T.C.
SÜLEYMAN DEMİREL ÜNİVERSİTESİ
SOSYAL BİLİMLER ENSTİTÜSÜ
BATI DİLLERİ VE EDEBİYATI ANABİLİM DALI

GRAHAM GREENE'İN *BRIGHTON ROCK* ADLI ESERİNDE PSİKOLOJİK TRAVMA VE TRAVMA SONRASI STRES BOZUKLUKLARI

HAZIRLAYAN
Emre ÇELİK
1830224009

YÜKSEK LİSANS TEZİ

DANIŞMAN
Dr. Öğr. Üyesi Şule ÖZÜN

ISPARTA – 2022

REPUBLIC OF TURKEY
SULEYMAN DEMIREL UNIVERSITY
INSTITUTE OF SOCIAL SCIENCES
DEPARTMENT OF WESTERN LANGUAGES AND LITERATURE

PSYCHOLOGICAL TRAUMA AND POST-TRAUMATIC STRESS DISORDERS IN GRAHAM GREENE'S *BRIGHTON ROCK*

Emre ÇELİK
1830224009

MASTER'S THESIS

ADVISOR
Dr. Öğr. Üyesi Şule ÖZÜN

ISPARTA – 2022

TEZ SAVUNMA SINAV TUTANAĞI

T.C.
SÜLEYMAN DEMİREL ÜNİVERSİTESİ
Sosyal Bilimler Enstitüsü Müdürlüğü

YEMİN METNİ

Yüksek Lisans tezi olarak sunduğum "Graham Greene'in *Brighton Rock* Adlı Eserinde Psikolojik Travma ve Travma Sonrası Stres Bozuklukları" adlı çalışmanın, tezin proje safhasından sonuçlanmasına kadarki bütün süreçlerde bilimsel ahlak ve geleneklere aykırı düşecek bir yardıma başvurulmaksızın yazıldığını ve yararlandığım eserlerin Bibliyografya'da gösterilenlerden oluştuğunu, bunlara atıf yapılarak yararlanılmış olduğunu belirtir ve onurumla beyan ederim.

Emre ÇELİK
28.06.2022

T.C.
SÜLEYMAN DEMİREL ÜNİVERSİTESİ
SOSYAL BİLİMLER ENSTİTÜSÜ
TEZ ÇALIŞMASI ORİJİNALLİK RAPORU
BEYAN BELGESİ

SOSYAL BİLİMLER ENSTİTÜSÜ MÜDÜRLÜĞÜ'NE

ÖĞRENCİ BİLGİLERİ	
Adı-SOYADI	**Emre ÇELİK**
Öğrenci Numarası	**1830224009**
Enstitü Ana Bilim Dalı	**Batı Dilleri ve Edebiyatı Anabilim Dalı**
Programı	**İngiliz Dili ve Edebiyatı**
Programın Türü	**(X) Tezli Yüksek Lisans ( ) Doktora**
Danışmanının Unvanı, Adı-SOYADI	**Dr. Öğr. Üyesi Şule ÖZÜN**
Tez Başlığı	**Graham Greene'in Brighton Rock Adlı Eserinde Psikolojik Travma ve Travma Sonrası Stres Bozuklukları**
Turnitin Ödev Numarası	**1864082117**

Yukarıda başlığı belirtilen tez çalışmasının a) Kapak sayfası, b) Giriş, c) Ana Bölümler ve d) Sonuç kısımlarından oluşan toplam 57 sayfalık kısmına ilişkin olarak, **28/06/2022** tarihinde tarafımdan Turnitin adlı intihal tespit programından Üniversitemiz Lisansüstü Eğitim ve Öğretim Yönergesininin 14 üncü maddesinde yer alan filtrelemeler uygulanarak alınmış olan ve ekte sunulan rapora göre, tezin/dönem projesinin benzerlik oranı;

Kaynakçalar hariç, alıntılar dahil, 10 kelimeden daha az örtüşme içeren metin kısımları hariç;

% 18 'dir.

Danışman tarafından uygun olan seçenek işaretlenmelidir:

(**X**) Benzerlik oranları belirlenen limitleri aşmıyor ise;

Yukarıda yer alan beyanın ve ekte sunulan Tez Çalışması Orijinallik Raporu'nun doğruluğunu onaylarım.

( ) Benzerlik oranları belirlenen limitleri aşıyor, ancak tez/dönem projesi danışmanı intihal yapılmadığı kanısında ise;

Yukarıda yer alan beyanın ve ekte sunulan Tez Çalışması Orijinallik Raporu'nun doğruluğunu onaylar ve Uygulama Esasları'nda öngörülen yüzdelik sınırlarının aşılmasına karşın, aşağıda belirtilen gerekçe ile intihal yapılmadığı kanısında olduğumu beyan ederim.

Gerekçe:

Benzerlik taraması yukarıda verilen ölçütlerin ışığı altında tarafımca yapılmıştır. İlgili tezin orijinallik raporunun uygun olduğunu beyan ederim.

28/06/2022

Dr. Öğr. Üyesi Şule ÖZÜN

(ÇELİK, Emre, *Graham Greene'in Brighton Rock Adlı Eserinde Psikolojik Travma ve Travma Sonrası Stres Bozuklukları*, Yüksek Lisans Tezi, ISPARTA, 2022)

ÖZET

Modern zaman başladığında edebiyat ve roman kendilerine yeni bir alan bulmuşlardır. Savaşların, salgın hastalıkların ve yoksulluğun yarattığı yıkım insanların travmatik tecrübeler yaşamasına sebep olmuştur, haliyle bu durumun edebiyata yansıması da kaçınılmazdır. Nesnellikten ziyade öznellik üzerinde durulmasından dolayı, 20. Yüzyıldaki romanlar daha çok bireysel tecrübeler üzerine kurulmuştur. Travmatik ve depresif tecrübelerin kurbanlarından biri olan bir yazar olarak, Graham Greene bireyin dramını ve mücadelesini ele almaktadır. Romanlarında yoksulluk, aile içi istismar ve kriminal şiddet gibi travmatik maruz kalmaları öyküler. Greene ayrıca karakterlerinin psikolojik travmalarının farklı katmanlarını sorgularken travma kavramını da harekete geçirir. Bunun sonucu olarak, 20. Yüzyılın travmatik atmosferi Greene'in anlatımını biçimlendirmiş ve eserlerindeki birçok karakterinin de travma yaşadığı görülmektedir. Bu çalışmada Greene'in *Brighton Rock* (1938) eserinde karakterlerin yaşadığı psikolojik travma ve travma sonrası stress bozukluğu analiz edilecektir. Bunun yanında, bu çalışma travmatik bir çocukluğun bireyin yaşamının sonraki aşamalarındaki davranışları ve eylemleri üzerinde bir etkisinin olup olmadığını sorgulayacaktır.

Anahtar Kelimeler: Travma, Psikolojik Travma, TSSB, Edebi Travma Teorisi, Brighton Rock, Graham Greene

(ÇELİK, Emre, *Psychological Trauma and Post Traumatic Stress Disorders in Graham Greene's Brighton Rock*, Master Thesis, Isparta, 2022)

ABSTRACT

When the Modernist period began, literature and novel moved into a new stage. Both the physical and psychological devastation and depression left by the wars, pandemics and impoverishment caused people to have traumatic experiences, thus its reflection on literature and modernist novels was immense and inevitable. Because of their emphasis on subjectivity rather than objectivity, the novels of the twentieth century became unique with a focus on individual experiences. As a writer who was one of the victims of traumatic and depressive experiences, Graham Greene deals with the drama and struggle of the individual. He depicts traumatic exposures such as poverty, domestic abuse, and criminal violence in his novels. Greene also mobilizes the term trauma while questioning the different layers of his characters' psychological wounds. It is clear that the traumatic atmosphere of the 20th century shaped his narrative, thus almost all of his characters suffered from trauma as well. This study aims at analyzing the psychological trauma and Post Traumatic Stress Disorder (PTSD) in Graham Greene's Brighton Rock (1938). It also aims to question the effects of PTSD on characters' actions and committing crimes. This study also attempts to find out whether a traumatized childhood has an impact on an individual's behaviours and actions in the later stages of his/her life.

Key Words: Psychological Trauma, Literary Trauma Theory, Graham Greene, Brighton Rock, PTSD

ACKNOWLEDGEMENTS

I would like to express my gratitude to my dearest supervisor, Dr. Öğr. Üyesi Şule ÖZÜN whose guidance, encouragement, and support have always been great throughout my thesis. I will always be grateful and proud of being her student.

I would like to thank Mr. Philip GLOVER, Hale YAĞLIDERE and all the academic staff of Süleyman Demirel University, English Language and Literature Department.

I would also like to thank my beautiful family; my mother, my father, and my brother who have been supporting me all of my life.

Furthermore, I would like to thank my lifelong friends: Melih KURTULUŞ, Merve ELİKOĞLU, Buse ŞİMŞEK, Ruçhan Kaan EKİZ, Emre SAY and Hazal ÇAKIR for their endless support.

Lastly, I would like to dedicate my thesis to my beautiful grandparents who passed away during the pandemic. May your beautiful souls rest in peace.

Emre ÇELİK
ISPARTA-2022

TABLE OF CONTENTS

CHAPTER III
CONCLUSION

LIST OF ABBREVIATIONS

APA	American Psychiatric Association
BPP	Beyond the Pleasure Principle
DSM	Diagnostic and Statistical Manual of Mental Disorders
PTSD	Post-traumatic Stress Disorder
RTS	Religious Trauma Syndrome
Unclaimed	Unclaimed Experience: Trauma, Narrative, History
PTG	Post-traumatic Growth

INTRODUCTION

World War I left a lasting impact on the modern age and its literature. Both the physical and psychological devastation left by the Great War caused people to have traumatic experiences, thus its reflection on literature was immense and inevitable. When the Modernist period in art flourished, literature and novel moved into a new stage. Due to its emphasis on subjectivity rather than objectivity, the novels of the twentieth century became unique with a focus on individual experiences. This subjectivity did not only direct the authors to concentrate on personal experiences but it also encouraged psychologists and neurologists to work on the human psyche through unsettling past events. In the light of these alterations, Sigmund Freud, one of the most influential figures of the 20th century, started to examine soldiers who had gone through catastrophic events such as war-related shellshock by applying psychoanalysis, his innovative approach. The trauma theories that Freud introduced in his *Studies on Hysteria (1895),* which he wrote with his colleague Joseph Breuer, and *Beyond the Pleasure Principle (1920)* provided a basis for the future trauma studies. Since then, the term has been discussed in various fields such as psychology, literature, neurology, and social sciences.

Simply explained, a shocking event or an "unclaimed experience" might lead a person to have a psychological trauma. Traumatic events might leave a long-lasting damage on the victim's psyche that will affect the victim's future life. To give examples, traumatic events mainly may emerge as a consequence of wars, homicide, discrimination, violence, bullying, and a sudden demise of a family member. After being exposed to a traumatic event, victims might have a psychological disorder which is called post-traumatic stress disorder. Since trauma is an interdisciplinary term, its definition displays varieties in different fields. Literature, without doubt, has always been one of the disciplines that trauma theories involved. Since literature provides impeccable settings and characters, most theorists turn to literature to apply their trauma theories. Cathy Caruth is one of the leading figures who built a bridge between literature and trauma studies. In her groundbreaking work, *Unclaimed Experience: Trauma, Narrative, History* (1996), she adopts a Freudian approach to the concept of

trauma and points out the significance of the term in literature. Caruth is undoubtedly the most influential figure in literary trauma theory as she focuses on the relations between history, literature and personal experience. She starts defining trauma as "the Greek trauma, or "wound," originally referring to an injury inflicted on a body" (Caruth, 1996, p. 3). Caruth bases her theory upon Freud's texts, and she claims that "the term trauma is understood as a wound inflicted not upon the body but upon the mind." (Caruth, 1996, p. 3), but more than that trauma has a deeper structure and impact. In the definitions of Caruth, trauma originally refers to an injury or a physical wound, however with its usage in psychology and literature, the definition evolves to a psychological wound rather than a physical one.

In the first chapter of the study, trauma theory will be discussed in detail and a comprehensive definition to psychological trauma and its usage in both psychology and literature will be provided. *Unclaimed Experience: Trauma, Narrative, History* (1996) by Cathy Caruth, *Studies on Hysteria* (1895) and *Beyond the Pleasure Principle* (1920) by Sigmund Freud will be the primary sources in addition to other works that will be mentioned. Furthermore, this chapter will provide a comprehensible definition to PTSD and religious trauma syndrome.

The second chapter of the study mainly aims to analyse the traumas that the main characters go through and their long-lasting impacts in Graham Greene's *Brighton Rock (1938)*. It will also question how Post-Traumatic Stress Disorder (PSTD) influence their actions and committing crimes. Furthermore, the second chapter aims to find out whether a traumatized childhood has an impact on an individual's behaviours and actions in the later stages of life. Besides, the role of religion and its impact on traumatised characters' choices will be examined.

The final chapter of the thesis will be Conclusion Chapter. This chapter will present the concluding remarks on psychological trauma and post-traumatic stress disorders in Graham Greene's *Brighton Rock* (1938). It will also give clear answers to the research questions which is given in the purpose of the study.

The Purpose of the Study

This thesis aims at analysing the presence of trauma in Graham Greene's *Brighton Rock* with regard to literary trauma theory. It also seeks to provide a detailed definition of psychological trauma and its usage in psychology and literature. Additionally, the study aims to evaluate characters' traumatised lives and the impact of traumatic events on their behaviours, choices, and relationships. In other words, this study aims to answer the following questions: How is trauma defined in literary theory? How does psychological trauma affect Greene's characters' behaviours? Does PTSD trigger the characters to commit crimes? What is the role of religion on traumatised characters' choices?

