Understanding Trauma in Cambodia

BASIC PSYCHOLOGICAL CONCEPTS
About the photo on the cover page:
The photo shows one of 144 face sculptures found at the Bayon Temple in Angkor Thom complex. The two sides of the face represents the current mental health condition in Cambodia. On one side, the face reveals the charming and peaceful smile of someone who is well-balanced and content with the world. The other side shows, however, the bizarre grin of one whose smile is frozen in time, traumatized by the horrific experience. The damaged eye also reveals this, a sad story of one disconnected from trust, hope, and compassion.

To reconcile and regain peace in the heart of the Cambodian people, there is a need to process and integrate these opposing sides. Avoiding this fact would only perpetuate the suffering in the minds of many Cambodians. Failing to consciously face the issue (the pain, the aggression, and feelings of being lost) will only aggravate the problem, and the trauma will, in turn, be passed onto subsequent generations of Cambodians.
Basic Psychological Concepts

UNDERSTANDING TRAUMA IN CAMBODIA

Basic Psychological Concepts
# ភាសាខ្មែរ
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Greetings from the Director of Deutscher Entwicklungsdienst (DED) in Cambodia

It is my pleasure to endorse this first volume of the “Handbook on Trauma” as an outcome of our cooperation with the Center for Social Development (CSD). Within its special program “Civil Peace Service” (ZFD), Deutscher Entwicklungsdienst (DED, German Development Service) is supporting CSD’s public forums on justice and reconciliation.

These events are organized throughout Cambodia. They aim to promote outreach for the Khmer Rouge Tribunal and to involve the whole population in the process.

Therefore, I warmly congratulate and thank CSD’s Executive Director, Theary C. Seng, and all employees of the organization including DED’s expert on trauma therapy, Mr. Matthias Witzel, for publishing this valuable book. With human compassion and by learning together we have the chance to overcome the remnants of the past.

Wolfgang Möllers
Director
Deutscher Entwicklungsdienst (DED)
Acknowledgements

We are indebted to all the Cambodians who have supported us with their time, expertise and knowledge. We are especially grateful to those who shared their personal experiences about their suffering during the Khmer Rouge years, and gave the Handbook’s authors invaluable insights into the complex processes of Cambodian trauma. Our debt to them is substantial. We express our sincere thanks to trauma-therapist Roswitha WITZEL, editors of the English text Holly TELERANT, and Erin PULASKI. Our special gratitude goes to those who have assisted in editing the Khmer text, especially to Ms. Theary C. SENG, Dr. CHEK Sotha, and Mr. SEOUNG Sothearwat. Translating and editing these psychological concepts into Khmer was not only labor-intensive, but also a long-term process, requiring outstanding and serious engagement. Finally, we are indebted to the German Development Service (DED) and the German Civil Peace Service (ZFD), the donors of this publication.

YIM Sotheary (Translation, Design), OM Chariya (Translation), SAM Sarath (Illustrations)
Matthias WITZEL (Text, Graphics, Design, Photos)
ដែលស្ថិតនៅ នៅក្នុងប្រទេសគូម៉ៃ ឆ្នាំ ២០០៩

ការប្រកបដោយគ្រប់គ្រាន់ថ្មីនៃវប្បធម្មតាសម្រាប់ការការីការអនុវត្តន៍របស់ស្រុកនៃខេត្តនោះ ដែលជាការវិភាគសម្រាប់ការធ្វើការប្រកួតប្រជែង។ ការតំនាក់តំងវប្បធម្មតានូវប្រយោជន៍នៃការអនុវត្តន៍នេះ មានសកម្មភាពច្រើន។ ការប្រកួតប្រជែងប្រក្មេជ្ឈមានប្រយោជន៍ច្រើន នៅក្នុងការអនុវត្តន៍របស់មនុស្ស និងការសម្រមេសិក្រុមប្រកួតប្រជែង។

ការប្រកួតប្រជែងនេះមានប្រយោជន៍ច្រើន។ សមត្ថប្រយោជន៍របស់វាមានជាក់ស្តោះអំពីការអភិវឌ្ឍន៍នៃកម្មវិធីបំផុតនេះ និងការប្រកួតប្រជែង។ ប្រយោជន៍នេះមានប្រយោជន៍ជាច្រើនក្នុងការអនុវត្តន៍នេះ។

