Affect Theology:

An Examination of Pneumatology and its Relation to Trauma and Recovery

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"What does it mean that when Jesus rises, he rises with wounds?" -Shelly Rambo

Abstract

This essay investigates the intersection between affect theory, theology and trauma induced by domestic violence. Our current understanding of how to address such trauma is limited by epistemological regimes that privilege a conception of healing based solely on reason (logocentrism). I argue that affect theory can help to expand our understanding of trauma induced by domestic abuse by addressing alternative healing strategies that transcend rational discourse. In particular, I suggest that certain Christian theological concepts, such as the Trinity and Pneumatology, can enhance how affect theory is utilized as a healing strategy for domestic abuse victims. In other words, perhaps "affect theology" can provide a new therapeutical space for thinking about how domestic abuse victims negotiate the "affects" of trauma by drawing on theological concepts of healing. In specific terms, by examining the affectual nature of both trauma and the Trinity, I suggest that pneumatology presents a more holistic understanding of healing for survivors of domestic violence, particularly those who suffer from complex post-traumatic stress disorder (C-PTSD).

Key Words

Affect Theory, complex post-traumatic stress disorder (C-PTSD), pneumatology, Trinity, trauma, survivor/victim, domestic violence/private torture

Introduction

According to The World Health Organization, one in three women, worldwide will suffer the trauma of domestic violence. Every nine seconds a woman is assaulted in the United States alone (The World Health Organization 2016: 1). Domestic violence is an insidious enterprise of power and control, most often accomplished through coercion and psychological abuse. Psychological abuse increases the trauma of physical and sexual abuse; a number of studies have demonstrated that psychological abuse independently causes long-term damage to a victim's mental health (see van de Kolk). Victims¹ often experience depression, post-traumatic stress disorder, suicidal ideation, low self-esteem, and difficulty trusting others (Tetlow 2016: 191). Subtle psychological abuse is not only equally harmful, but is in fact more destructive than both overt psychological abuse and direct aggression (The World Health Organization 2016: 1). The harm induced by psychological abuse—or what legal scholar Tanina Tetlow (2016: 195) more effectively labels "private torture"—has not only serious implications for the traumatized individual, but political implications for our contemporary understanding of both gender and social justice. In this essay I examine how the psychological trauma of complex post-traumatic stress disorder (C-PTSD)² can be mitigated by placing affect theory in dialogue with the Christian conception of pneumatology. Thus, I argue that "affect theology" can possibly be utilized as an alternative resource for thinking about new therapeutic approaches towards the healing of trauma in domestic abuse victims.

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¹ There is contention with in the trauma community on referencing traumatized agents as "victims" versus "survivors". Within the "forgiveness" movement in psychology the term "survivor" has increasingly gained political correctness due to the concept of agency. Agency, though empowering also places the burden of healing solely on the traumatized agent, and thus in this paper I will use the terms victim and survivor interchangeably (Lamb 70).

² "post-trauma" — 'post' being somewhat of a misnomer due to the cyclical nature a trauma

Affect theology is a blend of affect theory and pneumatology (the study of the Holy Spirit). Affect theology seeks to understand how the Holy Spirit as affect can be mobilized by the physiognomy (Ratzinger 326) of the Trinity to empower survivors of domestic violence. In more simple terms, theology provides a symbolic language that can accommodate the multidimensionality of the affect induced by domestic abuse. The affect of abuse is not a question of either/or but both/and; that is, it refers to a space of liminality, and living with the liminal is the first step towards healing. In "Trauma and Faith: Reading the Narrative of the Hemorrhaging Woman" (2009), Shelly Rambo speaks to the complexity of this issue:

The challenge for persons experiencing trauma is the challenge signaled in the word itself—survival; the challenge of *living on* in the wake of the traumatic event or events. Jacques Derrida examines the etymology of the French word *survivre*, noting that, if directly translated, it means "over living" or "living on." His exploratory play with the term highlights a middle position between death and life, in which life is profoundly marked by the experience of death. For survivors, trauma is not isolated to an event but, instead, describes the ongoing crisis of living. (Rambo 2010: 239).

Drawing on Rambo's observations I claim that the advantage of affect theology is that it can accommodate this middle position, this liminal³ space between life and death. Which provides victims with an opportunity to begin to process trauma and thus potentially heal.

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³ The concept of the "liminal" is based on the work of Arnold Van Gennep and Victor Turner's theory of ritual. The "liminal," a word derived from the Latin word "*limen*," refers to the threshold, or the piece of wood or stone that serves as the foundation for a doorway. In their model, Genep and Turner posit that rituals take place in the "space in between spaces," where people have left one room—a symbol for a social identity or stage in life—but have not yet entered another room. Liminality consists of a separation from the ordinary physical and social context, and entry into an alternative state of experience. This process is characterized by both the suspension of ordinary rules of behavior and the dissolution of standard measurements of space and time. Liminal experience thus provides an opportunity for transformation, in which ritual participants are temporarily uninhibited by the expectations that typically control them in more structured time. Yet, a so-called rite of passage is not designed to provide for permanent liminal freedom. It is a bubble of liberated time within which it is possible to perform important cultural work to create change in the psychology of ritual participants. A rite of passage thus moves an agent out of structured time into transcendent liminal time, and then back into structured time, in order to occupy a new social identity (Frankl 55).

In her groundbreaking work Trauma and Recovery: The Aftermath of Violence-From Domestic Abuse to Political Terror (1979), Dr. Judith Herman argues survivors need three things to begin to recuperate from trauma: a safe space, a reconstruction of the trauma narrative and the restoration of the connection between survivors and their community. In this essay, I suggest that the affective significance of Herman's model can be reconfigured in theological terms. For instance, mystical experience can be interpreted as a state of being that provides a safe, if not transformative space for victims to process trauma (Jantzen 1995: 315). Moreover, Herman's notion of reclaiming the traumatic narrative can be interpreted theologically in relation to Johann Baptiste Metz's (1977) concept of "Dangerous Memories," which refers to how the narrative of the passion empowers victims of trauma. In addition, Herman's third therapeutic category of cultivating healthy relationships can be read theologically in relation to Cardinal Joseph Ratzinger (1998) and Jennifer Erin Beste's (2005) conceptualization of *communitas*. Ultimately, the affectual nature of the Holy Spirit, which I claim connects these three theological concepts mysticism, "dangerous memories," and *comunitas*—expands the discourse surrounding the contemporary study of complex post-traumatic stress disorder (C-PTSD) by offering an affectual answer to an affectual problem.

Theory and Methodology

In this essay I draw on draw on theological concepts of pneumatology and the Trinity to expand current understanding of affect theory in relation to trauma induced domestic violence. To achieve this aim I engage in a textual analysis that draws on both theology and psychology. Textual analysis is used to assess the theological and psychological strategies that have been traditionally deployed to interpret the meaning of "healing" in relation to C-PTSD. I claim that traditional understandings of recovery (healing) are limited and can be enhanced by constructing a more comprehensive dialogue with what I refer to as "affect theology."

