Civilian casualties as a result of the Allied bombing campaigns targeting French factories, ports, military installations and transportation networks are hard to assess. A recent estimate puts the death toll at around 60,000, although the number of people affected – by injury, bereavement, homelessness, evacuation, shock or disruption – is evidently far higher. France took over a fifth of the Allies’ European bombing effort, second only to Germany in the tonnage dropped, but these events are still little known outside the most dramatically destroyed cities such as Le Havre. Indeed, the Allied bombing of France has been called ‘the last “black hole” in French collective memory of the Second World War’. My interest lies in children’s experiences of air war in France. In 2009 I interviewed 36 French men and women who were bombed between 1940 and 1944 by the Allies. I classed ‘child’ as a person under the age of sixteen at the time of bombing. My research focused on three French towns, the naval port of Brest, the industrial Parisian suburb of Boulogne-Billancourt, home of the large Renault plant, and the northern city of Lille and its industrial suburbs of Lomme, Fives and Hellemmes. Each place was bombed as part of different campaigns, at different moments of the war, and with different consequences. When I interviewed people about being bombed, I expected to hear many speak of trauma; they did not. Only two – the youngest two women I interviewed, born in 1938 and 1939 – spontaneously reported traumatisation. Some others rejected the idea outright. Michel Thomas explained: ‘Well, I tell you very frankly, I am convinced that it did not traumatise me at all’. I was surprised at this forcefulness, and interested to note that perhaps bombing does not traumatise children. But perhaps it is not that simple.

Some recent psychological research debates the longevity of symptoms of Post-Traumatic
Stress Disorder (PTSD) that children may experience following exposure to war, suggesting that, bar the worst cases, symptoms may be fleeting. Barenbaum et al conclude that the potential for traumaisation depends on ‘individual interpretations of the traumatic experience and the context in which it occurs’. Individual interpretations are key; yet they are, of course, shaped by the social context of war and its memory. This article will demonstrate that traumatic symptoms are visible across many of the oral narratives of the Allied bombing of France that I collected. It will also suggest that ‘trauma’ extends beyond the psychological realm: it is a term laden with social meaning. While there is certainly an ‘increasing public familiarity’ with the language of trauma, the term and thus its symptoms or treatment) may be rejected for social reasons.

I am not suggesting that in France and Europe there is a generation of traumatised older people who are blind to past damage they repress, but I wish to point out that millions of stories of wartime childhoods remain untold – some traumatic some not – all of which help nations better understand present relationships with past events. Oral histories enable us to access individual interpretations of the past, and shed light on the collective memories which shape and define us. I begin by providing some broad definitions of trauma, link trauma to bombing, and reflect on the use of ‘trauma’ outside of psychological research. I then go on to analyse my oral narratives for evidence of trauma, and conclude by suggesting a few reasons why French people might reject the idea of trauma.

Trauma and its uses

We must first understand what trauma is in order to see how it functions in narratives of bombing. The US psychiatric diagnostic category of PTSD is not the only way of measuring traumatic experience, but its underlying principles are helpful. Trauma is a duality: an objective stressor, and a subjective response, manifested through particular symptoms. The stressor is an event, or series of events, that involves ‘actual or threatened death or serious injury, or other threat to one’s physical integrity’ or that of another person. An air raid in close proximity fits these criteria. A traumatised response shows ‘intense fear, helplessness, or horror’. Given the inadequacy of bomb shelter provision in France, the surprise quality of many raids and the inevitability of destruction, the possibility of escape was minimal; children were further restricted by dependence on their parents for protection. Symptoms of PTSD fall into three categories: intrusion, avoidance or constriction, and hyperarousal. The first includes nightmares, flashbacks, revisualisation, morbid rumination and feelings of guilt; the second, numbness, detachment and hopelessness; and reluctance to talk of events; the third includes difficulty concentrating, exaggerated startle responses and disproportionate anxiety. These symptoms are present in narratives I recorded, but narrators rarely dwelt on them.

