

# **Discerning and Transforming Spiritual Trauma: A Harm Reduction-Based Approach to Social (Justice) Work**

by:

**Edward Kruk, Ph.D.**  
School of Social Work  
University of British Columbia  
[kruk@interchange.ubc.ca](mailto:kruk@interchange.ubc.ca)

## Abstract

This paper explores aspects of a unique and “marked” form of human suffering – spiritual trauma – associated with physical and/or mental pain, psychological torment, and social exclusion. Although the same event may plunge one person into a state of spiritual trauma and not another, the many faces of such trauma share certain characteristics, such as preoccupation with the painful source of the trauma, and feeling oneself to be enslaved by it; social exclusion, objectification and marginalization; and internalized oppression. Individual and collective human responses to trauma are examined; spiritual trauma is a type of suffering from which others recoil, and the question, “Is it possible for human beings to have true compassion for spiritual trauma?,” is posed. As part of this discussion, the nature of compassion is considered, challenges to discerning spiritual trauma are discussed, and barriers to receiving help for those in the midst of trauma are revealed. It will be argued that social work, the profession most suited to intervene in situations of spiritual trauma due to its phenomenological and holistic perspective and social justice emphasis, has not adequately addressed the needs of those afflicted by spiritual trauma. Finally, a framework for social work practice and education vis-à-vis spiritual trauma is articulated, which goes beyond a rights-based approach, embraces social justice as harm reduction, and focuses on human needs and social obligations, toward the goal of spiritual transformation in such cases.

The writings of social philosopher and activist Simone Weil will inform the discussion, and the perspective of those experiencing spiritual trauma, including those struggling with issues related to addiction, family dislocation and parent-child estrangement, life-threatening illness and serious mental illness will be highlighted.

## Introduction

Spiritual trauma is, essentially, the violation of the sacred or spiritual core in human beings, harm at the innermost level. What constitutes the sacred core in human beings—what exactly is this spiritual core? Is there a spiritual core that is shared by all human beings, from early infancy, even from the point of conception, until the tomb?

If one accepts Weil’s (1951) definition of creation--good broken up into pieces and scattered throughout evil—one may come to discern the unifying human spiritual core. There is a core of good in all of

us; in some it shines forth, in others it becomes extinguished. What this core is exactly is beyond the scope of our knowledge.

There is one thing that most human beings would agree on as located at the core of our beings; and most religious traditions would label as the spiritual core of human beings—and that is the child-like yet profound expectation that good and not harm will come to us. When this is violated then we have suffered an injury to our spirit; at the extreme, this expectation that good will come to us is replaced by what Philip Roth refers to as the “wisdom of someone who has no expectations.”

## **Defining Spiritual Trauma**

It is not the shrill voices alleging violence and abuse, oppression and victimization that are the subject of my presentation; it is the invisible, silent and anonymous voices, who monotonously, incessantly cry out, “Why? Why am I being hurt? Why do I have to go through this trauma? For what purpose?,” that are my focus. Theirs is a silent cry, a mute cry, a cry that knows that it won’t be heard. The cry of those who have the wisdom of no expectations.

As social workers we often not only pass by these victims of what I will call “spiritual trauma,” we are often implicated in their suffering, the result of misguided practice methods and interventions that are experienced as judgment, punishment and control.

For example, spiritual trauma is often the precursor of addiction, mental health problems, and child neglect, but rather than addressing the root causes of trauma, we work in the shadow of criminal justice policies that punish, mental health diagnostic criteria that objectify and marginalize, and treatment models that are concerned only with surface symptoms. This paper proposes an alternative approach, one of social justice based on harm reduction principles and strengths-based practice, in which human needs and social responsibilities remain at the forefront of social work practice and education.

It is difficult to even begin to estimate the prevalence of spiritual trauma in today’s world. Most people spend their lives trying to avoid such a condition. It is difficult to understand the experience of extreme suffering, as no two afflictions are exactly alike: no two responses to trauma are the same.

