Repression, Trauma, and the Unconscious: A Study of *The Silent Patient* through Sigmund Freud and Judith Herman

DISSERTATION

Submitted to the University of Kerala
in partial fulfilment of the requirements
for the Award of the Degree of

Master of Arts

In

English Language and Literature

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By

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Subject Code : EL 545

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2026

CERTIFICATE

This is to certify that dissertation entitled **"Repression, Trauma, and the Unconscious: A Study of *The Silent Patient* through Sigmund Freud and Judith Herman"** is a record of the study carried out by **HIBA ABDUL KABEER**, at the Department of English, T.K.M College of Arts and Science, Kollam, under the guidance of **Mr. Niyas S.M.,** and submitted to the University of Kerala in partial fulfilment of the requirements of the Degree of Master of Arts in English Language and literature.

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I hereby declare that the dissertation entitled **"Repression, Trauma, and the Unconscious: A Study of *The Silent Patient* through Sigmund Freud and Judith Herman"** submitted to the University of Kerala in partial fulfilment of the requirement for the award of the degree of Master of Arts in English Language and Literature is the original record of studies and research carried out by me during 2024-2026 under the guidance of **Mr. Niyas S.M.,** Assistant Professor of English, T.K.M College of Arts and Science, Kollam and it has not formed the basis for the award of any degree, title or recognition.

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ACKNOWLEDGEMENT

I would like to express my sincere gratitude to my guide **Mr. Niyas S.M.** (Assistant Professor, Department of English) for giving me this invaluable opportunity to work under his expert guidance, I would like to primarily thank him for the useful comments, remarks and engagement throughout the learning process of the thesis. He consistently allowed this paper to be my own work, but steered in the right direction whenever I needed it, My heartfelt thanks to all other teachers in the department for being an unconditional source of courage and inspiration. I would like to express my deep sense of gratitude to my classmates, who have supported me throughout the process.



Hiba Abdul Kabeer

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Preface

The Silent Patient (2019) by Alex Michaelides, a contemporary British Cypriot novelist, is a psychological crime novel that interrogates the convoluted relationship among repression, trauma, silence, memory, and unconscious subjectivity.

The present study, titled "Repression, Trauma, and the Unconscious: A Study of *The Silent Patient* through Sigmund Freud and Judith Herman," undertakes a psychoanalytic investigation of the novel by integrating Sigmund Freud's theory of repression and the unconscious with Judith Herman's formulation of psychological trauma and recovery. The study argues that the narrative constructs subjectivity as the product of unconscious repression and unresolved traumatic experience, demonstrating that silence, dissociation, fragmented memory, and symbolic expression function as textual manifestations of psychic conflict whose origins reside in childhood emotional injury.

This dissertation is organised into four chapters. Chapter One, "Introduction," provides the conceptual foundation for examining the novel as a literary representation of unconscious processes, traumatic memory, and psychological fragmentation. Chapter Two, "The Return of the Repressed," examines the novel through Freudian psychoanalysis. The chapter argues that the return of repressed memories continually destabilizes identity, transforms perception, and determines the progression of violence, desire, guilt, and self destruction within the narrative. Chapter Three, "Silence as Trauma," analyses the novel through Judith Herman's trauma theory by investigating childhood trauma, betrayal trauma, dissociation,

emotional fragmentation, captivity, disrupted memory, and the impossibility of fully articulating traumatic experience through language. Chapter Four, "Conclusion," synthesizes the arguments advanced throughout the dissertation and evaluates the reciprocal relationship among repression, trauma, silence, and the unconscious in shaping the narrative of the novel.

The study establishes that repression and trauma operate as the fundamental organizing principles of *The Silent Patient*, and reveals that the human psyche remains persistently shaped by unresolved childhood experience whose unconscious return governs behaviour, identity formation, emotional life, and moral consciousness.

Chapter One

Introduction

Alex Michaelides, a British Cypriot novelist and graduate of the University of Cambridge, was born in Cyprus to an English mother and a Greek Cypriot father. He spent his formative years in Nicosia before moving abroad at the age of eighteen. The cultural environment of Cyprus played a decisive role in shaping his literary imagination. Greek mythology and classical tragedy occupied a prominent position within the educational and cultural life of the island. Ancient Greek texts were studied extensively in schools, and theatrical performances of classical tragedies formed a significant component of public cultural life. This exposure provided Michaelides with a rich mythological and literary inheritance that later informed his creative work.

Michaelides initially pursued a career in screenwriting. Although he worked within the film industry for several years, professional satisfaction remained elusive. During this period he considered abandoning creative writing altogether. At a crucial moment, he turned his attention to psychotherapy, a field that had long fascinated him due to his personal engagement with therapy since early adulthood. He obtained employment in a secure psychiatric community for adolescents in North London and simultaneously undertook postgraduate studies in psychotherapy. Although he eventually discontinued formal training, the experience deepened his understanding of human psychology and emotional suffering. At the age of thirty six, he began writing the detective novel he had contemplated for many years. While developing the project, he recognised that his knowledge of psychotherapists far exceeded his familiarity with detectives. This realisation shaped the conceptual foundation of his first novel, *The Silent Patient*, whose central figure is a psychotherapist investigating

a complex psychological crime.

The publication of *The Silent Patient* transformed Michaelides's literary career. Prior to its success, he frequently described himself as isolated, uncertain, and professionally unsuccessful. The novel achieved remarkable international recognition and established him as a major contemporary writer. Its reception provided the artistic affirmation he had long desired and connected him with readers across the world. Messages from readers expressing emotional and intellectual engagement with his work contributed significantly to his sense of fulfilment. The journey from uncertainty to literary accomplishment enabled Michaelides to discover a renewed sense of purpose and identity.