The Significance of the Study

This present study is significant since it focuses on the interplay of war, history, individual choices, innocence and experience in *Brighton Rock* by twentieth-century English author Graham Greene. The novel has been discussed by the critics in terms of different points of view such as the idea of violence and the battle of gangs in the pre-war Brighton. This present study is unique since it discusses the presence of psychological trauma in the novel. The novel is considered "a catholic allegory" and "a detective story" by most of the critics who evaluated the novel with an emphasis on Catholicism, violence, pride and ambition. However, critics and researchers have not mentioned the presence of psychological trauma and its effects on the characters, which makes the study significant.

Literary trauma theories have been mostly applied to post-colonial works in which researchers have certain findings associated with trauma such as exile, discrimination, alienation and racism. On the other hand, the present study aims at analysing a modernist pre-war English novel written by an English author with a different approach. Furthermore, this thesis can be a reference for the further studies that attempt to discuss literary trauma theories in the works of pre-war English literature.

The Methodology of the Study

In the present study, a variety of methodologies and approaches have been employed, including theoretical approach, biographical approach and close reading method. In the first chapter of the study theoretical approach has been employed to explain the development and history of the notion of trauma. The research methodology in the second chapter is based on textual analysis of Graham Greene's *Brighton Rock* (1938) through close reading. For the analyses of *Brighton Rock* (1938), in addition to Freud's abreactive model and literary trauma theory, psychoanalytic approach have been used in order to observe characters' behavioural choices through situational analysis. Through the analysis of Graham Greene's *Brighton Rock*, the study has attempted to observe characters' traumatised lives and the impact of PTSD and religious trauma syndrome on their behaviours, choices, and relationships.

The Limitations of the Study

This study focuses on the use of trauma theory in literature and the traumatic events that the characters in a literary work are exposed to, rather than being a subject of clinical research. It aims to provide limited background information on trauma in terms of psychological science, however, the focus will be mostly on literary trauma theory, post-traumatic stress disorder, the layers of trauma, and its application in literature. Besides, many writers and novels might have been selected to apply trauma theory, however, Graham Greene's *Brighton Rock* has been selected since the novel answers to the definition of trauma in many aspects. Other novels of Greene had to be removed due to their incompliance with the definitions of trauma.

Another limitation of this study is that Catholicism will not be discussed as a religious ideology. There are many studies on the idea of Catholicism in *Brighton Rock*, but this study discusses only the impact of Catholicism on a traumatised person since the anti-hero of the novel hides himself behind Catholicism while committing sins and crimes.

CHAPTER I.

TRAUMA AND DISSOCIATION

1. TRAUMA STUDIES

The term trauma refers to an event that shatters and hurts an individual's physical and mental health in various forms. Originally, the word "trauma" means "wound" in Ancient Greek, and before the 19th century, it was used to describe physical wounds rather than psychological ones. Individuals who had psychological disorders believed that they had biological sicknesses causing disorders in their actions. However, with the outbreak of the wars, it was observed that soldiers and veterans who had gone through traumatic events such as violent armed conflicts, war-related shellshock, and participating in killing started to develop psychological disorders.

Especially, the World War I and II became a turning point for the notion of psychological trauma. Due to the wars, many people died, experienced battle fatigue, were injured, and lost, and the devastation (both physical and psychological) that was left by the wars caused a great number of people to suffer from psychological trauma and to develop disorders in their behavior. After the wars, it was observed that war veterans (and also non-veterans) who witnessed the death and injury of their fellow fighters developed serious psychological disorders. Psychologists such as Sigmund Freud and Joseph Breuer studied soldiers' traumatic neuroses through a new method introduced by Freud, psychoanalysis, and they came to the conclusion that recollecting past events through dreams, hallucinations or even waking consciousness gives them psychological pain.

The recalling process is one of the essential characteristics that distinguish human beings from other living creatures. Since memory is the place in which this process takes place, the notion of memory has been studied for decades to decipher the relation between the psyche and some physical actions. Memory, which reflects a person's past and defines one's identity, simultaneously provides an opportunity to

evaluate societies sociologically, historically, and politically. Many scholars from different disciplines have come to terms that identity and memory are shaped mostly by traumatic experiences and thus trauma studies have been subjected to psychoanalytic, post structural, and postcolonial studies.

Psychological trauma is usually defined as a recalling of a disruptive incident that highly occupies an individual's consciousness, and still has effects on the person's individual and collective life. Trauma theory, a crucial concept in psychoanalytic approaches to literary study, is a critical method that makes new reading and understanding styles possible. It is a cutting-edge term that applies to individuals, cultures, and countries. Trauma studies has attracted a great deal of interest in literary studies and criticism particularly after the wars since theorists and scholars were in need of explaining traumatic incidents and their effects on individuals and cultures. As language plays a crucial role in revealing and perceiving trauma, literature naturally provides an impeccable field for trauma theorists to apply their theories and clarify the trauma of the writers, readers, and the characters. Thus, starting with Sigmund Freud, contemporary theorists such as Cathy Caruth, Shoshana Felman, and Dominick LaCapra suggested that language and literature are required to exemplify and understand traumatic experiences, and they applied the term to literary works to demonstrate it. This chapter aims to provide a detailed definition of trauma, literary trauma and to introduce some key figures in the theory.

1.1. Trauma Theory: Freud's Concept of Trauma

Sigmund Freud's studies on trauma and memory provided a basis for the trauma theory. In the late 19th century, with the introduction of psychoanalysis by Freud, researchers started to examine the notions of hysteria and shock, which contained the roots and impacts of trauma. The theories that Sigmund Freud and his colleague Joseph Breuer put forward in Studies on Hysteria (1895) and Freud's further theories he asserted in *Beyond the Pleasure Principle* (1920) play a fundamental role for researchers in practicing modern trauma theory.

In *Studies on Hysteria* (1955), Freud and Breuer define trauma as any event that causes "distressing affects-such as those of fright, anxiety or physical pain" (1955: 6). They suggest that trauma belatedly emerges out of reminiscence of the original event. Thus, the co-authors define these distressing affects as "psychical trauma" or "more precisely the memory of the trauma" (1955:6). According to Freud and Breuer, psychological trauma "acts like a foreign body", –which they describe "as an agent that is still at work"–, that belatedly possesses the psyche and causes hysterical symptoms. Consequently, Freud and Breuer observe that traumatic neuroses may produce hysterical symptoms (1955:6).

As a consequence of this observation, Freud and Breuer (1955) make an analogy "between the pathogenesis of hysteria and that of traumatic neuroses" to define the term "traumatic hysteria." (1955: 5) According to Freud and Breuer, the reason why traumatic neuroses emerge is "the affect of fright-the psychical trauma" rather than "the trifling physical injury" (1955: 5). In this sense, they consider trauma as a psychological wound rather than a physical one. Thanks to the analogy between hysteria and traumatic neuroses, Freud and Breuer deduce that hysterical symptoms are "precipitating causes which can only be described as psychical traumas" (1955: 5). Thus, they define traumatic hysteria as "the hallucinatory reproduction of a traumatic memory" (1955: 14).

According to Freud, people might suffer from traumatic hysteria when they experience and repress tragic events such as sexual abuse, violence, or an accident. In *Studies on Hysteria* (1955), Breuer and Freud imply that the case which caused the patient to suffer traumatic hysteria is actually not traumatic, but its reminiscence is. In addition to this, Freud and Breuer suggest that hysteria is a condition that emerges as a result of some disruptive past events, which still disturb the present of the patients. They also observe that traumatic symptoms cease when the patient abreacts the affect which is felt by the impact of trauma. Since the traumatic past/experience constantly penetrates the present, Freud and Breuer (1955) put forward that catharsis and "verbal utterance" are required to reach that moment and get rid of traumatic symptoms. Thus, they observe that traumatic symptoms instantly and permanently vanish when they

achieve “bringing clearly to light the memory of the event” (1955: 6). The patient suffering from trauma must narrate the event in detail with the affect since the “recollection without affect almost invariably produces no result.” (1955: 6). Through hypnosis and verbal utterance, Freud and Breuer aim at making the patient remember the traumatic event intensely through hypnosis to make the symptoms vanish. The co-authors suggest that the psychological process “must be repeated as vividly as possible” (1995: 6) in order to vanish the symptoms. They deal with the stimuli, including “spasms, neuralgias and hallucinations” and aim to “re-appear them with the fullest intensity and then vanish forever” (1955: 7). After their succession of vanishing the hysterical symptoms, contemporary researchers have considered this method as a way of treatment. The treatment based on reducing the symptoms of trauma through hypnosis is called “catharsis” (1955: 8) by Freud and Breuer.

As hypnosis gives promising results, Freud and Breuer suggest that only revealing the effect of the original event can make traumatic symptoms vanish. Thus, recollecting the past event brings the repressed to the light. They also suggest that recollecting process perseveres for years and it can cause psychological pain “that is remembered in waking consciousness still provokes a lachrymal secretion long after the event. Hysterics suffer mainly from reminiscences.” (Freud & Breuer, 1955, p. 7). It is suggested here that reminiscences of the traumatic event belatedly can cause the patient to have psychological pain, since the recollecting process reveals the repressed. Recollecting process may cause chronic pain, Freud and Breuer (1955) name this traumatic re-collecting as “pathological reminiscences” (56). To comprehend the effects of a traumatic event, a latency stage (Nachträglichkeit) is required. According to Freud, an event can be traumatic and its pathological neurosis emerge only if it is recollected. Besides, Freud and Breuer observe that traumatic symptoms that arise from psychological trauma enlighten a past event, thus they coined the term Nachträglichkeit to describe the functioning of traumatic symptoms on the patient’s psyche. According to the Freudian Nachträglichkeit, an initial experience only turns into trauma “in the sense of exerting its full pathogenic power”, later on in the course of psychological development when the initial event, to which the patient is unable to

fully respond, is revived by a second encounter (Bistoen, Vanheule, & Craps, 2014, p. 672).

In *Studies of Hysteria*, Breuer and Freud remark that traumatic events of the past are prone to be "succumbed" by psychological trauma unless they are not effectively recollected. The psyche should provide a powerful reaction to those repressed feelings which arouse the affect of the memory. Freud and Breuer (1955) define those reactions as "reflexes—from tears to acts of revenge" and suggest that if the reaction of the patient is repressed, "the affect remains attached to the memory" (8). They give trauma of an injured person as an example to. If that person's reaction is sufficient, such as "revenge", the trauma features a "cathartic" effect, in this case, language functions as an alternative abreaction. As Freud and Breuer claims that "language serves as a substitute for action; by its help, an affect can be 'abreacted' almost as effectively. In other cases speaking is itself the adequate reflex, when, for instance, it is a lamentation or giving utterance to a tonnenting secret, e.g. a confession" (Freud and Breuer, 1955).

In some particular cases, abreaction is not the only procedure that is applied to a patient who experiences a psychological trauma. The patient is given another example of a traumatic accident, and the fright or the danger that the patient feel is replaced with the subsequent memories, such as being safe and rescued. Freud and Breuer suggest that the loss of memory is specific to that accident and they call this fading of memory as "forgetting." According to the authors, forgetting may occur in two groups of cases: The first group can be exemplified with such cases as the death of someone very close to the patient, since that loss is irreparable and because of the social factors, the patient is prone to forget the memory and repress it. The second group cases preclude the patient from reacting, not because of the content of the memory, but psychological impact of the memory such as fear, shock, auto-hypnosis that occurs during the event. Thus, Freud and Breuer explain that because there is not an extended and relevant link "between the normal state of consciousness and the pathological ones" where the thoughts first appeared, forgetting occurs (1955: 11).

These questions make Freud and Breuer differentiate the normal and abnormal states of consciousness. They suggest that they have been compelled to mention “abnormal states of consciousness in which these pathogenic ideas arise”, thus, they underline that "recollection of the operative psychological trauma" can only be discovered in the patient's hypnotic memory rather than in the patient's normal states of consciousness (1955: 12). They deduce that the affective responses to traumatic events affect the normal state of consciousness, and as a result of this alteration, hysterical symptoms emerge.

Freud and Breuer also suggest that a “dissociation” occurs in the psyche that divides consciousness into two states which they call it “double consciousness”. They explain that the more they study on hysterical cases, the more they observe the presence of double consciousness “to a rudimentary degree in every hysteria”. According to Freud and Breuer, traumatic neurosis creates a dissociation on the psyche that fragments consciousness. Thus, the normal state of consciousness turns into an abnormal state when the patient develops hysterical symptoms. They term this transformation of consciousness as “hypnoid” (1955: 8). Fundamentally, the Freudian definition of trauma is built upon this dissociation in which the repressed psyche produces a defense mechanism that is called “amnesia” (Freud & Breuer, 1955, p. 216). Freud deals with this trauma causing dissociation in his later studies as well. The ideas which are put forward such as pathological reminiscences, the fragmentation of consciousness, latency period, and dissociation highly inspire contemporary theorists while theorizing and defining the notion of trauma.