Affliction is a little-understood concept today partly because of the limitations of the English language to describe this particular form of suffering. The French *malheur* is said to capture the essence of a condition characterized by some degree of three core elements: physical pain, social degradation, and psychological and spiritual torment. Even more ambiguous is the connection between affliction and compassion, although the nature of this relationship lies at the heart of the spiritual teachings of ancient traditions. The Greek myth of Prometheus and the Biblical account of Christ’s passion are examples of treatises on affliction and love. The *Iliad*, the “poem of might,” graphically illustrates the ancient Greek association between the ravages of domination (the opposite of compassion) and the state of affliction. We rely less on these and other ancient texts for guidance in human service work with the afflicted, although they have much to say about the matter. On a community level, as citizens we have largely disengaged from the afflicted, transferring our caregiving obligations to the hands of specialists: professional service providers. John McKnight (1995) suggests that this has blunted our capacity to care for each other as friends, neighbours and fellow community members.

The French philosopher, social activist and mystic Simone Weil (1909-1943) focused on the link between love and affliction perhaps more than any other twentieth-century writer. A French woman and a Jew, she wrote about affliction and love from the perspective of a range of spiritual traditions,

including ancient Greek and Egyptian spirituality, Christianity, and gnosticism; and Hindu, Buddhist and Taoist influences are strongly present in her work. This article examines her reflections on the nature of affliction, and the relationship between compassion and affliction. Her own words will be used in this article to exemplify her thought.

Simone Weil wrote in a concise, forthright manner: “Compassion for the afflicted is an impossibility, a miracle akin to walking on water, healing the sick or raising the dead.” Yet she lived her life in a manner that reflects a strong identification with and compassion for others in affliction, to the point of her own death. Stricken with tuberculosis in a foreign land, she simply stopped eating, in solidarity with her war-torn compatriots starving in France.

I will explore some of the core characteristics of people in affliction, as well as individual and collective human responses to this phenomenon, and will focus on the question, “Is it possible for human beings to have compassion for the afflicted?” This will lead to a discussion on the challenges facing those who wish to work with afflicted people in a more compassion-based and spiritually-grounded manner.

## **Characteristics**

*Affliction* is an extreme form of suffering. But it also transcends suffering. Simone Weil writes that in the realm of suffering, affliction is “something apart, unique and irreducible.” Affliction is an “uprooting of life, a kind of a death, which is anonymous, indifferent, and blind. Its power is largely the result of the element of chance which it contains.” Although personal factors come into play, as the same event may plunge one human being into affliction and not another,[1] affliction is random, and arbitrary, the result of chance and circumstances.

*Slavery.* A sense of slavery is central to the definition of affliction. Affliction “seizes the human soul and possesses it, marking it with a particular mark: the mark of slavery.” The ancient Greeks, who knew a great deal about the subject, used to say: “A man loses half his soul the day he becomes a slave.” This sense of slavery might today be labeled obsession, depression, psychosis or some form of personality disorder. According to Weil, however, such formulations are mistaken, as affliction has little to do with the personality. It has everything to do with the soul. Affliction is above all else, a mutilation of the soul by the blind, mechanical brutality of circumstances.

Affliction chains one down. It chains down thoughts and feelings. It is “at the root of every thought and feeling, without exception;” it filters into every aspect of one’s life, physical, psychological, and social. But mostly it induces a spiritual torment; the soul becomes steeped in pain. Those who have never had contact with affliction in its true sense can have no idea what it is, even though they may have known much suffering. Affliction is specific, and impossible to compare with anything else. It pierces through to the very centre of one’s soul, and thus involves an immensity of force, blind, brutal, and cold.[2]

From affliction there is little escape. “It marks one as a slave,” Weil writes, “like the branding of the red-hot iron the Romans used to place upon the forehead of their most despised slaves.” The afflicted come to feel themselves to be cursed. And they feel like objects: “affliction deprives people of their personality and turns them into things.” In affliction “one is turned into a blank, his loss of identity complete. I can no longer think as before, nor do I look men straight in the eyes; my own eyes are no longer the same.”

In affliction “the soul is constrained to repeat...a sustained, monotonous groan, ‘Why? Why am I being

hurt?' To which there is no answer given." There is no apparent meaning to the suffering in affliction. Affliction is anonymous and indifferent, and "it is the chill of this indifference--a metallic chill--which freezes those it touches, down to the depths of their soul." Affliction is particularly devastating to "those who have known joy in their lives, and who have tasted the flavour of the world's beauty, for joy and beauty are the same thing. At the same time, this is the person least deserving of the punishment" of affliction.