First I examine I examine the history, definition and current conceptualizations of affect theory by drawing the work of Gregory Seigworth and Melissa Gregg, and Donovan Schaeffer. I argue that affect theory is an underutilized method for understanding how knowledge and power shapes the way we view and value healing in relation to C-PTSD. In particular I suggest that affect theory provides a unique lens to examine modes of power/ knowledge that escape the purview of rational (logocentric) modes of discourse and are thus potentially more accessible to agents suffering from C-PTSD stemming from domestic violence. In the second part of this essay, I suggest that both trauma and C-PTSD are grounded in affect. I begin by addressing the psychological and neurobiological components of trauma in relation to affect theory by drawing on the work of Judith Herman, Cathy Caruth, Sigmund Freud and Bessel van der Kolk. My third section makes the case for the assessment of the Christian theological concepts of pneumatology and the Trinity as affect by drawing on the works of Shelly Rambo, Grace Jantzen, Johann Baptiste Metz, Cardinal Ratzinger and Jennifer Erin Beste. The aim of my fourth section being the presentation of how these theological conceptions not only mirror Judith Herman's secular taxonomy of trauma recovery, but further it. In my fifth and final section, I draw on the theorists

above to analyze how theology can be deployed by victims of domestic abuse to access the unrealized and potentially healing power of affect.

Part 1: Affect Theory

How does one examine something that cannot be articulated in rational terms? This is the quandary of affect: no one can quite agree on what it is. Affect tends to be defined by disciplinary requirements, and has become a viable concept to a number of fields of research, including cultural studies, sociology, geography, neuroscience, cognitive science, philosophy, psychology, feminism, gender and sexuality studies, politics, and religious studies (Murphie 1). In basic terms, affects are visceral forces that operate beyond conscious awareness and yet they play a vital role in shaping our relationship with self and other.

There are two mains ways of defining and understanding affect based on the work of Gilles Deleuze and contemporary affect scholar Donovan Schaeffer. Deleuze is significant for his contribution in distinguishing affect from emotion (Seigworth and Gregg 6). This link is integral to the ability to identify the trauma of domestic violence as affect. In *Religious Affects* (2015) Donavon Schaeffer presents the second more complex understanding of affect that coassmbles (Silvan Tomkins's word) with the cognitive. This paracognitive form of affect that Schaeffer labels *phenomenological affect* (28) is not exactly non-cognitive nor rational. Paracognitive affects have fuzzy boundaries that sometimes overlap and combine with rational modes of thought. They "hover around, rather than beneath, the line of conscious awareness" (28). This open relationship between affect and logos is significant in understanding how theology can be activated via narrative to empower agents traumatized by domestic violence.

Another important way of scaffolding the significance of affect theory in relation to C-PTSD is neurobiology. For example, in his work, *The Autonomy of Affect* (1995), Deleuzian affect scholar Brian Massumi exemplifies how trauma can be understood through a

neurobiological lens. He explains this through his experiment with the brain and "the missing half second":

Experiments were performed on patients who had been implanted with cortical electrodes for medical purposes. Mild electrical pulses were administered to the electrode and also to points on the skin. In either case, the stimulation was felt only if it lasted more than half a second: half a second, the minimum perceivable lapse. If the cortical electrode was fired a half-second before the skin was stimulated, patients reported feeling the skin pulse first. The researcher speculated that sensation involves a "backward referral in timen-in other words, that sensation is organized recursively before being linearized, before it is redirected outwardly to take its part in a conscious chain of actions and reactions. Brain and skin form a resonating vessel. Stimulation turns inward, is folded into the body, except that there is no inside for it to be in, because the body is radically open, absorbing impulses quicker than they can be perceived, and because the entire vibratory event is unconscious, out of mind. Its anomaly is smoothed over retrospectively to fit conscious requirements of continuity and linear causality. (Massumi 1995: 89)

Massumi goes on to term the "half second" as the "virtual" because it refers to something that happens too quickly to have happened. Thus the body is as immediately virtual as it is actual. "The virtual, the pressing crowd of incipiencies and tendencies, is a realm of potential. In potential is where futurity combines, unmediated, with pastness, where outsides are infolded, and sadness is happy. The virtual is a lived paradox where what are normally opposites coexist, coalesce, and connect; where what cannot be experienced cannot but be felt-albeit reduced and contained" (Massumi 94). Since the virtual is unlivable even as it happens, it can be thought of as a form of superlinear abstraction that does not obey the law of the excluded middle (i.e. the duality). It is liminality; it is play. Though it is organized differently, it is also inseparable from the concrete activity and expressivity of the body. Thus the body is as immediately abstract as it is concrete; its activity and expressivity extend, as on their underside, into an incorporeal—yet perfectly real—dimension of pressing potential. Massumi's complex yet thorough explanation of the neurobiological aspects of affect is helpful in connecting the affectual nature of both theology

and trauma, to investigate potential healing connections. Through understanding affect in its Deleuzian, phenomenological and neurobiological formations I connect the affectual ancestry of both the trauma from domestic abuse and theology.

Part 2: Trauma as Affect

Trauma cannot be signified. "Psychological trauma is an affliction of the powerless. Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection and meaning" (Herman 1992: 33). In broad terms, trauma is "the delayed manifestation of a psychic wound sustained during an experience that has happened too quickly to allow registration and processing of the event at the time of its occurrence" (Atkinson and Richardson 2013: 4). In her work, Trauma and Recovery: The Aftermath of Violence – From Domestic Abuse to Political Terror (1992), Judith Herman states that the ordinary response to atrocities is to banish them from consciousness. "Certain violations of the social contract are too terrible to utter aloud: this is the meaning of the word *unspeakable*" (intro). As trauma is ineffable, it escapes language and cognition. It rests in a part of the brain that cannot know the source of its own experiences, and therefore cannot understand its own intentions, described in Massumi's "The brain and the missing half second." Trauma thus cannot be rationalized; it meets all of our previous summary points of affect. Trauma is the engulfment of the ego in memory. However, memory might be better understood not as unconscious memory but rather memory without consciousness, as cellular memory is present in the entire body and does not necessarily involve cognition.

One of the most prominent trauma researchers, Cathy Caruth, in *Unclaimed Experience: Trauma, Narrative and History* (1996) reiterates a Deleuzian and Massumi-esque interpretation, incorporating the neurobiology of trauma into her work. In accordance with the views of the American Psychiatric Association and its definition of Post-Traumatic Stress Disorder, Caruth holds that massive trauma precludes all representation because the ordinary mechanisms of consciousness and memory are temporarily destroyed. Instead, she suggests, there occurs an

undistorted and—her key term—*literal* registration of the traumatic event that, dissociated from normal mental processes of cognition, cannot be known or represented but, engraved in brain and body, manifests itself belatedly in the form of traumatic nightmares and other repetitive phenomena (Caruth 6). In other words, a memory of trauma becomes present reality, in a gap of consciousness, or Massumi's "missing half-second." "Folk wisdom is filled with ghosts who refuse to rest in their graves until stories are told" (Herman 4). Thus a significant aspect of recovery for survivors of trauma is regaining a "voice" about their experiences, which helps to accomplish the restoration of social order.