លោកស្តីត្រូវការការអនុវត្តន៍របស់គ្រូក្រុមប្រកួតប្រជែងនេះ។ ការអនុវត្តន៍របស់គ្រូក្រុមប្រកួតប្រជែងនេះកំពុងការដំណើរការក្នុងការធ្វើការដោយជំនាញអំពីកម្មវិធីបំផុតនេះ។

យើងស្វែងយល់ថាមានការអនុវត្តន៍របស់គ្រូក្រុមប្រកួតប្រជែងនេះក្នុងការប្រកួតប្រជែង។ ការអនុវត្តន៍របស់គ្រូក្រុមប្រកួតប្រជែងនេះកំពុងការដំណើរការក្នុងការធ្វើការដោយជំនាញអំពីកម្មវិធីបំផុតនេះ។
Introduction from Executive Director, CSD

Phnom Penh, 8 October 2007

I am deeply proud of this Understanding Trauma in Cambodia Handbook! I believe this Handbook is a must-read for every Cambodian – not only for specialists, NGO workers or the expatriate community – who has been touched by immense loss, and trust that in the process of reading comes understanding, and with understanding comes healing.

Some 18 months ago, I was thrilled when the Center for Social Development (“CSD”) was approached by Mr. Wolfgang Möllers of the German Development Service (“DED”) to do collaborative work with DED on issues of justice and reconciliation in light of the Khmer Rouge Tribunal; I was doubly elated to hear that DED would additionally support us with a consultant, and not just any consultant, but one with expertise in trauma and psychology.

Immediately, CSD exploited the expertise and generosity of our new consultant, psycho-therapist Matthias Witzel by engaging him in many activities and projects. For me, at the very top of the list of priorities of great urgency was the creation of a handbook on introduction to psychology and trauma, as I had yet to know or read of such a book with basic psychological concepts that was written for and about Cambodians.

From our knowledge of our society (in terms of literacy, attentiveness, particularly to unexplored topics such as trauma and psychology) and based on our experience of having created other handbooks in the past, we knew that this handbook has to be accessible and practical for every Cambodian – light in text, free of convolution, attractive and presentable with illustrations, photos and colorful, creative layouts.

I believe we have succeeded brilliantly with this Handbook. I can be unabashedly proud of this work because my only contribution is the idea for its inception and language editing. All the credit of the Handbook first and foremost goes to Mr. Matthias Witzel, the author, layout designer, friend, counselor extraordinaire; then there are the superb CSD staff of whom I cannot name all here, but would like to highlight: Ms. YIM Sotheary and Ms. OM Chariya, the ever thoughtful and caring psychology assistants; Mr. SAM Sarath, the brilliant illustrator; and the all-around rock star of an employee, my ever tireless executive assistant, Mr. IM Sophea.

Of course, we would not be able to produce this Handbook without the moral and financial support of DED, particularly the encouragement and enthusiasm of its Director, Mr. Wolfgang Möllers.

I was most fortunate to have grown up for some years in the United States where I could and did seek out materials (even if on my own) on trauma and psychology to help me make sense of my tumultuous inner life and recurring nightmares as a consequence of the Khmer Rouge years. I am excited and more at peace that now there is this Handbook to help guide my fellow Cambodians through the turbulent emotional terrain of the head and heart and to aid them in making sense of the continuing internal disturbances. Part of the healing process is to understand and to know that we are not alone. I pray that this Handbook will do just that.

Theary C. SENG
Executive Director
The woman is triggered by the sound of violence.
A study funded by the United States National Institutes of Health (NIH) National Institute of Mental Health (NIMH) and National Institute on Alcohol Abuse and Alcoholism (NIAAA): Mental Health Services Research at the National Institute of Mental Health (2003): www.nimh.nih.gov/publicat/pubListing.cfm
ប្រៀបធៀបផ្នែក និងការផ្លាស់ប្តូរទេពតម្រូវការនៅក្នុងការពិនិត្យឈ្មោះសិទ្ធិមុនពីអាវុកស្តាប់ជំនួយដល់ស្តុក នឹងយោបល់ការបង្កើតការបញ្ជាក់ប្រព័ន្ធការប្រធានបណ្តាល។

