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HACI BAYRAM VELİ ÜNİVERSİTESİ
LİSANSÜSTÜ EĞİTİM ENSTİTÜSÜ

REPRESENTATIONS OF CHILDHOOD TRAUMAS IN CONTEMPORARY BRITISH DRAMA: MARTIN MCDONAGH'S *THE PILLOWMAN*, PHILIP RIDLEY'S *MERCURY FUR*, AND DUNCAN MACMILLAN'S *EVERY BRILLIANT THING*

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MASTER'S THESIS

DEPARTMENT OF WESTERN LANGUAGES AND LITERATURES

DISCIPLINE OF ENGLISH LANGUAGE AND LITERATURE

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ABSTRACT

From the past to the present, the study of human psychology and trauma has increased, leading to numerous plays in contemporary British theatre that address these issues. This thesis examines the theme of childhood trauma in plays in contemporary British theatre. The study includes three major works: Martin McDonagh's *The Pillowman* (2003), Philip Ridley's *Mercury Fur* (2005), and Duncan Macmillan's *Every Brilliant Thing* (2013). The analysis of these plays is based on the psychoanalytic theories on childhood trauma of Sigmund Freud and Cathy Caruth's theory of narrating trauma. Freud's ideas about the unconscious—repression, repetition, compulsion, and defence mechanisms—help us understand how the traumatic events the characters have been through affect their mental growth. Caruth's ideas about how trauma is inexpressible, belated, and fragmented in nature in the narration of the plays help us understand how the plays deal with it through language and form. These works demonstrate the enduring impact of childhood traumatic events on individuals' lives and the theatrical expression of these traumas. Moreover, the reappraisal of traumatic experiences through art provides not only an individual but also a social space for confrontation and meaning making. Finally, this thesis shows that by looking at how contemporary drama portrays childhood trauma, it is an important way to understand how trauma changes people's and groups' minds in deep ways. In this context, plays serve as potent narrative instruments, reflecting and comprehending the intricacy of traumatic experiences.

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ÇAĞDAŞ İNGİLİZ TİYATROSUNDA ÇOCUKLUK TRAVMALARININ TEMSİLLERİ: MARTIN MCDONAGH'IN *YASTIK ADAM*, PHILIP RIDLEY'NİN *KÜRKLÜ MERKÜR* VE DUNCAN MACMILLAN'IN *HARİKA ŞEYLER LİSTESİ*

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ÖZET

Geçmişten günümüze insan psikolojisi ve travma üzerine yapılan çalışmalar artarken, çağdaş İngiliz tiyatrosunda da bu konuları içeren birçok oyun yazılmıştır. Bu tezde, çağdaş İngiliz tiyatrosundaki oyunlarda çocukluk travması teması incelenmiştir. Çalışmaya üç eser dahil edilmiştir: Martin McDonagh'ın *Yastık Adam* (2003), Philip Ridley'in *Kürklü Merkür* (2005) ve Duncan Macmillan'ın *Harika Şeyler Listesi* (2013) oyunları. Bu oyunların analizinde Sigmund Freud'un çocukluk travmaları üzerine psikanalitik teorileri ve Cathy Caruth'un travmanın anlatımı kuramları temel alınmıştır. Freud'un, bastırma ve bilinçdışı, tekrar zorlantısı ve savunma mekanizmalarına ilişkin görüşleri, karakterlerin travmatik deneyimlerinin bireysel psikolojik gelişim üzerindeki etkilerini anlamaya yardımcı olurken; Caruth'un travmanın dile getirilemezliği, gecikmişliği ve parçalanmış bir anlatı yoluyla yeniden düzenlenmesine dair yaklaşımları, oyunların travmayı dilsel ve biçimsel olarak işleme biçimlerini açıklamaktadır. Bu eserler, çocuklukta yaşanan travmatik olayların bireylerin yaşamlarında nasıl kalıcı izler bıraktığını ve bu travmaların sahnede hangi yöntemlerle ifade edildiğini gözler önüne sermektedir. Ayrıca, travmatik deneyimlerin sanat aracılığıyla yeniden ele alınması, yalnızca bireysel değil, toplumsal bir yüzleşme ve anlamlandırma alanı da sunmaktadır. Sonuç olarak, bu tez, çağdaş tiyatronun çocukluk travmalarını sahneleme biçimlerini analiz ederek, travmanın bireylerin ve toplumların ruhsal yapısındaki derin etkilerini anlamada önemli bir araç olduğunu göstermektedir. Bu bağlamda, oyunlar hem travmatik deneyimlerin karmaşıklığını yansıtan hem de onları anlamlandıran güçlü birer anlatı aracı olarak değerlendirilmektedir.

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My love for literature and theatre, combined with the desire to explore the deep wounds of the human soul and how these wounds are expressed through art, gave rise to this work. Examining the traces childhood traumas leave on an individual's life through their representation in contemporary English theatre has become a reflection of this passion. This study was written to understand the effects of trauma on both individual and societal levels and to highlight the power of art in shedding light on these effects.

I would like to express my gratitude to my advisor, Assoc. Prof. Dr. Yavuz Çelik, who guided me throughout this thesis process and shared his knowledge and experience with me. Additionally, I would like to express my heartfelt gratitude to Assoc. Prof. Dr. Yiğit Sümbül for his valuable comments and contributions, which enriched my work by being a part of my thesis jury.

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I dedicate this thesis to all children who have to grow up in the shadow of traumas, especially my dearest ones, İnci and Mercan.

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1. INTRODUCTION

Throughout human history, a considerable amount of time and energy has been devoted to the study of human nature, mind and experience. This results in the development of psychology as an important field of study that focuses on comprehending the mind and behaviour. Fundamental notions such as self-awareness and proper goal setting have been intensively investigated for centuries as essential components of human psychology. Especially the emergence of man-centred way of thinking and living following the medieval way is accepted as the start of search for rational explanations about any behaviour of man. William Shakespeare, for example, portrays the human nature in its deep details in such a way as to probe into the secrets and darkness of human soul and mind. The absence of psychology as a scientific discipline in those days does not necessarily mean that motives or reasons for one's decisions, actions and/or responses are not studied or investigated. Hamlet, a Shakespearean character, is portrayed, for example, as a man of contemplation and melancholy. However, psychology starts to be accepted as a field of study from the early 20th century on, especially with Sigmund Freud and his studies.

The motivating reason for Freud's studies is usually accepted, among others, as the extreme importance attached to materialistic appearance of man, disregarding his spiritual and inner world. One famous example for this contrast between the appearance and reality is a *fin-de-siecle poem* by Edwin Arlington Robinson, an American poet; it is "Richard Cory" of 1897. In it, Richard is an enviable man with splendid features and possessions when viewed from outside, but he kills himself at the end of the poem to the shock and terror of those who wish to be in his place, depending on what he owns and displays to people around him. The list of examples for the unhappiness, gloom and/or inexplicable diseases or symptoms in the presence of worldly possessions, richness, luxury, etc. can be extended in the late 19th and early 20th centuries. Spurred by the search for the underlying cause of this unknown negativity in man's mind and/or soul, Freud is often credited with having paved the way for in-depth studies into human mind in scientific terms. He is even accepted as the first to "introduce psychology into psychiatry" (Jung, 1963, p. 114). His works *Studies on Hysteria* and *The Interpretation of Dreams*, for example, open the way for a closer investigation and understanding of individual cases and human psyche.

Despite the fact that American Psychiatric Association (APA) accepts post-traumatic stress disorder as an illness in 1980, such early diseases as hysteria and shell shock can be listed as the historical antecedent of trauma (Moran, 2007, p. 4). It is not long before Freud focuses his studies on the relationship between trauma and symptom, interpreting trauma as a psychic shock impossible for the subject to deal or cope with due to its incompatibility with his conscious attempts. This is because he places the emphasis on the "causative role of psychic trauma in the development of neuroses" (Frey-Rohn, 2002, p. 7). It is from then onwards that most trauma studies and searches occupy a huge place in the psychological studies. Considering the traumatizing and even dehumanizing effect of the two world wars of the 20th century on human mind and soul, coupled with the tendency of modernism and postmodernism to turn all the established belief and value systems, traditional and/or religious outlooks, political and social concepts upside down, it seems more than a must that trauma should be the highlighted subject of many studies from medical to literary circles.

With such a developmental background in brief, trauma is defined by APA, the authoritative organ of the medical world, as "an emotional response to a terrible event like an accident, crime, natural disaster, physical or emotional abuse, neglect, experiencing or witnessing violence, death of a loved one, war, and more" (https://www.apa.org/topics/trauma). Trauma can be caused by many different factors such as natural disasters, war, physical or sexual assault, accidents, losses or neglect and mistreatment in childhood. Traumatic experiences, especially in childhood, can have profound effects on the personality development of the individual and affect mental health in the long term. These experiences usually shake a person's sense of security and lead to feelings of fear, helplessness and terror.

In the 20th century, a greater emphasis is placed on the investigation of psychological issues brought about by traumatic experiences, especially the ones resulting from war and related events. Initially, these problems are approached professionally, but over the last forty years, there emerges an extensive body of academic research concerning these issues in the fields of psychology and psychiatry (Öztürk & Şar, 1983, p. 50). As knowledge of these matters increases, their impact also expands beyond the field of medicine to infiltrate the cultural domain, emerging as dominant motifs in literature, too.

The fact that the concept of trauma has a deep impact on the world of literature and art has inevitably led to the birth of trauma literature or traumatic stories. In line with Yavuz Çelik's theory of "literature cycle" (2024, pp. 517-518), saying that literature is fed by the society in which it is written, only to return to it as a work, the 20th-century society of the West grows into one full of traumatic and traumatised individuals and provides the writers with these figures as their characters in their works. Then the writers present them in a variety of situations, each having its unique situation. Product of the 20th century, trauma literature is thus a form of narration used to explore individuals' traumatic experiences, internal conflicts, and the traces left by these experiences. "Literary trauma theory also claims that narrative processes share important features with traumatic processes, that there is a special connection between words and wounds, and that literature offers unparalleled insight into the relation between psychic wounds and signification" (Kurtz, 2018, p. 8). Especially in the second half of the 20th century, following wars and genocides, trauma narratives become a prominent theme in literary works. Literature after the Holocaust, American literature after the Vietnam War, and works written after the 11 September attacks are important examples of this genre. As noted in *The Routledge Companion to Literature and Trauma*, trauma literature often seeks to address both personal and societal dimensions of trauma, where "catastrophic events give rise to 'cultural traumas' that affect a whole community and may lead to the need to reassess and re-narrate collective identities" (Davis & Meretoja, 2020, p. 4). Trauma literature, thus, serves as a means to both reflect on and process the complex issues of memory, identity, and collective healing in the aftermath of profound loss.

It is generally accepted that trauma literature encompasses works that portray the traumatic experiences of individuals and the psychological ramifications of such experiences. In English literature, the theme of trauma is dealt with especially in the context of wars, social changes and individual psychological problems. In this context, the effects of World War I and World War II in the first half of the 20th century pave the way for the emergence of many trauma-themed literary works. For example, in her novel *Mrs. Dalloway* (1925), British writer Virginia Woolf deals with the psychological crisis experienced by Septimus Warren Smith, a character returning from the war and suffering from post-traumatic stress disorder (PTSD), and the insensitivity of the society towards this situation. Using the stream of consciousness

technique, Woolf deeply analyses the inner world of her characters and how traumatic experiences echo in their minds.

The works of British war poets such as Siegfried Sassoon and Wilfred Owen, also written during and/or after World War I, reveal the reflections of war trauma in literature. These poets describe the horrors of war, and the psychological devastation experienced by the soldiers with a critical attitude against the period when war was idealised as something 'honourable'. In his poems, Wilfred Owen stands outside of all nationalist and patriotic discourses about the war and conveys the brutality of the war experience of the soldiers who experienced the war on the front without making the distinction between self and other, friend and foe. Owen's poem "Dulce et Decorum Est" is, for example, striking in that it shows the true face of war, full of death and destruction, not heroism.

More recently, Ian McEwan's novel *Atonement* (2001) deals with the effects of World War II on individuals and how a mistake made in childhood can turn into a trauma. The novel deals with how the characters try to cope with the direct and indirect effects of the war and the guilt of the war. Set against the background of the Second World War, the novel deals with the physical and psychological destruction caused by the war through the characters of Briony, Cecilia and Robbie. Robbie's experiences and the violence he is exposed to during the war involve not only a physical struggle but also a deep psychological trauma. Robbie's identity and belonging problems in the face of the traumatic reality of war symbolise the lasting traces of war on the mental health and inner world of individuals.

Not only in novels and poems does the theme of trauma find a big place for itself, but it also gains an important place in British drama. Especially in the drama after World War II, individual and social traumas concomitant with the war and social turmoil are brought to the stage. The Angry Young Men movement of the mid-1950s brings the social and economic deterioration in post-war England and the anger and mental breakdown caused by this deterioration to the stage. "(…) this may be summed up as a marked and intense dissatisfaction with many current values and institutions in British society. They do not like very much of the world in which they live; they find it difficult, if not impossible, to adjust or adapt" (Kroll, 1961, p. 157). In this movement, John Osborne is a key figure as "a boy of ten in 1940 and an adolescent

through the war, emerging in the 1950's theatrically successful with his ranting despondency" (p. 158) and his *Look Back in Anger* (1956) explores the anger and despair of a lost generation in post-war England. The characters appear on stage as symbols of social disappointments and reflect the inner crisis of a traumatic period.

More recently, one of the most striking examples of the theme of trauma in British drama is the work of Sarah Kane. In her play *Blasted* (1995), she argues that the logical conclusion of isolated rape in England is rape camps in Bosnia, and the logical conclusion to society's expectations of men is war. However, Kane denies being a moral writer and claims that discussing the morality of the play is inappropriate. She does not have answers to questions about violence, masculinity, morality, or sexuality and does not want to be in control of other people's minds. Kane deliberately avoids explaining herself to audiences, as it relieves them of the effort of working things out for themselves. The play does not sloganize, and Kane does not feel that the conclusions drawn by others are her responsibility (Sierz, 2001, pp. 104,105). She depicts the horrors of war and how trauma shatters the human psyche in a harsh and shocking language. In general, Kane's works depict how trauma and violence are intertwined and how the characters are crushed under these devastating experiences.

Another important work is Dennis Kelly's play *Orphans* (2009). In this play, Kelly shows how trauma and violence infiltrate the lives of ordinary people and reveal the inner darkness of individuals:

> It's a look at the magnetic pull of family ties on one's moral compass. It's an examination of the class and race war raging within Britain today. It questions what dark lengths we are all capable of going to and what would push us to them. And it's an example of a woman's right to choose taken to nightmarish extremes. Picking away at what a man's role in society is – as lover, father, protector – it explores fear, shame and perception in relation to gender and the colour of one's skin (Keane, 2012).

The traumatic events of the characters' past deeply affect their attitudes towards violence and their relationships with each other.

Besides the literary works mentioned above, Martin McDonagh's *The Pillowman* (2003), Philip Ridley's *Mercury Fur* (2005) and Duncan Macmillan's *Every Brilliant Thing* (2014) are important works that deal with the theme of childhood trauma in depth in contemporary British drama. McDonagh's *The Pillowman* tells the

story of how childhood violence casts a dark shadow over a writer's life, while Ridley's *Mercury Fur* explores how childhood traumas are intertwined with violence and social collapse in a dystopian future. Macmillan's *Every Brilliant Thing* is an emotional and humorous account of a child's struggle to cope with his mother's depression and suicide attempts. These works reveal how trauma is carried from childhood to adulthood and leaves lasting traces in the lives of individuals. As such, these three plays will be the subject of the present study in terms of the way they represent the childhood trauma of the characters in them. This is largely because these examples, as well as many others, show the extent to which trauma features as a powerful theme in English literature and drama, how wars and individual suffering are represented through literary narratives, and how society confronts these traumas. Especially in the post-Freudian period, the psychological and social dimensions of trauma have found more space in literature and the stage, causing this theme to maintain its popularity today.

The development of a systematic and scientific understanding of trauma is, as mentioned above, accepted to have largely begun with the work of Freud. In the late 19th century, Freud, while trying to understand disorders such as hysteria and neurosis, investigates the relationship between traumatic experiences and these disorders. Especially in the early 1890s, in his work titled *Studies on Hysteria* (1895), which he wrote with Josef Breuer, he suggests that his patients show symptoms of hysteria as a result of the suppression of their traumatic experiences. This work is one of the first to analyse the effects of repressed unconscious memories on the symptoms of hysteria. Here, Freud analyses the reflection of traumatic events on the symptoms of patients with detailed case studies. Freud also asserts that these symptoms are often grounded in "experiences which released the original affect, the excitation of which was then converted into a somatic phenomenon" (Freud & Breuer, 1955, p. 187). For him, hysteria is intimately associated with unresolved, sometimes unconscious, traumatic events that present physical symptoms. These studies form the basis of Freud's theories of the unconscious and repression mechanisms. Freud argues in this sense that traumatic events, especially in childhood, lie at the basis of mental disorders in adulthood. His trauma theory is one of the first comprehensive attempts to understand the dark, unconscious layers of the human psyche, leading to the birth of psychoanalysis.

Psychoanalysis is a talking therapy that aims to treat a range of mental health issues by investigating the relationship between the unconscious and conscious elements of psychological experience using clinical techniques like free association and dream interpretation (Pick, 2015, p. 23). Freud's inspiration to found psychoanalysis as a field is motivated by his desire to understand the influence of the unconscious on human behaviour and the impact of past experiences, especially traumatic events, on the psychological health of the individual. Freud analyses the repressed memories of his patients in the unconscious and the effects of these memories on the symptoms of the patients and studied the effects of traumatic events on the psychological structure in depth (Kendell, 2001, p. 7134). Thus, psychoanalysis becomes a branch of science that tries to understand how traumatic experiences are processed in the unconscious of the individual and the reflections of these experiences on conscious life.

Following Freud's work, many philosophers, psychoanalysts, and critics approach trauma from various perspectives. These figures develop trauma theories and deepen the individual and social dimensions of trauma. For example, Jacques Lacan makes important contributions to the field of psychoanalysis by reinterpreting Freud's work. He posits a connection between the unconscious and language, asserting that linguistic structures record traumatic experiences in the unconscious:

> Psychoanalytic experience has rediscovered in man the imperative of the Word as the law that has shaped him in its image. It exploits the poetic function of language to give his desire its symbolic mediation. May this experience finally enable you to understand that the whole reality of its effects lies in the gift of speech; for it is through this gift that all reality has come to man and through its ongoing action that he sustains reality (Lacan, 2006, p. 322).

In his studies, Lacan explains how language shapes an individual's unconscious and desires, arguing that psychoanalytic experience mediates these desires through a symbolic language. He believes that language enables the perception, maintenance, and existence of reality by constantly reproducing and giving meaning.

In addition to Lacan, Cathy Caruth is considered one of the contemporary representatives of trauma theory. In her theoretical framework on the nature, memory and narrative of trauma, Caruth examines the effects of trauma on consciousness and memory, using examples from literature and thinkers such as Freud, Lacan and Derrida. She also focuses on the inexpressibility of traumatic experiences and the

inability of traumatised individuals to fully express what they have experienced. In discussing the profound effects of trauma on individuals and societies, Caruth emphasises how trauma can be shared, understood and coped with.

Another name is Dominick LaCapra, who studies historical trauma and memory and analyses the individual as well as social dimensions of trauma. He particularly concentrates on the remembrance of social traumas like genocide and their influence on cultural narratives. In his book, *Writing History, Writing Trauma*, he addresses problems from the perspective of history as a discipline, at least in his comprehension of it. He also explores the role of the middle voice in "writing" trauma and poses the question of how to articulate it with other forms of discourse, such as those used in truth claims (LaCapra, 2001, p. xii). Here, he emphasises how trauma can lead to a confusion of language and meaning in historiography and narratives. This implies that, in addition to truth claims, an emotional and empathetic approach is required. The concept of trauma is not only examined in the context of historical events, but also as an experience that is inherently challenging to convey through language and is inextricably linked with the concept of loss.

Last but not least, Judith Herman examines the impact of trauma on an individual's psychological structure and its connection to social dynamics. In her work, *Trauma and Recovery*, Herman provides a comprehensive analysis of the profound psychological impact of trauma on individuals. She elucidates the internal conflict between denial and acknowledgement of traumatic events, which is a crucial aspect of understanding the psychological effects of trauma. Trauma is explained as below in her words:

> The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological trauma. People who have survived atrocities often tell their stories in a highly emotional, contradictory, and fragmented manner, which undermines their credibility and thereby serves the twin imperatives of truth-telling and secrecy" (Herman, 1992, p. 1).

Here, Herman highlights the psychological challenge of traumatic experiences. This is a central dialectic: The urge to suppress traumatic memories and the need to articulate them are in direct opposition to human instincts to escape pain and maintain psychological stability. The conflict is driven by human instincts to escape pain and maintain stability. Trauma can cause fear, shame or powerlessness, leading to the

expungement of memories. Trauma survivors must remember and accept their experiences to heal. The need to "speak the truth" is often paradoxical, reflecting the internal disarray caused by trauma. This fragmented narrative is indicative of the disorganisation and loss of control associated with traumatic experiences. Disclosing traumatic experiences is a pivotal stage in recuperation.

It goes without saying that trauma studies initiated by Freud have had a significant impact on a wide range of fields, including psychoanalysis and social criticism since then. Lacan's focus on language and trauma, Caruth's attention to the unspeakable nature of trauma, LaCapra's analysis of social traumas, and Herman's emphasis on the pivotal role of recovery processes and the social dimensions of trauma have facilitated Freud's theory to evolve and become a field that surviving into the present day.

Freud's works on trauma are predicated on the fundamental tenet that traumatic memories, repressed in the unconscious, manifest themselves as symptoms in the conscious life. According to him, traumatic memories are repressed in the unconscious but manifest themselves in the conscious mind in various ways, including dreams and anxiety attacks. These theories posit that past experiences may contribute to current mental health issues. His works prove to be significant early contributions to the study of individual trauma and collective memory, laying the foundation for modern trauma theories.

Inspired by the growing popularity of trauma studies especially from the 1990s on, this thesis aims to analyse the manner in which traumatic experiences in childhood are reflected in an individual's identity and behaviour in adulthood, with specific reference to works in contemporary British drama. In particular, this analysis will focus on three plays: McDonagh's *The Pillowman* (2003), Ridley's *Mercury Fur* (2005) and Macmillan's *Every Brilliant Thing* (2014). In doing so, the question of how these writers represent childhood trauma with a view to Freud's and Caruth's theories of trauma and how their representations discover the association between memory, repression, and the return of the repressed will be the focus of the study, as the theoretical framework of these works will be based on Freud's approach to trauma and childhood trauma on the one hand and Caruth's theory of narrating trauma on the other.

2. TRAUMA AS A SHADOW OF CHILDHOOD ON ADULTHOOD

Early traumatic experiences, such as physical, emotional, or sexual abuse; neglect; parental separation; bullying; or loss, are pervasive phenomena and often have impacts on one's later life. Especially since the early 20th century, the cases of trauma have proved to be on the increase for a variety of reasons, ranging from the self-centred aspect of ultra-individualism, which is defined as "the great challenge of our time" by Solheim (2023) through the devastating consequences of two world wars to the subversion of the established institutions and value systems, such as family, church, traditions, state, etc. with the rise of modernism followed by post-modernism. It has been reported that one quarter of adults has witnessed or experienced four or more of ten adverse childhood experiences[1], and consequently this early exposure to negative situations is accepted to have an enduringly negative impact on physical and mental health in adulthood, social functioning, and risk of re-victimization (Spytska, 2023, p. 83). "ACEs have been linked to a range of adverse health outcomes in adulthood, including substance abuse, depression, cardiovascular disease, diabetes, cancer, and premature mortality." (CDC, 2010, p. 1609) Correspondingly, childhood trauma influences individuals throughout their lives, shaping their subjective experiences and post-traumatic environment. Danese and Widom argue, therefore, that exploration of the affective nature of human experiences, particularly in childhood, is crucial due to children's vulnerability and subjection to traumatic experiences in the hands of their parents (2020, pp. 3-4). Trauma, respectively, can be considered to be an extreme experience that goes beyond what human mind can comprehend, triggering emotional and physical reactions that have a detrimental effect on a person's well-being. When a person experiences trauma during childhood, it can result in the development of mental illnesses later in life, and in severe instances, it can lead to the presence of multiple psychological disorders. Childhood trauma can take the form of acute incidents, which are brief but intense, or chronic situations involving repeated traumatic events over an extended period (McKay et al., 2021, p. 189).

[1] Adverse childhood experiences (ACEs) are stressful events and experiences occurring before age 18. These include verbal, physical, or sexual abuse, as well as family dysfunction such as an incarcerated, mentally ill, or substance-abusing family member, witnessing a parent treated violently, or the absence of a parent because of divorce or separation. (MMWR, 2010, p. 1609)

One can argue that the trauma theory owes its rich history and development to the substantial content that repetition-compulsion and the aetiology of hysteria, extending beyond the pleasure principle, have contributed. It can be claimed that Freudian psychoanalysis itself serves as a comprehensive trauma theory, as it has undergone a profound reconceptualization of trauma over the past century, transforming it from a mere pathological disease to a deeply rooted psychological phenomenon., which casts a shadow from childhood onto adulthood, subjecting the individual to immense suffering within the very sphere they once considered familiar and to which they believed they were entitled. Being one of the pioneers of psychoanalysis who started to theorize about trauma, Sigmund Freud is credited with having established theoretical concepts such as repression, the unconscious, the instincts, and seduction theory, which are all set to understand where trauma takes place in the psyche and what it does to the mental health of individuals.

Accordingly, Freud's theory of psychoanalysis is considered to be one of the cornerstones of modern psychology and to have revolutionised the understanding of the unconscious processes of human mind. Freud argues that mental functions are not simple and direct, but rather they have a complex structure and a dynamic unconscious. At the centre of Freud's theory is the idea that mental processes operate on three levels, including "conscious", "preconscious" and "unconscious". In this respect, the consciousness includes thoughts and feelings that are currently being realised; the preconsciousness regards information and memories that are easily accessible; and the unconscious contains thoughts, desires and traumatic memories that are mostly repressed and far from conscious awareness (Freud, 1923, pp. 3-4). In this respect, Freud sees the unconscious as a determining force on the individual's behaviour, as unconscious conflicts directly affect the mental health of the individual. Freudian psychoanalysis, hence, aims to reveal these conflicts and help the individual to process them consciously. The fundamental premise of Freud's psychoanalytic approach is, therefore, the conviction that a considerable proportion of our mental processes, encompassing our desires, memories and anxieties, remain obscured from our conscious awareness. Freud also puts forth the concept of the unconscious, a vast and dynamic domain that exerts a powerful influence on our conscious experiences.

Believing that all these levels of mental processes are operated in human mind, Freud, in his study *The Ego and the Id* (1923), divides the human mind into three components, such as "id, ego, superego". Id is primitive, impulsive and focused on seeking pleasure, which Freud calls the "pleasure principle", aiming to meet the basic biological needs (p. 6). Ego acts in line with the reality principle and balances the demands of the id and the outside world, which makes it possible for the individual to adapt to social life. Superego represents the moral values and social norms of the individual, thus serving to make the individual acceptable to the society. Conscience and the ideal self-take place within this structure and resist the desires of the id (Freud, 1923, pp. 6-10).

Furthermore, Freud emphasizes the importance of early childhood experiences in the individual's personality development. He describes the functional development of personality mainly in the context of phases or stages. Each of these phases or stages relates to some particular erogenous zone as a source of pleasure. Stimulation of that erogenous zone at the proper stage usually brings positive pleasure to the child. Inadequate or excessive stimulation of the erogenous zone, on the other hand, brings unpleasant consequences to the child, which usually persist into the adult life in the form of inhibitions, symptoms, or disturbances that are variously called neuroses or psychoses (Nopianti et al., 2020, p. 31). In general, both overindulgence and frustration have to be avoided. Successful completion of each stage of development is necessary if the child is to develop a healthy personality as an adult (Shulman, 2021, p. 1093).

Briefly speaking about Freud's view about child development, it can be said that Freud identifies five psychosexual stages of development and relates them to the sexual organs. The duration of these stages shows differences between the male and the female. The first of these phases is "the oral phase", which lies between birth and the second or third year of age. The erogenous zone of this first stage is centred on the infant's mouth. An infant's main interactions with the world around him as he progresses through this period are a result of his oral explorations of his environment (Lantz & Ray, 2020, p. 1). In the oral stage, the child's primary source of pleasure and tension reduction comes from the union of the baby with the mother's breast. The infant is entirely passive in its relationship with the mother's breast and must rely on the mother to satisfy his needs. An infant will pass through the oral stage for a total of

two months, but these oral needs will remain a powerful and lifelong influence on the individual. If a person's need for gratification is not met, the person is described as "orally fixated" (Neu, 2005, p. 185). The person may show this fixation by finding comfort in oral stimulations, such as listening to music, eating and drinking, and smoking. Such adults or personalities are also influenced by their feeling that the world is a difficult place to survive. They feel that everything may go wrong in the world, and they try to overcome all that by excessive dependency on others (Mcleod, 2023, p. 1). To illustrate this point, one may consider the case of a new-born infant who is suckling at the breast of its mother. For this infant, the breast represents the entirety of his world. He has no knowledge of the existence of other objects. He clings to his mother's breast not only for food but also for security and comfort. If the baby is drinking, he is just experiencing pleasure, and it is when this period of passive enjoyment ends that tension and thus its suffering start. Thus, what man can achieve of happiness in his life depends upon the equilibrium between the quantity of pleasure and the quantity of suffering that he experiences.

The second phase, "the anal phase", lasts from the second or third year of age to four or five; the third is "the phallic phase", lasting from four or five year of age to seven. During the anal stage of development, the child becomes interested in the products of feces elimination and is aware that his parents are interested in them as well. The development of a child at this stage, as well as his subsequent character, is largely contingent upon his experiences in this regard (Kesavelu et al., 2021, p. 75). A child may be considered "tough" if he appears to have difficulty retaining information or emotions within himself, and if his behaviour is largely driven by the excretory system. The pleasures experienced during this stage of life are characterised by the satisfaction of early sexuality and the ways in which the infant receives nourishment and experiences the cleanliness of their bowels. The expulsion of excrement is frequently associated with these inaugural experiences of gratification, which in turn facilitate the comprehension of contrasting sexual appetites.

In the classical psychoanalytical theory, the "phallic stage" is the third stage of psychosexual development. This stage lasts from three to seven years of age. The main erotic zone of this stage is the genitals (Kesavelu et al., 2021, p. 75). The main object of the child's love in this stage is the parent of the opposite sex. The superego also

appears at this stage. The emotions relevant to the phallic stage are the Oedipus complex and its concurrent processes. During the third stage of psychosexual development of a child, namely the phallic phase that follows the latency period, the interest of the growing boy or girl is focused on sexual behaviour, on the differences between the sexes, and especially on the external visible genital organs, which causes the manifestation of activity (Spielman et al., 2021, pp. 824,825). The second biological task is the sexual stimulation of these erogenous zones. For the girl, the phallic stage ends with the castration threat, while the boy's discovery of his role – the Oedipus complex – is freed of this when he takes his father as a role model.

For the female, the next phase, "the latency phase", spans the years of seven to eleven. Freud's theory states that the latency stage is a period of relative calm in psychosexual development, lasting from age 6 to puberty. During this stage, boys and girls play without showing gender differences. While differences related to sex are still noticeable, similarities may lead to misconceptions about infantile sexuality. Latencies of aim in this stage are crucial, delaying the onset of sexuality until the proper structures are in place and allowing the individual to practice with sexual excitement (Spielman et al., 2021, p. 825). Erotic life is absent, but energy is expressed through other biological tendencies. The child's interests vary between mastery, independence, and love (Mcleod, 2023, p. 1). The growing child is protected from moral anxiety and no longer experiences the active Oedipus complex. However, the castration complex still lingers in the unconscious, causing fear and inhibitions. Children surpass adults in exhibiting moral anxiety, as they fear punishment for their desires. To please their parents, they ignore the pain of the external world. This period is clinically safe unless a neurosis is present, as the sexual latency anomalies indicate constitutional variations rather than infantilism (Cimino, 2024, p. 408).

The final phase usually ends at the age of seventeen when genital maturity is reached. According to Freud, individuals cannot achieve total maturity without successful completion of each of the first three stages (Spielman et al., 2021, p. 1477). Consequently, failure to successfully complete any of these phases will cause them to become fixated or locked into that particular stage's needs and desires (Neu, 2005, p. 185). Hence, the genital phase in the development of libido starts during or after puberty and completes the body's transformation, which enables sexual use and

reveals attractions and sources of pleasure in others, allowing participation in society's tasks. Puberty introduces the copulatory act as a sexual aim, but it is not necessary and can overshadow less objectionable aims in infancy (Freud, "Remarks on the Theory and Practice of Dream-interpretation", p. 4040).

Besides his views of human mind and the operations of it, Freud focuses on dreams and their analysis. Through the analysis of dream symbolism, free association, and other techniques, Freud seeks to uncover the underlying, often repressed, desires and conflicts that shape man's conscious experiences (Freud, "The Theory of Uncanny", p. 3695). The impact of Freud's theories on the field of psychology and the broader understanding of human behaviour cannot be overstated. Not only have his insights influenced the development of various schools of psychological thought, but they have also resonated in fields as diverse as art, literature, and philosophy (Tarzian et al., 2023, p. 3).

While Freud's theories have been the subject of ongoing debate and reinterpretation, his legacy as a pioneering thinker and the founder of psychoanalysis remains undisputed. His theory of psychosexual development, which traces the evolution of an individual's sexual and emotional attachments from infancy to adulthood, also plays a critical role in his comprehension of the human mind (Tarzian et al., 2023, pp. 2-3). Freud believes that unresolved conflicts and fixations at various stages of this developmental process could lead to psychological disturbances and personality disorders after the completion of development (Garcia, 1995, p. 498).

With a view to all the above-explained issues regarding Freud's path into the secrecy of human mind it can be claimed that Freud's conceptualization of trauma and its influence on the psyche has also been a crucial aspect of his views on psychoanalysis. As Freud states in *Beyond the Pleasure Principle* (2024d), "the term 'trauma' is to be understood in a purely descriptive sense. It relates to an experience which within a short period of time presents the mind with an increase of stimulus too powerful to be dealt with or worked off in the normal way, and this must result in permanent disturbances of the manner in which the energy operates" (p. 31). In this regard, he believes that neurotic illnesses are caused by traumatic childhood experiences, such as premature sexual stimulation. However, as his "self-analysis" and "clinical experience" deepens, Freud comes to recognize that the "memories" of his

patients are often transformations of the past, rather than direct reflections of reality (Weiß, 2021, p. 756) This realization leads him to shift his focus from the impact of real-life trauma to the significance of unconscious fantasy and its role in the development of psychopathology. As Erikson (2012) states, Freud's drastic change in thinking, from a "reality-centred theory to a fantasy-centred theory," marks an essential landmark in the evolution of psychoanalysis and shaped his future theorizing (p. 24). In fact, it can be stated that such a transition highlights the dynamic and evolving nature of Freud's ideas, as he grapples with the complexities of the human mind and the interplay between external experiences and internal psychological processes.