In *Beyond the Pleasure Principle* (1920), Sigmund Freud gives us an exemplar of this enigma as he attempts to conceptualize trauma through his illustration of a train accident. His example—an accident from which a person walks away apparently unharmed, only to suffer symptoms of the shock weeks later—most obviously illustrates, for Freud, the traumatizing shock of a commonly occurring violence. "Yet the recurring image of the accident in Freud, as the illustration of the unexpected or the accidental, seems to be especially compelling, and indeed becomes the exemplary scene of trauma *par excellence*, not only because it depicts what we can know about traumatizing events, but also, and more profoundly, because it tells of what it is, in traumatic events, that is not precisely grasped. What returns to haunt the victim, these stories tell us, is not only the reality of the violent event but also the reality of the way that its violence has not yet been fully known" (Caruth 6).

So where does the violence go when it has not yet been consciously processed? How and when does it return to be processed? I want to focus in more specifically on trauma induced by domestic violence through the experience of survivors struggling with post-traumatic stress disorder (PTSD) and complex post-traumatic stress disorder (C-PTSD). PTSD is most commonly

found in single incidents of trauma such as Freud's train accident, whereas C-PTSD is usually diagnosed in survivors of repeated trauma induced over long periods of time such as child abuse or domestic violence. As research on C-PTSD is less well known, I will use each term interchangeably with regards to neurobiology. PTSD develops following exposure to events that are intensely distressing. Intense stress is accompanied by the release of endogenous, stressresponsive neuro-hormones, such as cortisol, epinephrine, and norepinephrine, vasopressin, oxytocin, and endo-genous opioids. These stress hormones help the organism mobilize the required energy to deal with the stress, ranging from increased glucose release to enhanced immune function. In a well-functioning organism, stress produces rapid and pronounced hormonal responses (van de Kolk 52). However, chronic and persistent stress inhibits the effectiveness of stress response and induces desensitization. PTSD/C-PTSD is a normal response to an abnormal situation. It is affectual in the neurobiological sense in that it meets Caruth's description of a "gap in consciousness and representation. Thinking back to Massumi's "missing half second," C-PTSD can further be presented as affect when observing the traumatized brain according to Dr. Bessel van Der Kolk (2014), after trauma, the world is experienced with a different nervous system. When the brain's alarm system is turned on during a traumatic event or repeated traumatic events it automatically triggers preprogrammed physical escape plans in the most instinctual, or [primitive], part of the brain. The nerves and chemicals that make up our basic brain structure have a direct connection with our body. When the [primitive] brain takes over, it partially shuts down the higher brain, one's conscious mind, and propels the body to run, hide, fight or on occasion, freeze. These physiological responses are useful and/or life-saving in survival situations, but for sufferers of prolonged—seemingly non-escapable traumas such as domestic violence—the normal response is blocked or otherwise prevented from taking effective

action; the brain keeps secreting stress signals, and the brain's electric circuits keep firing in vain long after the traumatic event(s) occur, keeping survivors in a constant liminal/affectual state of action (van der Kolk 54). This is not unlike Massumi's brain sensation that involves a "backward referral in time—in other words, that sensation is organized recursively before being linearized, before it is redirected outwardly to take its part in a conscious chain of actions and reactions" (89).

How then can survivors escape this autopoetic loop of affectual despair? Trauma therapy is already difficult for most survivors due to its affectual nature. Van der Kolk touches on this in The Body Keeps the Score (2014), when asking how one might attempt to take a medical history of trauma. How can we quantify violence that has not yet been fully experienced? Memories that exist in unordered fragments, that are stored in the missing half second or even ask survivors to relive the terror? In his section on "Amnesia, Dissociation and Re-enactment" he presents the case of Irene, a woman who was hospitalized after her mother's death from tuberculosis. Irene had no memory or narrative account of the death of her mother but would stare at her empty bed and then begin to care for an imaginary person. She had no conscious memory of her mother's death, but was compelled to act out the events of it physically. This is "automatism", conveying the involuntary, unconscious nature of Irene's actions (van der Kolk 181). Could prayer ministry, inviting in the Holy Spirit, alongside secular methodologies be effective? Since trauma is situated in these sub-cortical areas of the brain, we need to do things that change the way people regulate these core functions- which cannot be done by words or language alone. Prayer and meditation stimulate the frontal cortex:

Using new scanning techniques, neuroscientists have discovered that certain areas of the brain light up which indicate positive emotions and good mood in

Buddhists and cloistered nuns in a state of prayer. There is brain activity in the left prefrontal lobes. The area is linked to positive emotions, self-control and temperament. (Burke 2017: 5)

Irene's case also touches on the narrative component of the healing of the affect of trauma.

Current psychological treatment methodology for sufferers of C-PTSD according to the National Center for PTSD include Cognitive behavioral therapy (CBT) which research shows is the most common type of counseling for PTSD. There is also a similar kind of therapy called Eye Movement Desensitization and Reprocessing (EMDR) that is used for PTSD. While thinking of or talking about memories patients focus on other stimuli like eye movements, hand taps, and sounds. Also, medications such as selective serotonin reuptake inhibitors (SSRI) have been shown to be effective in coping with the anxiety and depression that comes with dealing with PTSD. While these therapies in conjunction can help survivors of trauma cope with symptoms, medical professionals assert that one cannot be "cured" from PTSD/trauma. Dr. Bessel van der Kolk reiterates this reality in his thorough examination of "The Psychobiology and Psychopharmacology of post-traumatic stress disorder (PTSD)" (2001):

Once people have developed PTSD, one would initially select either an SSRI or a tricyclic drug, with a willingness to introduce a second drug, either an anticonvulsant, mood stabilizer, or benzodiazepine after a few weeks if response is only partial. Choice of the second drug would be guided largely by the symptom profile. In chronic PTSD, in which patients tend to have complex symptom profiles, it is useful to keep abreast of emerging studies of symptoms such as aggression, impulsivity, and self-destructive behavior. At this point, there is no evidence that any drug is particularly effective in the treatment of dissociative phenomena (s61).

Van der Kolk crystalizes the question of whether C-PTSD/PTSD can be healed versus managed via secular modalities. If trauma is affect, something that resides outside of rationality

and consciousness, then does that mean to heal traumatic affect, another form of affect must meet it? How do we make sense of the trauma of domestic violence, a complex and nuanced affectual phenomenon, within the limits of bifurcated terminology such as victim vs survivor when most agents live liminally in between? Thus in my next section I examine how theology, specifically the affect of pneumatology could possibly be an untapped resource for traumatized agents suffering from C-PTSD. How does the invocation of the Holy Spirit compare to empirical/secular methodologies? Can affect theology promote advocacy or offer a more complete healing for survivors?

Part 3: Pneumatology as Affect

3.1 History of Trauma and Theology

Trauma is ubiquitous to the Gospel. The study of Christian theology, specifically pneumatology is comorbid with the study of trauma, as Christ and his witnesses were themselves traumatized individuals. It is the trauma on the cross that makes room for the coming of the affect of the Holy Spirt. Unacknowledged and unhealed, trauma often leads to further violence, either against oneself or others, and thus to more trauma (v. D. Hunsinger 2011: 9). I will suggest that with knowledgeable intervention and wise support, however, trauma may be healed via theology, and may even become "a catalyst for growth and transformation" (v. D. Hunsinger 2011: 9) i.e. post traumatic growth.

