understanding the implications of this cultural turn. Not surprisingly perhaps, given that the seminal text was written by a conservative cultural sociologist (Rieff, 1966), the analysis pointed to a moral decline of Western culture. For individuals, this purportedly encompassed a turn inwards, away from the community and towards the self. Critically, the rise of therapeutic culture was also interpreted as instrumental in the

breakdown of traditional authority, particularly as imbued in the father as the head of the household and in the priest as the representative of the Christian church (Rieff, 1966). Disquiet about the rise of cultural narcissism soon followed (Lasch, 1978), as did concern about the intrusion of *psy* experts into private life (Donzelot, 1979), and the individualisation of political concerns (Lasch, 1978). Echoes of this body of work, the foundations of which were developed in the 1960s and 1970s, are to be found in many recent accounts of therapeutic practices, discourses, and cultural forms, particularly in notions of so-called diminished selfhood, vulnerability, and victimhood (Ecclestone and Hayes, 2009; Furedi, 2004; Nolan, 1998).

The expansion of *psy* discourses as a form of neoliberal governance constitutes the other main line of critique.<sup>10</sup> Foucault's theorisation of governmentality and subjectification provided an intellectual and methodological alternative for understanding the significance of psychological expertise and the therapeutic turn. From this perspective, as Nikolas Rose (1999: p. 261) argues, *psy* knowledges and therapeutic technologies 'align political, social and institutional goals with individual pleasures and desires, and with the happiness and fulfilment of the self'. The regulation of the self is thus 'consonant with contemporary political principles [and] moral ideals'. This perspective has been particularly influential, with *psy* discourses and the so-called therapeutic persuasion implicated in the shaping of highly individualised self-monitoring subjects suited to the political and social conditions of advanced capitalism and neoliberalism (Brown, 2017; Brunila, 2013; Hazleden, 2003; Rimke, 2000).

Despite significant developments in social theory over the last half-

century – and rapid and pervasive social change throughout this period – core elements of foundational thinking about therapeutic culture remain deeply embedded in current conceptualisations and theorisations of the perceived pernicious influence of the therapeutic on culture, politics, subjectivity, and social relations. While the target of critique varies, there has been a widespread agreement on two key points – that therapeutic culture has ‘triumphed’ (Illouz, 2008) and that the effects of this have been largely negative (for an overview, see Wright, 2011; see also Nehring et al., 2016).<sup>11</sup> For the present analysis, three core arguments warrant close attention. First is the contention that psychological knowledge and therapeutic culture foster individualism and promote the privatisation of political concerns, with the effect of depoliticising the social. Second is the argument that *psy* expertise commands great authority and wields disproportionate amounts of power. And third is the suggestion that the therapeutic fosters a culture of ‘vulnerability’ and ‘victim- hood’, which has led to the rise of a ‘diminished’ form of personhood.

Building on Rieff’s (1966) foundational analysis of the cultural consequences of the therapeutic turn, Christopher Lasch (1978) argued in the 1970s that therapeutic culture had already displaced religion and was threatening to displace politics as well. Following Lasch, the individualisation of social problems has been understood as a central feature of the therapeutic. Indeed, the idea that political problems are increasingly framed as personal or psychological deficiencies has been widely endorsed. Dana Cloud (1998), for example, argues that therapeutic discourses function as a form of consolation in place of material compensation. In her analysis, the therapeutic is a pervasive rhetoric that displaces social and political action and stifles

dis- sent within a discourse of individual responsibility. More recent analyses have explored similar themes through analytic frameworks that link depoliticisation, therapeutic culture, and neoliberalism (Brunila and Siivonen, 2016; Foster, 2016; Klein and Mills, 2017).

