Contemplation in a World of Terror: Roots and Responses

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The experience of terror: a story

This story gives a taste of how terror is part of an infant's experience, and how we adults are affected by being close to this. It shows that our vulnerability to being overwhelmed by primitive states of mind stays with us.

When you are learning to ride a motorcycle with an instructor, you wear a radio receiver under your helmet so that he can speak to you from his own bike at a safe distance. On the day of my test, we turned off the main road to practice, circling around a block of flats. Already nervous, I could suddenly hear a baby crying in my ears: my radio was obviously tuned to the frequency of a wireless 'baby listener'! I had a direct line into a baby's bedroom nearby, although exactly where was uncertain.

At first the baby's cries seemed surreal, even a bit funny. My instructor was not contactable, driving behind me. We went round and round the block, practicing turns. The traffic was heavy.

It was hot, difficult to manoeuvre, rather claustrophobic, and the baby's cries became more insistent, more piercing. I listened in hope for the sound of a mother arriving to soothe the child. Nobody came. The cries became louder... this was now a full-throated protest. Then I could hear the tone change, subtly but certainly, from anger to something much closer to terror: would *no one* ever come?

The terror went on and on. I was transfixed, listening to those screams. I couldn't stop the bike, and we never seemed to drive out of range. Worse was the horror conveyed, the terror that also crept into me, cocooned as I was in my helmet, not fully in control on my motorcycle – utterly trapped.

I found myself increasingly filled with the most horrible imaginings, as if I was innocently about to witness something truly evil. Would no one ever come? Would I read later of a baby who starved to death in north

London? Worse, would an abusing parent arrive? Was I about to be forced to listen in a kind of Hitchcockian *Rear Window* dilemma, as some terrible crime of abuse was committed upon this tiny soul out there?

I have no doubt that the flavour, the wordless terror, of these images was communicated directly to me by that baby. That which I tasted, the baby was living. Eventually we did drive out of range, but I still remember those cries.

These events probably took less than ten minutes, and the story describes a scene enacted and re-enacted in cots up and down the country every day, but it gives you a taste of what I mean by the universality of terror as an experience.

Terror is nothing new

I want to reinforce the point that terror is something of a constant in life. The perceived source of terror changes across the ages, but whether the quantum of terror in the world has changed much is a moot point. Humankind has long been terrorised - by sabre-toothed tigers, by crucifixions, by black death, the Inquisition, dictators, by the nuclear arsenals of the cold war... There are arguments to suggest that - at least here in the UK - there is less terror around than previously. Perhaps, in our comfortable western lives, personal and societal thresholds for tolerating distress of any kind have diminished.

If we recognise the universality of terror in human experience, we might move away from labelling current political events as though they are new and somehow overwhelming, beyond ordinary thoughtfulness in terms of planning a response.

What do we mean by the word 'terror'?

There has been a shift in the popular understanding of the word 'terror', as it is now almost inextricably linked to that which results from the actions of terrorists.

This modern understanding of terror might be seen as representing a wilfully created state of destabilisation, a global crisis of confidence in the institutions fundamental to established, predominantly secular, nominally democratic, and mostly consumer-oriented societies. The purpose of this terror (we must assume the terrorist logic runs) is to allow for a radical restructuring of society in line with their ultimate political and spiritual goals.

Etymology and symbolism

Etymologically, 'terror' is linked to the Middle English word *'tre'*, which meant *to shake*, but also has links to the French word *'terre'* (or Latin *'terra'*) – meaning *earth*. I think therefore that 'terror' suggests something more grounded, or *grounding*, than 'panic'. Terror seems to carry with it the implication, or intimation, of our own mortality: a reminder that we are finally only ashes to ashes, dust to dust.

Many traditions, across all the major faiths, recommend meditations upon death and mortality, on the transience of life. The contemplative seeks a different perspective; what the psychologists would describe as a 'meta-position'. Where terror is present, could it be that as well as damage, there are also new opportunities for something of value to

be found, something far apart from deadly indifference? Does this connect in any way to the 'Dark Night of the Soul' that contemplatives through the ages have described, or do such thoughts provide a dangerous apologia for the terrorist?

Staying with the theme of words and their meanings, it is interesting to trace the etymology of the word 'contemplation', too. The *Templum* at the root of this word refers to the Roman place of auguries – a place splattered with sacrificial blood and entrails that would have shocked our clean, vacuum-packed modern world. Perhaps it is important to remind ourselves too of the echo of terror that lies at the heart of Christianity in the symbol of the cross.