In *Beyond the Pleasure Principle* (1920), Freud maintains his early theories and correlates them with his new findings. He explains how the ego reacts to a traumatic neurosis, and he also continues to extend the impact of trauma on the psyche. In BPP, Freud associates the ego with reality, and he suggests that since the ego instinctively has a self-defense, “the pleasure principle is replaced by the reality principle” (1920: 10). However, in case of a traumatic experience, the ego has a dissociation from its integrity which Freud describes it as “split off.” Thus, when the ego is repressed, Freud claims, the integrity is regained frequently in dreams. (Freud,

1920, pp. 12, 13). Due to this dissociation, the self–preserved ego builds a traumatic neurosis, which Freud defines: “an extensive rupture of the barrier against stimuli” (Freud, 1920, p. 29). Freud indicates that the psyche is a living organism that has internal and external layers, and external layers function as a “protective shield” against traumatic symptoms. According to Freud, two factors cause traumatic neuroses. Firstly, he suggests that the main factor in their occurrence is seemingly based on the elements of surprise and fright. “Secondly, a wound or injury inflicted simultaneously” generally prevents the emergence of traumatic neurosis (1920: 12). Then he states that “fright”, “fear” and “anxiety” are mistaken notions that are used “improperly” and gives his own definitions:

> ‘Anxiety’ describes a particular state of expecting the danger or preparing for it, even though it may be an unknown one. ‘Fear’ requires a definite object of which to be afraid. ‘Fright’, however, is the name we give to a state a person gets into when he has run into danger without being prepared for it; it emphasizes the factor of surprise. (Freud, 1920, p. 12)

Freud claims that anxiety functions as a defense mechanism that is not involved in the process of trauma-rooted neurosis, since there is an anticipation of danger. On the other hand, fright has no defensive function because of the unexpectedness of it. Thus, when fright emerges during a traumatic neurosis, the external layer cannot resist to overstimulation and leaves the internal psyche completely defenseless. Then, Freud describes “traumatic” with these words: “any excitations from outside which are powerful enough to break through the protective shield. It seems to me that the concept of trauma necessarily implies a connection of this kind with a breach in an otherwise efficacious barrier against stimuli” (Freud, 1920, p. 29). It can be claimed that Freudian trauma might be described as a virus that intends to occupy unprepared body and weaken the immune system by surpassing the defense mechanisms, similarly trauma intends to occupy a shocked and frightened psyche by overstimulating it. Thus, *Beyond the Pleasure Principle* (1920) is a significant source which inspires contemporary theorists in defining the notion of trauma.

Freud keeps referring to his trauma theory in his other works, suggesting that childhood traumas belatedly emerge in the adolescent years. According to Freud, a child's witnessing of his/her parents' sexual intercourse can be traumatic and affect the child's adolescent years. In view of Freudian psychoanalysis, this witnessing is called "urszene" or "primal scene" by Freud for the first time in his *From the History of an Infantile Neurosis ('Wolf Man')* (1918). The term primal scene refers to a child's witnessing of his/her parents' sexual intercourse, considering it as a violent activity since he/she cannot distinguish whether it is a violent activity or a sexual one. In his later works, Freud continues to theorize primal scene, suggesting that it can cause a severe traumatic neurosis that arises in the adolescent years. In his *Moses and Monotheism* (1939), Freud extends the primal scene theory by mentioning one of his patients, a boy, who is belatedly traumatized by the primal scene. After explaining that the traumatic neurosis which results from the primal scene has an instant effect, Freud comes to the second symptom which arises in adolescence. According to Freud (1939), the traumatic symptoms of witnessing primal scene manifest "its second main symptom, sexual impotency." (1939: 128) With the primal scene theory, Freud completes most of his trauma theories.

In conclusion, Freud's abreactive model of trauma that he asserts in his *Studies of Hysteria* (1955), *Beyond the Pleasure Principle* (1920), *From the History of an Infantile Neurosis ('Wolf Man')* (1918) and *Moses and Monotheism* (1939) play a fundamental role for researchers and theorists in practicing literary trauma theory.

1.2. Literary Trauma Theory

Freud emphasizes that traumatic events are prone to be repetitive having long-lasting effects on both mental and physical health, and they may result in fragmentations in the psyche, thus abreaction is required to get rid of the symptoms and the traumatic stress. The ability to recognize psychological and emotional trauma has undergone a revolution throughout the years. Particularly, after much was learned about trauma in the 1960s with and after Freud, the definition of traumatic events has even further expanded and both spoken and written language have become as a way of abreaction— have been key factors in the development of literary trauma theory

that arouse during the 90s. The primary issues that constitute the area of trauma studies include psychological trauma, how it is represented in language, and how memory shapes both personal and cultural identities and narratives. Since language is considered a way to reach what was restored unconsciously, literary trauma theory is important to engage with the diverse ways in which literary texts have responded to traumatic and critical events in private and public history. It has been widely considered that Cathy Caruth and Shoshana Felman are the leading figures of literary trauma theory today due to their groundbreaking works and contribution to the theory. In this part of the study how trauma is applied to literary theory will be discussed in relation to Caruth's and Felman's definitions.

Caruth set about theorizing literary trauma by publishing an article, *Trauma: Explorations in Memory* in 1995, thereafter she wrote *Unclaimed Experience: Trauma, Narrative, and History* (1996) in which she extends her theories. These two works have a huge impact on her being a pioneer in literary trauma theory. In *Trauma: Explorations in Memory* (1995), Caruth defines trauma as "a response, sometimes delayed, to an overwhelming event or events" through "repeated hallucinations, dreams, thoughts, or behaviours stemming from the event" (1995: 4). She follows Freudian approach, and just as Freud suggests, she supports the idea that traumatic event is not traumatic in itself, but only in its reminiscence. Caruth also implies that traumatic events cannot be perceived during the event, "but only belatedly" just as Freud claims, in its "latency." She also mentions the challenges of comprehension while explaining its effect. According to Caruth, trauma "may or may not be catastrophic, and may not traumatize everyone equally—nor can it be defined in terms of a distortion of the event" (4). She claims that trauma's haunting function is related to the patient's "personal significances attached to it". In view of this, it can be said that an event only becomes traumatic if the person gives a subjective significance to the event. She also explains that "to be traumatized is precisely to be possessed by an image or event." (5)

For Caruth, trauma cannot settle in the psyche at the time of its occurrence and until it possesses the psyche with an image or a reminiscence it hides itself and only

belatedly presents its effects. Caruth writes: “the impact of the traumatic event lies precisely in its belatedness, in its refusal to be simply located, in its insistent appearance outside the boundaries of any single place or time” (Trauma: Explorations in Memory, 1995, p. 9). Thus, a traumatic event contains obscurity in terms of its time of occurrence and place. At this point, however, Caruth brings out a new outlook to the term. This can be considered as the most remarkable aspect of trauma that she suggests in the article. She mentions a possibility of survival, a way out from trauma, suggesting that in case the patient engages this opportunity “through the different modes of therapeutic, literary and pedagogical encounter”, trauma offers a possible survival. (Caruth, Trauma: Explorations in Memory, 1995, p. 10).

Caruth describes this possibility as a “departure”. Besides, this departure occurs when the traumatized person encounters with another trauma survivor who narrates his/her departure story from trauma. She writes: “To listen to the crisis of a trauma, that is, is not only to listen for the event, but to hear in the testimony the survivor’s departure from it; the challenge of the therapeutic listener.” (Caruth, 1995, p. 10). Caruth points out here that bearing witness to the testimony of a trauma survivor provides a possible departure for the listener, too. It can also be suggested that according to Caruth, the traumatic repetitiveness that functions belatedly “compels the traumatized person to survive the trauma by finding ways of bearing witness to it—both belatedly and in relation to others” (Marder, 2006, p. 2). Caruth indicates at the very end of Trauma: Explorations in Memory that “departure” also removes the isolation that traumatic event produces. According to Caruth, trauma inherently provides a departure “from the moment of its first occurrence.” This departure also functions as a way of removing the isolation which is “imposed by the event”, and she suggests that a traumatic departure “can only take place through the listening of another” (Caruth, 1995, p. 11).

It is obvious that trauma exposes its patients to an isolation which is hard to deal with. A possible survival out of trauma might be provided by hearing or being heard. According to Caruth, it is not only and individual isolation, but also a historical one that connects different cultures and narratives (Caruth, 1995, p. 11). She concludes

her article by pointing out how speaking and listening function during the abreaction. Caruth says, "A speaking and a listening from the site of trauma— does not rely, I would suggest, on what we simply know of each other, but on what we don't yet know of our own traumatic pasts" (11). In this sense, Caruth supports the idea that "the ability to listen through the departures" (11) that we have all made from ourselves, inside the traumas of modern history, may serve as a bridge that connects cultures in a traumatic age rather than just a basic awareness of others' pasts.

When Caruth mentions that trauma might be a bridge between cultures thanks to human beings' "ability to listen", it can be suggested that literature provides an impeccable space for trauma studies due to its power to represent human nature and narrate relatable events. Besides, literature might be the best way of bearing witness to the testimonies of other people universally. Thus, Caruth turns to literature to conceptualize her trauma theory in her next publishing, *Unclaimed Experience: Trauma, Narrative, History* (1996.). In the book (1996), Caruth discusses thoroughly all the aspects of literary trauma theory, mainly arguing the role of language and historical events by analyzing literal texts. Besides, she makes a distinction between individual and collective trauma.

In the very opening chapter, "Introduction: the Wound and the Voice", Caruth refers to Freud's *Beyond the Pleasure Principle* in which Freud (1920) himself utilized a literary text, then she compares Freud's analysis with her own interpretation by emphasizing the traumatic repetitiveness, which "can be found in the story told by Tasso in his romantic epic Gerusalemme Liberata." (1996: 2). According to the story, Tancred, the hero, kills his lover, Clorinda in a combat, without knowing that his rival is her since she is disguised. After realizing that he killed Clorinda, he goes into a forest and thrust his sword onto a tree. However, he notices that blood pouring down from the cut and hears the voice of his beloved telling him that "he has wounded his beloved once again" (1920: 16). Like Freud, Caruth (1996) also explains Tancred's traumatic experience of wounding Clorinda once again with the idea that "trauma repeats itself, exactly and unremittingly, through the unknowing" (1996: 2).

It can be claimed that in the compelling nature of trauma, belatedness and dissociation cause traumatic events not to be understood and remained unknown until a repetitive reminder breaks out. In the Caruthian concept of trauma, “knowing and not knowing” form a delicate balance between the past event and its current effects. Therefore, according to Caruth, this delicate balance between "knowing and not knowing" is present in literature and “it is, indeed at the specific point at which knowing and not knowing intersect that the language of literature and the psychoanalytic theory of traumatic experience precisely meet.” (Caruth, 1996, p. 3) What Caruth suggests here is that literature simultaneously presents the traumatic event and its current effects through language while reflecting the enigmatic nature of knowing and not knowing.

Theorists mostly approach trauma as an enigmatic phenomena due to its unrecognized state upon memory and the psyche. As Freudian model of trauma asserts that it remains unknown to the repressed psyche until the latency stage is over, Caruth, correspondingly writes: “so trauma is not locatable in the simple violent or original event in an individual’s past, but rather in the way that its very unassimilated nature—the way it was precisely not known in the first in stance—returns to haunt the survivor later on.” (Caruth, 1996, p. 4). Later in *Unclaimed*, Caruth argues that traumatic narrative produces a “crisis” in the context of the story of trauma. So, the narrative does not ignore the reality of the incident, however, it approves its infinite effects. Caruth exemplifies it as in the Tasso’s story, Tancred is actually aware of the reality of the death of his lover Clorinda, however, he rather escapes from experiencing it once again. At this point, Caruth deduces the term of “double telling” out of that crisis.

For Caruth, the urgent question that frequently arises as a crisis and lies at the center of many traumatic narratives is whether the trauma is an issue of confrontation with death or it is the continual “experience of having survived” (1996: 7). Caruth, in her *Unclaimed Experience* (1996) suggests that traumatic narratives stand as “double telling” at the heart of these stories, which is “the oscillation between a crisis of death and the correlative crisis of life: between the story of the unbearable nature of an event and the story of the unbearable nature of its survival.” (7). Caruth argues that this

double telling creates a confusion and indicates the "complexity" of the past. She refers "to as history in the texts that she reads in *Moses and Monotheism,* the intricate relation between the story of the Jews and the story of the Christians; in *Beyond the Pleasure Principle,* the intertwining of the confrontation with death and the confrontation with life" (Caruth, 1996, p. 8). Caruth explains the paradoxical nature of trauma in the first chapter of *Unclaimed* in her interpretation of Freud's *Moses and Monotheism*. She suggests that the notion of history includes epistemological concerns in terms of referencing the past. So, Caruth mentions a possibility: a historical reference might be indirect and hereby one might not be able to access to even his/her own history. This possibility shows that reaching other cultures and making historical and political deductions are almost impossible. Thus, Caruth defines this situation as "the peculiar and paradoxical experience of trauma" (1996: 11). Right after that, she gives a broad definition of trauma.

Trauma, according to Caruth (1996), refers to unexpected "catastrophic events in which the response to the event occurs in the often delayed, uncontrolled repetitive appearance of hallucinations and other intrusive phenomena." (1996: 11). Following her definition, Caruth gives the example of war veterans who witnessed the massive death and serious injuries of their fellow fighters. She defines the trauma of the 20th century by exemplifying soldiers who repeatedly recollect the catastrophic effects of war through dreams and hallucinations that give them psychological pain (1996: 11). Due to the fact that the 20th century was dominated by wars, the notion of trauma and traumatic events were defined via wars and mostly interpreted accordingly. However, towards the end of 20th century, researchers have started to evaluate traumatic experiences from a wide-ranging perspective, accepting events such as homicide, sexual abuse, discrimination, violence, bullying as traumas. According to Caruth, in order to comprehend traumatic events and their effects, we should be aware of the possibility that history cannot be testified directly, she writes: "Through the notion of trauma, I will argue, we can understand that a rethinking of reference is aimed not at eliminating history but at resituating it in our understanding, that is, at precisely permitting history to arise where immediate understanding may not." (Caruth, 1996, p. 11).