The present study, titled "Repression, Trauma, and the Unconscious: A Study of *The Silent Patient* through Sigmund Freud and Judith Herman" examines the novel through key concepts derived from psychoanalytical thought. Particular attention is given to Sigmund Freud's theory of repression and Judith Herman's theory of trauma. The study investigates the psychological dimensions of the narrative through an analysis of Alicia Berenson, Theo Faber, and the distinctive narrative structure of the novel. Theo's first person account is interwoven with extracts from Alicia's diary, creating a gradual disclosure of hidden memories, emotional conflicts, and traumatic experiences. The thesis focuses on the operation of repression and trauma within the lives of the central characters and explores the relationship between psychological suffering and silence.

The first analytical chapter, titled "The Return of the Repressed" examines Freud's theory of repression and its relevance to the behaviour of the principal characters. The second analytical chapter, "Silence as Trauma" investigates the psychological consequences of traumatic experience. Through the theoretical model

of Judith Herman, the chapter explores emotional isolation, disrupted communication, and the enduring effects of psychological injury. Special emphasis is placed upon Alicia's suffering and Theo's unresolved childhood experiences.

The concluding chapter synthesises the arguments developed throughout the dissertation. It proposes that Alicia's silence functions as a complex psychological response shaped by repression and trauma. Silence emerges as a symbolic expression of suffering, resistance, emotional defence, and psychological withdrawal. Through this framework, the dissertation demonstrates how psychoanalytical approaches illuminate the deeper psychological dimensions of the novel and enrich an understanding of the human mind represented within Michaelides's fiction.

The Silent Patient was published by Celadon Books in 2019. The psychological thriller is narrated primarily by Theo Faber, an English psychotherapist whose professional interest centres upon a woman who ceases speaking after murdering her husband. Reflecting upon the origins of the novel, Michaelides explained that growing dissatisfaction with screenwriting encouraged him to undertake the composition of a full length work of fiction. The narrative draws inspiration from Euripides' tragedy *Alcestis* and incorporates structural features associated with classic detective fiction. Each section of the novel opens with a significant quotation, among which Sigmund Freud's observation concerning unexpressed emotions occupies a particularly important place.

At its core, *The Silent Patient* presents the story of a brutal murder, an enigmatic woman, and a therapist determined to uncover hidden truths. The novel examines the psychological states of both Alicia Berenson and Theo Faber. Its effectiveness arises from the careful construction of character psychology and the gradual revelation of concealed motives. Michaelides develops suspense through

controlled narrative progression, permitting readers to participate in an investigation that extends beyond criminal activity into the complexities of the human psyche. The novel ultimately becomes an exploration of psychological disturbance, memory, desire, and emotional conflict.

Before the murder, Alicia Berenson appears to possess an enviable life. A celebrated painter married to Gabriel Berenson, a successful fashion photographer, she resides in an affluent area of London. One evening Gabriel returns home from work and Alicia shoots him five times. Following the act, she refuses to utter another word. Her silence transforms a domestic crime into a public fascination. Public curiosity intensifies, media attention expands, and the value of her artwork increases dramatically. Alicia is transferred to the Grove, a secure forensic psychiatric institution in North London, where she becomes known as the silent patient.

Theo Faber, a criminal psychotherapist employed at the Grove, develops an intense interest in Alicia's case. He believes that he alone can persuade her to speak and disclose the truth concerning Gabriel's death. His efforts initiate a complex journey through Alicia's past and his own psychological history. As the narrative unfolds, Theo's determination gradually develops into an obsession that threatens his emotional stability and professional judgement.

Theo's childhood was marked by emotional suffering and paternal violence. These experiences motivated his decision to study psychology and pursue a therapeutic career. He eventually married Kathy, an American actress living in London. Throughout the novel, alternating narrative sequences present The personal life of Theo alongside the story of Alicia's treatment. Although Alicia has remained silent for six years following the murder, Theo persists in his belief that communication remains possible.

As Alicia gradually recounts her experiences, she describes the events surrounding Gabriel's death. Many listeners question the accuracy of her account. Shortly thereafter, she is discovered unconscious following the administration of a fatal quantity of medication. A police investigation follows. Alicia's diary ultimately exposes the involvement of Theo in the circumstances that led to the tragedy. Motivated by anger and emotional turmoil, he had secretly followed Kathy's lover and eventually entered Alicia's home. His disclosure of Gabriel's infidelity triggered a psychological crisis that culminated in murder. Unable to confront the consequences of her actions, Alicia attempted suicide and embraced silence as a permanent response to overwhelming emotional pain. The novel concludes when an investigator arrives at Theo's residence carrying Alicia's diary, whose contents implicate him directly.

Michaelides employs dark imagery, fragmented recollections, symbolic motifs, and restrained dialogue to generate psychological tension. References to shadows, confinement, reflections, and artistic creation contribute to the depiction of emotional fragmentation. Theo's first person narration establishes intimacy while simultaneously creating uncertainty because readers remain dependent upon his subjective perspective. Narrative rhythm alternates between periods of apparent calm and moments of dramatic revelation, sustaining a persistent atmosphere of unease.

Several major themes shape the novel. Silence functions as both protection and imprisonment. Trauma influences the behaviour of the central characters and demonstrates how unresolved suffering can distort perception and interpersonal relationships. Obsession emerges as a destructive force, particularly through Theo's desire to uncover the secrets of Alicia. The novel also questions the reliability of memory and perception, illustrating how personal desires and emotional needs influence the interpretation of reality. Through Alicia Berenson and Theo Faber,

Michaelides transforms psychological conflict into a deeply human experience characterised by vulnerability, fear, and hidden suffering.