The value to repressive regimes of using methods of execution that are visually striking can be seen throughout history, up to the guillotine in the terror of Robespierre's revolutionary France and beyond. Showing the grisly consequences of crime to the public works as a potent mechanism of social control. The mind of the terrorist does give us an insight into what seems to be one of their motivating factors: the drive to force seeing upon a world that they perceive as wilfully blind to its folly, corruption and repression.

The Phenomenology of Terror

Pervasiveness

I want to stress that terror has a highly pervasive quality to it, seeming to be a mental state involving and affecting the widest range of domains of human functioning.

People function in many different worlds, or 'functional domains'. For instance, there is my *internal* world of feelings, thoughts, intentions and drives, and there are also a whole series of *inter-personal* domains in which I function, outside of which it is difficult to conceive of an "I" at all. In these inter-personal domains I would include spirituality; and others include family, peer groups, as well as the related worlds of education, employment, and so on. Terror impacts upon the individual's ability to function in all of these domains.

But it also affects the way these domains function as systems in themselves, and how, in turn, these impinge upon the individual. For example, as a result of terror, airline pilots tend to lose their jobs as people stop flying; on the other hand there are more jobs for airport security staff. So terror affects the world from the inside out, but also from the outside in. It seems important to emphasise that, just as much as it affects an individual, terror is something that also affects groups of people.

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A story from my practice illustrates something of the pervasiveness of terror – at least the way it seeps into every area of a person's life, and separates him or her from the group. I have changed details to protect anonymity, but the salient facts are true.

Some years ago I met a young man of mixed race (we'll call him Darren) who was suffering from severe PTSD (Post Traumatic Stress Disorder). Two years

prior to his referral, he had been the victim of a particularly vicious racially-motivated assault, in which he had been set upon by a group of neo-Nazis who had carved a swastika into his back with a knife. He had believed that he was going to be killed during the attack.

After a trauma of this magnitude we know certain reactions are quite commonplace, and when you are studying for psychiatry exams you learn to roll this triad of symptoms off the tongue: flashbacks, avoidance and hypervigilance.

Darren began to have regular flashbacks, during which he would vividly re-live the events. One theory suggests that this is an example of the mind's desperate attempts to achieve mastery over a situation which was initially experienced as one of total powerlessness. It is as if an unconscious determination exists to find a different way out; but the scene simply plays over and over, blocking out any possibility of change. The sufferer quickly learns that associations with certain everyday occurrences, particular sights, smells and places, trigger the flashbacks. So Darren assiduously avoided any of these.

He moved out of his bed-sit (outside which the attack had occurred) and became street homeless. At the time he came to me, he was living in an abandoned car, almost totally isolated from any social contact. He reported very much what the psalmist described as "the terror that stalks at night" – except that Darren's terror stalked him both day and night. This is what psychiatrists – who are much less

poetic than psalmists – refer to as *hypervigilance*. Darren was constantly on guard against a repeat of the original terror, unable to be reassured that the threat was not imminent.

Because of the hypervigilance, he would again and again misconstrue quite ordinary situations as potential threats – for instance, any group of young white men on the streets – and would then avoid these. The more he avoided the feared situation, the less he could test out whether this fear was justified, and the more fearful it became. Month by month he withdrew from ordinary human existence.

There is an adhesive quality to terror which spreads and generalises, not only throughout an individual's life but also, I would argue, through society.

Societal PTSD

It seems to me that the world's media function – let's be generous and say unwittingly – to sustain a kind of societal PTSD, analogous to the individual condition.

In the weeks following 9/11, the endless repetition of images of the billowing fire and smoke at point of impact, of the towers falling, served as communal flashbacks, burning these images ever deeper into our memories. Then again, the continuing focus on terror in the news represents a kind of hypervigilance. Examples of terror from across the globe are collated and flashed back into our living rooms nightly. Terror anywhere is thus experienced as occurring everywhere. To make the case for a societal correlate of individual PTSD, what

about the aspect of avoidance which makes up the third of the triad of symptoms? There is, for example, a lack of media coverage of the many attempts to broker peace in the Middle East and elsewhere; a lack of interest in the many, varied, and often inspiring ground-level projects that represent non-violent means of dissent and of achieving cross-cultural and inter-faith understanding. The 'too-much-bad-news-and-not-enough-good-news' theme is an old one, but I think this is a potent and dangerous kind of avoidance. Arundhati Roy, in her highly polemical book *The Ordinary Person's Guide to Empire* writes:

Any government's condemnation of terrorism is only credible if it shows itself to be responsive to persistent, reasonable, closely argued, non-violent dissent. And yet, what's happening is just the opposite. The world over, non-violent resistance movements are being crushed and broken. If we do not respect and honour them, by default we privilege those who turn to violent means.