Caruth remarks that this kind of questioning history appears in Freud's text in which historical and political relations can be revealed in Jewish history. She describes the return of the Jews from Egypt as a "departure", which she explains the term in her previous work, *Trauma: Explorations in Memory*: "the exodus from Egypt, is no longer simply a return but is rather, more truly, a departure." (1996: 13). Here, Caruth also introduces the term "historical memory" which "is always a matter of distortion, a filtering of the original event through the fictions of traumatic repression, which makes the event available at best indirectly", and explains how historical memory complicates reaching the knowledge of the past just as traumatic memory. (Caruth, 1996, p. 15:16).

At the very end of her interpretation of Moses and Monotheism, Caruth mentions the universal and contagious side of trauma, she writes: "…history, like trauma, is never simply one's own, that history is precisely the way we are implicated in each other's traumas. For we—whether as German- or as Englishspeaking readers—cannot read this sentence without, ourselves, departing." (Caruth, 1996, p. 24). It is suggested here that trauma is inherently infectious due to its compelling nature that restricts the memory, and a departure is required to be able to comprehend history and trauma. In this case, trauma has got a trans historical feature, that is, an historical event, which affects a particular society, might still affect an individual who can relate himself to the event today.

Another point Caruth, like Freud, emphasizes that the psyche is a living organism that has got internal and external layers, and external layers function as a "protective shield" against traumatic symptoms, yet fright and shock could reach the shield. For Caruth (1996) although trauma presents itself as a "bodily threat", however, it is a shock that is "a break in the mind's experience of time" (61). This "break in the mind's experience of time" makes unable to locate the event directly, and she defines the break as "a missed experience" by emphasizing its indirectness (1996: 61).

To sum up, the Caruthian model of trauma asserts that, unlike ordinary events, traumatic events create dissociation upon the memory and the psyche, which

abnormally retards recollecting and narrating the event, and belatedly haunts an individual who experiences the event. These events cannot be comprehended at the time they occur, and the comprehension process requires a latency period, which Caruth calls belatedness. Caruth provides an explanatory source in which she masterfully explains the notion of trauma by evaluating Freud's works on trauma and bringings out new insights on literary trauma, particularly by applying trauma theory to literary texts. In the last chapter of *Unclaimed*, she gives a general definition of trauma that features a conceptive summary of her thesis: "trauma is described as the response to an unexpected or overwhelming violent event or events that are not fully grasped as they occur, but return later in repeated flashbacks, nightmares, and other repetitive phenomena." (Caruth, Unclaimed Experience: Trauma, Narrative, History, 1996, p. 91: 92).

1.3. Writing Trauma

While the term "belatedness" has become the focus of the Caruthian model of trauma, Shoshana Felman, another literary trauma theorist, makes great contribution to the theory with the term "testimony". *In Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History* (1992), in which she worked with a co-writer, Dori Laub who was an Israelian-American psychiatrist and clinical professor at the University of Yale, Felman and Laub suggest that "testimony" functions as an abreaction against the impacts of trauma. The authors evaluate the compelling nature of traumatic encounters and the impacts of historical trauma by focusing on the literary texs written as traumatic responses to wars and genocides.

Felman and Laub state that despite the fact that traumatic history inherently restricts the memory and becomes indirect, the impacts of it still "evolve". *In Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History* (1992), the authors remarkably assert that through testimony and listening to the voices of other trauma victims who survive out of their traumas, one can possibly overcome his/her trauma. Thus, the act of testimony reveals that the relationship between traumatic events and language might generate a possible survival process through speech. However, Felman and Laub point out here that it is a compelling and subjective

task since the witness is the only one who speaks and to be expected to reveal the truth. It puts the witness into a solitary position.

Felman and Laub (1992) suggest that the traumatic experience "is a radically unique, non-interchangeable and solitary burden" (3). Accordingly, trauma is a very personal experience because the testimony leads to an anguish that stands as an unbearable burden for the traumatized person. Even though a person witnesses another person's trauma, the witnessed person's testimony cannot articulate, report, or represent the dreadful experience of the traumatized person. They cite one of Paul Celan's poetic lines: "No one bears witness for the witness," in order to highlight the peculiar and unique nature of the solitary experience of the witness in bearing the burden of the trauma (1992: 3). It is stated here that testimony encumbers a responsibility as the witness is responsible for telling the truth. At this point, Felman and Laub explain that testimony ought to be universal rather than an individual experience, since it is expected to be heard and understood by the others. "By virtue of the fact that the testimony is addressed to others, the witness, from within the solitude of his own stance, is a vehicle of an occurrence, a reality, a stance or a dimension beyond himself" (Felman & Laub, 1992, p. 3).

Testimony brings out the truths that are neither bound to the witness nor to the listeners, yet it functions as a transference of knowledge from the traumatic past. "Testimony is, in other words, a discursive practice, as opposed to a pure theory. To testify—to vow to tell, to promise and produce one's own speech as material evidence for truth—is to accomplish a speech act, rather than to simply formulate a statement." (Felman & Laub, 1992, p. 5) Felman and Laub suggest us that we ought to lend our ears to the testimonies of the witnesses to be able to endure traumatic effects. Thus, it becomes possible to obtain knowledge of traumatic past of others through literal or historical context.

Trauma studies have urged theorists to discuss the relation between personal narrative, history, and traumatic events. After Sigmund Freud, Cathy Caruth and Shoshana Felman, historian Dominick LaCapra also argues the complex connection of

historical writing and trauma in his *Writing History, Writing Trauma* (1992). According to LaCapra the effects of traumatic past —as he calls historical trauma— has an influencial impact on determining the present. LaCapra discusses traumatic transference through Freudian theory of traumatic repetitiveness. As Caruth claims "history, like trauma, is never simply one's own, that history is precisely the way we are implicated in each other's traumas". LaCapra correspondingly defends the idea that "Something like transference (or one's implication in the material along with a tendency to repeat) always occurs. This transferential relation helps one to understand the so-called contagiousness of trauma-the way it can spread even to the interviewer or commentator-and it provides a possibly thought-provoking way to rethink the problem of observer participation" (LaCapra, 1992, p. 142).

LaCapra distinguishes "writing about trauma" and "writing trauma." He considers writing about trauma as "historiography" which is expected to reflect the past events objectively and evenhandedly without depending on a personal opinion. On the other hand, according to LaCapra, writing trauma is an abstract notion since a traumatic event cannot be located in terms of time and place. In this case, he suggests a new term, "traumatic and post-traumatic writing" that "involves processes of acting out, working over, and to some extent working through in analyzing and "giving voice" to the traumatic experiences" (LaCapra, 1992, p. 186). According to LaCapra, since traumatic experiences and their effects defy representation, he also turns to literature like Freud, Felman and Caruth.

At this point, LaCapra suggests that this kind of writing form can be found in literature. Due to the fact that writing history has limits in itself, compared to literature, he emphasizes that literature provides an extensive realm for conceptualizing the theory. "The counterpart is that at least certain forms of literature or art, as well as the type of discourse or theory which emulates its object, may provide a more expansive space (in psychoanalytic terms, a relatively safe haven) for exploring modalities of responding to trauma, including the role of affect and the tendency to repeat traumatic events" (LaCapra, 1992, p. 185).

All the above mentioned theories and discussions highlight that literature, especially fiction writing, provides solid evidences for traumatic experiences that create dissociation upon the memory and the psyche consequently affect a person's life on both individual and collective levels. In her essay, *Trends in Literary Trauma Theory* (2008), Michelle Balaev brings that up and discusses the development of literary trauma theory based on the Freudian-Caruthian model, and presents her definitions of trauma and trauma novel by analyzing various novels. According to Balaev (2008), trauma is an individual's emotional reaction to a devastating event "that disrupts previous ideas of an individual's sense of self and the standards by which one evaluates society" (150). Balaev also defines "trauma novel" as "a work of fiction that conveys profound loss or intense fear on individual or collective levels" (150). According to Balaev, the traumatic event in a trauma novel does not necessarily affect the characters on collective levels as in wars or natural disasters.

Traumatic events may emerge as a consequence of homicide, discrimination, violence, bullying, and a sudden demise of a family member. Due to its contagious nature, people inherently relate and respond to each other's traumas by interacting, observing, reading, hearing or witnessing the testimony of the survivor. Since literature centers on human beings, trauma and literature have always been one within the other. The development of literary trauma studies enables people to reveal trauma out of a literary text or any other art form that centers on human experience.

1.4. Post Traumatic Stress Disorder (PTSD)

Freud and his contemporary neurologists described traumatic symptoms of the traumatized person as "shell shock", "amnesia" and "traumatic neurosis." However, towards the end of 20th century, psychiatrists and psychoanalysts have started to evaluate traumatic experiences from a wide-ranging perspectives and events such as homicide, sexual abuse, discrimination, violence, and bullying have been taken into consideration as traumas. In addition to this, scientists have started to observe that people who experienced traumatic events develop post-traumatic symptoms. Thus, American Psychiatric Association (APA) has coined the term Post-traumatic Stress

Disorder (PTSD) to refer to a trauma related mental disorder in the third edition of their Diagnostic and Statistical Manual of Mental Disorders (1980).

According to APA, PTSD is "a response to a traumatic or life-threatening event that is outside the normal range of human experience." (DSM-III, 1980). APA's recognition of PTSD has encouraged psychiatrists and psychoanalysts to study PTSD and its effects. Thereafter, PTSD has been recognized as a diagnosable mental disorder. After recognizing PTSD as a diagnosable mental disorder, APA continued to define PTSD in its following DSM editions. DSM-IV (1994) defines PTSD as a condition that emerges with specific symptoms after having experienced traumatic events such as a real death or a death threat, a serious injury, and a situation which threatens a person's physical unity. In the fifth and current edition of DSM (2013), the traumatic events that might be "required for diagnosis of PTSD" are given by APA. According to APA's DSM, PTSD may be developed after being exposed to a life-theratening event, physical injuries and sexual abuses. It is also suggested that "witnessing such events in others and learning that the traumatic event(s) occurred to a close family member or close friend; cases of actual or threatened death must have been violent or unintentional" (APA: 2013) may also cause PTSD. In consequence of APA's recognition, PTSD is medicalized.

However, the medicalization of trauma creates a psychoanalytic problem since testing whether trauma is indeed pathological or not is difficult. Even though the symptoms of PTSD are classified and diagnosed, the notion of trauma still manages to be an enigma due to its unrecognized state upon the memory and the psyche. As each individual differs in terms of dealing with particular stressors, his/her psychological history and motivation for the event, physical and genetic characteristics, that is why, PTSD prevalence vary. Caruth explains this complexitiy by emphasizing the inclusiveness of trauma. She suggests that "the more we satisfactorily locate and classify the symptoms of PTSD, the more we seem to have dislocated the boundaries of our modes of understanding", thus other disciplines such as psychology, sociology and literature get involved in "to explain, to cure, or to show why it is that we can no

longer simply explain or simply cure." (1995: 4). Caruth emphasizes the inclusiveness of trauma since the term "brings us to the limits of our understanding" (1995: 4).

Another important point discussed in PTSD publications show that everyone might suffer from trauma, but not every traumatic experience develops PTSD. It is possible that events which are considered ordinary for the most of the people, might develop PTSD in case of being significant for a person. However, "for the DSM classification, the person must also have experienced intense fear, helplessness, or horror when the event occurred" (Bisson, 2007). Correspondingly, Caruth brings a contemporary definition to PTSD in *Unclaimed* (1996), suggesting that PTSD is widely considered as "the direct imposition on the mind of the unavoidable reality of horrific events, the taking over of the mind, psychically and neurobiologically, by an event that it cannot control" (1996: 58).

PTSD is defined by APA and contemporary theorists as a stress disorder as a result of experiencing a traumatic event. On the other hand, there is also a theory that explains the positive changes and personal growth of a person after being exposed to a traumatic experience. Post Traumatic Growth (PTG) is coined by Richard Tedeschi and Lawrence Calhoun in their The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma (1996). According to Tedeschi and Lawrence, PTG refers to a person's "positive psychological changes" after experiencing a traumatic event that leaves a wound in the traumatized person's psychology. (1996: 455) In this sense, it can be suggested that trauma also may end up with growth.

1.4.1. Religious Trauma Syndrome (RTS)

Due to the fact that the notion of trauma often refers to a shocking or a fearful event, recent studies have attempted to question whether a belief or religious experience can cause trauma or PTSD. Although there is no direct classification in the all editions of the DSM, religion and trauma are included in "problems related to other psychosocial, personal, and environmental circumstances." (American Psychiatric Association, 2013)

After the DSM has signaled that religion and loose of faith can be traumatic as well, in 2011, Dr. Marline Winell has coined the term Religious Trauma Syndrome (RTS) in her article "Religious Trauma Syndrome: It's Time to Recognise it". Winell (2011) suggests that RTS refers to a religious stress disorder experienced by an individual who is "struggling with leaving an authoritarian, dogmatic religion and coping with the damage of indoctrination" (17). She claims that dogmatic relegions which have strict doctrines may cause the person to experience RTS since the person might be "going through the shattering of a personally meaningful faith and/or breaking away from a controlling community and lifestyle" (2011: 17).