*Contempt for affliction.* Simone Weil describes affliction as producing a highly intense "state of mind as acute as that of a condemned man who is forced to look for hours at the guillotine which is going to behead him. Human beings can live twenty years, fifty years, in this acute state. Others' reaction to this state is the second core element of affliction: it inspires horror and repulsion in others. Affliction causes one to be despised, feared and marginalized--the sort of reaction that one would expect toward wrongdoing is in fact attached to affliction. Some of those who are not afflicted enjoy feeling the distance between themselves and the afflicted, others are kept far away by a difference of situation and a lack of imagination, or empathy. We see afflicted people as "specimen(s) of a certain type" and assign a variety of labels, and that is where our responsibility ends.

According to Weil, it goes against human nature to love someone who is afflicted. Human nature recoils in the presence of affliction; some avert their gaze while others unleash their contempt. True compassion for the afflicted would have to entail a "voluntary, consented equivalent of affliction"--that is, identifying oneself with the afflicted person to the point of taking on part of the affliction. True compassion is "suffering with" another.

*Self-contempt of the afflicted.* Over time, according to Weil, the contempt, revulsion and hatred of others toward afflicted persons is turned inward, as they come to believe that their treatment is just. It follows that "it is very difficult to for an afflicted person to help others," as "affliction discourages and hardens a person. It stamps the soul with contempt, disgust, and even the sense of guilt and defilement that evil logically should produce but actually does not. Evil is not felt in the heart of the criminal; it is felt in the heart of the person who is afflicted and innocent...The state of soul appropriate to those who harm others is separated from their violence and attached to affliction--seemingly in proportion to the innocence of those who are afflicted."

Affliction is largely mute. "There is a natural alliance between truth and affliction," because both are "mute supplicants." The afflicted sink into impotence in the use of language, because of the certainty of not being heard.

There comes a point in affliction when one can't bear either the thought that it should go on or that one should be delivered from it. "To be delivered from a long drawn-out affliction would make all that one has gone through seem almost useless." Inertia is another characteristic of affliction; the afflicted are largely unable to make efforts to improve their lot and appear almost content with their lot. Others view such an attitude as something ridiculous.

Weil focuses further on the spiritual crisis accompanying affliction: affliction causes all good to be absent for a time, during which a kind of horror submerges the soul, characterized by an absence of light. During this absence there is nothing to love. If in the darkness the soul ceases to love, the darkness becomes permanent. "The soul has to go on loving in the void, or at least go on wanting to love, though it may be only with an infinitesimal part of itself"--that is, remaining oriented toward the good, toward love, through the affliction. The most one can usually do when in a state of affliction is to refrain from ceasing to wish to love. "Then, one day, light and the beauty of the world may

reappear...But if the soul stops loving it falls into a kind of hell.”

One important lesson learned from affliction is that “we can no longer believe that the world is created or controlled by ourselves. Affliction reveals, suddenly and to our great surprise, that we were totally mistaken in this regard.” When this is accepted, we encounter the reality of the world’s “necessity,” or force. Affliction exposes our vulnerability and fragility. According to Weil, without affliction it is impossible to know that everything in the soul-- “all its thoughts and feelings, its every attitude towards ideas, people, and the universe, and above all, the most intimate attitude of the being toward itself--is entirely at the mercy of circumstances. In this sense affliction contains the truth about the human condition.” She expresses this truth in stark terms, “I may lose at any moment, through the play of circumstances over which I have no control, that which is dearest to me, so precious that I consider it as being myself. There is nothing that I might not lose. It could happen at any moment that what I am and whatever goodness there may be attached to my life might be abolished and replaced by anything of the most vile and contemptible sort. The nightmare cruelty of life is not in the remote and fantastic, but in the probable--the horror of love, loss, betrayal...one cannot contemplate it without terror, the extent of the harm which man can do, and endure.”

It is only when suffering comes to be seen as “something divine, in and of itself, not because of compensations, consolations, or recompenses,” that we are touching something at the core of the good. In this context Weil says that “for those in affliction, evil can be defined as being everything that gives any consolation.” She also believes that “no matter what degree of affliction one is submerged in, one has deserved at least that much. Because it is certain that before becoming afflicted, one has been an accomplice, a collaborator, in plunging others into affliction, through cowardice, inertia, indifference or culpable ignorance. Among our institutions and customs there are things so atrocious that nobody can legitimately feel himself innocent of this diffused complicity. It is certain that each of us is involved at least in the guilt of criminal indifference.