The lack of progress in peace-making may simply be the result of obduracy at the highest levels of political power, but as a society we have to show an appetite for the details. If, in avoiding any reminders of the pervasive terror that stalks us, we let go of all interest in the people of the Middle East and their struggles, then we have been recruited into upholding the status quo. Just as in PTSD, where the endless attempt to escape from terror paradoxically enmeshes the sufferer deeper in hopeless stasis, so does society itself become paralysed. This is what I mean

by avoidance.

Associated affective states

When trying to tease out what we understand about the nature of terror, as with any word descriptive of a mental state, it is helpful to think about two particular aspects of the mental state which it influences: the *affective state*, and the *cognitions*.

The *affective state* refers to emotions *in the here and now*. Terror is certainly associated with 'here-and-now' emotions such as panic (we speak of being 'terror-struck' or 'frozen with terror'), but, in the sense in which we are using it, it seems to suggest a state of mind that is not only more pervasive but also lasts over a much longer timescale than panic. It is better thought of as a chronic state of anxiety, doubt and despair, upon which there may well be superimposed peaks of affect that might look much like panic (although for the general population this is probably rarely so). Perhaps 'dread' would actually have been a better word than 'terror', but terror is what we have!

What about the cognitions associated with terror? These are the thoughts and/or assumptions that are most commonly associated with this state of mind.

In panic, if I think at all, I might think "I am going to die!" whereas in terror I think our cognitions have a much more complex and ruminatory quality to them. Terror evokes thoughts about one's mortality. It has depressogenic aspects, and amongst other thoughts it evokes are those related to feelings of guilt, such as: "Do we not in some

ways deserve this?" There may also be an evocation of helplessness, as though nothing I say or do can alter the facts of the matter. This is a common depressive cognition.

It strikes me that the cognitions associated with terror circle around existential questions about mortality, meaning and meaninglessness. In this sense terror describes the struggle and capitulation of reason, faced with the inevitable fact of a death that is perceived as meaningless. How can I explain that?

It is meaningless that I, or my children, should die because of a situation in far away Iraq, Ramallah, or Hebron. On a pragmatic level our deaths would change not a jot out there. Quite probably they would trigger a further round of retribution in the cycle of violence. At an existential level my experience of terror involves my questioning the value of what it is that I risk losing – my life, the people and institutions around me. I know in my heart how unquestioningly I acquiesce in the world of affluent ease that I inhabit. I justify my inaction in spite of horrors abroad and at home, on the grounds that I am busy, that it isn't my business, that I am ignorant…. But the contrast between my own humdrum worries – about which school to send my children to, which computer to buy, the whole maelstrom of consumerism – and the plight of, say, a family in Fallujah, leaves my life seeming unutterably shallow and meaningless. So there is depression, anxiety, guilt and, beneath all of these, the nagging thought that my death, if it came, would somehow be meaningless. How painful

it is to contrast this with the terrorist who, at least in his self-portrait, claims to face death with the equanimity of one who sees both meaning and infinity in his dying.

Of course my death will come. The question that perhaps terrorism helps me avoid asking myself is whether it would be any less meaningless if I died not at the hands of a terrorist, but of natural causes; drowning, for instance, in a lake of consumer durables.

Terror as a **way out** *of thinking*
Perhaps terror can sometimes represent a way out of thinking about something unbearable. This is a disconcerting idea: that in some sense we in the West might need terrorists to distract us from the greater fear of facing the emptiness of our world. There is an analogous situation in the mysterious and frightening group of mental illnesses known as the psychoses, which include illnesses such as schizophrenia.

One way of understanding the mental processes that occur in these often terrifying states is that the process of mental breakdown (hearing voices, believing delusions, having one's thoughts interfered with) paradoxically serves a protective function – 'rescuing' the mind from having to confront much deeper, bleaker, and ultimately unbearable emotional pain. In most cases of psychosis, sadly, this 'self-cure' becomes worse than the affliction it served to defend against.