From the psychoanalytic point of view, traumatic events are experienced as a threat. These fears, once repressed, may affect the mental capacity of adults in everyday life. Moreover, patients with untreated childhood trauma experience a variety of mental distresses. As stated by Spielman et al. (2021) in connection with childhood trauma, Freud's theory is that "a person's psychological problems are the result of repressed impulses or childhood trauma. The goal of the therapist is to help a person uncover buried feelings by using techniques such as free association and dream analysis" (p. 1498). Symptoms such as amnesia, irritability, distractibility, feelings of guilt and withdrawal, phobias, sleeplessness, depression, and suicidal thoughts persist in the long term. The findings indicate that individuals who have already experienced more than one kind of childhood trauma may exhibit severe symptoms. Since it can continue to occupy a place in the minds of individuals throughout their lives, a body of successive and corresponding literature has suggested the presence of childhood trauma. Accordingly, trauma as a field of study has become an interest in the scholarly discourse with the studies of Freud and recently with Cathy Caruth. According to Stocks (2007), Freud's investigation into the psychological consequences of extreme experiences, exemplified by the phenomenon of "shell-shock" among soldiers during the First World War, establishes the foundations for the contemporary conceptualisation of trauma (p. 75). In this respect, to understand childhood trauma and its impact on adulthood, one must explore Freud's work on trauma and its role in psychoanalysis since, for Freud, the mind is complex, with memory and repression playing a significant role in defining trauma (Davies & Meretoja, 2020, p. 2). Forgotten and unconscious memories transmit trauma. Victims repress, sublimate, or

forget traumatic events. Memory reveals individual experiences. Freud link childhood experiences with adult personality and behaviour. He studies conflicts embedded in the brain during infancy, focusing on the child's parents as caretakers. Likewise, fixation during psychosexual development affects adult personality and relationships.

During the later years of his career, Freud revises his theory of trauma and develops a number of principles which retrospectively explain the traumatic nature of an event. Repeated instances of belated articulation of the trauma show that the subject did not psychose traumatique. As Horváth (2024) states, "Freud's retroactive trauma theory that relies on the afterwardsness of trauma (Nacthräglichkeit) and incorporates progressive and retrospective movements in time". He further claims that "Freud's idea can be re-interpreted or re-modeled phenomenologically as a form of affective retroactive awakening of the past" (p. 2679).

In this respect, Freud elaborates three key principles which lead, in conjunction, to the conclusion that the traumatic event is never a contemporary event but only ever belatedly arises to the present. Freud first upholds the principle of repression, which states that the individual cannot, and refuses to, deliberately recall or construct the past trauma because it is too painful to represent. As a result of this repression, traumatic content has a tendency to repeat itself, either as somatic phenomena, behaviour, thought, or dreams. This principle is named by Freud as "repetition compulsion" (Sanfelippo & Dagfal, 2020, p. 135).

A foundational component in the psychoanalytic treatment of trauma is a belief in the unfailing efficacy of a moral practice called abreaction, or catharsis. The word "abreaction", comprising "a" that means 'drive', and "brechen" that means 'break forth', itself embodies the traumatic nature of the event. When dealing with traumatic memory, the memory must be compelled to 'break through' (Sütterlin, 2020, p. 13). However, it is only this 'breaking through under stress' which results in the memory constituent accompanying the trauma. While the trauma coexists with the memory, it is nevertheless not identical to it. Consequently, it is via the medium of the affect alone that a traumatic event can manifest itself. The appearing involves continuing to exist, as it always has, as a question of the future of what has gone before. Thus, the 'as if' character of finitude is again discernible. It is the trauma which the individual continues to put in brackets each time an event that signifies what 'has been' bracketed

(Toremans, 2003, pp. 336-37). In this case, "when the "repressed" stimuli are subsequently presented in a recognition memory test, it is hypothesized that they cannot be recalled consciously, but that they continue to exert an unconscious influence on the subject's behaviour, as indicated by a measure of unconscious memory" (Axmacher et al., 2010, p. 5) In conclusion, the traumatic event is never a contemporary event. It is the re-emergence of that which cannot be experienced in the lived, or immediate, present. Trauma involves a continuing to be, and to have been, of that which never was. That is why trauma remains an 'unconscious event.' The traumatic quality of sublimation is akin to this. In each instance of sublimation, there lies the real potential for re-traumatization. It calls for an event of pure eventuation, a breaking-through.

Following Freud's studies on psychoanalysis and trauma, Caruth comes to the forefront in a debate that places trauma within the modern framework of psychological futures, thereby modifying styles of narration and being. This occurs at a time when the term 'trauma' has been revived and reformulated. She publishes a series of interdisciplinary writings that have made trauma a prevalent concept in contemporary critical theory and in the field of cultural studies, providing a forum for the exchange of case studies in those postmodern jurisdictions where the self, psyche, body, and soul are mediated through capital, technology, and information.

Accordingly, in contrast to Freud, Caruth's influential work, *Unclaimed Experience*, has illuminated the intrinsic contradictions and linguistic complexities inherent in the representation of traumatic events (Balaev, 2014, p. 5). Accordingly, Caruth (1996) refers to the belatedness of traumatic events, adopting Freud's ideas in the example of train accident, which "illustrates, for Freud, the traumatizing shock of a commonly occurring violence" (p. 6). Davis and Meretoja write that for Caruth trauma is "characterized by a delayed response to an overwhelming event that cannot be processed at the time of its occurrence but manifests itself through intrusive thoughts, flashbacks or nightmares" (p. 3). Caruth (1996) explores trauma and its impact on consciousness, and she differentiates her approach from Freud and others, who focus on repressed experiences. She also argues that traumatic loss is distinct from shock or fear, in which trauma disrupts the individual's sense of self and understanding of time, and the experience cannot be fully comprehended, and its effects persist even

after the event has ended (pp. 3-4). Trauma challenges conventional notions of past, present, and future, and hence both experience and understanding are delayed for Caruth. She (1996) further believes trauma disrupts the continuity of memory (p. 95). Unlike trauma, memory has an end. Trauma involves a permanent shift to the past and disrupts identity. Caruth's view of trauma contradicts interpreting it as a force of negativity (Sütterlin, 2020, p. 25). Accordingly, Caruth defines trauma as a delayed reaction, uninvited and recurrent hallucinations, dreams, thoughts and behaviours resulting from the traumatic event. Trauma, which cannot be fully experienced at the time of the event, can only be experienced if it is delayed and repeated (Caruth 1995, p. 4). Therefore, Caruth underlines the difficulty in representing trauma.

However, one of the main points in discussing whether Caruth can be described as continuing the legacy of Freud on trauma theory concerns the conceptual differences between both theorists. It is possible that the first distinction is between the psychoanalytical view of trauma analysed mainly as an intrapsychic matter of the individual's inner conflicts and repression in Freud and the emphasis on external narrative analysed by Caruth, in which the theory of the "non-witness' and the necessity of telling the traumatic event takes centre stage (Caruth, 1996, p. 100). The former focuses on the 'wound as a real trauma, on a traumatic event that has suffered repulsion, the preservation of which can generate the symptom that will disturb the individual's conscious ordering. That is, Freud deals with the "real" of trauma, while Caruth focuses on narratives told by the masses, not by their victims, ad a way of understanding the expressions and formations associated with trauma (Levine, 2021, p. 794).

Therefore, within these two main assumptions, further sets of theoretical differences can be listed. For instance, they have different attitudes towards the potentiality of healing the symptom, even though such disparity is itself controversial (Civitarese, 2020, p. 270). It can be argued that such distinction cannot account for the identification of different psychological treatments of trauma by the representatives of psychoanalytic movement. In any case, henceforth, a description of these main conceptual differences between Caruth and Freud can be found in a dialectic movement of approximation and disassociation.

In terms of theory, it is peculiar that trauma was not included as a classification of mental diseases in psychoanalytic psychology in the first half of the twentieth century. To understand this topic better, there appears a need for a look at the different theories of trauma and focus on Freud's and Caruth's theories. Freud examines the traumatic event from a psychodynamic perspective, while Caruth is concerned with the narration of the traumatic, which has implications for the therapeutic management of traumatized patients (Sütterlin, 2020, p. 20). Freud believes that bringing the trauma into the unconscious again would help the patient, while Caruth is of the belief that talking about the trauma is the only way to give it a narration. The theories are linked to different understandings of the time of a psychotrauma and different societies. Freud's theory corresponds more to a society without a positive and proactive attitude, while Caruth's theory reflects a society that struggles with traumatic narration (Sütterlin, 2020, p. 20). The only aspect that links both theories significantly is forgetting as an active process of repression.

2.1. Freudian Approach to Trauma and Childhood Trauma

According to Freud, human mind is an incredibly complex and intricate entity, with memory and the mechanisms of repression acting as pivotal and influential elements that dramatically shape and determine the enduring impact and aftermath of traumatic experiences. Thus, in Freud's theory, trauma is associated with two basic elements, including repression and emotional repetition or repetition compulsion. In his view of repression, when an individual cannot cope with a traumatic event, he/she pushes this event to the unconscious and removes it from the level of awareness. However, this repressed experience continues to exist in the unconscious and causes conflicts in the mental world of the individual. On the other hand, repetition compulsion, which is also subconscious memory, comes to mean that the individual tends to experience the repressed trauma over and over again, which does not occur directly in the form of remembering the trauma, but indirectly through dreams, symptoms or certain behaviour patterns.

In this manner, repressed and subconscious memories can carry the weight of trauma, with victims either suppressing, redirecting, or completely forgetting these distressing events. Memories offer a window into each person's unique experiences,

as Freud theorizes a connection between childhood encounters and adult behaviour, and the inner conflicts formed in the mind during an individual's early years, with a particular emphasis on the role of parents in a child's development. According to Freud, any disruption in psychosexual growth can have lasting effects on an individual's personality and interpersonal connections in adulthood (Glymour, 1993, pp. 464-65).

As Freud gains insight into the symptoms of hysteria, we know that it is possible for trauma traces to be re-associated as symptoms. In Freud's view, symptoms are overdetermined with removable grounds. The imprint of trauma is manifested in the form of symptoms, which are shaped by processes of over-determination and the passage of time. Freudian trauma theory posits a connection between neurological flashbacks and the present past, and the unconscious psychic trauma of birth.

It is not necessary to determine if Freud believes in the drive of birth. The discussion is about the symbolism of the demon emerging in the twentieth century. Trauma remains unverifiable and undecidable for the subject, but it reveals insights about the relationship between seeing and saying, language and reality, and meaning and presence. Objectivity is used to ensure that nothing escapes our attention. The statements that follow relate to forms of trauma related to death or separation from absence. One should consider what the subject gains by not succumbing to the indifferent meaning.

As Freud (2024a) states, "the unconscious is the true psychical reality; in its innermost nature it is as much unknown to us as the reality of the external world, and it is as incompletely presented by the data of consciousness as is the external world by the communications of our sense organs" (p. 567). Thus, according to Freud, the unconscious plays an essential role in the development of mental disorders and understanding mental processes is key to treating these conditions.

Behind Freud's turn towards psychoanalysis lie several important events and observations. Firstly, his studies with Joseph Breuer during his neurology education at the University of Vienna, especially his realisation that the symptoms of hysterical patients are alleviated by talk therapy, lead him to develop a different perspective on the human mind. In Breuer's case of 'Anna O.', Freud observes that the suppression of traumatic memories gives way to the patient's physical symptoms and thinks that

such experiences have profound effects on the unconscious (Freud, 2024a, pp. 73-77). Secondly, Freud's own life experiences, especially as an individual growing up in a Jewish family and feeling the social and political pressures of the period, contribute to a deeper understanding of the inner world of individuals.

In Freud's conceptualisation of psychosexual development, the period of childhood is posited to have a pivotal role in the formation of the adult identity. In his view, an adult's personality is formed by the experiences they undergo during their childhood years, along with the mental constructs that result from these experiences. Childhood includes a series of critical stages that Freud (2024b) calls "stages of psychosexual development", including "oral", "anal", "phallic", "latent" and "genital stages". In each stage, the child's endeavour to satisfy a particular psychological need forms the individual's characteristic traits (pp. 123-246). For example, a child who encounters excessive discipline or intolerance in the anal stage may have an overly controlling or disorganised personality in adulthood. Freud suggests that such early experiences leave permanent traces in the unconscious of the individual and guide future behaviour.

Freud also thinks that childhood not only forms the building blocks of adult identity, but also determines the individual's sensitivity to trauma experiences. Moving on to the concept of trauma, he states that personality and behavioural disorders in adulthood are mostly caused by events experienced or repressed in childhood. According to him, events that were not experienced in childhood though they should have been, or events that were experienced though they should not have been are repressed in the unconscious of the individual and become the source of future emotional and behavioural problems. Such experiences increase the internal conflicts of the individual and are called 'trauma'.

As it has been stated, Freud's theory of trauma is particularly focused on childhood trauma, devoting a significant amount of time and effort to the study of trauma and its effects on the human mind, whose conceptualization of trauma evolve over time, reflecting his growing clinical experience and his ability to delve into the significance of unconscious fantasy (Weiß, 2021, pp. 755-756). Initially, Freud proposes that the sexual abuse of children is a primary factor in the development of hysteria. However, after a period of self-analysis and reflection, he then disavows this

"seduction hypothesis" in favour of the theory of repressed "Oedipal" sexual fantasies (Bowman & Chu, 2000, p. 3). As Freud's views on the origins of trauma shift, so does his understanding of the role of childhood experiences in shaping an individual's psychological well-being.

In this respect, "Freud's original formulation of childhood trauma involved a breaching of a stimulus barrier", where "external and internal real and instinctual angers converge" (Osofsky, 2003, p. 533). Freud, further, in *Moses and Monotheism*, elaborates on the essence of trauma, stating that "The essence of a traumatic situation is an experience of helplessness on the part of the ego in the face of an accumulation of excitation, whether of external or internal origin" (Freud, 2024c, p. 74). Hence Freud explores the core nature of trauma and how the ego experiences a sense of "helplessness", which plays a key role in his theory of how traumatic events impact individuals. It can be claimed that such helplessness is central to the traumatic experience and contributes to the ego's inability to integrate and process the event. This experience of external threat, coupled with a sense of personal helplessness and the inability to tolerate intense affective and physiological reactions, is essential to Freud's conceptualization of trauma (Osofsky, 2003, p. 533). Furthermore, Freud acknowledges that the "regularly produced 'memories'" of his patients do not always align with historical facts. Instead, he posits that these memories represent transformations created in retrospect (Weiß, 2021, pp. 755-56).

Freud first defines the concept of trauma in the 1890s as an event that disrupts the psychological balance of an individual and creates long-term effects. Childhood trauma, likewise, refers to the traumatic events experienced during childhood. Considering childhood trauma as one of the main causes of psychological problems in adulthood, Freud states (2024d) "the traumatic experience is constantly forcing itself upon the patient even in his sleep is a proof of the strength of that experience: the patient is, as one might say, fixated [fixiert] T to his trauma. Fixations to the experience which started the illness have long been familiar to us in hysteria" (p. 13). In this respect, Freud emphasizes that traumatic experiences have a lasting impact, continuing to affect the individual even during sleep, as trauma is not just a past event but remains active, intruding into the person's consciousness and demonstrating the intense and persistent nature of the experience. Freud introduces the idea of fixation in order to

explain how trauma is not fully resolved, leading to a psychological attachment to the event, which influences the patient's emotional state and behaviour, which is crucial in Freud's understanding of how trauma affects the mind. Similarly, in Freud's broader trauma theory, fixation indicates the inability of the individual to process the traumatic experience properly, which prevents its integration into conscious awareness. Instead, the trauma keeps resurfacing, disturbing the person's thoughts and dreams, and interfering with their daily functioning. Freud uses fixation to describe how an unresolved trauma keeps the individual stuck, continually pulling them back to it and hindering their ability to move past it, which is especially seen in disorders like hysteria, where the trauma manifests as persistent physical or psychological symptoms long after the original event.

In light of these considerations, it can be stated that in Freudian theory of trauma, one's comprehension of the human psyche is thus far limited, particularly in the realm of trauma and its relationship with childhood experiences, Freud's preliminary conceptualization of the "seduction hypothesis" posits that the sexual abuse of children is a primary factor in the development of hysteria, a notion that he later abandons in favour of a focus on repressed Oedipal sexual fantasies.

This shift in Freud's thinking, from emphasizing the role of external trauma to internalized psychological conflicts, proves to be a significant turning point in the history of psychoanalysis. While the seduction hypothesis is ultimately discarded, Freud's insights into the psychological impact of childhood experiences, both real and fantasized, lay the foundation for a deeper understanding of the complex relationship between trauma, development, and the unconscious mind (Weiß, 2021, p. 756).

The psychoanalytic perspective on trauma and its manifestations offers a multifaceted and nuanced approach which diverges from the more reductive conceptualization of trauma as a static "thing" in the mind, as seen in the introduction of post-traumatic stress disorder in the Diagnostic and Statistical Manual of Mental Disorders (Osofsky, 2003, p. 533). The psychoanalytic view recognizes the dynamic and reorganizing processes that occur within the traumatized individual, encompassing not only the mind but also the body and the individual's relationships with others. This understanding of trauma as a complex, multidimensional phenomenon aligns with Freud's broader emphasis on the role of unconscious processes and the significance of

early childhood experiences in shaping the individual's psychological development and well-being (Meares, 1999, p. 392).

Freud's shift from focusing on the effects of premature sexual experiences on a child's mind to emphasizing the role of unconscious fantasies illustrates how his understanding of trauma develops and becomes more complex (Bowman & Chu, 2000, p. 3). According to Weiß (2021), this shift in Freudian thinking is reflected in the broader domain of psychoanalysis, where the concept of trauma has continued to evolve, shifting from a static and reified view towards a more dynamic and integrated understanding of how external events, internal psychological processes, and the individual's developmental process interacts with and influence one another (p. 756).

The psychoanalytic understanding of trauma and childhood trauma is further developed through the contributions of other influential theorists, such as Pierre Janet, who emphasises the connection between trauma and disorders of dissociative identity (Blackstock, 2024, p. 1). The integration of these diverse perspectives within the psychoanalytic tradition has resulted in a comprehensive and multifaceted understanding of the impact of trauma on the human mind and the importance of early childhood experiences in shaping the individual's psychological resilience and vulnerability (Blackstock, 2024, p. 1).

Freud's exploration of the effect of premature sexual stimulation on the infant's psyche, and his subsequent rejection of the seduction theory in favour of the importance of unconscious phantasy, highlights the nuanced and evolving nature of his understanding of trauma (Izenberg, 2006, p. 25). This alteration in Freud's thought and theory is mirrored in the wider field of psychoanalysis, where the conceptualization of trauma has continued to evolve, moving away from a static, reified view towards a more dynamic and holistic understanding of the complex interplay between external events, internal psychological processes, and the developmental line of the individual. In his *Beyond the Pleasure Principle*, Freud considers 'traumatic' as "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). Thus, Freud's conceptualization of trauma can be taken as an overwhelming external event that disrupts the individual's

protective mechanisms, leading to psychological distress. Freud, moreover, points out that "the patient under traumatic neurosis is fixated to his trauma as a bee to the flower from which it sucks nectar. These patients have not finished with the traumatic situation, because they are waiting for the right action which will put an end to that situation" (Freud, 1920, p. 19). Thus, it can be stated that Freud considers trauma as an overwhelming experience that breaches one's psychological defences, leading to lasting psychological disturbances. Researchers such as Pierre Janet have further contributed to this evolving perspective by exploring the role of suspension and the fragmented nature of traumatic memories, underscoring the intricate and multifaceted nature of the human response to traumatic experiences (Kolk & Fisler, 1995, pp. 507-508).

However, Freud's initial insights into the connection between trauma and its psychological consequences have remained a vital aspect of psychoanalytic theory and practice. The concept of trauma has stood at the very foundation of psychoanalysis, evolving alongside the development of the field (Weiß, 2021, p. 756). In this respect, Freud's successors, such as Anna Freud and Melanie Klein, have built upon this legacy by further exploring the complex ways in which childhood trauma can shape an individual's psychological and emotional development through the lens of psychoanalytic and psychodynamic psychotherapy (Parker & Turner, 2009).

Psychoanalytic theory led by Freud, hence, contributes significantly to the recognition and understanding of the diverse range of complex symptoms that can emerge from traumatic experiences. These include dissociative symptoms, such as fragmented memories and feelings of disconnection from one's sense of self or the external world; affective disturbances, including heightened emotional reactivity, difficulty regulating emotions, and a restricted emotional range; anxiety and hypervigilance stemming from a perceived threat to one's safety; and somatoform symptoms, where psychological distress is manifested through physical symptoms and bodily experiences. The psychoanalytic perspective emphasizes the intricate relationship between the body and mind in the human reaction to trauma, underscoring the multifaceted and profoundly disruptive impact that traumatic events can have on an individual's emotional, psychological, and somatic well-being (Ford, 2009).

Through the lens of psychoanalytic theory, the manifestation of these diverse symptoms can be understood as the mind's attempt to manage and process the overwhelming experiences of trauma. The fragmentation of memories, the dysregulation of emotions, and the physical expression of psychological distress all reflect the complex and nonlinear ways in which the psyche responds to traumatic events (Bowman & Chu, 2000). By recognizing and addressing these multifaceted symptoms, psychoanalytic clinicians can help trauma survivors navigate the path towards integration, emotional regulation, and holistic well-being

Psychoanalytic approach to understanding and addressing trauma, grounded in Freud's pioneering work and further developed by subsequent psychoanalysts, offers valuable insights and interventions for individuals and families dealing with the profound and lasting psychological, emotional, and relational impacts of trauma (Klein, 1932, pp. 85-120). By emphasizing the complex interplay between unconscious processes, early childhood development, and the multifaceted human response to trauma, this perspective provides a nuanced framework for understanding and treating the multidimensional effects of trauma on the self and relationships. Through psychoanalytic and psychodynamic psychotherapy, clinicians can help trauma survivors explore the roots of their distress, integrate fragmented memories and experiences, and work towards healing and growth in the face of adversity (Williams, 2006, p. 321). This approach further acknowledges the importance of addressing the systemic and societal factors that contribute to trauma, as well as the need for comprehensive, "trauma-informed care" that considers the individual's distinctive cultural and personal context (Herman, 1996, p. 95).

Freud further posits that the concept of trauma reveals an intense form of stress or shock that disrupts the normal emotional development process of the individual, resulting in the repressed contents of the unconscious mind. These traumas are often associated with critical events in childhood. For example, a child growing up with an overly critical parent can lead to deep cracks in self-perception, which may manifest as a lack of self-confidence or depression in adulthood. Similarly, exposure to physical or emotional abuse in childhood can undermine an individual's sense of trust in others, which can lead to persistent conflict in relationships in adulthood. The effects of trauma profoundly influence not only the individual's psychological health, but also

their behaviour and relationships. Traumas shape the individual's perception of self, his/her view of the world and the bonds he/she establishes with other people. Such traumatic experiences experienced or repressed in childhood can lead to the development of anxiety disorders, obsessive-compulsive behaviours, depression and even personality disorders in adulthood.

In view of Freud's attribution of the causes of trauma to various factors, it has been pointed out that the most important of these is sexual abuse or sexual relationships in childhood. Freud, in this manner, argued that such events in childhood are one of the main causes of psychological problems in adulthood. Trauma can also be caused by other negative experiences such as physical or psychological violence, loss or separation (Bowman & Chu, 2000).

On the other hand, Freud explains the formation process of trauma in three stages, such as traumatic event, repression, and relieving (Weiß, 2021). In *Moses and Monotheism*, Freud presents a nuanced view of trauma and its long-term effects on the psyche. He argues that traumatic experiences, particularly those occurring in early life, are not merely forgotten but leave lasting imprints that shape future behaviour and psychological development. Freud, furthermore, outlines a formula of the development of neurosis stemming from early trauma, such as "Early trauma – defence – latency – outbreak of neurotic illness – partial return of the repressed" (Freud, 2024c, p. 71). This formula suggests that traumatic events are initially defended against and repressed, leading to a period of latency. However, the repressed trauma eventually resurfaces, contributing to the outbreak of neurotic symptoms. Hence, when a child experiences a traumatic event, this disrupts the child's psychological balance and leaves a deep mark on his/her inner world. When a child represses the traumatic event, this causes the child to forget or not recognise the traumatic event. Repression hence becomes the child's psychological defence mechanism. In the case of relieving, in adulthood, remembering or reliving the traumatic event may cause psychological problems in the individual (Glymour, 1993, p. 464). These problems may manifest as anxiety, depression, obsessions or other psychological disorders (Weiß, 2021, p. 756). Thus, Freud's theory of the 'repression' mechanism explains why traumatic experiences cannot be remembered directly. According to him, the individual represses such painful memories at the unconscious level and these memories are

removed from the conscious awareness of the individual. However, these repressed memories express themselves through dreams, slips of the tongue or psychosomatic symptoms. For example, an individual may experience a constant fear of abandonment in adulthood due to childhood neglect, a fear that stems from an internal trauma of which they are not aware.

Despite Freud's radical ideas and systematization of trauma as a psychiatric category, his trauma theory has been critiqued for several reasons. Freud's definition and conceptualization of trauma as a breach towards the male body has been said to be limited, misrepresentative, and controversial. As critics have shown, in contrast, Freud's understanding of some women's aetiology of traumatic experiences, such as hysteria, sexual abuse, and seduction, corresponds with gender problematic prejudices, ideals, and myths (Mandal & Singh, 2020, p. 10258). Additionally, it has been stated that Freud's denial of violence in most of the individual women patients' stories is said to reflect his ruthlessness and lack of compassion for a group of traumatized women (Mandal & Singh, 2020, p. 10258). As a result, the limitations and controversies surrounding Freud's trauma theory have impelled scholars and professionals to seek alternative perspectives that embrace a more inclusive and comprehensive understanding of traumatic experiences, acknowledging the significance of gender-related dynamics and affirming the validity of women's stories.

Besides Freud with his views and interpretations of trauma outlined above, there are some other figures who have contributed to the literature and study of trauma. Cathy Caruth is just one of them with ideas on trauma theory significantly influenced by Freud's concepts, but she also departs from his ideas in important ways. Born in 1955, 16 years after Freud's death, Caruth acquires a reputation as a prominent theorist in Trauma Studies. She focuses on a variety of issues from the languages of trauma and testimony through literary theory to contemporary discourses regarding the annihilation and survival of language.

2.2. Caruth's Approach to Trauma and Childhood Trauma

Cathy Caruth is a leading scholar of trauma theory who sees trauma as much more than a simple mental disorder or a pathology. She argues that trauma is

> much more than a pathology, or the simple illness of a wounded psyche: it is always the story of a wound that cries out, that addresses us in the attempt to tell us of a reality or truth that is not otherwise available. This truth, in its delayed appearance and its belated address, cannot be linked only to what is known, but also to what remains unknown in our very actions and our language (Caruth, 1996, p. 4).

For Caruth, in this respect, trauma is not only a psychological illness, but a profound experience that seeks expression. It communicates a truth unavailable through typical means, revealing something unknown within our actions and language due to its delayed emergence. Caruth also explains trauma as "an overwhelming experience of sudden or catastrophic events in which the response to the event occurs in the often delayed, uncontrolled repetitive appearance of hallucinations and other intrusive phenomena" (1996, p. 11). The uncontrollable effects of the reality of these destructive events on the mind are analysed in the field of post-traumatic stress disorder (PTSD). Since PTSD establishes a direct link between violence and the mind, Caruth (1996) claims that trauma "is not simply an effect of destruction but also, fundamentally, an enigma of survival", but "it is only by recognizing traumatic experience as a paradoxical relation between destructiveness and survival that we can also recognize the legacy of incomprehensibility at the heart of catastrophic experience" (p. 58). The incomprehensibility of catastrophic experiences can merely be understood by recognizing this paradoxical relationship between destruction and survival in trauma.

The notion that trauma is characterised by a temporary amnesia-like experience that leads to a lack of recollection after the event and only returns after a certain period of time was first proposed by Freud in his "Project for a Scientific Psychology" in 1895. With Freud's view in her mind, Caruth draws on Freud's notion of "Nachträglichkeit", which in English means "deferred action" and which describes how a traumatic event might not be fully experienced or understood until a later time (Caruth, 1996, p. 120). This aligns with her emphasis on the belatedness and "unclaimed experience" of trauma. Caruth (1996) sees trauma as an event that resists full integration into consciousness, leaving a lasting impact on the individual's psyche (p. 4). Later, Freud's views in *Moses and Monotheism* (2024c), related to this belatedness, which is also exemplified by the symptoms seen in the psychomotor behaviour of an unharmed survivor of a train accident only a few weeks later, become central to Caruth's theory. As Caruth (1996) points out, trauma that happens very

quickly and unexpectedly and cannot be fully grasped at the initial stage "is experienced too soon, too unexpectedly, to be fully known and is therefore not available to consciousness until it imposes itself again, repeatedly, in the nightmares and repetitive actions of the survivor" (p. 4). Moreover, according to Caruth (1996),

> unlike the symptoms of a normal neurosis, whose painful manifestations can be understood ultimately in terms of the attempted avoidance of unpleasurable conflict, the painful repetition of the flashback can only be understood as the absolute inability of the mind to avoid an unpleasurable event that has not been given psychic meaning in any way (p. 59).

In other words, the trauma, which the victims cannot understand at the time of the event and cannot remember or describe, continues to bother them forever through delayed reactions like nightmares, images, hallucinations, thoughts, and repeating the traumatic event. As can be seen, Caruth (1995) takes Freud as a model in her works in a way that trauma can be fully comprehended not at the time of the event but afterwards. Since the individual cannot comprehend this traumatic event instantly, he/she cannot react to it. Freud attempts to explain this situation with the example of a train accident. As stated by Caruth (1996),

> The example of the train accident - the accident from which a person walks away apparently unharmed, only to suffer symptoms of the shock weeks later - most obviously illustrates, for Freud, the traumatizing shock of a commonly occurring violence. Yet the recurring image of the accident in Freud, as the illustration of the unexpected or the accidental, seems to be especially compelling, and indeed becomes the exemplary scene of trauma par excellence, not only because it depicts what we can know about traumatizing events, but also, and more profoundly, because it tells of what it is, in traumatic events, that is not precisely grasped. The accident, that is, as it emerges in Freud and is passed on through other trauma narratives, does not simply represent the violence of a collision but also conveys the impact of its very incomprehensibility. What returns to haunt the victim, these stories tell us, is not only the reality of the violent event but also the reality of the way that its violence has not yet been fully known (p. 6)

The individual who witnesses the train accident walks away seemingly unharmed, but in the following weeks he/she shows involuntary physical and motor symptoms, that is, he/she experiences traumatic neurosis. Freud calls the period between the occurrence of the event and the onset of symptoms as the "incubation period" and the process of symptoms appearing later as "latency". The period after the accident is certainly not a forgetting of reality, but rather an 'immanent delayed reaction' to the event (cited in Caruth, 1996, p. 17). This "latency" period has no duration; it starts to

manifest itself in the individual's nightmares or unexplained behaviours after days, months or years. Since the trauma that occurs with delayed repetition is beyond the normal perception of individuals, this experience is re-experienced in fragmented forms such as nightmares and hallucinations instead of being easily perceived by the traumatised individual.

As stated before, Freud argues that the relationship between a traumatic event and its memory is not direct or straightforward, but rather shaped by both internal psychological factors and external circumstances. Such "experiences are stored at our particular consciousness level and compulsively repeated without any verbal expression. When he distinguishes between anxiety, fear, and fright, he reflects that trauma is a state of panic and could be reverted in the form of horrible interruptions and traumatic nightmares" (Mandal & Singh, 2022, p. 10257). Freud considers mind to be genetically metaphorical in that it is capable of binding one's energy, but he also perceives in the course of time that there is a successive attempt of the mind to "hook and connect on a symbolic level" (p. 10257). This connection ultimately provides meaning to the traumatizing experience in which memory plays a very crucial role. Hence, it is not the traumatic incident itself, but what the traumatized people examined as cases remember that should be viewed as infectious memories. These memories are later seen in a new context and then come to be recognised as traumatic.

Considering Freud and Breuer's idea that "hysterics suffer mainly from reminiscences" (Breuer and Freud, 2001, p. 7), it has already been mentioned that the main traumatic thing is not the event itself, but its later recollection, and that these memories persistently take over individuals in the form of flashbacks, hallucinations, and nightmares. According to Freud, as given in *Studies on Hysteria*, there are conscious and unconscious states in the minds of traumatised individuals and traumatic memories pass from the unconscious state into consciousness through hysterical symptoms, dreams and some unexplained behaviours. For the trauma victim, the event is too horrible to remember, so it represses the memory and pushes it into the unconscious. Since the memory is repressed, the individual relives the traumatic event unconsciously instead of recalling it as something from the past (Breuer and Freud, 2001, pp. 20-30).

Emphasising the importance of memory in trauma in recent trauma studies, Caruth (1996) points out that traumatic memory is paradoxical because while it is not possible to remember traumatic events on the one hand, these events are constantly relived on the other. The trauma victim experiences post-traumatic memory loss with the atrocity he/she experienced and cannot remember the event clearly; however, this traumatic memory constantly enters the life of the individual involuntarily (pp. 34-35).

It is not surprising that trauma is one of the most common topics in modern society, which is constantly exposed to news about war, terrorism, torture, natural disasters and epidemics, and often witnesses social dramas in a week that a person would have seen in his or her entire life before. Accordingly, trauma, which has become an interdisciplinary phenomenon that has deeply affected many fields with its increasing prevalence in the 1990s, has been studied by Caruth, also known as the first generation of trauma theorists, in her books, *Trauma: Explorations in Memory* (1995) and *Unclaimed Experience: Trauma, Narrative and History* (1996), as well as Dominick LaCapra's *Writing History, Writing Trauma* (2001).

As the founding and arguably most influential figure in the field of trauma studies, Caruth's approach to trauma is grounded in a psychoanalytic and post-structural framework, which suggests that trauma is an "unsolvable problem of the unconscious" (Balaev, 2014). She argues that trauma is an event that shatters the individual's sense of self and disrupts their understanding of the world, leaving them with a sense of absence and indeterminacy. Caruth's conceptualization of trauma is heavily influenced by the work of Jacques Lacan, who posits that trauma is a repeated sense of absence which prevents the individual from fully grasping the extreme experience (Caruth et al., 2019).