ប្រៀបធៀបផ្នែកឈ្មោះពិនិត្យឈ្មោះសិទ្ធិយោបល់ពីអាវុកប្រការកម្មវិធីប្រឈម ការអភិវឌ្ឍ
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ប្រៀបធៀបផ្នែកឈ្មោះសិទ្ធិយោបល់ពីអាវុកប្រការកម្មវិធីប្រឈម ការអភិវឌ្ឍ
នូវការពិនិត្យឈ្មោះសិទ្ធិគឺជាមួយនឹងការពិនិត្យឈ្មោះសិទ្ធិផ្សេងទៀត។ អាវុកស្តាប់ជំនួយ។ អាវុកស្តាប់ជំនួយ។
In the past year, sixty-two percent of Cambodians living in the United States have suffered from Post-Traumatic Stress Disorder (PTSD) and fifty-one percent have suffered from depression, seventeen times that of the US national average of adults.1 Regarding the prevalence of PTSD within Cambodia, serious research does not exist until now. Although we have to discriminate between local Cambodians and those living overseas, perceptions of psychiatrists and psychologists are that local Cambodians also face a high prevalence of these psychosocial diseases. It is now obvious that many Cambodians today are suffering in their hearts from their previous traumatic experiences.

In this Understanding Trauma in Cambodia Handbook, we would like to emphasize that symptoms of trauma are neither a sign of character weakness nor a reason to be deprecated. Understanding the origins, reasons, symptoms, impacts, and potential treatments of such trauma is essential for everybody in Cambodia. Even many years after the Khmer Rouge atrocities, the trauma in the hearts of many Cambodians is still unresolved. The legacy of this suffering is apparent in personality attributes, attitudes, and behaviors of the young generation in Cambodia.

The main purpose of this Handbook is to provide an introduction to and basic knowledge of a complex psychological issue in an understandable way. Because the Extraordinary Chambers in the Courts of Cambodia, informally the Khmer Rouge Tribunal, is finally getting underway; many non-governmental organizations and many Cambodians are becoming more engaged in the process of national reconciliation and development, and therefore have to deal with many traumatized people. Reconciliation between individuals, regions within the nation, and between victims and perpetrators in Cambodian villages are among the main issues being tackled by many NGO outreach projects.

Although these issues are relevant for all Cambodians, current knowledge in Cambodia concerning psychological effects of the Khmer Rouge years is largely superficial. Therefore, this Handbook seeks to provide a compassionate and professional approach to dealing with traumatized people by presenting more detailed psychological and therapeutic knowledge.

We believe greater consciousness about the sociopolitical and individual aspects of trauma is one of the first steps towards individual and national reconciliation. The path to reconciliation cannot exist in this country until there is inner peace in the hearts of individuals and more conscious communication between couples and amongst families, villages, and towns.

The glossary at the end of this Handbook defines technical terms from trauma psychology used in the text of this Handbook. Our team worked hard to find suitable Khmer definitions for words such as dissociation, de-realization, freezing, and fragmenting because, to date, there is no comprehensive psychological dictionary in the Khmer language. Although a draft of an English-Khmer-French Psychology Dictionary exists, written in 1996 by a team of psychologists at the Royal University of Phnom Penh, this draft is limited and does not contain any explanations of the concepts. Some of these words are still not well known in English and are difficult to define in any language.

1 A study funded by the United States National Institutes of Health (NIH) National Institute of Mental Health (NIMH) and National Institute on Alcohol Abuse and Alcoholism (NIAAA); Mental Health Services Research at the National Institute of Mental Health (2003): www.nimh.nih.gov/publicat/pubList.cfm
Common Reactions after Experiencing a Traumatic Event

1. Being overwhelmed, confusion, loss of orientation
2. Panic, loss of control, overreactive behavior, aggression
3. Extreme avoidance, addiction to: alcohol, drugs, gambling, sex
4. Denial, blinding out, suppression
5. Flooding of feelings, persistent intrusions of thoughts and imaginations
6. Psychosomatic reactions, "flashbacks"
7. Anesthesia and freezing of feelings, "lack of compassion"
trauma


ការចូលរួម
ប្រការសិនធសីន្ទក្រនិងសិនធសីន្ទប្រការបន្ទាត់មួយ
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Ibid 7

2: Where Does the Word “Trauma” Come From and What Does It Mean?

Trauma, a medical term referring to an injury or wound, originates from the Greek language. It is derived from the Greek verb *titrosko* meaning *to pierce*, but can also mean *damage* or *defeat*. ²

In the language of daily life, a “trauma” normally refers to a highly stressful event.

The noun trauma has two meanings:
1. Physical damage to the body caused by violence or other physical impact, e.g. an accident,
2. An emotional wound or shock, often with long-lasting effect.