Trauma has a number of symptoms specific to children, which change according to the developmental stage. In children under five traumatic events may provoke anxious attachment behaviour, and a loss of recently learnt behaviours. Between the ages of about five or seven to about twelve, children start to identify with physical pain in others, and are more likely to have psychosomatic responses. Eth and Pynoos remark upon the ‘devastating consequences on personality of trauma’ during the adolescent years, where feelings of rage, shame and betrayal can lead to self-destructive behaviour. Terr’s work on childhood trauma has shown that it colours subsequent life processes, even if events are largely forgotten. My research suggested that the greatest potential for fear responses was in the younger age range; events provoked less grave responses in adolescents, who were less helpless when threatened.

Despite the mass of research into the civilian experience of air war in Europe, few enquiries deal directly with the effects of bombing on children, compared with those of evacuation. Indeed, sometimes one is at a loss to know what the children are being evacuated from. British research in the 1940s found that younger children were more vulnerable, parental presence mitigated traumatic impact, evacuation created a ‘deeper and more persisting damage’, but that bombing followed by evacuation gave rise to the worst symptoms. A recent historical and psychological study on the firebombing of Hamburg has shown little evidence of enduring trauma in those who were children. But we cannot conclude that bombing did, and does, not affect children. For example, Thabet et al found that bombing in Gaza significantly increased behavioural and emotional problems of pre-school children.

Why was the impact of bombing not studied in France? In nations occupied by, entangled with and/or collaborating with the Nazis, as emaciated POWs, resistance fighters, deported workers and persecuted groups returned home, concerns arose about reawakening wartime divisions in countries desperate to reconstruct. In France, all such returnees were labelled ‘deportees’; systems of support were developed for those suffering from ‘deportation pathology’, a concept resting on a ‘fabricated universality’ of experience. What they had in common, however, was their wartime distance from French territory; little or no recognition was given to psychologically troubled civilians who had remained in France. Across Europe, every
day wartime anxieties were subsumed into the immense practical problems of peacetime. No treatment existed for symptoms of traumatic violence suffered on French territory; bombing was buried under the moral and psychological reconstruction of a nation.

Thus the historical circumstances of war and reconstruction restricted the expression of traumatic experience amongst parts of the French population. To understand such trauma we must first understand history: trauma does not exist in a vacuum. Yet the use of trauma as a concept in the humanities has been widely criticised. Susanne Vees-Gulani noted that ‘many scholars both grossly exaggerate and, at the same time, limit [its] applicability’. Humanities researchers, she writes – historians sometimes, but often literary scholars – misguidedly shift emphasis from individual to society, from event to representation, and elide the categories of trauma and victimhood. These criticisms are elaborated below, followed by a discussion of narrative that suggests how oral history can help us understand the socially constructed part of traumatic experience.

As Barenbaum et al stated, individual responses to trauma depend on the context of the traumatic event and its interpretation. Yet some scholars minimise both individual and event. Caruth writes of ‘our catastrophic era’, Felman and Laub of ‘post-traumatic culture’; in this collectivisation of trauma the individual is negated. Caruth believes that trauma spreads to contaminate entire societies. Yet ‘collective’ trauma mistakes an individual phenomenon for a shared one. It is too simplistic to state that experience is ‘never simply one’s own’; certainly, the external context of an event is shared, as may be subsequent public remembering. But social discourse about trauma is not, in itself, trauma. Individual experience and response are ‘one’s own’; this is the very meaning of subjectivity. The negation of the individual is thus problematic. First, losing sight of the individual trivialises experience and shifts importance to the interpreter not the sufferer. And second, collectivising trauma is exclusive: it establishes a set of structures for remembering which exclude individuals whose experiences fall outside the grid. This displacement away from the individual accounts for the Allied bombing as a black hole in French collective memory: it is vivid in personal and local memories, but dominant national narratives of resistance and collaboration have squeezed it from public discourse.
Furthermore, Barenbaum et al concluded that the interpretation of trauma matters, but not without its context. Yet in some scholarly (literary) understandings of trauma, the event at the heart of traumatic experience has been obscured. Attention is placed on the representation of past events rather than events themselves, or, more precisely, on the inability to represent experience adequately. Trauma becomes a ‘discourse of the unrepresentable’ and Caruth’s influential work has promoted the idea of the ‘inaccessibility of trauma’. The idea that any narrative reflects lived experience is rejected as naïve.