According to Winell, the symptoms of RTS bear a resemblance to the symptoms of PTSD. She suggests that RTS is considered as a response to an occurrence of strict religious practice that causes a long term mental damage. She also explains that RTS occurs when "the emotional and mental abuse is compounded by physical and sexual abuse due to the patriarchal, repressive nature of the environment." (Winell, 2011) Winell explains the major symptoms of RTS as "confusion, anxiety, fear of damnation, impulsive reactions, isolation, suicidal thoughts, depression, sleep, eating and sexual disorder." (2011).

All of the theories that have been given and discussed in this chapter will be utilized in the next chapter for analyzing Graham Greene's Brighton Rock (1938) within trauma theories.

CHAPTER II.

PSYCHOLOGICAL TRAUMA and POST TRAUMATIC STRESS DISORDER in GRAHAM GREENE'S *BRIGHTON ROCK*

2. GRAHAM GREENE and *BRIGHTON ROCK*

This present chapter aims at analysing how psychological trauma and PTSD affect the characters, and their behaviors, choices, as well as relationships in the novel Brighton Rock. Additionally, it questions the role of Catholicism and its impact on traumatized characters' choices. The theories that are given in the first chapter— psychological trauma, literary trauma theory, post-traumatic stress disorder, and religious trauma syndrome— will be applied to Graham Greene's *Brighton Rock* (1938) in the present chapter.

Henry Graham Greene (1904-1991), who described himself as a "catholic writer", was also one of the victims of those traumatic experiences. In addition to be born into the age of trauma, in his childhood and adolescent years, Greene had gone through traumatic events which haunted him throughout his life. In his autobiography, A Sort of Life (1971), Greene frankly these traumatic events and his childhood in Berkhamsted where his father was the headmaster in the town's school. Edward Short, in his article Faith and Failure in Graham Greene (2009), mentions Greene's traumatic childhood:

> Greene opened his autobiography, A Sort of Life (1971), with a memorable sentence: "If I had known it, the whole future must have lain all the time along those Berkhamsted streets." This was incisive self-knowledge, for the tortures he underwent as the son of the headmaster of Berkhamsted School left psychological wounds that never healed. He recalled being subjected to "a system of mental torture" so traumatic that he actually tried to kill himself, most spectacularly by playing Russian roulette. This "bad period," as he always called it, deepened Greene's sense of the treachery in the human heart, and it is this which animates his greatest work.

Consequently, his childhood traumas and the traumatic atmosphere of the 20th century shaped his narrative and most of his characters suffered from trauma as well. As a writer who was one of the victims of traumatic and depressive experiences, Graham Greene deals with the drama and struggle of the individual. He depicts traumatic exposures such as poverty, domestic abuse, and criminal violence in his novels. Greene also mobilizes the term trauma while questioning the different layers of his characters' psychological wounds. Greene's Brighton Rock (1938) can be categorized as a murder thriller. The reader witnesses a series of homicides and various crimes which might cause psychological trauma for the characters who witness the violence.

The protagonist, Pinkie, even though he is only a 17 years old teenager, takes the lead of a mob in pre-war Brighton just after the death of the former leader, Kite who was also a father figure for him. Greene opens up the novel just before the murder of Hale, a newspaperman who distributes a packet of cards for his boss' newspaper advertisement. However, he is aware of being chased to be murdered by the mob since his boss makes a news story blaming the former leader, Kite as it seen at the beginning: "Hale knew, before he had been in Brighton three hours, that they meant to murder him." (Greene, 1938, p. 5) Hale's death shocks not only the mob members but also Ida Arnold, a decent woman who meets Hale on the day he has been murdered. In Brighton Rock, Greene also reveals Pinkie's childhood and sexual abuse of his parents which haunts him throughout the novel. Having been forced to witness his parents' sexual intercourse leaves an unrepairable wound in his mind. His traumatic upbringing is clearly seen when Pinkie encounters women.

Graham Greene described himself as a "catholic writer" and the impact of Catholicism was non-negligible notion for any critic who recontextualizes his works. As it seen in almost all of his novels, also Brighton Rock comprises catholic themes and Catholicism plays an essential role for Greene's portrayal of his characters. Greene sets up a conflict between his protagonist and antagonist of the novel. Pinkie is a Roman Catholic who believes that he is damned and acts accordingly, on the other

hand Ida Arnold has an agnostic point of view that she believes there is only good and evil and pursues justice.

2.1. Psychological Trauma and PTSD in *Brighton Rock*

As one of his masterpieces, Graham Greene's Brighton Rock (1938) sheds light on pre-war England. Although the novel is widely considered a murder thriller, this study evaluates it as a trauma novel since the reader witness catastrophic events such as homicides, violence, and suicide throughout the book. When the events in the novel are considered, it is seen that trauma affects the characters both individually and collectively. The novel not only provides the negative side of trauma which can lead misery but also reveals the ennobling power of trauma which can lead to making the right decision. As the antihero of the novel, Pinkie's childhood traumas haunt him and his past makes him commit murders, which will end up with his own suicide, Ida survives out of the trauma of murder through abreaction and starts his quest for justice. Greene sets up trauma's conflicting nature masterfully from the beginning of the novel.

Greene creates a traumatic atmosphere from the very first sentence of the novel. He opens up Brighton Rock (1938) with the following sentence: "Hale knew, before he had been in Brighton three hours, that they meant to murder him. With his inky fingers and his bitten nails, his manner cynical and nervous, anybody could tell he didn't belong to the early summer sun." (Greene, 1938, p. 5). Acording to Susan J. Brison's (2002) definition of traumatic event, it exposes a person to "feels utterly helpless in the face of a force that is perceived to be life-threatening" (39). After experiencing a traumatic event, a person immediately responds in the following ways: "terror, loss of control, and intense fear of annihilation" (2002: 39), when Hale's intense fear and his response to this life-threatening event are taken into consideration, the novel starts with a traumatic event.

Greene foreshadows a homicide in the first chapter of the novel and reveals the antihero of the story. He describes Pinkie as a boy who has inhuman characteristics: "He had a fair smooth skin, the faintest down, and his grey eyes had an effect of heartlessness like an old man's in which human feeling has died" (Greene, 1938, p. 8).

After his first encounter with Pinkie, Hale realizes the certainty that the mob wants to kill him since he wrote a story in his newspaper blaming the former leader of the mob, Kite who was also a father figure for Pinkie. However, the second encounter is more shocking and traumatic in itself for Hale: “So, there you are Fred. Hale looked up at the grey inhuman seventeen-year-old eyes” (Greene, 1938, p. 15), since Pinkie’s face is a reminiscence of death. As Freud and Breuer suggest “Hysterics suffer mainly from reminiscences”, Hale’s traumatic hysteria gives him psychological pain.

Hale responsds to the death threat with intense fear and he also develops physical symptoms. When “Hale rose. His hands were shaking.” (1938: 15). Green describes his traumatic realization in a way that he hints about the upcoming murder with the following words, “This was real now: the boy, the razor cut, life going out with the blood in pain” (1938: 15). The trauma of being killed arises when he recognizes Pinkie for the second time and it is obvious that the traumatic encounter puts him in a numb state in which “the ground moved under his feet, and only the thought of where they might take him while he was unconscious saved him from fainting” (1938: 15). Ironically, Greene emphasizes “common pride” and “embarrassment” that overcome the intense fear and the terror of the situation that “prevented him crying his fear aloud” and the pride urges Hale to leave the place silently, rather than crying out loud (15). Although the reader can comprehend Hale’s traumatic symptoms, it should be noticed that Hale responds to traumatic events with a survival instinct since trauma cannot be perceived by the time the event happens.

As Caruth implies that traumatic event cannot be perceived during the event, it hides itself and only belatedly presents its effects. She also suggests that trauma cannot settle in the psyche at the time of its occurrence and until it possesses the psyche with an image or a reminiscence, that is why, Hale acts solely with a survival instinct after cowering from the mob. As a result of this, he offers Ida Arnold whom he meets in a pub to accompany him thinking that the mob members cannot kill him in front of a witness. He says, “I only want to stay here with you.” (Greene, 1938, p. 16). Greene creates an intimacy between Hale and Ida, as it is seen in the part when they are in a taxi, “yes, he said and put his mouth on hers again” (Greene, 1938, p. 19). This brings

a new perspective to the novel in terms of psychological trauma. It is seen that Hale's death not only means losing someone she is familiar with, but also means losing someone Ida loves and that is why "Death shocked her, life was so important. She didn't believe in heaven or hell, only in ghosts, ouija boards, tables which rapped, and little inept voices speaking plaintively of flowers. She believed in ghosts" (Greene, 1938, p. 16). For Caruth although trauma presents itself as a "bodily threat", it is "a break in the mind's experience of time" (61), thus, Ida is a traumatised character. This "break in the mind's experience of time" makes the character unable to locate the event directly, and Caruth defines the break as "a missed experience" by emphasizing its indirectness (1996: 61). In this sense, Ida's shock as a result of trauma can be considered as a missed experience that breaks her mind's experience of time.

The reader also witnesses Ida's reminiscence of Hale which is called a traumatic collecting according to the Freudian concept of trauma that causes her to suffer psychological pain. She recollects "that wasn't life. Life was poor Fred's mouth pressed down on hers in the taxi, vibrating with the engine along the parade. What was the sense of dying if it made you bable of flowers?" (1938: 36) She also abreacts that "to lose your lover – broken hearts, she would say, always mend to be maimed or blinded – lucky she'd tell you, to be alive at all" (Greene, 1938, p. 36). Ida's emotional response shows trauma's abreactive feature. Caruth claims that trauma's haunting function is related to the patient's "personal significances attached to it". She also explains that "to be traumatized is precisely to be possessed by an image or event" (1996: 5). In view of this, the death of Hale becomes traumatic since Ida gives a subjective significance to the event, as it is understood from her reminiscing of their last moment together before the death of Hale.

Ida's traumatic collecting occurs as she bears testimony to her last moments with Hale during her Ouija board session since she believes in ghosts. 'I'll be here. I'll stay right here by this turnstile.' He said, 'be quick, Ida. I'll be just here.'" (1938: 31). Technically, the Ouija board provides her with psychological support as she abreacts every detail and emotion related to the event. It can be also suggested that she is possessed by the event from her emotional response: "She had a feeling that later in

an hour or two, when things got straightened out, she would want to cry a bit for the death of that scared passionate bag of bones who called himself" (1938: 31).

According to Caruthian trauma theory, trauma cannot settle in the psyche at the time of its occurrence and until it possesses the psyche with an image or a reminiscence, it hides itself and only belatedly presents its effects. Likewise, reminiscing Hale belatedly agonizes her psychologically and emotionally. Later in the novel, the reader witnesses Ida's another reminiscence of Hale, as she attends the funeral at the crematorium. "She came out of the crematorium, and there from the twin towers above her head fumed the very last of Fred, a thin stream of grey smoke from the ovens" (1938: 36). In these sentences Greene also reveals Ida's belated possession of the image of Hale, as Ida is in tears, "Fred dropped in indistinguishable grey ash on the pink blossoms: he became part of the smoke nuisance over London, and Ida wept" (1938: 36). Ida's weeping is an abreaction of the traumatic event. Besides, Ida's verbal utterance of the event with the affect of it gives her a feeling of catharsis, thus she takes the first step to make traumatic symptoms vanish. Freud and Breuer suggest that only revealing the affect of the original event one can make traumatic symptoms vanish and it is only possible "when the patient had described that event in the greatest possible detail and had put the affect into words" (1895, p. 6). It can be understood that Ida's abreaction prevents the repressed affection from attaching it to the memory.

In Ida's case, on one hand, her remembering the event with its effect produces a possible way out of trauma, on the other hand, her abreaction can also be considered as a testimony since testimony "is, in other words, a discursive practice, as opposed to a pure theory. To testify—to vow to tell, to promise and produce one's own speech as material evidence for truth—is to accomplish a speech act, rather than to simply formulate a statement" (Felman & Laub, 1992, p. 5). Through her testimony of the event, Ida endures the traumatic symptoms, thus her departure from trauma removes the isolation which traumatic event produces. Besides, an individual's "reaction to the trauma only exercises a completely 'cathartic' effect if it is an adequate reaction - as, for instance, revenge" (1955: 8), accordingly, Ida's traumatic symptoms cease when she abreacts the affect that she feels because of the impact of trauma. Since the original

case constantly oppresses her, due to catharsis and verbal utterance, she gets rid of traumatic symptoms. It is clearly seen that Ida's traumatic symptoms disappear with her avenging reaction to Hale's homicide:

> It's the least you can do for anyone - ask questions, questions at inquests, questions at séances. Somebody had made Fred unhappy, and somebody was going to be made unhappy in turn. An eye for an eye. If you believed in God, you might leave vengeance to him, but you couldn't trust the One, the universal spirit. Vengeance was Ida's… (Greene, 1938, p. 37)

Through Ida's quest for justice and her longing for vengeance, Greene gives the reader the signals of her recovery from trauma. During her abreaction, she weeps, "but while she wept a determination grew: it grew all the way to the tram lines which would lead her back to her familiar territory, to the bars and the electric signs and the variety theatres" (Greene, 1938, p. 37). Ida's personal growth after her trauma is easily seen by the reader, since "Ida blew into the police-station with a laugh to this man and a wave of the hand to that. She was cheerful and determined" (Greene, 1938, p. 76) instead of mourning. Her strength, cheerfulness, and determination are indicative of Post Traumatic Growth (PTG) which is a theory that explains the positive changes and personal growth of a person after having been exposed to a traumatic experience. The term refers to a person's "positive psychological changes" after experiencing a traumatic event that leaves a wound on the traumatized person's psychology (1996: 455). Tedeschi and Calhoun also state the positive responses after trauma under five categories that are: "New chances, Relating with or to others, Spiritual change, Admiration for life and Individual strength" (1996: 455). Thus, when the theories of Post Traumatic Stress Disorder (PTSD) and Post Traumatic Growth (PTG) are examined together, it can be said that trauma might end up in two ways; it can cause a disorder that gives stress and anxiety which make traumatized person week or it can give strength to the person to make the right decision. These physical and psychological reactions can be observed in Ida. When she heads to the police station, she gives a statement about the murder of Hale: "He was with me and he was scared about something. We were at the Palace Pier. I had to have a wash and brush up, but

he didn't want me to leave him. I was only away five minutes and he'd gone" (1938: 78). When Ida's statement is compared to her previous testimonies, it is observed that she takes a firm stand against the event. She acts solely with a determination to bring justice, and her transformation from a mourning condition to fighting for vengeance on Hale proves that her traumatic symptoms lose their effect since "it wasn't Fred who had lunch at Snow's and left that card. I've just seen the waitress. Hale didn't like Bass - he wouldn't drink Bass - but the man at Snow's sent out for a bottle" (1938: 78). Noticeably, it is seen that her reaction is coldblooded even when she reminiscences Hale and talks about the event. In this sense, it can be suggested that she recovers from psychological trauma and has post-traumatic growth.