The authority and power of *psy* professionals and the ways in which *psy* knowledge is exercised have been understood to have a wide range of negative effects, particularly with regard to the relation between the state and its citizenry. The regulation of family life and the government of vulnerable populations are two areas that have been subject to sustained analysis. Experts intruding into the private sphere through state-sanctioned intervention, particularly in working-class families, in the name of protecting or improving the lives of children, was sharply criticised by Jacques Donzelot (1979). While middle class professionals can willingly take up *psy* discourses and practices, he argued, vulnerable populations and people in relations of dependence with the state are subject to therapeutic technologies of normalisation, from talking therapies to work-ready programmes (see also Brunila, 2013).

Finally, notions of ‘diminished selfhood’ and the rise of what is commonly referred to as ‘victim culture’ underscore concerns about the devaluing of stoicism and self-reliance and an elevation of displays of vulnerability and emotional fragility (Furedi, 2004; McLaughlin, 2003; Nolan, 1998). The therapeutic sensibility, which encourages speaking out about private pain, is regarded as particularly problematic. So too is the development of identity categories based on victimisation. This is interpreted by some analysts as casting the individual into a powerless role, one that

normalises experiences of being traumatised (McLaughlin, 2003). The adoption of the category of victim is understood by Furedi (2004: p. 178) as even more worrying when tied to demands for compensation. He argues that 'success of victim claim-making encourages others to jump on the bandwagon'. According to this account, 'victims' in the past accepted their fate with fortitude and stoicism.

### **Childhood abuse and therapeutic culture: An alternative view**

Sustained scholarly analysis over the last half-century provides compelling narratives of the problems with therapeutic culture. That a range of concerns is shared across divergent intellectual traditions suggests that forceful critique is warranted in some areas. Yet the project of subjecting the therapeutic to interrogation has not, overall, been sufficiently tempered with recognition of the complexity of this cultural turn and acknowledgement that its effects do not simply reflect a diminishment of social life and the human subject – or indeed that there may have been thoroughly positive consequences. Put simply, there is more than one effect of therapeutic culture and it must therefore be understood as a cultural impulse with multiple facets. It is only through thick description (Illouz, 2008) and contextual analysis that its contours and contradictory dimensions may be illuminated (Illouz, 2008; Wright, 2008, 2011).

My interest here is in understanding the role of therapeutic culture in struggles for recognition and justice for people who were victimised as children in institutional settings. In elaborating an alternative view and interpretation, I address three key concerns. First, I explore the claim that psychological knowledge and therapeutic culture depoliticises the social by

fostering self-centred individualism and the privatisation of political concerns. Second, I consider arguments regarding the power of *psy* expertise and the professionals who embody this. Third, I call into question the validity of arguments that the therapeutic fosters a culture of vulnerability and victimhood. While the primary focus here is on institutional child abuse, the analysis I develop may be applied to the interpretation of related social movements concerned with unequal power relations and abusive authority.

An important counterpoint to concerns about the privatisation of social and political issues, and one that is commonly overlooked, is the cultural impulse of the therapeutic to work in the reverse direction. That is, it has been instrumental in bringing into public discourse and politicising what had previously been considered ‘private’ concerns (Wright, 2006, 2008). This has had the effect of radically challenging prohibitions against speaking out about matters such as sexual assault. Crucially, cultures of deference and silence that are also hierarchical and authoritarian have served the interests of abusive authority (Palmer and Feldman, 2017). Therapeutic culture challenges traditional authority. Understood metaphorically as ‘therapy’ writ-large, it encourages bringing into discourse that which has been hidden. The concept of trauma has been central to this process, marshalled in demands for justice made by people abused as children, just as it was for Vietnam veterans and other groups. Importantly, trauma developed not only as a psychological category; it was also culturally conceived, and in the process, traumatic experience was made to matter, both for groups who had been victimised and for the wider public bearing witness (Alexander, 2012).

