



**SHOCKED BEINGS: A STUDY OF PTSD IN SAM
SHEPARD'S *STATES OF SHOCK* AND BRYONY
LAVERY'S *FROZEN***

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MASTER OF ARTS
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TABLE OF CONTENTS

TABLE OF CONTENTS.....	1
THESIS APPROVAL PAGE.....	3
DECLARATION	4
FOREWORD	5
ABSTRACT.....	6
ÖZ	7
ARCHIVE RECORD INFORMATION.....	8
ARŞİV KAYIT BİLGİLERİ (in Turkish).....	9
SUBJECT OF THE RESEARCH.....	10
PURPOSE AND IMPORTANCE OF THE STUDY	10
HYPOTHESIS OF THE RESEARCH / RESEARCH PROBLEM	10
SCOPE AND LIMITATIONS.....	10
1. INTRODUCTION	11
1.1. Trauma and Post Traumatic Stress Disorder (PTSD)	11
1.2. Trauma Theory	23
1.3. PTSD in Literature	26
2. PTSD IN SAM SHEPARD'S <i>STATES OF SHOCK</i>	34
2.1. Introduction.....	34
2.2. Synopsis	35
2.3. Symptoms of PTSD Exemplified Through Characterization	41
2.3.1. Stubbs	42
2.3.2. Colonel	44
2.4. Healing and Recovery from PTSD in Sam Shepard's <i>States of Shock</i>	46
3. PTSD IN BRYONY LAVERY'S <i>FROZEN</i>	50
3.1. Introduction.....	50

3.2. Playwright's Intent to Address Post-Traumatic Stress Disorder (PTSD)	53
3.3. Exploration of PTSD Symptoms in <i>Frozen</i>	55
3.4. Child Abuse as the Basis for the Exploration of PTSD Symptoms	57
3.5. PTSD Representation Through Characters	59
3.5.1. Ralph Wantage	60
3.5.2. Agnetha Gottmundsdottir	63
3.5.3. Nancy Shirley and Ingrid Shirley	66
3.6. Healing and Recovery from PTSD in Lavery's <i>Frozen</i>	68
CONCLUSION	73
REFERENCES	76
CURRICULUM VITAE	81

THESIS APPROVAL PAGE

I certify that in my opinion the thesis submitted by Emad Fadhil Kadhim ALJANABI titled “SHOCKED BEINGS: A STUDY OF PTSD IN SAM SHEPARD’S *STATES OF SHOCK* AND BRYONY LAVERY’S *FROZEN* is fully adequate in scope and in quality as a thesis for the degree of Master of Arts

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This thesis is accepted by the examining committee with a unanimous vote in the Department of English Language and Literature as a Master of Arts thesis. June 12, 2023

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The degree of Master of Arts by the thesis submitted is approved by the Administrative Board of the Institute of Graduate Programs, Karabuk University.

Prof. Dr. Müslüm KUZU

Director of the Institute of Graduate Programs

DECLARATION

I hereby declare that this thesis is the result of my own work and all information included has been obtained and expounded in accordance with the academic rules and ethical policy specified by the institute. Besides, I declare that all the statements, results, materials, not original to this thesis have been cited and referenced literally.

Without being bound by a particular time, I accept all moral and legal consequences of any detection contrary to the aforementioned statement.

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Signature :

FOREWORD

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As a tribute to my good friend Zainab and her beloved husband, who both died in the earthquake, in honour of the love and friendship they brought into our lives, this thesis is dedicated.

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ABSTRACT

Wars, disasters, human suffering, and pain have a graver impact on our physiological and psychological well-being than we used to think. The scars they leave may even last for a lifetime. For this reason, studies of trauma and PTSD have recently increased because scholars in those fields have become aware of the impact they leave on our lives. This study aims at exploring the role and impact of PTSD on the characters in two plays. The study shows the different sources of PTSD and their various effects on the characters. While Bryony Lavery's *Frozen* shows the impact of childhood trauma in triggering the symptoms of PTSD, Sam Shepard's *State of Shock* displays the impact of war in effecting the severe symptoms of PTSD. Both playwrights aim to reveal the deplorable and devastating lives of the characters who suffer from PTSD. Not only do the patients with PTSD suffer from the bearing of this disease, but also their families, societies and almost everyone around them. The study falls into three chapters and a conclusion section. The first chapter substantiates the study's theoretical framework by surveying the most salient theories and studies in trauma and PTSD. The second chapter deals with Bryony Lavery's *Frozen*, depicting the traumatized and traumatizing lives of the main characters. The third chapter sketches the awful repercussions of war in devastating the soldiers' lives and their environment in Shepard's *State of Shock*.

Keywords: Trauma, War, PTSD, Sam Shepard's *State of Shock*, Lavery's *Frozen*, Defense Mechanisms.

ÖZ

Savaşlar, felaketler, insanların çektiği acılar ve ızdıraplar, fizyolojik ve psikolojik sağlığımız üzerinde düşündüğümüzden daha ciddi etkilere sahiptir. Bıraktıkları izler hatta ömür boyu sürebilmektedir. Bu nedenle, travma ve travma sonrası stres bozukluğu (TSSB) ile ilgili çalışmalar son zamanlarda artış göstermektedir çünkü mevzubahis alanlardaki akademisyenler bu bozuklukların yaşamlarımız üzerinde bıraktıkları etkinin farkına varmışlardır. Bu çalışma, TSSB'nin iki farklı oyundaki karakterler üzerindeki rolünü ve etkisini keşfetmeyi amaçlamaktadır. Çalışma, TSSB'nin kaynaklarını ve bunların karakterler üzerindeki çeşitli etkilerini göstermektedir. Bryony Lavery'nin *Frozen* adlı eseri, çocukluk çağı travmasının TSSB semptomlarını tetiklemedeki etkisini gösterirken, Sam Shepard'ın *State of Shock* eseri, savaşın TSSB'nin şiddetli semptomları üzerinde bıraktığı etkiyi sergilemektedir. Her iki oyun yazarı da TSSB'den muzdarip karakterlerin içler acısı ve yıkıcı yaşamlarını ortaya çıkarmayı amaçlamaktadır. Sadece TSSB hastaları bu hastalığa katlanmakla kalmaz, aynı zamanda aileleri, toplumları ve çevrelerindeki hemen hemen herkes de bu hastalığa yakalanır. Çalışma üç bölüm ve bir sonuç bölümünden oluşmaktadır. İlk bölüm, travma ve TSSB'deki en göze çarpan teorileri ve çalışmaları inceleyerek çalışmanın teorik çerçevesini doğrulamaktadır. İkinci bölüm, ana karakterlerin travma geçirmiş ve travmatize eden yaşamlarını anlatan Bryony Lavery'nin *Frozen*'ini ele almakta; Üçüncü bölüm ise, Shepard'ın *State of Shock* eserinde savaşın askerlerin yaşamlarını ve çevrelerini mahvetmedeki korkunç yansımalarının taslağını çizmektedir.

Anahtar Kelimeler (Keywords in Turkish): Travma, Savaş, Travma Sonrası Stres Bozukluğu (TSSB), Lavery- *Frozen*. Shepard- *State of Shock*, savunma mekanizması.

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SUBJECT OF THE RESEARCH

This thesis is entitled *Shocked Beings: A Study of PTSD in Sam Shepard's States of Shock and Bryony Lavery's Frozen*. It examines and compares the two plays under the study in the light of contemporary and traditional PTSD theories, trauma theories, and psychoanalysis theories.

PURPOSE AND IMPORTANCE OF THE STUDY

The study aims at diagnosing the symptoms of PTSD of the characters in the two plays as well as analyzing the causes and circumstances that have led to the disorder.

METHOD OF THE RESEARCH

The study applies contemporary theories of trauma and PTSD studies, psychoanalytical studies, and other related fields. The study provides a historical survey of PTSD and trauma and their development.

HYPOTHESIS OF THE RESEARCH / RESEARCH PROBLEM

PTSD has become one of the most common problems of the age. However, its sources have been mysterious. Most of the studies have attributed PTSD in the shocking experiences of the war. The study hypothesizes that PTSD could have diverse roots that can be dated back to childhood experiences. For this reason, *Frozen* is analyzed under domestic PTSD.

SCOPE AND LIMITATIONS

The study is limited to Shepard's *States of Shock* and Lavery's *Frozen* because each one tackles PTSD from a different perspective.

1. INTRODUCTION

1.1. Trauma and Post Traumatic Stress Disorder (PTSD)

One of the most obvious facts of life is that it has so many misfortunes and terrifying events that people do not expect and do not wish to have. Our present world, with all its complexities, tensions, accidents, and terror, is even more characterized by such misfortunes. On the psychological level, the reaction to such events is called trauma. Trauma, as defined by the American Psychological Association (APA) is the “emotional response to a terrible event... Immediately after the event, shock and denial are typical.” Trauma would result in pain and suffering, but we are equipped with psychological defense mechanisms that would resist and soothe the effects of trauma. However, if the suffering lasts for a long time or reappears frequently in the memory in a way that affects the normal life activities and psychological health of the person affected, then it would be considered 'disorder'. So, Post-traumatic stress disorder (PTSD) is the disturbance that causes a person to re-experience the stress he/she already suffered in a previous traumatic event. World Health Organization defines it as “a delayed and/or protracted response to a stressful event or situation ... of an exceptionally threatening or catastrophic nature” (Sartorius et al, 120).

The concept of PTSD came into use in the 1970s when army veterans were diagnosed after the Vietnam war (Tadevosyan & Babakhanya-Gambaryan, 2011). Consequently, it was recognized as a mental health disorder by the American Psychiatric Association and included in the Diagnostic and Statistical Manual of Mental Disorders in 1980 (Maheux & Price, 2015). Studies on the diagnosis and treatment of the disorder tool course and scientific researchers have made progress.

The research findings on PTSD have been used to treat mental disorder and defend criminals who commit unthinkable offences such as rape and killing. Philosophers and thinkers have also presented their thoughts on PTSD. This aspect is in response to the use of disorder in defending criminals and wrongdoings. Health experts and psychiatrists maintain that PTSD is a severe mental health condition that should be addressed and comprehensively investigated. Many studies, such as the one conducted by Catherall (2013). She examined the condition with the population being trauma survivors from various walks of life. Since its approval as a mental illness, literary

authors, and playwrights such as Lavery, have utilized their skills to address the disease through art.

The research on PTSD has indicated that symptoms manifest within three months after a traumatic experience (Maheux & Price, 2015). Maheux & Price also argue that traumatic experiences leave an individual in an anxious and dissociative state that influences their behavior and occurs to people exposed to traumatic events. It summarizes that the people must have witnessed, experienced, or confronted an event that involved a death threat, critical injuries, or actual death. The individual response also involves intensive fear, horror, or helplessness. In summary, the manual highlights that PTSD is strongly affiliated with a triggering experience or event that forms the basis for diagnosis.

Most Post-Traumatic stress disorder victims exhibit short-term symptoms, but some do not develop chronic PTSD. According to Letkiewicz et al. (2020), the symptoms of PTSD may manifest in the first three months and sometimes many years later. The symptoms are sometimes severe as they affect an individual's mental state, interfering with their relationships and decision-making. Statistics on PTSD indicate that 20%, 50%, and 27% of people with PTSD recover within 3, 24, and 6 months while 70% recover in ten years (Rosellini et al., 2017). This indicates no specific duration within which people heal from PTSD. Recovery from PTSD involves healing from its symptoms which are severe and sometimes fatal. Avoidance, hyperarousal, anger, re-experiencing, cognitive processing problems, and detachment are all among the symptoms for a person to be diagnosed with PTSD.

Re-experiencing symptoms entails an individual experiencing dreams, frightening thoughts, and flashbacks related to the traumatic event they witnessed or were involved in. These symptoms interrupt the victim's behaviors, thoughts, and feelings to the extent they cannot carry on their daily routines. Similarly, avoidance symptoms entail the victims of a traumatic event staying away from objects, places, or people who serve as triggers and reminders of the experience. For instance, someone who witnessed a fatal road accident may avoid crossing the road or seeing cars. Arousal and reactivity symptoms constantly affect a person's feelings and emotions. For instance, a person may feel angry and stressed. Lastly, cognition and mood symptoms cause people with PTSD to feel alienated and detached from others. They include guilt,

negative attitudes toward oneself, and losing interest in fun activities. Such symptoms occur to anyone who experiences a traumatic event, but some persist beyond a month and more. Therefore, playwrights draw from these characters in their attempt to address issues around PTSD.

Freud tried to analyze how people respond to traumatic events. Freud believed in the 'pleasure-principle', i.e. that psychological processes are generally regulated in such a way so as to avoid pain and produce pleasure when a person is faced with conditions that bring pressure on him. In *Beyond the Pleasure Principle*, Freud refers to the point of view of another analyst, Fechner, to show the validity of the pleasure principle, and he quotes his explanation of the way the psychological apparatus works based on what Fechner calls 'stability' or 'equilibrium', which Freud calls 'economic' way in reaching balance in psychological processes. In looking at the concepts of 'pleasure' and 'pain', Fechner says that:

pleasure or "pain" may be thought of in psycho-physical relationship to conditions of stability and instability, and upon this may be based the hypothesis ... that every psycho-physical movement rising above the threshold of consciousness is charged with pleasure in proportion as it approximates to complete equilibrium. (*Beyond the Pleasure Principle*)

However, two types of cases made Freud question the 'pleasure-principle'. The first was the psychological disturbance resulting from severe accidents, which he called 'traumatic neurosis', and the second was the effect of World War I on soldiers and other people not directly involved in combat, which he called 'war neurosis'. Freud tried to understand why traumatized people compulsively keep remembering events that caused them so much pain and suffering, whereas their psychological apparatus is supposed to avoid the remembrance of those events and lead them to a condition where they get 'stability' in a way that reduces the effect of this pain. The person suffering from post-traumatic disturbance is 'forced' to remember and/or dream of flashes from the painful calamity he/she suffered in the past, as if, in Freud's words, "The patient has .. undergone a psychical fixation as to the trauma" (*Beyond the Pleasure Principle*, p. 9).

Freud also discussed a game played by a child after his mother leaves him. The mother's departure is a very painful event for the child. But the child kept throwing a toy that mimics the act of the mother's leaving. Based on his observations, and his discussion of the child's game, Freud suggested that there is an 'imitation impulse', i.e., an impulse that urges the traumatic person to 'mimic' the painful act, as he/she is trying

to 'abreact' the stress of the experience through reacting it, in order to 'master' or control it.

According to this analysis, the person is trying to find an outlet to the stress in a time when he has enough strength, after failing to face, absorb, or control it when it happened. The painful event was put away, deflected, or deeply buried in memory in order to protect psychological strength from destruction. However, this can be interpreted and understood to be in line with the pleasure principle after all. The painful experience is so huge and sudden that it left the affected person helpless and, as a defense mechanism, he 'turns away' from it in order to avoid its immense devastating impact. But the event was not completely 'erased' from memory. Memory still has some records of the event's reminiscences that need to find some place to belong to, as it was cut off from its context in the first happening of the trauma, due to the work of psychological defense. Neither able to completely erase the memory of the painful experience nor have enough power to face the matter in its whole, the person will keep on suffering. The act of memory when 'floating' the scatters of the event, again and again, seems to be a mechanism to solve the dilemma in order to reach equilibrium. The person will have 'alerts' that there is some stress which needs to be soothed and released, though these alerts do not give full details about the stress. If the person acquires enough psychological power, then he can face the traumatic event. 'Facing' means to remember the whole event in its original context and living with the terrific details that were buried deep in memory. This can only happen when the person is psychologically prepared for it. So, the repetitive occurrence, through remembrance or in dreams, of the traumatic event can be seen as continuous attempts to settle it down.

Even Freud's discussion of the child's game seems to be in line with the 'economic' pleasure principle. The child could not understand or accept his mother's leaving and he could do nothing to stop it. He uses his toy to represent the disappearance and reappearance of the mother. When he wants to enjoy having the toy, he must first, as Freud notices, throw it away, saying 'o-o-o-oh'; which the child's mother and Freud interpret to mean 'Go away!' The act of repeating the game seems to be representative of the child's persistence instability and his inability to understand why his mother abandons him. He repeats the game as many times as he needs to reach equilibrium or balance, either through, as Freud suggests, achieving 'mastery' over the situation, which is the expected outcome of the defense mechanisms, (Beyond the Pleasure Principle, p.

10) or by joyfully greeting the reappearance of the toy with “Da” (there), which cannot be achieved without first throwing away the toy. The reappearance of the toy will make the child feel joyful, leading to balance with his anger and dissatisfaction. As the mother is still away, which means the child is still suffering and unable to accept her disappearance, the child will keep on repeating his game.