Yet this restrictive conceptualisation rests on a single type of narrative, and perhaps a single type of trauma. It refuses to recognise the range of subjective responses to trauma expressed in myriad ways (that even the objective but flexible PTSD diagnostic tool recognises). Events are at the core of traumatic experience, yet there are more or less traumatising events, and more or less traumatised responses. In the oral narratives analysed here, clear connections with past events are made, but it is understood that speech, language and dialogue cannot replicate the past: a narrator is not a ‘black box’ recorder.

Traumatising events are described in words, sometimes adequate, sometimes inadequate, but also articulated non-verbally through gesture, expression, and so on. Narrators depict chains of events, clouds of circumstance, moods, pressures and intrusive influences in their interpretations of past events.

Instead of conceptualising trauma as unrepresentable, it seems more fruitful to understand the ways humans can share experience.

Vees-Gulani further criticises the moral judgements attached to psychological concepts in humanities trauma studies, usually by equating a traumatised person with a victim who is awarded a high moral authority. This idea has arisen, perhaps, because of the concentration of research by scholars into Holocaust and abuse narratives, and extends beyond the academy.

Clearly sometimes the two overlap, but perpetrators may also be traumatised. We see this elision of trauma and victimhood in post-war France. Returning ‘deportees’ might have been traumatised; they were also the victims of unfair policies and of hardships in concentration camps: the recognised trauma belongs to a recognised victim. But for civilians on French territory, trauma went unrecognised. The Allied bombs were aimed at targets not people; those potentially traumatised had not been victimised. Additionally, French civilians who did not participate in resistance activities (including the vast majority of children) have been ascribed a low moral authority: they waited, they stood by, some even profited. When trauma is so strongly linked to victimhood it is perhaps unsurprising that those who reject victimhood also reject trauma.

Nonetheless, some of that trauma is evident in my interviews. I should point out that oral history is not therapy. At its most basic, it is history told through memories, although there
may be a therapeutic benefit in talking through past events in a non-threatening setting. Of course, there is no goal to heal an interviewee, nor is any treatment offered. Yet turning traumatic memories into narrative memories can be a step towards coming to terms with the past, or turning a passive sufferer into an active agent shaping her or his life into a coherent story. In the open setting of my interviews, why did people not speak of trauma? Hunt and McHale note that people ‘may choose to recall or not recall particular aspects of their past’. Yet sometimes there is no choice, and sometimes recall is not at stake: the issue is with retelling. The traumatic event is recalled but retold obliquely. As Layman’s taxonomy of reticence in interviews suggests, sometimes a memory may be avoided because it is painful to discuss. But reticence may also occur if the topic appears not to be one the person had agreed to be interviewed about, if the person is uncomfortable talking about themselves in an unfamiliar way, or if it clashes with public versions of the past. I respect the coherence of narratives told to me which reject the concept of trauma, but I wish to understand why it is rejected, why people do not consider themselves traumatised by objectively traumatising events, and why, indeed, they may not have been traumatised by them.

**Trauma in narratives of bombing**

I now turn to an analysis of traumatic experience in the oral narratives of the people I interviewed in 2009, first dealing with instances where trauma is explicit in the content of the narrative in descriptions, actions and responses to remembering. Then I will look at trauma which is implicit in the narrative structure, looking at recurrent images and foreshadowing. I will show that intrusion, hyperarousal and constriction are all present.