Unlike her abreaction after Hale's death, Ida's statement seems stronger, logical, determined and lacks emotion that proves her personal growth after trauma. Later in the novel, the reader also witnesses her transformation from a traumatised woman to a heroine, as Greene portrays: "She rose formidably and moved across the restaurant, like a warship going into action, a warship on the right side in a war to end wars, the signal flags proclaiming that every man would do his duty. Her big breasts, which had never sackled a child of her own, felt a merciless compassion" (Greene, 1938, p. 121). As a result of her growth, she not only fights for justice, but also acts caringly. She says, "I don't want the Innocent to suffer" (Greene, 1938, p. 121). In view of this, Ida's post-traumatic growth also urges her to save Rose from Pinkie. Since Rose is a potential witness of the murder of Hale, Pinkie wants to marry her to get rid of the accusations.

Ida's post-traumatic growth leads her to administer the law and her particular action functions as a reminiscence of the traumatic event for the mob members who actually killed Hale. The Caruthian model of trauma suggests that traumatic symptoms are felt only belatedly, like this statement, the mob members are in a state of belatedness until Ida's investigation. Trauma "can recreate and abreact" the event due to its infectious and repetitive nature "for those who were not there" – the witness, the listener, and the reader (Felman and Laub, 1992: 55). Thus, trauma is "timeless, repetitious, and infectious" (Balaev, 2008: 155). These characteristics "support a

literary theory of transhistorical trauma by making a parallel causal relationship between the individual and group, as well as between traumatic experience and pathologic" (2008: 152). Accordingly, Pinkie's trauma of committing murder affect all the members of the mob. Thus, "the traumatic experience of the individual and group become one" (Balaev, 2008, p. 152). In this sense, the mob members who witness the death of Hale are expected to develop PTSD after the homicide.

Even though Pinkie is the one who commits the murder of Hale, since he technically witness a death and a life-threatening event, it is expected that he may also suffer from trauma and PTSD, as criminological psychology studies reveal that "Killing another person can be traumatizing (i.e., a traumatic event) given that the person who has committed the homicide experiences, witnesses, and confronts an event involving serious injury and death" (Badenes-Ribera et al., 2020; Pollock, 1999; Ternes et al., 2019). In this case, by committing a homicide, Pinkie experiences a traumatic event that involves death, which haunts him throughout the novel. As Greene reveals Pinkie's epiphany, the reader witnesses Pinkie's post traumatic symptoms after the murder as "The Boy's heart missed a beat: for almost the first time it occurred to him that the law could hang him, take him out in a yard, drop him in a pit, bury him in lime, put an end to the great future" (Greene, 1938, p. 65). Pinkie's response shows that the consequence of the murder may be a life-threatening trauma, thus, he feels utterly helpless as his life is under threat.

PTSD is "a response to a traumatic or life-threatening event that is outside the normal range of human experience" (DSM-III, 1980). In view of this definition, Pinkie's epiphany shows that he develops PTSD after committing murder. It is also seen that other members of the mob also develop PTSD due to trauma's infectious nature, as they have witnessed a death which is a traumatic event. As described in the novel, "SPICER was restless these days. There was nothing for him to do. When the races began again he wouldn't feel so bad, he wouldn't think so much about Hale. It was the medical evidence which upset him: 'death from natural causes', when with his own eyes he'd seen the Boy" (Greene, 1938, p. 81). Greene reveals that Spicer, the oldest member of the mob, also cannot get over the murder of Hale "even though it

wasn't he who'd done the killing" his post-traumatic stress is clearly seen as he wants to escape and forget Brighton (Greene, 1938, p. 83).

Spicer is drenched in panic, as Greene reveals his stress: "I got to think, he repeated to himself. I got to think. He opened the street door and went out. He didn't even wait to fetch his hat" (1938: 85). It is seen that his behaviours accord with PTSD symptoms as he acts in panic with the overstimulation of the event. "He walked rapidly, going nowhere in particular, but every road in Brighton ended on the front" (1938:85). The reader also witnesses that Spicer wants to escape Brighton to avoid the reminders of the murder of Hale, he admits "I'm too old for the game, I got to get out, Nottingham" (1938:85). APA (2013) suggests that PTSD is a condition that emerges with specific symptoms "such as intrusive memories of the event, avoidance of reminders of the event, alterations in cognition, hyperarousal, or emotional numbing," after having experienced traumatic events such as a real death or a death threat, a serious injury, and a situation that threatens a person's physical unity. The trauma of Hale's murder intrudes and overstimulates his thoughts. He says, "I wouldn't grass, he remarked dumbly to the tide as it lifted and withdrew, but it wasn't my doing, I never wanted to kill Fred" (1938: 85). Thus, Spicer's escape plan corresponds with APA's PTSD diagnosis.

Although PTSD is generally associated with the sufferer of a traumatic experience, "there is evidence indicating that PTSD may also be caused by a person's own actions. In this way, such evidence suggests that homicide perpetrators can develop PTSD following their offense suggesting that killing another person might precipitate PTSD in some individuals" (Badenes-Ribera et al.; 2020, p. 1). Likewise, after committing homicide of Hale, Pinkie's own actions leads him to new traumatic experiences and cause him to develop PTSD. According to Caruth's definition, PTSD is a response to an unexpected catastrophic event that manifests itself belatedly and intrusively in an "uncontrolled, repetitive appearance of hallucinations" (1996: 57). In this sense, the reader witnesses Pinkie's hallucinations which are clear symptoms of PTSD. When "Hale dropped out of sight, like a stone thrown over a cliff. His breast ached with the effort to enclose the whole world" (1938: 135) it is clear that Pinkie is

possessed by the image of Hale, and it haunts him through hallucinations. Later in the novel, Greene reveals another hallucination of Pinkie in which he hallucinates his parents, as he thinks that he is willing to commit any crime to get away from the murder of Hale: “He looked with horror round the room. When the man opened his mouth he heard his father speaking, that figure in the corner was his mother. He felt the faintest twinge of pity for goodness which couldn’t murder to escape” (1938: 143). In view of this, post-traumatic symptoms haunt Pinkie in an uncontrolled and repetitive way. It can also be suggested that PTSD affects his choices as well.

PTSD also affects and has an impact on the behavioral choices of trauma victims. The “central symptoms concern intrusions about, and avoidance of, memories associated with the traumatic event itself, whereas in separation anxiety disorder, the worries and avoidance concern the well-being of attachment figures and separation from them” (American Psychiatric Association, 2013). In addition to this, “individuals with posttraumatic stress disorder (PTSD) have been found to be at-risk for a wide range of impulsive behaviors, antisocial behaviors, and interpersonal aggression” (Weiss et al., 2012). In view of these studies and definitions, the novel reveals that PTSD is also seen in Pinkie’s behavioral choices as he acts aggressively and impulsively. As described in the novel, “He followed her out and suddenly taking her wrist he brought the poison on to his lips. ‘I could break your arm’” and “He pushed her roughly forward” (Greene, 1938, p. 87). These impulsive behaviours of Pinkie show that he acts wildy to get rid of traumatic disorder. The plot of the novel narrates that the more Pinkie wants to leave the murder behind and he acts with aggression, the more he encounters with new traumatic events. Pinkie’s traumatic disorder leads him to make wrong decisions as opposed to Ida who develops posttraumatic growth after the murder. The first one of Pinkie’s wrong decisions is when he plans to marry an innocent girl, Rose who is a potential witness for the murder. He wants to marry her as he knows that “A wife can’t give evidence” (Greene, 1938, p. 54). However, his intimacy with Rose enlightens his childhood traumas which will be discussed later in this study. Furthermore, he kills Spicer, the oldest member of the mob, as he wants to escape since “there were only two people could hang us, Spicer and the girl. I’ve killed

Spicer and I'm marrying the girl. Seems to me I'm doing everything" (Greene, 1938, p. 130). Thus, Pinkie's PTSD leads him to commit more crimes.

Due to the fact that Ida, Spicer and Rose are reminisences of the murder of Hale, his actions of marrying the girl and killing Spicer can be considered as one of the major symptoms of PTSD which is defined as "avoidance of memories associated with the traumatic event." Greene reveals Pinkie's avoidance as he wonders when all these will end. He thinks "when I've married the girl, will it stop then? Where else can it drive me, and with a twitch of the mouth, he wondered - what worse -?" (1938: 147). As PTSD is considered as an anxiety disorder that leads the sufferer to show anti-social behaviors and the intrusion symptoms, such as "emotional distress after exposure to traumatic reminders" (DSM-V, Criterion B), the reader witnesses Pinkie's isolation and loneliness as he remembers Spicer who was a good companion that he killed. Thus, "he felt the need of a deep sentimental affection, orange blossoms and a cuddle in a corner. His great paw yearned for a sticky hand" (1938: 156). Pinkie's emotional distress manifests itself whenever he feels alone. Especially, in the moment that "he almost felt inclined to go back to Frank's. But then he remembered Spicer. The boy was mad, killing mad, it wasn't safe. Loneliness dragged him down the solitary boards" (1938: 156). It is also seen here that Pinkie becomes a mentally deranged person when he cannot succeed in avoiding traumatic reminiscences.

As Ida's abreaction gives her a cathartic relief that ends her traumatic symptoms, it is seen in the novel that Pinkie struggles with post-traumatic symptoms as he cannot abreact what he was exposed to. He develops "an insane impulse to shout out to them all that they couldn't treat him like that, that he was a killer, he could kill men and not be caught. He wanted to boast" (Greene, 1938, p. 174). Thus, hallucinations, delusions, and traumatic flashbacks harm his decision-making. As he witnesses and causes a number of traumatic events in *Brighton Rock*, when the accumulation of them is considered, his alienation from himself and from his surroundings leave an unrecoverable psychological wound. A peculiar kind of wound that captures his psyche, destroys his identity and leads him to misery, as Greene writes: "He was completely abandoned. He no longer had a sense of triumph or

superiority. He looked back on a few hours ago as if he had been drunk then or dreaming - he had been momentarily exhilarated by the strangeness of his experience. Only death could ever set him free." (Greene, 1938, p. 187).

PTSD studies reveal that post-traumatic symptoms such as isolation, hallucination, delusion, and impulsive and violent behaviors have a huge impact on the further actions of the traumatized person. Thus, it can be suggested that post-traumatic symptoms can cause a traumatized person to commit crimes and act violently. Likewise, as it is seen in Pinkie's case, he suggests killing Rose, the only witness of the murder of Hale, the only reminder remained of the traumatic event:

> If we don't do something quick it looks to me as if all Brighton'll know we killed Fred.
> 'What can we do?'
> Dallow said, 'Pinkie, I won't stand for any more killing.'
> He said, 'But suppose she killed herself?' An insane pride bobbed in his breast; he felt inspired.
> Dallow said, 'For Christ's sake, Pinkie. You're imagining things.' (Greene, 1938, p. 203)

As seen in the quotation above, Dallow is aware of Pinkie's delusion and he clearly rejects the idea of committing another homicide which also means that he does not want to witness another traumatic event. On the other hand, Greene prepares the reader for the end of the novel, as he foreshadows: "Only death could ever set him free." (Greene, 1938, p. 187). As Caruth writes: "Freud's freedom to leave is, paradoxically, the freedom not to live but to die: to bring forth his voice to others in dying." (Caruth, 1996, p. 23), in this regard, freedom for Pinkie does not mean "to live but to die." In this case, only death could set Pinkie free and ends his traumatic agony because to live means to bear the burden of traumatic symptoms. Within this scope, Pinkie's traumatized psyche is prone to death since the ego has a dissociation from its integrity which Freud describes as a split-off. In consequence of the dissociation, the self-preserved ego builds traumatic neurosis that emancipates the death drive. Ruth

Leys explains how a traumatic psyche is prone to death, as she writes: “According to Freud, a failure due to the role of fright and the ego's lack of preparedness, produced the general disorganization and other symptoms characteristic of psychic trauma. In sum, according to Freud the traumatic neuroses represented a radical "unbinding" of the death drive” (Leys, 2000, p. 24). Identically, Pinkie’s plan to kill Rose ends up with his suicide as he is interrupted by Ida Arnold, Dallow and police officers:

> Then she couldn’t tell what happened: glass - somewhere - broke, he screamed and she saw his face - steam. He screamed and screamed, with his hands up to his eyes; he turned and ran; she saw a police baton at his feet and broken glass. He looked half his size, doubled up in appalling agony: it was as if the flames had literally got him and he shrank - shrank into a schoolboy flying in panic and pain, scrambling over a fence, running on. (Greene, 1938, p. 243)

The fright that occurs when Pinkie notices that he failed dissociates his unprepared ego and produces traumatic neurosis that unleashes the death drive. Thus, his departure from trauma is completed by his own death.