According to Caruth, who reinterprets trauma based on the structure of the experience, the term trauma

> describes an overwhelming experience of sudden or catastrophic events in which the response to the event occurs in the often delayed, uncontrolled repetitive appearance of hallucination and other intrusive phenomena. The experience of the soldier faced with sudden and massive death around him, for example, who suffers this sight in a numbed state, only to relive it later on in repeated nightmares, is a central and recurring image of trauma in our century. As a consequence of the increasing occurrence of such perplexing war experiences and other catastrophic responses during the last twenty years,

> physicians and psychiatrists have begun to reshape their thinking about physical and mental experience, including most recently the responses to a wide variety of other experiences, such as rape, child abuse, auto and industrial accidents, and so on, that are now often understood in terms of the effects of post-traumatic stress disorder (Caruth, 1996, p. 11).

This definition by Caruth focuses on the abruptness of the traumatic event rather than its nature, and on the delayed reactions not at the time of the experience but afterwards. The reasons for this, according to Caruth, are that trauma causes damage to the psyche that is difficult to repair at the time of its occurrence, that it cannot be recorded in the memory like normal experiences, and that events which cannot be remembered and narrated for this reason only emerge spontaneously after a certain period of time. In other words, trauma is defined as a phenomenon that is no longer limited to the moment of the event but also includes the fact that it returns later and disturbs the victim.

Caruth's exploration of trauma extends beyond the individual, examining the ways in which traumatic events shape and are shaped by larger historical, political, and social forces. Caruth's book *Unclaimed Experience* is today accepted as one of the founding texts in trauma theory. This book introduces for the first time the concepts of "ineluctable confrontations with trauma" and the difficulties of the knowledge of trauma and what follows experimentation on the limits of representation (Caruth, 1996, p. 17). It discusses the relationship between trauma and its inscription in survivors' memory and the problems survivors encounter in articulating trauma using various languages and narrative forms, the overcoming of which is essential in the post-traumatic healing process. This "latency period" is central to Caruth's theory, as it suggests that the true impact of trauma unfolds over time, often through fragmented memories, flashbacks, and other belated manifestations (Caruth, 1996, p. 17). Furthermore, not unlike Freud, Caruth emphasizes that trauma's influence is not immediate but rather belated or delayed. Freud stresses the repetitive nature of trauma, noting that "the traumatic experience is not remembered; it is repeated in action, in the form of compulsive behaviour or symptoms" (Freud, 1939, p. 75). This repetition is an attempt by the psyche to retroactively master the trauma, even though it may manifest in disguised or symbolic forms. Caruth in this manner thinks that the full force of the traumatic event is only realized after the fact, often through repetitions and re-enactments in the present. This belatedness makes it difficult to grasp trauma

directly, as it exists primarily in its after-effects (Forter, 2007). As trauma resists immediate integration into conscious experience, it also disrupts traditional narratives of history and personal experience. Caruth argues that trauma creates a gap or aporia in understanding, making it difficult to formulate a coherent narrative of self or the past (Caruth et al., 2019, pp. 36-37). Caruth, therefore, suggests that literature can play a crucial role in understanding trauma.

At the same time, Caruth's research has investigated the methods through which trauma can be conveyed and depicted, employing both artistic and literary techniques. According to Caruth (1996, pp. 4-5), storytelling can facilitate the reclaiming of agency and the reestablishment of an affinity with one's environment. Furthermore, Caruth posits that "the experience of trauma, the fact of latency, would thus seem to consist, not in the forgetting of a reality that can hence never be fully known, but in an inherent latency within the experience itself", and "the historical power of the trauma is not just that the experience is repeated after its forgetting, but that it is only in and through its inherent forgetting that it is first experienced at all. And it is this inherent latency of the event that paradoxically explains the peculiar, temporal structure, the belatedness" (Caruth, 1996, p. 17). Thus, it can be stated that literature plays an important role in the depiction of traumatic experiences (Caruth, 1996, p. 4).

Another aspect of Caruth's theoretical framework is that trauma, which cannot be experienced at the level of consciousness at the time of its occurrence, is therefore inaccessible and therefore unspeakable. A large-scale trauma creates a large gap in the psyche and makes it impossible for the event to be recorded in normal memory. Thus, she focuses on the belatedness and fragmented nature of traumatic experience, and how it resists full integration into narrative and conscious understanding. This is explained by a separation of the memory during the event, so that a new memory, called traumatic, is formed and the experience is repressed there. For this reason, Caruth (1995) points out the failure of efforts to understand the experiences and emphasises the impossibility of describing the experience by talking about it (pp. 6-10). The event, which cannot be remembered because it cannot be recorded in narrative memory in normal ways, also hinders linguistic skills. Therefore, the trauma experience challenges narrative endeavours and linear temporality. All of this explains the helplessness of trauma victims to fully recall what they have experienced, their

inability to express the experience in words, and the fact that many of them react with silence. Caruth (1995) states that "to be traumatized is precisely to be possessed by an image or event. And thus, the traumatic symptom cannot be interpreted, simply, as a distortion of reality, nor as the lending of unconscious meaning to a reality it wishes to ignore, nor as the repression of what once was wished" (p. 4) In this case, Caruth argues that trauma is not a simple distortion or repression of reality. Rather, it is a state of being overtaken by the traumatic image or event. This possession prevents straightforward interpretation through traditional psychological frameworks like those focusing on distorted perceptions or unconscious desires. The traumatic symptom, therefore, is not a symbolic representation of something else, but a direct manifestation of the unassimilated experience itself (Caruth, 1996, pp. 4-6).

However, Caruth diverges from Freud's emphasis on the repression and recovery of traumatic memories. Instead, she emphasizes the way trauma disrupts narrative and understanding. For Caruth, trauma is not simply a repressed memory waiting to be unearthed, but rather an experience that fundamentally alters the individual's relationship to time, memory, and language. She explores how trauma can manifest itself in literature and other forms of cultural expression, highlighting the challenges of representing and understanding such experiences (Caruth, 1996, pp. 4-7). Furthermore, while Freud's later work shifts towards the importance of fantasy in understanding psychopathology, Caruth thus maintains a focus on the real event of trauma, albeit one that is experienced in a fragmented and belated way (Radstone, 2007, p. 10). Her work explores how this fragmented experience shapes individual and collective narratives, and how it can be addressed through literary and cultural analysis.

All in all, Caruth, a prominent figure in the field of trauma studies, has made significant contributions to our understanding of the intricate relationship between trauma, testimony, and recovery. The concepts she had developed over time discuss how traumatic experiences come into being and how they are later inscribed in survivors' memories. One of the distinct characteristics of trauma, from her perspective, is that it does not take place at the time of occurrence; it may only be recaptured in the present when the memories are triggered through the process of repetition. Trauma moments are birth moments of "untimed and unassimilable" events

in the lives of the sufferer, as they point to “a time of no time” and require repetition for inscription in the survivor’s memory. She challenges the dichotomy between “trauma” and “testimony” and explicitly discusses the special status of perpetrators’ self-representation as “traumatism”, which is a form of the narrative aside from the polarized “traumatic” narratives. Her theory hence has substantially changed understandings of survivors’ experiences, which were previously thought to be beyond the limits of ethnographic exploration (Caruth, 1996, pp. 1-7).

In this regard, Caruth’s theory of trauma has influenced a large amount of psychotherapy and counselling practice and literature. Accordingly, many psychology professors and psychotherapists value the content of her research on trauma for the new theoretical approach it represents and admire her challenging work without necessarily endorsing it fully. Her concepts and “a focus on memory and representation” have also been adopted in various studies that apply them to the discussion of the radio accounts of Rwanda, films on the genocide, or the post-apartheid news stories of forgiveness and reconciliation. Some of her themes and terms have been used in discussing fiction and literature and, more broadly, the media and modes of writing through which genocide can be spoken.

3. THE PLAYWRIGHTS AND THE PLAYS

3.1. "My parents were funny people": Martin McDonagh and *The Pillowman*

Martin McDonagh is an Irish British playwright, screenwriter and film director who has gained an important place in the world of contemporary theatre and cinema. Born on 26 March 1970 in London to a family of Irish descent, McDonagh is known in the literary world for his unique style, which skilfully blends black humour, tragedy and grotesque elements. McDonagh, who stands out especially with his harsh and humorous plays set in the rural areas of Ireland, deals with the socio-cultural structure of Ireland, folk tales and the difficulties of rural life in his works. Deep psychological conflicts, violence, moral dilemmas and selfish, dark aspects of human nature are the main elements of his plays.

McDonagh has defended his artistic choices, stating in an interview with The New York Times, "I walk that line between comedy and cruelty because I believe that one illuminates the other" (Brantley, 2005). Combining humour, tragedy and violence in most of his works, McDonagh, as one of the modern playwrights of black humour, deals with social and moral issues in a grotesque and ironic style. McDonagh, who has achieved great success in both theatre and cinema, draws attention with his innovative approach to contemporary storytelling.

His playwriting is characterised by violence, humour, and the complexities of human relationships. His characters are often harsh and ruthless but deeply humane. His dialogue is notable for its sharpness in everyday language and its structure, brimming with black humour. McDonagh's plays are considered an important part of modern Irish theatre. The plays written by him are usually set in the Irish countryside and deal with the contradictions of human nature in a bleak but humorous language (Sayın, 2009, p. 17).

His early plays consist of two different series known as the 'Leenane Trilogy' and the 'Aran Islands Trilogy.' These works deal in depth with the darker aspects of provincial life and the human weaknesses of the characters. McDonagh's prominent plays include *The Beauty Queen of Leenane* (1996), *A Skull in Connemara* (1997), *The Cripple of Inishmaan* (1997), *The Lieutenant of Inishmore* (2001), *The Pillowman* (2003), and *Hangmen* (2015). These plays reflect McDonagh's distinctive style of dark

humour and tragedy, as well as the complexities of human relationships (Ostberg, n.d.).

McDonagh has carried his success in theatre to the world of cinema. His films deal with similar themes such as black humour, moral contradictions and the dark aspects of human nature. Among his prominent films are *In Bruges* (2008), *Seven Psychopaths* (2012) and *Three Billboards Outside Ebbing, Missouri* (2017). *Three Billboards Outside Ebbing, Missouri* has been a great success and has won many awards while dealing with themes of justice and mourning. The film has also brought McDonagh an Oscar nomination for Best Original Screenplay. Finally, with *The Banshees of Inisherin* (2022), McDonagh receives high praise from both critics and audiences (Decadent Theatre Company).

The Pillowman, first staged at the National Theatre in London in 2003, represents a departure from McDonagh's earlier works set in rural Ireland. The play is set in an unnamed totalitarian state, allowing McDonagh to explore universal themes of power, storytelling, and the impact of childhood trauma. As McDonagh explained, "I wanted to write about storytelling and the dark influence that stories can have" (Chambers & Jordan, 2006). This shift in setting also enabled McDonagh to engage more directly with broader philosophical questions about the nature of art and its relationship to reality.

The play centres around Katurian, a writer being interrogated by two detectives about a series of child murders that bear striking similarities to his short stories. As the interrogation unfolds, we learn about Katurian's disturbing childhood and his relationship with his mentally disabled brother, Michal. The narrative structure of *The Pillowman* is complex, with stories within stories, blurring the lines between reality and fiction. This structural complexity serves multiple purposes. As theatre critic Michael Billington notes, it allows McDonagh to "explore the power of storytelling itself and the responsibility of the artist" (Worthen &Worthen, 2006). Moreover, it provides a framework for examining the lasting impact of childhood trauma through adulthood, a theme that resonates strongly with both Freudian psychoanalysis and Caruth's literary trauma theory.

McDonagh writes the multi-layered theatre play *The Pillowman* in 2003, combining elements of black humour and suspense. This play, unlike McDonagh's

other works, takes place in an uncertain and dystopian police state rather than Ireland. *The Pillowman* is a text that questions the darker aspects of literature, fairy tales, the traumatic effects of childhood, and freedom of expression. The play begins with the interrogation of a young writer, Katurian Katurian Katurian, in a repressive government unit. Katurian is a writer of dark and chilling tales. Some of these tales are reminiscent of the murders of children. That is why police interrogate Katurian together with his brother Michal.

During the interrogation, the layers of Katurian's stories and the tragic past of his childhood unfold. In particular, the cruel experiments that his parents inflicted on him during his childhood in order to nurture Katurian's art play a major role. These events explain the origin of the dark and macabre elements in his tales. The following questions arise throughout the play: To what extent is an author responsible for the violence in his/her work? What is the appropriate boundary between art and ethics? How deep is the connection between trauma and the creative process?

From a thematic point of view, this play also raises a fundamental question: Could Katurian's tales have inspired the murders? The play questions whether an artist is responsible for the effects of his or her works. This theme opens up the boundaries between art and ethics for discussion and invites the audience to consider the effects of art on society.

Katurian's past plays an important role throughout the play. The traumatic events of his childhood have shaped both his personality and his writing. The deep traces of the trauma shape the tales Katurian writes and his life. Set in a totalitarian country, the story criticises the limits of freedom of expression and the control that oppressive regimes have over art. In the play, police characters appear as representatives of an oppressive regime and reveal the tension between individual freedom and authority. Usually, writers write stories to instruct or entertain children. Katurian's stories, on the other hand, contain violence and tragedy. The play shows that these stories are not only instructive but can also have a destructive power.

The main character of the play, Katurian Katurian Katurian, is a writer who is associated with murders because of his stories. His childhood traumas have deeply affected both his personal and artistic life. His stories should be considered free speech

because he loves his art. However, the play forces him to confront the consequences of his art.

Katurian's mentally disabled brother Michal may have committed the real murders by misinterpreting Katurian's stories, as implied. His innocence and naivety deepen the tragedy of the play. At the same time, Katurian's love for him and his instinct to protect him give the story an emotional dimension.

The detective Tupolski is a harsh and ruthless character but occasionally adds colour to the play with his black humour. He stands out as a representative of systematic oppression and symbolises the cold face of authority. The other police officer Ariel is a violent and aggressive policeman. However, the play's later parts reveal his own past traumas and human aspects. Ariel's past explains his violent tendencies and adds depth to the character.

McDonagh's frequent use of black humour and violence in the theatre is evident in this play. The dialogues have both a humorous and tense tone. The audience laughs in one scene and feels uncomfortable in the next. The play has a deep dramatic structure that allows the audience to connect with both the characters and the story. McDonagh's style offers an experience that both makes the audience think and shakes them.

3.2. "I love you so much I could kill you": Philip Ridley and *Mercury Fur*

Philip Ridley is an important figure in contemporary British theatre. He is also a novelist, filmmaker, screenwriter, painter, and photographer. Born in 1964 in the East End of London, Ridley's work often deals with childhood, trauma, violence, love, and the darker aspects of human nature. Ridley, known for his association with postmodern theatre and the 'In-yer-face' movement, which aims to disturb the audience through direct and striking themes, has gained prominence with his works in this genre.

He combines postmodern and grotesque elements. His plays often feature unorthodox characters, grotesque situations, and poetic language. With his unusually disturbing and shocking effect on the audiences through his portrayal of the real life with all its extremities, His main concern in his works is with the darker aspects of people's lives and the consequences of violence and trauma (Michelle, 2008, p. 149). In this sense, his work is notable for exploring the limits of human psychology and

social dynamics. He has been understood to have a world-class outlook in modern performing arts, and his work bestows approbation or commendation from ethnic and/or social critics while provoking defiance (Sierz, 2011, p. 123).

Ridley develops a bold, shocking, and innovative style in the theatre. His plays often have dark, disturbing, but at the same time, poetic language. He often intertwines harsh reality and fantastic elements in his scenes. Ridley aims to delve deep into human psychology and challenge the audience both emotionally and mentally.

Among his prominent themes, there are childhood and loss of innocence. In his works, he often deals with childhood traumas, the loss of innocence, and the effects of this situation on the individual. Violence and trauma are also among the themes in which Ridley focuses on the destructive consequences of individual and social violence. Ridley tackles this violence from both physical and psychological perspectives. In addition, despite their dark worlds, Ridley's plays are strongly characterised by love, hope, and a search for healing.

Some of his most prominent plays include *The Pitchfork Disney* (1991), *The Fastest Clock in the Universe* (1992), *Ghost from a Perfect Place* (1994), and *Mercury Fur* (2005). *Tender Napalm* (2011) *Radiant Vermin* (2015) *Vincent River* (2000). Ridley's plays are characterised by intense visuals and poetry. Poetic monologues, grotesque images, and sharp dialogues are the hallmarks of his works. Simultaneously, his works often blur the line between reality and fantasy. Although full of scenes that disturb the audience, Ridley gives a wide place to human emotions and imagination in his works (Bloomsbury, n.d.).

Philip Ridley is a prolific artist in literature and film as well as theatre. His novels for children and young adults include *Krindlekrax* and *Scribbleboy*. He is also known for films such as *The Krays* (1990), for which he has written the screenplay, and *The Reflecting Skin* (1990), which he has directed (Concord Theatricals, n.d.). These films are examples of Ridley's transfer of the dark and poetic style of his theatre to the language of cinema.

Philip Ridley is considered one of the pioneers of contemporary art, both in theatre and in other art forms. His plays offer a disturbing yet thought-provoking experience. Ridley has created a unique space of his own by dealing with the traumas

of modern man, his relationship with violence, and his struggle for survival in an impressive way.

Mercury Fur, written by Ridley in 2005, is a harsh and provocative play set in a dystopian world. In this world, drug addiction, violence, and corruption have become rampant. One form of the drug allows users to reexperience events from the past, which further blurs the perception of reality. It explores themes of violence, amnesia, trauma, and the darker aspects of human nature. The play is often noted for its disturbing content and frankness. The play takes place in a decaying and dangerous environment in London. The main characters, Elliot and Darren, work as party organisers in order to survive. These parties fulfil the party guests' darkest desires, often with violent consequences. As the play progresses, the characters' personal histories and moral dilemmas are revealed.

Mercury Fur deals with many deep and disturbing themes. One of them is memory and identity. The characters have lost their sense of reality with the erasure of their memories. Violence and morality are other themes that are constantly questioned throughout the play; the lengths to which people will go to survive are dramatized in a powerful way. In addition, the social breakdown is another important theme at the centre of the play, depicting a world that is completely detached from the ethical values of society.

Ridley questions violence and its human limits in this play. As they resort to inhumane acts to survive, the characters find themselves trapped between morality and the survival instinct. The play deals with the process of individuals coming to terms with their traumatic past. Returning to the past under the influence of drugs and reliving memories emphasises both the traumas of the characters and their search for escape. Ridley dramatizes the collapse of society, the loss of human values, and the reactions of individuals to this destruction. *Mercury Fur* reveals how people can give up their moral values for the sake of survival.

The story centres on Elliot and his brother Darren, who organise dark "parties" to survive. These parties provide the richest and most corrupt members of society with experiences that satisfy their desire for violence and perversion. The main action of the play unfolds during the preparation of a party, revealing how the organisation turns into a tragedy. The brotherly bond between Elliot and Darren is at the heart of the play.

In a world full of violence and chaos, Elliot's efforts to protect Darren and the emotional depth of this bond add a poignant dimension to the dark atmosphere of the play.

At the party, a young boy, specially selected for a 'guest' (client), is planned to be at the centre of a violent 'game.' Moral contradictions, personal tragedies, and past traumas gradually emerge as Elliot, Darren, and the other characters organise the party. Ridley questions violence and its human limits in this play. As they resort to inhumane acts to survive, the characters find themselves trapped between morality and the survival instinct. The play deals with the process of individuals coming to terms with their traumatic past. Returning to the past under the influence of drugs and reliving memories emphasises both the traumas of the characters and their search for escape. Ridley dramatizes the collapse of society, the loss of human values, and the reactions of individuals to this destruction. *Mercury Fur* reveals how people can give up their moral values for the sake of survival.

Elliot is the main character of the play. He is Darren's protector, and he is the leader in organising the parties. He is tough and pragmatic, but his love for his brother and his past traumas reveals the human side of his character. The brotherly bond between Elliot and Darren is at the heart of the play. In a world full of violence and chaos, Elliot's efforts to protect Darren and the emotional depth of this bond add a poignant dimension to the dark atmosphere of the play. The organisation of the parties shows Darren's pure nature, akin to that of a child, as a symbol of innocence. Lola is a transgender character and another member of the group. She struggles for existence in the midst of violence and chaos. The Party Guest, the main customer of the party in the play, represents the corrupt structure of the society and its violent desires with his perverted desires. With his innocence and helplessness, the Boy, the chosen young victim for the party, serves as the focal point of the play's moral conflict.

Mercury Fur has received both high praise and harsh criticism since its premiere. Although some critics considered the play excessive because of its violence and disturbing themes, many appreciated Ridley's courage and narrative power. When the play debuted, it sparked intense controversy. The theatre critic of "The Guardian" states about the play: "Almost unbearable to endure and yet so compelling you can't stop watching, Ridley's play is, for all its disturbing violence, fiercely moral and

tender" (Gardner, 2010). Some audiences and critics criticise it for its intense violence and disturbing scenes. Others, however, praised the play's powerful messages and Ridley's bold approach. Kate Reynolds is one of those who provide positive and praising comment on the play: "Good theatre makes you feel something, and in this case that something is discomfort" (Reynolds, 2019). In this sense, *Mercury Fur* is considered one of Ridley's most provocative plays in theatre history.

Mercury Fur is one of Philip Ridley's works that best reflects his bold, striking, and boundary-pushing style. The play's themes and handling not only disturb the audience but also prompt them to question their own moral boundaries. This play, one of the most enduring works left by Ridley for the world of theatre, is considered one of the most important examples of postmodern theatre.

3.3. "The list began after her first attempt": Duncan Macmillan and *Every Brilliant Thing*

Duncan Macmillan is an acclaimed modern scriptwriter who is famous for producing plays that are emotionally charged and for the acting mechanisms that reveal the characters' psyches (Brennan, 2023). Some of his themes are generally more abstract and deal with universal feelings as well as different social problems described from the first-person point of view. First, one can notice that Macmillan has a unique way of combining comedy with the more serious topics while writing his plots, therefore presenting the reader with thought-provoking stories that are easily accessible and understandable. He has penned several productions, like *Lungs* (2011), *People, Places, and Things* (2015), and *1984* (2013), a performance written jointly with Robert Icke. All these plays illustrate Macmillan's ability to engage with major issues in the modern world, like pollution, alcoholism, and sobriety, and the effects of totalism on the human mind.

Macmillan's plays often draw attention to social and political issues through individual experiences. Psychological depth, realistic dialogues, and characters revealing human weaknesses are the main features of his works. Themes such as the environmental crisis, addiction, mental health, and the struggle of individuals to exist in the modern world are frequently addressed in the author's plays. Macmillan stands out with his plays that both make the audience think and affect them emotionally. While making social criticism through individual experiences in his plays, he invites

the audience to an inner journey. In addition, he focuses on his stories and characters with minimal set design and simple staging preferences.

He has become one of the powerful representatives of modern theatre by adopting a realistic and naturalistic style in his plays. The author, who prefers minimalist stage designs, focuses the audience's attention on characters and dialogues. Especially in works such as *Every Brilliant Thing*, the fact that he offers an interactive theatre experience by making the audience a part of the play is an indicator of his innovative approach.

Macmillan's plays deal in depth with the emotional and psychological complexities of his characters. While dealing with important issues in the modern world, such as mental health, addiction, and environmental concerns, he presents these themes from a human perspective. He also devotes a significant deal of space to social criticism in his works, skilfully addressing the effects of modern society on individuals, environmental concerns, and the complexity of human nature. Therefore, Macmillan has an important place in contemporary drama with his works that strongly reflect human emotions and focus on social criticism. His plays not only make the audience think but also deeply affect them emotionally and leave a mark.

Every Brilliant Thing is among the most popular plays in Macmillan's portfolio, which he co-wrote with Jonny Donahoe. It was first performed in 2013 and praised for its unique script and depiction of the themes that revolve around mental disorders (Brennan, 2023). *Every Brilliant Thing* describes a man who decides to create a list of the amazing things in existence to help his mother, who suffers from depression and frequent suicide attempts.

The list has items that are as simple as "ice cream," "water fights," and "staying up past your bedtime." As the list continues to be filled, it becomes an embodiment of some of the things that afford solace and hope in entirely hopeless situations. It is acted out by one person on the stage, with the audience participating in the script. This interactive component helps to build additional communication and makes the experience unique as it emphasizes the aspect of collective suffering from mental health concerns. It engages the audience in the process of reading from the list, joining the play as small characters, and being part of the exploits of the protagonist. This participation of the spectators turns them into performers and erases the border,

traditionally known as the fourth wall, between the performer and the audience, thus creating an empathetic bond between them.

What distinguishes *Every Brilliant Thing* is its organizational design, which is the play's most significant feature. In this respect, the breaking of the fourth wall seen in the play helps in relaying the message and importance of people coming together in the healing process. The audience's participation in the narrative process emphasizes the narrative that mental health is a collective problem for everyone due to the way it impacts the group (News & Bay City, 2024). The play also deserves some praise for its realistic depiction of the protagonist's condition and clinical depression in a witty way. It is still a rather serious play as it reflects on the issues of depression and suicide, while at the same time remaining hopeful and sympathetic. A list of brilliant things is not a way to cure a mother's depression, but the main character employs it to find moments of happiness amid a difficult situation. Such an approach corresponds well with the modern perception of mental illness, where, in addition to medications and therapist appointments, it is possible to build up helpful psychological factors starting from small everyday actions.

Indeed, Macmillan applies his knowledge of psychology to the play, as can be gathered from his successful depiction of the internal world of the protagonist in considerable details. Thus, the list serves as identification for the protagonist and helps him manage his feelings of fear, sadness, or hopelessness. This brings out the focus on the therapeutic power of listing and narrative, which are viewed as psychological constructs by psychological theories associated with narration, particularly in cases of trauma.

One of the most striking features of the play is that it makes the audience an active participant. As the narrator tells his story, he brings some of the audience into the play, asking them to read the list or to portray other characters in the story (e.g., his father, his therapist, or a lover). This interaction allows the play to create an intimate and direct atmosphere and enables the audience to connect more deeply with the story.

Every Brilliant Thing offers a narrative full of humour and hope while dealing with a difficult topic such as depression. The play presents the fragility and beauty of life side by side. The metaphor of the list allows not only the narrator but also the

audience to reflect on the small but precious things in their own lives. This approach makes the play not only a story but also a tool for awareness and healing.

Critics praised the play for its innovative narrative and dramatic structure. With this work, Macmillan has once again demonstrated his ability to tackle difficult subjects in a humane and poignant way. The play is regarded as a modern masterpiece that uses the power of the theatre to give audiences a deep sense of empathy and remind them of the value of life.

In short, *Every Brilliant Thing* is a testimony to the playwriting prowess of Macmillan, coupled with his concern for social causes of societal prevalence through his works. Thus, the play can be seen as a truly humorous and captivating story about mental health and a heart-touching message to embrace happiness and establish inter-human relationships despite obstacles. To summarize, through the usage of the specific stage format and, therefore, the creation of a powerful and serious play, *Every Brilliant Thing* calls for people's constant and mindful focus on one's life meaning and value, as well as emphasizing the coordinating role of the community and the possibility of overcoming any difficulties with the help of mutual support and love.

4. REPRESENTATION OF CHILDHOOD TRAUMA IN THE SELECTED PLAYS THROUGH SIGMUND FREUD'S APPROACH

Sigmund Freud's psychoanalytic approach provides a powerful framework for understanding the impacts of childhood trauma on identity, personality, and behaviour in adulthood. Freud asserts that the unconscious stores childhood traumas, excluding them from the individual's conscious awareness. However, these repressed traumatic memories can manifest in adulthood as a range of psychological symptoms, behavioural disorders, and relationship problems. Additionally, he points that individuals often repress negative childhood experiences by pushing them into the unconscious, a process that can potentially lead to the emergence of psychological problems in the future.

In explaining the complexity that trauma creates in the psychological structure of the individual, Freud focuses particularly on unconscious processes. "We must presume rather that the psychical trauma - or more precisely the memory of the trauma - acts like a foreign body which long after its entry must continue to be regarded as an agent that is still at work" say Freud and Breurer (1955, p. 9). Here, they stress that trauma has a permanent and active effect on the human mind. The memory of the trauma remains in the unconscious like a 'foreign body' and influences the emotional and mental processes of the individual. This influence can manifest itself in the form of symptoms, dreams, and repetitive behaviours. Trauma is not merely a past event, but rather a dynamic conflict within the mind that requires resolution. Treatment implies bringing the trauma out of the unconscious and processing it at the conscious level.

Mental and emotional traumas experienced in childhood are often repressed because they cannot be processed at the conscious level and are repeated in the unconscious through symbolic expressions. This can have a profound effect on the identity, personality structure and behaviour of the individual in adulthood. It can be observed that Freud focuses on childhood trauma, arguing that these traumas remain in the individual's unconscious and influence their future behaviour and psychological state. "Traumatic memories are more robust than other typical memories, difficult to forget, and are not included in the activation by retrieval" (Mandal & Singh, 2022, p. 10257). As traumatic memories leave a much stronger and more resilient imprint on

an individual's mental structure than ordinary memories, conscious memory mechanisms process them differently, potentially contributing to the development of disorders like post-traumatic stress disorder.

If we relate this structure of trauma to childhood trauma, we should say that childhood is a period when the mental, emotional, and biological structure of the individual is not fully mature and is therefore more vulnerable to trauma. Traumatic events experienced during this period leave much deeper and more permanent traces in the mental structure; these traces lead to the processing of traumatic memories in a strong, forgetting-resistant, and different way. The nature of traumatic memories explains why the effects of these childhood traumas typically manifest in adulthood and are so profound. In this context, the characteristics of traumatic memories provide an important conceptual framework for understanding the long-term effects of childhood trauma.

Freud's understanding of trauma is based on the fact that excessive arousal, beyond the mental structure of the individual, leads to deep conflicts within them. Causes of trauma include sudden and intense emotional breakdown, sexual trauma, unconscious conflicts, and repression or suppression. While events such as sudden loss, violence, or war disable the individual's defence mechanisms, childhood sexual trauma, according to Freud, is a major cause of neurosis. Additionally, conflicts arising from an individual's unconscious desires and fears can also lead to traumatic effects. Freud emphasizes that trauma stems not only from external events but also from the individual's internal conflicts.

Childhood trauma plays a crucial role in the mental and emotional development of an individual, as the experiences of this period are among the basic elements that shape their psychological structure. A person's general health may be negatively impacted by childhood trauma, which manifests itself in both psychological and physiological ways. While historically childhood trauma has been associated with extremely violent, injurious behaviour towards children, often resulting in physical harm, it is important to recognise that many traumas to which children are exposed are often neither life-threatening (e.g. sexual abuse) nor isolated but they can be repeated and associated with other forms of danger (e.g. children exposed to chronic sexual abuse and also witnessing domestic violence against their mothers) (Güler & Yılmaz,

2021, pp. 1-3). Heart disease, diabetes, and autoimmune illnesses are just a few examples of the many physical problems that may arise as a result of trauma's physiological effects on the body. Furthermore, attachment problems may develop because of traumatic events in childhood, which in turn impairs an individual's capacity to establish trustworthy connections as an adult. To fully grasp how trauma affects a person's life and how a healthy sense of self develops, it is essential to understand these long-term impacts.

The shock the individual experiences initiates the process of trauma formation. The sudden disruption of the individual's mental equilibrium by the traumatic event causes their defence mechanisms to become inadequate. As a result, the individual has difficulty making sense of the psychological impact of the event and pushes the traumatic experience into the unconscious. Freud defines this situation as 'repression' (Cherry, 2024). This repressed traumatic content causes a split in the individual's mind and creates a disconnection between the past and the present. The trauma can cause psychological fragmentation that disorganizes the individual's psychic energy and disrupts normal mental functioning.

Traumatic events persist in the unconscious, continuing to influence the individual's life. Freud explains this process with the concept of repetition compulsion. Repressed trauma occurs when an individual relives similar events in their life or unconsciously repeats traumatic situations. Repressed trauma manifests in a variety of ways, including neuroses, dreams, symptoms, and anxiety (Van der Kolk, 1989, pp. 389-411). According to Freud, dreams and neurotic symptoms carry the unconscious traces of repressed trauma, which manifest themselves indirectly. Anxiety and psychosomatic disorders are also effects of trauma; unconsciously repressed events can create a constant state of tension and cause further suffering for the individual's life.

Freud's approach to childhood trauma is comprehensive in terms of its nature and its impact on the individual's development. Freud suggests that childhood traumas occur at critical periods in the individual's mental development and can cause deviations in the stages of sexual development. "Freud thought that all hysterical symptoms were caused by childhood sexual "abuse or molestation" which left unconscious memories; and later during adolescence when exposed to situations that

reminiscent the original trauma, those memories were activated" (Bulut, 2019, p. 1). This may be associated with the Oedipus Complex because repressed sexual conflicts and desires in childhood are stored in the unconscious and may be reactivated when similar situations are encountered in adolescence. In the Oedipus Complex, the child represses the attraction to the parent of the opposite sex and the competition against the parent of the same sex. Sexual development during puberty can trigger these repressed conflicts and lead to neurotic symptoms. According to Freud, this process explains the resurfacing of repressed traumatic memories from the unconscious. As this concept is a conflict stemming from the suppression of unconscious sexual desires towards parents during childhood, can impact the individual's future mental state. For Freud, although repression helps remove traumatic events from an individual's mind, these traumas resurface in adulthood in the form of neurotic symptoms.

As a result, Freud's treatment methods aim to bring traumas from the unconscious to the conscious level, allowing the individual to make sense of them and begin to process them. Through techniques like free association and dream analysis, we can uncover repressed traumatic memories and address the underlying psychological symptoms that stem from an individual's past experiences. According to Freud, the traces left by trauma can manifest themselves repeatedly throughout an individual's life, making it imperative to understand and resolve the effects of repressing traumatic events.

Within this framework, fundamental concepts for understanding the Freudian approach to trauma are repression, repetition, and defence mechanisms. These concepts not only explain the ways in which individuals cope with traumatic experiences but also provide a deep understanding of how these processes are processed at an unconscious level. These theoretical foundations of Freud form the cornerstones of modern psychology for understanding and treating the lasting effects of trauma on the individual psyche.

4.1. Repression and the Unconscious

In Freud's psychoanalytic theory, the concepts of repression and the unconscious play a fundamental role in understanding the mental processes and internal conflicts of the individual. These two concepts are crucial in maintaining the mental balance of the individual and in explaining the formation of psychological symptoms. According

to Freud, repression is a dynamic process that forms the basis of the unconscious and has a central place in the functioning of the mental structure. He also states that

> the repressed is the prototype of the unconscious for us. We see, however, that we have two kinds of unconscious – the one which is latent but capable of becoming conscious, and the one which is repressed, and which is not, in itself and without more ado, capable of becoming conscious (Freud, 1960, p. 5).

