

destructive effects of the trauma were apparent. Rape survivors reported more "nervous breakdowns," more suicidal thoughts, and more suicide attempts than any other group. While prior to the rape they had been no more likely than anyone else to attempt suicide, almost one in five (19.2 percent) made a suicide attempt following the rape.⁷⁰

The estimate of actual suicide following severe trauma is riddled with controversy. Popular media have reported, for example, that there were more deaths of Vietnam veterans by suicide after the war than deaths in combat. These accounts appear to be highly exaggerated, but mortality studies nevertheless suggest that combat trauma may indeed increase the risk of suicide.⁷¹ Hendin and Haas found in their study of combat veterans with post-traumatic stress disorder that a significant minority had made suicide attempts (19 percent) or were constantly preoccupied with suicide (15 percent). Most of the men who were persistently suicidal had had heavy combat exposure. They suffered from unresolved guilt about their wartime experiences and from severe, unrelenting anxiety, depression, and post-traumatic symptoms. Three of the men died by suicide during the course of the study.⁷²

Thus, the very "threat of annihilation" that defined the traumatic moment may pursue the survivor long after the danger has passed. No wonder that Freud found, in the traumatic neurosis, signs of a "daemonic force at work."⁷³ The terror, rage, and hatred of the traumatic moment live on in the dialectic of trauma.

Disconnection

TRAUMATIC EVENTS CALL INTO QUESTION basic human relationships. They breach the attachments of family, friendship, love, and community. They shatter the construction of the self that is formed and sustained in relation to others. They undermine the belief systems that give meaning to human experience. They violate the victim's faith in a natural or divine order and cast the victim into a state of existential crisis.

The damage to relational life is not a secondary effect of trauma, as originally thought. Traumatic events have primary effects not only on the psychological structures of the self but also on the systems of attachment and meaning that link individual and community. Mardi Horowitz defines traumatic life events as those that cannot be assimilated with the victim's "inner schemata" of self in relation to the world.¹ Traumatic events destroy the victim's fundamental assumptions about the safety of the world, the positive value of the self, and the meaningful order of creation.² The rape survivor Alice Sebold testifies to this loss of security: "When I was raped I lost my virginity and almost lost my life. I also discarded certain assumptions I had held about how the world worked and about how safe I was."³

The sense of safety in the world, or basic trust, is acquired in earliest life in the relationship with the first caretaker. Originating with life itself, this sense of trust sustains a person throughout the lifecycle. It forms the basis of all systems of relationship and faith. The original experience of care makes it possible for human beings to envisage a world in which they belong, a world hospitable to human life. Basic trust is the foundation of