Few of those I interviewed lost emotional control while they were talking to me; breaking down is one of the ‘signals of trauma’ that psychologist Gadi BenEzer reports as indicating its presence in life story narratives. However, two male interviewees struggled to control tears, both when describing their interaction with their mothers during an air raid. Both were bombed at La Délivrance near Lille in April 1944. Pierre Haigneré stopped and drew breath as he recalled the moment he was sharply chastised for crying, a moment when his mother’s reassurance faltered, tainted by her own fear. For Michel Jean-Bart the struggle for control came when highly charged moments were recounted. Sonia Agache twice evoked this visualisation that inspired anxiety among older people. Serge said: ‘The siren, it’s terrifying. It’s still instinctive, looking around, where can I hide?’ Intrusion was also evident in the intense visualisation that took place when highly charged moments were recounted. Sonia Agache twice evoked this visualisation, describing first helping her teacher from the bomb shelter – ‘You could say that I can still see her, can you imagine, after such a long time? A lady, not very tall, greying hair’ – and later her father’s relieved arrival on the scene ‘when I saw him, I burst into tears – , what, in bins. You didn’t have plastic bins in those days, they were steel bins. And we took the – , and they were there, and the rue Paul Bert was there, and we were there with a truck. And we put the – , they brought the things to us there, and we put it in. We put it in, but before, we had to put it in the coffins. The coffins were there inside. We put the – , with spades.’

His repetitive, stalling hesitancy echoes the ‘series of hyphenated clauses, which, in turn, are further encumbered by qualifying clauses’ that Robinett sees as characteristic of trauma narratives. There is a block here, a constriction which corresponds to avoidance symptoms. After a pause at the end of his struggle, Bernard spat out the word ‘barbaque!’ – a slang term for meat. The constriction shifted, but with effort. For Pierre, Michel and Bernard, these are ‘images of ultimate horror’: the worst moments, which stand in for a range of feelings.

The narratives also provide evidence of ‘intrusive images’. For example, Bernard Bauwens confided that ‘there were plenty of nights afterwards when I used to see it… I think of it still. Yes. I think of it still’. Others responded to triggers. Michel Jean-Bart said that well into adulthood he feared thunderstorms as ‘it brought back the windows shattering’. Bernard Lemaire told me that ‘a low flying plane, that scares the living daylights out of me’. For Thérèse Leclercq, such planes remained a reminder of ‘waking in fear in the middle of the night’; even planes in war films upset her, evoking difficult childhood memories: ‘the noise, it’s the planes, the air raids, this fear, this terror.’ In the three towns I studied, the eerie noise of municipal sirens being tested still stands in for a range of feelings.
Evidence of trauma is also clear when narrators described their actions at the time. Thérèse Leclercq’s responses in the aftermath of air raids suggest patterns of behaviour indicative of trauma. She noted that when the siren sounded, she would run to houses which had already been bombed, thinking that if they had been destroyed, the bombers would not bother with them again. Her understanding of safety and stability was upset; she lived in a state of hyperarousal after having been bombed once and remarked that ‘I became, as soon as the siren sounded, hysterical. My mother had to hold on to me’. Josette Dutilleul also displayed hyperarousal:

I had very, very good hearing. I still do. So I would hear the planes – perhaps from fear too! – I would hear the planes when they were really, really far away, and as soon as I heard them, I’d go down to the cellar. I’d dress – because the night before, I’d get my clothes ready on the chair, you see, in order… I was the first dressed.

She lived on the alert, and felt responsible. In each case, trauma is suggested. The person may not have experienced more than one symptom and those symptoms may not have lasted a long time. But they are present nonetheless, even when the narrator does not speak directly of having been traumatised.