Theologians have been faced with the problem of suffering under God as soon as people began to believe that God was omnipotent. Is God responsible for suffering? Does God will it? Questions about God's will, power, and presence are all central for Christians interpreting their experiences of suffering and the suffering around them. These theological quagmires have expanded the classical questions of the theodicy. Theodicies are the theoretical practice of reconciling claims about the goodness of God with the presence of evil in the world (Rambo 2009: 238). While theodicies might provide explanations, the degree to which explanations are helpful to the healing process is unclear. In her work, "Trauma and Faith: Reading the Narrative of the Hemorrhaging Woman" (2009) contemporary trauma theologian Shelly Rambo expresses a similar sentiment: "Though there are many explanations of how a good God can be reconciled with the evil in the world, I have not found theodicies sufficient to address the realities of

trauma. This discourse, which privileges reason and totalizing explanations, seems to "miss" (or dismiss) the fractured landscape of trauma and fails to offer wisdom that can satisfy or cure" (2009: 238). The work of theologians such as Jurgen Moltmann (1920-1999), Karl Rahner (1904-1984) and his contemporary Johann Baptist Metz (1928-) were pivotal in attempting to answer such questions in light of the incomprehensible mass trauma of the Holocaust. Moltmann revolutionized Christian interpretations of the crucifixion by claiming that God did not stand outside of the event of the cross but, rather, experienced the suffering. Claiming Jesus as no less divine on the cross, Moltmann made space, a new threshold, for the liminality of suffering. Reformulating the concept of the Trinity and dismantling notions of divine impassibility, Moltmann provided a space to process the horror of the Holocaust. Johann Baptist Metz developed a theodicy via the dangerous memory/narrative of the crucifixion and anamnestic reason (Vento 10). In his view, the concept of the Christ who suffers with us is essential as it provides the opportunity for agents to not languish in the liminality of trauma alone. The mass trauma of the Holocaust induced an affective turn not only in secular academics but in theology. Classic affirmations about God were set alongside the extremities of human experience. Womanist and feminist theologians also countered traditional theologies of the cross, arguing that theologies of the cross have glorified suffering and provided sacred validation for the perpetuation of oppressive systems for persons and communities on the margins (Rambo 5). While contested, the cross was understood to be the site from which questions of suffering and violence are primarily engaged. The dovetailing of theology and trauma studies by the work of contemporary theologians such as Shelly Rambo (1960-), Serene Jones (1959-) and Jennifer Beste (1975-) suggest that trauma poses unique challenges, transforming the discourse about suffering, God, redemption, and theological anthropology in significant ways. Their work

testifies to the fact that trauma is not simply a category that can be confined to the fields of psychology and counseling; it has broadened to present profound challenges to epistemology, constructions of the self, and theological understandings of time. (Rambo 2015: 11).

Theology, having its own history birthed from the wounds of trauma has an undervalued advantage in meeting the specific healing needs of survivors of domestic violence who suffer from C-PTSD. As shown previously, secular modalities attempt to manage the symptoms of C-PTDS, claiming a cure uncertain. Judith Herman states that to begin to recuperate from trauma survivors need three things: a safe space to process, a narrative to reclaim, and healthy relationship connections. Theology, with the specific nature and function of the Trinity cannot only provide these same services, but via the affectual aspect of the trinity and the Holy Spirt, theology may be able to provide a tool that could possibly heal trauma, specifically the trauma of domestic violence.

3.2 History of Pneumatology

In this section, I introduce and explain the theological concept of pneumatology. After presenting the history and problematics of pneumatology I suggest that it is also has an affectual nature. To further this hypothesis, I investigate how pneumatology is embodied within the Christian concept of the Trinity as an affectual force through Ratzinger's (1998) investigation of St. Augustine's physiognomy (Ratzinger 326).

Pneumatology in Christian theology is the study of the Holy Spirit. The Holy Spirit is part of the Christian Trinity. Jurgen Moltmann describes the Spirit as the Spirit of life, the pulse of the "yes" in existence that cannot be extinguished (Rambo 2015: 18). The Holy Spirit is the affectual force living within the body of Christ which traditionally appears from the wounds of the trauma of the passion. In the book of John, Jesus describes the Holy Spirit as something

better than even him, saying "But very truly I tell you, it is for your good that I am going away. Unless I go away, the Advocate will not come to you; but if I go, I will send him to you" (John 16:7) and in 14:15-20:

If you love me, keep my commands. And I will ask the Father, and he will give you another advocate to help you and be with you forever—the Spirit of truth. The world cannot accept him, because it neither sees him nor knows him. But you know him, for he lives with you and will be in you. I will not leave you as orphans; I will come to you. Before long, the world will not see me anymore, but you will see me. Because I live, you also will live. On that day you will realize that I am in my Father, and you are in me, and I am in you.

The advent of the Holy Spirit and its relationship between the Father and Son in scripture is explained by the concept of the trinity. Traditional⁴ Christianity has affirmed the claim that there is one God, and three persons—Father, Son, and Holy Spirit—each of whom is God. In 675 C.E., the Council of Toledo framed this doctrine as follows:

Although we profess three persons we do not profess three substances but *one* substance and three persons ... If we are asked about the individual Person, we must answer that he is God. Therefore, we may say God the Father, God the Son, and God the Holy Spirit; but they are not three Gods, he is one God ... Each single Person is wholly God in himself and ... all three persons together are one God (Murray 1).

The Holy Spirit is God's power in action, God's active force. (Micah 3:8; Luke 1:35). God sends out the Spirit by projecting his energy to any place to accomplish his will. (Psalm 104:30; 139:7). In the Bible, the word "spirit" is translated from the Hebrew word *ru'ach* and the Greek word *pneu'ma*⁵. Most often, those words refer to God's active force, or Holy Spirit

1928-2010).

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⁴ I focus on traditional Christian understanding of the physiognomy of the Trinity, though the traditional conceptualization of the Trinity in its genesis which is gendered male as it is already highly elusive to investigation. Ultimately in this paper I argue for the power of the Spirit that transcends all binaries including gender. Though there are many feminist theologians who offer astute readings within a non-affectual paradigm (see Mary Daly

(Genesis 1:2). In this description the Holy Spirit is reminiscent of affect, via Brain Massumi's address of the inexhaustible potentiality of affect in terms of the ongoing becoming or individuating of bodily matter, its ongoing ability to inform or to self-form: that is, its aliveness.

Yet the trinity as a concept is equal parts mystery and vexation as presented in the work "The Holy Spirit and Mysticism" by H.F. Woodhouse:

The few references to the Spirit may be largely explained by three facts. One is that the doctrine of the Holy Spirit is comparatively undeveloped and may well remain so since to confine all His actions within categories of human Logic is like tying Samson with new ropes or catching mercury between two common pins. The second factor is that very often we speak of Christ or of God, where perhaps a more accurate expression might be Holy Spirit. (Woodhouse 58).