Importantly, as with feminist ‘speakouts’ in the 1970s, the emergence of *trauma talk* related to childhood abuse has meant that public disclosures could be understood within a common frame of reference, one that recognised the often profound impact of abuse in childhood. Buttressed by extensive research evidence, public disclosures and discussions of abuse in childhood have drawn on key *psy* knowledges of child development and trauma. These understandings have also been marshalled to support victims and survivors, for example, through expert testimony in criminal proceedings and through the provision of therapeutic support services. In the process of bringing into public discourse both child abuse generally, and child sexual assault in particular, trauma narratives and therapeutic culture have provided a legitimising frame, one that has enabled experiences of injustice to be acknowledged and, increasingly, addressed through the courts and public inquiries (Wright, 2018).

In the period of the late 20th century to the present, activists set about exposing forms of historical and contemporary institutional abuse that had previously been denied, hidden, or covered up. A central part of this process involved the naming and claiming of experiences of victimisation. Narratives of trauma were transmitted interpersonally and carried through the media. Jeffrey Alexander (2012: p. 1) reminds us that injuries visited on certain groups by other groups are a ‘historical certainty’. Through his theory of cultural trauma, it is possible to recognise the agency of groups when they challenge existing social arrangements in pronouncing their suffering. Conceptualising these processes as the emergence of a culture of victimhood is a proclamation that could only come from a privileged position of power. It also reflects a particularly ‘thin’

conceptualisation of therapeutic culture and social suffering. More helpfully, following Alexander (2012), we may think of trauma narratives as ultimately triggering significant repair in the social fabric. In this sociological formulation, we see the transformation of experiences of individual trauma into a collective form of cultural trauma, which in turn can be a powerful force for social reform.

The repair work required in response to the transformation of individual suffering into a social problem (Alexander, 2012) has taken a variety of forms in the area of institutional child abuse. There have been acknowledgements and apologies, as well as the initiation of official mechanisms that seek to redress injustice for those affected and prevent future occurrence. Such mechanisms include civil and criminal proceedings and public inquiries as well as policy, legislative, and regulatory reform. In the formal settings of public inquiries in recent years, victim testimony has been foregrounded and respected, becoming a key part of the process of social repair and constitutive of new ways of understanding the problem. The importance of telling one's story, of giving voice to victim and survivor narratives, has been strongly endorsed. In the recent inquiries in Australia, the UK, and elsewhere, a psychologically infused therapeutic ethos was crucial. It legitimised the experience of trauma and provided a framework and a language for understanding and explaining the ongoing and often intergenerational legacies of childhood abuse and neglect. That psychological knowledge and a therapeutic sensibility has been – and continues to be – marshalled in this way underlines a political dimension of psychological discourse and therapeutic culture that is rarely acknowledged.



For the issue of historical institutional child abuse to gain traction – to the point where governments have been pressured to mount large and expensive public inquiries and law enforcement agencies have initiated major criminal investigations – what was needed was a public informed about the nature and impact of abuse and receptive to calls for action. The activism of victims and survivors also reflects a generation no longer willing to unquestioningly defer to institutions and governments and instead demand justice for the rights denied to them as children (Wright, 2017). Child rights discourse and the media played vital roles. But so too did the wider therapeutic culture. It fostered a cultural climate of reflection on childhood experience and one receptive to speaking out about experiences of abuse. Just as *trauma talk* provided a language and legitimacy for women survivors of sexual assault, so too is it providing a discursive space for discussion of historical institutional child abuse and its ongoing effects.

## **Conclusion**

The rise of therapeutic culture, its infiltration into social institutions and public policy, and its effect on culture, society, and the self has been subject to sustained and longstanding scholarly critique. Extensive arguments have been advanced to underscore its pernicious influence. Yet what has too often been ignored are the more productive, indeed positive, dimensions of the therapeutic turn. An analysis of the case of historical institutional child abuse suggests an alter- native to dominant readings of the effects of therapeutic culture, one that sees it not simply as individualising and depoliticising but instead recognises its social and political power. The cultural imperative of disclosure in the face of traditional authority represents a critical dimension of therapeutic culture that cannot easily be dismissed as

‘merely therapeutic’.

