

**The Return of Repressed Past Trauma in *The Silent Patient* by Alex
Michaelides (2019)**

UNDERGRADUATE THESIS

**Submitted as Partial Fulfillment of The Requirement to
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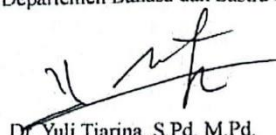


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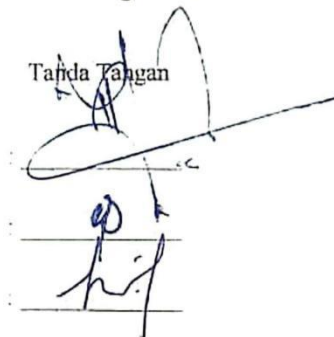
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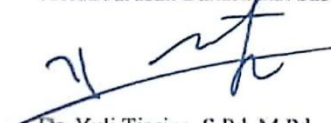
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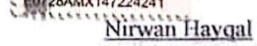
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ABSTRACT

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This study is about the return of the repressed trauma that was experienced by one of the main protagonists in the novel *The Silent Patient* (2019) by Alex Michaelides. This study focuses on the internal problem of one of its protagonists. This analysis uses psychoanalysis and literary theory. The results of this research are that the main protagonist suffers quite a lot due to her repressed trauma. One of the main protagonists tries to make her talk and make her get out from her silent treatment habits that plagues her nowadays.

Keywords: Trauma, Repression, Repressed, Manifestation, Past.

ABSTRAK

Hayqal, Nirwan. 2025. *The Return of Repressed Past Trauma in The Silent Patient by Alex Michaelides (2019)*. Padang: English Language and Literature: Faculty of Language and Arts. Universitas Negeri Padang

Penelitian ini membahas tentang kembalinya trauma terpendam yang dialami oleh salah satu tokoh utama dalam novel *The Silent Patient* (2019) karya Alex Michaelides. Penelitian ini berfokus pada permasalahan internal yang dialami oleh salah satu tokoh utamanya. Analisis ini menggunakan psikoanalisis dan teori sastra. Hasil penelitian ini adalah tokoh utama mengalami penderitaan yang cukup berat akibat trauma terpendam yang dialaminya. Salah satu tokoh utama berusaha membuatnya berbicara dan membuatnya keluar dari kebiasaan mendiamkan diri yang dialaminya saat ini.

Kata : Trauma, Represi, Direpres, Manifestasi, Masa lalu.

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CHAPTER I

INTRODUCTION

1.1. Background of the Research

According to camh.ca, Trauma is the word used to characterize the difficult emotional fallout that someone who experiences a distressing event may have. It can be difficult to define traumatic situations because different people may experience the same thing differently from one another. According to American Psychological Association, Trauma is an emotional response to a terrible event like an accident, rape, or natural disaster. Immediately after the event, shock and denial are typical. Longer term reactions include unpredictable emotions, flashbacks, strained relationships, and even physical symptoms like headaches or nausea. According to a study titled *Trauma and Literary Studies: Some "Enabling Questions"* by Elissa Marder (2006) (page 1), the word "trauma" comes from ancient Greek and means "wound." Although the precise definition of the modern concept of trauma varies by context and discipline, the general consensus is that if trauma is a wound, it is a very specific type of wound.

According to the Trauma Practice, there are several types of trauma such as Type 1 Trauma which refers to single-incident traumas which are unexpected and comes out of the blue. They can be referred to as big T trauma, shock or acute trauma. A condition related to big T trauma or Type 1 trauma is Post Traumatic Stress Disorder. And Type 2 Traumas more likely to occur repeatedly and over an extended period of time. They could have been encountered in the context of a close attachment figure or in an interpersonal interaction throughout childhood.

People may experience physical or emotional confinement, which is more closely associated with complicated PTSD. According to *Wounds and Words* by

Christa Schönfelder (2012) (Page 10), Cathy Caruth's theorization of trauma is among the most important in the humanities. Her *Unclaimed Experience* (1996) provides literary trauma researchers with some important new findings. For instance, it looks at how trauma representations might help people understand by acting out a collapse of meaning and how, ironically, trauma—which defies traditional story forms—may be portrayed through the breakdown of language, or the failure of words. *Unclaimed Experience*, however, also serves as an example of how the term "trauma" has become overused in literary studies. Caruth's method broadens the definition of the term to the point that it appears to blur the lines between traumatized and non-traumatized people as well as between perpetrators and victims. Also in *Wounds and Words*. Every attempt to define and theorize "trauma" entails attempting to make sense of the bewildering variety of contemporary conceptions of trauma, which range from cultural trauma to PTSD. The intricacy of the psychiatric historiography is like a jungle, making it even harder for any attempt to write a history of trauma.