The underdeveloped or neglected scholarship on the HS is further evidence of its affectual indigeneity as it cannot be explained by reason alone.

In *Communio*, Cardinal Ratzinger attempts to explain how the Holy Spirit works within the Trinity in equal parts of authority and power: "While the names 'Father' and 'Son' bring to light what is characteristic of the first and second persons of the trinity, the name "Holy Spirit" does not support the presentation of the particularity of the third person as giving and receiving, i.e., being as gift and being as reception, as word and response—characteristics which are so completely one that unity not subordination arises within them" (Ratzinger 326). Ratzinger sees the Holy Spirit as communion or unity between the Father and Son, but also the body of Christ. It is the metaphysical glue that holds Christianity together:

From the phrase 'Holy Spirit,' Augustine takes the definition of Spirit as *communio*. It opens pneumatology up into ecclesiology, and reverse connection of ecclesiology into theology. Becoming a Christian means becoming *communio* and thereby entering into the mode of being of the Holy Spirit. But it can also only happen through the Holy Spirit, who is the power of communication, mediating it, making it possible and is himself a Person. (Ratzinger 1998: 327)

The Holy Spirit is affective, liminal, and connective. It cannot be bound by reason, as Ratzinger

states, "Thus the attempt to gain some kind of concrete understanding of the Holy Spirit in this way only makes him completely unrecognizable" (1998: 326). This analysis of the Holy Spirit as a *communio* affect is significant as it is what makes theology a possibly more totalizing healing option for survivors of C-PTSD and domestic abuse.

Part 4: A Theological Reading of Herman's Taxonomy of Recovery

In my fourth part I will investigate how the theological concepts of mysticism, dangerous memories and *communitas* mirror Herman's tripartite therapeutic model of trauma recovery: safe space, narrative and healthy connections.

4.1 Holy Spirt and Space Creation: Mysticism

Creating a safe space is the very first task of recovery for survivors of domestic violence. This task takes precedence over all others, for no other therapeutic work can possibly succeed if safety has not been adequately secured. No other therapeutic work should even be attempted until a reasonable degree of safety has been achieved (Herman 1997: 1). The creation of safe space for those who have been traumatized by violence is no small task. Trauma itself being affectual does not follow linear equations, as though there is some A+B+C answer to healing. What does safe space mean? And how does it materialize for victims? How can the HS aid in creating space? There are also many levels of safety to be considered, due to the affectual nature of trauma, most abused agents cannot be categorized in to the identity of victim or survivor. In her examination of *Protecting Victims' Interests in Domestic Violence Court* (2010) Holly Johnson describes the legal construction of women who suffer from the battered woman syndrome and women who refuse to cooperate with the prosecution of their violent partners:

are built on stereotypical representations which fail to consider that women make decisions that are rational in the context of the particular circumstances of their lives and the conditions of inequality that shape those circumstances. One is constructed as helpless and ineffective in her failure to act and one as demonstrating excessive agency in opposition to the needs of the criminal justice system. (2010: 5-6)

Furthermore, the complex nature of space within the paradigm of abusive relationships is

exemplified via_agents with C-PTSD where the neurobiological and psychological damage of emotional and verbal abuse is literally embedded within the psyche of the victim, programming them to destroy themselves, making the job of the abuser that much easier as Herman (1998) explains:

With survivors of prolonged, repeated trauma, the initial stage of recovery may be protracted and difficult because of the degree to which the traumatized person has become a danger to herself. The sources of danger may include active selfharm, passive failures of self-protection, and pathological dependency on the abuser. Self-care is almost always severely disrupted. Self-harming behavior may take numerous forms, including chronic suicidality, self-mutilation, eating disorders, substance abuse, impulsive risk-taking, and repetitive involvement in exploitative or dangerous relationships. Many self-destructive behaviors can be understood as symbolic or literal re-enactments of the initial abuse. They serve the function of regulating intolerable feeling states, in the absence of more adaptive self-soothing strategies. The patient's capacities for self-care and selfsoothing must be painstakingly reconstructed in the course of long-term individual and/or group treatment. Biologic, behavioral, cognitive, interpersonal, and social therapeutic modalities have all shown promise with some patients; each patient should be encouraged to develop a personal repertoire of coping strategies. (Herman 1998: 4)

In the matrix of domestic violence, when the victim has been brainwashed by psychological abuse how can they find the agency to access space within? Theology answers this quandary with the Holy Spirit. To elucidate what I mean by this I turn to the early Christian female mystics, women who not only did not have the right to healthy relationship, but were oppressed by an equally abusive version of patriarchy. Mysticism is a personal experience with the Holy Spirit- direct access to God. Mysticism is dangerous because it cannot be contained. For example, in her work *Power, Gender and Christian Mysticism* (1999), Grace Jantzen states that prominent authors on the subject have seen mystical experience as having four primary characteristics: ineffability, noetic quality, transiety and passivity (Janzen 1997: 7), 6 which

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⁶ Taken from William James (1842-1910).

overlap with affect. Mysticism historically has been seen as dangerous as it creates a liminal affectual space for an agent to surpass self and society. In regards to self-care/space, mystical experiences match the affectual dissociation of trauma to offer victims who cannot or have not yet been able to escape the cycle of violence a space that is safe. Dissociation stemming from the trauma of domestic violence are "Intrusive re-experiences, particularly in patients who are victims of childhood trauma, and who continue to dissociate, may be so vivid that patients are unable to distinguish them from reality. They are, however, different from psychotic symptoms in a classical sense, because these patients seem to be re-experiencing actual traumatic events. The hallucinations and delusions seen in flashbacks may be better conceptualized as dissociative phenomena" (van der Kolk s59). Mysticism creates space in the midst of violence, within the trigger, without the necessity of the rational autonomy, precluded in Herman's secular model.

4.2 Anamnestic Narrative: an Affectual Co-assemblage with Reason

Once safety and a secure therapeutic alliance are established, the second stage of recovery can commence. The survivor is now ready to tell the story of the trauma, in depth and in detail. This work of reconstruction actually transforms the traumatic memory, so that it can be integrated into the survivor's life story. The basic principle of empowerment continues to apply during the second stage of recovery (Herman 2008 4). Establishing "truth" is paramount in combating the brain-washing, gas lighting, or re-visioning, all used as tools by perpetrators to manipulate the agent's reality. Gas-lighting or crazy making are in fact a form of "private torture" that legal scholar Tanina Tetlow, who proposes a new criminal law against private torture, as current criminal law misses the cumulative terror of domestic violence by fracturing in to misdemeanor felonies. A torture statute would ban non-violent forms of abuse such as

psychological torture, sexual degradation, and sleep deprivation, which causes equally, or even more serious consequences such as C-PTSD (Tetlow 2010: 183).