However, as Freud notices, the part of disappearance is prolonged, and the child may play it alone without the part of the reappearance. This can be understood as an expected behavior, taking into consideration the difference between the child’s game and the cases of war and accidents that Freud discussed. One may conclude that there is no point in assuming that the child has erased the act of his mother’s disappearance, and that he is dealing with remains of memory of this act. The dominant feeling in the game is anger, and the repeated actions of the child seem to be natural as an outlet to this anger, leading to minimizing the effect of the unhappy event (Burgo, 2012, p. 44.) This, as well, seems to fit well with the ‘economic’ principle itself, as the child is trying to be ‘in terms’ with the event by ‘mastering’ it, i.e., living it as much as possible without the shock of the first occurrence.

Cases of psychological disturbance, like those Freud discussed, came into question again after the Vietnam War, as many US soldiers suffered a great deal after coming back home. Those soldiers show symptoms of severe disturbance that kept haunting them for a long time. They suffered from two stress factors: they witnessed the tormenting violence of the war and acted as wrong doers who committed atrocious actions. Another factor added even more stress on those soldiers, as they found huge pressure from a nation that has become aware of the unjust war in Vietnam. This national awareness made the war alive in the minds of the Americans and especially in the minds of the soldiers who were kept reminded of their role in it. The symptoms that appeared on those soldiers were not put under a clearly defined term until 1980, when the American Psychiatric Association added the term “post-traumatic stress disorder”.

In the 1990s, a huge leap happened in the field of trauma studies and how memory works while dealing with trauma. In 1992, Judith Herman published *Trauma and Recovery*. Herman was concerned about how to get the affected person healed and taken back to normal life activities by restoring ‘connections’ to life. “[R]econstructing the trauma story”, for Herman, is the middle process between the first step in recovery

which is building safety, and the last step of building connections with life. This step of ‘reconstruction’ will require the patient to face the traumatic event and put its recollected pieces together.

She defined two types of traumas: short-term (or finite) traumas and long-term (or prolonged and recurrent) traumas. The point of view that Herman presents about trauma is that trauma is the condition resulting from the conflict between two compelling processes. The first, which Herman calls “ordinary response”, is the psychological mechanism defense of ‘denying’ the hugely painful calamity. The second, which is as powerful as the first, is the wish of the afflicted person to cry out, show his/her affliction, and get rid of the burden of keeping pain inside. Though some calamities, as Herman notes, are “too terrible to utter aloud: this is the meaning of the word “*unspeakable*”, but the nature of trauma itself or “the conviction that denial does not work” pushes the traumatic event to reappear later in the form of fragments, scattered memories, sudden flashes or dreams. For Herman, the traumatized people make two things at the same time: calling attention to their condition of having a highly painful experience deeply hidden in the memory and trying not to let others know about it. In *Recovery from psychological trauma* (2002, p. 1), Herman defines the “essential features of psychological trauma” as being “disempowerment and disconnection from others” and, as such, proposes the recovery process to work in the direction of restoring both the power of the afflicted person and his/her connections to life.

Herman also claimed the need for a political context for preserving the trauma studies, as she binds the knowledge that we have about trauma to the political effort that led and fostered this knowledge. “The fate of this field of knowledge”, Herman says, “depends upon the fate of the same political movement that has inspired and sustained it” (*Trauma and Recovery*, 23). Herman makes a lengthy account of political movements that helped foster several fields of study, firmly concluding that there is only one way to go ahead in this field of study with, which is to have the same political movement always supported. One may say that there is a perplexing view here, as describing the historical factors that led to some discovery or line of research is being mixed with research findings that should be our concern. It is true that the political, academic, or cultural factors interact to promote or weaken a line of research that will give the final outcome, but, as one would conclude, it shouldn’t be one’s aim to call for supporting some political

movement to keep research going on. However, it is possible to study the political aspects of trauma, as some research did.

Shoshana Felman and Dori Laub published *Testimony: Crises of Witnessing; In Literature, Psychoanalysis, and History* in 1992. They examined how memory works in relation to traumatic events. They were concerned with the nature and consequences of witnessing trauma; especially in relation to the Holocaust. They dealt with the issue of inability to exactly represent the deepness of suffering in regard to those who witnessed overwhelming traumas, due to the huge impact of the shock that absorbs all the capacity to react or that makes witnesses unwilling to do anything. 'Crises of Witnessing' mentioned here are related to the shocks of survivors and people who have come to know the trauma through the testimony of the survivors. In this 'Testimony', there is recurring reference to the concepts of 'unrepresentability' and 'unspeakability'; the concepts earlier discussed by Herman.

Toni Morrison's *Beloved*, which was published in 1987 and received Nobel Prize in 1993, is a pivotal event in dealing with trauma in literature. Morrison based her novel on the account of the real event of Margaret Garner that Morrison came across in 1974 while she was editing *The Black Book*, an anthology containing texts of the history of the Black (Pelagia, 2011, p. 81). Garner was an enslaved woman who escaped her master in Kentucky going to the free State of Ohio in 1856. When she and her family were about to be recaptured, she killed her two-year old daughter and was trying to kill her other children and herself, to prevent them from going back to slavery.

In *Beloved*, the spirit of the child kept haunting the family house. Another slave, Paul D., who has a close relation to the mother, Sethe, also questions himself as to the meaning of being a man. His slavery requires him to be highly masculine, but his character as a man is meaningless, as he is just a slave for a white man. Even after being free, the two cannot have a normal life, as they are haunted by the memories of their past years in slavery. *Beloved* opened the door for how literature can draw history details in a way that could be impossible to attain by any other field.

The novel depicts the PTSD and makes it a literary style, giving it the pace of the characters' journey into final resolution. Just as the PTSD symptoms of the characters, the narration in *Beloved* is disrupted and it follows the memories springing from characters' hidden past. Alan Gibbs's *Contemporary American Trauma Narratives*

describes the novel as “paradigmatic” through its global techniques that simulate the traumatic symptoms, and he mentions three characteristic techniques having this paradigmatic tendency. Firstly, the pain, returning back to the mother after twenty years of the traumatic event, manifests itself not in a normal order that would fit to any settings related to the conditions of the mother’s life, but it rather pushes its scattered fragments gradually through her remembrance, looking for an existence and identification in her present life. Another technique is the mixture of voices in difficult remembrance times when Morrison “pluralises the novel’s narration voice”, as Gibbs describes it, in a way that several voices are uttering words in such a way that they “merge and overlap, sometimes so indistinctly that it is unclear who speaks”. The other technique is the avoidance of the traumatic past, which is represented through repetition, as characters start to remember fragments of the event then retreat to avoid the pain associated with the act of remembrance, then those fragments start to surface in the memory again, forcing characters to reconsider parts of the event, and so on. (Gibbs, 2008, pp. 72-73). The act of haunting by the ghost, which disappears with the presence of the strange woman whom the family call *Beloved*, represents the avoided memories that have finally found a shape and presence. The novel requires the reader to carefully follow the narrative to gather the memory fragments. As this “emphasizes the fragmented nature of human experience by telling the story in discrete bits”, as Carmen Gillespie notes, the reader is gradually taken in the passages of the past of characters to slowly be in touch with their experiences.

The intense by which *Beloved* presents the tragic misfortunes of a slave killing her own child to protect her from slavery, only to spend the rest of her life living with her suppressed and scattered memories, gave the novel unparalleled power in reviving a traumatic history of the slavery in a way that cannot be done by a means other than literature.

Morrison’s narrative representing the act of remembrance in *Beloved* is characterized by gaps that gradually diminish till revealing the full event. This does not necessarily represent “an inability to recall, but a refusal to tell, to narrate”, as Jill Matus suggests. However, Matus presents the point of view that the traumatic affect here is not “sudden in its impact”, which is the thing that “dominant trauma theory leads us to expect”, but gradual. He understands the gradual reveal of truth in *Beloved* to be equivalent to the act of the flashbacks gradually coming to the traumatic characters. But

it seems that the apparent affinity between the narration technique and the traumatic fragments is an artistic technique. However, the gradual way by which truth is revealed in the novel does not affect the nature of the traumatic remembrance, which kept coming suddenly, as any other traumatic element. The reveal of the truth resembles the failure of the mother in facing her painful past, and her inability to set the psychological trauma and reach emotional equilibrium. However, this is only related to this accident.

The novel larger landscape involves not only the personal calamity of the family, but the historic calamity of the whole black slaves in America. The family could not get rid of the effects of their past years in slavery, and they are forced to live the rest of their life in pain, but the mother was able to be free of her personal pain in regard to the act of killing her own daughter. As the personal and non-personal traumas are inter-woven, judgments like that of Matus, can be expected. Beloved, the ghost-woman, has memories of her babyhood with dead people and, though this might be somewhat strange, also flashbacks about the Middle Passage, the passage that was used to transfer “the enslaved Africans across the Atlantic Ocean to the New World” (Encyclopedia Britannica). The personal experience is mixed with the communal trauma of the whole community of the African slaves.

In 1995, *Trauma: Explorations in Memory* by Cathy Caruth appeared, followed by her collected essays *Unclaimed Experience: Trauma, Narrative, and History* in 1996. Caruth examined how memory functions during trauma and suggests that the huge pain makes the act of ‘telling’ traumatic events a complex and terrifying experience. She considers literature a unique way of making the reader indirectly listen to what is horrible to tell. Explaining the unspeakability of trauma, Caruth says that “ordinary response to atrocities is to banish them from consciousness”, while other “violations of the social compact are too terrible to utter aloud.” She also refers to the “crucial problem” in trauma studies, which she considers to be preserving “the force and truth of the reality that trauma survivors face and quite often try to transmit to us” (Caruth, 1995, p. xii). This concern is related to preserve as much as possible of the first traumatic occurrence, as the following remembrance and recollected fragments are scattered and not in order, which raises the question of the how to represent the event whose only witness keeps avoiding it. Caruth looks at forgetting the traumatic event by the afflicted person as a betrayal to that event. Caruth shows her understanding of the double nature of trauma. For Caruth, talking about a traumatic event is the “oscillation ... between the story of

the unbearable nature of an event and the story of the unbearable nature of its survival” (Caruth, 1996, p. 17). In expanding her definition to the nature of trauma, Caruth elaborates on Freud’s explanation of the traumatic repetition compulsion.

Ruth Leys, in her *Trauma: A Genealogy* (2000) challenged the theoretical concepts by which Caruth analyzes the working of the traumatic event in memory. Caruth explains the calamity experienced as being not fully experienced, or ‘unclaimed experience’, because the mind is faced with an overwhelming experience it is incapable or unprepared to deal with. For Caruth, the reaction to such experience, (Leys, 2000, p. 283) explains, is the “literal engraving of the mind by an incomprehensible reality that “continually returns, in its exactness, at a later time.” According to Caruth, the event will, through unconscious repetition in memory, gradually come to existence in the mind that did not absorb it in the beginning. Once this happens, the traumatic event produced by this working of memory will have ‘no place’ to belong to, as it was not fully experienced in the past neither its existence in the present is fully understood. Leys challenges this interpretation of ‘unclaimed’ traumatic experience left there till it springs someday and through repetition it comes to be again. Leys argues that Caruth's focus on trauma as an unrepresentable and unclaimable experience leads to a neglect of the cultural, historical, and political contexts in which traumatic events occur. According to Leys, this neglect makes it difficult to understand the ways in which trauma is produced, maintained, and perpetuated in society. Leys also argues that Caruth's concept of "unclaimed experience" downplays the role of language and representation in shaping our understanding of trauma. According to Leys, language and representation are crucial for making sense of traumatic experiences and for communicating these experiences to others. She argues that Caruth oversimplifies the complex relationship between trauma, language, representation, and historical, cultural, political contexts.

LaCapra’s 2001 *Writing History, Writing Trauma* collection of articles provides many ideas about how to analyze both points of view of trauma: the perspective of the victim and that of the perpetrator, in order to have the most possible and honest representation of trauma. LaCapra adapts the notion of ‘transference’ from psychoanalytic field in order to analyze the way by which scholars and historians interact with the events they deal with. He investigates the effect of their backgrounds on their judgment and interaction with those events. He even proposes the use of ‘*historical trauma*’ to refer to the actual events, in contrast to ‘*structural trauma*’ that was ‘painted’

by views of the scholars. He criticized previous researches in trauma studies as being unable to deal with their own relationship with the texts or events, which led, in his opinion, to their failure to grasp the real meaning of trauma.

One of the concerns that researchers of trauma studies fostered is the collective effect of undocumented traumatic events on the people who lived with the memories and burdens of having witnessed those events and on the generations to whom those events were transmitted. One of the concerns in this regard is the process of transferring the traumatic events whose existence is limited to the collective memory which, according to those researchers, would be affected by the emotional reactions from generation to generation, adding more changes, reactions and emotions to those events. According to this point of view, which can be found in the work of several researchers as Maurice Halbwac's *On Collective Memory*, the memory of the traumatic events can't be viewed as a representation of what is remembered but as a product that was continuously reshaped till it acquired a different existence. But some researchers describe the process in what seems to be a perplexing approach, as Leys does in *Trauma: A Genealogy* when she considers "transmission of psychic suffering to others, even to later generations" a disease-like "contagious" infection. She proposes that the original traumatic event no longer exists and "trauma becomes unlocatable in any particular individual" (Leys, 2000, p. 17). Moreover, it is possible to trace the nearest psychological basis upon which this view depends in Freud's assumption about childhood's memories, as presented in *Childhood Memories and Screen Memories*. Freud presents an example of how memory changes past events, as he proposes that our memory brings the less traumatic events to the surface, while displacing events that are full of stress and anxiety ("*Childhood Memories and Screen Memories*, 2001, 43–53"). This explanation would mean that the original event is scattered and distorted, or otherwise just pushed away to a deeper location in memory, to avoid pain. But extending this psychological view and suggesting the existence of trauma collectively, but not in any individual is something that needs proof. However, another factor assisted in creating this interference in views and served such attitudes in the field of trauma studies. Some suppressed groups, whose only record of their histories is their collective memory, were given the chance to tell and document their undocumented histories¹. Many academic departments adopted programs to give voice to groups to study and document their histories. As most of those histories are full of agony and miseries, the trauma studies were involved in the process.

Away from whether what is represented is an individual or collective experience, the argument here is between two points of view of interpreting the work of memory: the first is to see the event recalled by memory as a 'mimetic' or exact repetition, while the second is to look at it as something different, loaded with new burdens which are gathered at later times and from different people. Caruth adopts the first point of view, as she directs her effort towards understanding, analyzing and healing traumatic patients, while Leys and other researchers try to extend the meaning of trauma to include a changeable nature of memories, adding the collective factor to the meaning of the remembered event. The shift towards the latter point of view extended trauma studies to include violence and oppression in the aftermaths of tragic events such as civil wars and racial violence.

Another point of view in this field, which interacts with the collective meaning of trauma is its relationship to politics. One way of looking to this interference is because in many cases trauma involves using power to hurt victims, as C. Fred Alford remarks. Alford adds that, since the development of trauma has come as result of political pressure, "that PTSD is inevitably political" (Alford, 2016, p. 31). What is studied here is how to continuously keep attention towards trauma studies, not analyzing the essence of trauma and its effects or how memory is affected by traumatizing traces of memories.

Furthermore, some researchers went further and extended this point of view to the level of philosophical question, as C. Fred Alford who supposes that "[t]he more we make PTSD important, the more we may be inclined to ask where this suffering comes from" (Alford, 2016, p. 2). This level of thought, that seeks to connect the repeated occurrences of trauma in life to "something remarkably vulnerable about human beings", as (Alford, 2016, p. 34) calls it, seems to be found at the outer boundary of the field. This leaves the affected persons and the traumatizing events behind and seeks to analyze other factors, not directly related to the nature of trauma itself.

Nevertheless, another context in which some researchers adopted the political aspect of trauma as an important theoretical part of trauma studies is what Jeffrey Alexander presents as the necessity of lifting the suffering the context of a suffering group and making it possible to share and transfer to others. This is an extra expansion of the views of Maurice Halbwac and Ruth Leys in regard to transferring the traumatic event from generation to generation, as it takes off the particular identifying elements of

the event and keeps the global elements which are shareable with others, resulting in making trauma collective. The main purpose of those researchers in fostering such points of views is connected to a political aim, as it intended to support the Holocaust studies. In order to keep the memory of the Jews suffering, they adopt a path of removing whatever limits that would prevent the Holocaust from reaching everyone everywhere anytime. Geoffrey Hartman, for example, says that comparing it with “the French Revolution is useful. The sequence French Revolution: Enlightenment cannot be matched by Holocaust: Enlightenment. What should be placed after the colon? “Eclipse of Enlightenment” or “Eclipse of God”? (Hartman 1996, pp. 3–4) The intended result is to make this event a symbol of whatever evil in the whole humanity history.