Finally, trauma is explicit in Edith Denhez’s narrative of bereavement. Edith was one of hundreds of thousands bereaved by the Allied bombing. Her brother Jacques, twelve years old at the time, was killed in Cambrai in 1944. Edith’s inability to know what really happened has left her with a profound lack of certainty. She dwells on the possibility that she may be to blame for Jacques’ death. The family also had their house and all their possessions destroyed, and Edith’s mother became depressed. This sequence of events shaped the rest of Edith’s life. She was good humoured when discussing the past, however. She did not lose her self-control, and joked about her family’s Zola-esque misfortunes. Such distancing matter-of-factness corresponds with one of BenEzer’s ‘signals of trauma’.

Sometimes, however, trauma is less explicit and evident only in structural features of the story. It can be discerned, for example in recursive structures, again a form of intrusion. For example, Marguerite Fagard returned again and again to an image of her parents gazing in a stupor at the ruins of their home and factory: ‘My parents, they’d lost everything. They were there, sitting on the pavement, and there was nothing left’; later, ‘I tell you, he was there on the kerb, he didn’t know what to do’; and again, ‘And they were both there sitting on the pavement, opposite’. The pavement is a site of obsessive return in her story. Not only did her parents sit on it dejectedly, but it is the place where they could all have met their death: ‘there were some people on the pavement, everywhere really, the poor people.’ She repeated five times the idea that ‘it could have been us, killed there on the pavement’. Similarly, Robert Bellevivre spoke in minute detail about his decision-making process concerning whether or not to join three friends at the cinema. Had he accompanied his friends, he would have died with them in the rubble of a collapsed building, he explained. Instead, his youth group later stood guard of honour around the victims’ coffins while distressed relatives identified their bodies, and later he bore a friend’s coffin to the communal grave. His insistent return to his decision-making suggests morbid rumination. As with Marguerite’s account, trauma lies as much in events as in possibilities: the ‘shared possibility’ of death extends far beyond those who met such a fate.

Sometimes trauma is buried deeper in the structure of the narrative. Andréa Cousteaux’s
interview contains two anecdotes, neither of which would interest a historian interested in pure facts: the first is a comical tall tale, the second a tragic bit of hearsay.47 But both surface in her recollections. The first foreshadows the second, in which horrific images and shared possibility are embedded. Initially, with plenty of laughs, she recounted the tale of a bomb falling on a nearby cemetery, and an old tomb blasted from its resting place:

Well, the corpse that was in that tomb, they found him on roof of the house across the road! [Laughing] It was an old corpse, [acting the part] ‘Urrrr, urrrr!’ And as the roof had been damaged, there were some roofers, some workmen who went up to fix it, and they found the corpse with its arms outstretched in a cross! […] Oh yes! There were things like that, yes.

The improbable story was later echoed by a more plausible one, narrated in flatter, sorrowful tones. She told me that her mother had recounted the story of a young woman she knew who, doing her laundry alongside Andréa’s mother at the washhouse when the air-raid siren sounded, went off to fetch her little boy, asleep next door:

And she left, the poor thing. She just had time to take the little one in her arms, and the bomb fell on the house. They found her body stuck up, squashed like that [acting the part, arms outstretched in a cross] onto the house across the road. The little one, they never found him. He was smashed to pieces […] People said, you know, that they saw a dog running away with bits of meat […] Well, her body stayed there, it was just the skeleton, that stayed there until they found enough paint to redo it. […] Oh yes, there were terrible cases, terrible.

The fate of the baby haunts Andréa. The story is of lives cut short and undignified deaths: the old corpse had his life and burial, but not the mother and child. Robinett noticed that the foreshadowing of traumatic events was a feature of written narratives of war trauma;48 here, the story suggests an initial constriction in recounting trauma, and the strong intrusion of horror.

One traumatic symptom is not enough to diagnose PTSD. It is not my intention, however, to demonstrate post hoc that individuals were suffering from PTSD. What is clear, though, is that bombing gave rise to traumatic symptoms: it is an objectively traumatic event, although the traumatisation of individuals is subjective and contingent. The stories demonstrate that traumatic experience is accessible to listeners willing to listen; it can be communicated, and it is worth telling. In Edith’s case, for example, many years of silence until I interviewed her created a ‘toxic
story’. She had begun to ‘doubt the reality of actual events’. For all who suffered bombing as children, the symptoms of trauma may fade. Yet these narratives confirm that it is not ‘possible to emotionally sever “bad” events or periods from people’s lives’; people can still live functional lives, but memories endure.