Gas-lighting, as a specific example of domestic terrorism or private torture, is a subtle yet nefarious form of psychological abuse that aims to break down the mind of the victim for the ultimate goal of control [or power]:

Batterers also use variations on the psychological torture techniques that the CIA has determined to be effective, including mind games and "crazy-making" behavior. They tell the victim that she imagined the abuse or that she is merely overly sensitive. They hide objects and tell her that she lost them. (Tetlow 2010: 195)

Crazy-making erodes the victim's ability to trust herself or to distinguish truth. Its perhaps in these moments the trauma of the psychological aspect of private torture becomes affectually destructive on the brain.

The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialect of psychological trauma. In her book *Testimony: Crises of Witnessing in Literature, Psychoanalysis and History* (1992), Shoshana Felman writes with Dori Laub that we live in an age of testimony:

an age whose writing task (and reading task) is to confront the horror of its own destructiveness, to attest to the unthinkable disaster of culture's breakdown, and to attempt to assimilate the massive trauma, and the cataclysmic shift in being...Felman is writing of the Holocaust and literary responses to it, in the wake of 9/11 and widespread American torture, with Guantanamo still open and the war on terror still raging, testimony remains an essential task of contemporary writing [narrative]. (1993: 103)

Narrative gives survivors a way to empower their voice, or to also re-write their story. To name is to have power according to Foucault and the linguistic fallacy. Ursula K. LeGuin

provides evidence of this in her short fiction piece *She Unnames Them* (1985). In the text Eve becomes tired of the garden and in solidarity with the animals she unnames them, finding instead of power, connection:

None were left now to unname, and they seemed far closer to me than when their names had stood between us: so close that my fear of them and their fear of me became one. And the attraction that many of us felt was one with the fear. The hunter could not be told from the hunted. This was more or less the effect I had been after, and I could not now make an exception of myself. I went to Adam, and said, "You and your father gave me this. It's been really useful, but it doesn't exactly seem to fit." He was not paying much attention, and only said O.K. and went on with what he was doing. I said goodbye and went out. I had only just realized how hard it would have been to explain. My words now must be as slow, new, and tentative as the steps I took going down the path away from the house, between the dark-branched, tall dancers, motionless against the winter shining. (1985: 1)

Feminist and trauma theologians have provided a rich history of scriptural interpretation attempting to challenge and change the politics surrounding traumatized women via narrative. For example, Shelly Rambo's reading of the hemorrhaging woman in Mark 5:25-34 and her focused work on *Spirit and Trauma* (2012) privileges Easter Saturday, over the resurrection, the liminal over the binary, to empower C-PTSD survivors. Rambo expresses trauma as a place where "death haunts life" (Rambo 2015: 9) and life bears death within it. Trauma as affect, disrupts our sense of time, body, and word. Yet God's spirit (is present as witness to both the pull of death and the movement of life in the space of suffering. For Rambo, salvation is not a linear victorious jump over the abyss of death into life, which is problematic from a trauma perspective as it elides suffering, oppression and violence. Instead, salvation as seen from the middle is found in the presence of the love of the Holy Spirit, who remains with us in suffering. "The middle story is not a story of rising out of the depths, but a transformation of the depths themselves" (2015: 172). Rambo's work is a co-assemblage of affect and reason. It utilizes the

rational enterprise of language to usurp linear victory narratives (such as the privileging of the resurrection over the cross) whose dichotomies imprison agents into categories such as "victim" or "survivor" when in reality most perpetually living in the liminal. This is paramount in response to Herman's second stage of therapeutic response to trauma as "the second stage of recovery has a timeless quality that is very frightening. The reconstruction of the trauma requires immersion in a past experience of frozen time; the descent into mourning feels like a surrender to endless tears. Patients often ask how long this painful process will last. There is no fixed answer to the question, only the assurance that the process cannot be bypassed or hurried" (Herman 1998: 6).

Narrative thus is equally significant and problematic for people who have been abused as they often tell their stories in highly emotional, contradictory and fragmented manners, which underpin their credibility and thereby serves the twin imperatives of truth-telling and secrecy. Survivors of trauma are re-victimized by the systems. They must have a narrative to be credible. They must have a consistent narrative and evidence to have a chance at justice. As Judith Herman states "When truth is finally recognized, survivors can begin their recovery" (Herman 1997: 1). Here is where establishing narrative is paramount. But what is "truth"? Where is healing, where is justice found for suffers of C-PTSD who have affectual brain injuries due to trauma? To answer this, I have to first examine the affectual side of narrative, and the unique position theology is in providing a concomitant word/logos and spirit/affect. Narrative is affectual, words need *spaces*. To occupy the fullness of the writing event is also to encounter affects propelled by past words and time:

Affective encounters are not entirely open but rather shaped by pre-existing tendencies, by accumulated elements of the past that feed into the unfolding

future to give it coherence and the illusion of continuity. Newness occurs in the interruption of chronological linearity: past into future, future into past; always in transition in the present. (Richardson 11)

The concept of time is significant when discussing narrative in light of trauma and theology. As already stated, the memory of trauma survivors do not obey *chronos* or the logical human construct of time. Theology also refuses the linear progression of *chronos* and instead offers kairos (used in Ephesians 5) to describe God's timing that is not bound by past, present or future. The theologically specific kairos is a way to push the discourse of post traumatic growth further. Here I will present the Catholic theologian Johann Baptist Metz to elucidate and discuss the affectual power of narrative and time in the face of trauma through his theory of dangerous memories (DM). DM is a cyclical way to think about thinking and history without the limits of the logocentric analysis of viewing history in terms of its ends. It refuses to accept salvation as linear victorious jump over the abyss of death (much like Rambo's reading previous) into life which thus bypasses suffering, oppression and violence. This is precisely why memories are dangerous. Memory can politically be manipulated through narrative, whether at the individual level or systematically, but DM subverts that power by choosing to reiterate the narrative of a common history of suffering. According to Vento (2002: 8), Metz's conception of DM was born from the silence surrounding the ashes of the Holocaust within Christendom which he saw as an effect of Christianity pushing aside its Jewish origins. This Hellenized, reason-centered Christianity had cut itself from the sources of anamnestic reason, "It has become one expression of an idealistic form of reason, unburdened by fate and incapable of recollection and historical remembrance" (Habermas 2004: 48).

Anamnestic reason (AR) is a schema that respects thinking in history without resorting to rational categories that are abstract, transcendental, and therefore insulated from the disruptions

of history. AR is the "rational response to the shortcomings of reason, as an attempt to save reason" (Ostovich 2005: 32), the term anamnestic, originating from the Greek anamnesis: a recalling to mind. It challenges reason and the ideology of logos defined by the Enlightenment and the individual's ability to make public use of reason, to instead posit suffering as the true historical universal. Jurgen Habermas in critique and gratitude of Metz steadfastness in claiming, "Jesus was not a Christian, but a Jew" (2004: 295) breaks down AR as follows:

...that a Hellenized Christianity, when rejecting its Judaic origin, has separated itself from the source of anamnestic reason and has become the expression of an erratic and idealistic reason, incapacitated for memory and historical remembrance. Understanding Christianity in an "Augustinian" fashion as a synthesis of reason and faith—reason deriving from Athens and faith from Israel—sunders in two the spirit of Christianity. Against the division of labor between philosophical reason and religious faith, Metz insists on the rational content of the tradition of Israel; he conceives of the force of historical remembrance as an element of reason: "This anamnestic reason resists forgetting, even the forgetting of the forgetting that nests in every simple historization of the past". From this point of view, the philosophy with Greek roots appears as the administrator of Ratio, of the forces of understanding that is made to reason only through the linkage with the memory that remits us to Moses and his promise. In this sense, a theology that, departing from its Hellenistic alienation by returning to its own origins has, before philosophy, the last word... (Habermas 2004: 295)

Theology offers a more totalizing healing framework for survivors of domestic abuse because it offers a tether to a totalizing "narrative" a "Word," a liminal language that is material but alive (see pg. 4 of this essay- Schaeffer phenomenological affect-) when co-assembled with the affect of the Holy Spirit as presented within the concept of DM and AR.