If one view of terror is that it is analogous to a kind of societal psychosis, then we must at least be prepared to ask the question: *what*

painful reality is this terror helping us not *to face?* Perhaps everybody has to find their own answer to that question, but I would suggest that it has something intimately to do with the ultimate emptiness in the consumer dreamworld that pours forth upon us from almost every billboard, TV and magazine.

Terror and the drive to create primitive narratives
The psychoanalyst Melanie Klein was particularly concerned about the development of the mind. In particular, through minutely detailed observations, she charted some of the most primitive states of mind, which can be ascribed to very young infants. In this work she formulated a theory of two psychological 'positions' (or 'points of view'), which she referred to as the *paranoid schizoid position* and the *depressive position*.

The paranoid-schizoid position refers to the most primitive state of mind, which Klein believed predominates in an infant, and generally somewhat less as we grow older. In its most primitive state, the mind is able only to perceive things in an 'all-or-nothing' way, like a light switch that is either on or off. From this perspective, the mother is condemned always to be either a powerful saint or a terrorising devil.

Thus, when the baby's mother is present and can soothe the baby, she is perceived as all good, ever caring, and an overwhelmingly powerful force. When she is busy somewhere away from the cot, or is present but failing to respond in a soothing-enough way, both experiences are awful, both are

attributed to the same 'bad' mother, who provokes terror and violent rage in the infant. It is as if in the infant's mind both the absences and the human failings of the real flesh-and-blood mother get split off and are kept well away from the ideal 'good' mother. These less-than-satisfactory parts then go to form an entirely separate bad mother image, which contains all of the baby's own rage and violence. This in turn enflames, and terrorises, the infant. This is the fundamental split (schism) that the schizoid aspect of the mind deploys to make a kind of sense out of a world that contains terror. By dividing it into light and dark, good and bad, a primitive narrative is formed, because that which can be told, can be more easily tolerated.

This unconscious strategy has the advantage of not only giving a story to what would otherwise be terrifying chaos, but also preserving intact the ideal of an all-good mother. Put into words it might run as follows: "For now, it is far less uncomfortable to experience having a terrorist out there and a good mother here, than it is to have a terrorist in me and no good mother at all."

Psychosis as a 'narrative patch' over terror…
States of terror can be seen as representing a kind of rip in the comfortable fabric of what we have assumed to be reality. We are made aware of another dimension, a whole new perspective, which can be unbearable. What Klein's theory suggests is that encountering such a rip tends to drive the mind to create a narrative "patch" to cover the hole by

making some – any – kind of sense of it. Let me give another example to explain what I mean.

I looked after Peter, a boy of thirteen, a while ago. He had the misfortune to suffer from a very early onset schizophrenic illness. He described to me a strange series of events that began with a growing sense of unease, or dread – terror, if you like. He described a terrible sense of foreboding, as if something awful was going to happen, although he had no idea what that might be. On the surface there were plenty of good reasons why he might have been an anxious and unhappy boy, which I won't go into. As the weeks went on, his levels of anxiety and dread grew and grew. He became convinced that something fundamental had happened which had 'torn up the rulebook', but he had absolutely no idea what this was. The unknowing was torturous. He became more and more withdrawn, spent almost all of his time in his bedroom, sleeping little if at all, and emerged only to pick up food from the kitchen.

About a week before I first saw him, he described a dramatic and dark epiphany. Quite suddenly and out of the blue he realised that his thoughts were not private, believing that a microchip had been inserted in his brain by some outside force which was now monitoring him via a satellite, experimenting on him. Ultimately, he was sure, it would kill him like a rat in a laboratory. He realised he was being watched, and that cameras had been installed everywhere, which tracked his every move. His mother described a dramatic change in his behaviour

following the arrival of this delusional narrative – ironically she described how, at least initially, he seemed excited, high, almost supercharged. He seemed less fearful, and much more irritable; outraged that anyone could think of treating him so shoddily.

The terror this boy experienced before the eruption of his full-blown psychosis is associated with what we call a 'delusional mood'. Many patients describe the arrival of the delusions after a delusional mood as a relief – because it seems to them incontrovertibly that they now know what they are up against. This is what we mean by describing the psychotic delusion as a 'narrative patch'.

How does this relate to the contemplative trying to hold a different perspective, trying to hold onto his or her head in this ripped-up world of terror and uncertainty that we inhabit? I hope it shows that we need to exercise great caution about the many simplistic narratives that are held up to us as explicatory models for what is going wrong. There is a deep drive to fasten on to any narrative that offers us certainty. The division of the world into evil empires, axes of evil, the "with us" and "against us", bears all the hallmarks of a paranoid-schizoid response to uncertainty. What the contemplative life offers in contrast has never been certainty or relief, but the capacity to tolerate uncertainty. This is part of its value.