Alicia Berenson stands among the most compelling figures in contemporary psychological fiction. Following Gabriel's murder, she abandons verbal communication entirely. Her silence transcends simple refusal and becomes a symbolic structure formed through betrayal, grief, trauma, and emotional paralysis. Michaelides portrays Alicia as a tragic figure whose internal suffering remains largely inaccessible to others. Her silence encourages speculation and interpretation, revealing the desire of society to impose meaning upon experiences it cannot fully comprehend.

The symbolic significance of the silence of Alicia is connected closely to Euripides' *Alcestis*. Theo observes that every work of art contains an element of mystery and identifies Alicia's silence as her deepest secret. The novel opens with a quotation from Alcestis, drawing immediate attention to the theme of muteness. In Greek mythology, Alcestis sacrifices herself for her husband and subsequently returns from death. Upon her return she remains temporarily silent. Alicia's identification with Alcestis emerges through her painting and through the emotional betrayal she experiences. Both women suffer because of those they love, and both become associated with silence following profound emotional injury.

Freud's theory of repression provides an important framework for understanding Alicia and Theo. Freud described repression as an unconscious process through which painful memories, desires, and experiences are excluded from conscious awareness. These concealed elements do not disappear; they continue to influence behaviour through indirect psychological manifestations. The silence of Alicia represents a powerful expression of repressed trauma linked to childhood

suffering and marital betrayal. Theo also exhibits repressed fears and unresolved conflicts rooted in his relationship with his father. These hidden tensions contribute significantly to his obsessive involvement with Alicia.

Judith Herman's theory of trauma offers a complementary perspective. Developed through extensive clinical work with survivors of abuse and violence, Herman's framework emphasises the effects of trauma upon memory, identity, and communication. Trauma frequently produces dissociation, emotional withdrawal, fragmented recollection, and silence. The muteness of Alicia corresponds closely with these observations. Her inability to communicate reflects psychological injury of exceptional intensity. The novel further illustrates Herman's argument that traumatic experiences often reappear through fragmented memories, artistic expression, emotional instability, and disrupted personal relationships. Through the silence of Alicia and the psychological deterioration of Theo, Michaelides demonstrates the enduring impact of trauma upon human consciousness and behaviour.

Chapter Two

The Return of the Repressed

Repression is a psychological defence mechanism through which the human mind unconsciously excludes unacceptable thoughts, painful memories, forbidden wishes, and distressing emotions from conscious awareness. Unlike suppression, which involves a deliberate and conscious attempt to remove undesirable thoughts from immediate attention, repression functions involuntarily and remains beyond the control of conscious intention. Sigmund Freud defines repression by stating that, "the essence of repression lies simply in turning something away, and keeping it at distance from the conscious" (147). This conceptualisation of mental life, in which significant psychological content remains inaccessible to conscious awareness, became one of the fundamental principles upon which psychoanalysis was established. Freud subsequently emphasised the importance of this concept by declaring that "the theory of repression is the cornerstone on which the whole structure of psychoanalysis rests" (16). This statement demonstrates the central position occupied by repression within his theoretical understanding of the human psyche.

Within Freud's structural model of the psyche, the ego, which represents the conscious aspect of the personality responsible for mediating external reality, employs repression as a defensive mechanism to exclude threatening impulses originating from the id, the repository of primitive instinctual drives, from conscious awareness. This defensive process frequently occurs under the influence of the superego, which embodies internalised moral values, ethical principles, and social expectations. Freud

therefore regarded repression as one of the most significant functions of the ego and identified it as the primary defence mechanism from which many other forms of psychological defence subsequently develop. Freud further observes that repression originates within the ego while functioning beyond conscious awareness. This insight transformed his understanding of the human mind because it demonstrated that the ego itself cannot be understood as an entirely conscious structure. Recognition of the unconscious dimensions of ego activity emerged directly from his investigation of repression and became one of the defining developments in psychoanalytical theory.

Freud's theory of repression provides an explanation for the inability of many individuals to recognise the actual motives governing their actions or the hidden origins of psychological distress. Although repressed thoughts, wishes, memories, and emotions remain inaccessible to conscious awareness, they continue to influence psychological functioning through indirect forms of expression. Their presence may become evident through unexplained emotional states, slips of the tongue commonly identified as Freudian slips, dreams containing symbolic imagery, irrational fears, persistent anxieties, and various neurotic symptoms. The unconscious therefore continues to influence conscious life despite the apparent absence of direct awareness.

The concept of repression also possesses broader implications extending beyond individual psychology. It encourages consideration of the ways through which societies and cultures manage experiences associated with guilt, shame, fear, humiliation, and emotional suffering. Repression may therefore be understood as a comprehensive psychological defence that protects individuals from emotional burdens capable of disrupting ordinary life. The significance of Freuds theory extends beyond clinical psychoanalysis because it offers valuable insight into the development of individual identity, collective behaviour, and cultural experience. Its influence

continues to shape psychological thought, literary criticism, philosophy, and cultural theory.

In order to investigate unconscious mental processes, Freud developed several therapeutic techniques intended to overcome conscious resistance. One of the most important among these methods was free association, through which patients were encouraged to verbalise every thought entering consciousness without censorship or deliberate selection. Freud believed that spontaneous verbal expression could reveal hidden memories and unconscious conflicts concealed beneath conscious awareness. He also regarded dreams as a privileged means of exploring the unconscious and famously described them as the "royal road to the unconscious" (Freud 608). Although dream imagery frequently disguises unconscious wishes through symbolic representation, careful interpretation permits access to the concealed psychological content underlying the manifest dream.

The therapeutic objective of psychoanalysis consisted of bringing repressed thoughts, emotions, and memories into conscious awareness within the secure environment of the therapeutic relationship. Freud believed that conscious recognition of these hidden conflicts enabled individuals to confront unresolved emotional experiences and integrate them into psychological life. Such integration produced emotional release and diminished the neurotic symptoms generated through repression. The psychoanalytical process therefore sought both intellectual understanding and emotional resolution.