Here, Freud divides the concept of the unconscious into two: the latent unconscious, which can become conscious, and the repressed unconscious, which cannot directly reach the level of consciousness. We see the repressed as the basic example of the unconscious, but it cannot spontaneously become conscious and requires special means to bring it to light. This distinction is important for understanding the different levels of mental processes.

The mechanism of repression shifts disturbing or unacceptable thoughts, feelings, desires, and memories from the conscious level into the unconscious. The individual's ego uses this process to protect itself, preventing content that threatens their emotional peace from entering their consciousness. For instance, the ego may repress and push sexual or aggressive impulses that defy social norms into the unconscious. Repression also manifests in a person's inability to recall a traumatic event. Despite the removal of the repressed content from consciousness, it may still manifest indirectly through dreams or symptoms. In this context, there is a direct connection between Freud's concept of repression and Jung's ideas and they can be explained together:

> This kind of forgetfulness was called repression and is the normal mechanism by which nature protects the individual from such painful feelings as are caused by unpleasant and unacceptable experiences and thoughts, the recognition of his egoistic nature, and the often quite unbearable conflict of his weaknesses with his feelings of idealism (Jung, 1946, p. xiv).

Jung describes repression as nature's way of protecting the individual and is specifically concerned with the conflict between the individual's egoistic nature, or ideals and weaknesses. This is consistent with Freud's idea that repression is a defence against content that threatens individuals. However, Jung proposes a broader perspective, linking repression not only to trauma but also to the individual's moral and emotional contradictions. Bringing these two approaches together, we see repression as a critical mechanism for addressing both traumatic experiences, as Freud suggests, and conflicts between the individual's self and social and moral norms, as

Jung suggests. Freud divides the concept of the unconscious into two: the latent unconscious, which can become conscious, and the repressed unconscious, which cannot directly reach the level of consciousness. We see the repressed as the basic example of the unconscious, but it cannot spontaneously become conscious and requires special means to bring it to light. This distinction is important for understanding the different levels of mental processes.

By positioning the concept of the unconscious as a fundamental element of his psychodynamic theory, Freud offers a profound perspective for understanding the relationship of the unconscious to consciousness and the nature of the human mind:

> The unconscious is the larger circle which includes within itself the smaller circle of the conscious; everything conscious has its preliminary step in the unconscious, whereas the unconscious may stop with this step and still claim full value as a psychic activity. Properly speaking, the unconscious is the real psychic; its inner nature is just as unknown to us as the reality of the external world, and it is just as imperfectly reported to us through the data of consciousness as is the external world through the indications of our sensory organs (Freud, 2007, p. 119).

Freud defines the unconscious as a broader circle that encompasses consciousness, even as he places it at the core and central to mental life. Even though he implies that every conscious experience first passes through a stage in the unconscious, he asserts that the unconscious has value as a comprehensive psychic activity, even if it does not reach the level of consciousness. He contends that the unconscious is the fundamental component of mental processes, and that man cannot know the inner nature of these processes; consciousness only indirectly perceives the unconscious, just as our senses only partially and imperfectly reflect the outside world. According to this viewpoint, the unconscious is a rich psychological reality that exists outside of conscious awareness and highlights the complexity of the human mind.

The unconscious represents an area of mental processes of which the individual is unaware, but that influences his or her thoughts, feelings, and behaviour. The unconscious contains unacknowledged elements such as desires, impulses, repressed memories, and traumas. While direct access to these contents is impossible, dreams, Freudian slips, and free association can reveal them indirectly (Nickerson, 2024). These are windows into the subconscious, discussing how people's hidden secrets may

occasionally come to light. The functioning of the unconscious is an important factor in shaping the mental and emotional state of the individual.

The relationship between repression and the unconscious is central to Freud's theory. Repression pushes unacceptable or threatening content into the unconscious, storing it as a 'repository'. For instance, the unconscious may repress a childhood trauma, potentially influencing the individual's behaviour and mental state in ways they are unaware of. However, this process of repression is dynamic and ongoing. A constant effort is required to prevent the repressed contents from coming to the level of consciousness, and these contents may emerge indirectly, for example, through phobias or neurotic symptoms.

Freud's mental topography model divides the mind into three regions: conscious, preconscious, and unconscious. Repression refers to the pushing of conscious material into the unconscious. The unconscious hides this material and tries to express it in indirect ways. Repression is therefore not only the basic operating mechanism of the unconscious but also an important part of Freud's theory of defence mechanisms. In order to cope with threatening content, the individual unconsciously activates this mechanism (Boag, 2017, pp. 1-6).

Repression is seen as a basic defence mechanism between conscious and unconscious minds. According to Freud, individuals repress thoughts, desires, or memories that are difficult to accept or threatening, thereby transferring them to the unconscious. Traumatic experiences specifically activate this mechanism, aiding the individual in maintaining mental equilibrium. Freud observes in his early studies, particularly on hysteria, that the repression of traumatic experiences led to physical and psychological symptoms. He therefore argues that repressed traumas often resurface through dreams, symptoms, or verbal slips of the tongue. For instance, the unconscious may have repressed a childhood abuse incident, leading to its manifestation as anxiety, panic attacks, or physical symptoms in adulthood.

Many thinkers and therapists developed Freud's theory of repression in the years that followed. Carl Jung, while accepting the idea of repression, argues that the unconscious consists not only of individual experiences but also of a collective structure. Jung posits a connection between repressed traumas and the collective

unconscious motifs of human history. He accepts that collective unconscious is deeper than the personal unconscious:

> This deeper layer I call the collective unconscious. I have chosen the term "collective" because this part of the unconscious is not individual but universal; in contrast to the personal psyche, it has contents and modes of behaviour that are more or less the same everywhere and in all individuals. It is, in other words, identical in all men and thus constitutes a common psychic substrate of a suprapersonal nature which is present in every one of us (Jung, 2003, p. 2).

Jung explains that the reason for calling this layer 'collective' is that this unconscious is not specific to the individual but has a universal structure. From this perspective, Jung's concept of the collective unconscious provides a basis for understanding the universality of human nature and discovering a common human experience that transcends the individual psyche. This allows us to understand not only the inner world of the individual, but also the commonalities seen in the mythologies, religions, and cultural expressions of human societies.

Anna Freud, on the other hand, extends her father's theory of repression, creating the theory of defence mechanisms and defining repression as one of the methods of keeping traumas in the individual's unconscious under control. Repression often works in combination with other mechanisms and is part of a person's psychological defences. For example, mechanisms such as denial or rationalization may be used in combination with repression (Freud, 1937, pp. 22-35). In general, defence mechanisms enable an individual to cope with threatening impulses from the unconscious while helping to maintain social and internal balance. She asserts that the individual uses these mechanisms intensively during childhood, thereby influencing their developmental processes. Her work systematizes the understanding of defence mechanisms in psychoanalysis. Particularly in the fields of child psychology and developmental psychoanalysis, it provides a framework for examining the impact of defences on individuals' lives. Her more concrete and systematic treatment of defences' functioning, based on her father's theories, cements her place in the history of psychoanalysis.

Additionally, Jacques Lacan reinterprets Freud's theory of repression within the framework of language and symbolic structure, contending that language and symbols reveal repressed content despite its unconscious expression. Lacan sees repression as a kind of loss of meaning or linguistic disconnection between the individual's desire

and the unconscious. In particular, Lacan emphasizes that the unconscious process is based more on the structure of language than a biological phenomenon, as Freud suggests. With the statement "the unconscious, which tells the truth about truth, is structured like a language" (2006, p. 737), Lacan argues that the repressed material actually continues to exist in a linguistic form and is expressed through symbols.

> Speech which fluctuates in volume, changes to the narrative style and the subject's choice of words have also been named by Lacan as unconscious elements. This phenomenon is referred to as a *return of the repressed*. These phenomena are all significant moments portraying the reverse of the unconscious in language and they can be studied during the analytic process (Bilik et al., 2021, p. 6).

Repression occurs when the individual renders unacceptable impulses and desires inexpressible in order to conform to the social and linguistic order (the symbolic order). However, this material persists in the unconscious and manifests as linguistic errors, dreams, or neurotic symptoms. According to Lacan, the repressed tends to constantly return to the limits of language and the symbolic system, but this return is always in an incomplete or distorted form. The result is that the individual is unable to express himself fully and continues to live with a sense of incompleteness.

Modern psychology and neuroscience have examined the concept of repression from new perspectives. In particular, researchers such as Bessel van der Kolk have explored the repression of trauma in the unconscious through the functioning of the brain under stress and the neural effects of it. Modern neuroscience studies have sought to explain how the unconscious storage of trauma shapes the mental and emotional functioning of the individual. Modern scientific studies support and enrich Freud's theory of repression, which remains one of the cornerstones of psychoanalysis.

Additionally, there is a connection between the concepts of repression and the unconscious, and narrating trauma because they both offer a crucial context for understanding how traumatic experiences impact an individual's mental and psychological structure: Narrative trauma aims to express repressed content by moving it from the unconscious to the conscious, thus enabling the individual to recover from the effects of the trauma. Contemporary trauma theorists, notably Cathy Caruth, see the narratability of trauma as an important step in the individual's healing process. Caruth posits that trauma, by its inherent nature, is a challenging experience to articulate, necessitating indirect expression of traumatic events (it will be detailed in

the following chapter). Freud's theory that dreams or symptoms express repressed content aligns with this perspective.

The link between Freud's theory of repression and the narrative of trauma is particularly striking in the treatment of traumatic experiences in art and literature. We can see trauma narratives as a tool to reveal repressed experiences. In this context, the indirect expressions, symbols, and fragile narrative structures often found in trauma narratives confirm Freud's theory of repression. As a result, while explaining the effect of repression on the mental processes of traumatic experiences, we can say that trauma narrative provides a way of mitigating the effects of these experiences on the individual by expressing them.

Consequently, in Freud's theory, repression appears as a fundamental process in the formation of the unconscious and in understanding the psychological dynamics of the individual. While the removal of traumatic experiences from consciousness and their subsequent repression into the unconscious serve to maintain the psychological balance of the individual, it also causes these contents to manifest in indirect ways, such as dreams, symptoms, and verbal errors. This concept, which is the cornerstone of psychoanalysis, continues to resonate in modern trauma studies. However, psychoanalytic theory and contemporary British drama both demonstrate the influence of repression and the unconscious along with narrating trauma theory. Martin McDonagh's *The Pillowman*, Philip Ridley's *Mercury Fur*, and Duncan Macmillan's *Every Brilliant Thing*, among many others, explore these concepts in a dramatic context, examining the traces left by the repression of childhood trauma in the psychic worlds of individuals and the ways in which these traumas find indirect expression.

To begin with, McDonagh's play *The Pillowman* deserves a special place in terms of Freud's concepts of repression and the unconscious. The play illustrates the dark sides of individuals and society, how trauma intertwines with creative processes, and how unconscious desires and repressed experiences can surface:

> **Katurian** I don't know if there's a word for that.
>
> **Tupolski** (...) Why would there be a linkage, your stories, you being taken here? It isn't a crime, you write a story.
>
> **Katurian** That's what I thought.
>
> **Tupolski** Given certain restrictions . . .

Katurian Of course.

Tupolski The security of the state, the security of the general whatever-you-call-it. I wouldn't even call them restrictions.

Katurian I wouldn't call them restrictions.

Tupolski I would call them guidelines.

Katurian Guidelines, yes.

Tupolski Given certain guidelines, the security of the whatever, it isn't a crime, you write a story.

Katurian That's what I thought. That's the whole thing (pp. 6,7).

Here, Tupolski's use of the word 'guidelines' instead of restrictions indicates that the authority is applying its method of suppressing individual creativity in an indirect and manipulative manner. On the other hand, Katurian appears to accept these guidelines and submits to the authority. Freud's theory of repression explains the pushing of disturbing thoughts or desires into the unconscious. However, here repression expands from the individual level to the societal level. The state creates an unconscious level of control by restricting the artist's creative freedom under the guise of security. The state suppresses the artist's potentially dangerous ideas, but Katurian refutes these accusations, asserting that his expressions are harmless. However, his stories consistently depict violence and trauma throughout the play, and we can interpret this as an expression of Katurian's unconscious sense of guilt.

Katurian's stories are a reflection of his unconscious traumas and repressed emotions. The play emphasises that these stories are not only individuals' creative expressions but can also have societal consequences. Although Katurian argues that his creative process is harmless, the violence and dark themes in his stories reveal the deep conflicts in his subconscious. Society perceives these stories as a threat, despite them providing him with a form of relief by processing his traumas. Therefore, he defends himself as it follows:

Katurian Listen, I don't understand what I'm doing here. I don't know what you want me to say. I don't have anything against anybody. Any Jews or you or anybody. I just write stories. That's all I do. That's my life. I stay in and I write stories. That's it (p. 14).

Here, the play raises questions about the unconscious responsibilities of the artist's creative process by illustrating how people perceive and interpret Katurian's stories without his awareness. His stories transcend beyond mere individual expression,

becoming a mirror reflecting the darker aspects of society. This situation sharply highlights the conflict between artistic freedom and social control. The play profoundly questions the individual and societal impacts of art by intertwining Katurian's defence of innocence with unconscious themes.

The next scene reveals the unconscious motivations behind Michal's childish behaviour and exposes the themes of unconscious trauma, guilt, and responsibility woven throughout the play. Michal's statements, combined with his lack of innocence and awareness, highlight his potential to unconsciously create a dangerous situation:

> **Michal** Whatever they do to me, I don't sign anything. No matter what they do to me, I don't sign anything. (Pause.) Can I sign your name?
>
> **Katurian** (smiling) Especially don't sign my name. Especially don't sign my name.
>
> **Michal** 'I killed a loada kids,' signed Katurian Katurian. Hah!
>
> **Katurian** You little shit . . .
>
> **Michal** 'And it was nothing to do with his brother, Michal, not even a bit,' signed Katurian Katurian. Hah!
>
> **Katurian** I'll beat the shit out of ya . . .
>
> **Michal** Don't… (p. 41)

Michal's expression of the crime of killing children as if it were a joke shows that he does not fully grasp the seriousness of the situation. According to Freud, repressed trauma in the unconscious seeps into behaviour without awareness. Since Michal grew up with his brother Katurian's stories, these dark tales may tend to repeat in his subconscious. We can interpret these humorous comments as the manifestation of deeply buried traumatic remnants.

Ariel, one of the interrogators, exhibits harsh aggressive behaviour and frequently resorts to physical violence, which indicates that he is trying to suppress the traumas he experienced in the past. Freud's idea that aggression can express repressed emotions underlies Ariel's use of violence to maintain his authority and demonstrate his power. Throughout the play, it is implied that Ariel has childhood traumas, although he cannot express it clearly himself, and we learn that he was abused by his father and therefore killed him by suffocating him with a pillow (pp. 81, 82). This trauma triggers his anger at acts of violence and murder against defenceless individuals, especially children. The trauma he suppresses comes to the surface through violence. Ariel's

frequent shouting at Katurian or Michal, his use of physical violence, and his uncontrollable outbursts of anger show that he is unable to cope with his own fragility on an unconscious level. What Ariel suppresses is not only his trauma but also his empathy and human emotions. This shows that his suppressed emotions have not completely disappeared; they have only been buried deep, meaning they have been repressed:

> **Ariel** *(pause)* I know all this isn't your fault. I know you didn't kill the children. I know you didn't want to kill your brother, and I know you killed your parents for all the right reasons, and I'm sorry for you, I'm really sorry for you, and I've never said that to anybody in custody before. But at the end of the day, I never liked your stories in the first fucking place. Y'know? (pp. 100, 101).

Ariel, due to the traumas in his past, has suppressed his feelings of empathy, trying to mask them with aggressive behaviour. However, in this scene, when he fully comprehends Katurian's story, the suppressed empathy surfaces. According to Freud's theory of repression, emotions pushed into the unconscious can manifest in different ways. Ariel's long-suppressed empathy emerges at this point as an emotional outburst. Understanding Katurian's experiences allows Ariel to confront his own repressed human emotions and accept them, even if only for a moment.

The stories of Katurian in *The Pillowman* are filled with symbolic narratives where the themes of guilt, justice, and revenge unconsciously take shape. These stories are a reflection of Katurian's repressed traumas and unconscious conflicts. The story "The Pillowman," which gives the play its name, exemplifies these themes most powerfully:

> (…) the Pillowman's job was very very sad, because the Pillowman's job was to get that child to kill themselves, and so avoid the years of pain that would just end up in the same place for them anyway: facing an oven, facing a shotgun, facing a lake (p. 44).

Throughout the play, the character of the Pillowman, who is central to the story, embodies Freud's concept of the death drive (Thanatos). The Pillowman encourages children to end their lives early in order to end their pain and suffering and provide them with peace. This situation is directly connected to Katurian's unconscious, particularly the way he processes the mercy killing he commits to end the abuse and suffering his brother Michal endures.

The Pillowman is a symbol of the ethical and psychological conflicts in Katurian's story. It represents the moral dilemmas and deep despair at the unconscious level. Saving children from a life full of suffering is presented as both a salvific act and a dark solution. Freud's concept of the death drive expresses the individual's search for peace and resolution in the unconscious. This drive manifests as a desire to end life or alleviate suffering, and the character of the Pillowman is a reflection of this drive within the context of the story.

Overall, Katurian's story is not only an expression of his individual traumas; it also deeply questions how ethical responsibility, creative freedom, and unconscious desires intersect with societal perceptions. *The Pillowman* examines the workings of repression and the unconscious on both individual and societal levels. Katurian's stories express the conflicts created in the unconscious by repressed traumas, while the totalitarian regime tries to control individuals by suppressing disturbing truths. Freud's concepts of repression and the unconscious provide a strong framework for understanding the psychological and philosophical foundations of the play.

The second play to be analysed within the context of repression and the unconscious is Philip Ridley's *Mercury Fur*. The butterflies in the play can be directly associated with Freud's theory of repression. Butterflies function as a mechanism that brings the characters' traumas and unacceptable desires from the unconscious to the surface. Repression is the act of pushing painful or socially unacceptable experiences into the unconscious, where they manifest in various forms, often symbolically. The use of butterflies is a physical manifestation of this process. The characters experience their suppressed desires or traumas in the form of intense dreams and hallucinations when they consume butterflies. Darren's dream about the Kennedy's assassination perfectly illustrates this situation:

Elliot No more butterflies behind me back. You *swore*!

Darren I'm sorry, I'm sorry. Jesus!

Elliot What butterfly was it?

Darren Oh … one of the new ones.

Elliot *What* new one? … Darren!

Darren I'm trying to remember!

Elliot What *colour* was it, for fuck's sake?

Darren Green! No. Gold with blue flecks. Or was it red?

Elliot What did it *do* to ya?

Darren Famous people … political leaders … killing ‘em.

Elliot Assassination. You ate a red with silver stripes (p. 125).

This hallucination reflects the elements of violence in Darren’s subconscious and his escape from reality. People use butterflies to repress guilt and violence. At the same time, the widespread use of butterflies represents a collective effort by society to suppress the horror it generally experiences. Butterflies allow individuals and society to sever their ties with reality. According to Freud, when repressed contents begin to surface uncontrollably, an individual’s functionality can be disrupted, and butterflies accelerate this process. Elliot’s reaction to Darren reveals the fear that this loss of control will harm his brother.

Lola’s characterisation in *Mercury Fur* reflects Freud’s theory of repression as well. Lola, while trying to survive by repressing the traumas and identity conflicts she experiences in the past, deeply reflects on the effects of this repression on her behaviours and relationships. She is a figure caught between repressed desires, identity anxieties, and the collapse of societal norms. Parties, for Lola, represent not only physical violence and exploitation but also an environment that is morally and psychologically unbearable.

In this context, the following statement is noteworthy: “I don’t want the Party Piece too awake. I don’t want the Party Piece talking to me” (p. 182). This sentence shows that Lola does not want to confront the content of the party because this situation could bring out the repressed emotions and traumas. According to Freud’s theory of repression, the individual avoids elements that cause discomfort in the unconscious and develops defence mechanisms by avoiding confrontation with them.

Lola’s refusal to attend the party is a result of the deep mark left by the traumas ahe experienced in the past on her subconscious:

Lola I can’t stay, Ell. Please.

Elliot It’ll be at the end of the corridor, Lol. Naz’s flat.

Lola I can’t …

Elliot You won’t see or hear anything.

(…)

Party Guest What's the point in doing it half fucking cocked, eh? No pun intended. Ha! Might never have the fucking chance again the way things are going. This is my fucking moment, man! I deserve it. (…)

Lola Get me out of here – Naz! Naz! (p. 229).

In light of Freud's theories, this situation can be interpreted as an attempt to prevent traumatic memories or unacceptable desires from surfacing to the conscious level. Lola's desire to flee the party stems from her unconscious attempt to suppress the intense feelings of guilt, fear, and disgust she encounters. The chaotic atmosphere of the party and the party guest's violent enthusiasm trigger the suppressed fears in Lola, leading her to a panic-level escape response. We can consider this a direct or indirect revelation of repressed emotions. While Lola engages in an intense struggle to resist such impulses, the Party Guest openly expresses hidden desires for violence and power in their subconscious. Freud asserts that confronting repressed impulses causes a strong sense of discomfort in an individual. In this context, Lola's desire to distance herself from this environment can be seen as an effort to protect the human values and emotions she has suppressed.

Freud's repression theory can be used to look at how Spinx uses threats to control other characters and how to understand how power relationships affect people's minds and how unconscious fears are stirred up. Spinx structures his threats by targeting the deepest fears of the other characters and manipulates them in this way. According to Freud, intense emotions like fear create a strong impact on an individual's unconscious and can control their behaviour. The method of intimidation embodied by the Sphinx's threat of physical violence forces the other characters to obey by triggering their survival instinct.

During the party, things do not go well, and Naz becomes the new party piece. Elliot, Darren, and Lola objects to this situation, and a conflict based on a power struggle within the group begins. Spinx's violent reaction is an expression of the fear of losing control that arises in response to the questioning of his authority:

Naz … Am I dead?

Spinx Not yet, ya ain't!

Pulls gun.

Elliot Spinx! It's over. There's no point.

Lola (*at* **Spinx**) What you gonna do? Kill us all?

Spinx I will. I'll blow ya fucking head off ! All of ya! You bunch of ungrateful cunts! Starting with you –

Puts gun to **Elliot***'s head.*

Darren *makes a grab for* **Spinx***'s gun.*

Elliot Darren, don't! (p. 258).

This scene showcases Spinx's effort to rebuild his authority and the reactions of the other characters against the pressure. Spinx expresses his unconscious fears stemming from the loss of control with repressed anger, while Elliot and Lola resist with logic and resilience. Darren, on the other hand, expresses his repressed anger through a physical rebellion. The conflict reveals the psychological effects of oppressive authorities on individuals and how these dynamics come to light during moments of confrontation.

When it comes to the play by Duncan Macmillan*, Every Brilliant Thing*, the narrator's coping mechanisms, such as creating the 'brilliant things' list, reflect an attempt to confront and counteract repressed feelings about their mother's depression and suicide attempts in it. The narrator's reactions to the childhood traumas shaped by his mother's suicide attempts and depression clearly reflect Freud's concepts of repression and the unconscious. Instead of directly expressing the pain and disappointment caused by his mother's behaviour, he suppresses these feelings and tries to create a positive childhood memory. The following sentence serves as an example of this:

> I don't want to make it sound like my mother was a monster or that my childhood was miserable because it wasn't. We had a piano in our kitchen. It wasn't a big kitchen but it was the warmest room in the house and we'd gather around it and sing soul songs. There's a Ray Charles song, 'Drown In My Own Tears' that she sang a lot. There's a moment halfway through that sends shivers down my spine. (p. 337).

Here, the narrator avoids depicting his mother negatively despite the traumatic events related to him. Instead, he focuses on the joyful memories they shared together (for example, moments when they played the piano and sang in the kitchen). This indicates the presence of repressed anger and sadness. According to Freud, such repressions can cause deep conflicts in the individual's unconscious. The narrator struggles to reconcile himself with his love for his mother and traumas.

In terms of the physical and emotional reflections of trauma, the narrator expresses the physical reactions they experienced following his mother's suicide attempts as follows:

> When something bad happens, your body feels it before your brain can know what's happening. It's a survival mechanism. The stress hormones cortisol and adrenalin flood your system. It feels like a trapdoor opening beneath you. Fight or flight or stand as still as you can (p. 328)

This explanation clarifies the defence mechanisms that operate at the unconscious level. The reason why the narrator's mind cannot process the trauma directly, it instinctively reacts to it. This is a direct result of repression: when emotional intensity does not reach the conscious level, it manifests through bodily reactions. Although the narrator does not fully understand these reactions, it is clear how the fear and stress they experienced have left deep marks in the unconscious.

The following passage clearly reveals the repressed nature of the narrator's emotional reaction to his mother's last suicide attempt and death. The way the event is recounted contains almost mechanical detailing – the neighbour's complaint, the police intervention, and technical details. However, the narrator's emotional response is completely absent or suppressed. According to Freud, such repressions occur when an individual cannot cope with the emotional impact of a traumatic event. The cold and distant transmission of this event is the narrator's unconscious attempt to avoid pain:

> I wasn't around for the last time. I was in Australia with work and when I got the call I was on the beach. Dad wasn't around either. A neighbour complained about the exhaust fumes and eventually the police cut through the garage door. Hosepipe through the driver-side window.
>
> That surprised me actually, because Mum hated driving. She had poor circulation and would always complain about her ankles on long journeys. They say that it's a masculine way to choose to die. But I don't know what that means.
>
> There was a pad and pencil on the passenger seat but she hadn't written anything (p. 367).

By clinging to the absurdity of the mother's death, the narrator may be trying to ease the pain. Such an approach, within the framework of Freud's defence mechanisms, is associated with humour or irony. Here, the narrator uses irony as an emotional buffer to make the mother's death more bearable. However, this irony underscores the narrator's internal conflict; the mother's choice to die from the very thing she

complained about throughout her life evokes both astonishment and deep sorrow in the narrator.

His mother's silent and incomplete farewell reveals the narrator's deep disappointment and emotional void. The absence of a farewell note and the lack of a clear explanation regarding the mother's death leave the narrator in a state of uncertainty. From Freud's perspective, this situation can be defined as a lack of closure or resolution. The absence of the note makes it difficult for the narrator to understand their mother's emotional state or the decision to die, and this deficiency can further deepen the narrator's unconscious conflicts.

4.2. Repetition Compulsion

Freud's concept of repetition compulsion refers to the unconscious human tendency to relive traumatic experiences or recreate them in life. Freud first recognizes this concept in his early work, but he systematically explores it in depth in *Beyond the Pleasure Principle* (1920). Freud posits that the repetition compulsion contradicts the pleasure principle and could potentially link to a deeper drive in human psychology, known as the death drive (Thanatos). Freud writes about this as follows: "The compulsion to repeat (...) seems to us more primitive, more elementary, more instinctual than the pleasure principle which it over-rides". (Freud, 2015, p. 17). This statement is an indication of Freud's belief that the compulsion to repeat is based on a more primitive and elementary impulse, beyond the pleasure principle. To him, the individual unconsciously relives painful experiences from the past. This can occur in the content of dreams as well as in ordinary behaviour. For example, an individual with childhood trauma may constantly relive damaging relationships.

Freud argues that the compulsion to repeat is particularly evident in traumatic experiences. Individuals exposed to trauma attempt to gain control by repeating the experience at an unconscious level because they cannot consciously make sense of the painful event they have experienced: "(…) the patient does not remember anything of what he has forgotten and repressed, but acts it out. He reproduces it not as a memory but as an action; he repeats it, without, of course, knowing that he is repeating it" (Freud, 1950, p. 150). Freud interprets this behaviour as the individual's attempt to relive and resolve the trauma. This situation is crucial for understanding both individual psychopathology and social trauma. For instance, we can view a community

experiencing post-war trauma, which expresses this experience through repetitive rituals or commemoration ceremonies, as an attempt to bring the traumatic experience under control.

Various theorists later expanded and analysed Freud's concept of repetition compulsion from different perspectives. For example, Lacan integrated Freud's concept into his theory and associated it with the concept of *jouissance*, which means "pleasure-in-pain" (Chiesa, 2023, p. 46). Lacan defines *jouissance* as an experience of pleasure beyond the pleasure principle, intertwined with pain, and discusses it in relation to ethics, desire, and prohibitions in his seminar. He underscores that jouissance encompasses pain, which contrasts with the pleasure principle, and is associated with an individual's endeavour to transcend this principle. At the same time, jouissance is associated with something that is restricted or forbidden by the law; on the one hand, the law sets limits by restricting jouissance, and on the other hand, this restriction feeds desire and causes the individual to desire what is forbidden (Lacan, 1988, pp. 165- 176). According to Lacan, the individual paradoxically derives pleasure by repeating painful experiences of the past. This pleasure becomes an element that constitutes the individual's identity, and therefore repetition becomes inevitable.

In addition, Caruth accepts the repetition of trauma not only as an effort to make sense of reality but also as a reality to understand the trauma itself and expresses this situation as follows: "Repetition, in other words, is not simply the attempt to grasp that one has almost died but, more fundamentally and enigmatically, the very attempt to claim one's own survival" (1996, p. 64). The concept of repetition here refers to the individual's attempt to understand and cope with a life-and-death experience. However, this is not only an attempt to make sense of having survived death but also an attempt to own and somehow make sense of the survival situation. Caruth suggests that the compulsion to repeat stems from the experience of trauma, which precedes language and manifests as a means of expressing this experience.

When it comes to Jean Laplanche, he deals with Freud's concept of the compulsion to repeat, particularly in his work *Life and Death in Psychoanalysis* (1970). He explains this concept as an attempt to externalize the unconscious contents of the individual by using the unconscious and the conflict between life and death. Specifically, he asserts that the death drive and repetition compulsion, which surpass

the pleasure principle, are associated with an individual's reenactment of traumatic experiences (1976, pp. 110-112). Re-evaluating Freud's death drive theory with modern psychoanalysis, he interprets repetition compulsion as the constant re-staging of unresolved meanings. For Laplanche, repetition is the individual's attempt to stage experiences in the external world instead of consciously remembering them.

There is a direct relationship between repetition compulsion and narrating trauma. This relationship centres on the processing, reliving, and making sense of traumatic experiences. Unconsciously processing trauma often results in an individual's need to relive it. In order to understand the intersection of these two concepts, it is necessary to first examine the connection between the compulsion to relive and the trauma, and then the process by which the trauma becomes narratable.

As Freud suggests, repetition compulsion refers to an individual's unconscious tendency to relive traumatic events. This repetition usually manifests itself in the form of behavioural reactions, dream content, or repetitive thoughts without a verbal expression or conscious narrative. Freud's argument on this point is that the unconscious level repeats experiences that the symbolic level cannot process. When the individual is unable to fully process and transform the trauma into a narrative, they attempt to re-experience it at an unconscious level.

Trauma narration, on the other hand, involves the process of expressing and making sense of the traumatic experience through language. Psychoanalytic and trauma theories generally explain the impact of trauma by the inability to fully process the event mentally and to integrate this unprocessed experience through narrative. At this point "literature offers space in which to negotiate the demands and impossibilities of narrating trauma (…)" (Still, 2018, p. 310) because narrativizing trauma can help the individual process this fragmented and disturbing experience in a less distorted and more manageable way. Narrative provides a structure that carries the mental and emotional burden of the trauma, which helps to comprehend and make sense of the trauma in a more holistic way.

Breaking the cycle of constant trauma repetition in the unconscious due to its inability to express is possible through the transition from repetition compulsion to narrative. Modern trauma theorists argue that the transformation of trauma into narrative can end this cycle. Cathy Caruth interprets the repetition of trauma as an

attempt to reassert an unspeakable event (1996, p. 61). According to Caruth, making the trauma narratable is a step towards breaking this cycle.

Similarly, Dominick LaCapra suggests that writing or verbalizing traumatic experiences can have transformative functions:

> The unconscious and the drives might be apprehended as active or generative absences that are ambivalent. They may not be recovered as if they were losses or lacks and made fully present to consciousness. Rather, they may be best construed as destructive and enabling absences – potentiating and nihilating forces – which are recurrently displaced. They create gaps or vortices in existence which both threaten to consume the self or others and may be sources of activity, even sublimity or elation and jowissance. In this sense, the most telling, disorienting instance or effect of the so-called death drive is in the endlessly compulsive repetition of traumatic scenes – scenes in which the distinction between absence and loss, as well as between structural and historical trauma, threatens to be obliterated. Moreover, the status of one's own – in contrast to another's – death and of the unconscious as absences may be a reason why Freud believed one could never accept one's own death on an unconscious level. Such an acceptance might not make any sense, since nothing – no ego – could do the accepting (2001, p. 58).

Lacapra states that repetition has both a destructive and a creative function; traumas blur the distinction between loss and absence, leading the individual to re-experience these traumas without realising it. According to Freud, repetition compulsion is the unconscious' constant repetition of past traumatic events. Lacapra emphasises that this process is a result of the untold repetition of traumas and that trauma is both destructive and potentially a force that creates new meanings. Freud's death drive also explains that this repetition has a destructive and creative nature; it is associated not only with the urge to destroy life but also with the urge to repeat and restart it. In this context, repetition is an endeavour not to accept losses and absences but to continually rework them. This process is an attempt to make sense of and control the tendency to relive the trauma through narrative. Thus, the trauma becomes not just a repetition but a meaningful narrative, allowing the individual to confront it.

Eventually, Freud's concept of repetition compulsion, as one of the cornerstones of psychoanalytic theory, has provided an important reference point for modern trauma theory. While this concept expresses the individual's effort to make sense of past traumatic experiences by repeating them at the unconscious level, expressing trauma through narrative is a way to break this cycle of repetition and to make sense of trauma consciously. of repetition compulsion and narrating trauma. Despite their

interconnectedness, repetition compulsion and narrating trauma serve distinct functions. As processes, they play a critical role in understanding individual psychopathology as well as in resolving social and historical traumas.

Contemporary British drama offers a rich ground for examining the relationship between these two processes in dramatic and literary contexts. For example, McDonagh's *The Pillowman* explores the effects of childhood trauma on the individual through recurrent narratives, while Ridley's *Mercury Fur* explores the devastating effects of trauma on the individual and the community in a dystopian world. Macmillan's *Every Brilliant Thing*, on the other hand, brings the emotional traumas experienced by the individual and the repetition of these traumas to the stage with a warm and humane tone. These works stand out as powerful resources for understanding the dynamic between the tendency of trauma to recur and the process of making sense of it through narrative.