Dread and terror in the contemplative journey
In *Contemplative Prayer* Thomas Merton writes of the absolute

inevitability of a 'dark night of the soul' in the practice of contemplative prayer, during which the individual experiences dread. This is both an experience of his "infidelity to the truth of our life", and, as follows, of:

"Despair of his emptiness without God... he seems to lose the conviction that God is or can be a refuge for him. It is as if God himself were hostile and implacable or, worse still, as if God himself had become emptiness, and as if all were emptiness, nothingness, dread and night."

The key point that Merton makes is to emphasise that the experience of this is absolutely central and inevitable in the contemplative life. Any notion that meditation is a way out of confronting this painful reality is plainly misguided. He writes:

"This is the genuine climate of serious meditation, in which, without light and apparently without strength, even seemingly without hope, we commit ourselves to an entire surrender to God."

Returning to our thoughts about Melanie Klein and the paranoid-schizoid position, it is in the second of her two positions that she sees something of the fulfilment of our progress towards emotional maturity. This second position goes by the less-than-reassuring name of the *depressive position*. From the depressive position the individual is able to accept the wholeness of the real object or person before him; that means an acceptance of the greys rather than the simpler blacks and whites. The position is seen

as 'depressive' because in achieving this stance in respect to life and to the most important people around us, we first have to mourn the loss of that idealised 'good mother' figure. In a sense we are described as achieving a state of being older, wiser, and slightly sadder.

We certainly shouldn't see people as progressing through the paranoid-schizoid position, then simply 'graduating' into the depressive position, because the interplay between the two is a constant dynamic throughout our lives. There is a lot of paranoid-schizoid thinking still around in our modern experience of terror, as, for example, in: "You are either with us or you are against us."

Terror as an engine for action
If we return to my motorcycling experience of the baby crying, it shows how powerfully the experience of terror tends to force a participant into action. All that a tiny baby can do is scream, but babies do become effective at this. As an unwitting witness to the terror, my own reciprocal distress arose partly because I felt so powerless to act in any way that would relieve the painful feelings. The drive to action is often overwhelming to those faced with terror. Let me tell you another story to illustrate this.

A thirteen year old girl, Tracy, was under my care a couple of years ago, suffering from severe obsessional compulsive disorder (OCD). OCD is driven by anxiety, or terror. Very often the terror is associated with irrational fears, particularly of contamination, and this was the case with Tracy. It had also

been the case for her mother, and her grandmother too.

Although she feared all kinds of germs, Tracy had a particular terror of being contaminated by pricking herself on a dirty hypodermic needle. No matter how many times I or anyone else spoke to her, or went through the maths to look at the vanishingly small probability of sustaining a fatal needlestick injury, she could not be reassured. Part of her mind could see how unreasonable her position was, but she was powerless to change it.

For the nine months preceding her admission, she had refused to leave the house as she feared brushing against a drug addict, or stumbling into a refuse sack containing an unsheathed needle. But avoidance alone did not dampen the terror and she developed a huge range of obsessional thoughts and rituals to further protect her. Being prevented from completing them would result in catastrophic anxiety, and sometimes dramatic violence. She had to count the number of times she swept her floor, which had to be 20 or 26 times (no other number of sweepings would do). She had to run through a 26-point checklist in her mind to be sure that she had done everything else just the right number of times. Any

mistakes in this task meant going back to the beginning to start again. She ordered all her belongings in millimetre-precise arrangements. She washed and re-washed her hands until they were bleeding and raw. She recruited her family into completing many of these compulsions as well. The whole family was a system in utter paralysis and ruin.

Now how is this story relevant to our thinking about terror?

Well, the experience of terror is a powerful drive to action – as if the action will somehow stave off the terror. In OCD it is the irrational action of checking, washing, counting, but in the worldwide terror we inhabit there is an equally powerful drive to act. It is as if not to act would inevitably and immediately leave us helplessly vulnerable, even though precisely how we should act, and the potential ramifications of these actions, remain unclear. There seems to me to be something obsessive and compulsive in this response. A contemplative approach might help to redress the balance, reducing the risk of compulsive, and impulsive, action – as we remember that prayer, meditation and contemplation are actions too.