The German term Verdrangung occupies a central position within Freudian psychoanalysis. The word is commonly translated as pushing away or thrusting aside and refers to the unconscious exclusion of disturbing mental content from conscious awareness. The material subjected to repression frequently includes beliefs, wishes,

desires, fantasies, or impulses whose conscious recognition would generate profound psychological distress. Freud explains that certain instinctual impulses become so painful or morally unacceptable that the psyche actively prevents their emergence into conscious thought. One example frequently discussed within psychoanalytical literature concerns unconscious hostility directed towards parental figures. Recognition of such hostility may provoke overwhelming feelings of guilt, horror, or anxiety. Consequently, the impulse undergoes repression and remains confined within the unconscious. Freud describes this process as the exclusion of the instinctual impulse from conscious awareness, thereby preserving psychological equilibrium despite the continued existence of the unconscious desire. Since the ego cannot escape from its own internal conflicts, repression becomes one of its principal methods of psychic management.

According to psychoanalytical theory, repression occupies a central position in the understanding of numerous forms of mental illness as well as ordinary psychological functioning. During the early decades of the twentieth century, particularly around 1930, American psychologists initiated experimental investigations designed to examine repression within laboratory settings. Many psychoanalysts initially displayed limited interest in these experimental approaches and subsequently rejected them because they believed that laboratory methods failed to represent the complexity of repression as conceptualised within psychoanalytical theory. The distinctive characteristics of unconscious processes, symbolic meaning, emotional conflict, and clinical experience could not easily be reproduced through controlled experimental procedures.

Freud developed the concept of repression through clinical observation during his gradual movement away from hypnotic methods towards conscious recollection

within psychoanalytical treatment. As he encouraged patients to remember forgotten experiences, he discovered that the process frequently encountered powerful psychological resistance. Patients often appeared unable to recall deeply significant events despite sustained therapeutic effort. The intensity of this resistance persuaded Freud that an unconscious psychic mechanism actively prevented certain memories from entering conscious awareness. He identified this mechanism as repression and incorporated it into the theoretical foundation of psychoanalysis.

Freud subsequently distinguished between two related forms of repression, namely primal repression and repression proper. Primal repression constitutes the initial stage through which the ideational representative of an instinct is denied access to conscious awareness. Freud explains that there is "reason to assume that there is a primal repression, a first phase of repression, which consists in the psychical (ideational) representative of the instinct being denied entrance into the conscious" (147). Through this process, instinctual wishes remain confined within the unconscious from the very beginning of psychic life.

Repression proper constitutes the secondary stage of the process. During this phase, psychological derivatives associated with the original repressed impulse attempt to enter conscious awareness. These derivatives may appear in the form of thoughts, fantasies, memories, symbolic images, emotions, or behavioural expressions. Because of their continuing association with the original instinctual impulse, they also undergo repression. Freud therefore characterises repression proper as an "after pressure" operating continuously against unconscious material (148). The unconscious consequently exerts a persistent influence upon personality and psychological functioning despite the apparent absence of conscious recognition.

Unlike primal repression, repression proper frequently involves mental

material that had once been available to conscious awareness before becoming psychologically intolerable. Early traumatic experiences illustrate this process. Such events may initially be experienced consciously, yet subsequent emotional suffering renders them unbearable, leading to their exclusion from awareness through repression. Although hidden from conscious thought, these experiences continue to influence emotional life, interpersonal relationships, and behavioural patterns.

Freud further emphasises that repression does not eliminate instinctual impulses. Repressed material continues to exist within the unconscious and constantly seeks expression. Repression functions as a barrier separating the unconscious from conscious awareness. Freud also proposes that "the censorship of the conscious" weakens as psychological derivatives become increasingly distant from the original repressed impulse (148). When sufficient distance develops, certain derivatives may successfully enter consciousness through disguised forms such as dreams, neurotic symptoms, fantasies, symbolic behaviour, or emotional disturbances.

Freud also argues that repression cannot be understood as a permanent or uniform event. Its continued operation requires constant psychic effort because unconscious impulses exert continuous pressure towards conscious expression. Repression therefore remains an active and dynamic psychological process. As Freud continued assisting patients in uncovering unconscious conflicts, he became increasingly convinced that an unconscious mechanism persistently concealed unacceptable wishes, memories, and emotions. These clinical observations ultimately culminated in the formulation of repression as one of the central concepts within psychoanalysis.

In his essay entitled "Repression," Freud examines the fundamental question of why certain instinctual wishes require repression. If the fulfilment of an instinct

ordinarily produces pleasure, the existence of repression initially appears paradoxical. Freud resolves this difficulty by arguing that instinctual gratification may simultaneously produce psychological suffering. The satisfaction of a desire generates pleasure, yet accompanying emotions such as guilt, shame, fear, moral conflict, or social condemnation produce profound psychological discomfort. Under such conditions, repression functions as a defensive response protecting the individual from emotional experiences capable of threatening psychological stability. Through this formulation, Freud demonstrates that repression emerges from the complex relationship between instinctual desire, moral consciousness, emotional conflict, and psychic survival.

Freudian psychoanalysis centred upon "bringing unconscious wishes, emotions, memories, and instinctual impulses into conscious awareness so that they could be examined and understood through deliberate reflection" (Lear 18). Freud maintained that dreams provide one of the most significant avenues through which access to the unconscious becomes possible. He famously described dreams as the royal road to the unconscious because they reveal concealed wishes through symbolic representation. Through careful examination of the manifest content of dreams, Freud argued that the latent content, containing hidden desires and unconscious conflicts, could gradually be identified. Repressed emotions frequently emerge within dreams through symbolic expressions of fear, anxiety, desire, conflict, and emotional tension. Consequently, dream interpretation occupies a central position within psychoanalytical practice because it permits access to psychological experiences that remain concealed during ordinary conscious life.