### Trauma as a social construction

The traumatic memory of bombing lives on in the stories of the people I interviewed – and millions of others – but is rarely articulated as trauma. I will suggest five reasons why that may be; my list is not exhaustive. Trauma is more than an event or a set of symptoms: it is a social construction, and thus owning it depends on social and cultural contexts. First I will comment on two narrative arcs that compete in the French history of war: the arc of redemption and the arc of culpability. I will then discuss interviewees’ rejection of their own victimhood, and the importance of being listened to. Finally, I will show that trauma from World War II may be swallowed by subsequent violent events.

Many people I interviewed linked the Allied bombing of France to the country’s liberation in 1944. Partly, of course, this is because eighty per cent of air raids and seventy per cent of civilian deaths from bombing occurred that year. But the link has explanatory power. Josette Dutilleul said ‘we know it was to liberate us’, and Yvette Chapalain commented that ‘we were conscious that this needed to happen to liberate us from the Germans’. Both women attributed firm purpose to the bombing, placing it into a bigger narrative arc of France’s redemption (which includes resistance). When liberation arrived, the erstwhile bombers were welcomed, Josette explained, ‘with open arms!’ Yvette continued:

> Afterwards, the end of the war, I made friends my own age, we danced, we sang in the stones, the rubble, the debris. We had our whole lives ahead of us, we were full of hope.

Dancing on the rubble of bomb-torn Brest symbolically stamped out the past. But both women had earlier recounted troubling experiences linked to bombing: why did they not mention trauma? Dominick LaCapra writes of the ‘fetishistic narrative that excludes or marginalises trauma’ in a story that ‘presents values and wishes as viably realised’. Here, traumatic memory is displaced by a more useful story of redemption: we sinned, we were punished, we were saved. The reconstruction of public memory occurred in many European countries.
Writing of Italy, Pezzino comments that ‘multiple’ memories ‘were made to merge […] into a “public memory” so as to lay the foundation for a new collective identity’. Within this psychological reconstruction, the dominant version that linked bombing to liberation silenced, reshaped and excluded less triumphant voices, including those of the traumatised.

Yet the story is more complex: the same events are also shaped into a culpable narrative of collaboration that has grown to dominate versions of the French wartime past. Wolf proposes that the French obsession with guilt has prevented a genuine ‘confrontation’ with the past and replaced it with an ‘incessant renunciation of Vichy’. However, in my interviews, Vichy barely featured while French participation in the Holocaust crept into stories of bombing; people subordinated their own experiences of wartime violence to those they saw as more traumatizing for others. Serge Aubrée, Claude Thomas, Michel Thomas and Bernard Lemaire all emphasised that deportation of Jews from France was the most terrible part of the war. Others mentioned finding out about the extermination camps after the war, redefining the meaning of their own lived experience: the ‘worst’ they had suffered as ‘not as bad’ as this. Thus the French civilian experience of war slid down the hierarchy of suffering as the shame of collaboration grew more public. Layman noted that when personal memory clashed with public memory, narrators could become reluctant to articulate certain experiences. Bombing was ‘a bit like our punishment’, said Max Potter; if France was guilty enough to be punished by bombs, what right had survivors to speak of trauma? Neither the narrative of redemption nor that of culpability permits space to speak of civilian war trauma.