According to the second meaning, trauma is an emotional wound or shock that creates substantial and lasting damage to a person’s psychological development, often leading to neurosis. Trauma may result from an event or situation that causes great distress and disruption.³

Psychological trauma is essentially a normal response to an extreme event. It involves creating emotional memories about the distressful event that are stored in structures deep within the brain. In general, it is believed that the more direct the exposure to the traumatic event, the higher the risk of emotional harm.

Psychological trauma is the unique individual experience of an event or conditions in which: (i) The individual’s ability to integrate his/her emotional experience is overwhelmed, and/or (ii) The individual (subjectively) perceives a threat to life, bodily integrity, or sanity.⁴

This definition of trauma is fairly broad. It includes responses to powerful isolated incidents like accidents, natural disasters, crimes, surgeries, deaths, and other violent events. It also includes responses to chronic or repetitive experiences such as child abuse, neglect, combat, urban violence, concentration camps, violent relationships, and enduring deprivation.⁵

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Some key points to understanding the meaning of psychological trauma:

- Traumatic experiences shake the foundations of a person's beliefs about safety, shattering their assumptions about trust.
- Stress generally confuses and distracts a person's nervous system - but only for a relatively short period. Within a few days or weeks, the nervous system tends to calm down and people generally revert to a normal state of equilibrium. However, returning to normalcy is not the case where the person underwent extreme distress, either in duration (i.e., prolonged stress) or impact (i.e., result of traumatic event).
- A trauma can be re-experienced at any time – even after many years – if left unresolved.
- Regaining mental health means regaining peace of mind and body. Therefore, it is necessary to be aware of both trauma's processes and its impact.
- There are no clear divisions between stress which leads to trauma and stress which leads to adaptation.

These aspects of the phenomenon of trauma will be discussed in more detail within the following chapters.

It is an individual's subjective experience that determines whether an event is or is not traumatic.  

Essential Aspects of Psychological Trauma

- It is the subjective experience of objective events that constitutes trauma.
- The more a person believes s/he is endangered, the more traumatized s/he will be.
- Psychologically, trauma is overwhelming emotion and a feeling of utter helplessness.
- There may or may not be bodily injury, but psychological trauma is often coupled with a physiological upheaval that plays a leading role in the long-range effects.

As traumatic as single shocking events are, the traumatic experiences that result in the most serious mental health problems are prolonged and repeated, sometimes extending over years of a person's life – for example in Cambodia during the years of the Khmer Rouge Regime.

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7 Ibid
ព្រោះវិស័យជំនឿសម្រាប់អ្នកប្រឈមស្រាស់ៗ ក្នុងប្រទេសកម្ពុជា បានប្រការបង្ហាញថា ប្រព័ន្ធការដោះស្រាយបញ្ហារ荔តាខ្មែរ ក្នុងបានប្រការបង្ហាញថា ប្រព័ន្ធការដោះស្រាយបញ្ហារ荔តាខ្មែរ ក្នុងបានប្រការបង្ហាញថា ប្រព័ន្ធការដោះស្រាយបញ្ហារ荔តាខ្មែរ ក្នុងបានប្រការបង្ហាញថា ប្រព័ន្ធការដោះស្រាយបញ្ហារ荔តាខ្មែរ ក្នុងបានប្រការបង្ហាញថា ប្រព័ន្ធការដោះស្រាយបញ្ហារ荔តាខ្មែរ ក្នុងបានប្រការបង្ហាញថា


The Center for Social Development
A traumatic event is an event or series of events that causes moderate to severe stress reactions.

Traumatic events are those that create a sense of horror, helplessness, serious injury, or threat of serious injury or death. Therefore, most of the daily experiences during the Khmer Rouge years can be defined as traumatic events.

Traumatic events affect survivors, rescue workers, and friends and relatives of those who have directly suffered injury or loss. They may also affect people who have witnessed the event either first-hand or on television. Stressful reactions immediately following a traumatic event are very common. However, such reactions usually diminish or are resolved within ten days.

Evidence from studies of trauma victims demonstrate that people react to the same traumatic event differently. Some are proactive, while others merely react. Some are so overwhelmed that they are unable to act, and consequently, do nothing. Proactive people creatively seek to control a situation, causing something to happen rather than waiting. These people tend to overcome and cope well in extremely stressful situations. People who merely react tend to cope less well. Moreover people who are neither proactive nor reactive tend to develop serious physical or psychological symptoms or to die with no noticeable coping actions.

Traumatic events involve threats to life or bodily integrity or a close personal encounter with violence or death. They confront human beings with helplessness and terror, and evoke catastrophic responses.9