Freud also regarded slips of the tongue, commonly identified as Freudian slips, as another important expression of unconscious mental activity. According to

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his interpretation, verbal mistakes frequently disclose hidden wishes, emotional conflicts, or psychological tensions that remain inaccessible to conscious awareness. Such slips demonstrate that repressed thoughts continue to exert influence despite their exclusion from consciousness. Although these thoughts remain concealed for considerable periods, they frequently appear unexpectedly through speech, dreams, symbolic behaviour, and emotional reactions. These indirect expressions demonstrate the continuing activity of the unconscious within everyday life and support Freuds proposition that repression never completely eliminates instinctual impulses from the psyche.

The preceding discussion has examined repression as one of the most influential concepts developed by Sigmund Freud. The analysis has explored repression as a psychic defence mechanism and has examined the processes of primal repression and repression proper within the broader framework of psychoanalytical theory. Particular attention has been devoted to Freud's understanding of repression as the cornerstone of psychoanalysis and as a concept possessing profound significance for the interpretation and treatment of neuroses. The discussion has further demonstrated that the theory of repression substantially contributed to the development of psychoanalytical practice by providing a comprehensive explanation for unconscious conflict, psychological defence, symbolic expression, and emotional suffering. Through these theoretical formulations, Freud established one of the most enduring foundations of modern psychology and psychotherapy.

The theoretical principles outlined above provide an appropriate framework for examining the psychological dimensions of Alex Michaelides novel *The Silent Patient*. The novel opens with one of Freud's most frequently cited observations concerning emotional repression: "Unexpressed emotions will never die. They are

buried alive and will come forth later in uglier ways" (Freud 61). This statement serves as the conceptual foundation of the entire narrative because it introduces the central relationship between repression, silence, trauma, violence, and unconscious desire. The quotation also anticipates the gradual disclosure of hidden psychological realities that shape the actions of the principal characters throughout the novel.

Alicia Berenson, an accomplished painter of considerable public recognition, is married to Gabriel, a successful fashion photographer whom she regards as the central figure of her emotional life. Their apparently harmonious marriage undergoes a catastrophic transformation when Alicia shoots Gabriel five times in the head and subsequently withdraws into complete silence. Her refusal to speak immediately attracts widespread public attention, particularly because the violent crime remains entirely unexplained. The public fascination surrounding the case increases further after the discovery of her final painting entitled *Alcestis*. The artwork functions as a symbolic expression of her psychological condition and establishes an important relationship between the novel and the Greek tragic tradition upon which Michaelides constructs much of the narrative.

At the beginning of the novel, Alicia appears as an enigmatic figure whose silence conceals every aspect of her emotional life. She resembles an untouched canvas awaiting interpretation, possessing neither an audible voice nor an accessible explanation for her actions. As the narrative gradually unfolds, this symbolic canvas acquires emotional depth through recurring images dominated by the colour red, which signifies both passionate love and destructive violence. Michaelides develops this symbolism through carefully controlled narrative progression, allowing Alicia to communicate indirectly through her diary. These diary entries provide readers with privileged access to her emotional life while simultaneously preserving the mystery

surrounding the murder. The gradual revelation of her private reflections deepens the psychological complexity of the narrative and encourages continuous reconsideration of her apparent guilt. Her diary restores emotional depth to a character whose outward silence initially appears impenetrable and reveals profound affection, vulnerability, hope, fear, and emotional dependence upon Gabriel.

From a psychoanalytical perspective, the unconscious functions as a repository containing repressed emotions, instinctual drives, traumatic memories, unresolved conflicts, and forbidden desires. Although these elements remain excluded from conscious awareness, they continue to influence perception, behaviour, emotional response, and personality development. Michaelides presents Alicia as an individual whose unconscious gradually overwhelms conscious control after years of accumulated psychological suffering. Her violent actions emerge from deeply buried emotional conflicts whose origins extend far beyond the immediate circumstances of Gabriel's death. The novel therefore illustrates Freud's proposition that unconscious material continues to shape behaviour despite its apparent absence from conscious awareness.

During one of the most psychologically revealing moments within the narrative, Alicia acknowledges the overwhelming force of unconscious instinct by stating, "And something in me took over, some kind of wild animal instinct. I wanted to kill him or be killed" (Michaelides 277). This confession reveals the intensity of her emotional crisis and demonstrates the temporary collapse of conscious self control under the pressure of repressed psychological conflict. The language employed within this passage suggests that unconscious impulses have assumed complete authority over conscious judgement. Alicia no longer experiences herself as an autonomous individual directing her own actions. She perceives an instinctive force emerging from

the depths of her unconscious and determining her behaviour. This moment therefore represents a powerful literary illustration of Freud's theory that repressed emotions continue to exist beneath conscious awareness until circumstances permit their sudden and often destructive expression.

The utterance of Alicia further reveals the complex relationship between fear, rage, emotional vulnerability, and unconscious desire. Alicia experiences an intense psychological conflict in which the impulses towards violence and self-destruction become inseparable. Her emotional condition demonstrates that prolonged repression produces severe internal fragmentation capable of overwhelming rational thought. Michaelides therefore presents "psychological violence as the culmination of accumulated emotional suffering, unresolved trauma, and unconscious conflict" (Akram 24). Through Alicia Berenson, the novel offers a compelling literary representation of Freudian repression and demonstrates how concealed emotional experiences continue to shape human behaviour long after they have disappeared from conscious awareness.