In doing so, those researchers do their best to isolate traumatic events from any surrounding and identifying factors that are found in the first occurrence. The first thing made here is to deny the context in which the event happened, as have seen from some of the previous points of views. Caruth’s understanding of the victim as being repeating “trauma repeats an unassimilated experience that was unknowable in the first instance” (Caruth, 1996, pp. 4, 91–92) deviates the experience itself from its existence, or even denying its existence altogether. Doing so will open the way for whatever speculations that could be imposed.

1.2. Trauma Theory

Trauma theory is a field of literary criticism concerned with how literature deals with and depicts traumatic events. It is centered on how individuals and communities conceive and find a way to deal with trauma, along with how these experiences are depicted in literature. Trauma theory revolves around many key ideas, including the ways in which trauma may affect one's memory and identity, the role language plays in both addressing and overcoming trauma, and the possibility of passing trauma on from one person to the other. (Herman, Jahn, & Ryan, 2005, p. 788) Cathy Caruth, Dori Laub, and Shoshana Felman are well-known pioneers in the field of trauma theory. In addition to its main interest in trauma studies, the theory also tackles psychological, sociological, and anthropological topics. It examines the impact of the traumatic events that people experience and the consequent change on psychology and physiology.

In literature, trauma theory focuses more on the theoretical investigation of events that could lead to traumatic situations in the life of the characters and affect their psychological and emotional well-being. Hence, this theory observes the anticipated symptoms that appear in traumatized individuals such as mental and physical fatigue, lack of enthusiasm, and social withdrawal. The duration of these symptoms varies, and it depends on the atmosphere in addition to the personal preparedness. The literary analysis of traumatic events in the text focuses on the characters' reactions to these experiences either explicitly or implicitly to deliver a specific meaning of their suffering and further comment on the most enduring psychological signs of trauma.

The employment of trauma theory in dramatic and theatrical studies has established an interesting perspective in recent years. There are many points of intersection between trauma theory and theatre since both fields provide insights into the impact of trauma on individuals and communities. From the theoretical perspective of trauma, drama is an effective means for examining the impacts of trauma on both individuals and communities. It's a means for investigating the mental and emotional consequences of the traumatic events, as well as the coping strategies for dealing with them. When used therapeutically, drama may provide a safe space for people to express and work through traumatic events. Keeping in mind that the nature of the traumatic experiences and the individual differences determine the way in which people react as well as the kind of the disorder they may develop. This is because, as Herman (1992, p. 68) stated, "The traumatic syndrome, despite its many constant features, is not the same for everyone." Playwrights present one of the key aspects of this intersection between trauma theory and drama is the idea of reenactment, which refers to the repetition of traumatic events in various forms. This can take the form of dramatic performances, where actors depict traumatic events through their performances, or in the form of having these traumatic experiences transfer to the audience through their viewing of the performance. This what the 'trauma play' has at its core.

In terms of the impact trauma plays may have on the audience, some research has shown that viewing dramatic plays about trauma can help audiences process and cope with their own traumatic experiences, creating a cathartic effect. Jeffrey C. Alexander (2012, p. 8) states that "the trauma experience occurs when the traumatizing event interacts with human nature". Nevertheless, it is worth noting that this can be different from a person to another, and some people may feel that viewing performances

of trauma is distressing or triggering. The relationship between trauma and memory is another focal point of the trauma theory as it pertains to dramatic performance. According to trauma theory, traumatic memories need to be addressed and processed to overcome the physical and psychological effects of trauma (Boulanger, 2007, p. 66). By reckoning memories and recollections, the actors, as well as the audience, are invited to create an association of their personal traumatic experiences with those acted on the stage. This association is usually rendered in dramatic texts as recalling historical trauma such as memories of wartime or recurrent political conflicts. It can also take the form of reenactment of very personal incidents like sexual exploitation and sexual abuse, acts of domestic hostility, or illness.

Moreover, adopting this theory to dramatic texts reveals more details about the social and cultural markers in addition to the physical and psychological concerns of individuals and groups involved in traumatic experiences. Those traumatic experiences could profoundly affect the way the characters look to and communicate about their own world. As an ideal medium for exploring the traumatic experiences in their social and cultural atmosphere, drama could also serve as a way for the traumatized characters to relieve the internal stresses and, at the same time, to expose the impact of the political and cultural parties to the establishment and severity of traumatic experiences. The performances on the stages trace minutely the development of traumatic state in the mind of the characters. Drama, in this sense, groups the elements of trauma with the characters' personal memories in an attempt to allocate the sources of personal and cultural triggers and how they eventually evolve to be mentally and physically threatening. For this reason, people who attempt to find a way out of their traumatic vortex are given the chance to release the pain they are suffering from due to these devastating traumatic experiences. These dramatic performances will encourage them to revisit their traumatic memories to help them recover.

One may also conclude that the reason why this topic has caught the attention of playwrights is that it offers a foundation for delving into the emotional and mental effects of traumatic events on individuals and their relationships. It may be utilized to develop realistic and more complex characters, and to show how trauma affects their behaviors and interaction. Dramatic performances of trauma may also be an effective tool for raising awareness about the mental aftermaths of trauma and breaking the stigma around such debates and explorations. As a means of examining and processing traumatic

experiences and feelings, the use of trauma theory in drama may also be therapeutic or cathartic for both the actors and the audience.

1.3. PTSD in Literature

The portrayal of those who suffer from post-traumatic stress disorder (PTSD) lends itself well to the literary field. Therefore, the aftermath of trauma and post-traumatic stress disorder (PTSD) are common themes in literature, and many writers include the effects of trauma on both individuals and societies in their works. Those themes place people with PTSD under the lens of the spectators who apply them to their diverse experiences of trauma in their life.

Away from the enjoyment that literature offers to its readers or spectators, drama that deals with traumatic experiences and PTSD situations also raises the awareness of people about their various impacts and consequences and applicable coping mechanisms that enhance their recovery. As an exposure of personal feelings and emotions, literature sheds light on the external portrayal of the characters' behavior on the stage. In this sense, the audience often unify themselves with the characters since they find slices of their own life are reacted on the stage although they are not by themselves. The impact of reading traumatic events in a dramatic text on the readers are not persistent. Most of the time, it follows the intention of the reader to encourage his readers to find inspiration while knowing about the experiments of others. Moreover, readers may use literature as a means of expressing themselves and processing their own experiences by examining characters' reactions to similar experiences. People who have been through something similar may find comfort in knowing they are not alone in this way.

In their works, literary writers have examined the effects of post-traumatic stress disorder (PTSD) on their characters. They try to clearly portray the impact of trauma and PTSD on the way their characters act and interact with their social, familial, and personal environments. Twentieth and twenty first century literature is a good arena that shows the battles and the struggles of those characters against such an enduring phenomenon.

In 1983, Marsha Norman published her two-character play *'Night, Mother*. At some point during the play's evening setting, Jessie, the daughter, tells her mother,

Thelma, that she intends to commit suicide. (Norman, 1983, p. 8). This demonstrates Jessie's desperation and the severity of her inner conflict. Throughout the play, Thelma tries to prevent Jessie from committing suicide, while Jessie calmly explains why she has made this decision. The effects of mental illness on families are among the concerns of the play, along with depression and desperation. The play ends with Jessie following out her plan, and Thelma left to live with the aftermath of her daughter's decision. (Norman, 1983)

Tim O'Brien's collection of short stories *The Things They Carried* (1990) sheds light on the mental and emotional burdens that soldiers should face as they experience the violence and bloodshed in the war. The stories are told from different perspectives and combine fact with fiction, blurring the lines between truth and imagination. The characters' experiences serve as a lens through which the book explores how the war affects their lives and the lives of the people around them as well.

In the story *Speaking of Courage*, the deep sense of isolation and disconnection experienced by the character Norman Bowker is perfectly reflected. Though he has returned from the war, Bowker is still struggling to live a normal civilian life because of what he has experienced in Vietnam, which has led him to feelings of depression, isolation, and desperation. This, as one may conclude, shows the devastating psychological effects war trauma has on soldiers, as they feel disconnected from the world around them.

In 1991, Pat Barker's *Regeneration* was published. It depicts the enormous psychological and physical impacts of World War I on soldiers. The plot centres on William Rivers, a psychiatrist assigned to support soldiers recover from their traumatic experiences. Because of the time he spent treating the soldiers, Rivers starts to have doubts about the basis on which young men are sent out to war and the catastrophic effect it has on their psychological, emotional, and mental health. The political and social difficulties encountered by both soldiers and psychiatrists are explored in depth in this piece. The most important matter that the book sheds light on is the struggle between providing the necessary support that the soldiers need to overcome their traumatic suffering and the urge to have them return to battlefield.

The devastating psychological consequences of war, along with the more comprehensive cultural and societal environment in which they occur, are explored in

depth in Barker's *Regeneration*. This book has received great recognition for how it effectively portrays the complexity of war and how it affects the individuals who experience it. *Regeneration* is considered as a powerful representation for the persistent effects of trauma and the recurrence of those effects in future exposure to similar circumstances. Billy Prior started narrating what he had experienced when he was fourteen years old, and how they hit him on his head by a gun and kicked him. (Barker 1991, p. 107) This fact gives evidence to the idea that his traumatic experiences were brought about by his service in the military. It demonstrates how identical circumstances might trigger flashbacks to earlier trauma.

Additionally, *Blasted* (1995) by Sarah Kane is another important literary work that examines the severe psychological effects of being exposed to terrible experiences including rape, torture, brutality, and violence. This play has gained enormous praise and appreciation for its accurate depiction of the cruelty and dehumanization that may come from acts of violence or war. A middle-aged journalist named Ian and a younger woman named Cate are the two main characters in this work. As shown in the play, Ian is in a relationship with the young Cate. The tension in their relationship has grown as the outside conflict intensifies, and the cruelty and violence of the conflict have moved into their hotel room. In the play, the young Cate is a victim of harassment and physical violence. As a result of the torture she has endured, Cate has been thrown into a massive psychological vortex that has ended her up in severe suffering. The story effectively conveys Cate's extreme emotional suffering and her incapability to cope with what she has been through. The tremendous amount of torture and violence that Cate has experienced has led her to explode and reveal her suffering by saying "it's killing me." (Act Three) This demonstrates Cate's severe psychological condition, emotional intensity, frustration, and serious emotional collapse. One could possibly infer from these symptoms that Cate is suffering from PTSD.

The characters in the play experience extreme brutality and abuse on many different levels throughout the play. As a result of the traumatic experiences they have been through, they have lost all sense of psychological and emotional equilibrium and are struggling to comprehend what they have experienced. The story focuses on how seeing or experiencing violence may have a lasting impact on a person's well-being by presenting the tremendous psychological and physical tension the characters go through. In addition, psychological and emotional disorders have resulted from their exposure to

violence and trauma, leaving them incapable of coping with that and have a normal life. Moreover, the play also explores the ways in which such catastrophic events can drastically alter people's existence, as they will face difficulties in switching back to their normal life. Additionally, one can deduce that the play is considered an important call to the necessity for deeper awareness and assistance for people who struggle with the impacts of post-traumatic stress disorder to have them reconstruct a normal life.

The play *In the Blood* (1999) by Suzan Lori Parks tells the story of a poor black woman named Hester La Negrita who is a single mother to five children. Hester struggles to provide for her children and is often ignored or taken advantage of when she reaches out for assistance. As the play progresses, one can learn more about Hester's background, and the sad events that contributed to her disastrous condition, especially her connections with her children's fathers. Inequality, discrimination, cruelty, and class distinction are among the numerous dilemmas that are focused on in this play, prompting people to reflect on their own experiences with inequality and the struggles they deal with in life. Hester struggles to find a way out of her misery that has been brought on by the men in her life. Additionally, the play draws out the depth of her suffering and the emotional toll it takes on her because of her relationships with those men.

A Long Way Gone: Memoirs of a Boy Soldier was published in 2007 by Ishmael Beah, a child soldier from Sierra Leone. It follows Beah's life from his early years in a rural area to the beginning of the civil war when he left his family to join the military. After the conflict forces Beah to leave his town, he joins up with other young men who have also been separated from their families during the war. Until they were taken by the government to join the military forces, they needed to travel from town to town in search of food and a place to live. After receiving military training, Beah joins the military forces, however he quickly becomes disappointed by the violence and killing he witnesses on the battlefield. He both sees and takes part in the bloodshed and killing innocent people. Beah has no choice but escaping the military to get himself out of this dilemma. Following that, a UNICEF rehabilitation centre takes Beah in and there he begins a long journey of treatment and recovery from the trauma he has developed because of the violence and bloodshed he has witnessed and taken part in on the battlefield. Beah's remarks (p. 46), "The more I resisted thinking, the longer the days became, and I felt as if my head was becoming heavier with each passing day," indicate that he suffers from PTSD as he struggles with the enormous psychological aftermath of

his war experience. He is unable to sleep, claiming that his fearful war memories may invade his dreams. (p. 46) From Beah's description to his situation, one can learn how the violence he has endured affects his psychological state in the long run. According to the American Psychological Association (APA), Beah's reactions are among the common symptoms of post-traumatic stress disorder. Among the PTSD symptoms that Beah has developed are reliving the traumatic experiences and avoiding situations and activities that can bring back his traumatic memories.

In her piece *Ajax in Iraq*, Ellen McLaughlin connects the lives of two female soldiers who fought in different wars on opposite sides of the world. The effects of war on individuals and communities are examined in this play. The play uses the characters' experiences to make its audience reflect on the ongoing human effects of war and the need for empathy in the face of trauma.

In the play, the character Fletcher says that "when you have to kill and watch others be killed you can't help but develop some kind of lingering memory that sits with you every day." (McLaughlin, 2011, p. 46) This highlights the long-lasting impact of trauma on individuals who have experienced it, particularly in the context of PTSD. It shows that these traumatic events can be re-experienced if there is a trigger.

In 2012, the American writer Kevin Powers published his novel *The Yellow Birds*. The novel narrates the story of John and Murph, two soldiers serve together in the war in Iraq. The novel examines the lasting effects of war on the soldiers through the themes of guilt and trauma. The story skillfully depicts the emotional and mental devastating impact that war has on soldiers and the struggles they experience when they return home. John Bartle struggles to cope with the tragic events he has seen or done in the war. What he has experienced in the war prevents him from having a normal life and reaching psychological equilibrium. John is after making a story of the events that he has taken part in or has witnessed on his mission. He starts making "marks" on his cell. Each of these marks refers to one of these events that he has experienced, as he describes them; "Marks representing the randomness of the war were made at whatever moment I remembered them: disorder predominated." (Powers, 2012, p. 126). The book perfectly depicts the disastrous effects of trauma and PTSD that the war has on soldiers, and they are haunted by their horrific experiences in the war that they cannot cope with these experiences, up to the extent that they struggle to have a normal civilian life.

Phil Klay's collection of short stories, *Redeployment* (2014) is another examination of the tragic experiences of American soldiers who served in the Iraq war. How war affects people on a physical, emotional, and mental level is explored from different perspectives in each of these stories. The varied themes explored in these stories include the difficulties of readjustment to civilian life, the psychological complexities of war, the connections between soldiers and their communities, and the struggle for coping with and comprehending the traumatic experiences. *Redeployment* provides a compelling and emotional meditation on the human cost of war through its detailed and in-depth depiction of the experiences of soldiers. *Redeployment* highlights the psychological impact of war and the potential for developing post-traumatic stress disorder. It perfectly illustrates why soldiers feel depressed or responsible for things that have happened during the war, after they return home, proposing that the trauma of war may cause a permanent sense of responsibility for situations that are beyond one's control. These severe and long-lasting impacts of trauma on soldiers' psyches, are typical signs of post-traumatic stress disorder (PTSD). (Klay, 2014)

In 2014, Dan O'Brien published his famous play *The Body of an American*, which is based on the true story of the relationship between O'Brien and a photojournalist called Paul Watson. The play employs war reporting as a window through which trauma, memory, and responsibility can be examined. As he struggles to cope with his personal traumas, O'Brien comes across an image captured by Watson showing an American soldier's body being carried through the streets of Mogadishu. O'Brien is haunted by that photo, as he tries to comprehend the significance of the photo and how it came to be taken. As O'Brien and Watson become friends, they discuss the ethical and emotional concerns of being a witness of brutality and violence of the war. The play is considered a powerful and poignant study on memory, trauma, and the responsibilities of those who witness the brutality of the war through the characters' conversations and interactions.

One of the most important messages that this play carries is the suffering of the person after being exposed to a devastating event, where his life and behavior change, and he develops a sense of fear and frustration, and it becomes very difficult for him to establish healthy relationships with others. In addition, after a person is exposed to a psychological trauma, the familiar becomes unfamiliar to him and he feels that everything around him is harmful, people, places and things.