This radical hope, in the face of concrete histories of suffering, has the potential to nurture solidarity and action against suffering in the present. In this regard, it is not suffering itself which preserves this hope, but rather the memory of suffering. For Metz, certain memories, the memories of injustice and defeat, have the capacity to preserve the identity of the subjects of

suffering, specifically survivors of domestic violence who have not escaped, who have been murdered, who have been forgotten. These are "dangerous memories" which call into question the record of the victors in history and which do not allow the stories of the victims to be silenced. According to Vento (2002: 8) such dangerous memories challenge us to eradicate present suffering, as they disclose the hope of a future without suffering.

The theology of DM frees survivors from the pressure of voice via transcendent validation and allows them to process outside limits, of *chronos* and reason. But why should one escape "voice" or "narrative" if the talking cure via narrative about trauma is so central to catharsis. What happens when we are forced to escape voice, when one cannot establish safety, narrative and connection? Van der Kolk also touches on this topic when discussing traumatic memory on trial, and the re-victimization that occurs when traumatic affect is forced in to the killing jar to be observed. Under a positron emission tomography (PET) scan, when survivors were read the narratives of their trauma, that precipitated marked automatic responses, the rational sections of their brain turned off. Instead, there was heightened activity in the right visual cortex, essentially suggesting that when triggered, victim's brains actually relive the trauma as a physical state rather than a verbally encoded experience. "This seems to indicate that the difficulties of patients with PTSD in putting feelings into words is mirrored by actual changes in brain activity" (van der Kolk 2001: 55). Some survivors have such severe trauma from prolonged domestic violence that they may never reach Herman's second step of recovery: the ability to reconstruct a narrative. Theological concepts such as DM refuse to leave these victims behind.

4.3 Holy Spirit as Connection: The Body of Christ

Theology is understood to be a healing discourse that seeks to transform lived realities. But the reality of trauma is such that it cannot be isolated to particular persons. When an agent is traumatized, their sense of self is fractured, rendered unstable. Familiar affective patterns are disrupted; continuity and psychic cohesion are destroyed or deeply wounded; agency is radically limited. as legal scholar Tanina Tetlow explains:

The only major distinction between domestic violence and the catalogue of torture techniques used elsewhere is that we normally associate torture with kidnapping or confinement of the victim. Batterers sometimes imprison their victims but more often they isolate them in less obvious ways. They almost always wait to begin abuse until they have their victims legally and emotionally entangled with them, often hitting for the first time on the wedding night or when the victim is pregnant. Batterers use threats to prevent escape: threats of violence to the victim and her loved ones, threats to fight for custody of the victim's children, threats to impoverish the victim and her children, and threats to falsely accuse the victim of crimes. Batterers isolate victims by punishing them for contact with their friends and family. (Tetlow 2010: 198).

Hence, the importance of Herman's third step in therapeutic response to traumatized individuals' connection as she explains that by this time the victim has hopefully regained some capacity for trust and the ability to assess who is trustworthy. The survivor has also "regained the ability to feel autonomous while remaining connected to others; she can maintain her own point of view and her own boundaries while respecting those of others. She has begun to take more initiative in her life and is in the process of creating a new identity (Herman 1998:7). Essentially, victims of domestic abuse need to re-create their identity by reflecting off of other healthy individuals.

Traditional Christian community, involved with a healthy framework of authority, can provide an enhanced sense of *communitas* due to its inbuilt demand for personal accountability to be in community. In her work, "When Terror Strikes at Home: The Interface Between Domestic Violence and Religion" (2004), Nancy Nason-Clark investigates domestic violence within conservative Christianity. While there has been considerable speculation on whether religious theologies exacerbate violence in the family, there has been very little data. In fact, the data Nason-Clark offers, presents no clear evidence to assume that correlation (2004: 303).

Nason-Clark highlights the more totalizing healing opportunities for survivors of domestic violence within their own theologies. She envisions a collaborative venture between "the shelter and the steeple" and the language of contemporary culture and the language of the spirit (304) and provides examples of faith based rehabilitation services for batterers that are more successful due to the power of a unified *communitas* (307).

In "God and the Victim: Traumatic Intrusions on Grace and Freedom" (2007), Jennifer Erin Beste expounds the necessity of the connection of the Body of Christ for victims of domestic and sexual abuse through her reading of Karl Rahner's theory of *socially meditated grace*. Socially mediated grace is viewing connection to God through relationship, rather than just vertically. "God's gracious self-offer is revealed in its fullest manifestation historically through the incarnation of Jesus Christ. The mediation of God's grace, however, does not end with Christ's death and resurrection but needs continual historical and social mediation; primarily, but by no means exclusively, this occurs through the institution of the Church... Rahner argues that it is necessary for God's grace to be mediated socially because of humanity's historical and social nature. Persons are not created to respond to God's self- communication individually but through fellowship with others" (Beste 2007: 92-93). Trauma research

demonstrates how sexual and domestic violence can shatter one's sense of self and agency, one's ability not only to reach out and risk loving God and others, but even love one's self. Victims of domestic violence often feel alienated, betrayed, or abandoned by God and others, and sometimes cannot even bear to remain alive (Beste 2007: 94) Trauma literature consistently finds that the dynamics of traumatization render an individual incapable of transcending the totalizing effects of trauma and its post-traumatic stress symptoms on one's own. The affect of the Holy Spirit mediated via relationship rather than unilaterally from God can provide an intervention from a third party which can be crucial to break the traumatic cycle created by the dynamics of perpetrator and victim. What then does this mean in regards to the agency and autonomy of victims and C-PTSD survivors? Does that mean their healing and empowerment must rely on relationship in both secular and theological therapeutics?

Part 5: Power, Healing and the Advantage of Affect Theology

In this section I suggest that the overall insight of affect, for survivors of domestic abuse is that it is that it could be seen as an untapped form of arational power. Drawing on Michael Foucault's theory of power, I posit that he challenges the idea_that power is wielded by people or groups by way of 'episodic' or 'sovereign' acts of domination or coercion, seeing it instead as dispersed and pervasive. Power is everywhere and comes from everywhere, much the same as affect. Affect theology presents the opportunity to see that there is *power* in the *space between* words, it thereby creates an unconventional discourse to our normative epistemologies.