Alex Michaelides presents the diary as a mini narrative that challenges the conventional structure of the novel through the gradual disclosure of events in the form of fragmented personal entries. This narrative strategy provides direct access to Alicia Berenson's inner consciousness while simultaneously sustaining suspense concerning the circumstances surrounding the murder of Gabriel. The diary functions as a psychological document that records her private fears, desires, memories, and emotional conflicts. Through these fragmented reflections, Michaelides constructs a complex psychological landscape in which the fear of constant surveillance, the fear of losing Gabriel, and the fear of her own deteriorating mental condition become inseparably intertwined. These anxieties gradually reshape her perception of reality

and influence her behaviour, ultimately leading her towards irrational decisions in an effort to manage overwhelming emotional distress. The diary therefore becomes an alternative narrative voice that communicates what Alicia refuses to express verbally, transforming silence into a powerful literary and psychological device.

Alicia's repressed emotions originate during childhood and intensify following Gabriel's betrayal, eventually driving her towards psychological collapse. The source of her emotional conflict can be traced to unresolved familial trauma, particularly the suicide of her mother, Eva. Theo Faber observes striking similarities between Alicia's emotional condition and that of her mother, who experienced severe psychological disturbance and attempted suicide. Alicia consequently develops an intense fear that she may inherit the same condition, and this anxiety is increasingly visible through her artistic creations. Her decision to portray Gabriel upon the cross reveals the unconscious projection of her emotional conflict and anticipates the tragedy that follows. Although Alicia has endured emotional instability throughout her life, the most devastating wound arises from her father's rejection. His refusal to acknowledge her emotional worth leaves her feeling abandoned, unloved, and psychologically isolated. Michaelides captures this traumatic experience through the painful declaration: "My girl, my poor girl, my Eva ... Why did she have to die? Why did not Alicia die instead" (Michaelides 236). This statement is permanently embedded within Alicia's unconscious and continues to shape her emotional life long after the event itself. The rejection destroys her sense of security, produces profound emotional vulnerability, and gradually deprives her of the capacity to articulate her suffering through ordinary language. Her eventual decision to shoot Gabriel symbolises the final collapse of psychological restraint. The act represents the explosive return of emotions that have remained buried for many years and illustrates Freud's proposition

that repressed experiences eventually seek expression through unexpected and frequently destructive forms.

Michaelides further develops this psychological conflict through the incorporation of Greek mythology, particularly the story of Alcestis. The myth transforms Alicia from a conventional criminal into a tragic figure whose actions emerge from profound emotional betrayal and unconscious suffering. Theo later discovers that Alicia attended a performance of Alcestis shortly before the murder of Gabriel. Her intense emotional response to the drama foreshadows the psychological crisis that subsequently unfolds. The myth therefore establishes an interpretative framework through which Alicia understands her own emotional experience and indirectly communicates her sense of sacrifice and abandonment.

The paintings created by Alicia function as visual expressions of unconscious material that cannot be communicated through speech. Her self portrait, completed within her studio, serves as an unspoken confession concerning the murder of Gabriel and reveals the emotional condition underlying her actions. Although the painting does not depict the crime itself, it represents its psychological aftermath by exposing the motives that produced the violent act. Betrayal, emotional abandonment, and the willingness of Gabriel to sacrifice Alicia for his own survival emerge as the central themes embodied within the artwork. Another significant feature of the painting is the nudity of the artists. Her uncovered body symbolises emotional truth, vulnerability, and complete psychological exposure. The image therefore functions as her only statement following the murder and expresses a confession that spoken language cannot convey.

Approximately one month before Gabriel's death, Alicia paints him in the image of Jesus upon the cross. This religious symbolism anticipates the murder and

reveals her unconscious recognition of Gabriel's willingness to sacrifice her after the discovery of his affair. The painting therefore possesses prophetic significance because it communicates the emotional reality hidden beneath the apparent stability of their marriage. Alicia also produces a painting of a red brick hospital during her confinement at The Grove. The image portrays a man and a woman escaping from flames, with the woman unmistakably represented as Alicia through her distinctive red hair, which blends with the surrounding fire. Theo gradually recognises himself as the male figure within the painting. The meaning of the image remains deliberately uncertain because Theo cannot determine whether he is rescuing Alicia or pushing her towards destruction. When interpreted through an expressionist perspective, the flames represent the accumulated emotional conflict, fear, guilt, and psychological suffering that have remained repressed within the unconscious of Alicia for many years.

The recurring imagery of the seasons also contributes significantly to the psychological structure of the novel. The continual return of summer and winter establishes an enduring relationship between present experience and traumatic memory. The oppressive summer heat repeatedly directs Alicia towards memories of her mother and the mental illness that she fears she has inherited. Immediately before the murder of Gabriel, the fragrance of jasmine blossoms recalls the traumatic night during which she heard her father express the wish that she had died instead of her mother. Theo later confirms through his conversation with Paul that jasmine was blooming on that very evening. The scent consequently becomes an involuntary trigger that reconnects Alicia with the emotional wound preserved within her unconscious.

Winter performs a comparable symbolic function within the personal history

of Theo. Among the few comforting memories from his childhood is the experience of walking through falling snow and catching snowflakes within his hands. Their immediate disappearance symbolises the temporary nature of comfort within a childhood dominated by paternal cruelty and emotional neglect. Throughout the employment of Theo at The Grove, colleagues repeatedly anticipate snowfall, yet it never arrives. This repeated expectation symbolises the concealed truth concerning his own past and the persistent refusal to confront his hidden guilt. At the conclusion of the novel, after recognising that the police possess evidence of his crimes, Theo reaches towards the falling snow, connecting his present circumstances with the unresolved trauma that has shaped his psychological life.