States of Shock (1990) by Sam Shepard is another example of how war can have lasting psychological and emotional effects on people and society as well. The play is written in response to the Gulf War in 1991. It tells the story of two military members, a returning soldier named Stubbs, who was severely injured by friendly fire, and a veteran Colonel, whose son was killed by that friendly fire. It provides an in-depth examination of the psychological impact that the war had not just on soldiers but also on civilians. It dives into the reality of coming home after serving in the military, and it examines a variety of essential topics along the way. Some of these topics include trauma, regret, and disillusionment. *States of Shock* reveals Sam Shepard's interest in the concept of 'homecoming' and the challenges that soldiers have in adjusting to civilian life after seeing and taking part in the horrific events of the war. Due to the fact that Sam Shepard served in the United States Air Force prior to devoting his time to writing and acting, the play has a profound personal significance for him. *States of Shock* might be seen as a reflection of the devastating effects that war has not just on individuals but also on society. By digging into the complexity of war and the consequences of war in this play, Shepard intended to achieve the goal of presenting a comprehensive and deeply human view of one of the most important themes of the 20th century.

Frozen (1998), a play by the British playwright Bryony Lavery, delves deeply into the complicated issues of grief, reconciliation, and personal responsibility. The main theme in the play is built upon the life of three characters on the stage who share inescapable details in their life. On one side, there is Nancy who lives with the memories of her kidnapped and murdered daughter. On the other side, there is the murderer Ralph and Dr. Agnetha, the psychiatrist. The story adds more suffering to Nancy since her daughter is only reported missing and then assumed dead. Thus, she lives with the hope that she may still be alive. The story revolves around the recollections of past experiences in the form of flashbacks that increase through a number of conversations that reveal Ralph's traumatic experiences of loss and internal conflicts. Moreover, Ralph's case is under the investigation of Agnetha who was trying to follow up the motivations that pushed Ralph to murder Nancy's daughter. Based on her scientific reasoning, she tends to deny the complete evil background of humans' behavior, and, instead, she justifies it in terms of genetic origins, environmental influences, and personal preferences. Due to the severity of the traumatic events that the characters have encountered in their lives, they live with an intriguing sense of guilt and blaming. Nancy,

for example, manifests an intensive sense of wrath and anger and behaves with noticeable hostility. On other side, Ralph cannot escape the haunting feeling of sin and always tries hopelessly to hide this nagging stress.

Sam Shepard's *States of Shock* and Bryony Lavery's *Frozen* are excellent examples which focus on the trances of trauma and PTSD. They perfectly tackle the destructive states of characters who have unfortunately encountered severe psychological events that result in PTSD. The plays further study the consequences of these events on the characters' lives and their relationships with their communities. The characters in both plays reveal explicit symptoms of PTSD manifested on their external behavior and social interactions with other members of their communities. They further bring to the surface different topics that PTSD cases do not reveal regarding their suffering, coping difficulties, and the lack of proper therapy that would end their miseries.

The playwrights, on the other hand, attempt to deeply explore the human psyche taking all kinds of risks that accompany their portrayal and description of those characters' encounters with traumatic events, and, at the same time, trying to isolate themselves from being burnt out by the impact of the severe psychological stress. Their intention would be to assist those individuals and communities to cope effectively with these conditions of PTSD and redeem their psychosocial resilience. Contemporary drama in numerous forms, including TV shows, movies, and plays, includes people with PTSD. This awareness and understanding of PTSD are reflected in the literary depiction of the condition, and the struggles of people living with PTSD are made for the benefit of the readers and the audience. There are numerous ways in which writers and playwrights tackle trauma and PTSD in their publications. In this case, they present the characters experiencing symptoms like nightmares, hallucinations, and fear, and the effect that they have on their connections and daily life. They also investigate what may have contributed to those characters' psychological disorder. In such works, authors portray the way in which the characters receive help for their serious condition, and the means by which they can deal and live with the symptoms and increase their life quality. Furthermore, authors often depict their characters undergoing therapy sessions or using medicine to overcome the consequences of their traumatic experiences. One can also say that throughout the use of such characters, writers and playwrights aim to educate people and encourage empathetic responses from the audience by highlighting the difficulties of those who suffer from post-traumatic stress disorder.

2. PTSD IN SAM SHEPARD'S *STATES OF SHOCK*

2.1. Introduction

Sam Shepard is the most notable American playwright, born in 1943. His works are noted for their authentic portrayal of underprivileged people in society. Furthermore, his style and themes garnered him enormous praise and appreciation. He has successfully switched the ideal with the real in his works. One of Shepard's most well-known works is *Buried Child*, which was awarded the 1979 Pulitzer Prize for Drama. Drawing on characteristics of Greek tragedy and American Gothic literature, the play exposes the dark secrets and dysfunction of an American family. Another notable work of his is his play *True West* (1980), which explores the complicated and problematic relationship between two brothers, Austin, a successful screenwriter, and Lee, a thief and drifter. After a long separation, the brothers are forced to confront their differences when they are reunited at their mother's house. The play sheds light on important issues including the duality of human nature, family conflicts, and identity crisis. These issues are evident on several occasions in the play, especially when the brothers swap roles where Austin becomes a thief and Lee becomes a screenwriter. (*True West*, 1981)

States of Shock is another significant work by Sam Shepard. The play is written in response to the Gulf War in 1991. It is an anti-war theatrical play that embodies the violence and conflicts within the quest for America to redefine itself. It is among the modern plays that have addressed the barely spoken-about antiwar sentiments. The play is a deep exploration of psychological effects of the war on both soldiers and civilians. Trauma, remorse, and disillusionment are among the important matters that the play explores, as it delves into the realities of returning home from military service. *States of Shock* reveals Sam Shepard's interest in the idea of 'homecoming' and the struggles soldiers have in reintegrating into civilian life after witnessing and taking part in the violence and brutality of war. Therefore, the play is deeply personal for Sam Shepard, as he served in the US Airforce before turning to writing and acting. One can consider *States of Shock* as a reflection of the human and societal costs of war. Shepard has aimed to present a deep and profoundly human interpretation of one of the major topics of the late 20th century by delving into the complexities of war and its aftermath in his play.

In *States of Shock*, Shepard's distinctive writing style serves as a powerful means to bring forth the conflicts around the concept of war. Having witnessed and experienced the Vietnam war, Sam Shepard uses his literary skills to pass on information about societal conflicts resulting because of the war. Samuelson (2011) defines his work as storehouses of icons, idioms, and images denoting American sensibility and culture. This aspect arises from his early one-act pieces, such as *Cowboys*, which has taken the Theater Genesis by surprise due to their excellent performance. He has continued to surprise scholars and readers with well-articulated plays, including the *States of Shock*. Critics of the play have applauded him for his commitment to presenting the horror that lies within American society, especially when war is involved. The horrific text subtitled "A Vaudeville Nightmare" addresses his intent to explore and expose America's destructive and self-inflicted tendencies.

2.2. Synopsis

The play's setting is a family restaurant where Sam Shepherd sets the stage to present his characters and thematic concerns. The primary visual image presented in the play is the presence of an elderly, probably a wealthy couple, dressed in white. The two sit at a table in the restaurant, awaiting service for an overdue order. The two Americans sit unmoved as they watch a debate between the retired Colonel and the veteran discussing the costs of war. Colonel and Stubbs are displeased with the aftermath of the war that they have been left to deal with. The playwright deliberately puts these two characters as the protagonists to contextualize the Reagan/Bush period conversation. The White man and woman ignore them and keep complaining about the poor services of the restaurant. Again, the two are also symbolic in that they represent the larger American society that has remained unbothered by the Persian Gulf wars and violence.

The playwright directs the audiences' attention to a separate part of this family restaurant, where two men are sitting at the table. Both men have served in the American military; the first is a retired colonel and the second, Stubbs, is a veteran of "Operation Desert Storm" who suffers serious injuries from the war. Audiences can recognize the fact that the Colonel's son has been killed in friendly fire from the dialogue between Colonel and Stubbs. The play portrays the events leading up to the death of the Colonel's son and Stubbs' mutilation a year later. As the war rages outside, Colonel presents the

events of the war inside the restaurant. Though this action may signal the end of war, the devastating aftermaths of the war are still haunting veterans and civilians as well.

On the other side of the restaurant, the playwright presents a woman of color, Glory Bee, a waitress in the restaurant, and she appears in expiration like the rest of the characters in the restaurant. At the end of the play, the gas masks that the characters wear indicate that the war is not over yet. The play's end presents the playwright's intent to imply that the war's aftermath is real and present, despite the violence and war end. Additionally, this shows that not only war participants are affected by the war, but all people and societies.

The impacts of the Gulf War on returning soldiers were complicated and varied, depending on several factors, like the soldiers' experiences during the war, their pre-existing psychological and physical health, and the kind and level of support they were provided with following their home return. Along with the physical effects, the war had severe mental and psychological impacts on returning soldiers. It was a highly stressful and emotionally devastating experience for the soldiers, and most returning soldiers "were issued with leaflets outlining the possible symptoms of PTSD" (Holden, 1998, p. 230). Among the PTSD symptoms that the returning soldiers suffered from were flashbacks, nightmares, and hypervigilance.

As previously mentioned, Shepard's *States of Shock* is written in response to the Gulf War, and it has the issue of post-traumatic stress disorder that returning soldiers struggle with at its core. Shepard intends to address the psychological and emotional devastation that the war causes to soldiers and civilians and shed light on the struggles that home-returning soldiers have. After witnessing the violence, bloodshed, and brutality of war, returning soldiers develop severe traumatic symptoms because of the horror they have experienced. However, these symptoms are "diverse and apparently unrelated, including chronic fatigue, myalgias (aching muscles), poor concentration, memory impairment, respiratory, cardiac and gastrointestinal complaints." (Holden, 1998, p. 224) They are often haunted by nightmares and flashbacks of the bloodshed they have witnessed in the war. In his *States of Shock*, Shepard clarifies this issue through the characters he introduces.

In the play, Stubbs is presented as a returning soldier who is haunted by the flashbacks and horrific memories of the war. Post-traumatic stress disorder develops if

“the person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others.” (Jones & Wessely, 2005, p. 203) This is a piece of evidence that Stubbs is suffering from PTSD due to his wartime experiences and the injury he had during the war. Through the character of Stubbs, the playwright sheds light on the condition of re-experiencing traumatic events, which is one of the common PTSD symptoms, and the enormous impact it has on his psychological condition. Moreover, the playwright’s portrayal of Stubbs addresses a bigger social dilemma which is the way in which returning soldiers are treated by society. Stubbs’s struggles with post-traumatic suffering and the inability to readjust to civilian life reflect the lack of support that home-returning soldiers should normally receive.

Furthermore, avoidance of traumatic experiences is another PTSD symptom that *State of Shock* sheds light on. People with PTSD make “efforts to avoid thoughts, feelings, or conversations associated with the trauma.” (Jones & Wessely, 2005, p. 203) While Stubbs is ‘stuck’ in a psychological vortex because of his wartime experiences, the Colonel is busy with the food, talking to the white couple or Glory Bee, or doing anything that keeps him away from confronting his traumatic experiences. This is clearly shown in the way he responds and reacts to Stubbs’s attempts to narrate what has happened in the war and how the Colonel’s son has died. This reveals that traumatic experiences cannot be easily ignored or avoided without causing severe consequences. However, they keep haunting the person, causing psychological and emotional disorders. The play reveals that avoidance can give temporary relief, but it ultimately leads to further emotional and psychological breakdown and disconnection from other people.

Moreover, as shown in the play, Stubbs’s overreaction shows that he is suffering from hyperarousal, which is, as Herman (1992) states, “the first cardinal symptom of post-traumatic stress disorder” where “the traumatized person startles easily, reacts irritably to small provocation” (Herman, 1992, p. 25) In *States of Shock*, Stubbs’s condition shows the devastating impact hyperarousal has on a person’s life. Further, the huge intensity of hyperarousal and its destructive effects on one’s capacity to function is demonstrated by Stubbs’s serious condition of irritation and anxiety and his tendency to respond aggressively to certain triggers. Additionally, Stubbs’s portrayal in *States of Shock* also sheds light on the way in which returning soldiers are treated by society.

Because of the lack of social support, Stubbs struggles with reintegrating into civilian life, which worsens the hyperarousal symptom.

According to Tadevosyan & Babakhanya-Gambaryan (2011), PTSD was first recognized as a mental disorder following the Vietnam war. The first people diagnosed with PTSD were war veterans and others who witnessed combat. They argue that 18% of war veterans experience post-traumatic stress disorders, and the majority seek help from clinicians and social workers outside the military system. War veterans often experience symptoms, particularly avoidance and recurrence aspects. They are highly responsive to stimuli that trigger war memories. War veterans experience flashbacks and nightmares due to exposure to deaths and life threats in operations. Sam Shepard's intent to present the aspects of war and post-traumatic stress disorder stems from this research.

In the play, the Colonel is presented in costumes like American military clothing, including a pilot's hat, a civil war Sabre, and World War II costumes. The Colonel represents the ugly politicians who feed on war and gain power through it. While this aspect is a primary thematic concern in the play, the playwright does not emphasize it enough to carry the day as his primary intent. The emphasis seems to be on Stubbs's side as he symbolizes the war's aftermath. He is presented as a wheel-chaired and maimed war veteran whose characterization refreshes the memory of the Vietnam war on the audiences and readers. One can say that he is an accurate representation of the absurdity of the nation's efforts to neglect him. He is the disillusioned young man who comes back home alive but finds an unknown future. He is suffering because of the war and the government's failure as well. His nation's shooting him in 'friendly fire' further heightened the suffering. As he speaks, the audience can feel the pain and shock through his words as he says these words about his own country, "Your face, lying. Smiling and lying. Your bald face of denial. Peering down from a distance. Bombing me" (*States of Shock*, p. 43).

Although Shepard presents the blindness of American society in its activities that harm its people and others, he goes beyond this course. He makes the play's events a reflection of how the aftermath of war affects people's relationships and the community. This is particularly evident in Stubbs's relationship with the Colonel. At some point, Stubbs addresses that the Colonel is partially ashamed of his son because he finds him a failure. The Colonel has his views on issues, and Stubbs' failure does not sit well with

them. Stubbs goes to the extent of shouting at him for his attempts to twist reality to suit his perspectives. In this relationship, Shepard attempts to merge two primary aspects. He expresses a national crisis that comes with wars and violence and connects it with an identity crisis in which PTSD comes in.

According to Smith et al. (2018), PTSD is known as ‘combat stress’ because it mainly affects war veterans. The authors claim that war veterans experience difficulties readjusting life and getting themselves back on track. According to Smith et al., the nervous system has two reflexes to respond to stressful or traumatic events. The first automatic reflex, called ‘mobilization’, occurs when a person is in a situation that needs them to defend themselves from a combat situation. A person will have a significant increase in heart rate, blood pressure, and muscular tension. These biological changes within the body help a person’s body acquire strength to respond and defend themselves. After the event is over, the nervous system calms down and rewinds to normal balance. Smith et al. present the second reflex as ‘immobilization’ that the combat soldiers experience when they have encountered too much stress in a situation to the extent they get ‘stuck’. The nervous system does not return to its normal balance. This aspect causes the individual to be unable to move on from the event, and they remain in an emotional and mental warzone. This reflex is what post-traumatic stress disorder represents.

Moreover, in 2008, the report *Gulf Illness and the Health of Gulf War Veterans: Scientific Findings and Recommendations* was issued by the Research Advisory Committee on Gulf War Veterans’ Illnesses. This report is based on a comprehensive analysis of scientific research and other related data about the impacts of the Gulf War 1990-1991 on veterans’ health. According to this report, the Gulf War Illness (GWI) is recognized as a complex and distinct syndrome that impacts a significant number of the Gulf War veterans. However, the Research Advisory Committee on Gulf War Veterans’ Illnesses states that “the “mental or physical” quandary has played out both on a national level and in the lives of individual veterans seeking care for Gulf War illness whose healthcare providers, lacking objective information from diagnostic tests, find their condition difficult to diagnose and treat.” (Research Advisory Committee on Gulf War Veterans’ Illnesses, 2008, p. 61)

In the play, Shepard addresses post-traumatic disorder among war veterans through the character of Stubbs and Colonel. Stubbs appears to be traumatized from the

first time the audience meets him. The Colonel is excited while making orders from Glory Bee. He even wishes to smoke, claiming that the “country was founded on Tobacco” and so he should support it. On the contrary, Stubbs seems disturbed, and Colonel is aware of this as he tells the waitress that Stubbs wants a “gaze into an open vista” as he has just come from the hospital. As the Colonel speaks to him, Stubbs stares upstage, and Colonel admits he has suffered a kind of disruption that is temporary, and he may take “some time to unscramble.” (*States of Shock*, 1992, p.6)

From Colonel's tone, as he speaks about the death of his other son who died, he seems to have no sad emotions as expected. Despite the day being his dead son's anniversary, he goes to the extent of making fun with Glory Bee. However, a study by Price et al. (2006) that investigates emotional functioning in military-related PTSD may explain this behavior. The authors argue that effective control among veterans who have PTSD is affected. The involved processes cause changes in affective control and emotion regulation in that the victims do not understand their emotional functioning and state. The Colonel is highly likely to suffer from this aspect as his son's death does not seem to affect him. Stubbs's condition does not bother him as much. In a normal context, the Colonel is expected to be sad about his son's death anniversary and Stubbs's condition. However, he remains emotionally unmoved by the current situation. This is exemplified when he asks Stubbs to uncover his wound for Glory Bee to see. It is deep and unattractive even for Glory Bee to bear. This aspect indicates that the Colonel is under emotional regulation and control problems as he seems to love his son but cannot react to the challenges they experience. He intends to honor his son by sharing a meal with Stubbs, who tried to save him, but his actions speak differently.