By extension, both narratives contribute to a rejection of victimhood among civilian survivors of the Allied bombing. As previously noted, trauma has frequently been equated with victimhood, a legal, political and moral category. Many interviewees denied that they were victimised by the Allied bombing. Jean Caniot said that ‘patriots’ knew that ‘the goal wasn’t to martyrise the population’, and Henri Girardon told me that the Allies bombed Brest’s arsenal on Saturdays because workers had the day off. Morally, given that they were not persecuted, people felt unentitled to claim victimhood. Wolf wrote that non-Jewish groups in France have used the Holocaust as a metaphor for their own victimisation: the opposite seems true here. The Holocaust was rejected as consonant with personal experience; there was recognition that acts of terrible persecution were more destructive, that suffering is relative, and victimhood not universal. Claiming one’s own victimhood could thus be a ‘dangerous breach of social and political orthodoxies’. This is part of the legacy of competing ‘hierarchies of suffering’ in postwar France, as resistance fighters, ‘racial’ deportees, prisoners of war and deported labourers jostled for position; bombed children and teenagers had little agency through which to assert claims for recognition. Layman calls reticence a strategy of control over one’s narrative; control here consists of not naming oneself a victim, or labelling oneself as traumatised. Trauma can exist, unnamed and unwanted, in complex processes of self-evaluation and disclosure.

Trauma needs a space in which it can be spoken of; it needs a listener. But the Allied bombing has until very recently had little place in the French public domain. Without ‘suitable narrative codes or other forms of representation, as well as publics prepared to believe and witness trauma may remain unspoken. The many associations of bombed-out people, active in the post-war period to campaign for material compensation, did not seek other forms (cultural, symbolic etc) of recognition. Lagrou notes that popular recognition of wartime suffering now hinges upon those persecuted for who they were (Jews, gypsies, homosexuals); in the immediate aftermath of war it hinged upon those who were mistreated for what they did (resistance fighters, political prisoners, POWs); yet no-where is there space for those who suffered neither for who they were nor what they did. Some small, local memorials to those who died in the bombing do exist. On the Délibranc housing estate near Lille, 500 people were killed in one raid, but the discrete plaque notes only that they were ‘victims of war’, not of bombing. ‘In the mechanisms of social memory’, Lagrou writes, ‘the dead have no role to play’, they cannot ask to be remembered. The silence around bombing is socially determined, and has not invited the public articulation of memories, traumatic or otherwise.

Later life trajectories affect memories of childhood; here I will just consider one peculiarity of this generation. The Indochina War (1946-1954) and the Franco-Algerian War (1954-1962) meant that soon after liberation, war reappeared as part of French national life. Those born in 1936 were eight at liberation, and began military service in 1954; the Algerian War later forced 70,000 men who had completed their military service back into the army. The Second World War and the wars of decolonisation are often seen as belonging to different generations: McCormack declared that the 1990s witnessed the end of ‘obsession’ with World War Two; President Mitterand’s death in 1996 saw his Vichy generation give way to that of Chirac, himself stationed in Algeria between 1956 and 1960. Yet Chirac’s generation were the war children of 1939-45. Benjamin Stora has criticised such ‘cloistered memories’: the delineations that appear to separate 1939-45
from 1954-62, leaving the Algerian war as ‘largely undigested’ in French memory.

When I interviewed veterans about their experiences of being bombed as children, several rejected them outright as traumatic, using their own military service as evidence for ‘worse’. Such experiences were undoubtedly enormously difficult. Lucien Agache said he was ‘more affected later by the Algerian war’, while Michel Jean-Bart said that Algeria ‘was more terrible. Because there [during 1944] we heard the planes, while there [Algeria] we had them behind us, over us, we didn’t know where, when or how’. Paul Termote told me: ‘we had that war there [1939-1945], and then afterwards, we had the Algerian War. Well, that, that was something else!’ Each man compared the two wars, without inviting more questions. Referencing Algeria drew a line under my questions which probed their own childhood responses. Layman notes that men’s talk tends to avoid self-disclosure; these men avoided it both when speaking of childhood and of fighting in ‘dirty’ wars. The Algerian war has a ‘traumatic legacy’ in France, again among sections of the population whose memories compete; ex-serviceman have had some success in getting their own war traumas recognised, but there is an underlying discomfort about acts of war now subject to the greatest public disapproval.