Smoking also functions as a significant psychological motif throughout the novel. Theo explains that psychoanalytical practice frequently interprets smoking as an unresolved addiction associated with emotional conflict. His persistent dependence upon cigarettes symbolises the continuing influence of childhood trauma and emotional suffering that he attempts to conceal from both himself and others. Smoking therefore becomes an outward manifestation of hidden psychological conflict and an observable expression of unresolved unconscious pain.

Throughout *The Silent Patient*, repression functions as the principal psychological force governing the actions of Alicia Berenson. Her silence represents a Freudian defence mechanism through which unbearable emotional experiences remain excluded from conscious articulation. Years of childhood neglect, the suicide of her mother, the emotional cruelty of her father, and Gabriel's betrayal accumulate within the unconscious until repression no longer contains them. Freud argues that repressed experiences inevitably return through repetition, and Michaelides illustrates this principle through Gabriel, who unconsciously occupies the emotional position

previously held by Alicia's father. Alicia invests Gabriel with the love, protection, trust, and emotional security denied during childhood. His betrayal therefore recreates the emotional structure of her earliest trauma and overwhelms the defensive capacity of the ego. Unable to process this renewed psychological injury, Alicia withdraws into complete silence, allowing repression to become externally visible. Her subsequent violence demonstrates the catastrophic return of unconscious conflict after prolonged emotional suppression.

Michaelides further strengthens this psychoanalytical perspective through the observation:

> As human beings, our earliest years reside in a land before memory. We like to think of ourselves as emerging from this primordial fog with our characters fully formed, like Aphrodite rising perfect from the sea foam... As the psychoanalyst Donald Winnicott put it: There is no such thing as a baby. The development of our personalities does not take place in isolation, but in relationship with another, we are shaped and completed by unseen, unremembered forces; namely our parents. (10)

This passage foregrounds the decisive influence of early relationships upon psychological development. Winnicotts formulation emphasises that the child acquires identity through the care giving environment. When this environment is dominated by emotional instability, rejection, or violence, the developing ego is organised around fear, vigilance, and emotional insecurity. Alicia's childhood exemplifies this condition. Her adult personality, emotional responses, and ultimate psychological collapse originate within these formative experiences, demonstrating the enduring influence of repression upon identity, behaviour, and human

consciousness.

The recollection of the narrator of the unpredictable anger of his father, which transformed every situation, "no matter how benign," into "a minefield" (Michaelides 138), provides a compelling account of the manner in which emotional violence shapes the psychological world of a child. A harmless observation or an ordinary disagreement is sufficient to provoke an explosion of rage, teaching the child that emotional expression itself carries danger and that honesty or resistance invites severe punishment. The image of the child hiding beneath the bed, pressing against the wall, breathing in the "feathery air," and praying that "the bricks would swallow me up and I would disappear" (Michaelides 138), extends beyond the description of physical fear. It represents the desperate effort of the psyche to erase its own existence from a situation that has become psychologically unbearable. The fathers hand dragging the child from beneath the bed to confront his "fate," followed by the whistle of the belt through the air and the repeated blows that throw the child sideways, records a recurring pattern of invasion, terror, helplessness, and abandonment. Such experiences become too painful for conscious endurance. Within a Freudian framework, repression emerges as a necessary psychological process through which the mind excludes intolerable memories from conscious awareness in order to preserve the fragile coherence of the developing self.

The narrator's later reflection, "I did not know it then, but it was too late. I had internalised my father, introjected him, buried him deep in my unconscious" (Michaelides 140), offers a concise literary elaboration of Freudian repression and introjection. The father gradually ceases to exist merely as an external figure and assumes the position of an internal object that continually supervises, condemns, and disciplines the ego. Although the physical presence of the father disappears, his

psychological authority continues to dominate the narrator's emotional life through the operations of the unconscious. Ordinary situations become sources of anxiety because the persecutory paternal presence has become permanently incorporated into the structure of the personality. His inability to tolerate criticism, his tendency to anticipate danger in ordinary circumstances, and his persistent emotional insecurity reveal the continuing influence of this unconscious internal figure. The adult personality consequently bears the enduring marks of childhood trauma, demonstrating Freud's argument that repressed experiences continue to shape behaviour long after conscious memory has faded.

The striking parallel between the narrator's childhood and the personal history of Theo Faber deepens this psychoanalytical interpretation. Theo also grows up within a household characterised by paternal violence, emotional instability, and the absence of maternal protection. Fear, insecurity, and emotional isolation become defining features of his early development. These formative experiences explain his intense commitment to psychotherapy and his unusual fascination with Alicia Berenson. Her silence awakens within Theo the unresolved conflicts of his own childhood and unconsciously draws him towards a relationship that reproduces familiar emotional patterns. His determination to analyse Alicia reflects an unconscious effort to revisit the emotional landscape of his earliest years through the therapeutic encounter. Within this relationship, Theo unconsciously attempts to transform his childhood identity from the terrified child concealed beneath the bed into the authoritative figure capable of rescuing another individual from psychological darkness. His professional ambition, his desire to understand Alicia, and his persistent effort to penetrate her silence reveal an unconscious attempt to repair emotional wounds that have remained unresolved since childhood. Yet these efforts ultimately fail because the repressed

conflict continues to operate beneath conscious awareness. The internalised paternal violence eventually resurfaces through his own destructive conduct, demonstrating that unresolved repression produces repetition across successive stages of life.

From a Freudian perspective, Theo's psychological development exemplifies the principle commonly described as the return of the repressed. The voice of his father survives within the demands of the superego and continues to govern his emotional responses through guilt, anxiety, and the desire for absolute control. His obsessive need to master the psychological lives of other people reflects the continuing influence of unconscious conflict that has never undergone genuine resolution. The confession concerning the murder of Alicia and the carefully constructed narrative of rescue represent the final emergence of psychological material that has remained concealed for many years. Freud maintains that repressed experiences cannot remain permanently excluded from consciousness because they continually seek indirect expression through behaviour, dreams, fantasies, neurotic symptoms, and repetition. Theo therefore is an example of this psychological principle, since his unresolved childhood experiences gradually assume visible form through actions that expose the hidden structure of his unconscious.