Roy Porter and Mark Micale highlight how contentious the history of psychiatry has been and come to the conclusion that “it has thus far proved impossible to produce anything like an enduring, comprehensive, authoritative history”. According to Christa Schönfelder, the endeavor to express material which defies common processes of remembering and narration, of representation and comprehension, is a fundamental dilemma that literary trauma texts frequently highlight and deal with. The potential for verbalizing the unimaginable, narrating the unnarratable, and making sense of the incomprehensible are significant issues that trauma narratives bring to light.

A person's own experience of trauma may differ from another person's, therefore triggers might also differ. A history of physical or verbal abuse, neglect as a kid, sexual violence, military conflict, emotional or verbal abuse in the past, life-threatening illnesses, and racial threats are among the predominant causes of trauma. The trauma we gained during our earlier days could influence the future in an unexpected ways. So, I will try to see how much the past trauma can affect

the adulthood. I want to see how someone's past can affect their future so much that they ended up doing a drastic action because of it. Lots of people have troubled past which caused them to do some very irrational actions in their later years. There are many reasons that caused people to have troubled lives, such as abusive parents, being bullied, unfriendly environments, and many more. In the research titled *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society* by Bessel A. van der Kolk (1996), unlike other forms of psychological disorders, the core issue in trauma is reality. This correlates with many traumatic events that influencing people actually happened in real life at some point.

Here are several ways to deal with trauma. Talk about your feelings with other people. Avoid isolating yourself. Stay calm. Try practicing deep breathing or meditation. Engage in physical activities, such as yoga or walking. Attend to your own needs. Make sure you get enough rest. Consume a balanced diet. Make sure you're getting enough water. Steer clear of smoke, narcotics, and alcohol. Return to your regular schedule. Even if you don't feel like it, go out your daily activities. People can also cope well with their trauma if they accept their feelings, and reach out to others. People who can't cope well with their trauma usually have keep having fatigues, sleep disorders, nightmares, fear of recurrence, anxiety focused on flashbacks, depression, and avoidance of emotions, sensations, or activities that are associated with the trauma, even remotely, and they also repressed their trauma as well.

1.2. Focus of the Problem

The focus of the problem is the influences of the past's trauma on the adulthood, as we know, our past experiences can caused a lot of changes in ourselves, and there are many ways our past experiences can influence us. This study aims to know more about how Alicia's trauma can lead to her being completely silent after the murder of her husband.

1.3. Research Questions

1. What are the repressed trauma experienced by the protagonist of the Silent Patient?
2. What are the manifestations of the return of the repressed trauma experienced by the protagonist of the Silent Patient?

1.4. Purpose of the Research

To find out the repressed trauma experienced by the protagonist of the Silent Patient and the manifestations of the return of the repressed trauma experienced by protagonist of the Silent Patient.

1. To find out the repressed trauma experienced by the protagonist of the Silent Patient.
2. To find out the manifestations of the return of the repressed trauma experienced by the protagonist of the Silent Patient.

CHAPTER V

CONCLUSION AND SUGGESTION

After analyzing this novel using the psychoanalysis and literary theory, this section will be containing the conclusion and suggestion regarding the research. The conclusion will address the ways to repress trauma that are shown in the novel.

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5.1. Conclusion

By refusing to speak to anyone in order to repress the trauma of a tragic incident. Someone would try refuse to speak a word about what happened during that incident in order to repress the trauma of that incident even when someone tries to ask her about it. That someone could choose to not responding at all to any attempt to make her speak. However, even if someone tries to stay silent, she would eventually break the silent and even attack someone who asked them if their attempt to make her speak managed to hit her nerve.

Another way someone could repress their trauma is by hating something else even remotely connected to that traumatic accident such as hating the color closest to them during the accident such as yellow. They would do this to adjust their mind of that accident.

Two paragraphs above show that there are several ways people repress their trauma such as refusing the speak to anyone and hating on something else that barely connected to the traumatic event.

5.2. Suggestion

Suggestions for the future researches are that they should look into the repressed trauma more because as seen in this novel, repressed traumas can drastically change someone's attitude. There are many ways for the repressed trauma to manifest. We need to find out more about how people repress their trauma and how to make them move on from their trauma so we can help them better. More people need to know how to deal with repressed trauma and people who have their own repressed trauma.

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