Contemporary affect theorists like Sara Ahmed, Ben Anderson, and Lauren Berlant present us with hope for those spaces ... the potential of an "affective bloom" (Seigworth and Gregg 2002: 10). Affective "bloom-spaces" are "the necessary critical task of always moving beyond one after 'materialism'" (10) which may be useful in empowering victims of trauma. The affective qualities of this adjacent but incorporeal "bloom-space" are outlined in a variety of ways by theorists, according to Seigworth and Gregg (2002: 9):

as excess, as autonomous, as impersonal, as the ineffable, as the ongoingness of process, as pedagogico-aesthetic, as virtual, as shareable (mimetic), as sticky, as collective, as contingency, as threshold or conversion point, as immanence of potential (futurity), as the open, as a vibrant incoherence that circulates about zones of cliché and convention, as a gathering place of accumulative dispositions. Each of these figurations, in its own way, names that Spinozist "not yet" of affect as its "promise.".

The belief that affect is "highly invested in us" seems to echo the eternal and sounds quite pseudo-theological. Considering Foucault's notion of power as neutral—and connecting affect as a blooming power—opens up questions surrounding who affect is empowering. Is affect

somehow essentially "sutured in to progressive liberatory politics or at least the best marrow of our angels?" (Griegg and Seigworth 10). Is it a promise or a threat? (9). I suggest instead of viewing power only as *power-knowledge* bound by the realm of reason, when accessed by a theological bloom space, victims can be empowered via *power-affect* (mysticism, communitas) or *power-knowledge-affect* (dangerous memories).

Domestic violence, or private torture, is a form of power terrorism. Perpetrators of abuse, specifically psychological abuse use fear, intimidation, isolation, and thought control to render victims powerless. Psychological abuse is a tactic to destroy the victim's ability to see 'truth' or trust themselves or the world around them leaving them in a constant state of fear and hyperarousal. Victims of domestic violence do not have access to the privilege of cognitivism. I specifically use the term privilege because power is a privilege and in our western epistemologies, cognitivism and rationality is the modern "sword of truth." The significance of empowerment for victims is further elucidated in *Trauma and Recovery: From Domestic Violence to Political Terror* (1979) by Dr. Judith Herman, who links the very short steps between domestic abuse and political terror:

To hold traumatic reality in consciousness requires a social context that affirms and protects the victim and that joins victim and witness in a common alliance. For the individual victim, this social context is created by relationships with friends, lovers, and family. For the larger society, the social context is created by political movements that give voice to the disempowered. The systematic study of psychological trauma therefore depends on the support of a political movement. Indeed, whether such study can be pursued or discussed in public is itself a political question. (Herman 1997: 9).

Domestic violence cannot be relegated to the private sphere; it is a political issue as trauma survivors cannot recover in isolation. According to Herman, "The study of trauma in domestic violence only becomes legitimate in the context that challenges the subordination of

women and children. Advances in the field occur only when they are supported by a political movement powerful enough to legitimate and alliance between investigators and agents to counter act the ordinary social processes of silencing the denial" (Herman 1997: 9). The systematic study of psychological trauma therefore depends on the support of a political movement. Indeed, whether such a study can be pursued or discussed in public is itself a political question.

Though we have become "enlightened" by reason, buying in to the telos of modernity—freedom—vulnerable victims who do not fit within the system are still be re-victimized. Jantzen investigates the relationship between power, knowledge, mysticism and gender beginning in early and medieval Christendom where there was an overt link between the knowledge of God gained through mystical life and the authority which one could claim of that special knowledge. Jantzen, furthers this Foucauldian, post-modern stance vis-à-vis gender. Though we no longer live, in her words, "under the sacred canopy of the medieval era" (Jantzen 1995: xv), the privatization of religion still thwarts the power of mysticism. For if it were to be trusted, this would provide an authoritative basis for the knowledge and existence of God. When mysticism is contained in the privatization it is ensured not to disrupt those in power, the ones making social and political decisions.

Modern epistemologies have taught us that through logocentrism we could come closer to "eating the bread of angels". I argue, that while systems of rational thought are beneficial, they in fact can imprison (literally and metaphorically) victims of domestic violence if a traumatized agent's recovery depends on their validation. For example, many survivors see themselves akin to perpetrators: if they fight back, they are incapable of seeing the nuance of the imbalance of power which marks abusive relationships. Furthermore, this dilemma is enhanced by the legal

victimization of women who are criminalized for fighting back against abusers. Victims are essentially punished for their agency, and are thus categorized by the limitations of logos as either victim or criminal, or victim or survivor (Johnson 2010: 6). Women who are traumatized at the hands of power-over relationships, also then must suffer in a power-over system as there is no space for liminality in the house of court. "Domestic violence, however, remains mired in the world of fragmentation" (an affectual descriptor) when it comes to the criminal justice system (Tetlow 2016: 203).

In her work, When Terror Strikes at Home: The Interface Between Domestic Violence and Religion, Nancy Nason-Clark uncovers another schism between the logocentrism of our systems and the liminality of abuse. She shares that the "secular therapeutic community does not like to work with clients who are particularly religious...because they find it difficult to challenge the religious ideation that is believed by the victim or the perpetrator to give license to abuse", because they do not have the right language (that of the spirit or the liminal) to parlay with survivors within a theological context.

I have attempted to reveal the quandary of healing affectual entities such as trauma from domestic violence within a binary system of logos in this section. The binary of the logic that orders this world can only offer *power-knowledge* or power over possibilities. Affect theology, specifically the work of the HS in the Trinity socially mediates power through connection and relationship. Affect theology offers an *affect-power-knowledge* that is not solely reliant on a system, political action or even autonomy.

Conclusion

Affect theology provides victims of domestic abuse therapeutic taxonomy that is parallel to Judith Herman's. It offers a radical safe space through mysticism; a political narrative that subsumes reason (and refuses to closet abuse throughout time); and in praxis, it offers a more robust version of community through the accountability of *communio*. It also presents the possibility of accessing an affectual bloom space via the mediation of power, through relationship with a God that chose to live with and within them, rather than a constructed power that relies on externals or even validation from others. I illustrate this nuance with a slightly adapted version of Shelly Rambo's reading of the story of the hemorrhaging woman in Mark 5. A woman who had struggled with external bleeding for 12 years, making her unclean and an outcast in her time, after hearing about Jesus, came up to him in a crowd, touching his cloak in hopes of finding external healing. Rambo posits this interaction as proof of faith as a "witnessed" movement, involving not only the individual but also the community, not only the mind but also the body" (2009: 250). While I agree with Rambo that the woman is autonomous in her healing when Jesus recognizes his power proceeding out from him as she is healed, Rambo interprets this as healing by witness or *communitas*, akin to Herman's third step. On the other hand, my interpretation suggests that the relationship between Jesus and the hemorrhaging woman means that healing is available to victims through an affectual personal connection with God via the Holy Spirit who empowers survivors internally. As Jesus stated: "Daughter *your* faith has made you well; go in peace and be healed of your affliction" (Mark 5:34).

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