In *The Pillowman*, we can link Katurian's urge to write stories to Freud's concept of the compulsion to repeat. According to Freud, although an individual may consciously try to forget traumatic events experienced in the past, he or she may have an unconscious tendency to relive them. This process is an expression of unresolved conflicts and the individual's attempt to control them. For Katurian, storytelling becomes a means of coping with his traumas and surviving; however, this storytelling is unconscious compulsion in the sense that he reflects his trauma by means of stories and narration inevitably. Instead of bringing his past experiences directly to the surface, he reconstructs them and weaves them into his stories:

> **Katurian** They're going to destroy everything now. They're going to destroy us, they're going to destroy my stories. They're going to destroy everything.
>
> **Michal** Well, I think it's us we should be worrying about,
>
> **Katurian**, not your stories.
>
> **Katurian** Oh yeah?
>
> **Michal** Yeah. They're just paper.
>
> **Katurian** (pause) They're just what?
>
> **Michal** They're just paper.
>
> *Katurian thuds Michal's bead down once against the stone floor. Michal, stunned by the idea of it rather than the pain, feels his bleeding head.*

> **Katurian** If they came to me right now and said, 'We're going to burn two out of the three of you - you, your brother, or your stories,' I'd have them burn you first, I'd have them burn me second, and I'd have it be the stories they saved (p. 53).

Katurian's stories are not only a form of creative expression but also a fundamental part of his identity and existence. Michal's statement, "They're just paper" questions the value of Katurian's stories and reduces them to mere material objects. For Katurian, however, these stories are a reflection of his past traumas, his struggle for survival, and his repressed conflicts. The destruction of his stories means the loss of his existential meaning, a situation that demonstrates the dominant role that art and creativity can play in human relationships and how it can create a conflict between an individual's identity and his loved ones.

Katurian sees his stories as entities that have value beyond his physical existence. Katurian's devotion to stories can also be associated with Freud's tension between the death drive (Thanatos) and the life drive (Eros). His willingness to sacrifice his own life and that of his brother shows that he sees the continuation of the existence of his stories as a kind of quest for immortality. This shows that the stories have a spiritual value for him that transcends the meaning of life.

In terms of Freud's concept of repetition compulsion, Katurian's family strikingly exemplifies the cyclical nature of trauma and its recurring effects. The parents physically torture Michal under the guise of an artistic experiment, while Katurian is mentally traumatized. This situation leaves deep scars in the lives of the two siblings and causes Katurian to write dark, violent stories that symbolise their trauma. Upon learning what his parents have done to Michal, Katurian kills them by suffocating them with a pillow. This act shows that Katurian reenacts his trauma in a different way and, whether intentionally or not, continues the cycle of violence. For him, storytelling and being a parent killer are, on an unconscious level, a repetition of trauma.

Michal, on the other hand, has been traumatised and developed mental disorders due to the physical violence he witnesses and the abuse he endures for years. As a result of this trauma, he commits child murders by reflecting Katurian's stories into real life. Michal's behaviour is a manifestation of an unconscious compulsion to repeat; unable to comprehend his trauma, he recreates the violence from Katurian's

stories in real life. After learning of his brother's actions, Katurian is forced to confront the effects of his stories on Michal, and this situation leads him to feel deep guilt. Katurian, under the weight of this guilt, and his mercy for his brother, kills his brother, once again fulfilling his obligation. This time, the repetition of trauma creates a cycle in his life as a brother killer. In this context, Katurian and his family compellingly illustrate the transmission of trauma from one individual to another and the perpetuation of cycles of repeated violence. This situation, which can be explained by Freud's theory of compulsion to repeat, dramatically reveals how individual traumas are transmitted from generation to generation through family dynamics.

One last example from the play is the story of "The Pillowman" in the context of repetition compulsion: The Pillowman, by showing children that their lives will be filled with pain and hardships, offers them a choice of whether to live this life or not. However, this choice points to the inevitability of trauma and an individual's need to make sense of it. The choice presented to the children creates a paradox because even if they know their lives will be filled with suffering, most continue to choose this path. This situation highlights that pain is a fundamental part of human existence, and the individual must repeatedly confront this trauma.

The story of "The Pillowman" dramatically represents Freud's concept of repetition compulsion. The desire to relive trauma and find a solution limits an individual's freedom of choice and emphasises that pain is an inevitable cycle. The cyclical structure of the story brings a dark interpretation to the human condition: It is impossible to completely escape pain and trauma. Although the Pillowman offers children a choice, this choice often becomes meaningless in the face of life's inevitable pains. This situation reveals the individual's effort to create meaning by confronting pain.

At the end of the story, the Pillowman returns to his childhood, and the Pillowboy chooses death. This choice ends his own cycle. The death of the Pillowboy represents the end of trauma and repetition at the individual level, thus allowing pain and cyclicality to give way to an ultimate resolution. However, even while dying, he experiences repetition compulsion because the last thing he hears is children's screams:

> The last thing he heard was the screams of the hundred thousand children he'd helped to commit suicide coming back to life and going on to lead the cold, wretched lives that were destined to them because he hadn't been around to prevent them, right on up to the screams of their sad self-inflicted deaths, which this time, of course, would be conducted entirely alone (p. 47).

To conclude, this narrative offers a powerful metaphor not only for the individual but also for the human condition's struggle to confront and overcome trauma.

Not unlike the characters of *The Pillowman*, those of *Mercury Fur* find themselves deeply enmeshed in recurring cycles of compulsion. This situation manifests itself through rituals, hallucinations, and relationships. These repetitive actions and fantasies underscore the play's deep exploration of themes of trauma, survival, and the inability to escape destructive cycles.

Freud's theory of the compulsion to repeat explains Darren's violent hallucinations after consuming the butterfly. Under the influence of the butterflies, Darren often dreams of events based on historical or violent occurrences. This situation reflects a tendency to revert to traumatic experiences that have accumulated in the subconscious and remain unprocessed:

> **Darren** I'm the Camelot girl. I'm in the car with Kennedy. I'm wearing this pink dress. The car is shiny black. I can feel the sun on my face and hear the crowds cheering. There's people everywhere. On both sides of the street. Leaning out of windows. And they're all screaming and waving flags. Then I hear this choking sound. I look at Kennedy. He's clutching his throat. I think he's swallowed his own spit or something. I lean towards him to help and his head goes – Kapow! (pp. 162,163).

Darren's hallucinations express not only the reliving of trauma but also the attempt to escape from it. Imagining a historical event like the Kennedy assassination allows him to hide his own traumas in the shadow of that event. However, this escape cannot prevent the trauma from resurfacing repeatedly and traps Darren in a cycle of violence.

The character of Duchess is a figure that deeply reflects Freud's concept of the repetition compulsion. Her songs, fragmented memories, and erratic behaviour cause her to constantly return to certain experiences, themes, and emotions in an effort to process the trauma that is accumulating in her unconscious. Especially her songs become a space where she both tries to find solace and inadvertently replays her trauma.

In the early stages of the play, Elliot and Darren recall their mother singing in their shared memories, which later reveals the truth: their mother is actually Duchess. However, due to the chaos that followed Duchess's beautiful memories, her songs have become not just a means of relaxation but also a cycle of trauma being repeated:

> **Duchess** I feel another song coming on.
>
> **Spinx** No, Duchess.
>
> **Duchess** But Papa, when I have a song bubbling inside I have to set it free.
>
> **Spinx** Why don't you tell Naz how ya started singing? (p. 217).

Even when Spinx or others try to stop her, Duchess continues to sing. This is an unconscious effort to soothe herself and regain control in her chaotic world. However, the "bubbling" (p. 217) of her songs indicates that she is inadequate in suppressing her traumatic memories. Often interrupted, her songs reveal a fragmented and directionless mindset:

> (*Singing*.) I love you so much …
>
> *Breaks off*.
>
> *Slight pause*.
>
> I love you so much I could …
>
> *Breaks off*.
>
> *Slight pause*.
>
> I love you so much I could climb every mountain …
>
> *The* **Duchess** *collapses in a fit* (p. 210).

This song starts with a hopeful beginning but suddenly cuts off. This situation reflects that Duchess's mind cannot sustain the illusion of happiness. Her physical collapse can be interpreted as the intense pressure created by her repressed trauma that has erupted uncontrollably.

Duchess's songs act as a conduit, bringing traumas and fantasies from the unconscious to the surface. Her fragmented melodies and stories reveal a mentality trapped in an endless cycle of repressed pains, memories, and escape attempts. These compelling repetitions highlight Duchess's psychological fragility and the play's in-depth examination of trauma and its persistent, unsettling effects.

In the following scene, Sphinx forces Elliot to confront his guilt by reminding him that he left his mother and brother Darren behind in the past when they were in

the hospital. This situation concretely reflects Freud's theory of repetition compulsion: Elliot, despite trying to suppress his traumatic past, has this painful memory revived in his unconscious, which guides his behaviour:

> **Spinx** Have ya forgotten? Eh? What you were like when I first saw ya? You were a fucking wreck! You shit yourself if someone slammed a door too hard.
>
> **Darren** He was ill. (…)
>
> **Spinx** Yeah! The hospital he run out of.
>
> **Darren** It was being attacked!
>
> **Spinx** You were there too, you stupid fuck. In bed. Helpless. Did big brov Elliot take you with him when he fucked off to safety?
>
> **Darren** I … I was in a different ward.
>
> **Spinx** No.
>
> **Elliot** Don't, Spinx! (…)
>
> **Spinx** Yes! And he – that cowardly cunt! – he panicked and forgot all about ya. (*At* **Elliot**.) Didn't ya? … *Didn't ya?*
>
> **Elliot** Yes. (…) (p. 250).

Continuing to bear the weight of leaving his mother and brother behind, Elliot tries to compensate for this guilt by taking on the role of a leader and protector. Throughout the play, his frequent impatience and critical attitude towards Darren are an indirect expression of the anger he feels towards himself subconsciously. The criticism Elliot directs at Darren is actually a reflection of the anger he feels towards the mistakes he made in the past.

The continuation of this scene reveals Spinx's manipulative leadership and control mechanism. Spinx reinforces his authority by highlighting the sacrifices he made in the past to ensure the group's survival. However, while these sacrifices are presented as a demand for gratitude, the underlying tone of threat and condescension in his words reveals that his leadership is fundamentally based on fear:

> **Spinx** And who went back for them? Eh? Who went back and saved this fucking halfwit and the Duchess? Me! That's who! The hospital was a fucking slaughterhouse. I was slipping in the fucking blood. Two times I went there. *Two!* And who looked after all of ya after that? Eh? Who got medical supplies and stuff? Who fed ya? Clothed ya? Gave ya somewhere to live? Who taught ya how to survive in this fucking hellhole? Come on! Tell me, you nigger, spic, Muslim, wop, Paki, Catholic cunt!
>
> **Elliot** You, Spinx.

> **Spinx** Do ya know what'll happen if we don't have this party? Do ya? We'll be stuck here! We'll be bombed! If we survive the bombs – not very likely – there'll be the soldiers. Do ya know what soldiers will do to the Duchess? Jesus Christ, what about Lola? You any idea what fun they'll have with someone like her? You wanna leave Lola for the soldiers? Eh? (pp. 250,251).

Obviously, Spinx tries to maintain unity and safety for the group by emphasising once again that they will not have a chance to survive. Thus, Spinx's oppressive leadership triggers the unconscious fears of both Elliot and the other characters, keeping them under control. Spinx creates a dependency relationship with the group members by making them feel that they owe their survival to him. By frequently reminding them of their moments before rescuing them, he implies that they can only maintain their safety under his leadership. Within the framework of Freud's theory of the compulsion to repeat, this behaviour can be interpreted as the transformation of past traumas into a control mechanism by bringing them back to the forefront. Spinx's approach aims not only to establish authority over the group but also to maintain his own leadership position.

Frequently bringing up past traumas, Spinx not only manipulates others but also suppresses his own inner conflicts in the process. The frustrated and dramatic tone he uses when recalling the horror, he experienced in the hospital shows that he too cannot escape the impact of trauma. Spinx, while turning these memories into a tool of power, continues to live under the shadow of trauma himself. He tries to cover his own fears and vulnerabilities through the pressure he exerts on others, which reveals how fragile his leadership is.

In *Every Brilliant Thing*, each return to the list the narrator makes as a child offers a chance to deal with past traumas, but it also carries the risk of reliving those traumas. The list is a defence mechanism for dealing with emotional difficulties. However, repeating the same behaviour in adulthood is an example of Freud's concept of the compulsion to repeat. We can evaluate this process as both therapeutic and pathological. Although the list serves as a means of salvation during times when he could not control his life, its constant repetition indicates that the narrator has not fully escaped the traces of the past:

> The list began after her first attempt. A list of everything brilliant about the world. Everything worth living for (p. 324). (…)

> And then, inside a box under my bed, underneath some sticker albums, sea shells and action figures, I found the list.
>
> I sat on the floor and I read it through.
>
> 1. Ice cream (p. 339) (…)
>
> I began leaving Post-It notes around the house, stuck to various things. On her mirror was:
>
> 575. Piglets.
>
> On the kettle:
>
> 674. Marlon Brando.
>
> And on her bed:
>
> 11. Bed (p. 340). (…)
>
> It was a lot of work. Several weeks of sleepless nights. Once I got to the end I kept going from where I'd left off.
>
> 826979. The fact that Beyonce is Gustav Mahler's eighth cousin, four times removed.
>
> I completed the list (p. 369).

Returning to the list symbolizes the narrator's struggle to cope with intense emotions, such as despair and anxiety. However, this action also carries the traces of unresolved traumas from the past: "So once I got to the end of the list I picked up a pen and continued where that little boy had left off" (p. 339). This is an attempt to reclaim the past self, but it also signifies a cycle trapped in trauma. Completing the list is the hope of breaking this cycle.

This repetition shows that the narrator continues to process childhood traumas in adulthood and that these traumas leave a deep mark on their identity. The list serves as both a means of salvation and a tool for him to find closure. The narrator tries to balance these two fundamental emotional states: the anxiety created by her mother's suicide attempts and the simultaneous experience of both hope and despair in the effort to find a meaningful reason to live by discovering the 'brilliant' things in the world.

We can relate the way traumatic events in the narrator's life repeat and the similarity these events create in his emotional responses to Freud's concept of the compulsion to repeat. The narrator experiences the same emotional and physical reaction (trapdoor feeling) in response to the traumatic events in their life. This situation arises from the continuous re-experiencing of trauma and the individual's inability to confront past painful events. During his mother's first suicide attempt, the

narrator experiences an intense emotional shock, which he describes as follows: “It feels like a trapdoor opening beneath you. Fight or flight or stand as still as you can” (p. 328). This is his first major response to a sense of uncontrolled danger. This childhood experience later recurs in similar situations.

In her mother’s second suicide attempt, the narrator experiences the same emotional reaction again. Unlike the first experience, this time the event allows him to realise the cyclical nature of trauma: “The same trapdoor feeling. Fight or flight. The same wordless drive to the hospital” (p. 338) indicates that trauma has become habitual and inevitable. The narrator experiences the same feeling during the separation from Sam, his wife. This shows that this reaction is triggered not only during overt traumatic events like her mother’s suicide attempts but also in other compelling situations such as emotional loss and fear of abandonment: “The trapdoor swinging open. Fight or flight or stay as still as you can” (p. 362). This demonstrates that trauma extends beyond specific events, evolving into a persistent emotional pattern in the narrator’s life.

4.3. Defence Mechanism

Freud’s psychoanalytic theory provides an important framework for understanding the unconscious conflicts in the human mind and the impact of these conflicts on individual behaviour. Originally developed to explain conflicts between the ego and the id, Freud’s theory of defence mechanisms describes how individuals use the unconscious to deal with these conflicts (Cramer, 2015, p. 525). His daughter, Anna Freud, later extensively analysed it in her book *The Ego and the Mechanisms of Defence* (1936).

According to this theory, defences are defined as psychological strategies that an individual develops against unconscious conflicts and traumas. Freud states that these mechanisms are ways that the ego uses to control the anxiety that arises and maintain the individual’s psychological balance. The ego activates defence mechanisms to deal with the intense emotional experiences that trauma creates. About this, we can give a direct example from Freud himself. An emotional experience such as “Anxiety is a reaction to a situation of danger. It is obviated by the ego’s doing something to avoid that situation or to withdraw from it” (Freud, 1949, p. 90). This quote from Freud helps us understand how defence mechanisms work. Defence

mechanisms are unconscious strategies that the ego uses to avoid threatening situations or fear. According to Freud, anxiety is a psychological response to a situation of danger. This danger may come from an external threat, the pressures of the superego, or the unacceptable desires of the id. In response to these threats, the ego tries to protect the individual's psychological balance by activating a defence mechanism.

Freud divides the human mind into three basic structures: id, ego, and superego. While the id represents basic and primitive impulses, the ego is the conscious structure that operates according to the principle of reality. The superego reflects moral judgements and social rules. The ego is responsible for balancing the impulses of the id with the demands of the superego (McLeod, 2024). However, when the individual has an intensely traumatic experience, the ego cannot consciously maintain this balance, and defence mechanisms come into play. These mechanisms help the individual to reduce the anxiety arising from the psychological conflicts while at the same time protecting the individual by covering up these conflicts.

Anna Freud creates ten major defence mechanisms, but the number of mechanisms has since been increased by later psychoanalysts (Bailey, 2023). One of the main defence mechanisms is repression. Repression prevents the individual from processing traumatic events or threatening thoughts at the conscious level by pushing them into the unconscious. Freud stresses that repression is the basis for other defence mechanisms:

> The hysterical type of ego defends itself from the painful perception which the criticisms of its super-ego threaten to produce in it by the same means that it uses to defend itself from an unendurable object-cathexis – by an act of repression (Freud, 1949 p. 75).

The repression mechanism defends the individual's psychological balance, but it only provides a temporary solution by pushing the problem into the unconscious, rather than addressing its root cause. The repressed thoughts or feelings remain unconscious and often express themselves indirectly through physical or behavioural changes, which explains the basic mechanism underlying hysterical symptoms. However, although suppression can reduce anxiety in the short term, in the long term it can lead to more complex and intractable psychological problems for the individual. For this reason, psychoanalytic therapy aims to bring repressed material to the surface of consciousness and confront the individual with this content. Therefore, the hysterical

ego resorts to repression as a protective mechanism against the pressures of the superego and overwhelming emotional attachments. While this process may temporarily alleviate the individual's distress, it could potentially lead to more severe psychological issues over time.

> A symptom is a sign of, and a substitute for, an instinctual gratification which has remained in abeyance; it is a consequence of the process of repression. Repression proceeds from the ego when the latter – it may be at the behest of the super-ego – refuses to associate itself with an instinctual cathexis which has been aroused in the id. The ego is able by means of repression to keep the idea which is the vehicle of the reprehensible impulse from becoming conscious. Analysis shows that the idea often persists as an unconscious formation (Freud, 1937, p. 20).

From the passage above by Anna Freud, we can understand that repression originates in the ego usually and usually acts on the instructions of the superego. In this process, the ego refuses to associate itself with an instinctive attachment (cathexis) arising in the id. Through repression, the ego can prevent the thought of an unacceptable impulse from reaching consciousness. However, analysis shows that this thought persists as an unconscious formation.

In addition to repression, another common defence mechanism is denial. In this case, the individual completely denies reality and pretends that the traumatic event never happened. This mechanism protects the individual by delaying acceptance of the painful reality. Anna Freud explains how an individual intensively uses the mechanism of denial to deal with objects of anxiety and how this increases over time and changes the individual's perception. The ego develops denial as a psychological defence mechanism, ignoring or perceiving threatening or anxiety-provoking situations differently, instead of confronting them directly:

> The habit of denial grew upon him, till he could no longer keep pace with his craving to transform anxiety objects into friendly beings who would either protect or obey him. He redoubled his efforts; the tendency to belittle all that terrified him increased (1937, p. 87).

However, this defensive mechanism is not a permanent solution. If denial becomes habitual, it can weaken the connection with reality and require more effort. The use of the word 'effort' in this passage suggests that this mechanism places an increasing burden on the individual. The denial mechanism may initially comfort the individual, but its continued use can lead to detachment from reality and more complex psychological problems. The tendency to minimize the objects of anxiety causes the

individual to avoid these problems rather than resolve them, and this can lead to more difficulties in the long term.

When it comes to another mechanism called projection, it occurs when an individual attributes their own unacceptable thoughts or feelings to others. This mechanism allows the individual to escape from the inner conflicts that bother them. “The advantage of doing this comes from the fact that the individual can protect himself against external dangers by fleeing from them and avoiding the perception of them, whereas it is useless to try to flee from dangers that arise from within” (Freud, 1949, pp. 86,87). So, projection allows the individual to cope with internal threats by externalising them and perceiving them as external dangers. This provides the individual with temporary protection and reduces anxiety. However, merely externalizing real problems without confronting them can have negative consequences for an individual’s relationships and psychological health in the long term. The emphasis in the passage draws attention to the fact that the individual cannot escape from inner conflicts and reveals how the mechanism of reflection can facilitate this avoidance.

Freud sees the mechanism of sublimation, whereby the individual expresses unacceptable impulses in a socially acceptable way, as a healthy defence:

> Sublimation can transform negative impulses into behaviors that are not only less damaging but sometimes productive in nature. (…) Freud considered sublimation a sign of maturity that allows people to behave in civilized and acceptable ways. This process can lead people to pursue activities that are better for their health, for instance, or to engage in behaviors that are positive, productive, and creative (Cherry, 2024).

For example, an individual who expresses violent impulses in a constructive activity such as sport has used the sublimation mechanism. On the other hand, regression occurs when an individual, under stress, regresses to an earlier stage of development and displays the behaviours associated with that phase.

Another mechanism acting out is when a person exhibits harmful behaviours in order to distract himself or herself from internal conflicts that cause stress or that he/she has difficulty resolving. Particularly in cases like conduct disorder, antisocial personality disorder, or oppositional defiant disorder, this mechanism is evident:

> As long as the ego continues to function freely or if it makes common cause with the id and simply carries out its behests, there is but little opportunity for

> endopsychic displacements and the bringing to bear of influence from without. Hence this third form of transference, which we call *acting,* is even more difficult for the analyst to deal with than the transference of the various modes of defence (1937, p. 24).

Acting out, as explained above by Anna Freud, is a defence mechanism in which the individual expresses his or her inner conflicts directly through behaviours instead of expressing them verbally or intellectually. In this process, the ego expresses unconscious desires by transforming them into actions without resisting the demands of the id. This mechanism is the individual's attempt to avoid conflict or anxiety, but because these behaviours are often indirect and open to interpretation, it can be challenging for the analyst to understand the individual's inner world. The individual attempts to act out superficially to resolve their anxieties or conflicts, evading the conscious process required to comprehend and confront these conflicts.

Avoidance is defined as "dismissing thoughts or feelings that are uncomfortable or keeping away from people, places, or situations associated with uncomfortable thoughts or feelings. This defence mechanism may be present in post-traumatic stress disorder, where one avoids the location of a traumatic motor vehicle accident or avoids driving completely" (Zanarini, et al. 2009, p. 118). This mechanism may reduce anxiety in the short term, but in the long term it prevents the individual from getting to the root of the problem and solving it. Avoidance refers to the individual's attempt to protect himself or herself by distancing themselves from the triggers associated with disturbing experiences rather than facing reality.

Additionally, Anna Freud states about avoidance as follows:

> The mechanism of avoidance is so primitive and natural and, moreover, so inseparably associated with the normal development of the ego that it is not easy, for purposes of theoretical discussion, to detach it from its usual context and to view it in isolation (1937, p. 94).

She emphasises that avoidance is a natural and fundamental defence mechanism that is unique to humans. Avoidance fosters ego development and reflects the survival instinct. Therefore, the avoidance mechanism cannot be treated as a theoretically isolated phenomenon but must be evaluated in the context of the entire developmental process and context of the individual. This primitive and universal nature of avoidance is a fundamental aspect of human psychology. However, when overused, it can limit the individual's ability to adapt and inhibit their emotional growth.

Overall, other thinkers who followed psychoanalytic theory developed Freud's approaches. In particular, Anna Freud, his daughter, elaborated on Freud's theory of defence mechanisms in her 1936 work *The Ego and the Mechanisms of Defence*, discussing how the developmental process shapes these mechanisms in childhood. Anna Freud notes that the defence mechanisms an individual uses can change depending on the type of trauma they experienced and their stage of development. For instance, in adulthood, more complex mechanisms, like sublimation, may replace common childhood mechanisms, like repression or avoidance.

Freud's theory of defence mechanisms is invaluable for understanding how individuals cope with traumatic experiences. These mechanisms help explain how unconscious conflicts unwittingly influence behaviour while maintaining an individual's psychological balance. The work of Freud and his followers, such as Anna Freud, on this subject demonstrates the deep insight that psychoanalysis offers into the unconscious of the individual.

Literary genres, particularly works from contemporary British drama such as *The Pillowman*, *Mercury Fur*, and *Every Brilliant Thing*, provide an opportunity to deeply analyse these mechanisms in the context of defence mechanisms. These plays expose psychology by emphasising childhood traumas and their persistent impact on adulthood.

In *The Pillowman*, Katurian exhibits a deep psychological defence mechanism through storytelling. Martin McDonagh's striking work shapes stories not only as a creative tool but also as a coping mechanism for Katurian's past traumas. He subconsciously reflects the traces of his family's psychological and physical abuse in his stories, even though he refrains from directly recalling these traumatic experiences. The violence and tragedy in these stories are actually an indirect expression of his repressed emotions. While repression prevents her from directly confronting her pain, the stories become symbols of these suppressed emotions.

Katurian's story writing process is also a sublimation mechanism through which he transforms his negative emotions into a socially acceptable form. He tries to achieve psychological balance by transforming his emotions, such as anger, fear, and guilt, into a dark but creative expression. We can see this process as an artistic reprocessing and

meaning making of a traumatic past. In a sense, the stories he writes are a way of expressing his inner turmoil, but they are placed within an aesthetic framework.

At the same time, Katurian reflects his own dark impulses and sense of helplessness through the characters in his stories. We can read the figures in his stories as metaphorical representations of his unconscious fears and guilt. This projection mechanism allows her to express these feelings on a different plane instead of confronting her traumas. However, he initially denies the real-world effects of his stories. In particular, he finds it difficult to accept the unintended consequences of his stories about his brother Michal. This denial is an indication of his attempt to protect himself.

Katurian's stories are, for him, both a way of escaping and a way of processing and reinterpreting his traumas. While he transforms the traces of his trauma into an art form through mechanisms such as suppression and sublimation, his stories are at the same time both a reflection of past pain and a search for a solution. These defence mechanisms allow us to deeply understand his character – both as an artist and as a victim.

On the other hand, the fact that Michal enacts the events in Katurian's stories into real-life child murders and blames Katurian, rather than himself, for the situation provides rich ground for understanding his psychological defences. Given Michal's traumatic childhood experiences and his mental state, we can say that several defence mechanisms come into play: The most important defence mechanism for understanding Michal's behaviour is projection. He attributes her dark and harmful impulses to Katurian. He sees herself as a victim of the stories, not as a practitioner of the evil they depict. Katurian's stories influence his actions, leading him to suppress his own guilt.

Michal's childhood traumas and mental state also activate the splitting mechanism. He often perceives the world and people as either 'good' or 'bad'. He sees Katurian as a figure he loves and trusts, yet he also believes that Katurian is the source of the violence in his stories. This division makes it easier for Michal to make sense of an emotionally complex world. Instead of taking responsibility for his own actions, he places this on Katurian, positioning himself as a passive victim. His mental state and childhood traumas shape this escape strategy. In short, Michal's defence

mechanisms are part of her way of protecting himself and processing his traumas. However, these mechanisms also weaken his connection to reality and prevent him from taking responsibility for his actions. This allows for a deeper understanding of both his individual tragedy and his complex relationship with Katurian.

In another play, *Mercury Fur*, Darren often tries to escape from reality by 'pretending' (e.g., imagining himself as a space explorer). This situation particularly points to the mechanisms of fantasy and dissociation. Instead of accepting the violent and cruel world around him, Darren positions himself in a different reality. In the space explorer game, he imagines that he is in control of his life and is an independent figure from the chaotic world. This is a defence strategy that reduces the effects of the trauma and helps him maintain his mental balance.

This type of daydreaming behaviour is a way for Darren to relieve the weight of the emotional pressure he is experiencing and distance himself from feelings of hopelessness. However, this defence also weakens his connection to reality, which can make it difficult for him to develop rational responses to danger. The creation of an imaginary world makes Darren's horrible reality less threatening, but in the long run it may make inevitable confrontations more complicated. Elliot and Darren's attempts to revive positive memories of the past reveal mechanisms of regression and repressive nostalgia in particular. In order to lighten the burden of the dystopian world they live in; the two brothers create memories wishing to return to happier times in the past. These memories allow them to take refuge from their childhood in a more innocent and safe time.

These nostalgic endeavours are not only a method of escape, but they also serve to strengthen the bond between them. By reviving the past, they try to find meaning and hope in the present fragmented world. However, this process also distances them from reality and prevents them from directly processing the trauma they have experienced. The endeavour to relive positive memories helps them to feel better for a short time, while at the same time making their violent environment less unbearable. These defence mechanisms serve as a part of their resistance to the dark world they inhabit, but they also construct an emotional and mental barrier, making it challenging for them to directly process their trauma.

As the final play for analysis, *Every Brilliant Thing* explores a child's struggle to cope with their parent's suicide. The story allows us to understand the defence mechanisms a child develops as he struggles with traumatic experiences and how these mechanisms shape his life. The list of 'brilliant things' at the centre of the play is the character's attempt to create a glimmer of hope against his inner darkness and to hold on to life. This list appears as a form of creative expression to make sense of and manage the pain he is experiencing.

The character's listing of the things he loves and finds worthy of survival is the most obvious example of the sublimation mechanism. This action allows him to find an emotional way out by transforming the negative emotions he experiences into a concrete form. The list not only lightens the weight of the past but also creates a source of hope for the future. By making a list, the character becomes able to manage the emotional burden and establishes order in his world.

In the early stages of the play, the character's inability to fully comprehend his parent's depression and suicide attempts reveals the mechanism of denial. This mechanism allows the child to reduce emotional pressure by avoiding reality. The attempt to ignore or normalize his parents' mental states prevents him from becoming emotionally overwhelmed. Furthermore, the fact that the character exhibits simpler and more play-oriented behaviour in his childhood experiences indicates that the regression mechanism is in operation. Specifically, the perception of making a list as a childish game suggests his attempt to find solace in a world of innocence.

Throughout the story, the act of listing serves not only as a coping method but also as a part of the character's process of making sense of and managing the trauma. This process reveals the individual's post-traumatic survival power and the complexity of their defence mechanisms. *Every Brilliant Thing* offers a unique perspective that allows the viewer to empathize with both the depth of individual struggles and the human resilience that emerges from them.

Consequently, *The Pillowman*, *Mercury Fur*, and *Every Brilliant Thing* explore in depth the defence mechanisms that characters develop to cope with trauma and challenging circumstances. These three works show that individuals resort to creativity, denial, sublimation, and nostalgia in the face of painful realities. Actions such as telling stories, making lists, or taking refuge in beautiful memories of the past

reflect the characters' efforts to survive and their desire to maintain their emotional balance. All three plays invite the audience to reflect on the universality of trauma and human resilience, emphasizing that these mechanisms are both means of escape and meaning making.

5. REPRESENTATION OF CHILDHOOD TRAUMA IN THE SELECTED PLAYS THROUGH CATHY CARUTH'S APPROACH

Trauma, a complex and multifaceted phenomenon, has a profound impact on both individual identity and mental health. Cathy Caruth characterises trauma as a 'belated' phenomenon that resists immediate integration and is difficult to articulate directly. She explains:

> If traumatic experience, as Freud indicates suggestively, is an experience that is not fully assimilated as it occurs, then these texts, each in its turn, ask what it means to transmit and to theorize around a crisis that is marked, not by a simple knowledge, but by the ways it simultaneously defies and demands our witness (Caruth, 1996, p. 5).

Caruth emphasises that trauma cannot be fully integrated into memory at the time of its occurrence. Instead, it reappears after the fact, seeking recognition and evidence while challenging conventional notions of knowledge. This delayed re-experience has significant implications for identity and mental health, especially when trauma occurs in childhood. She highlights the pathological nature of trauma by characterising it as "obsession with an image or event": "The pathology consists, rather, solely in the structure of its experience or reception: the event is not assimilated or experienced fully at the time, but only belatedly, in its repeated possession of the one who experiences it" (Caruth, 1995, pp. 4, 5). The recurrent resurfacing of unresolved memories can make the individual feel as if the event has come to dominate them, hindering their ability to process or move on. When a child's understanding of childhood trauma such as abuse, neglect, loss or violence is overwhelmed, they often repress these experiences into fragmented memories that persist as disturbing images or emotions. Unprocessed experiences can undermine relationships, emotional health and identity, potentially leading to anxiety, depression or trust issues in adulthood.

Bessel van der Kolk understands trauma as both a historical event and a persistent mark on the mind, brain and body:

> Trauma is not just an event that took place sometime in the past; it is also the imprint left by that experience on mind, brain, and body. This imprint has ongoing consequences for how the human organism manages to survive in the present (van der Kolk, 2014, p. 32).

He emphasises the multifaceted nature of trauma, which has a significant impact on internal sensations, perceptions of physical reality and survival mechanisms. This

perspective emphasises that the effects of trauma transcend time, affecting both the psychological and physiological aspects of an individual's life.

Caruth suggests that narrating and witnessing trauma is crucial to understanding it. Individuals who express their traumatic experiences can understand their past and reconstruct their identities, which is crucial for healing and identity formation. Caruth asserts that trauma can lead to silence and repression. Failure to express trauma has lasting consequences that affect behaviour and self-image. Untreated trauma impedes identity formation and prolongs the individual's suffering throughout life.

In this context, Kalí Tal's primary concern with the social appropriation of individual testimonies offers an essential perspective. Arguing that trauma literature consists exclusively of the works of trauma victims and survivors, Tal highlights the ethical and representational complications that arise when personal experiences are woven into collective narratives (Tal, 1996, pp. 17,18). Here there is this emphasis on the delicate balance between individual healing and collective societal dealings with trauma, suggesting that while the telling of trauma can promote personal recovery, it can also lead to the appropriation or distortion of these narratives within social and cultural contexts.

Additionally, Geoffrey Hartman assesses the convergence of ethical and clinical considerations in trauma research, particularly through the narrative process. He asserts:

> In addition, both in literary studies and in the field of public health a new awareness arises which is ethical as well as clinical. There is more listening, more hearing of words within words, and a greater openness to testimony. [...] As in literature, we find a way of receiving the story, of listening to it, of drawing it into an interpretive conversation (Hartman, 1995, p. 541).