The Colonel's view on the situation exemplifies a person dealing with a bitter past but in denial. He expresses himself to Stubbs, saying that the aftermath of the war is supposed to strengthen him, not drive him to insanity. This aspect can have three implications for his behavior. First, he may have responded positively to the situation and not stuck with the bitter memories. Second, he may have been affected much to the extent that he no longer cares about the situation. Thirdly, the Colonel must have experienced his share of trauma and has decided to make a positive experience out of it. These words by the Colonel elicit different reactions and a web of confusion among the audience.

Colonel: Good. That's good as long as we can always come back to our senses. That's the important thing. It's a blessing, Stubbs. It's a gift. An American virtue. As far out on a limb as circumstances might shove us we always have that possibility of returning to our common sense. Our fairness. Even amid the most horrible devastation. Under the most terrible kind of duress. Torture. The barbarism of all sorts. Starvation. Chemical warfare. Public hangings. Mutilation of Children. Raping of mothers. Raping of daughters. Raping of brothers and fathers. Executions of entire families. Entire generations of families. Amputation of private organs. Decapitation. Disembowelment. Dismemberment. Disinturnment. Eradication of wildlife. You name it. We can't forget we are generated from the bravest stock. The pioneer. The Mountain Man. The Plainsman. The Texas Ranger. The Lone Ranger. My son. These have not died in vain. These ones have not left us to wallow in various states of insanity and self-abuse. We have a legacy to continue Stubbs. It's up to us. No one else is going to do it for us. Here's to them and my son! A soldier for his nation! (*States of Shock*, p.24).

This excerpt presents the comprehensive state of mind of the Colonel. He believes it is a blessing that they, together with Stubbs, can always return to their senses. He illustrates that he understands the events of the war and the evils it brought to him, his son, and the nation. Colonel admits that these events are traumatizing and evil. However, he claims they have positive outcomes claiming they should not be left in self-abuse and insanity as they have a legacy to protect. This aspect makes the audience wonder how he could make such a conclusion from the trauma.

2.3. Symptoms of PTSD Exemplified Through Characterization

Sam Shepard is particular in presenting PTSD as a concern in times of war. He uses the characters, especially Colonel and Stubbs, to highlight the trauma that war causes and how people struggle to recover. Ross et al. (2017) examined the aspect of PTSD in a young ex-military veteran. The young man had served for four years and had engaged in a six-month tour in Iraq, where he worked in foot patrols and vehicle operations. He reported experiencing traumatic situations ranging from receiving fires, ambushes, and explosions that left his fellow soldiers injured. Before the tour, he had no psychiatric issues or disorders. However, after the Iraq traumatic experiences, he reports frequent nightmares and guilt that he was in a position to detect the explosion and save his fellow soldiers. He also reported triggers such as driving within a shooting range and walking down the street. He also experienced avoidance symptoms whereby he avoided the triggers and other events or objects that reminded him of the events. The patient has also reported withdrawal symptoms and difficulty concentrating and sleeping.

Similarly, another research by Osgood et al. (2018) indicates that military veterans with PTSD express aggression, alcohol use, risky behaviors, and flashbacks.

The symptoms of PTSD among war veterans are similar to those of people who experienced different traumas, such as child abuse. However, they differ in that military veterans experience multiple exposures to traumatic events. Additionally, they witness mass deaths and destruction; some come out of the wars with physical disabilities, like in the case of Stubbs. Hence, PTSD is more likely to persist among war veterans than other victims.

PTSD also affects the declarative memory functioning of the patient to a significant extent (Samuelson, 2011). The patients experience a kind of memory dysfunction that results in memory disturbances following exposure to traumatic events. The re-experiencing of memory is the most common form of dysfunction associated with PTSD. The avoidance symptom is also expected, affecting the individual's ability to recall the details and important information about the trauma (Samuelson, 2011). These studies are applicable in Shepard's *States of Shock* in that the playwright addresses most of the symptoms through the characters of Colonel and Stubbs.

2.3.1. Stubbs

Sam Shepard uses Stubbs as the character who is most affected by the war. He is a soldier who comes out of the war maimed and wheel-chaired, nursing a huge wound on his chest. His trauma experience is first-hand as he recounts the events of the day he was shot by friendly fire. His traumatic experience is further complemented by anger against his nation as he feels it failed to protect him and is responsible for the events he encountered. He has several physical injuries resulting from the war, such as amputation, wounds, and mutilation. He expresses many symptoms of PTSD discussed there above.

The most evident PTSD symptom in Stubbs' case is re-experiencing symptoms. Stubbs keeps recounting his experience even in out-of-context situations. In every conversation he engages in the play, he mentions his experience. At the beginning of the play, he is presented as a person in traumatic shock. He stares into the open and does not concentrate on the moment. He seems terrified, as if in shock. This aspect is a symptom of post-traumatic stress disorder in that he has overwhelming emotions resulting from his past trauma. Although a year passed and the war ended, he was still dealing with the trauma. The first time Stubbs speaks in the play, he narrates his experience. He intrudes

on a conversation between the Colonel and the White couple with his story, which is completely out of context, as seen below:

WHITE WOMAN: I mean it's not as though we ordered a club sandwich...

STUBBS: (*to white couple*) When I was hit- it went straight through me. Out the other side. Someone was killed. But it wasn't me. I'm not the one. I'm the lucky one. (*States of Shock*, p. 9)

From this, the audience figures him as a mentally disturbed and physically injured soldier. Stubbs is not in a good emotional and mental state. He recalls the emotional aspects of his experience, highlighting that he did not see it coming, and when he was hit, the sky went white.

Stubbs also expresses immense aggression, which is a symptom of post-traumatic stress disorder. He has anger built up within himself, an aspect evident in the bitterness he expresses towards his nation and the Colonel at some point. He shouts at the Colonel several times every time he praises the government and brings in his perspectives that do not sit well with Stubbs's. He also keeps shouting about his experience as if to let out the anger from within himself.

As mentioned above, PTSD is characterized by memory impairment and the inability of the victim to recall important details about the traumatic event. For Stubbs, traumatic experiences were his shot at the battlefield, where he was injured and maimed, and Colonel's son killed. He keeps mentioning that he was lucky, but someone else died. However, the Colonel's attempt to acquire relevant information from him to help him understand the situation of his son's death does not yield much. Stubbs has difficulty remembering the details, and all he says is that he was hit, and a part of his body was maimed and numb. The Colonel uses toys and requests him to arrange them in the position he and his son were at the battlefield, but he cannot recall. He says in anger that he was 80% mutilated during the event. He also recalls the bodies of the enemy mixed up with theirs. Beyond this, Stubbs cannot remember other details that the Colonel asks for.

The events Stubbs experiences are a result of re-experiencing symptoms of PTSD. At some points, he says he sees the bodies of the enemy's soldiers and his fellows mixed up, and some of their heads fallen on their soldiers. The playwright presents these details as a dream as the Colonel slaps Stubbs and asks him to snap out of it. The experiences come to Stubbs as flashbacks, part of the re-experiencing symptom. Colonel

hopes that he can get him to remember the events using toys for illustration but his mental state and re-experiencing symptoms act as hindrances. These symptoms align with Samuelson's (2011) and Osgood et al.'s (2019) research that PTSD is characterized by aggression, memory impairment, and re-experiencing symptoms.

2.3.2. Colonel

As indicated herein, Colonel's response to the traumatic events is unclear. At some point, he seems to be mentally affected by the trauma, but in some scenes, he comes out as a normal person celebrating his dead son's anniversary. However, a closer observation of the Colonel's character traits indicates that he is suffering from mild PTSD. His PTSD seems to stem from two issues. First, he has not moved on from the war's events, and second, he has not fully recovered from his son's death. He expresses guilt symptoms, which, as Osgood et al. claim, is a symptom of PTSD. His meeting up with Stubbs in the family restaurant is meant to honor his son's death on the anniversary. He tells Stubbs that it is the real deal because he expects it to be fruitful.

In addition, Stubbs serves as a 'trigger' to the Colonel's traumatic suffering. He keeps reminding him of his son's death. Fernando, (2009) states, "When triggered, the reliving of the traumatic incident is immediate and intense." (Fernando, 2009, p. 153). Therefore, as a result of Stubbs's continuous narration of the events, the Colonel explodes, revealing his suffering and inability to cope with losing his son, saying:

How could that be? Was it an accident? A stray piece of shrapnel that broke off and tore through his chest? That doesn't seem fair, does it? Here you are, still alive. Living the lush life, having a dessert. And he's gone. Vanished. Blown to tiny pieces. There wasn't enough left of him to bury a finger. I asked them to send me a finger. A toe. A strand of his hair. They couldn't find the slightest trace. Not even a scrap of flesh. (*States of Shock*, p. 29)

This shows the Colonel's emotional devastation caused by his son's death. However, the major characteristic that presents Colonel as a guilty person is his attempt to understand the details of the event. He meets up with Stubbs so he can explain to him the events that led up to the death of his son. He was present at the battlefield, but he did not witness every detail of the events before his son's death and the mutilation of Stubbs. According to Samuelson (2011), individuals who experience traumatic events leading to PTSD often experience feelings of guilt and self-blame. Similarly, Rose et al.'s (2017)

report on a returning soldier with PTSD indicates that he often feels guilty for the injuries his fellow soldiers have sustained because he believes he has been in a position to detect the explosion. Hence, it is arguably right to claim that the Colonel wanted to acquire details of the events to assure himself that he was not responsible for his son's death. He also admits to Stubbs that meeting with him is meant to re-create a catastrophic moment in their personal lives (*States of Shock*, p. 18). He also expresses withdrawal symptoms as he tells Stubbs he walks for miles looking for empty restaurants to eat alone. This demonstrates the emotional devastation that the Colonel suffers from because of his wartime experiences. Studying the cases of the Gulf War returning soldiers, Holden states that "no one was immune to the horrors of war, even senior officers succumbed." (Holden, 1998, p. 18). Therefore, *States of Shock* serves as an accurate illustration of the lasting effects of war on all the war participants, regardless of their military ranks.

Similarly, the conversations between the Colonel and Stubbs reveal the fact that the Colonel tries to keep his traumatic memories buried, avoiding anything that may bring these memories back. In the play, Stubbs keeps narrating what he has experienced on the battlefield and how these horrific experiences impact him physically and mentally. The Colonel, however, does not show any reaction to what Stubbs says, keeping himself busy with the food or talking to Glory Bee or the white couple. When Stubbs says, "when I was hit – it went straight through me.", describing the missile attack, the Colonel, while looking at the menu, responds, "They've got your standard banana split. How 'bout that, Stubbs? No frills." (*States of Shock*, p. 9). This shows the Colonel's reluctance to acknowledge or talk about his traumatic past and his attempt to downplay the significance of his traumatic experiences. He refuses to engage in any conversation that makes him recall his horrific war memories.

Additionally, people with PTSD can "be prone to depression, irritability and aggression, often at the cost of their closest personal relationships." (Holden, 1998, p. 205) The Colonel also experiences immense aggression, which comes out through his actions and conversations. He is extremely unkind and aggressive towards Stubbs in their conversations. He understands that he has emotional and mental stress, but he discredits this and expects him to behave normally. His responses to Stubbs's actions and words bring out the aggressive part of him. At some point, Stubbs makes a mess of the dessert Colonel buys for him, and he reacts aggressively. He commands him to clear the mess and not leave it for another person. He also tells him he will be foolish to think

that he will get him another dessert. At some point, Colonel hurls insults at Stubbs, telling him that he should get the importance of the meeting through his “thick head.” His aggressive personality complements the symptom of guilt in that his attempts to assure himself that he is not responsible for his son’s death fail due to Stubbs’s memory impairment. (Shepard, 1992)

2.4. Healing and Recovery from PTSD in Sam Shepard’s *States of Shock*

In *States of Shock*, the recovery process takes a long and complicated path. The characters are always depicted as alienated and isolated people from the outside world, besieged by their past experiences. War has shattered their emotional equilibrium, and they have lost the real sense of communicating anything other than war events. At the very beginning of the play, Stubbs is presented in a wheelchair, obsessed with narrating his wartime suffering. This character has passed through a tough experience due to being subject to a friendly fire attack. Being eighty-per-percent mutilated, Stubbs is trapped by the consequences of this tragic and horrific event. This is also the case for the Colonel, who suffers the aftermath of losing his son in the war. The difference lies in the avoidance the Colonel shows concerning this tragic loss. The Colonel agitatedly listens to Stubbs re-calling his traumatic experiences, hoping to discover the way in which his son has died. Through Stubbs’s yarning about the event of that day, the Colonel learns that his son has received a missile that has passed through Stubbs. His avoidance appears as a result of internalizing this emotionally devastating memory. Avoidance becomes a trait overshadowing the Colonel’s behavior. Moreover, it seems that post-war suffering has contagious effects in the sense that it can affect individuals and communities other than the immediate victim. Those who hear about traumatic experiences may develop trauma symptoms. This case is clearly shown in Glory Bee’s situation, as her personality has been deformed by exposure to the Colonel’s trauma. Such a case is often referred to as a secondary or “vicarious traumatization”, as coined by the American psychologist and pioneer in the field of trauma studies Charles R. Figley in his book *Compassion Fatigue: Coping With Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized* (1995).

Towards the end of the play, a shoot-out happens that reconciles all the people in the family restaurant. In his flashbacks, Stubbs keeps talking about his core and abdomen mutilation that left his manhood which he calls 'thing' hanging like dead meat. This seems to trouble him much as the situation is irreversible. When advised to swallow his pills, he tells the Colonel it is too late for them. However, Stubbs's 'thing' comes out strong after he rolls on the ground with Glory Bee in his arms. This aspect seems to eliminate the trauma as his memory is also restored. He recalls the details of the day Colonel's son died. He remembers Colonel's son blowing his rifle, and he carries him on his back as he whispers Colonel's name, chanting it like a prayer. He also recalls how the Colonel betrayed him and changed his identity. He chokes the Colonel as revenge for his actions.

Confronting traumatic experiences is considered a means of recovery and healing from the post-traumatic symptoms that one suffers from. Bessel van der Kolk (2014) states that "In order to regain control over yourself, you need to revisit the trauma: Sooner or later you need to confront what has happened to you, but only after you feel safe and will not be retraumatized by it." (van der Kolk, 2014, p. 221) In the play, Stubbs keeps talking about his experiences as a means to recover from the post-traumatic disorder. It comes out as if talking about it gives him some sense of relief. Rosellini et al.'s (2017) research explains this aspect, stating that talking about traumatic experiences is therapeutic for PTSD patients. According to this research, speaking out spares individuals with PTSD from keeping the experiences within themselves. In every conversation, Stubbs narrates the ordeal until the Colonel is fed up with him. Therefore, one can conclude that re-narrating the traumatic experiences is a coping mechanism for Stubbs that helps him gain control over his tragic memories and get out of the devastating psychological vortex he is in.

Furthermore, according to Foa, Chrestman, & Gilboa-Schechtman (2009), individuals can naturally recover from PTSD when sharing their traumatic experiences with others. They state that "natural recovery" is achieved "by repeated activation of the trauma memory through engagement with trauma-related thoughts and feelings, sharing them with others, and being confronted with situations that remind them of the trauma." (Foa, Chrestman, & Gilboa-Schechtman, 2009, p. 14). The connection that the Colonel establishes with Glory Bee exemplifies his natural recovery. The Colonel seems to have recovered from PTSD when he falls in love with Glory Bee and makes plans to elope

with her to Mexico and abandon Stubbs. For the first time in the play, he appears composed and happy. He forgets the purpose of his meeting with Stubbs for a moment and claims that he should take the pills. He seems to have forgotten all about his past experiences and lived the moment. Although this changes when the shoot-out occurs and Stubbs gets the attention of Glory Bee, he has a moment of healing.