Considering all of the traumatic events in Graham Greene’s Brighton Rock, it can be concluded that there are two types of traumatic departure: the first one is Ida’s post-traumatic growth that enables her to make the right decision and saves Rose’s life, and the second one is Pinkie’s PTSD which leads him to commit homicides and suicide. Thus, the novel ends with a traumatic event like it begins. “The term "trauma novel" refers to a work of fiction that conveys profound loss or intense fear on individual or collective levels” (Balaev, 2008, p. 150). When all of the traumatic events that affect characters both individually and collectively are considered, Graham Greene’s *Brighton Rock* answers to the definition of Balaev. Thus, it can be suggested that *Brighton Rock* is a trauma novel as there are clear findings on psychological trauma and post traumatic stress disorders in the novel. In the novel, it is also seen that Pinkie’s childhood traumas haunt him and affect his later stages of life.

2.2. Pinkie's Childhood Traumas

Graham Greene narrates a set of traumatic events and traumatized characters throughout Brighton Rock, and the novel also reveals Pinkie's childhood traumas that affect him belatedly whenever he encounters a reminiscence of his early-life memories. The Freudian theory of Psychoanalysis suggests that childhood traumas create unconscious memories in the psyche and those memories come to light when the person is exposed to a reminiscent of the memories and creates hysterical symptoms in a later stage of his life. Likewise, Pinkie's exposure to the sexual abuse of his parents and growing up without maternal care cause him to suffer from trauma in his adolescence.

Greene reveals the first signals of Pinkie's traumatic childhood in the second chapter of the novel. The chapter starts with these words: "'You getting a family?' the man said, but the Boy didn't answer, walking rigidly away past the other booths, with the smell of gunpowder on his fingers, holding the Mother of God by the hair. His fingers pulled absent-mindedly at the doll's hair, detaching the brown wool." (Greene, 1938, p. 22). Since the doll reminds him of his childhood memories, he aggressively pulls out its hair and gives it to Rose by admitting: "'take the doll,' the Boy said. 'It's no good to me. I just won it in one of those shooting booths. It's no good to me'" (Greene, 1938, p. 23). Pinkie's silence about the question shows that he might have family-related traumatic memories.

Later in the novel, Greene begins to reveal Pinkie's early-life traumas, as Pinkie watches Rose in his bedroom, Rose's body makes him shudders. He "looked at the mousy skull, the bony body and and shuddered involuntarily" (1938: 90). His apprehension towards Rose's body stands out as the first symptom of Pinkie's early life traumas. Then, the reader witnesses the reason of his apprehension as "he thought, 'today's Saturday,' remembering the room at home, the frightening weekly exercise of his parents which he watched from his single bed" (1938: 90). It can be suggested that his witnessing might have been traumatic as Pinkie thinks "That was what they expected of you, every polony you met had her eye on the bed: his virginity straightened in him like sex." (1938: 90)

As it is seen in the quotations above, Pinkie remembers his parents' sexual intercourse that he witnessed in his childhood. His sexual intimacy with Rose reminds him the Saturday nights of his childhood on which he was exposed to witness his parents' sexual intercourse. This witnessing is called "urszene" or "primal scene" by Freud in his *From the History of an Infantile Neurosis ('Wolf Man')* (1918). As mentioned before in the theory part of the study, the term primal scene refers to a child's witnessing his/her parents' sexual intercourse, considering it is a violent activity since he/she cannot distinguish whether it is a violent activity or a sexual one. According to the Freudian primal scene theory, identically in the novel, Pinkie is belatedly traumatized by his particular childhood experience by witnessing the primal scene of his parents. Thus, Pinkie's sexual intimacy with Rose arises his primal scene memory and as a result of this, the act of sexual intercourse disgusts him.

The traumatic neurosis of a child who witnessed his parent's particular action belatedly emerges in his adulthood in case of a sexual intimacy and causes the person to have sexual impotency. Pinkie develops parallel symptoms with Freud's theory. She "got up and he saw the skin of her thigh for a moment above the artificial silk, and a prick of sexual desire disturbed him like a sickness" (1938: 92). The trauma of his childhood also manifests itself as he remembers the Saturday nights of his childhood: "That was what happened to a man in the end. The wakeful children, the Saturday night movements from the other bed. Was there no escape, anywhere, for anyone? It was worth murdering a world" (1938: 92).

It is observed that Pinkie's witnessing the primal scene affects his psychological development and causes him to be sexually impotent. Freud (1939) also puts the primal scene theory into practice when examining a patient who witnesses a primal scene. He observes that his patient loses "all sensitiveness in his penis" and "never dares to approach a woman sexually." Furthermore, according to Freud's observations, "his sexual activities remained restricted" in consequence of those early observations of parental coitus" (1939: 128). Identically, Pinkie's sexual impotency approves Freud's theory. In Pinkie's case, whenever he is exposed to a sexual encounter, he remembers his traumatic witnessing of his parents: "He knew

everything. He had watched every detail of the act of sex." (1938: 93) It is clearly seen that his childhood memory haunts him in his adolescence as he has sexual desire disorders: "when Rose turned to him again, with the expectation of a kiss, he was aware all the same of a horrifying ignorance." (1938:93) It is also seen that "His mouth missed hers and recoiled" and then: "He'd never yet kissed a girl" (1938:93). In this sense, it can be suggested that Pinkie's particular actions certify Freud's primal scene theory.

Pinkie's witnessing the primal scene of his parents is a traumatic memory that haunts him belatedly in his adolescence and affects his relationships with the opposite sex. Thus, as it is seen in the other examples of his traumatic neurosis, Greene reveals that he is reluctant to have a relationship: He "didn't want that relationship with anyone. The double bed, the intimacy, it sickened him like the idea of age." (1938: 101). Thus, Pinkie's trauma of the primal scene does not only affect him pysically but also socially, particularly in his relationships with the opposite sex. Later in the novel, it is seen that witnessing the primal scene creates sexual confusion in Pinkie's mind as he "hesitated with repulsion. He wanted to strike her, to make her scream, but he kissed her inexpertly, missing her lips. He took his crinkling mouth away" (Greene, 1938, p. 112). In this sense, Pinkie suffers from his childhood trauma in every sexual encounter with Rose.

Furthermore, Pinkie's primal scene-related neurosis is also seen when he encounters other women in the novel. As an example, "his mind tracked inevitably back and forth to Sylvie like a model engine electrically driven. Fear and curiosity ate at the proud future, he was aware of nausea and retched. Marry, he thought, hell, no; I'd rather hang" (Greene, 1938, p. 135). Freud suggests that the traumatic neurosis which comes out of witnessing the primal scene creates a sexual confusion in the psyche, and thus, the neurosis produces "attacks of falling physically in love" (1918, p. 356). Likewise, Pinkie cannot feel anything towards the opposite sex both romantically and sexually. Because of his neurosis, the reader witnesses that the idea of marrying and the intimacy scares and disgusts him. That is why Pinkie frequently

says “I’m not going to marry, the Boy said. I’m not going to marry. Nothing’s going to make me marry.” (Greene, 1938, p. 136)

The primal scene “was traumatic because being exposed to such an event would over-stimulate a child to the point at which their psychic barrier—that is, the psychic inhibition which protects children from being fascinated by and engaging in sexual practices” (M. D. Barnett et al., 2018; Gravel, 1919, p. 3) and identically, Pinkie suffers from the trauma of the primal scene. Furthermore, Freud concludes his primal scene theory by describing the traumatic neurosis as “the return of the repressed.” The “return of the repressed” is recognized with the latency stage and “immediate effects of the trauma” which are the primary symptoms of this particular traumatic neurosis. (1939: 129). Furthermore, the repressed also returns and appears in dreams. In his *BPP* (1920), Freud suggests that one cannot consider that all dreams function as a wish-fulfillment, as some dreams represent the repressed memories of childhood or traumatic events.

It is obvious that the human psyche retains traumatic experiences in the past and restrains them from bringing out to consciousness. Thus, repressed memories create neurosis and appear in dreams. That is why Freud (1920) suggests that dreams “which occur in traumatic neuroses” and “the dreams during psychoanalysis which bring to memory the psychical traumas of childhood” (25) cannot be considered as wish fulfilments. Those dreamsoccur “in obedience to the compulsion to repeat.” (25) However, this “compulsion is supported by the wish to conjure up what has been forgotten and repressed.” (1920: 25). In view of this, Pinkie has a nightmare in which his repressed memories appear. In the first part of the dream, “He was in an asphalt playground: one plane tree withered: a cracked bell clanged and the children came out to him. He was sick with fear.” (1938: 186). These nightmares are the signs that the psyche cannot bear the traumatic burden of overwhelming past events. Furthermore, the imagery and symbols in these dreams signify repressed memories. In this sense, the children and the withered tree might signify his childhood trauma which is because of the encounter with women. Later in the dream, “he felt a cautious hand on his sleeve and in a mirror hanging on the tree he saw the reflection of himself and Kite behind -

middle-aged, cheery, bleeding from the mouth. 'Such tits,' Kite said and put a razor in his hand" (1938: 186). In this part of his dream, Pinkie sees Kite, the former leader of the mob and who was also a father figure for Pinkie. He witnesses Kite's death in the hospital and frequently remembers him whenever he needs his support. He confesses, "If Kite had been there, he thought, he could have spoken - but if Kite had been there, he would have had no need to speak (Greene, 1938, p. 164). Though seeing Kite can be considered as a wish-fulfillment since Pinkie is in trouble and he needs him alive, Kite's sexual expression and the children represent his traumatic encounters with women. The rest of the dream reveals the repressed that belongs to his childhood:

> Then heard the stealthy movement of his parents in the other bed. It was Saturday night. His father panted like a man at the end of a race and his mother made a horrifying sound of pleasurable pain. He was filled with hatred, disgust, loneliness: he was completely abandoned: he had no share in their thoughts - for the space of a few minutes he was dead, he was like a soul in purgatory watching the shameless act of a beloved person. (Greene, 1938, p. 186)

The second part of the dream reveals the oedipal hatred of Pinkie against his father. It is understood that Pinkie repressed his witnessing the primal scene which is traumatic. Witnessing the primal scene produces traumatic neurosis which dissociates the ego from its integrity, thus, when the ego is repressed, Freud claims, the integrity is regained frequently in dreams (Freud, 1920, pp. 12, 13). While reading Brighton Rock the reader witnesses that Pinkie's repressed trauma in his childhood returns later in his dreams. Consequently, a traumatic neurosis of a childhood memory arises in Pinkie's adolescent years and affects his socio-sexual relationships.

2.3. The Different Layers of Trauma in *Brighton Rock*

In *Brighton Rock* (1938), Greene presents different layers of trauma in addition to criminal violence and domestic abuse. It is seen in the novel that religious beliefs and living standards have an impact on the traumatized characters' choices. The present part of the study will discuss the impact of religious belief and poor living

standards on traumatized characters in the novel and question whether Pinkie suffers from religious trauma syndrome.

Graham Greene described himself as a "Catholic writer" and the impact of Catholicism was a non-negligible notion for any critic who recontextualizes his works. As it seen in almost all of his novels, also in *Brighton Rock*, catholic themes and Catholicism play an essential role for Greene's portrayal of his characters. Greene sets up a conflict between his anti-hero and the heroine of the novel. On one hand, Pinkie is a Roman Catholic who believes that he is damned and acts accordingly, on the other hand, Ida Arnold has an agnostic point of view that she believes there is only good and evil and she pursues justice.

At the beginning of the novel, Greene reveals that Pinkie and Rose believe in the same religious belief: "You a Roman? the Boy asked. Yes, Rose said" (Greene, 1938, p. 52). However, Pinkie's Catholic belief differs from Rose's. Pinkie claims that "These atheists, they don't know nothing. Of course there's Hell. Flames and damnation,' he said with his eyes on the dark shifting water and the lightning and the lamps going out above the black struts of the Palace Pier, 'torments." (Greene, 1938, p. 52), but Rose's Catholic belief composes of redemption and hope "And Heaven too, Rose said with anxiety, while the rain fell interminably on." (Greene, 1938, p. 52)

In the mean time, Greene sets up a conflict between the heroine and the anti-hero of the story by portraying Ida Arnold as a strong woman who has a superstitious belief on ghosts and ouija boards; Pinkie as a 17 years old Catholic who believes in hell and damnation. Ida is an agnostic woman who believes that there is either good or evil in the world and those who are evil must be punished, whereas Pinkie has a fatalistic belief of Catholism believing that he is already damned and he cannot be damned again. Both of the characters experience trauma of Hale's murder with two different post-traumatic symptoms. As Ida develops post-traumatic growth that leads her to pursue justice, Pinkie suffers PTSD which makes him commit crimes and murders before his suicide. However, in addition to PTSD, Pinkie also develops

religious trauma syndrome (RTS) upon his childhood traumas and witnessing traumatic events.