Hartman emphasises the importance of listening as an ethical practice that acknowledges the fragmented expressions of trauma survivors. Narratives serve as an essential medium for exploring, representing and understanding trauma. Testimony is fundamental to therapeutic recovery in both literature and public health. The notion of 'drawing it into an interpretive conversation' suggests that the interpretation of trauma is a collaborative endeavour in which the audience actively interacts with the survivor's narrative and situates it within a wider cultural or social context. This collaborative interpretation is consistent with the goals of trauma studies, which seek

to connect individual and collective experiences, promote dialogue, and ensure that traumatic stories are not silenced.

For Jeffrey C. Alexander, “trauma is not something naturally existing; it is something constructed by society” (Alexander, 2004, p. 2). Hence, it can be said that trauma is not just an individual psychological response, but a social construct that shapes and is shaped by collective experiences. Caruth highlights how mass traumas such as Holocaust and Hiroshima are not limited to personal suffering, but resonate within communities, influencing their shared identities and collective memories (1996, pp. 25-27). Her framework emphasises that trauma transcends the individual experience to reflect a broader societal reality in which events such as war, natural disasters and social injustice impose collective suffering. Besides, in *Trauma: Explorations in Memory*, edited by Caruth, Kai Erikson’s chapter “Notes on Trauma and Community” further elaborates on the communal dimensions of trauma. Erikson argues that trauma transcends individual experience and emerges through the shared memories of communities. He highlights the role of witnessing in this process, showing how the representation of historical events in collective memory affects the transmission of trauma across generations (Erikson, 1995, pp. 183-185). This enduring societal phenomenon affects not only direct victims but also subsequent generations, shaping how communities process past pain and transmit its legacy through cultural narratives.

Caruth points out that both individuals and societies have a duty to listen to and recognise traumatic experiences; this recognition is critical for social healing as well as individual healing. Noting that childhood traumas in particular leave lasting effects on social structures and cultural contexts as well as on the individual, she argues that these traumas should be addressed not only in their individual but also in their social dimensions. This perspective supports healing processes in a more comprehensive and in-depth manner.

While forming her theory, Caruth explains the lasting effects of trauma on an individual by introducing several basic concepts, including “belatedness and return of trauma”, “inexpressibility of trauma”, “repetition of trauma”, and “fragmentation and incomplete integration due to trauma”. While the inexpressibility of trauma and the repetitive nature of fragmented memories increase the power and impact of trauma on

the individual, these concepts form the cornerstones of Caruth's theory and provide a guiding framework for understanding both the individual and social dimensions of trauma.

5.1. Belatedness and Return of Trauma

Caruth argues that the traumatic event is not fully registered at the level of consciousness during the experience. Therefore, the trauma manifests itself unexpectedly and often in a delayed manner. Caruth explains this situation as follows:

> The experience of trauma, the fact of latency, would thus seem to consist, not in the forgetting of a reality that can hence never be fully known, but in an inherent latency within the experience itself. The historical power of the trauma is not just that the experience is repeated after its forgetting, but that it is only in and through its inherent forgetting that it is first experienced at all (Caruth, 1995, p. 8).

In this context, trauma is not limited to the moment of the event; this experience, which cannot be fully grasped, can only manifest itself through repetitions. Dreams, nightmares and recurrent thoughts re-enact this experience by carrying the fragmented traces of the trauma.

Freud's theories on trauma provide an important basis for Caruth's concept of belatedness. With the concept of *nachträglichkeit* (afterwardness or deferred action), first introduced in his "Project for a Scientific Psychology" (1895), Freud drew attention to the delayed reactions that follow the traumatic event and cannot be expressed in time. In *nachträglichkeit,* there is a specific reference to the retroactive processing of an event. It posits that an experience acquires its traumatic significance only when it is reinterpreted or revisited in the context of a later event. An apparently trivial childhood event may later acquire traumatic significance as a result of a subsequent event. There is a dynamic interaction between the past and the present (Lothane, 1998, pp. 47-49).

Later, in *Moses and Monotheism* (1939), he gives the example of the psychomotor symptoms of a person who survived a train accident without physical harm, which appeared weeks later. Freud defines this process of delay not as the forgetting of the traumatic memory, but as the fact that the full experience of the event is only possible later (Freud, 1955, p. 84). This shows that not only individual traumas, but also historical events and collective traumas are reshaped. According to Freud,

national disasters trigger and transform repressed memories of previous disasters, and history becomes a complex reorganisation of past crimes and sufferings.

Caruth reinterprets Freud's writings on trauma and repression, treating trauma not only as unconscious repression but also as an unconscious state of delay. The war neuroses analysed by Freud in *Beyond the Pleasure Principle* (1920) show how traumatic events return through dreams and repeated experiences (Freud, 1989, pp. 12-13). Caruth explains this point as follows: "(…) the traumatic symptom cannot be interpreted, simply, as a distortion of reality, nor as the lending of unconscious meaning to a reality it wishes to ignore, nor as the repression of what once was wished" (1995, p. 5). This process, which Freud calls the 'latent period', is compatible with Caruth's concept of latency, and the severity of the trauma derives both from the fact that it is a recurrent experience beyond the individual's control, and from the initial unknowability of the event.

Latency is the period of inactivity or stagnation between a traumatic event and its effects, often forgotten or repressed, but reappearing unexpectedly through symptoms such as dreams or flashbacks. It differs from *nachträglichkeit*, which involves a reinterpretation of the event, but focuses on the time interval between traumatic effects and delayed symptoms. Caruth brings these two concepts together in her theory of trauma. She sees latency as a period during which the traumatic event is not fully perceived, and its effects cannot be consciously processed. She also interprets *nachträglichkeit* as a process by which the trauma returns in a fragmentary and disturbing way, allowing the past to regain meaning. Here, we can highlight the difference between belatedness and return of trauma as follows: Belatedness refers to the late manifestation of the impact of trauma, while return of trauma describes the process by which repressed trauma returns from the unconscious and affects the individual's life. These two concepts play a critical role in understanding and describing the nature of trauma.

Belatedness, as a fundamental concept in Caruth's trauma narrative, refers to the fact that traumatic experiences, by their very nature, cannot be grasped in a timely manner and are therefore expressed with a delay. The reason why trauma is an event that exceeds the mental and emotional resources of the individual at the time of its occurrence is that it cannot be understood immediately and is usually pushed into the

unconscious. However, the effects of the event return at unexpected moments through dreams, recurring images or disturbing thoughts. This delayed return increases the difficulty of narrating the trauma because the dimensions of the event that cannot be fully grasped remain incomplete or fragmented when expressed through language. In this context, the trauma narrative is characterised by belatedness; the true meaning of the event is revealed in these moments of delayed expression, when the past coincides with the present. The delayed expression of trauma requires a continuous process of reconstruction and signification in both individual memory and collective narratives.

Caruth's writings on trauma show that delay is a central concept for understanding both the personal and historical dimensions of trauma. Trauma resonates not only in the mental world of the individual, but also in social and cultural narratives. While Freud's theory of repression provides an important basis for understanding the ways in which trauma manifests itself, Caruth's concept of belatedness adds a temporal dimension to this theory. This concept offers a method for reassessing historical trauma and understanding how individual experiences are shaped by collective memory.

The contemporary plays as the subject of the present study, among others, can be analysed in terms of Caruth's concept of belatedness as well as in Freudian terms. McDonagh's *The Pillowman*, Ridley's *Mercury Fur*, and Macmillan's *Every Brilliant Thing* provide ample opportunity to reflect on how the stage represents the delayed effects of trauma and its recurrence. Through the use of narrative, these works offer important insights into the processing of traumatic experiences.

To begin with, *The Pillowman*, while exploring the complex effects of trauma, offers an opportunity to analyse the concepts of belatedness and the return of trauma in Caruth's literary trauma theory. The play illustrates these ideas by showing the lasting effects of childhood trauma on characters and the ways in which narratives process these traumas. Belatedness is evident in Katurian's storytelling, questioning his connection with reality and making sense of traumas. In this context, the play effectively demonstrates how trauma is reflected in the subconscious of the individual and how it is revealed through storytelling.

That the trauma is not immediately recognised is well-known, and its meaning only emerges later through the recollection or triggering of the event, which is known

as belatedness. In this context, the following excerpt from *The Pillowman* can possibly be analysed in depth from this perspective. In the second scene of the play, we see that Katurian and his brother Michal have been abused by their parents at a very young age in the name of 'artistic experiment'. The parents' manipulation extends to gaslighting, a form of psychological abuse where Katurian is made to question his own perceptions and memories. When young Katurian questions the sounds that he hears, his mother dismisses his concerns:

> **Katurian** What were all those noises last night, Mama?
>
> **Mother** Oh little Kat, that's just your wonderful but overactive imagination playing tricks on you"
>
> **Katurian** *(boy's voice)* Oh. Do all little boys of my age hear such sounds of abomination nightly?
>
> **Mother** No, my darling. Only the extraordinarily talented ones.
>
> **Katurian** *(boy's voice)* Oh. Cool, *(normal voice)* And that was that. And the boy kept on writing, and his parents kept encouraging him with the utmost love, but the sounds of the whirrs and screams kept going on…
>
> *In the nightmare semi-dark of the adjoining room, it appears for a second as if a child of eight, strapped to the bed, is being tortured with drills and sparks.*
>
> …and his stories got darker and darker and darker. They got better and better, due to all of the love and encouragement, as is often the case, but they got darker and darker, due to the constant sound of child-torture, as is also often the case (McDonagh, 2003, pp. 31,32).

Here we see the parents using their authority to manipulate the child's perception of reality. As a result, Katurian is unable to immediately comprehend the trauma he experienced as a child, and its effects accumulate in his subconscious. In line with Caruth's concept of belatedness, Katurian will only realise the truth behind this manipulation years later: the existence of a tortured brother and the fact that his parents carried out these experiments for an artistic purpose. This "overactive imagination" explanation, supported by the words of Katurian's mother, covers up the suppression of the real trauma and horror experienced by the child, which is in fact trauma under the guise of love. However, stories reconstruct these images in Katurian's mind, transforming them into a dark source of creativity. The phrase "as is often the case" emphasises the ironic relationship between parental love and traumatic experiences. This relationship leaves a deep mark on both Katurian's writing and his identity. His parents' love for him also becomes an instrument of oppression and manipulation.

The following excerpt is the continuation of the previous one, which reveals Katurian's trauma through a belated approach. Michal's note in blood reveals a truth that Katurian has been suppressing or unconsciously denying for years. This revelation radically changes the meaning of past events and reshapes the character's perception of himself, his family, and his artistic creativity:

> It was on the day of his fourteenth birthday, a day he was waiting to hear the results of a story competition he was short-listed for, that a note slipped out from under the door of the locked room…
>
> *A note in red writing slips under door. Katurian picks it up.*
>
> ...a note which read: 'They have loved you and tortured me for seven straight years for no reason other than as an artistic experiment, an artistic experiment which has worked. You don't write about little green pigs any more, do you?' The note was signed 'Your brother', and the note was written in blood (McDonagh, 2003, pp. 32-33).

Upon receiving the note, Katurian realises that his parents' love and affection serve as a mask, concealing years of torture for Michal.

> As the plot unfolds, we come to understand the violent childhood roots of Katurian's art. Even as his parents encouraged him in his fledgling literary efforts, next door they nightly tortured the brother he didn't know he had, so that Michal's screams might provide Katurian with a writer's imagination (Cadden, 2007, p. 677).

This scene symbolizes a turning point where past events assume a new significance and the traumatic reality becomes conscious years later. This scene confirms Caruth's idea that trauma is not directly experienced but only indirectly revealed later. Lewis (2007) describes Katurian as "the subject of an experiment, lavishing him with affection while abusing an invisible brother always within earshot, in order to see if such contradictions and imagined horrors would give birth to a great writer" (p. 18). This torture, which Michal calls an "artistic experiment," forms the background for the dark themes that underpin Katurian's writing career.

The timing of the note also makes the effect of the concept of belatedness stronger. On his fourteenth birthday, Katurian receives this note, filled with excitement from his shortlisting in a story competition. However, the note's horrific reality abruptly shatters this bliss. This shows that trauma does not always stay in the past but rather imposes itself by interrupting a happy or normal moment. When Michal points out that Katurian no longer writes about "little green pigs", he implies that Katurian's writing has lost its innocence and that these dark themes are directly linked to his

brother's torture, with belatedness evident in Katurian's inability to realise the connection between his stories and his brother's suffering until it's too late.

This scene also shows how trauma works in the subconscious and how it transforms into creativity. Katurian's transition from writing innocent children's stories to producing dark and violent stories is the result of his parents' "artistic experiment" in the padlocked room. According to Caruth's concept of belatedness, the impact of trauma lies not in the event itself, but in its recollection or emergence. In this context, Katurian's authorship becomes a belated manifestation of childhood trauma. Here, belatedness manifests itself in both individual and creative terms. Years later, an object (the blood-stained note) brings the trauma to Katurian's consciousness. This late realisation causes Katurian to question not only his own identity but also the events that inspire his writing. In this scene, Martin McDonagh emphasises the transformative effects of trauma on individual and artistic processes.

The following excerpt from "The Pillowman" story, from which the play takes its name, is a powerful example of the concept of belatedness. The female character, thinking about how wonderful life was during her childhood, realises that happiness is an illusion because of the trauma she has experienced in her later years. At first, she denies the pain in her life and thinks she is happy. Her delusion that she is happy shows that she cannot accept the trauma and painful aspects of her life but prefers to be happy by excluding the pain. This kind of belief is a defence mechanism that stems from people's tendency to not acknowledge and deny their trauma:

> There was one little girl, a happy little thing, who just wouldn't believe the Pillowman when he told her that life could be awful and her life would be, and she sent him away, and he went away crying, crying big gloopy tears that made puddles this big, and the next night there was another knock on her bedroom door, and she said, 'Go away, Pillowman. I've told you, I'm happy. I've always been happy and I'll always be happy.' But it wasn't the Pillowman. It was another man. And her mummy wasn't home, and this man would visit her every time her mummy wasn't home, and she soon became very very sad, and as she sat in front of the oven when she was twenty-one, she said to the Pillowman, 'Why didn't you try to convince me?' And the Pillowman said, 'I tried to convince you, but you were just too happy.' And as she turned on the gas as high as it would go, she said, 'But I've never been happy. I've never been happy' (p. 45).

When she says, her words "But I've never been happy. I've never been happy" mark the moment when the woman acknowledges the trauma she has been denying for years.

This realisation clearly reveals the concept of belatedness. In other words, the woman's understanding of her pain only emerges towards the end of her life, with a retrospective understanding. Caruth observes that individuals often fail to fully comprehend trauma in their early years and may only fully comprehend it at a later stage. When the woman first rejects Pillowman, she ignores the pain in her life and believes she is happy. However, this acceptance comes with a late realisation towards the end of her life. The trauma remains in the unconscious over time but does not reach the person's consciousness at that moment. The woman rejects the true nature of the trauma at the time, choosing to ignore the pain in favour of the security of happiness.

Towards the end of her life, when she recognises her pain, she acknowledges the pain that has built up over years of trauma. However, this realisation does not change anything about her life. At this point, belatedness symbolizes a tragically delayed understanding. The effects of the trauma have deepened, and this realisation only leads to the woman choosing death. A belated realisation does not provide sufficient opportunity to deal with the trauma. Therefore, the woman's final realisation is not only a confession but also an inevitable consequence of the trauma's devastating effects.

It has been already covered that Caruth posits that return of trauma frequently manifests as repetitive behaviours or compulsive narratives. "Their problematic past turns Katurian into a very pessimistic character because he no longer believes in the happy ending in real life: his stories reflect pain, violence and killing" (Atasoy, 2020, p. 16). In this sense, in *The Pillowman*, Katurian's storytelling serve as both a manifestation of his trauma and a vehicle for its re-experiencing. To serve this, violence appears in various forms in all of Katurian's stories. However, these are not ordinary stories but stories that reflect his childhood and traumatic past. Katurian's sole published story, "The Town by the River", connects to his own childhood and he regards it as "my best story" (p. 19). In this story, a boy living in a small town who is ostracized by his friends and subjected to violence meets a black-hooded cart driver while nursing his wounds by the river. While chatting with this man, he shares his sandwich and talks about the difficulties in his life. In return for his kind 'sharing', the driver cuts off the boy's right toes and throws them to rats (p. 21-22). We can make a connection between this boy and Katurian due to the way Katurian depicts the boy:

"The little boy sat nursing his bruises…he knew that he was kind-hearted and full of love and that someday someone somewhere would see this love inside him and repay him in kind" (p. 21).

The "kind-hearted and full of love" boy described here refers to Katurian's idealisation of childhood, shaped by the love of his parents. This love, however, becomes a tool of manipulation used to cover up the trauma. According to Caruth's theory, the return of trauma occurs through the individual's unconscious retelling of past traumatic experiences. Katurian's stories, in which he repeats themes of violence and abuse, are the result of having witnessed torture in the past and the expression of the repressed effects of that witnessing. Throughout the stories, Katurian's recurring themes – abused children, dark family secrets, punitive parental figures – represent an ever-revolving cycle in his subconscious. Caruth's concept of acting out explains this: As the trauma remains unresolved, the individual attempts to rework it in the unconscious by repeatedly staging it.

There is a theme of collapse in Katurian's stories, which is often explored through dark themes of violence, abuse, and death: "(...) nearly every narrative produced by Katurian is a differing segment of 'collapse' in which the cultural investment is done through psychological troubles recalling some noteworthy metaphors observed within tangible 'childhood traumas" (Çakırtaş, 2018, p. 48). These themes of collapse centre on the psychological struggles of individuals, and these struggles are often associated with childhood traumas. Katurian's stories not only reflect individual problems but also carry a social or cultural meaning. For example, themes such as an authoritarian family structure or oppressive systems of the state offer a broader critique beyond individual traumas. Çakırtaş's phrase 'cultural investment' may refer to how these narratives combine individual-level psychological disorders with societal-level mechanisms of violence and oppression. For instance, Katurian's story "The Little Apple Men" serves as a potent metaphor for the abuse that occurs in parent-child relationships. These stories' elements, such as the torture or death of children, reveal Katurian's subconscious processing of his own traumatic experiences and their return to trauma through art: In this story a father consistently abuses a little girl. The father is a parental figure who mistreats her and physically harms her. One day, the girl crafts little men out of apples. She carves arms, legs, and

face shapes into the apples, giving them a kind of human figure appearance. She presents these apple men to her father and tells him that they are not meant to be eaten but to keep as a memento of her childhood. However, ignoring her warning, he mockingly swallows these apple men. Soon after, he succumbs to excruciating pain due to the razor blades concealed within the apple men. The story seems to end here, but at night, the girl wakes up in her bed and realises that a group of apple men has climbed onto her chest. The apple men open her mouth and climb up her throat, saying that she has killed their brothers. The girl chokes to death on her blood (pp. 10-13).

As the final phase of his parents' experiment is concluded (p. 34), Katurian won the story competition prize and gained insight into the truth behind his writings. Although these experiments came to an end, Katurian's relationship with trauma did not cease. On the contrary, Katurian's stories constantly recreate these experiences. His stories have a cyclical structure, representing both the beginning and the end of violence. Cathy Caruth's notion that trauma refuses to close directly relates to this. The stories often end with punishment, death, or a tragic outcome. However, rather than concluding the trauma, these outcomes connect to another story or narrative and so this cycle clearly demonstrates Katurian's inability to let go of his past and the constant reassertion of trauma through art.

Katurian's stories act as both therapy and trap for him. Dark themes in his stories concretely manifest the return of the trauma. This repetition demonstrates that people relive the trauma instead of processing it, which results in perpetuation instead of resolution. Caruth's concept of the return of trauma resonates with these narratives, revealing not only an individual experience but also the perpetuation of violence and trauma across generations. Caruth's idea that trauma refuses to close is evident in Katurian's stories. She illustrates that trauma never fully resolves and always resurfaces in various forms, and we, as the reader, witness that this cycle begins with parental torture and continues through Katurian's narrative. Trauma here is not just an individual experience but a reflection of generations of violence, abuse, and silence.

One of the police characters in the play, Ariel, stands out as an angry, violent, and authoritarian figure, representing the "bad cop" (p. 12). However, clues given throughout the play suggest that Ariel has experienced deep trauma in his past. In particular, his sensitivity and overreaction to abused children suggest that the roots of

this trauma go back to his own childhood. We can see his angry outbursts and constant threats of violence as expressions of a repressed trauma. Tupolski in the play reveals Ariel's past abuse at the hands of his father after Katurian senses that Ariel also has a problematic childhood:

> **Katurian** And who was the first one who told you to kneel down. Ariel? Your mum or your dad?
>
> *Ariel stops dead still. Tupolski's jaw drops.*
>
> **Tupolski** Fuck me.
>
> **Katurian** I'm guessing your dad, right?
>
> **Tupolski** Oh you didn't go and tell him all your dad shit, did you, Ariel? Jesus!
>
> **Ariel** No, Tupolski, I didn't go and tell him all my dad shit.
>
> **Tupolski** What? Oh. Shit. That old one.
>
> **Ariel** *(to Tupolski)* You keep chipping away with that shit, don't you? With that 'problem childhood' shit?
>
> **Tupolski** I don't keep chipping away with anything. You're the one keeps bringing your problem childhood up.
>
> **Ariel** I've never said a word about my problem childhood. I wouldn't use the phrase 'problem childhood' to describe my childhood.
>
> **Tupolski** What phrase would you use? A 'fucked by your dad' childhood? That isn't a phrase (pp. 79,80).

Here, Katurian's questions and Tupolski's sarcastic comments indirectly reveal the traces of trauma in Ariel's past. Ariel does not openly express his traumatic experiences with his father and defends himself by saying, "I've never said a word about my problematic childhood". However, this statement reveals the repression of the trauma and its indirect expression. Ariel does not consciously acknowledge his trauma, and he is not fully aware of how it shapes his behaviour. Although Tupolski's sarcastic attitude triggers Ariel's repressed pain, this confrontation does not lead Ariel to resolve his trauma but to become more defensive. This scene powerfully demonstrates that trauma remains in the subconscious and leaves deep scars on an individual's identity. Ariel's reactive violence and authoritarianism show how unresolved trauma can create a destructive cycle in both individual and social relationships.

The failure of Ariel's past trauma to transform into conscious awareness leads him to express his quest for justice through violence and authoritarian methods. His empathy for abused children is a reflection of his own childhood pain, but this empathy

manifests itself destructively through the use of torture and the legitimization of violence. Unable to analyse his own traumas, Ariel perpetuates this destructive cycle. Later in the play, we witness the recognition of the repressed emotional wounds and traumas that underlie Ariel's rage. Once again, this recognition embodies Caruth's concept of belatedness: We do not fully understand trauma in time, and we only realise its effects later. Ariel's story illustrates how unresolved trauma fuels violence and defence mechanisms in individuals.

When it comes to Ridley's *Mercury Fur*, we can see the inability to fully experience trauma as it occurs in, with its true effects emerging later in a haunting and fragmented way, a phenomenon known as belatedness. The characters in the play repeatedly recall traumatic events in fragmented narratives, demonstrating how the past inexorably intrudes on the present.

In the play, we see the inevitable effect of trauma on the individual through Elliot's way of remembering the past and Ridley's increasing the intensity and severity of the images he uses to describe the trauma. Elliot's recounting of his hospital experience shows that the effects of the traumatic event do not come back immediately, but later, in fragments and with emotional intensity. Even if the physical reality of the event is in the past, the perception of the trauma still echoes in his mind in a delayed manner. The flashback effect given by Elliot's narration of the incident as if it were happening at that moment and Lola's accompaniment to it shows that both of them live in the past in a way for the reason why the trauma does not remain in the past but continues to exist mentally; it has returned at that time:

> **Elliot** … I remember that night in the hospital.
>
> **Lola** *freezes*.
>
> **Elliot** My knee had got infected. They'd put me on this antibiotic drip thing … Do you want me to stop?
>
> **Lola** … No.
>
> **Elliot** (…) I heard a helicopter. A security guard rushed into the ward. He had blood on his face. The noise outside got louder and louder. And then – bright orange! The windows light up! A car's on fire! The street's full of people. They're all holding weapons. Sticks, metal bars, guns, knives. My knee is throbbing like fuck but I know I've got to run. The noise gets louder. The crowd is in the hospital. I'm struggling into me jeans and trainers. Hurts like fuck pulling the jeans over me knee. Doors smashing open and glass breaking on the floor below. People screaming. Rush to the fire escape. Remember looking at

this old dear in bed. She's had a stroke. Paralysed. Nothing on her could move and yet – fuck me, her eyes. I can't move.

Lola Get out!

Elliot Run down the metal stairs. They clang all round. I'm on the main road. (…) Dunno where I'm going. Feet crunch on broken glass. Smell of petrol and … blood. Lots of blood. My mind is all fuzzy with the drugs. Can't think properly. What's happening? Must be a dream. There's a line of police making their way towards me. Right across the road. They're holding shields. Fire is reflected in their shields. It's like a tide of sunset coming straight at me. Bullets whizz past me. They glow like gold.

Lola Run!

Elliot I'm heading for Brick Lane. What's that? A horse. No. It's a zebra. How's that get here? Kids are chasing it. Corner it. Stab it with knives. Broken bottles. Someone throws petrol. Someone strikes a match. The zebra bursts into flame (…) (pp. 179,180).

Here we see that Elliot is only able to grasp the meaning of the traumatic event after the danger has passed and from a safe distance. The passage of time allows for the processing of the trauma and strengthens the impact and authenticity of the narrative.

In this scene, Elliot recalls his harrowing escape from the hospital, a memory he has previously suppressed or lacked the time to comprehend, resurfacing with a force that resonates with the idea of latency: A period exists where the trauma resists processing and remains hidden. Elliot's mental fuzziness and his perception of events as a dream, in particular, suggest a latent period where the traumatic event remains incompletely understood. Repression of the trauma during this period renders its return more destructive. However, with the recollection of the past, we see how vividly such traumatic images can return; the repressed trauma can return in a more destructive way.

Throughout the play, Ridley, particularly through Elliot's character, demonstrates how trauma shapes an individual's mindset and intertwines the search for survival and control with violence. The return of the trauma shows that Elliot carries both traces of the past and that these traces determine his present and future choices:

Elliot But if things … if things got so bad I was afraid people might hurt you … Hurt you and Darren and … I couldn't stand that … You know, I made a promise to Darren. I'd kill you both before I let anyone hurt you. I'd shoot you while you slept or something. It's like a … like a comfort to think of it. The power's still

> in our hands, Lol. Don't you see? We can decide … not to carry on. We can decide to … disappear (p. 194).

In this scene, the idea of killing that Elliot expresses here also serves the concept of belatedness, because the trauma returns to the individual's life with a delay, like an echo from the past, and is an indirect effect of the traumatic events experienced. Previous uncontrollability and helplessness lead to the belief that violence can erase these memories. Elliot emphasises his control to avoid reliving the violence and helplessness of the past. However, trauma, both individually and socially, has distorted this concept of control. The idea of 'not to carry on' presents violence itself as a way out. Additionally, the idea of 'disappear(ing)' shows that life becomes unbearable as a result of trauma. For Elliot, this idea indicates a desire to put an end to the constant invasion of the past because it haunts him and the other people around him. Furthermore, the emphasis on the concept of 'power' here expresses Elliot's attempt to fight against a lack of control. However, this power can only manifest itself in destructive ways.

Elliot's attitude of killing to protect is a dramatic illustration of how trauma transforms an individual's reasoning, inherited in some way from his father. The Duchess character reveals this idea on the day of the party, leading to the realisation that she is actually the brothers' mother:

> **Duchess** My husband is attacking our children!
>
> (…)
>
> **Duchess** Our boys! He wants to kill our boys! He wants to kill them to save them! To save them from this terrible place. Help!
>
> (…)
>
> **Duchess** No! My boys are in the corner of their bedroom. The big one trying to protect the little one. My husband is hitting them with a hammer. He's hitting my eldest on the leg. It's all smashed. And the little one – the little one's been hit on the head! No! No! There's so much blood! Oh, the look in their faces. How can Daddy do this? I grab my husband round the neck. He hits me on the head. Everything goes dark. I … I … can't see. I … can't move … I can hear my boys crying … I hear my husband run down the stairs … He's in the pub! Glass smashing. Bottles smashing …
>
> **Spinx** Shush, Duchess, shush. (…)
>
> **Duchess** … Burning! I can smell burning. Screaming! It's my husband. He's … he's set fire to himself … My husband is burning … burning and screaming … burning and … scream … burn … scream … scream … (pp. 220,221).

In this excerpt, Duchess's narrative demonstrates how the traumatic event she endured is reoccurring in the present. Her memory reproduces the event as if it were happening at that moment. This implies that her mind has not fully resolved the traumatic event from the past and it is reappearing with a delay. The belated nature of the trauma shows that while the physical reality of the event is over, its psychological impact continues.

The moment when her husband hits her symbolizes Duchess's helplessness and physical paralysis in the face of the traumatic event, as well as the process of repression and pause. The trauma remains latent in this moment. However, the narration today revives and remembers this moment. The unexpected return of the trauma captures the individual in the present and her story is a powerful and an effective example of this return. The trauma reappears in her mind in a vivid, violent, and inescapable way.

On the other hand, the duchess's husband's willingness to kill to 'save' his children represents the irrational and paradoxical nature of trauma. Here, Ridley underscores the transmission of trauma across generations, affecting both individuals and society. The narrative and the cyclical nature of the characters' lives both reveal the return of trauma. We can deduce this from the previous quote, where Elliot thinks of killing his loved ones before things get worse and wants to commit suicide himself. In fact, this violent tendency is evident in the way both brothers love each other. We observe this situation in a conversation between them:

> **Elliot** I love you so much I could make you bleed and bleed.
>
> **Darren** I love you so much I could kill you and kill you.
>
> **Elliot** I love you so much I could burst into flames.
>
> **Darren** I love you so much I could burst into flames (p. 136).

With this dialogue, the reader witness Elliot and Darren's testimonies demonstrate that in a traumatized world, the only way to express love is through destruction and violence.

> This perception of love is resulted from melancholia after trauma of war, which teaches destruction for survival first, then for love. Self- destruction is also a way to show love for the father, which he shows when he sets himself on fire and consequently, dies in agony. This perception of love passes from one generation to another just as trauma does (Gündoğdu, 2015, p. 360).

Both individual and societal trauma lead to the normalisation of violence, while images of self-destruction and the drive to survive express love. Through these expressions,

Ridley shows how trauma distorts the language and emotional world of the individual, dramatizing a world in which love can only exist through destruction or purification.

In addition, as Elliot is older than Darren, it would not be wrong to say that Elliot takes the place of the father figure and is therefore more protective and cautious throughout the play. Furthermore, the Duchess' words reveal that Darren's father may have hit him on the head, potentially causing mental damage. Darren's manner of speaking and behaviour, including his tendency to eat butterflies, suggests a degree of naivety and mental incapacity. Their relationship bears a resemblance to the relationship between the brothers Katurain and Michal in *The Pillowman*. To save his older brother, Katurian commits matricide and patricide. Later, in an attempt to save Michal once more, Katurian commits fratricide. Otherwise, Michal would be exposed to the police for the child murders he committed. Katurian takes the blame for both of Michal's murders while confessing that he kills everyone in his family. At this point, there is a strong connection between Katurain and Elliot, as we know that Elliot will end up killing his younger brother Darren in order to save him from the impending chaos.

Lastly on this excerpt, Ridley's language and intense imagery – blood, sounds, and the smell of burning – reflect the inevitable and devastating effect of the cyclical nature of trauma and violence on the individual, revealing the traumatic reality of an inhuman world in Mercury Fur. Simultaneously, Spinx's attempt to silence Duchess reveals to the reader how society silences and ignores trauma. This scene again captures the social silencing and cyclical nature of trauma. The reproduction of violence as a means of 'salvation' proves that trauma is not only an individual problem but also part of a social breakdown.

Another example of return of trauma in this play comes with Naz and his memory with his mother and sister, Stacey. Naz recounts his memory about the murder of Stacey. Naz's recounting vividly illustrates the resurgence of trauma, eliciting its sensory and emotional immediacy. The grotesque imagery reflects Caruth's claim that trauma disturbs conventional narrative frameworks, compelling its intrusion into the survivor's awareness. While Ridley treats trauma as individual and social destruction, in Naz's narrative he concretises this destruction through belatedness and the embodiment of trauma. By bringing the horror she experienced in the past into the

present, Naz shows how trauma remains mentally and linguistically alive even though the physical reality of the event has ended:

> **Naz** Yeah! Mum grabs me by the hair. Mum pulls Stace by the hand. Wetry to get out through the back of the supermarket. But some of the gang are already there. We run back down the aisles. I slip in something. It's red. Blood. There's blood pouring from under the shelves. I look through the packets of cornflakes. I see a machete goin' up and down. And someone's hand goin' up and down. Then no hand. Then no machete. But more blood. Next thing I know the gang is all round us. They're laughing. Mum is screaming, 'Don't hurt me kids.' Lots of blades go swish. Sort of helicopter feeling. Stuff gets in my eyes. Blood. Wipe it away. Look up and see one of the gang holding Mum's head. He's cut it off. He's holding it by the hair. Just like Mum held my hair. I thought, Now you know what it feels like. Can hear Stace crying but I can't see her. The crying is real close. It seems to be coming from this big smashed fruit. It's all red inside and very juicy. It's a got an eye. It's Stace! The gang has stomped on her head. One of her arms is gone. The gang drag her away and pull off her knickers. She's pissing herself. The piss shoots right up. The gang laughs. One of them gets his cock out and says he'll plug the leak. He sticks his cock in her. One of the others fucks what's left of her mouth. They all drink Coke. They fuck Stace and they drink Coke. I think Stace must be dead now. She ain't moving. I get right to the back of the shelf. I stay there for ages.
>
> *Slight pause*.
>
> Is the ice-cream van and stuff yours?
>
> **Darren** What – ? Oh. Nah (pp. 156,157).

In Naz's language, trauma not only resurfaces as a remembered event but also becomes an irresistible phenomenon that permeates the present. The vivid depictions of blood and body parts demonstrate how language embodies trauma, transforming the narrative into a form of reliving. Here, Ridley dramatizes the direct connection between violence and sexual abuse and brutality, portraying the human body as a mere object. Violence goes beyond physical harm and becomes an act that destroys human dignity and completely erases the individual. Trauma causes emotional numbness and distorts an individual's language, as evidenced by Naz's inability to express her feelings about the horror of the events as she recounts them. This is consistent with Caruth's theory of how trauma distorts an individual's ability to narrate.