Henri Girardon, a professional soldier, linked his own non-traumatised wartime childhood with other childhoods in war-torn countries he knew:

What we saw in Algeria, in Indochina, you see, it’s – . In Indochina, of course, they always show that picture of that poor little girl burnt by napalm. It’s true. But there wasn’t only that. Children continue to play…

Henri’s own jolly wartime childhood softens his thoughts of what he may have inflicted on children elsewhere. The burnt girl was anomalous; he hoped other children coped with the violence of war as well as he had. In Moses and Monotheism, Berger states, Freud proposes that each national catastrophe invokes and transforms memories of other catastrophes, so that history becomes a complex entanglement of crimes inflicted and suffered – with each catastrophe understood – that is misunderstood – in the context of repressed memories of previous ones.

By treating the Second World War and the wars of decolonisation separately, we lose the connections between them, particularly in the form of war children turned into soldiers. When veterans were asked about bombing in childhood, memories of another war – constricted but present – crept out.

Conclusion

Sean Field rightly states that ‘all traumatic experiences are painful. But not all painful experiences are traumatic’. It would be wrong to suggest that all those bombed as children in France or elsewhere developed PTSD which they have hidden or repressed. Bombing is objectively traumatising, but whether trauma develops is subjective, depending on many variables, including feelings of security, emotional reassurance, rationalisation of fear, the possibility of self-preservation, compared to near misses, horrific scenes, bereavements, and so on. Yet within these oral history narratives, we see glimpses of traumatic memory, even if not articulated as such. Oral history tells of events through memory, but memory is both socially constructed and personal, mirroring the personal and social nature of trauma.

Memory and history are uncomfortable bedfellows in France. While Pierre Nora’s Realms of Memory is accepted as a seminal work in memory studies, Wood points out that it has created a dominant idea of performative, national memory which is ‘qualitatively different to a memory that is merely lived and experienced’. Small-scale personal memories of bombing – merely lived and experienced – have until recently found little place in official histories in France. Thus the historical circumstances of war, reconstruction and commemoration have restricted the expression of potentially traumatic experience within parts of the population. The powerful filters of resistance and collaboration, through which all history of ‘the dark years’ must pass, were activated from 1944. In stark contrast to other nations, the land of liberty, equality and fraternity has, until recently, dismissed individual testimony as ‘partial and partisan’; for that reason, childhood memories of war and bombing – and with them traumas – have gone unheard, many passing to the grave unresolved.

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PTSD permits 'partial' classifications, recognising that flexibility is required within subjective processes.


22. Interview with Sonia Agache (born 1938) in Villeparisis on 8 April 2009.


27. Interview with brothers Claude (born 1931) and Michel Thomas (born 1929) in Boulogne-Billancourt on 6 April 2009. All interviews recorded by the author. No interviewees cited here requested anonymity.

28. Interview with brothers Claude (born 1931) and Michel Thomas (born 1929) in Boulogne-Billancourt on 6 April 2009. All interviews recorded by the author. No interviewees cited here requested anonymity.

29. Interview with brothers Claude (born 1931) and Michel Thomas (born 1929) in Boulogne-Billancourt on 6 April 2009. All interviews recorded by the author. No interviewees cited here requested anonymity.

30. Interview with brothers Claude (born 1931) and Michel Thomas (born 1929) in Boulogne-Billancourt on 6 April 2009. All interviews recorded by the author. No interviewees cited here requested anonymity.


47. Interview with Andréa Cousteaux (born 1927) in Brest on 20 April 2009.


51. Interview with Yvette Chapalain (born 1929) in Brest on 3 April 2009.


55. Interview with Max Potter (born 1929) in Paris on 11 April 2009.


60. Leydesdorff, 1999, p 16.


64. Interview with Lucien Agache (born 1934) in Villeneuve d’Ascq on 29 April 2009.

65. Interview with Paul Termote (born 1935) in Heillenmes on 29 April 2009.


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