## **Compassion for Victims of Spiritual Trauma**

Is compassion for the afflicted an impossibility? Simone Weil asserts that “knowledge of another’s affliction is by nature impossible both to those who have experienced it and those who have not.” Even were such knowledge to be obtained, compassion, as “suffering with,” entails voluntarily consenting to assume part of that affliction, and that goes against our nature as human beings.

But then she explores the question more deeply. Compassion for the afflicted is possible when compassion rests upon a deep knowledge of affliction, which entails a process of coming to see the face of affliction, getting to know the person behind the affliction, and acting accordingly. When this happens it is always a miracle, “akin to walking on water, healing the sick or raising the dead.”

### *Attention: Love as an orientation*

For Simone Weil, “compassion consists in paying attention to an afflicted man and identifying oneself with him in thought.” She wrote a great deal about attention as the key that opens the door to compassion for the afflicted: “Those who are unhappy have no need for anything in this world but people capable of giving them their attention.” Paying attention is not as easy as it may sound. Feigning attention is much more common; we do this in the course of our daily lives, fooling ourselves that we have really listened. We spend much of our lives pretending to care, and we rarely think about the consequences. We are taught that we are supposed to care about one another, but often we refuse to expend the energy, or we don’t know how. The quality of being attentive is in decline. Most of us have good intentions, but “good intentions are among those that pave the way to hell.”

Simone Weil proposes that we be more attentive, particularly to those in affliction. Not false attention, but truly "suspending our thought, leaving it detached, empty, and ready to be penetrated by the object [of attention]." There must be a real desire to concentrate, without becoming distracted. We must project our own being into the affliction of the other, sharing the affliction, becoming, in a sense, personally afflicted.

She wrote, "At the bottom of the heart of every human being, from earliest infancy until the tomb, there is something that goes on indomitably expecting, in the teeth of all experience of crimes committed, suffered, and witnessed, that good and not evil will be done to him. It is this above all that is sacred in every human being." "The capacity to give one's attention to a sufferer is a very rare and difficult thing; it is almost a miracle; it is a miracle. Nearly all those who think they have this capacity do not possess it. Warmth of heart, impulsiveness, pity are not enough." "Love for our neighbour, being made of creative attention, is analogous to genius." "God is attention without distraction."

Richard Bell (1999) writes that Weil's concept of attention has to do with discernment of what someone is saying, the kind of protest a person makes who is being harmed, and the social conditions which create the climate for injustice and oppression. To see affliction and not avoid it, to direct our compassion toward affliction, requires a deep knowledge of affliction, the ability to read affliction. It then involves giving to those who have been stripped of their humanity an existence of their own, an existence apart from their affliction. This requires considerable courage and sacrifice--a detachment from self and complete focus on the other person, and overcoming our fears in regard to affliction.

The implications of such an orientation for human service workers are profound. True attention means being yourself, spontaneous, and not in a role, not putting on a "professional mask." The inadequacy of notions such as "professional boundaries," "compassion fatigue," and "co-dependency" becomes apparent. Genuine caring requires genuine interest, respect, risk-taking, and getting to know a person, the essence of that person, at his or her own pace. It means not shying away from affliction, and seeking the kernel of good within the afflicted. Attention involves reducing the distance between oneself and the other, behaving exactly as though there were equality when one is in fact stronger in an unequal relationship. It demands that we listen and understand the afflicted from their own perspective.

Attention is a time-consuming process. Without it, however, we do more harm than good to those in affliction. According to Weil, "giving to another capriciously, irregularly, or else too regularly, or in conformity to social convention, or from vanity or emotional pity, or for the sake of a good conscience--all self-regarding motives--may be rewarding to the person who gives, but his 'gift' is an injury to the afflicted person, who is regarded only as a specimen of a certain type of affliction." True understanding of the afflicted implies knowledge of the affliction and the person, possible only through an attitude of attention.