Reestablishing connections is a fundamental aspect of the recovery process for people who suffer from post-traumatic stress disorder. Traumatic experiences often cause a sense of isolation and detachment, which can lead to a range of negative consequences, such as high levels of anxiety and stress, depression, and difficulties in cognitive performance. Therefore, to recover from traumatic experiences, people need to be deeply connected to others, have social support, and feel part of a community. (Levine, 1997) Consequently, reestablishing social connections can help people with PTSD feel less alone, more supported, and more able to control traumatic symptoms. However, there are various ways in which reestablishing connections can help individuals overcome their post-traumatic symptoms. Among these ways is the social support received by individuals with PTSD. This support gives them the strength to powerfully face the triggers that can bring back their traumatic memories.

In Colonel's case, the positive experience comes from Glory Bee. She arises in him the will to reconstruct his life again. One can conclude that Glory Bee helps Colonel rediscover a sense of joy and purpose in life. This is clearly shown in the scene when Colonel and Glory Bee are dancing, as Colonel says to Stubbs, "It's not too late to begin again, and with a woman like this, the prospects are endless!" (*States of Shock*, p. 35) This positive connection helps Colonel regain control over his post-traumatic suffering from his son's death and reintegrate into civilian life. Moreover, Colonel has freed himself from the negative connection with Stubbs, which has captivated his feelings for a long time. The process of recalling the memories about his son's death is a closed circle that absorbs his power. The new positive connection that replaces all those negative connections is his relationship with Glory Bee. In contrast to Stubbs, who keeps clinging to the past, Colonel declares his departure from his PTSD suffering when he responds to Stubbs's questions. Stubbs's questions represent the devastating traumatic pain that holds Colonel back and keeps him stuck in his suffering. However, with the help of Glory Bee, Colonel finds a way out. When Stubbs asks Colonel, "you're leaving me for good?" Colonel replies, "Exactly. It's a dead end." (*States of Shock*, p. 35) This shows

that Colonel has realized that living in the past will prevent him from living a normal life.

To conclude, *States of Shock* is an insightful and thought-provoking analysis of the challenges of healing and recovery from PTSD. The play's detailed investigation of the issue can help raise awareness and understanding of the difficulties experienced by people who live with this disorder. Shepard illustrates the difficulty of recovering from PTSD by depicting the characters' struggles with flashbacks, nightmares, and other post-traumatic symptoms throughout the play. Their relationships and daily lives are significantly impacted by the trauma they have experienced, despite their best efforts to cope with it. One of the play's core messages is the struggle of confronting and addressing trauma to recover. Shepard presents this by introducing the character of Colonel, who avoids addressing his traumatic experiences and the memories and emotions associated with them. Contrastingly, Stubbs shows willingness to engage in any activity that can pull him out of the devastating traumatic vortex he is in. Through the events of the play and the characters' experiences, one can deduce that the playwright is after three important issues. The first one is to direct the audience's attention towards the enormous impact of been through a traumatic experience and have them reflect on their own traumatic experiences. The second one is to highlight the importance of providing the necessary treatment and support for those who suffer from PTSD to help them cope with the symptoms and recover from this disorder. The third is to raise people's awareness towards providing a more secure environment by showing them sympathy and understanding so they do not feel alone in their dilemma.

3. PTSD IN BRYONY LAVERY'S *FROZEN*

3.1. Introduction

Bryony Lavery is a British playwright who has written numerous plays that have been performed around the world, including *Kursk*, *The Believers*, *Frozen*, and *Beautiful Burnout*. She has won several awards for her works, including the Susan Smith Blackburn Prize and the Olivier Award for Best New Play. One of her most notable works is her play *Frozen*, which was first premiered in 1998 and has been produced in many countries since then. *Frozen* is a play that deals with the difficult and painful topic of child abduction and murder. The play constitutes 30 scenes in 3 acts. The play's plot is structured around the main character's actions, decisions, and experiences. It is tailored towards investigating whether human beings are born evil or whether there are other forces and aspects that can explain evil actions.

What characterizes most of Lavery's writings is that she tackles issues that are scathing in the present time. She is trying to direct people's attention towards these important issues as these matters would shape the life of the people who experience them. Using her distinctive writing style, Lavery is after raising the audience's awareness about these issues by having them put themselves in the positions of the characters. This way, one would be exposed to the dangerous consequences of being in a similar situation. Thus, the impact such experiences would leave on those people would not be as big as that on the people who are not aware of such issues.

Lavery's *Frozen* is unique in the way that it presents these characters and their experiences. A sexual serial killer called Ralph abducts and kills Rhona, a 10-year-old girl. Her mother, Nancy, and sister, Ingrid, are left to deal with the aftermath of her death. On the other hand, an American psychiatrist called Agnetha leaves New York for study. She also seems mentally disturbed as she screams and howls in her house before leaving.

Lavery's writing is powerful and insightful, and she uses her characters to explore complex themes of grief, guilt, and forgiveness. In this play, she presents an intensely moving journey that motivates people to reflect on the complex issues that emerge following a tragedy. She uses monologues to describe each person's backstory

separately before bringing everything together at the conclusion. For instance, although Rhona's death occurs early on, it remains the story's major drive. What characterizes Lavery's writing is her ability to effortlessly switch between poetic and everyday language. The vocabulary she uses helps her create a world that is real and authentic. She provides an accurate depiction of the emotional depth of the play through the use of metaphor and imagery.

The play's structure is as distinctive as its language. The playwright perfectly creates a special world for each of the three character by dividing the play into three acts. In each of the three acts, the playwright creates a safe environment for both the characters to share their traumatic memories and experiences and for the audience and readers to be exposed to what those people go through and how they cope with that. This allows Lavery to explore each character in depth and to show how their experiences are interconnected.

From a social perspective, the play draws attention to the serious issue of violence against women and the enormous damage it causes to them. Evidently, what happened to Rhona is the climax of such violence in the play. Another aspect of this issue is the dominance that Ralph represents over both Rhona and her mother, as he plays the role of masculine authority that tries to subjugate those women. Further, how the mother, Nancy, feels about her role in what happened to her daughter, Rhona, reminds us with the social attitude to look for a reason to consider victims of violence partners of the victimizers and to blame them for the unfortunate event they faced. This non-sympathizing social point of view leads those victims to feel the same about themselves. Consequently, such matters reshape families' perspective on life, people, and society. (Wakefield, 2004)

From a scientific point of view, the play explores a number of psychological and neurological aspects, such as the nature of memory, the impact of trauma on the brain, and the possibility of recovery through treatment and the development of new memories. The play's exploration of the malleability of memory is one of the play's key scientific concepts. Memory is shown throughout the play to be personal, influenced by both internal and external factors, as reflected by the characters' shifting memories of past events. As Herman states, "Traumatic events produce profound and lasting changes in physiological arousal, emotion, cognition, and memory." (Herman, 1992, p. 24-25) This

means, as one may conclude, that variables such as one's emotional state, the passage of time, and the influence of others may all have effects on one's memories.

Furthermore, the play sheds light on the role the psychiatrists and medical professionals in treating people who suffer from such conditions. The playwright, as one can say, does not want to address the matter fictionally, rather she, through her skillful writing style, blends medical facts with literature. Therefore, Lavery presents Ralph as a person with a history of mental illness. She also draws attention to the violence that can come as a result of this illness. Additionally, Lavery raises issues related to the way in which society views such mental illnesses, and it often stigmatizes the people who suffer from it.

The impact of trauma on the brain is another important scientific aspect explored in the play. As shown in the play, Nancy's experience of a traumatic event has left lasting impacts on her memory and identity. The characters' alienation, denial, and disorder are all symptoms that result from the traumatic experiences they have been through. These results are consistent with the results of trauma studies, which have shown that exposure to traumatic events can have long-lasting impacts on one's behavior and psychological state. In terms of interaction, people who experience traumatic events will "have more problematic interaction with their parents and have seriously disturbed interaction with their peers" (Iwaniec, 2006, p. 109) They struggle to establish normal connections with people around them due to feelings of fear, isolation, and alienation they develop after experiencing traumatic events.

In essence, Lavery's *Frozen* is a deep examination of memory, trauma, and identity that sheds light on crucial issues about the self as well as the possibility of recovery from traumatic symptoms. The play offers a comprehensive perspective on these issues by including scientific principles related to memory and the brain, and it encourages audiences and readers to reflect on their own traumatic memories and the effects these memories can have on them as well.

The play has been praised for its powerful performances, as it has the ability to inspire a deep self-reflection. Therefore, it has been produced in many countries and has been translated into many languages. This, as one may conclude, is a piece of evidence on Lavery's powerful and distinctive writing style, as it shows her ability to create a deeply moving and thought-provoking literary work. Though dealing with serious

matters, *Frozen* has captivated the audiences through the its effective language and structure that have helped in conveying its emotional intensity.

3.2. Playwright's Intent to Address Post-Traumatic Stress Disorder (PTSD)

In literary analysis, the author or playwright's intention contributes immensely to the interpretation and understanding of the play. In *Frozen*, the playwright seems pretty deliberate in addressing trauma and its impact on the life of both individuals and societies. According to Hagberg (2016), literary works are real issues modelled through diction and language and presented creatively. This aspect is evident in Lavery's play as she presents real-life aspects of criminals and serial killers and how the society and other people deal with their actions. It also presents different scenes and characters' experiences that address trauma and its aftermath. For instance, before he lets Agnetha embark on a journey towards her meeting the 'frozen state,' she is dealing with losing a friend, colleague, and lover. The serial killer, Ralph, also deals with the aftermath of his actions. Rhona's mother is stricken and traumatized by her daughter's ultimate death. The events before and after the death of Rhona all lead the play's plot toward addressing the theme of trauma and its impact on individuals and society. The unfolding events are not a coincidence but a deliberate move by the author to contextualize the play from a trauma perspective. This aspect offers the basis for analyzing the play from a post-traumatic stress disorder perspective. Lavery's choice of Agnetha as a character in the play speaks volumes about his intention to address trauma and its consequent damage to people and the society

The playwright intends to present the concept of trauma through her choice of characters, thematic concerns, and plot. Therefore, researchers should adopt the framework for interpreting and analyzing the text to understand it in alignment with the playwright's intention. The concept of PTSD came into use in the 1970s when army veterans were diagnosed after the Vietnam war (Tadevosyan & Babakhanya-Gambaryan, 2011). Consequently, it was recognized as a mental health disorder by the American Psychiatric Association and included in the Diagnostic and Statistical Manual of Mental Disorders in 1980 (Maheux & Price, 2015). Studies on the diagnosis and treatment of the disorder tool course and scientific researchers have made progress.

The research findings on PTSD have been used to treat mental disorder and defend criminals who commit unthinkable offences such as rape and killing. Philosophers and thinkers have also presented their thoughts on PTSD. This aspect is in response to the use of disorder in defending criminals and wrongdoings. Health experts and psychiatrists maintain that PTSD is a severe mental health condition that should be addressed and comprehensively investigated. Many studies, such as the one conducted by Catherall (2013). She examined the condition with the population being trauma survivors from various walks of life. Since its approval as a mental illness, literary authors and playwrights such as Lavery have utilized their skills to address the disease through art.

The research on PTSD has indicated that symptoms manifest within three months after a traumatic experience (Maheux & Price, 2015). Maheux & Price also argues that traumatic experiences leave an individual in an anxious and dissociative state that influences their behavior and occurs to people exposed to traumatic events. It summarizes that the people must have witnessed, experienced, or confronted an event that involved a death threat, critical injuries, or actual death. The individual response also involves intensive fear, horror, or helplessness. In summary, the manual highlights that PTSD is strongly affiliated with a triggering experience or event that forms the basis for diagnosis.

Most Post-Traumatic stress disorder victims exhibit short-term symptoms, but some do not develop chronic PTSD. According to Letkiewicz et al. (2020), the symptoms of PTSD may manifest in the first three months and sometimes many years later. The symptoms are sometimes severe as they affect an individual's mental state, interfering with their relationships and decision-making. Statistics on PTSD indicate that 20%, 50%, and 27% of people with PTSD recover within 3, 24, and 6 months while 70% recover in ten years (Rosellini et al., 2017). This indicates no specific duration within which people heal from PTSD. Recovery from PTSD involves healing from its symptoms which are severe and sometimes fatal. Avoidance, hyperarousal, anger, re-experiencing, cognitive processing problems, and detachment are all among the symptoms that a person has to be diagnosed with PTSD.

Re-experiencing symptoms entails an individual experiencing dreams, frightening thoughts, and flashbacks related to the traumatic event they witnessed or

were involved in. These symptoms interrupt the victim's behaviors, thoughts, and feelings to the extent they cannot carry on their daily routines. Similarly, avoidance symptoms entail the victims of a traumatic event staying away from objects, places, or people who serve as triggers and reminders of the experience. For instance, someone who witnessed a fatal road accident may avoid crossing the road or seeing cars. Arousal and reactivity symptoms constantly affect a person's feelings and emotions. For instance, a person may feel angry and stressed. Lastly, cognition and mood symptoms cause people with PTSD to feel alienated and detached from others. They include guilt, negative attitudes toward oneself, and losing interest in fun activities. Such symptoms occur to anyone who experiences a traumatic event, but some persist beyond a month and more. Bryony Lavery draws from these characters in her attempt to address issues around PTSD.

3.3. Exploration of PTSD Symptoms in *Frozen*

Bryony Lavery's exploration of the concept of PTSD is evident through the characters. Lavery's *Frozen* contextualizes the aspect of PTSD in a literary way in that it is partially hidden within the thematic concerns and character traits. Nevertheless, she does not directly mention PTSD and its symptoms but leaves this task to the audience and readers of the play to interpret. However, the patterns are clear and easy to single out from the play. Lavery's primary thematic concern to present the trauma symptoms and related issues is child abuse.

The trauma theory, as mentioned in chapter one, asserts that traumatic experiences can have long-lasting effects on individuals, leading to many symptoms like anxiety, depression, and post-traumatic stress disorder (PTSD). Therefore, there are many key aspects that one can draw attention to when addressing the play according to the trauma theory. The whole events of the play show the suffering of the characters as they try to settle down their emotions, memories, relationships and attitudes after the traumatic events have become part of their past. The present lives of those characters, especially the mother, are shaped by those past events. The way the mother, Nancy, struggles to stand on her feet and live normally after losing her child is presented in a realistic way that calls for sympathy.

There is a clear artistic element that resembles PTSD in the play. This is the structure of the play, with all its fragmentation and scattering, together with the disjointed language we repeatedly hear from characters. This reflects the jarring and distorting elements that shape those characters' behavior, leading to put a barrier between them and the society they live in. The difficulty in expressing what they suffer from and the inability to properly communicate with other people makes them feel strangers. The ultimate effect of this isolation from society is to form an inclusive world in which they keep moving under the effect of their past and its consequences. This is evident in almost all the characters' speeches. Similar to the stream of consciousness technique used by the modern novelists, Lavery uses monologues of her characters to reveal much of their interior world. This is clearly shown in Nancy's monologue:

I wanted to go out for a walk
up a hill somewhere
find some fresh air
there's no air
Message
after message
after message
on the answerphone
Newspapers
we must we must we must
want to talk to them (*Frozen*, p. 28)

Moreover, one of the important matters the play examines is the way in which trauma can be passed down through generations. It shows how the traumatic past shapes one's life, behavior, and identity. This is clearly shown in the play through the character of Ralph. Because of his traumatic and violent past, Ralph has committed these crimes, passing this trauma down to other people. This shows the cyclical nature of trauma and how it can influence other people, having them develop a traumatic nature as well as triggering their own traumatic past experiences.

Another important aspect that the play has at its core is that it encourages empathy and understanding for those who have experienced traumatic events and are suffering from post-traumatic stress disorder. Along with the need for the people who suffer from PTSD to be treated by the medical professionals, Lavery emphasizes the importance of the role that the society plays in having those people back in the society because they, due to experiencing traumatic events, feel alienated and isolated. Therefore, Lavery lays emphasis on showing understanding and compassion for the

people who have experienced severe traumatic events and are suffering from PTSD because of these events.

3.4. Child Abuse as the Basis for the Exploration of PTSD Symptoms

One of the pivotal issues that *Frozen* tackles is 'child abuse'. The play sheds light on the impact of child abuse on both individuals and societies. Further, it depicts the aftermath of this phenomenon in a way that reveals the devastating effects of abuse on both the victims of this act and their families as well. In the play, the victim of this horrible act of abuse is Nancy's daughter, Rhona. She is abused and murdered by Ralph. Moreover, Nancy is an example of how the family of the abused is enormously impacted by this act as well. She struggles to come in terms with what has happened to her daughter, and this is depicted as a direct result of the abuse that her daughter, Rhona, suffered.