At the same time, this scene reveals the cyclical and reproductive nature of violence. In Ridley's dystopian world, 'parties' serve as a venue for the physical reenactment and ritualization of trauma. Naz's witness to the brutality shows that the traumatic experience persists not only for individuals but also for the collective, entwining violence with the survival instinct. Over time, survivors blur the line

between victim and perpetrator, becoming both victims and perpetrators of violence. This cyclical nature reveals that violence has become the norm in a traumatised world, and that trauma is passed down through generations.

Naz's detailed and vivid recollection of the events symbolises the return of trauma in the form of flashbacks, and this narrative also parallels the re-staging of violence in parties. Ridley's dystopia constantly relives and reproduces trauma, not just through memory. Violence prevents individuals and society from breaking free from the past, making the traumatic cycle endless. In this way, Ridley powerfully demonstrates how trauma inflicts deep wounds on the individual psyche, but also how it is socially perpetuated and becomes the norm.

The character of Darren also illustrates the belated nature and return of trauma. Only the present tense can express the injury to Darren's mother and the fear he felt at the time of the event:

> **Darren** I remember … Mum was hurt. She's been hit with a hammer too. She's on the floor and she ain't moving. I drag myself over to her. I put my hand on her chest. I can feel her heart beating. I think, She's alive. So long as I can feel that heart beating … everything is okay. I'm safe (p. 166).

The fact that Darren controls his mother's heartbeat and feels safe shows that in this moment, the survival instinct rises from the unconscious, and he tries to cope with the uncertainty. However, this experience leaves a permanent scar on his psyche and becomes a recurring search for safety. Darren needs to reduce safety to a concrete physical sensation. This expression implies a recurrent search for relief from his lack of control in an uncertain and chaotic world. However, this sense of security is fleeting, and the trauma-induced sense of threat persists. It is conceivable that, after this traumatic event, Darren felt the need to verify that his mother was alive by remembering this moment. However, the trauma, not fully processed, persists as a wound in Darren's inner world, making its presence felt. The weight of this unresolved trauma manifests in various aspects of his life, influencing his relationships and decision-making. As he navigates through his daily routines, Darren finds himself grappling with lingering anxiety while he always looks for the approval of Elliot.

The third play to be analysed through Caruthian concepts of belatedness and return of trauma is Duncan Macmillan's *Every Brilliant Thing*. The instances in the

play where traumatic experiences emerge, reemerge, or disclose their enduring effects exemplify Caruthian concepts. The following section presents the narrator's dialogue with his father after his mother's first suicide attempt. There is something wrong, even though the child cannot understand. After this traumatic event, the narrator's focus changes, and he begins to list the brilliant things that make life meaningful and worth living:

> (…)
> DAD Because we're going to the hospital.
> AUDIENCE Why?
> DAD Because that's where your mother is.
> AUDIENCE Why?
> DAD Because she hurt herself.
> AUDIENCE Why?
> DAD Because she's sad.
> AUDIENCE Why?
> DAD I don't know.
> AUDIENCE Why?
> DAD I just don't.
> AUDIENCE Why?
> (…)
> DAD Because she can't see anything worth living for.
> AUDIENCE Why?
> ,
> NARRATOR At least, that's how I like to remember it. But we actually just sat in silence. The only thing he said to me was:
> *The NARRATOR feeds the 'DAD' the following line:*
> DAD Your Mother's done something stupid.
> NARRATOR I didn't know what that meant (p. 331,332).

While narrating this critical event in the past, the narrator creates a hypothetical dialogue with his father. This dialogue is not a real conversation at the time of the event but a constructed form of memory. Belated perception is observed by the fact that they were actually sitting in silence. The narrator fills the silence that he could not make sense of in this childhood event from an adult perspective. However, even this

process of filling in is a reflection of an incomplete or fragmented memory of the trauma.

On the other hand, the father's responses point to the incomprehensible and untransmittable nature of the trauma. The father's helplessness and inadequate explanations suggest that both parent and child are unable to fully articulate the trauma, creating a period of concealment. When he revisits this memory years later, he puts words to this silence and in a sense rewrites the event. In remembering this event, the adult narrator is actually carrying the childhood trauma into the present and re-experiencing it through narration. Replacing the silence with a dialogue with his father is an attempt to explain and understand the trauma. However, even this retelling shows that the trauma is not fully resolved. The expression "I didn't know what it meant" confirms the naive and incomplete perception of childhood.

In summary, the return of the trauma, the retelling of the event and the search for meaning continue. In terms of this excerpt, belatedness is when the event gains meaning years later through narration; latency is when the trauma is suppressed for a long time through silence and incomprehensibility; return of trauma is when the event comes to the surface through repetition of the event through dialogue and retelling.

The mother's second suicide attempt causes the reemergence of the same traumatic childhood experience. This gap of ten years underlines the belatedness in which the unresolved trauma returns with renewed urgency:

> I forgot about the list until her second attempt, just over ten years later. Dad showed up halfway through Chemistry. The same trapdoor feeling. Fight or flight. The same wordless drive to the hospital. As a teenager I dealt with it less well. I wore my heart on my sleeve. The night she came home, she sat at the kitchen table and said that if it wasn't for the ham and pineapple pizza lining her stomach from the night before she'd be dead. And I said:
>
> *'You took three weeks' worth of anti-depressants, a packet of Aspirin and half a tub of antihistamines. You're probably healthier than I am. If you're going to kill yourself go jump off a bridge.'*
>
> Rather than storm off I sat there and started to shovel food into my mouth. I'd spent ages on this meal and I was furious that she was sitting there, wishing she was dead and letting it go cold (pp. 337,338).

The emotional impact of a past event triggers the same sense of being stuck. Because of his age and the time in which he lives, the narrator finds it difficult to control his emotions and expresses his anger directly to his mother. The use of anger as a defence

mechanism, which is common in reactions to trauma, is evident here. In addition, the act of eating is an attempt to suppress anger and helplessness. Children use it as a coping mechanism to deal with trauma. However, with the mother's second suicide attempt, the list resurfaces from its forgotten place. This demonstrates that only certain triggers can re-experience and recall trauma. As for the list, we already know that it is a tool for coping with childhood trauma. However, with the mother's second suicide attempt, the list emerges from oblivion. This shows that the trauma is reexperienced and remembered with certain triggers and unresolved childhood emotions re-emerge in another period.

Throughout the play, the protagonist is afraid of happiness. The 'fall' that follows happiness demonstrates how children learn trauma. The narrator perceives the positive moments of life as a danger signal. This illustrates the deep embedding of trauma in the individual's perceptual system. Happiness in the present triggers traumatic events from the past. Childhood-instilled fear can persist into adulthood:

> My Mum…
>
> She would do this. Get carried away. Ups and downs.
>
> ,
>
> As a little boy, it was never shyness, or thoughtfulness. Happiness scared me because it was usually followed by… you know. This was all very new. Feeling like this.
>
> ,
>
> Studies have shown that children with depressed mothers have a heightened reactivity to stress. Mothers who are withdrawn leave children to fend for themselves and it actually changes the chemistry of the brain, the fight or flight impulse. But the real risk as I perceived it…
>
> ,
>
> The real risk, that I'd felt my whole life, was that I would one day feel as low as my Mum had and take the same action. Because alongside the anger and incomprehension is an absolute crystal-clear understanding of why someone would no longer want to continue living (pp. 355,356).

This excerpt illustrates the psychological and physiological effects of maternal depression on the child. It provides a scientific explanation of how emotional neglect in childhood affects the chemical balance in the brain. The child becomes hypersensitive to stressful situations. "The narrator's speeches reveal that he has also contemplated committing suicide. Besides suicidal depression, the narrator manifests anxiety, vulnerability, social isolation, guilt, anger, and shame, which seem to be parallel to the basic characteristics of suicide bereavement" (Pala, 2021, p. 351).

As a child, the narrator perceives the happiness that followed his mother's ups and downs as a dangerous precursor and associates even happiness with fear. The mother's depression led the child to associate happiness with uncertainty and danger. Plus, the mother's depression can be interpreted as 'fate', and he is afraid of following the same path. This is a kind of re-experiencing: The mother's emotional breakdown remains in the child's mind as a constant risk. The trauma resurfaces as an existential fear, indicating that Caruth perceives it as a haunting presence due to the child inheriting his mother's suicidal tendencies, a phenomenon known as intergenerational transmission.

In the play, the mother figure dies in the third suicide attempt, and in this case, it is the insolubility and repetitive nature of the trauma that we encounter again. The father and son's silence on the way to the hospital persists during the funeral, symbolizing the inexpressibility of the trauma. It also represents a form of repression or an incapacity to articulate the pain. Here, the trauma manifests as a constant presence that defies verbal expression:

> (…)
>
> I drove Dad to the funeral. We sat in silence. He smoked with the window down. I helped him with his tie.
>
> After the service, meeting my Mum's friends and colleagues, I realised how much the list had changed the way I see the world.
>
> 31. Birdsong.
>
> 45. Hugging.
>
> 341. Alcohol.
>
> 577. Tea and biscuits.
>
> 1092. Conversation.
>
> The list hadn't stopped her. Hadn't saved her. Of course it hadn't (pp. 367, 368).

The list is the narrator's way of coping with her mother's depression and her own trauma. Through the list, he focuses on small but precious moments in the world. However, due to the nature of the trauma, this effort cannot provide a lasting solution. This reinforces the trauma's repetitive nature. The narrator feels defeated by the list's ineffectiveness and her inability to save her mother, which leads to the recurrence of the trauma. Each attempt by her mother delays and then resurfaces the trauma, affecting not only her but also her husband and child.

To conclude, despite the characters' occasional attempts to make sense of the trauma through actions like making lists, reshaping their experiences through narrative, or confronting the past, these efforts fall short of providing a definitive resolution to the trauma. In all three plays, while trauma is shaped by individual memory, intergenerational transmission, and the limitations of language, the timeless and unresolvable nature of trauma is emphasised, in line with Caruth's theories, because trauma by its very nature can be belated, latent, and return.

5.2. Inexpressibility of Trauma

According to Caruth, the concept of inexpressibility of trauma refers to the inability to fully articulate and describe traumatic experiences. A traumatic event is a shock or a destructive situation beyond the usual schemes of experience in the individual's life and therefore cannot be fully processed mentally or emotionally at the time of its occurrence. This leads to an incomplete or fragmented representation of the traumatic event in both individual memory and language:

> Caruth argues that traumatic events are unavailable to the conscious memory of the traumatized in the normal form in which memory operates, as narratives about events. Instead, trauma is experienced in terms of flashbacks, overwhelming feelings of anxiety, nightmares, physical tension, and physical illness. Trauma is experienced in symptoms rather than stories. These symptoms repeat themselves, as though the original trauma can never be put into the past (Alford, 2023).

In Caruth's theory, trauma is seen not only as the memory of an incident, but also as the reappearance at the unconscious level of the unrecognised dimensions of that incident. A traumatic event often remains forgotten or repressed because the individual does not have the mental and emotional resources to make sense of it when it first occurs. Due to the delayed understanding of traumatic experience, the idea of the inexpressibility of trauma has been put forward. However, the event returns at unexpected moments, through dreams, recurrent images or disturbing thoughts. This ambiguity further complicates the expression and interpretation of trauma through language.

For Caruth, the inexpressibility of trauma causes it to emerge with a kind of silence or incompleteness even when it appears in language and narrative (1996, p. 9). A traumatic experience can never be fully verbalised, no matter how much one tries to describe it, which creates a constant struggle in remembering and processing trauma

at both the individual and collective level. This inexpressibility leads to the trauma gaining a dimension that affects not only the individual but also those who listen to it and shows that trauma gains a social dimension as a shared experience.

Caruth addresses trauma with the metaphors of 'wound' and 'voice'. This approach analyses both the individual and historical dimensions of trauma within the framework of the interconnectedness of testimony and the unconscious:

> What the parable of the wound and the voice thus tells us, and what is at the heart of Freud's writing on trauma, both in what it says and in the stories it unwittingly tells, is that trauma seems to be much more than a pathology, or the simple illness of a wounded psyche: it is always the story of a wound that cries out, that addresses us in the attempt to tell us of a reality or truth that is not otherwise available. This truth, in its delayed appearance and its belated address, cannot be linked only to what is known, but also to what remains unknown in our very actions and our language (1996, p. 4).

Caruth treats trauma not only as a psychological pathology or a 'wounded mind' by referring to Freud's understanding of trauma "as a wound inflicted not upon the body but upon the mind" (1996, p. 3) but also with the metaphor of a cry from the wound that attempts to express a deeper truth. This text emphasises that trauma is not simply an event that can be consciously understood, but that it involves both known and unknown dimensions of what has happened. Trauma, with its delayed emergence and subsequent articulation, attempts to communicate a truth that cannot be directly accessed or expressed. This truth is not only limited to known events but is also related to unconscious elements hidden in the actions and language of the individual. Caruth states that trauma, in this respect, has both an individual and a universal dimension; it is not only an injury but also a story waiting to be told.

The inexpressibility of trauma aligns with Caruth's concept of belatedness, which Barry Stampfl describes as "the Caruthian concept of deferred impact, with its intimate linkage to the unspeakable" (Stampfl, 2014, p. 24). Traumatic events usually cannot be made sense of by the individual at the first moment and therefore leave a gap in the past. This void is attempted to be filled by the unexpected reappearance of the trauma, but this process can never be fully completed. Trauma involves the repetition of both the individual's past and the denied or unknown aspects of that past.

In trauma narrative, the concepts of inexpressibility and unspeakability refer to the fact that traumatic experiences cannot be told due to their nature and push the limits

of language. Since trauma is an event that exceeds the mental and emotional capacity of the individual, it cannot be both made sense of and verbalised at the moment it is experienced. These concepts, which emphasise the inadequacy and incompleteness of language in the narrative of traumatic experiences, reveal that trauma can only be represented indirectly, incompletely or repetitively through language.

Herein, Joshua Pederson claims that words cannot capture an overwhelming experience that lies beyond or beneath words. The words that come closest are the tropes of literary fiction, representing absence, indirection, and repetition. In both traumatized memory and narrative, lacunae serve as markers of traumatic experience (Pederson, 2018, p. 101). These gaps in the representation of trauma create a kind of silence and rupture in both individual memory and narrative, in accordance with the nature of the traumatic event. Thus, instead of a direct narrative, trauma is expressed in incomplete, fragmented and indirect ways, which reveals the power and limitation of the narrative at the same time.

While examining the inexpressibility of trauma through literary and psychoanalytic works, Caruth takes Freud's analysis of the 'burning child' dream as an important example: The father, dreaming of his child who died in a fire, claims that his child calls out to him, "Father, don't you see I'm burning?" At the unconscious level, the father repeatedly undergoes a traumatic loss associated with his child's death and struggles to fully process it. Caruth defines trauma in this context as an intertwined past and present that an individual cannot express through narrative but persists through recurring images and experiences (1996, pp. 98-100). She argues that consciousness cannot fully grasp trauma due to its nature and the difficulty in expressing it through language, which further supports this concept. Both theories argue that trauma leads to a temporal distortion. Freud's father figure repeatedly relives the traumatic moment (the child's burning and death) in the unconscious, whereas Caruth asserts that the interweaving of past and present experiences trauma. Therefore, Caruth's theory of the inexpressibility of trauma embodies Freud's burning child dream as they focus on interruptions in the process of understanding and expressing trauma.

Besides all these connections, the individual trauma in Freud's dream analysis, when interpreted from Caruth's perspective, becomes not only a personal wound but

also a social experience, in that one witnesses others and empathises with their wounds. Trauma thus transcends individual experience and forms a collective bond that carries the burden of the past on both an individual and social level: While the trauma gains an inexpressible existence in the memory of the individual through recurring images and narratives, it also acquires a social dimension through the exchange of these experiences.

> If traumatic experience, as Freud indicates suggestively, is an experience that is not fully assimilated as it occurs, then these texts, each in its turn, asks what it means to transmit and to theorize around a crisis that is marked, not by a simple knowledge, but by the ways it simultaneously defies and demands our witness (1996, p. 5).

By saying so, Caruth asserts that we cannot narrate trauma, but we can witness it. This witnessing involves not only the individual's effort to express their own pain but also the process of understanding and connecting with the traumatic wounds of others. About this, Dori Laub says that "the listener to trauma comes to be a participant and a co-owner of the traumatic event" (Laub, 1992, p. 57). For example, individual traumas resulting from events such as war, genocide, or social catastrophe create a collective memory through shared stories, works of art, or literary texts. This memory becomes a bond that develops empathy and solidarity between people. In this way, individual trauma creates a basis for social identity and solidarity through testimony and exchange. Therefore, it can be indicated that silence about the trauma on an individual level has the potential to develop a common language and understanding in a social context.

Ultimately, Caruth's concept of the inexpressibility of trauma focuses on the destructive effect of trauma on time and consciousness. Trauma is inexpressible or unspeakable because recurring images and experiences bring the past into the present, which cannot be fully understood at the time. Hence, trauma creates individual and social bonds by making visible not only one's own experience but also the wounds of others through witnessing and empathy. This highlights the paradoxical nature of trauma, which lies between silence and narrative: the unspeakable manifests itself in a distinct manner.

Caruth's theory of the inexpressibility of trauma allows us to examine McDonagh's *The Pillowman* by focusing on key scenes that reveal, sublimate, or

indirectly express trauma. According to Caruth, trauma resists full articulation and manifests itself as fragmented narratives, disjointed memories, or symbolic representations. The inexpressibility of trauma is evident in this play when the characters are unable to express their traumatic experiences directly but instead express them indirectly (through stories, metaphors, or symbols).

Katurian cannot directly express the violence and trauma he experienced in his childhood; instead, he processes this trauma in his dark and grotesque stories. Therefore, we can say that although it is not possible to express the trauma directly, indirect narration through storytelling is possible for Katurian. When his family's artistic experiment begins, Katurian is unaware of what is going on in the next room and thinks that what he hears are "nightmare sounds" (p. 33). Based on the story "The Writer and the Writer's Brother", Katurian is unable to express his and his brother's trauma, even in a story, he stays in silence:

> So he burnt the story, and he covered his brother back up, and he never mentioned a word of what he had seen to anybody. Not to his parents, not to his publishers, not to anybody. The final part of his parents' experiment was over (p. 34).

The violence in Katurian's stories indirectly reflects his past trauma, but these stories also create a new cycle of violence. Katurian's murder of his parents causes him to reproduce the trauma rather than resolve it. Violence arises as a consequence of the unspeakability of past trauma. In response to the traumatic truth, Katurian burns his brother's story, an act that suggests a desire to obliterate both the truth and his own feeling of guilt. Caruth's theory posits that repression occurs when trauma remains unspoken, leading to a fragmented identity, both personally and symbolically. Not telling anyone about the situation represents the inexpressibility of the trauma and the burden of this lack of expression on Katurian. Since he struggles to articulate his trauma, he resorts to silence as a coping mechanism here. In the continuation of this part, we see that his unspeakable situation turns into a kind of action including violence as a result his unruly emotions:

> …his brother he found in there, alive, as such, but brain damaged beyond repair, and that that night, whilst his parents were sleeping, the fourteen-year-old birthday boy held a pillow over his father's head for a little while… and, after waking her a moment just to let her see her dead blue husband, he held a pillow over his mother's head for a little while, too (pp. 34-35).

Katurian's murder of his parents is not only an attempt to avenge his brother's persecution but also an attempt to express his own trauma and anger. The inexpressible traumatic experience gives rise to a violent mode of expression. This scene illustrates the cycle of violence, where the victim often perpetuates the trauma by becoming another perpetrator. The anger and helplessness that come from traumatic experiences deepen rather than resolve them.

There are numerous ways to interpret the following scene from *The Pillowman* in terms of the inexpressibility of trauma and its effects on the individual. The way Michal behaves in this scene and responds to Katurian's screams demonstrates the complex ways individuals and society experience and express trauma. Michal, who endured a similar form of torture as a child many years ago, appears unable to comprehend Katurian's torture and fails to take it seriously:

> *A cell. Michal sitting on a wooden chair, tapping his thighs, listening to the intermittent screams of his brother, Katurian, being tortured a room away. A blanket on a thin mattress and a pillow lie a few yards away.*
>
> **Michal** 'Once upon a time ... a long long way away . . .
>
> *Katurian screams again. Michal mimics them at length, till they fade away.*
>
> (…)
>
> *Katurian screams again. Michal mimics till they fade, then gets up, idles around.*
>
> 'Once upon a time, a long long way away, there was a little green pig . . .' Or was it a long long way away? Where was it? *(Pause.)* Yes, it was a long long way away, and he was a little green pig…
>
> *Katurian screams. Michal mimics irritated this time.*
>
> Oh shut up, Katurian! Making me forget the little green pig story now with your screaming all over the place! (Pause.) And what did the little green pig do next? He… he said to the man… He said to the man, 'Hello… Man…'
>
> *Katurian screams. Michal just listens.*
>
> Ah, I can't do stories like you do stories, anyway. I wish they'd hurry up and stop torturing ya. I'm bored. It's boring in here. I wish . . . (p. 36)

By simplistically imitating Katurian's screams, Michal plays with the situation and ignores its seriousness. This imitation may be a sign of trauma desensitization, reflecting the lasting effects of the violence Michal has experienced. His distorted emotional perception prevents him from understanding the seriousness of the event. This reveals his inability to process and express the trauma directly.

However, Michal's the way of retelling the story stagnates from start to finish and he experiences frequent interruptions. Despite hearing her brother's suffering, Michal seeks an escape by focusing on his own story: This is in line with Caruth's theory that trauma is fragmented, incomplete, and indirect rather than narratable. As trauma victims tend to desensitize to such events, Michal, who is mentally disabled and has endured years of torture, perceives Katurian's torture as routine. While Michal's inability to recall and finish the story exemplifies fragmented memory, a topic we will delve into in the next section, it also serves as a testament to the inexpressibility of his trauma.

Regarding the police officers Ariel and Tupolski, it is already known that Ariel struggled with father issues during his childhood due to his father's sexual abuse. Although he never mentions it, Tupolski reveals the truth. Even if it is quite a sensitive issue to talk about, Tupolski tells Ariel's story callously. Meanwhile, Ariel's main focus is on torturing Katurian:

> **Katurian** Why couldn't they arrest him?
>
> **Ariel** Shh shh shh . . .
>
> **Katurian** Why couldn't they arrest him?
>
> *Ariel has cleared himself from the electrodes and is just about to turn the battery on when Tupolski, at the last possible moment, speaks.*
>
> **Tupolski** Because Ariel had already murdered him, of course. (..) Well, it wasn't really murder, was it? More like self-defence, diminished responsibility, all that. I call it murder just to tease him. Hey, I'd murder my dad if he crawled into bed with me every week from the age of eight, y'know? *(Pause.)* Mm. He held a pillow over his head while he was sleeping. I see you boys have a lot in common (pp. 81,82).

Tupolski's words and Ariel's silent response demonstrate the indirect repression and inexpression of trauma. The inexpressibility of Ariel's trauma is inevitable and understandable; therefore, he wants to silence Katurian, who is asking questions about the father. Ariel does not want to talk about the details, and he focuses on torturing Katurain with electrodes. By expressing Ariel's experience in a sarcastic way, Tupolski reveals the potential of trauma to create a cycle of intergenerational violence. Tupolski attempts to use humour to alleviate this event by teasing Ariel, but the reader concludes that Tupolski is avoiding emotional connections and masking this traumatic situation with a defence mechanism. Ariel's silence shows that his trauma is still unprocessed and unexpressed. According to Cathy Caruth, the effects of trauma are

usually unspoken and unconscious. At this point, Ariel is both a victim and a perpetrator; the abuse he endured in the past traumatized him, but he is still reenacting the violence.

The other cop Tupolski experiences a unique trauma as an adult. His sudden and indirect expression of his personal loss in the past (the death of his son) makes it clear that he is unable to fully process and articulate this loss. The traumatic experience of his son also traumatised him as a father. The scene that follows illustrates the challenges he faces in expressing this trauma and how these challenges manifest in human behaviour and relationships:

> **Tupolski** No, I… Some of your stories are very good too. I did like some of them.
>
> **Katurian** Which ones?
>
> **Tupolski** *(pause)* There was something about 'The Pillowman' that stayed with me. There was something gentle about it. *(Pause.)* And the idea of, if a child died, alone, through some accident, he wasn't really alone. He had this kind, soft person with him, to hold his hand and whatnot. And that it was the child's choice, somehow. Made it somewhat, reassuring, somehow. That it wasn't just a stupid waste.
>
> **Katurian** *(nods. Pause)* Did you lose a child?
>
> **Tupolski** *(pause)* Unlike old Ariel, I don't go into those sorts of things with the condemned.
>
> *Katurian nods. Sad pause.*
>
> Son drowned. *(Pause.)* Fishing on his own. *(Pause.)* Silly.
>
> *Katurian nods. Tupolski puts the battery back into the cabinet.*
>
> **Katurian** What happens from here on in?
>
> **Tupolski** We get the word back about the mute girl… (pp. 92,93).

As we see, Tupolski cannot directly express his grief and trauma over the death of his son. Instead, he first seeks indirect relief by referring to the story "The Pillowman". The story's idea that a child does not die alone and that there is a gentle figure at his side becomes a metaphor that helps him to confront his guilt and grief over his son's death. The story presents the boy's death as his own choice, providing Tupolski with a sense of consolation. However, this indirect narration shows that he is still struggling to come to terms with his pain and is unable to express his trauma.

Tupolski expresses the death of his son in a short and almost banal way. Cathy Caruth asserts that trauma often emerges in indirect or momentary bursts, not in a

chronological manner. Tupolski's account of his son's death confirms this theory; trauma manifests itself here as a fragmented narrative, creating a disjuncture between time and meaning. Tupolski's lack of details about his son's death, portraying it as an ordinary and ineffective case, suggests that he is attempting to conceal his trauma under the cover of professionalism.

In a way similar to Katurian, Tupolski uses the story of the wise man rescuing the deaf boy on the railway tracks (pp. 86-88) as an indirect way to communicate his unspoken traumas. Although he defines himself as a clever, competent, and successful detective, he was unable to save his own child. It is possible to interpret the figure of the wise man in the story as a representation of Tupolski, and the child he has saved is a representation of his own son.

Ridley's *Mercury Fur* explores trauma's inexpressibility through disjointed speech, fragmented memories, and haunting imagery. Characters like Elliot, Darren, and Naz grapple with events too overwhelming to comprehend, reinforcing Caruth's theory that trauma remains unarticulated and persists as an unresolved, recurring experience. Their inability to fully express their suffering highlights the psychological and emotional damage caused by trauma.

The anger and inner turmoil that Elliot feels toward Darren are due to the heavy burden of traumatic experiences that he carries. Elliot is aware of the unspeakable nature of his trauma. Darren's indifference to these experiences deepens Elliot's sense of loneliness. The language and metaphors used in this passage effectively reveal the extent of Elliot's psychological burden and its unspeakable nature:

> **Elliot** What have you got to fucking think about?
>
> **Darren** Lots.
>
> **Elliot** Lots of nothing! It's me who's got lots. Four years more lots.
>
> **Darren** Three!
>
> **Elliot** Four! I've got things from before you were fucking born. Get inside my skull. You wouldn't last a minute. You'd be screaming to get out.
>
> **Darren** Alright, alright.
>
> **Elliot** Slit my skull open. Know what it'll be like? Like slitting open the guts of a great white shark. Stuff'll come out like you wouldn't fucking believe (p. 129).

This scene supports Caruth's theory of the way in which trauma conveys the wounds it inflicts, both consciously and unconsciously. Caruth asserts that we cannot directly

express trauma; instead, it takes the form of metaphors and fragmented memories. Here, we compare Elliot's traumatic memory to the complex, disorganised, and terrifying guts of a shark. This metaphor highlights the uncontrollable and fragmented nature of trauma.

Elliot's observation that it would be unbearable for someone like Darren to try to understand the contents of his mind highlights the fact that only the individual experiencing the trauma can fully comprehend it and the challenges of communicating with the outside world. Darren's approach to minimizing or oversimplifying the trauma makes Elliot's loneliness in these experiences and the breakdown in communication even more apparent. By using the metaphor of a 'great white shark' to explain an experience of this magnitude, Elliot points out the unspeakable but ever-present nature of Caruth's trauma. Thus, metaphor and indirect expression make trauma visible, as direct description is impossible.

The individual's struggle to remember and express their experiences shapes the difficulty of narrating trauma, reflecting the unspeakable or inexpressible nature of trauma. One traumatic moment that Naz attempts to describe illustrates this situation:

> **Darren** Where is she?
>
> **Naz** She's … That's it! They killed her!
>
> **Darren** Who did?
>
> **Naz** Hang on … Hang on …
>
> **Darren** Come on, mate. You can do it.
>
> **Naz** Yeah! We was in the supermarket. Me. Mum. And … Stacey! That's her name! Stace! She's younger than me. She only comes up to about here. Mum still calls her 'baby'. There's not much food on the shelves. I hear a noise. A gang's rushing down the aisles. About ten of 'em. Couple are about my age. They've got paint or something on their faces. Bits of meat hanging round their necks. They're screaming and waving these big knife hings. Ya know? (p. 156)

Naz's hesitancy and attempt to gather his thoughts when recounting her memory underscores the challenge of recalling traumatic experiences or articulating them, even when recollected. This scene clearly shows Naz's mental struggle and hesitation in expressing a traumatic event. This situation reflects the tendency of trauma to silence the individual or make expression difficult.

Naz's narrative is disorganized and scattered, with a focus on details. Although he clearly remembers the gang members screaming and brandishing knives in the

aisles of the supermarket, he cannot articulate these details in any chronological or logical order. Caruth's theory that trauma arises from a fragmented memory that defies direct interpretation aligns with this fragmented narrative.

The grotesque details Naz recalls show how the trauma has left an indelible mark on his mind. In particular, images such as paint on faces and pieces of flesh on necks of the gang members make the horror of the traumatic events he has experienced and the destructive effects of these events on his memory even more apparent. This story powerfully demonstrates the inexpressible and fragmented nature of trauma.

The apocalyptic world of *Mercury Fur*'s is so disturbing that even remembering good things in this dystopian environment can be traumatizing. Elliot says that even the good things of the past are painful to remember because the good things are now just memories:

> (…)
> **Elliot** It's easier for the young. Naz. Darren. They remember less of … how it was. I wish I didn't remember so much. Don't you? I wish I could just bash all the good stuff out of my fucking skull. It's the good stuff that fucks you up!
>
> **Lola** Calm down, calm down (p. 192).

Caruth's idea that trauma cannot be described in a linear way and exists in a fragmented, repetitive cycle in the mind of the individual can be supported by this quote. Both negative and positive memories can reawaken trauma, leaving the individual with an even more complex emotional burden. Young people are relatively free from the burdens of the past, while older characters like Elliot carry the constant weight of the past, underscoring the devastating effect of this trauma on the individual. Elliot refrains from mentioning specific memories due to the unspeakable nature of these moments. Trauma is as difficult to express as it is impossible to forget. Lola's attempt to reassure Elliot is not a confrontation or expression of the trauma but an attempt to suppress it. This illustrates the societal context's tendency to repress or ignore trauma.

In Macmillan's *Every Brilliant Thing*, the narrator expresses his own emotional trauma not directly, but through the list. In this context, listing serves as a link between the narratable and the inexpressible. We can interpret the moments where the narrator refrains from explaining the trauma, or employs humour and everyday joy to do so, as symbols of silence and inexpressibility. In the following except, we see that trauma is

inherently inexpressible, meaning that language and words cannot adequately convey all its dimensions:

> I started shaking. Have you ever had that? Where you notice that your hands are shaking and your breathing is deeper and you're surrounded by bin bags full of your things and you realise that, you know, *I'm really upset*. I must be really upset.
>
> ,
>
> And then, inside a box under my bed, underneath some sticker albums, sea shells and action figures, I found the list. I sat on the floor and I read it through.
>
> 1. Ice cream.
>
> The younger me had dealt with this so much better. He wasn't self-righteous. The younger me was hopeful. Naïve, of course. But, hopeful. So once I got to the end of the list I picked up a pen and continued where that little boy had left off (…) (pp. 338, 339).

The narrator expresses his body's physical reaction to the trauma. What is striking, however, is that the narrator does not define the shaking he is experiencing; he just notices it. Although the narrator implies discomfort and tension, he does not directly explain the emotional origin of this physical reaction. Only physical symptoms identify the onset of the trauma, leaving words and emotional expressions inadequate. Furthermore, the narrator, while trying to grasp his emotional state, is unable to explain what he is actually feeling. This ambiguity points to the ineffable nature of trauma. The trauma leaves an impact on the person, but it is often impossible to express exactly what that impact is, or to put emotions into words.

Then there's the list, which can serve as a coping mechanism against trauma, but it also contains only small, recollectible memories of the past. We cannot describe the details, emotional and traumatic traces of the past, but we can generate a meaning through concrete objects and small details (e.g., ice cream). This list is a limited linguistic tool for expressing trauma. The narrator begins to rewrite the list he started as a child. This action is an attempt to cope with the unspeakable nature of the trauma. By continuing the list, the narrator tries to alleviate or confront the traumatic effects of the past. However, it is impossible to fully explain and understand the traumas of the past; only by adding new elements can a healing process begin.

Throughout the play, the narrator struggles to put into words the emotional turmoil and guilt he feels and turns to simple and concrete objects, especially the list, to cope with these feelings. However, as he attempts to cope with guilt, the inadequacy

of language and expression confronts him with an emotional blockage. Although writing the list provides temporary relief, it does not completely erase the effects of the past. The way in which the narrator expresses his inner conflicts underlines the unspeakable nature of trauma and the limitations of language:

> I started to be bothered by the thought that my Mum no longer loved my Dad. I put the thought out of my mind and returned to the list.
>
> 341. Cycling downhill.
>
> 342. Aromatic duck pancakes with hoisin sauce.
>
> It's common for the children of suicides to blame themselves. It's natural.
>
> 999. Sunlight.
>
> However much you know that you're not to blame, you can't help feeling like you failed them. It's not fair to feel this way. But it's natural (pp. 341, 342).

Although the narrator feels guilty, he questions the veracity of this feeling. Yet he finds it difficult to deny or fully explain guilt. Complex emotions such as guilt and failure transcend language. The narrator admits that guilt is natural yet deems it unfair. The inexpressibility of trauma and the inadequacy of language directly relate to this contradiction. Guilt remains a feeling, but the narrator finds it difficult to put it into words.

It is very difficult for the narrator to understand and express the trauma. His mother was the source of his own trauma at one point. Could the narrator find a way to express his own traumas by understanding and digesting his mother's traumas? The mother, suffering from psychological depression, finds it difficult to articulate and discuss her own trauma, leading her to attempt suicide as a means of coping. This is why the narrator strives to understand his mother's traumas and seeks a purpose for them. Since the narrator cannot fully express and make sense of any trauma, he ultimately takes refuge in his list.