Humility is also an essential ingredient for attention. Weil wrote about anonymity in this regard: "Dazzling achievements are possible, which can make a man's name live for thousands of years. But above this level, far above, separated by an abyss, is the level where the highest things are achieved. These things are essentially anonymous." Through quiet, patient attention we may begin to understand the reality of affliction, recognize our part in the affliction of others, and acquire the humility not to impose our solutions, our best intentions, upon others.

At the same time that attention is required of those who are working with an afflicted person, those in affliction must be predisposed to receiving it, which is also not an easy matter. For those in affliction,

“constrained to repeat like a sustained, monotonous groan, ‘Why am I being hurt?,’” there appears to be no way out. Trust does not come easily. Those who appear compassionate usually have a personal agenda, exploit others’ misery, or seek to control or exert their power over the vulnerable.

An orientation of patient waiting--another kind of attention--is necessary on the part of the afflicted person: “We do not obtain the most precious gifts by going in search of them but by waiting for them.” Throughout the horror of affliction, a person can only go on wanting to love, and waiting. No pain, however great, can touch that part of the soul which consents to the direction of the good. “It is only necessary to know that love is an orientation and not a state of the soul. Anyone who does not know this will fall into despair at the first onset of affliction.” Remaining oriented toward love in the midst of affliction requires a high degree of courage.

Simone Weil refers to the myth of Prometheus, Book of Job, and story of Christ’s Passion as examples of continuing to love in affliction, keeping focused on the good while forsaken and humiliated. Not merely to love, but to love beyond all reason in the depths of affliction. Twentieth-century accounts of Holocaust survivors reflect this orientation, such as the writings of Elie Weisel.

“A blind mechanism continually tosses us as human beings about and throws some of us into the deepest recesses of affliction. It rests with us to keep or not to keep our eyes turned toward love through all the jolting.” Those who find themselves in a state of affliction must be predisposed toward the good, oriented in its direction, even in the absence of good in their lives, in order to be able to receive and make use of it when it comes to them.

Simone Weil defines love as an orientation, not a state, of the soul. The fundamental choice we have as human beings is to orient ourselves toward or away from good, to turn our eyes toward one or another direction. The natural human reaction of those in the throes of affliction is profound discouragement and a tendency to believe that one is unlovable, and a turning away from the direction of good. For those not in affliction, the natural tendency is to recoil, avert our eyes, respond with contempt to the sight of affliction. The opposite of contempt is attention and compassion, which in the case of affliction demands a great deal of us, and in a sense goes against our nature.

## **Harm Reduction, Social Justice, and Social Work**

Simone Weil also talks about love as action in her meditations on justice which, following the classical Greek origins of the word, she defines as “seeing that no harm is done to another.”

According to Weil, the word “justice” has lost its meaning in modern times, replaced by a vacuous notion of “rights,” with devastatingly harmful results, including the blunting of our pursuit of justice. She writes, “to place rights at the centre of social conflicts inhibits any possible impulse of compassion on both sides.” This is because, first of all, “rights” refer to individual entitlements, and focus our attention toward the question, “Why don’t I have as much as he has?;” that is, toward calculating what one can obtain as compensation for harms that have been done, and away from the harms themselves. Numbers and calculation trivialize the immensity of force exerted and the harms done in affliction. Secondly, rights are always asserted in a tone of contention, which must rely on force in the background, and to buy into rights language is to believe that power can be counter-balanced by power. To say “if we could just achieve equal rights...” means either snatching rights from someone else, or imposing an ideology. The afflicted have already been subject to the ravages of power; the call to regain power over others as a redress is to transform suffering into violence, and the harms are likely to multiply.

A rights-based orientation imposes a moral mediocrity. “Thanks to rights, what should have been a cry of protest from the depths of the heart turns into a shrill nagging of claims and counter-claims.” It becomes impossible to keep focused on the real problem: that fact that an injustice has occurred, a harm committed, which cannot be understood as a right that has been taken. Weil uses the example of a young girl being forced into prostitution: it is not just a violation of rights that she has experienced--she has suffered an injustice, and we mean by this that she has experienced a type of harm done to her which cannot be adequately understood as a “right” taken. What has been taken and what can be returned in place of the sexual violation? “The real problem cannot be solved by compensation; her cry must be heard.” A “restorative justice” response is needed.