Moreover, the play investigates the ways in which the phenomenon of child abuse can be cyclical. It shows how child abuse can be passed down to other people, causing them commit the same crime. This is perfectly depicted in the character of Ralph, the abuser and killer of Nancy's daughter, Rhona. Ralph's traumatic past is hinted at throughout the play. The abuse and violence that Ralph has been exposed to have led him to commit such crimes. Thus, by linking Ralph's past and actions, the play sheds light on how child abuse can perpetuate cycles of violence, crimes, and trauma.

Studies on Lavery's *Frozen* analyze it as a horror play, claiming this is the basis for its analysis from a PTSD perspective. However, the prevalent theme of child abuse forms the primary aspect that gives the play the trauma effect. That particular event makes the play a combination of anxiety, fear, disgust, and negative emotions. The play was performed in National Theater in 2002, and the audience was troubled due to the feelings prompted by Rhona's family's experiences due to her abuse. The audience gets lost on who to sympathize with between the abused and the abuser. The abuser, Ralph, is also a victim of sexual child abuse. Along with the trauma and the post-traumatic struggles, the playwright attempts to draw the audiences' attention towards the dilemma of child abuse. One can feel it while reading through the scenes in the text. Lavery is very deliberate about addressing child abuse as a pivot that extends to the aspect of trauma drama of the play.

Lavery presents child abuse as the centre for trauma in the text in that the villain and antagonist in the play experience childhood abuse that many analysts believe influences his behaviors and choices in life. His mother had many lovers, and she never took care of him. In the play, he recounts his mother throwing him into the sink, and he hurt his penis. On another occasion, he fell on it, and it worsened. His mother's men abused him, but she did not protect him from them (Lavery, 2018, p.44). Although he is the villain and abuser in the play, the audience gets in trouble deciding what they should feel for him. On the one hand, his childhood makes the audience feel sorry for him, but his recent past and current actions portray him as a monster. According to research by Edwards (2018), childhood sexual abuse has long-term effects on the victims, influencing their relationships and actions. Lavery has drawn from this fact to structure her play to portray child abuse as the trauma centre.

Edwards (2018) also argues that childhood sexual abuse has surfaced as a crucial subject among researchers and psychologists in the recent past. Statistics on the issue indicate that 33% of women and 18% of men are victims of childhood and adolescent sexual abuse. Childhood sexual abuse could take many forms, from seduction by neighbors and close relatives to rape by strangers. Letkiewicz et al. (2020) argue that the consequences of sexual abuse in children are worse when the evil is perpetrated by someone close to the victim. This is because it becomes a combination of abuse and betrayal. This is the case with Ralph, that his mother and her lovers abuse. A mother is a protector, but she has taken part in her own child's abuse. Zafar & Ross's (2013) research findings concur with this as they state that the degree of sexual abuse influences the effects.

Zafar & Ross (2013) claim that childhood sexual abuse causes the victims to experience post-traumatic stress disorder symptoms. The most common is a feeling of shame, guilt, and depression. These feelings affect the victims' relationships and associations. In some cases, they embark on a revenge mission due to extreme emotions of negative self-thoughts. The research also indicates that survivors of childhood sexual abuse express self-destructive manners and actions such as suicide ideation. In the play, Lavery uses the character of Agnetha to contextualize the post-trauma effects of child abuse. She explains how his childhood experience may have caused him to become a serial killer and an abuser. Additionally, she uses Rhona's abuse experience to contextualize how post-trauma can occur to people indirectly involved in an experience.

Rhona's mother does not understand how anyone could have done that to her daughter. The abused is not alive to tell the story, but people indirectly involved, such as her mother, are left to deal with the aftermath of the actions.

3.5. PTSD Representation Through Characters

The concept of PTSD seems easy to understand, but it is a complex web and puzzle based on Lavery's play. Its impacts are felt by people beyond those who experience the traumatic or triggering event. Lavery's choice of characters is blended to address PTSD and its effects on an individual, the environment they live in, and society. From Agnetha's background and research to Ralph and Nancy, their stories, expressed through their monologues, reconcile at some point in the play due to the post-traumatic symptoms they experience. One can infer that it is impossible to alienate the PTSD framework from the character choice in the play. As it is, literary authors use characters as vessels to deliver their intent, thematic concerns, and critical issues affecting the society. In Lavery's play, the patterns of character traits and actions draw one towards the complex puzzle around PTSD, which Lavery portrays as a thematic issue beyond a medical concern.

The journey towards healing and recovery from the post-traumatic symptoms is one of the most key themes of the play. Nancy, the mother of the victim, is struggling to cope with the aftermath of her daughter's loss. Nevertheless, she starts confronting her traumatic experience and working towards healing through her interactions with Agnetha, the psychiatrist. This, as one can assume, shows that one of the crucial matters that play has at its core is educating the audiences and readers and directing them to a way out of the PTSD dilemma they are in. Through Agnetha's work on violent criminals, like Ralph, the play shows the importance of therapy and how it helps people with PTSD confront and overcome their traumatic experiences that have led them to this suffering.

Furthermore, people who experience traumatic events and are suffering from PTSD often feel isolated and disconnected from others, and this can be an obstacle for them to healing. This connection can be with people who have been through similar traumatic experiences, or with family or friends, so one feels less alone and more understood. However, this connection is what Nancy does not have, as her relationship

with her second daughter, Ingrid, is not going well. This is clearly shown in Nancy's monologue:

I'm not best pleased to get back to a
drunk Ingrid
ash tray piled
another fag burn on the settee arm... (*Frozen*, p. 23)

The way in which Nancy addresses her daughter in these lines reveals the disturbance in their relationship, which, in turn, serves as an obstacle to establishing the connection that Nancy desperately needs. Further, connecting with therapists and psychiatrists is a crucial factor for the healing process. In *Frozen*, the connection that Agnetha and Nancy form helps them both to heal from their traumatic disorder. This connection is evident in the dialogue between Agnetha and Nancy in scene 30:

Nancy: I don't know whether to be sad or glad.
Agnetha: be both.
Nancy: No.
Bugger it.
I've been sad enough.
I'll be glad.
That murdering buuger's kept me from happiness.
and ... laughing
and
cheer
for bloody twenty-odd years ...
Bugger it.
Glad
Luagh.
Have a joke. (*Frozen*, pp. 79-80)

These lines clearly show the psychological equilibrium that both Nancy and Agnetha have reached. Developing empathy, compassion, and understanding, Agnetha and Nancy have successfully come in terms with what they have been through in their lives.

3.5.1. Ralph Wantage

In the play, PTSD is presented as a mental health condition that Ralph develops after experiencing a traumatic event. Ralph's PTSD is not directly addressed in the play, however, it is hinted that it is a violent or abusive experience. He is shown as being tortured by nightmares, flashbacks, and intrusive thoughts related to the traumatic events he has been through. He is also depicted as being emotionally detached and struggling to have a normal relationship with other people. This is because of the feelings of fear

and anxiety, which are common symptoms of PTSD, that he develops due to the traumatic events he has experienced.

Unlike other characters such as Nancy and Agnetha, who suddenly find themselves in a traumatic situation, Ralph is not new to that kind of life as he has had traumatic experiences as a child. Lavery presents him as the antagonist who spends his adulthood stuck in the past experiences of his childhood. Further, his childhood traumas haunt him causing him to hurt others and himself as well. As a result, Ralph develops symptoms of PTSD that include dissociative patterns and troubled relationships. Ralph manifests these symptoms in many ways throughout the play. Lavery uses him to show how childhood trauma can damage the lives of children as well as families in the society. From Agnetha's research, it is evident that Ralph has a chronic PTSD as it has persisted throughout his life, and even as an adult, he cannot control his actions.

Agnetha discovers that Ralph is unaware of his actions through her interviews with him. Ralph's actions are a result of accumulated trauma that he carried forward from his childhood to adulthood. The trauma causes him to harm himself and others, particularly innocent children. This concurs with Gordon's (2017) research that harming others and inflicting pain on people are among the coping mechanisms of PTSD. Gordon argues that PTSD patients lose track of their actions at some point as their 'cognitive state is disturbed'. In his lifetime, Ralph has sexually assaulted and killed seven girls within 20 years. He has a high opinion of himself due to the caution he exemplifies in carrying out the murders. This aspect brings in the controversy on whether it is valid to claim that Ralph is unaware of his actions. However, one can question this argument by posing whether he would have executed his evils with so much caution, yet he is oblivious to his actions.

However, Marono et al. (2020) examines the behavioral sequence of serial killers' actions and lives, from childhood abuse to their choice of murder methods. The authors claim that the behavior patterns of the serial killers' profiles from the FBI's behavioral science unit express some similar characteristics in behavior patterns. The personal histories of the offenders indicate childhood abuse and neglect by parents and society (Marono et al., 2020). Additionally, Iwaniec (2006) suggests that the extent of abuse causes 'cognitive processing challenges' that result in the expression of aggressive patterns by the victim. Abuse can have a serious impact on one's cognitive processing

ability. When a person is subjected to abuse, they may develop cognitive processing disorders that make it difficult for them to stabilize their emotions and behavior. (Iwaniec, 2006) This, in turns, leads the victim to develop aggressive behavioral patterns. A victim's perception of heightened arousal or hypervigilance is one way in which abuse can impact cognitive processing. This may make it extremely difficult for the victim to focus their attention or control their emotions, leading to impulsive or aggressive behavior. This is clearly shown in what Ralph has come to in Lavery's *Frozen*.

According to the World Health Organization (2020), child abuse is categorized into psychological, physical, and sexual abuse. WHO describes sexual abuse as an action where a child is used for sexual pleasure. Whereas physical abuse entails acts that cause physical injuries or harm to the child. Psychological abuse, on the other hand, implies a lack of a conducive environment or actions that adversely impact a child's mental and emotional well-being. (World Health Organization, 2020) In his childhood, Ralph experiences physical, emotional, and psychological abuse that traumatized him and led to PTSD. Ralph experiences all these forms of abuse, from being injured by his mother, being sexually abused by his stepfather, and experiencing neglect from his mother, who is supposed to protect him. The trauma he has experienced has had a lasting impact on his cognitive processing ability, which makes him struggle to regulate his behaviors and emotions. The combination of the spectrums of abuse leads to the later behaviors that lead him to kill and sexually abuse the seven children. Hence, his actions, despite being choreographed and planned, result from cognitive processes he experiences post-trauma.

Although Ralph experiences head injuries that may have damaged his brain, still this, as one may suggest, is not the primary explanation for his actions. As explained above, his actions can be defined within the Post-Traumatic Stress Disorder framework. The nature of his killings reveals a tremendous psychological and cognitive problem. He makes lists of his victims and records the titles of his pornographic videos. He ensures his killings occur within an 80-mile radius, which he gladly calls the centre of operations:

You've got to keep things *clean* in every sense
I never touch *anything* outside an eighty mile radius
of my centre of operations
oh no
oh no
once you've got a site sorted

well, you don't mess with *that*, do you?
Obviously
But
Mude sticks (*Frozen*, p. 16)

Within this radius, he conducts his killings, records pornographic videos, sexually assaults the victims and buries them. These actions portray his obsession with evil that no sane person can possess. Like all other serial killers, he has a solid zeal to kill and derives happiness from doing wrong things. This observation aligns with Kunst's (2011) research which claims that revenge thoughts are likely to occur among individuals who have experienced abuse from others, particularly those with post-traumatic stress disorder.

3.5.2. Agnetha Gottmundsdottir

What characterizes most of Lavery's writings is that she tackles issues that are scathing in the present time. She is trying to direct people's attention towards these important issues as these matters would shape the life of the people who experience them. Using her distinctive writing style, Lavery is after raising the audience's awareness about these issues by having them put themselves in the shoes of the characters. This way, one would be exposed to the dangerous consequences of being in a similar situation. Thus, the impact such experiences can leave on those people may not be as big as that on the people who are not aware of such issues.

For a long time, psychiatrists and psychological researchers have attributed PTSD to people who have served in combat and those who have experienced threatening situations and serious injuries. However, Bryony Lavery uses Agnetha to address other important factors that can eventually lead to the development of PTSD, and are often ignored. According to Kunst (2011), PTSD can result from any trauma that affects an individual's emotional and physical well-being. Agnetha expresses symptoms of mild PTSD, as the U. S. Department of Veterans Affairs & Health (2013) highlights. PTSD can manifest in different degrees, from mild to severe. The degree of PTSD manifestation difference is expressed through the characters of Ralph and Agnetha. Ralph has severe or chronic PTSD, while Agnetha's is mild, and she does not represent a high degree of the disorder. According to Mark (2004), any traumatic event puts a victim at risk of PTSD, regardless of the trauma intensity.

Before leaving the house to start his project on Ralph, Agnetha feels stressed, and she howls loudly. This is an indication she had a feeling she felt the need to let out. She had lost a colleague, David who she was sexually engaged with. His death was abrupt, and he had a place in her life as she had worked with him for ten years. This is a traumatizing event because it was abrupt, and she is left angry with him for letting himself get killed. The fact that David was a married man and the guilt that she felt further heightened her anxiety and stress. On the plane, she expresses negative moods when she cannot bear with the flight attendant to refill her brandy (*Frozen*, p. 18). She also writes a hate mail to David, who is dead. These symptoms indicate that she cannot get over David's death. Lavery presents her as a woman frozen on the inside who must find a way to shell out and have a normal life.

Lavery uses Agnetha to illustrate that serial killers' actions can be influenced by other factors besides PTSD. This implies that although PTSD affects the actions of serial killers such as Ralph, other factors also contribute to their behaviors. In this case, Agnetha proves that Ralph's brain damage resulting from head injury can potentially influence his actions. She flies to London on a mission to research her thesis titled "Serial Killing... a forgivable act?" (*Frozen*, p. 18). She addresses several academic audiences in London to present her research topic on how criminal brains operate. While examining and interviewing Ralph, Agnetha discovers that his brain's frontal lobe is injured. It is an essential part of the brain because it affects a person's ability to make rational decisions and judgments. In scene 14, she again establishes that Ralph's responses to structured tests are not expected due to the brain damage. Lavery constructs Agnetha's character to indicate that PTSD is not the sole cause for serial killers' actions, but other factors come into play.

It is not always necessary that people with PTSD know that they are suffering from PTSD in the first place. Rather, it could be clear in the way they behave as well as how sensitive they become when they are exposed to an event that would more likely get them to recall a similar negative event that they had been through in the past. They would unconsciously develop unstable behavior and negative reaction whenever they are exposed to an event that brings back the traumatic event they experienced at some point in their life. This is clearly shown in the character of Agnetha, the psychiatrist. One can state that the psychiatrist herself is suffering from PTSD. First, it may be because of the patients she regularly sees. As Herman states, "It is not only the patients

but also the investigators of post-traumatic conditions whose credibility is repeatedly challenged. Clinicians who listen too long and too carefully to traumatized patients often become suspect among their colleagues, as though contaminated by contact.” (Herman, 1992, p. 5) The traumatic experiences that her patients have been through, as well as the consequences that these experiences have left on them, have a tremendous impact on Agnetha’s life, behavior, attitude, and psychological state as well. That is clear in her reactions throughout the play and the way in which she responds to any action done by the people around her. Furthermore, this is obvious when she bursts into tears at the beginning of scene two when she is on her way to the airport. The traumatic event Agnetha has been through, as one may say, is the death of her friend. This has left an enormous psychological impact on her. The moment in which Agnetha is writing to David explains it all;

(She starts writing furiously....)
Dear David,
Dearest Damn Fuck You Then David
I hate you
I hate hate hate hate hate you
All the people on this flight are in mortal danger and
it is your fault..
you and your Big News
you and your Hilarious Damn Bad Behaviour have
alchemised me into
Miss Fudge Feeling of Washington Square
who is shit-scared of flying!
Give me back my real brain!
Hand over my native intelligence!
when we crash
because of you
because of you taking away my faith in anything at
all... (Frozen, pp. 18-19)

These lines show the devastating post-traumatic impacts that Agnetha is suffering from due to losing her friend. Further, this monologue sheds light on one of the most important symptoms of post-traumatic stress disorder, which is ‘re-experiencing’ the traumatic event. Moreover, Agnetha, as one may conclude, gives evidence that she has suffered a great deal, and specifies the real trigger to explode and release what she has kept in because of her traumatic experiences. This monologue reveals that Agnetha is haunted by traumatic images and memories of the horrible events she has experienced. Correspondingly, one can easily deduce that Agnetha has shown another PTSD symptom through these lines, which is ‘avoidance’. Agnetha has avoided confronting her traumatic experiences until they are triggered.

More importantly, one may assume that Agnetha is using her patients' experiences as well as the treatment she would suggest for them as a means to treat hers. In other words, having spoken to, as well as treated, too many patients, she has had the opportunity to know more about the different kinds of psychological problems and traumatic experiences that people have been through. This would eventually have her expand her knowledge not only about these experiences, but about finding a way out of the psychological vortex she has been put in because of her friend's death.