According to Winell who coined the term, the key symtoms of RTS are "Anxiety being in "The World," panic attacks, fear of damnation, depression, thoughts of suicide, anger, bitterness, betrayal, guilt, grief and loss, difficulty with expressing emotion" (Winell, 2011, p. 17). Winell also suggests that "the doctrines of original sin and eternal damnation cause the most psychological distress." (Winell, 2021). Likewise, Pinkie's Catholic belief meets the symptoms of RTS, as "he had been afraid, afraid of pain and more afraid of damnation – of the sudden and unshriven death" (Greene, 1938, p. 182). Nevertheless, he finds a way to cope with the fear of damnation by thinking that "Now it was as if he was damned already and there was nothing more to fear ever again." (Greene, 1938, p. 182). Thus, Pinkie justifies his actions and hides himself behind Catholicism while committing sins and crimes. When his traumatic upbringing and his Catholic belief are considered together, it is also seen that Pinkie's RTS and his childhood traumas stimulate one another, in other words, "hell lay about him in his infancy. He was ready for more deaths." (Greene, 1938, p. 68)

Pinkie's faith comprises of hell, torture and flames, on the other hand, Ida does not believe in poetic justice because "If you believe in God, you might leave vengeance to him, but you couldn't trust the One" (Greene, 1938, p. 37), and she wants to bring Pinkie to justice in response to his criminal activities. When Pinkie's Catholic belief and Ida's agnosticism compared, ironically, it is Pinkie's damnation that proves to be right, even though he commits suicide by burning himself. When RTS, childhood traumas and PTSD overlap, just as Pinkie's case, the traumatised person can face fatal consequences.

Although religion may not be the sole reason of personal traumas in Brighton Rock, traumatized characters' perspective of religious belief has an impact on their decision-making and behaviours. The latest DSM and contemporary researchs such as RTS claim that religions which include strict religious doctrines can be traumatic and cause long-term mental problems. In *Brighton Rock*, Greene presents a traumatic

Catholicism versus an agnostic belief. That is why the novel is a great example of that what occurs when religion and trauma coexist.

In addition to religious belief, it can be suggested that characters' poor living standards may also affect them to be traumatized. As is seen in the novel, Pinkie's traumatic witnessing of his parents' primal scene can be considered a result of poverty as he is in the same bedroom as his parents and witnesses "the Saturday night movements from the other bed" (Greene, 1938: 92). On the other hand, Greene also reveals that Pinkie and the mob members struggle with poor living standards as they live "at Frank's boarding house" (Greene, 1938: 52). It is understood that the mob members struggle with poverty as they have to stay at a boarding house. It can be suggested that their poverty pushes them to crime and it is quite a factor in the violence as a cause of trauma. In conclusion, Greene depicts traumatic exposures such as poverty, domestic abuse, and criminal violence in the novel. He also mobilizes the term trauma while questioning the different layers of his characters' psychological wounds.

CHAPTER III

CONCLUSION

3. CONCLUSION

Psychological trauma refers to an individual's belated response to catastrophic events such as war, homicide, sexual assault or unexpected death of a family member. These catastrophic events in the Modernist period such as the Great War, left psychological wounds on people who had experienced those traumatic events. Due to the Great War, many people died, were injured, and lost and the devastation which was left by the war caused a great number of people to suffer from psychological trauma. In line with this devastation, Sigmund Freud observed that traumatic symptoms cause fragmentation on the psyche and they are tend to be repetitive through dreams, hallucinations and flashbacks. Freud also offered an abreactive model of trauma, suggesting that through abreaction, the traumatic symptoms vanish and the patient survives. After the Freudian breakthrough, contemporary theorists such as Cathy Caruth, Shoshana Felman and Dominick LaCapra contributed to the Freudian trauma theory by suggesting that there is a possible survival out of trauma through witnessing the testimonies of trauma survivors by pointing out the contagious nature of trauma. The theorists also suggest that since literature provides such testimonies through trauma narratives, it is an impeccable realm for applying the theory. Thus, it has been concluded that literary trauma theory emerged to analyse literary works in terms of psychological trauma.

In the light of literary trauma theory, this thesis has examined the psychological trauma, post-traumatic stress disorder and religious trauma syndrome in Graham Greene's *Brighton Rock* (1938) by applying the trauma theories and ideas of Sigmund Freud, Cathy Caruth, Shoshana Felman, Dominick LaCapra, Ruth Leys, Michelle Balaev and Marlene Winell. As a result of this critical analysis, this study has evaluated *Brighton Rock* as a trauma novel since the characters experience a set of traumatic events from the beginning to the end of the novel.

The study has revealed the three aspects of the psychological trauma of Hale's murder that are psychological trauma, PTSD, and PTG. It has been observed that characters suffer from trauma and also develop PTSD or PTG. The first traumatic symptoms in the novel has been observed in Ida's case since the death of Hale shocks her and thus, she reminiscences Hale. It has been concluded that her traumatic memories causes her to suffer trauma belatedly, however, as she abreacts her psychological wound her traumatic symptoms vanish, then she starts to develop post-traumatic growth which leads her to pursue justice and make the right decisions. It can be claimed that Pinkie and the mob members develop PTSD since they, too, technically witness a traumatic event. As criminological psychology studies suggest that killing a person can be traumatic and PTSD affects the behavioral choice of the sufferer, Pinkie, unlike Ida, develops PTSD which leads him to commit more crimes and his own suicide in the end.

The study has also revealed that Pinkie's childhood traumas, his witnessing the primal scene of his parents, causes him to suffer traumatic symptoms which affect his relationships with other women and socio-sexual status in his adolescence. It has been concluded that his repressed memories occur in his dreams as mental disturbances. Besides, the study has also investigated Pinkie's religious trauma syndrome concluding that his Catholic belief leads him to commit crimes and act wildly.

By analyzing Graham Greene's *Brighton Rock* in terms of psychological trauma, PTSD and RTS, the study has concluded that the novel presents a trauma narrative. It has been observed that Greene narrates a set of traumatic events that affect his characters individually and collectively. Although it is unknown that whether Greene was aware of the Freudian trauma theory, the traumatic narrative in *Brighton Rock* corresponds to Freud's abreactive model of trauma theory. Ida's reminiscence of Hale and her abreaction, Pinkie's hallucination of Hale, his dream, and flashbacks from his traumatic childhood manifest the Freudian pattern of trauma. The novel also corresponds to the evolution of literary trauma theory. As the contemporary theorists follow the Freudian initiation before they put forward substantial developments such as testimony, departure, PTSD or PTG, and religious trauma syndrome, likewise, in

Brighton Rock, Ida's testimony, her traumatic departure, her PTG, Pinkie's PTSD and his RTS follow literary trauma theory.

Finally, it has been concluded that literary trauma theories are mostly applied to post-colonial studies in which researchers have certain findings associated with trauma such as exile, discrimination, alienation and racism. However, the present study has analysed a modernist pre-war English novel by Greene which was written by an English author. Thus, this thesis can be used as a referential study for researchers who attempt to discuss literary trauma theories in the works of pre-war English literature. As a final suggestion, these days we are going through similar experiences with the Modernist period in terms of wars, pandemics, and refugee crises that will likely cause trauma. It is expected that today's traumas will be narrated in contemporary literal works as such in the Modernist period. Besides, since literary trauma theory has been conceptualized in recent years, this study is expected to contribute to following researchs about trauma and its impact on literature.

BIBLIOGRAPHY

American Psychiatric Association. (1987). Diagnostic and Statistical Manual of Mental Disorders (3rd ed., revised).

American Psychiatric Association. (2000). Diagnostic and Statistical Manual of Mental Disorders (4th ed., text rev.).

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders, 5th edn. American Psychiatric Publishing.

Badenes-Ribera, L., Molla-Esparza, C., Longobardi, C., Sánchez-Meca, J., & Angelo Fabris , M. (2020). Homicide as a Source of Posttraumatic Stress?: A Meta-Analysis of the Prevalence of Posttraumatic Stress Disorder After Committing Homicide. Journal of Traumatic Stress, 1-12.

Balaev, M. (2008). Trends in Literary Trauma Theory. Mosaic: An Interdisciplinary Critical Journal Vol. 41, No. 2, pp. 149-166.

Barnett, M., Berry, K. E., Maciel, I., & Marsden, A. (2018). The Primal Scene Phenomenon: Witnessing Parental Sexual Activity and Sociosexual Orientation. Sexuality & Culture, 22(1):1-14.

Barnett, Michael & Berry, Katherine & Maciel, Idalia & Marsden, Arthur. (2018). The Primal Scene Phenomenon: Witnessing Parental Sexual Activity and Sociosexual Orientation. Sexuality & Culture. 22. 1-14. 10.1007/s12119-017-9458-2.

Bisson, J. I. (2007). Post-Traumatic Stress Disorder. BMJ: British Medical Journal, Vol. 334, No. 7597, 789-793.

Bistoen, G., Vanheule, S., & Craps, S. (2014). Nachtraglichkeit: A Freudian perspective on delayed traumatic reactions. Theory & Psychology, 668-687.

Breuer, J., & Freud, S. (1895). Studies on Hysteria. In Standard Edition of the Complete Psychological Works of Sigmund Freud. Vol. 2, trans. James Strachey. London: Hogarth Press.

Brison, S. J. (2002). Aftermath: Violence and the Remaking of a Self. Oxfordshire: Princeton University Press.

Caruth, C. (1995). Trauma: Explorations in Memory. The Johns Hopkins University Press.

Caruth, C. (1996). Unclaimed Experience: Trauma, Narrative, History. London: The Johns Hopkins University Press.

Collins, J. J., & Bailey, S. L. (1990). Traumatic stress disorder and violent behavior. Journal of Traumatic Stress, 3(2), 203–220. https://doi.org/10.1002/jts.2490030204

Edward Short. "Faith and Failure in Graham Greene." InsideCatholic.com (January 18, 2009).

Felman, S., & Laub, D. . (1992). Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History. New York: Routledge, Chapman and Hall, Inc.

Freud, S. (1920). Beyond the Pleasure Principle. London: The Hogarth Press and The Institute of Psycho-Anaylsis.

Freud, S. (1939). Moses and Monotheism. Hertfordshire: THE HOGARTH PRESS AND THE INSTITUTE OF PSYCHO-ANALYSIS.

Freud, S. (1900). The interpretation of dreams. The standard Edition of the Complete Psychological Works of Freud, London: Hogarth Press.

Freud, S. (1955). The standard edition of the complete psychological works of Sigmund Freud. Volume 17, 1917-1919, An infantile neurosis and Other works. London: The Hogarth Press.

Freud, S. (1955). The standard edition of the complete psychological works of Sigmund Freud. Volume 2, 1893-1895, Studies on Hysteria. London: The Hogarth Press.

Graves, W. P. (1919). Gynecology. Philadelphia: W.B. Saunders Company.

Greene, G. (1938). Brighton Rock. London: Penguin Books Ltd.

Greene, G. (1973). A sort of life. New York: Pocket Books.

LaCapra, D. (1992). Writing History, Writing Trauma. Baltimore: Johns Hopkins University Press.

Leys, R. (2000). Trauma: A Genealogy. London: The University of Chicago Press.

Marder, E. (2006). Trauma and Literary Studies: Some “Enabling Questions".

Pollock, P. H. (1999). When the killer suffers: Post-traumatic stress reactions following homicide. Legal and Criminological Psychology, 4, , 185-202.

Richard Tedeschi, P. a. (1996). Journal of Traumatic Stress.

Tedeschi, R. G., & Calhoun, L. G. (1995). Trauma & transformation: Growing in the aftermath of suffering. Sage Publications, Inc. https://doi.org/10.4135/9781483326931

Tedeschi, R.G., Calhoun, L.G. The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma. J Trauma Stress 9, 455–471 (1996). https://doi.org/10.1007/BF02103658

Ternes, M., Cooper, B., & Griesel, D. (2019). The Perpetration of Violence and the Experience of Trauma: Exploring Predictors of PTSD Symptoms in Male Violent Offenders. International Journal of Forensic Mental Health, 19, 68–83.

Weiss, N. H., Tull, M. T., Viana, A. G., Anestis, M. D., & Gratz, K. L. (2012). Impulsive behaviors as an emotion regulation strategy: examining associations between PTSD, emotion dysregulation, and impulsive behaviors among substance dependent inpatients. Journal of anxiety disorders, 26(3), 453–458. https://doi.org/10.1016/j.janxdis.2012.01.007

Winell, M. (2011). Religious Trauma Syndrome: It's time to recognise it. Cognitive Behavioural Therapy Today, Vol. 39, British Association of Behavioural and Cognitive Therapies.

Winell, M. (2021). Religious Trauma Syndrome. Retrieved from Journey Free: https://journeyfree.org/rts/

ÖZGEÇMİŞ

Kişisel Bilgiler :

Adı ve Soyadı : Emre ÇELİK

Eğitim Durumu :

Lisans Öğrenimi : Süleyman Demirel Universitesi, Fen Edebiyat Fakültesi, İngiliz Dili ve Edebiyatı, 2018

Yüksek Lisans Öğrenimi : Süleyman Demirel Universitesi, Sosyal Bilimler Enstitüsü, İngiliz Dili ve Edebiyatı Anabilim Dalı, 2022

Yabancı Dil(ler) ve Düzeyi :

l.....: İngilizce (İleri)

2.....: İspanyolca (Başlangıç)

CV

Personal Information :

Name and Surname : Emre ÇELİK

Eğitim Durumu :

Bachelor's Degree : Süleyman Demirel University Faculty of Fine Arts and Science, English Language and Literature (2018)

Master's Degree : Süleyman Demirel University, INSTITUTE OF SOCIAL SCIENCES DEPARTMENT OF WESTERN LANGUAGE AND LITERATURE (2022)

Foreign Languages :

l.....: English (Advanced)

2.....: Spanish (Beginner)