In contrast to the notion of rights is Weil’s view of justice as “seeing that no harm is done to another,” evocative of the focus of the emerging “harm reduction” and “restorative justice” movements. Compassion for the afflicted is realized by means of actions based upon human obligations. Although human rights are seen to have a place in social conflicts, rights are preceded by obligations. Through attention we are able to read the nature of the harm being done; love as an orientation makes this possible. We enter the realm of love as action when we act according to what we read, which involves reducing harm in particular instances. We are called to take action: “Compassion,” she says, “consists (not only) in paying attention to an afflicted man and identifying oneself with him in thought. It then follows that one feeds him automatically if he is hungry, just as one feeds oneself. Bread given in this way is the effect and sign of compassion.”

Love as action requires consideration and forethought. To move into the realm of action is to adopt an ethic of care, a compassion-based morality, within which we assume an unconditional obligation not to let another “suffer from hunger when one has a chance of coming to his assistance.” The process of recognition of harms that have been done to another involves deep attention when the other speaks. “Whenever the cry arises from the depths of another’s soul, ‘Why am I being hurt?,’” harm is being done at the level of “that which is most sacred” in a human being: the expectation that good and not harm will be done, the longing for good. Through attention, we begin to recognize instances in which the “sacred” has been violated in another. Thus any action we take is at that spiritual level, and involves preserving or restoring that which is most sacred to another.

It is also important to name injustice and oppression where it occurs. As we read the circumstances that give rise to injustice, we ourselves feel a little of injustice’s imperative force. In all the work we do in the context of affliction, we neither respect nor practice power and control over others. Fear, pain, cruelty, humiliation, and shaming make up our reading of the circumstances that give rise to injustice, and evoke a concern for justice. Elizabeth Wolgast writes that to call something unjust is to take it out of the realm of disinterested reportage; saying that something is wrong or an injustice marks it for moral concern and moral indignation.

It is critical that the process of assessing alternatives for action to reduce harm, determining goals, be done from the perspective of the afflicted person. Self-determination and self-efficacy are core elements of justice-based or harm reduction work; that is, the belief that the afflicted person has the capacity, strength and will to reach his or her goals, rather than having to adapt to the expectations of the caregiver. Harm reduction work is unconditional; we do not bypass an afflicted person who opens him- or herself to us, nor do we impose our “agenda” or “prescribe” a course of action on behalf of that person. When we do the latter, we violate a person’s autonomy and become an agent of social control.

We live in an age where we increasingly rely on institutional caregiving, and within institutions,



professional service providers may act as agents of social control. Naming those practices that oppress the marginalized and afflicted, while developing alternative harm reduction methods, are strategies that human service workers can implement as a first step. A primary allegiance to the afflicted person, and not to one's institution or profession, is central. The shift from a social control to a social justice approach to caregiving presents multiple challenges. Keeping in mind core harm reduction principles behind a social justice approach, however, which include self-reflection, a focus on reducing harms, self-efficacy, informed choice regarding options, self-determined goals, and unconditional access to services, will aid the human service worker in staying the course of justice as compassion.

As intermediaries and harm reduction practitioners, human service workers have the potential to facilitate spiritual transformation in both afflicted and non-afflicted people, by acting as bridges in the relationship between them. The mediation role is thus important, linking afflicted persons with systems of support, including friends and family members, communities, and institutions. For the afflicted, the opportunity to give voice to the harms they have experienced is in itself transformative. To have these experiences recognized and validated by another, perhaps even the one who caused or allowed the harm to happen, is profoundly healing, and a precursor to seeing that no further harm is done. This is the work of healing through restoration of human dignity, and restoration of loving life-sustaining relationships. This is the place where moral and spiritual beauty is in full flower, where compassion for the afflicted reflects the "harmony of chance and the good."

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Affliction is sometimes the result of arresting the harm done to us within ourselves. Our alternatives at such critical points in our lives are often limited. When we are hurt to the point of suffering a blow in the depths of our souls, we are given a choice, however momentary, between either affliction or retribution. It is possible for us to suffer less by transferring the hurt back onto the person who has hurt us, or onto another and away from oneself. However, retribution usually results in a multiplication of harms, whereas suffering arrests the harm in oneself, reducing it for others. At certain brief moments in our lives, writes Weil, we are faced with a fundamental choice--either transform suffering into violence, or violence into suffering.

Weil describes those who plunge others into affliction as "killers of souls."