3.5.3. Nancy Shirley and Ingrid Shirley

Throughout the play, Nancy and her daughter, Ingrid, are depicted as characters who are suffering from post-traumatic stress disorder as a result of the loss of a family member. The mother, Nancy, is consumed by her grief on the loss of her other daughter, Rhona. She is haunted and tortured by that loss, which has led her to experience PTSD symptoms.

According to Sonis (2012), PTSD is the most 'common psychological disorder' occurs after an individual is exposed to a traumatic event. Nancy suffers from multiple phases of trauma. First, she loses her daughter and joins an organization called FLAME to publicize Rhona as a missing person. She is living with stress and anxiety as she looks after her daughter. On her fifteenth birthday, she addresses a teachers-parents meeting on Rhona and firmly believes she is still alive. She keeps her room neat as it should, hoping she will come back.

I don't want anyone in here moving her things
around and I want to keep it exactly as it was!
If I have to get Bob to put a lock on that door
I will
Rhona
Where are you?
I know you are somewhere! (*Frozen*, pp. 14-15)

It is strange to imagine that she is the cause of her disappearance as she sent her to take pruning shears to her grandmother. The second phase of her trauma begins after she confesses to Ralph. This event crashes her even more as she reflects on it. She has always passed by the shed where Ralph buried Rhona, hoping she is alive. A strong wish possesses her for revenge, and she wishes to see him die and suffer like her daughter did. The authorities give her trouble getting her daughter's remains for burial, which

further stresses her out (*Frozen*, p. 57). These two phases merge and change her behaviors as she does not sleep and barely feels alive.

Nancy expresses PTSD symptoms, such as emotional distress that troubles her relationship with Ingrid. She also expresses avoidance symptoms and avoids talking about her traumatic experiences with Ingrid and Ralph. Her negative thoughts and mood further strain her relationship with her daughter Ingrid. Nancy does not check on her daughter to know how she copes with the news of her sister's murder. She drifts away, and this tends to affect Ingrid. When they go to see Rhona's remains, Nancy, says, "She was my little girl," and Ingrid defensively responds, "So am I" (*Frozen*, p. 58). She has a feeling that her mother does not love her as much. Like her mother, Ingrid is traumatized but suppresses the feelings of stress and anxiety (if she has any) because she wants to be there for her mother. She encourages her to meet Ralph and forgive him as a step towards healing. She seems to accept the situations without much avoidance or negative thoughts or symptoms in all these events. However, she experiences the re-experiencing symptoms of PTSD in the form of dreams. She recounts the following dream in her monologue:

I had a bad dream
I'm in the frozen frozen Arctic
I've lost somebody
the body's under the ice
but it's getting harder and colder
the ice is building up...
I say, "no wonder, you've let the thermostat
go off..."
but she wails like a great soft thing ...
says...
"I look for a hole.
I look for a seal hole
but there's no hole
the body's down there
but it's all getting whiter" (*Frozen*, p. 23)

A contrast between Nancy's and Ingrid's responses to the murder of their loved one exemplifies research by Gibson (2006) that asserts people respond differently to a traumatic event. Gibson also argues that some people move on fast after a traumatic event, while others take up to ten years. Ingrid moves on fast as she invents a way of dealing with her grief soon enough. She travels to Asia and explores the Eastern thought systems that promote forgiveness and compassion. She uses her newly acquired methods to help her mother out of PTSD.

Avoidance, on the other hand, is another PTSD symptom that Nancy has developed as a result of her daughter's loss and murder. She tends to avoid anything that may trigger her memories of her daughter, including people, activities, and places. Therefore, the symptom has led Nancy to withdraw from other people around her, including her daughter, Ingrid. As a result of this withdrawal, Nancy becomes isolated, in an attempt to protect herself from having a new traumatic experience and further pain.

Ingrid's traumatic pain, nevertheless, has been deepened and worsened as a result of the gap that her mother's detachment has created. Iwaniec (2006, p. 32) states, "emotionally neglected children had parents who were emotionally unavailable, and their mothers were found to be detached and unresponsive to the children's emotional needs and signals of distress." Ingrid starts to feel neglected by her mother, and is not given the care and love that a daughter is supposed to have from her mother. She even feels that her mother loves her murdered sister, Rhona, more than her. This is clearly evident in the way Ingrid responds to her mother, saying "So am I" when her mother says "She was my little girl," about her murdered daughter, Rhona. (*Frozen*, p. 58)

Moreover, through her behaviour and interactions with others, especially her mother, Ingrid reveals the severe post-traumatic pain she is suffering from. This is perfectly depicted in the scene when Nancy sends her to her grandmother's house. Ingrid explodes, replying:

I'm just an unpaid scivvy in this
establishment ... I wish I was an orphan ... I wish
somebody
would adopt me ... nobody loves me ...
everybody loves Rhona best ... (*Frozen*, p. 8)

This reveals the depth of her suffering as well as how severe her post-traumatic pain is. This response shows the symptoms of hyperarousal that Ingrid develops. Further, it shows that she is constantly on the edge and easily startled. Overreaction, sensitivity, and anger are among the PTSD symptoms that Ingrid is suffering from.

3.6. Healing and Recovery from PTSD in Lavery's *Frozen*

Throughout the play, the audiences and readers are exposed to the way in which different kinds of traumatic events and experiences result in long-lasting devastating symptoms. These symptoms may include flashbacks, intrusive thoughts, anger,

detachment, and hyperarousal. The development of these PTSD symptoms can shape the person's behaviour, attitude, social life. However, they vary in their severity from one person to another. Among the factors that can contribute to the severity of post-traumatic symptoms are the environment, family conditions, body readiness, and personality type.

In the play, Nancy's healing process from PTSD is depicted as a complicated and tough journey that takes her to confront her trauma and come to terms with her responsibility for her daughter's death, as she constantly blames herself, claiming that she should have protected her. Throughout the entire play, Nancy struggles with deep grief and anger for losing her daughter, Rhona.

The turning point towards Nancy's healing and recovery is when she begins to recognize that her actions and decisions have contributed to her suffering, and have kept her in that enormous psychological vortex. She realizes that she has been trapped in a cycle of blame and revenge, which has kept her from moving on. She also understands that she has neglected her own self-care and has not let herself to experience joy or happiness for a long time. This is evident in the play when Nancy says:

I've been sad enough.
I'll be glad.
That murdering bugger's kept me from
happiness
and ... laughing
and
cheer
for bloody twenty-odd years ...
Bugger it
Glad
Laugh
Have a joke. (*Frozen*, p. 79)

This shows that Nancy begins to heal from her post-traumatic pain. Opening up to the possibility of forgiveness, Nancy shows the potential of healing even for the severe post-traumatic symptoms. Further, she manages to re-establish normal connections with the people around her, particularly with Agnetha, the psychiatrist studying Ralph's case.

Despite the fact that Nancy's recovery is not portrayed as an easy process, the play does confirm that healing is possible. By confronting her trauma and taking responsibility for her own healing, Nancy is able to move towards a place of greater peace and acceptance. She manages to control her triggers, which is one of the most important "how to's of life", as (Najavits, 2017, p. 35) calls them. In the end, she is able to get rid

of her need for revenge and find a sense of closure that allows her to move on with her life.

Nevertheless, Ralph's healing process is presented as a difficult and complex process. Ralph, as a serial killer, is initially portrayed as having no remorse for the crimes he committed, and is unable to realize the devastating impacts his crimes leave on the victims and their families as well. In addition, he does not recognize that these terrible actions enormously contribute to traumatic pain. However, as he starts the healing journey with Agnetha, one sees glimpses of Ralph's traumatic experiences and the tremendous emotional devastation he suffers from. He confronts his childhood traumatic experiences, including the abuse he suffered at the hands of his father, during his therapy sessions with Agnetha. As Ralph opens up about the enormous emotional toll that his crimes have taken over him, one sees the massive weight of guilt and remorse that he struggles with. As a result of these sessions, Ralph begins to express remorse for the crimes he committed and to seek forgiveness from his victims's families. This is clearly shown when says to Nancy:

I am sorry.
I am sorry from the bottom of my heart.
I am thinking about what I did.
I am realising
I realise in abusing and killing your daughter
... Rhona ...
I hurt her (*Frozen*, P. 72)

Ralph's healing in *Frozen* exemplifies the possibility that even individuals who have committed heinous acts may address their traumatic suffering and seek redemption as well. Although the recovery journey is difficult and challenging for such individuals, the play, however, emphasizes that even the most traumatized individuals may find their way to inner peace and self-understanding.

Additionally, Agnetha's healing from her post-traumatic suffering is not given as much attention as that given to Nancy's and Ralph's. However, there are some indications that she suffering from trauma and has an emotional breakdown. Throughout the play, she is presented as a psychiatrist who focuses on studying the minds of criminals, like Ralph. However, as the play progresses, one sees Agnetha's emotional suffering as well as the way in which it affects her work. After the therapy session with Ralph, Agnetha explodes in tears. This indicates that she is not as emotionally detached as she seems, and that her job negatively impacts her mental health.

Moreover, as the events in the play develop, one sees hints that Agnetha has experienced trauma before. She is unable to escape her traumatic memories, as she is haunted by flashbacks and nightmares related to these memories. Further, her work with Ralph and Nancy has deepened the pain and worsened her suffering. This, in turn, shows that despite the fact that she is a well-equipped psychiatrist, she is still not immune to the impact of trauma and that she also needs the healing and support that any person with PTSD needs. She can also be viewed as a catalyst who contributes to the healing process of the other characters.

Following the recognition of PTSD as a mental disorder, medical and psychiatric researchers embarked on identifying the recovery and healing processes of PTSD. Rosellini et al. (2017) argue that studies on PTSD healing and recovery are inadequate and inconclusive as they rely on small sample sizes. In response, Rosellini et al. report predictors and recovery patterns of PTSD using data from 1575 participants with PTSD history in WHO surveys. The report's findings indicate that PTSD recovery is faster among women than men. They also indicate that recovery from PTSD caused by killing, injuring, and torturing others is relatively slow and expresses low odds of early recovery (Rosellini et al., 2017). This research is perfectly exemplified in Lavery's *Frozen* since Ralph takes more time than Nancy, Agnetha, and Ingrid to recover from his trauma

Another research by Erickson et al. (2014) examines the neurobiological aspect of PTSD and uses the findings to recommend recovery and healing procedures. The author argues that the diagnosis should be based on the symptoms such as avoidance and intrusion. Concerning recovery, the research recommends consideration of the intensity and duration of trauma. The shorter and less intense, the more manageable the recovery. This concurs with Back's (2015) findings that prolonged exposure to trauma leads to severe PTSD among patients. The theory behind the argument is that a trauma victim does not emotionally process the traumatic event when it occurs. Emotional processing theory poses that fear that results in PTSD is a result of memory as a cognitive structure that constitutes fear stimuli and response (Erickson et al., 2014). In Ralph's case, he does not understand trauma when it occurs, but it haunts him later in adulthood. Psychological interventions such as behavioral therapy could accelerate the recovery journey. This is what Agnetha does as she unconsciously serves as a therapist for Ralph. He expresses himself and his childhood trauma, which is a significant step toward healing.

Family and society contribute to an individual's recovery from Post Traumatic Stress Disorder (Catherall, 2013). This is exemplified through Ingrid, who supports her mother toward recovery, though their relationship is disturbed due to the traumatic experience they have been through. She understands the importance of her input in helping her mother overcome the trauma. Nancey, Ralph, and Agnetha adopt the mechanism of sharing and talking about the traumatic event to process it and heal (Catherall, 2013). Agnetha calls David's wife and tells her about how she also misses him. Mary, David's wife, is the reason why she feels guilty because she has slept with her husband. Similarly, Nancy talks to Ralph and informs him that she forgives him. Ralph, on the other hand, writes to apologize to Nancy for torturing, raping, and murdering her daughter, Rhona. Speaking out and having a conversation relieves the victims, and they can carry on their normal life. The play ends with Agnetha and Nancy smiling as they feel unburdened by forgiving themselves and their traumatizers.

CONCLUSION

The two works chosen in this study show the deep influence of PTSD on modern man and the devastating experiences people go through in living the hard times of remembering the traumatic events that keep haunting them. These two plays present PTSD as an accompanying element that is prominent in modern life. Both authors comprehensively concur that PTSD affects individuals and societies in various ways. They have used war and abuse as means to explore the consequences that traumatic events have on individuals and societies. Through characterization and thematic concerns, the two playwrights have succeeded in contextualizing the concept of PTSD in their plays. Although they are fictitious, the two plays address real-life situations of war and abuse that affect the victims' mental emotions and mental health. Further, the events of the two works encompass the journey towards recovery, as most of the characters reach psychological equilibrium in the end.

Moreover, the analysis of the two plays brings out the playwrights as distinct people with different views on the concept of PTSD. The events of the two works have completely different contexts. Shepard's *States of Shock* is a war case of PTSD that involves memories of the shocking moment that kept clinging to the characters' minds. On the other hand, Lavery's *Frozen* is a domestic case of PTSD where every character suffers from certain familial or social disturbance. In spite of all these differences between the two works, one is American and the other is British, but both works follow the last phase of characters confrontations with their fears and pains of their PTSD conditions. In addition, the two works show the ways in which the characters cope with their traumatic memories and how they manage to indulge again in their normal life activities. The contrast expressed by the two plays is important in that it puts forward the many ways in which PTSD can result and affect individuals and their lives.

It is interesting that how the characters are presented in these two works shows that post-traumatic stress disorder is part of modern life. Characters struggle with the pains of their traumatic past and eventually overcome those pains empowering their defense mechanisms and reach what Freud calls 'mastery'. One may expect that they will fall into the traps of these memories again, however they have already succeeded in getting out of these traps. As long as they have defeated their weaknesses once, they have acquired power and control over their traumatic memories. This adds power to their

psychological apparatus and gives them immunity in the face of possible future PTSD attacks. The source of this power in *States of Shock* comes from Glory Bee who becomes the hope through which the Colonel decides to go on with his life and leave the pains of his dead son behind. Stubbs succeeds, after some efforts, in following the Colonel in his decision. He reaches his final recognition when the Colonel decides to leave him for good. Whether he is afraid of being left alone or affected by the Colonel's decisions and his relationship with Glory Bee, Stubbs has acquired enough power to rush to Glory Bee and discover that he has retained his joy and physical power. In Lavery's *Frozen*, the source of power that leads the characters to safety is the psychiatrist, Agnetha, who intentionally educates the characters about their conditions and leads them to recovery. Agnetha starts with the mother, makes her re-narrate her PTSD condition repeatedly, empowering her to control her sadness. Further, she helps her to reestablish connections with her other daughter, Ingrid. She is also the source of power for the criminal, Ralph, to admit his bitter childhood traumatic experiences, leading him to apologize and ask for forgiveness.

The modern man, as portrayed in these two works, is left alone with weak familial and social connections, so he must depend on himself to find a way out of this suffering. The lack of familial and social support prolongs the suffering of the characters. In the two plays, most of PTSD characters are in need of someone who can either be compassionate with them or understand what they have experienced, because they have not acquired enough power to overcome their suffering on their own yet. Therefore, they achieve success in overcoming their PTSD conditions only when they retain connections with people around them. These two works give clear awareness of the PTSD condition and its role in shaping modern life. In Lavery's *Frozen*, Nancy's sharing of her understanding of her own experiences with Agnetha results in enhancing the well-being of both characters. The closing scene of *Frozen* ends with a smile that leads to a loud laugh.

The human capacity to stand against hardships is the main factor of the recovery process. Nancy's final meeting with Ralph in the prison reveals that Nancy has already restored a notable amount of her psychological well-being that has enabled her to forgive Ralph before he asks for it. This considerable amount of well-being could have been provided by her daughter Ingrid who uses a metaphor to make her mother reconsider the murder of Rhona, imagining it as "a Bird in The Wind." The horrific images of Rhona's

murder inside Nancy's mind are replaced by serene natural details. For Ralph, it is clear that he has already surrendered to his traumatic suffering for a long time, but gradually he maintains enough power to regret his weakness and to ask for forgiveness. In *States of Shock*, Colonel decides to step back once he recognizes that listening to Stubbs will jail him in the painful memories. These events, however, highlight different levels of resilience, as characters who encounter severe psychological stressors manifest different levels of resilience.

After all, both works show the journey of humans from long suffering, their resistance to their weakness, their rediscovery of the relationships with the people around them, and eventually making their decision to go on with their life. Although the audience witnesses the suffering and agonies of the characters most of the time, hope and strength is what remains, as all characters succeed in reaching a higher level of their conditions and understanding of people around them. This, in turn, celebrates the human capacity to develop coping mechanisms to fight against painful memories.

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