The narrator deals in depth with his internal conflicts and emotional barriers in the process of accepting and expressing his trauma. Through both his inner world and his relationship with the outside world, we see how trauma is an unspeakable and unreflective experience. The play's scene where the narrator joins a group session provides another example of the inexpressibility of trauma. The following excerpt contains the narrator's difficulties in trying to both understand and express the pain of his past and how it affects his present:

This is my first session. I've resisted doing this.

I'm – you know,

,

British.

I now realise that it's important to talk about things. Particularly the things that are the hardest to talk about.

When I was younger I was much better at being happy.

At feeling joy.

Being a grown-up, being conscious of the problems in the world, about the complexities, the tragedies, the disappointments…I'm not sure I can ever fully allow myself to be joyful. I'm just not very good at it. It's helpful to know there are other people who feel the same.

I um –

I made a list. Everything that's brilliant about the world.

I began making it as a present for my Mum. It's kind of a long story (p. 365).

The narrator begins to realise the importance of talking about emotional pain. This realisation reflects an internal process for coming to terms with the trauma. Initially, the narrator accepts that opening up emotionally is challenging and frightening, but over time, she comes to recognize the healing power of the process. There is a struggle against the unspeakable nature of the trauma. The narrator discovers the importance of sharing the difficulties of trauma with others in order to cope with them. He expresses that the emotional turmoil of adulthood is deeper and that consciously feeling the pain in the world is a barrier to joy. Personal trauma makes it hard for the narrator to accept happiness. It shows that trauma tends to spread and generalize over time.

Although the traumas are still inexpressible, by coming together with other people struggling with them and recognizing that others are experiencing similar pain, she enters a process of relief and healing through empathy and solidarity. By sharing feelings with others, the expressiveness of the trauma serves as a mediator, aiding in the understanding and healing of the trauma.

5.3. Fragmentation and Incomplete Integration due to Trauma

Trauma-related fragmentation and incomplete integration refer to an individual's inability to maintain the integrity of mind and identity after a traumatic experience (Farina et al, 2019). Trauma can lead to a type of mental fragmentation by overwhelming the individual's ability to consciously process and integrate the events

experienced. According to Freud, trauma activates an individual's defence mechanisms by generating more arousal than the conscious mind can process. In particular, he associated the concept of repetition compulsion with trauma. Despite the unconscious repression of the traumatic event, the individual attempts to relive it repeatedly in various ways. However, these repetitions do not ensure the integration of the traumatic memory but, on the contrary, create splits in the individual's psychological structure (Guy-Evans, 2023). This situation leads to the traumatic memory remaining in the psyche as an unintegrated, split part.

Caruth extends Freud's theory of trauma by emphasising that traumatic experience is inherently inexpressible and incomprehensible. According to him, trauma creates a temporal and narrative disconnect in an individual's mind. This disconnection prevents the full integration of the traumatic memory. The trauma remains not only as an experience but also as a shadow of the reality that the individual is experiencing in the present. Caruth relates this situation to the inability to express the trauma and its constant return to the unconscious. Freud and Caruth agree that trauma leads to problems of fragmentation and disintegration in the individual's psyche. Freud's concepts of repression and repetition overlap with Caruth's views on the temporal and non-narrative nature of traumatic events. In both theories, trauma manifests itself as incomplete integration in the individual's identity and consciousness processes. In this context, fragmentation refers to the fact that the traumatic event causes divisions in the individual's mental structure, while incomplete integration refers to the inability to integrate these fragments into a whole. These theories help us to understand the deep and lasting effects of trauma on the individual's life.

Caruth's trauma theory provides an important framework for understanding defence mechanisms against trauma and their impact on an individual's psychological integrity. Caruth defines trauma as an experience that disrupts time, memory, and identity, preventing the individual's consciousness from fully processing it. In this context, fragmentation and incomplete integration are the results of defence mechanisms that the individual develops against trauma.

Drawing on Freud's work on trauma, Caruth notes that trauma has two major effects on the individual: unconscious repression and repetition compulsion. In the

chapter on Freudian theory, we discussed how unconscious repression occurs when a traumatic event surpasses an individual's psychic capacity, leading to its direct repression into the unconscious and subsequent attempts to forget. However, this forgetting does not lead to healing; on the contrary, the trauma remains unprocessed in the unconscious and causes fragmentation. According to Caruth, in the case of repetition compulsion, trauma manifests itself through behaviours or dreams that the individual cannot consciously recall but repeat involuntarily. These repetitions reinforce the fragmentation, not the integration, of the trauma.

For Caruth, these defence mechanisms are an attempt to protect the mental and emotional integrity of the individual, but they prevent the integration of the traumatic memory and lead to incomplete integration. Therefore, the traumatic experience constantly returns and distorts the individual's perception of reality in the present.

Theorists such as Dominick LaCapra and Shoshana Felman have enhanced Caruth's work on defence mechanisms. LaCapra developed the terms 'acting out' and 'working through' to explain the effects of trauma on individuals and to conceptualise ways of dealing with these effects: Acting out is a process in which the individual unconsciously relives the traumatic experience. This makes it difficult to distinguish the past from the present by reliving past events. The traumatic event continues to intervene in an individual's life through recurring dreams, behaviours, or memories (2001, pp. 21, 22). Freud's concept of the compulsion to repeat associates this process with the fragmentation of time perception, trapping the individual in the past.

In contrast, working through is a process that allows the individual to make sense of the traumatic experience and to distinguish between past, present, and future. He explains that working through means confronting the past and integrating it into the individual's story. The process aims to establish a sustainable relationship with the past, rather than to forget or overcome it completely. Working through the trauma helps the individual become an ethical and responsible subject in their present life by looking at it from a critical distance (2001, pp. 21-23). LaCapra contends that we should understand acting out and working through as complementary processes, not as opposing concepts. While working through shows that acting out can be stopped, it does not erase the past.

Additionally, in the context of literature and testimony, Shoshana Felman explores the defence mechanisms of trauma, addressing the challenges in expressing it. She argues that even when testimony attempts to express trauma, it remains incomplete and fragmented, mirroring the inherent fragmentation of trauma. Also, she argues that the individual's refusal to testify or the use of incoherent, disorganised language during the narrative is a sign of difficulty in processing the traumatic experience (1992, pp. 12, 13), and in this sense she supports Cathy Caruth's idea of the inexpressibility of trauma; according to her, defence mechanisms that emerge in traumatised individuals further reinforce the traumatic silence and make it difficult for the individual to make sense of the experience. Felman's perspective underscores the importance of treating trauma in literary and testimonial narratives not just as an individual issue, but also as a collective one, and acknowledging the gaps and silences inherent in these narratives.

Caruth's theory of trauma relates the concepts of narration and narrating trauma to the unprocessed nature of traumatic experience. According to Caruth, at the heart of trauma is the disruption of time, memory, and identity. This situation both makes it difficult to transform the traumatic experience into a narrative and creates a deep fragmentation and incomplete integration in the individual.

Caruth defines trauma as a "wound of the mind" (1996, p. 4). The traumatic experience creates such a deep disruption in the mental structure of the individual that it becomes inexpressible through language. The inability to express the trauma prevents the individual from transforming what has happened into a narrative, and the traumatic event remains unprocessed in the mind. As a result, traumatic memories exist in a split between the individual's conscious and unconscious minds. This split implies that the trauma remains unnarrated and fails to attain mental integrity. In addition, the trauma causes the individual to be unable to keep past and present perceptions together. The traumatic moment persistently resurfaces in the present, refusing to remain a part of the past. This disrupts the timeline of the narrative.

Caruth argues that the traumatic experience is beyond the individual's language and meaning, making it impossible to fully integrate. As a result, the narrative becomes disjointed, incomplete, and occasionally incoherent. Trauma is an experience that eludes expression, and Judith Herman explains the situation as follows: "As the

narrative closes in on the most unbearable moments, the patient finds it more and more difficult to use words" (1992, p. 126). This unspeakable silence limits the individual's ability to integrate the experience, resulting in incomplete integration. Caruth contends that attempts to describe trauma frequently exhibit a cyclical and repetitive structure. The narrative emerges with these repetitions, demonstrating the inability to fully process the event and make the narrative whole.

According to Caruth, narrating trauma can be both a healing tool and a process that reproduces fragmentation and incomplete integration. By connecting fragmented memories, narrating the trauma can facilitate the individual's search for meaning and wholeness, thereby offering a potential for healing. In line with LaCapra's concept of working through, the effort to create a narrative of trauma can help the individual restore the integrity of identity and memory.

However, Caruth contends that it is impossible to fully narrate trauma due to its very nature because it is something like "to narrate the unnarratable" (Whitehead, 2011, p. 4). Traumatic memories always remain outside the narrative like a shadow. The inability to fully integrate the individual's experience and the perpetuation of incomplete integration serve as evidence of the narrative's limitations and challenges:

> (…) what may most complicate the capacity to communicate about traumatic experiences is that memories of trauma may have no verbal (explicit) component whatsoever. Instead, the memories may have been organized on an implicit or perceptual level, without any accompanying narrative about what happened (Van der Kolk, 2007, p. 287).

Yet again, even when it is impossible to narrate, trauma manifests itself through a kind of incompleteness or silence. This means that any narrative in which individuals attempt to express trauma is incomplete or fragmented.

Caruth's concept of double telling is central to understanding the ineffability and fragmentation of trauma. The function of this concept reveals the link between trauma, fragmentation, and incomplete integration. For her, "(…) double telling, 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" (1996, p. 7). Therefore, we can indicate that double telling refers to both experiencing a traumatic event as a memory in the past and re-experiencing it in the present, which makes integration of the trauma difficult and perpetuates fragmentation.

According to Caruth, the traumatic moment fails to acquire a continuous meaning in consciousness, dividing the individual's perception of time and memory between the efforts of remembering and re-experiencing. So that, the traumatic event cannot become a narrative; it remains in memory only as disjointed fragments. The cycle of re-experiencing in the present does not facilitate the processing of the trauma; on the contrary, it deepens the un-narration and fragmentation.

The double telling also results in an incomplete integration of the trauma. The nature of trauma, which transcends the limits of language, prevents the individual from making sense of the experience through narrative; any narrative effort is incomplete. Caruth posits that we cannot process trauma as a mental whole, and the double narrative highlights this insolubility. Thus, fragmentation and incomplete integration reveal the narrative complexity of trauma.

According to Caruth, double telling represents one of the most fundamental problems in the narrative nature of trauma: The trauma cannot remain as an event in the past and, at the same time, cannot be fully expressed in the present. This double situation causes the trauma to create both fragmentation and incomplete integration in the individual. Double telling both reflects and deepens this fragmentation and incomplete integration, making visible both the effort to transform trauma into narrative and the limits of this effort.

Consequently, contemporary British drama often represents Caruth's concept of the inexpressibility of trauma through fragmented narrative structures, incomplete dialogue, powerful metaphors, and staging techniques that evoke the silence of trauma. Not only do plays like *The Pillowman*, *Mercury Fur*, and *Every Brilliant Thing* depict the effects of trauma, but they also convey the idea that trauma is an experience that defies direct expression. Caruth's theoretical framework therefore has a strong resonance in contemporary drama texts an.

Analysed in terms of Caruth's concepts of incomplete integration and fragmentation, *The Pillowman* reflects Katurian's attempt to deny his own traumatic past and to consciously ignore the connection between trauma and the dark themes in his stories. The scene that follows demonstrates the storyteller's refusal to acknowledge the effects of trauma, despite their inevitable appearance in his work:

Katurian I don't have themes. I've written, what, four, hundred stories, and maybe ten or twenty have children in?

Tupolski Have murdered children in.

Katurian So, what, this is about stories with murdered children in? Do you think I'm trying to say, 'Go out and murder children?'

Tupolski I'm not saying you're trying to say 'Go out and murder children.' (*Pause.)* Are you trying to say, 'Go out and murder children'?

Katurian No! No bloody way! Are you kidding? I'm not trying to say anything at all! That's my whole thing.

Tupolski I know, I know, your whole thing, the first duty of a storyteller is to…

Katurian Yes… (p. 16)

The unconscious later repeats an experience in fragmented form that it did not fully perceive at the time of trauma. The cycle of violence in Katurian's stories is an unconscious expression of his childhood trauma. In this context, the fact that Katurian sees the theme of 'murdered children' in his stories as a random event is indicative of the fragmentation created by trauma in the individual. Katurian argues that his stories are merely fictional and have no message. This defence, however, results in his inability to fully understand the effects of his past traumas, which appear unconsciously in the subtext of his stories. Katurain's traumas prevent him from completing his integration, leading to a fragmented perception of reality.

The perception and expression of trauma in individuals and the contradictions it creates in interpersonal communication lead to a fragmented reality and fractures of meaning. The different ways in which Michal and Katurian experience trauma show how fragmented and contradictory the individual effects of trauma can be:

Katurian Did yours hurt?

Michal Did my what hurt?

Katurian When they tortured you.

Michal They didn't torture me.

Katurian What?

Katurian looks him over for the first time, seeing there are no cuts or bruises.

Michal Oh, no, the man said he was going to torture me, but I thought, 'No way, boy, that'd hurt,' so I just told him whatever he wanted to hear, and he was fine then.

Katurian But I heard you scream.

Michal Yes. He asked me to scream. He said I did it really good.

Katurian So he just told you what to say and you agreed to it?

Michal Yeah (p. 38).

Even in the absence of physical trauma, Michal's statement reveals the powerful effects of mental manipulation and fear on the individual. According to Caruth, trauma does not have to leave a physical scar; such experiences can remain in the unconscious and affect the individual's perception of reality in a fragmented and contradictory way. The fact that Michal describes the interrogation process in condescending and banal language shows that he is unable to fully comprehend and make sense of it on a mental level.

Caruth's theories suggest that the individual's memory incompletely retains the trauma's structure, which is impossible to narrate and consciously integrate. Michal's attempt to simplify the interrogation process and his description of the situation indicate that he is mentally unable to comprehend the experience and fully process the emotional impact. This emphasises that trauma is not just a personal issue, but also a phenomenon that incompletely spreads among individuals, potentially distorting their understanding of reality.

Michal's response to the trauma can be characterized by a fragmented perception of reality and a lack of empathy. The fact that he describes the act of killing the children in an almost curious tone as an ordinary event shows how the trauma has distorted his perception of reality:

Michal (…) I know it was wrong. Really. But it was very interesting. The little boy was just like you said it'd be. I chopped his toes off and he didn't scream at all. He just sat there looking at them. He seemed very surprised. I suppose you would be at that age. His name was Aaron. He had a funny little hat on, kept going on about his mum. God, he bled a lot. You wouldn't 've thought there'd be that much blood in such a little boy. Then he stopped bleeding and went blue. Poor thing. I feel quite bad now, he seemed quite nice. 'Can I go home to my mummy, now, please?' But the girl was a pain in the arse. Kept bawling her eyes out. And she wouldn't eat them. She wouldn't eat the applemen, and I'd spent ages making them. It's really hard to get the razor blades inside. You don't say how to make them in the story, do ya? I checked. So, anyway, I had to force 'em down her. It only took two. Not being mean, but at least that shut her up. (Pause.) It's really hard to get out of your clothes, isn't it, blood? You try washing your shirt tomorrow. It'll take ages. You'll see. *(Pause.)* Katurian? *(Pause.)* I'll wash it for ya, if you want. I'm getting quite good at it.

Katurian *(pause. Quietly)* What did you do it for?

Michal Huh? You're mumbling. (…)

Katurian What did you do it for?

Michal You know. Because you told me to.

Katurian *(pause)* Because I what?

Michal Because you told me to (pp. 48,49).

Although he admits that killing the children is wrong, the fact that he describes it as an interesting experience shows his lack of emotional responsibility for his actions and his inability to make a moral judgment. Michal perceives his own acts of violence as a play or a story because he cannot fully process the trauma. Focusing on the physical details of the children's deaths, like the amount of blood or the effect on the clothes, completely obscures the moral dimension of the trauma, replacing it with a fragmented perception of reality. Michal justifies his actions by directly linking his motive for killing children to Katurian's stories. Often not consciously articulated, trauma manifests itself in a repetitive cycle through repressed behaviours and narratives. Michal misinterprets Katurian's attempt to work through his trauma in his stories, leading to tragic consequences.

Katurian finds it difficult to accept the idea that his stories have triggered such violence. This confrontation reveals the incomplete integration of the trauma. The realization that his own story had devastating consequences deepens Katurian's emotional breakdown. This interaction between Michal and Katurian shows how trauma has devastating effects on both an individual and a relational level.

Caruth's work frequently discusses how trauma undermines a person's sense of self and narrative continuity, resulting in fragmented memories and an inability to fully integrate past experiences. This leads to disjointed and confused memories of their trauma. *Mercury Fur* serves as an exemplification of the impact of both trauma and substance (butterfly) use on memory. Darren, in particular, is unable to remember events clearly and has no clear idea of specific memories from the past. Memory fragmentation and incomplete integration contribute to the confusion of events:

Naz So when did the butterflies start?

Darren Don't remember much about it myself but … the first butterfly – and I'm gonna cock all this up, I know – but the first butterfly was white, I think.

Naz Ain't seen one of them.

Darren Ain't around any more.

Naz You ever see one?

Darren I … I think so. Ain't sure. Elliot has. He remembers lots and lots. His brains are like the guts of a great white shark. So… well, I might just be remembering what Elliot told me about the first butterfly and the sandstorm stuff.

Naz What sandstorm stuff?

Darren Fuck me. Yeah. *What* fucking sandstorm stuff? It all gets mixed up in me head. I lose the thread. Ya know?

Naz Yeah.

Darren There was a white butterfly. And … there was a sandstorm. One has something to do with the other but … Oh, fuck it, you'll have to ask Ell (pp. 154,155).

The extract above illustrates this, showing Darren's unclear and confused memories of the white butterfly and the sandstorm. Darren's words imply a type of mental confusion stemming from the incomplete integration of memories into fragments. His difficulty in making connections between memories is also an indication of this incomplete integration, which leads to Darren not having a clear understanding of his past.

The dialogue below between Darren and Elliot presents an example of memory functioning in an interrupted and confused way, bearing the traces of trauma and devastating events of the past. More importantly, Darren is (ab)using the butterfly just so he can forget. Darren's recollection of his memories reflects both an inner unresolvedness about the past and the effects of trauma on memory:

Darren (…) The burnt flat! Ell? Ell?

Elliot What?

Darren We parked the car by the burnt flat.

Elliot He remembers! Well done, brov.

Darren What a fire that must've been, eh? Like to've seen that. The way he fire burns the old curtains and … the smell of petrol … and … Ell! Ell! I *did* see it! The fire! We *both* did! Shit! I remember now. (…)

Elliot What's that?

Darren The burnt flat! It's where we had the last party, weren't it?

Elliot Well done.

Darren I remember … you splashed petrol all over the place. You struck a match. Everything burnt up. We always burn everything up after a party, don't we, Ell?

Elliot Yeah.

Darren We watch everything spark up and melt and –

Elliot Darren! That's enough. Just … just tidy the flat. Please (pp. 137,138).

Darren's process of remembering is a kind of mental epiphany and re-emergence of memories. However, this recollection is scattered and unclear at first; as he tries to recall the impact of the event, he slowly begins to clarify his memories because the influence of the butterfly fades. The mind processes a traumatic event in an interrupted and dispersed manner, rather than as a whole, reflecting Caruth's concept of fragmentation. Elliot wants to keep the effects of the past on the surface, not bring them up again, and get on with his normal life. This symbolises the pressure that trauma and the past place on an individual, and how it leads the mind to seek escape. Elliot wants to avoid reliving these traumatic memories because they could further damage their mental health.

The disintegration and fragmentation of the Duchess character's memory provides a profound example of trauma and identity crisis. The way in which Duchess remembers herself seems to be both psychological and traumatic. She even tries to complete her story by asking Spinx what she cannot remember about herself:

> **Duchess** A nun! Yes. I *was* a nun, wasn't I? The voice in my head told me to join this convent in the mountains. Oh, how I loved it there. I would walk in the mountains and hills. Yes! That's what I was getting at, wasn't it, Papa? The mountains made me sing! – Oh, Papa! A song! Throat! Bubbles!
>
> **Spinx** No, Duchess.
>
> **Naz** What happened next, Duchess? You're a nun … then what?
>
> **Duchess** Then … what?
>
> **Spinx** You're not a good nun, are you, Duchess?
>
> **Duchess** … No.
>
> **Spinx** Always late for prayers. The Mother Superior sends for you and –
>
> **Duchess** The Mother Superior sends for me. She says, 'Are you sure you want to spend the rest of your life married to Christ?' I have to admit I'm not sure. The Mother Superior says I should … says I should … A castle! Papa? How did this happen? I'm in a castle, I think. A castle by white cliffs. How?
>
> **Spinx** You've been sent to the castle by the Mother Superior.
>
> **Duchess** … Yes. The castle … it belongs to a man … I marry him. We have children. Two boys. I sing to them. 'Do-re-mi.' We are all so happy. 'Do-re-mi-fa-so-la-ti-do!' (pp. 218,219).

In the excerpt, the Duchess remembers being a nun, but these memories are very vague and unstable. In a state of mental confusion, she identifies herself as a nun, then

suddenly finds herself in a castle, married to a man and with children. Caruth's concepts of fragmentation and incomplete integration directly relate to this situation. There is no logic or continuity to the flow of events, just a mixture of scattered memories and imagination. This exemplifies how incomplete integration shapes memory and identity. This ambiguity in the Duchess's mind- the difficulty in bringing together the past and present- reflects the fragmentation and lack of integration in her mental world. In the continuation of this scene Duchess all of a sudden start to curse on Nazis:

> **Duchess** Nazis!
>
> **Spinx** No more, Duchess.
>
> **Duchess** Where have they come from, Papa? I'm all lost again. How did I end up here? Fucking blackshirt fucking Nazis! Distant bombs. People being cooked in ovens. Lampshades of human skin.
>
> **Spinx** It's alright, Duchess. Shush now (p. 219).

The confusion and trauma in the Duchess's mind become much more apparent, and the way she expresses her memories with horrific and shocking images shows how deep trauma from horrific events in the past has affected her. Duchess' mental turmoil clearly shows how past traumas lead to fragmentation over time and how they appear in a fragmented, fragmentary form in one's memory. These moments reflect the complex fragmentation and incomplete integration of her identity and reality. In this case, it is possible to see how trauma transforms one's identity and how the horrific events of the past intersect with modern life. We can see the Duchess' confusion and trauma as an incomplete integration of both personal and collective memory. Besides, this traumatic memory of their mother is important for understanding how Elliot and Darren were traumatised and what these boys went through.

Lastly, we can talk about *Every Brilliant Thing* in the light of Caruthian concepts: The narrator's account of events reflects his fragmented memory and emotional experience. Trauma, as Caruth suggests, disrupts time and coherence, and the play's structure reflects that. The narrator's memory of his mother's suicide attempts is characterized by disjointed emotions and incomplete understanding. The story of Sherlock Bones, the family dog, reveals the narrator's first encounter with death. The disjointed description of the dog's death mirrors the narrator's fragmented understanding of loss and finality as a child:

> I held Sherlock Bones, who I'd known my entire life. I held him as he died. (…)
>
> And I thought about the walk we'd had that morning. And about the smell of him in my room. His toys in the garden. The recently opened packet of dry food. His bed under the stairs. All the things that could now be thrown away. (…)
>
> And he became lighter. Or heavier, I'm not sure. But different (p. 327).

The narrator oscillates between sensory and emotional elements while trying to understand this experience. Caruth emphasizes that people often struggle to understand traumatic experiences immediately, leading to a fragmented emergence of the event's meaning over time. The use of physical terms like lightness or heaviness is an attempt to concretize an emotional loss. However, this effort fails due to the inability to fully grasp the meaning.

Although the narrator tries to embody the sudden sense of absence brought by death, he cannot fully grasp the meaning of this event. This highlights the fundamental characteristic of trauma, which is the sense of inexpressibility and incompleteness. The death of Sherlock Bones serves as a microcosm of the greater traumatic experience of the mother's death that will come later. This relatively small-scale loss demonstrates the inadequacy of the narrator's attempts to make sense of it and its impact on her broader life.

Later on, we see that the narrator calls Mrs Patterson, his teacher who used to have a sock puppet. The dialogue between them is of importance for the reason why he tries to remember something from his childhood by talking to that sock-puppet dog Mostyn:

> SOCK : Hello.
>
> NARRATOR : Hello Mostyn. How're you? I'm fine, how're you? Well, I'm talking to a sock dog on the phone, so apparently not great.
>
> ,
>
> I'm sad.
>
> I'm really sad Mostyn and I don't know how to change that. And I wanted to speak to you because when I was a little boy you knew me better than anyone. I wanted to ask you: was I always like this? Do you remember what I was like?
>
> SOCK : Yes.
>
> NARRATOR : Was I happy? (pp. 363,364)

This scene reveals deep inner conflict and fragility through the narrator's transformation into Mostyn, a puppet dog who symbolizes the security and comfort of

childhood during an emotional crisis. The narrator, at a point in adult life where they cannot cope with the sadness and helplessness they encounter, returns to childhood and speaks with Mostyn. The return to simpler, less complex sources of trust from childhood shows how trauma resonates cyclically in an individual's past. The narrator tries to learn a fundamental truth about himself: "Was I happy?" This shows how trauma disrupts a person's self-perception and leads to a search for continuity in identity. Furthermore, his inability to recall his childhood feelings indicates a fragmented memory.

In conclusion, Caruthian concepts such as belatedness and return of trauma, inexpressibility of trauma, and fragmentation and incomplete integration can be examined through the traumatic characters in contemporary English drama with the like *The Pillowman*, *Mercury Fur*, and *Every Brilliant Thing*.

6. CONCLUSION

In this thesis, the issue of childhood trauma is examined by modern British playwrights Martin McDonagh, Philip Ridley, and Duncan Macmillan via their portrayal of the many ways in which children may be under the profound impact of various circumstances in their plays. The playwrights, via their respective works *The Pillowman*, *Mercury Fur*, and *Every Brilliant Thing*, engage in a thoughtful examination of the many factors and reasons behind childhood trauma, providing a detailed investigation of its origins and expressions. Each of these playwrights depicts certain forms of trauma experienced by youngsters, highlighting the exceptional and often distressing situations that influence the lives of their characters.

This thesis employs a Freudian approach to trauma theory, and the analysis focuses on characters haunted by their childhood traumas. We have explored the causes underlying why and how a child develops trauma, in conjunction with Caruth's theory of literary trauma and narrating trauma, which emphasises the telling and displaying of childhood traumas in contemporary British drama.

Firstly, analysing childhood trauma within the framework of Freud's theories allow us to understand the effects of trauma at the subconscious level in the plays. The repression of negative experiences in childhood and pushing them into the subconscious is reflected in the behaviours and thoughts of the characters in these plays. The play *The Pillowman* reveals that stories, in particular, serve as a mechanism for the repetitive and unconscious self-expression of trauma. Similarly, *Mercury Fur* presents a structure in which violence and obsessive behaviours gain meaning within the framework of Freud's concept of repetition compulsion. As we read these plays within the context of Freudian concepts, it is observed that the characters in these plays are unable to get rid of the unconscious effects of trauma.

In one of McDonagh's plays, such as *The Pillowman*, the protagonist Katurian, a writer of extreme horror short stories, illustrates the impact of childhood adversity. Thus, the play's incidents portray the hero's nature, the impact of past devastating incidents on his current affairs, and his creativity.

Similarly, Ridley's *Mercury Fur* explores the theme of distrust and the absence of a parental figure, stemming from a challenging childhood in a post-apocalyptic world. Living in a harsh environment, this play portrays the characters' attempts to

reconcile with their world, which has profoundly impacted them, as revealed through a step-by-step breakdown of the plot. It is also important to note that Ridley chose the technique of a fractured keep, which allows them to reconstruct disruptions that shatter continuity in the characters' lives.

Every Brilliant Thing by Macmillan also considers the concept of childhood trauma and focuses on a child's ability to stand back up and create. In the novel, the so-called list of brilliant things becomes the chief life-saving strategy for the protagonist, who faces the problems connected with her mother's mental disease and her suicide. By creating the list, he manages to instil a sense of hope and purpose in his life, thereby affirming that writing can lead to healing.

The propensity for traumatised people to subconsciously relive unpleasant experiences or feelings without finding a way to overcome them is brought to light by Freud's idea of repetition compulsion. Similar to Caruth's theory that trauma is often "unclaimed" (i.e., not completely understood or "owned" by the person), this thought suggests that victims of trauma are more likely to relive certain parts of the event rather than move on.

Through his stories in *The Pillowman*, Katurian embodies a type of repetition addiction, reliving the anguish of his youth at the hands of his abusers. As a coping mechanism for their horrifying and disordered reality, the characters in *Mercury Fur* resort to violent and horrific activities. They feel imprisoned in an unbreakable loop from which they are unable to break free. As a means of dealing with and trying to make sense of the pain caused by his parents' sadness, the protagonist of *Every Brilliant Thing* keeps listing reasons to live. According to what Caruth says, the characters' persistent battle with unclaimed trauma is reflected in this recurrent behaviour.

Katurian uses storytelling in *The Pillowman* as a way to process his own suffering while also shedding light on the painful experiences of others. These tales mirror Caruth's concept of narrative gaps in their ominous, nebulous presentation of human experience. Characters in *Mercury Fur* have trouble presenting the whole tale of their terrible pasts because to dystopian storytelling and fragmented recollections, which serve to demonstrate the enduring repercussions of trauma. As a coping mechanism for her despair, the protagonist in *Every Brilliant Thing* uses list-making

to show the reader both the immediate effects of trauma and the long-term psychological damage it causes.

In *The Pillowman*, the protagonist's background and the unsettling tales he narrates highlight the centrality of childhood trauma to the storyline. The protagonists of *Mercury Fur* are adults whose aggressive and hopeless behaviour is shaped by the horrific traumas they had as children in a post-apocalyptic society. Witnessing a parent's despair as a kid has a devastating effect on the protagonist's outlook on life and mental health over the course of *Every Brilliant Thing*.

By applying Freud's and Caruth's theories to *Mercury Fur*, *Every Brilliant Thing*, and *The Pillowman*, we may see how these plays mirror the enduring impact of traumatic experiences in infancy. Both Freud's and Caruth's theoretical views on the effects of trauma on memory, identity, and behaviour are reflected in the characters' narrative structures, emotional reactions, and coping methods. Freud and Caruth's contributions to trauma theory are still relevant today since these works show how trauma affects people's minds and how it may be communicated and interpreted in complicated ways.

The use of defence mechanisms also reveals notable differences and similarities between the plays. In *The Pillowman*, the characters make extensive use of Freudian defences, such as repression and projection. The story writer Katurian signifies his traumas thanks to the stories behind metaphors and fictions in order to hide or make sense of his trauma. This suggests the use of indirect means rather than directly addressing the trauma. *Mercury Fur*, on the other hand, focuses on the mechanism of denial rather than repression; the characters often ignore their traumatic irregularities and try to escape these problems through destructive behaviour. In *Every Brilliant Thing*, the mechanisms of idealisation and humour are prominent; the narrator uses positive memories and jokes as a shield to make sense of his trauma and create a more worthwhile life.

The primary distinction between these plays lies in the expression of their defences. While *The Pillowman* has a dark and frightening tone, *Every Brilliant Thing* is optimistic and hopeful. *Mercury Fur*, conversely, hovers between these two extremes, portraying a violent and pessimistic environment. However, one of the similarities between the plays is the use of defence mechanisms as a coping strategy

for the characters' traumas. These mechanisms allow us both to understand the psychological states of the characters and to analyse the ways in which trauma is transformed into artistic narrative.

Caruth's trauma theory emphasises the belated effects, inexpressibility, and fragmentation of memory because of trauma. Caruth draws attention to the fact that trauma is not only an individual but also a social problem. In this context, the play *Every Brilliant Thing* deals with how childhood trauma shapes the individual's self-perception and environmental relations. The fact that trauma is both an individual and a social burden is emphasised with different narrative techniques in the expression of trauma in these plays. While the concept of belatedness reveals the temporally delayed effects of trauma in *The Pillowman* and *Mercury Fur*, violence and pessimism are presented as a result of this latency.

Freud's and Caruth's concepts of trauma present striking differences and similarities between the plays. While Freud's concepts such as repetition compulsion and repression are particularly evident in *The Pillowman* and *Mercury Fur*, Caruth's approach, which focuses on belatedness and inexpressibility, has a more dominant place in the emotional infrastructure of *Every Brilliant Thing*. *Mercury Fur* embodies these repetitions through violence and destructive actions, whereas *The Pillowman* presents a dynamic where stories repeatedly reflect subconscious traumas. *Every Brilliant Thing*, on the other hand, moves away from Freud's pessimistic tone and focuses on Caruth's idea that trauma cannot be made sense of but can be healed through narrative. The multidimensionality of trauma expression in the plays strikingly reflects these different approaches.

All three analysed plays create deep awareness in the audience by reflecting the effects of childhood trauma on adulthood through different frameworks and aesthetic strategies. While *The Pillowman* presents the roots of trauma through dark stories, *Mercury Fur* emphasises the effects of trauma through violence and chaos in a post-apocalyptic environment. *Every Brilliant Thing*, on the other hand, takes a more hopeful approach, addressing the healing aspects of trauma and the possibility of overcoming it through individual efforts.

In conclusion, these contemporary British drama examples dealing with childhood trauma reveal the complexity of trauma in its social and individual

dimensions. Analyses based on Freud's and Caruth's approaches have provided new perspectives for understanding the effects of these traumas on human psychology. These plays serve as tools for the audience to understand and empathise with childhood traumas. Therefore, this study demonstrates the importance of addressing childhood traumas through the arts and the critical role that theatre plays in this regard.

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ÖZGEÇMİŞ

Kişisel Bilgiler

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Uyruğu : T. C.

Eğitim

Derece	**Eğitim Birimi**	**Mezuniyet tarihi**
Yüksek Lisans	Ankara Hacı Bayram Veli Üniversitesi	Devam ediyor
Lisans	Hacettepe Üniversitesi	2018
Lise	Fatih Sultan Mehmet Lisesi	2014

İş Deneyimi

Yıl	**Yer**	**Görev**
2024	Atılım Üniversitesi	Öğretim görevlisi
2023	New British Center (Roma)	İngilizce öğretmeni
2021-2023	Bilimsel Tıp Yayınevi	Yayın koordinatörü
2020-2021	Piri Reis Anadolu Lisesi	İngilizce öğretmeni
2018-2020	Active English	İngilizce öğretmeni

Yabancı Dil

İngilizce – C2

İtalyanca – A2


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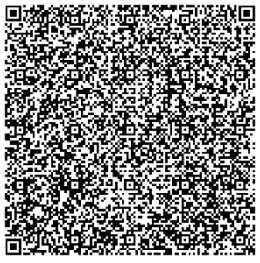


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