A more nuanced, or ‘thick’ reading suggests that a therapeutic ethos plays a crucial role in the articulation of suffering and in the recognition of past wrongs, an important precondition for struggles for justice. Increased awareness of abuse and trauma has been fostered by the expansion of therapeutic culture and the politicisation of trauma talk. Certainly, there are limits to what may be called a therapeutic politics and considerable challenges remain in the pursuit of justice for people abused as children, as for other groups whose rights to bodily autonomy have been violated. Still, for those seeking recognition and redress, at least in the Global North, the legitimising frame provided by psychological knowledge and therapeutic culture has been critical. The capacity for victims and survivors to speak publicly about matters hitherto unspeakable has been central; so too have been shifts in conceptualisations of childhood, and acceptance of the severe and often ongoing trauma caused by abuse – understandings of which have been furthered through decades of psychological research and public dissemination of this knowledge.

In theorising therapeutic culture what is needed, then, is a working concept that holds in tension its contradictory dimensions. This is particularly crucial in trying to assess the effects of therapeutic culture beyond the Global North. Just as therapy itself can both heal and pathologise, so too the effects of its broader cultural diffusion are mixed and sometimes paradoxical. Therapeutic discourses can be individualising and depoliticising but they can also work collectively and politically. Therapeutic culture may have given rise to increasing claims of victimisation. Yet to read this as the emergence of

a ‘victim culture’ that reflects a reification of vulnerability and a diminishment of the human subject is to fail to recognise a vital dimension of sociocultural change. Shifting our gaze to encompass a broader conceptualisation of the therapeutic – one that takes seriously the voice of suffering and the political power of disclosure – invites an alternate reading of its cultural consequences.

## Notes

- 1 While most accounts have focused on the Global North in general, and the USA in particular, in recent years there has been increasing attention to various aspects of therapeutic culture in the Global South (see Klein and Mills, 2017; Nehring et al., 2016; Sood, 2016).
- 2 I employ the term psychology in a broad way to describe those forms of knowledge about the self that have their roots in various schools of thought and *psy* traditions, that is, psychological, psychiatric, psychoanalytic disciplinary understandings of the human subject, but which have also become an important part of everyday discourse and understandings of ourselves and others.
- 3 My usage is an adaptation and extension of the concept outlined by feminist psychologist, Jeanne Marecek (1999).
- 4 This chapter draws on a larger study, ‘Childhood Maltreatment and Late Modernity: Public Inquiries, Social Justice and Education’, funded by an Australian Research Council Discovery Early Career Researcher Award (ARC DECRA), K. Wright, DE140100060), 2014–2019.
- 5 Following Rose (1999), I use the term *psy* as shorthand to refer to the professions and associated disciplinary traditions of psychiatry and psychology, primarily.
- 6 Traumatic memory, as it is now understood, is splintered and fragmented, with memories often remaining ‘highly charged’ but commonly coexisting with a difficulty in articulating or describing the nature of the event/s or experience/s that created the trauma (Flemke, 2009; van der Kolk, 1994).
- 7 I use the term ‘historical abuse’ to describe abuse that occurred in the

non-recent past. This is not to imply, however, that the effects of abuse are confined to the past.

- 8 The term care leavers is widely used to refer to people who experienced out of home 'care' as children.
- 9 In countries with strong public inquiry cultures, like Australia, Ireland, and the UK, much of this has been revealed through the quasi-legal inquiry mechanism. While the forms of inquiries vary, inquiries into the historical abuse of children in institutional settings have been established in more than 20 countries (Sköld 2013; Wright, Swain, and Sköld, 2017).
- 10 Some analyses that I have characterised as being in the 'cultural conservative' camp also elaborated related concerns, including critiques of the political economy and arguments about the therapeutic as an agent of social control (e.g., Lasch, 1978).
- 11 It should be noted that there are some exceptions that point to the interest of scholars in questions other than whether therapeutic culture is a positive or negative development (e.g., Illouz, 2008).

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