Michaelides further develops this psychoanalytical perspective through the inclusion of Donald Winnicott's observation:

> A baby cannot hate the mother, without the mother first hating the baby. As babies, we are innocent sponges, blank slates with only the most basic needs present: to eat, shit, love and be loved. But something goes wrong, depending on the circumstances into which we are born, and the house in which we grow up. A tormented, abused child can never take revenge in reality, as she is powerless and defenceless, but

> she can and must harbour vengeful fantasies in her imagination. (Winnicott 81)

Winnicott's formulation suggests that hatred does not originate spontaneously within the child. Emotional hostility develops through prolonged exposure to rejection, neglect, hostility, or the failure of parental care. The infant enters the world in complete dependence upon those responsible for emotional security and affection. The description of the infant as an innocent sponge and a blank slate emphasises the decisive influence of the domestic environment upon psychological growth. Every emotional interaction contributes to the gradual formation of personality, making childhood relationships central to later psychological development.

The abused child possesses neither the physical strength nor the social authority necessary to retaliate against adult violence. Consequently, anger cannot receive direct expression and gradually retreats into the unconscious through repression. Winnicott's observation concerning the need of the child to "harbour vengeful fantasies in her imagination" (95) corresponds closely with Freud's theory that unacceptable emotions survive within unconscious mental life after exclusion from conscious awareness. Hidden resentment continues to accumulate beneath the surface of consciousness and silently transforms the emotional structure of the personality. The inability to articulate suffering therefore does not eliminate psychological conflict. Emotional pain continues to exist in concealed forms and influences later behaviour through indirect psychological processes. The novel consequently demonstrates the intimate relationship between childhood abuse, repression, unconscious fantasy, and the gradual formation of psychological disturbance

Chapter Three

Silence as Trauma

Renowned American psychiatrist and researcher Judith Herman explains that traumatic experience, although widespread throughout human history, remains extraordinary when compared with the ordinary adaptations of everyday life. Trauma assumes many forms, yet every traumatic experience places the victim in a condition of profound helplessness. Individuals commonly endure overwhelming fear, complete loss of control, emotional helplessness, or the perception of imminent annihilation.

According to Luckhurst, during the closing years of the nineteenth century and throughout much of the twentieth century, trauma emerged as a legitimate subject of scientific investigation only within the broader context of political and social movements. Physicians, psychologists, and psychiatrists who examined soldiers returning from the major World Wars, together with women affected by domestic violence and sexual abuse during the feminist movement, gradually recognised striking similarities in their psychological conditions. Men who witnessed the atrocities of war frequently displayed hysterical symptoms comparable to those experienced by women subjected to prolonged violence and abuse. These observations demonstrated that traumatic experience possesses universal psychological characteristics irrespective of its immediate cause.

Herman argues that trauma deprives individuals of their capacity to establish meaningful human relationships and generates unbearable emotional suffering capable of

transforming ordinary consciousness. She elaborates this principle through the experiences of women diagnosed with hysteria and soldiers suffering from shell shock. Women exposed to prolonged abuse frequently cried without apparent cause and experienced episodes of amnesia as psychological protection against intolerable emotional pain. Soldiers exposed to prolonged combat often suffered severe emotional collapse, accompanied by uncontrollable crying, screaming, and prolonged periods of complete emotional withdrawal because the horrors of war had fundamentally altered their psychological state. Herman consequently maintains that one of the essential stages of recovery depends upon the restoration of human attachment, since emotional connection provides the strongest protection against psychological disintegration. Recovery therefore requires the establishment of safety, the reconstruction of the traumatic narrative, and the gradual restoration of meaningful interpersonal relationships.

Herman further observes that during a traumatic event, whether produced by war, sexual assault, domestic violence, or any comparable catastrophe, the victims' "ordinary psychological defence mechanisms become overwhelmed and disorganized" (34). As a consequence, the individual undergoes enduring physiological and psychological changes that influence emotional regulation, cognitive functioning, and memory. Some survivors of war retain overwhelming emotional responses while possessing fragmented or incomplete recollections of the traumatic event. Others preserve exceptionally vivid memories that remain strangely detached from emotional feeling. These contrasting responses depict the complexity of traumatic memory and demonstrate that psychological suffering may appear in diverse forms. Such disturbances constitute characteristic symptoms of Post Traumatic Stress Disorder.

Herman identifies three principal dimensions of this condition: "hyperarousal, intrusion, and constriction" (35). "Hyperarousal" refers to the continuous expectation of danger and the persistent state of heightened vigilance. "Intrusion" describes the involuntary return of traumatic memories through recurrent images, nightmares, or distressing recollections. "Constriction" represents psychological numbing, emotional withdrawal, and diminished responsiveness that develop as protective responses against overwhelming emotional suffering. Many victims experience these conditions simultaneously, and the interaction among them frequently intensifies psychological distress.

The psychological consequences identified by Herman correspond closely with Freudian theories concerning repression and unconscious conflict. Trauma frequently overwhelms the capacity of conscious thought to process painful experience, compelling the mind to exclude intolerable memories from immediate awareness. Although these memories disappear from conscious recognition, they remain active within the unconscious and continue to influence behaviour, emotional response, interpersonal relationships, and self-perception. Survivors frequently experience unexplained anxiety, emotional instability, recurring nightmares, intrusive recollections, and sudden physiological reactions that appear disconnected from present circumstances. These manifestations demonstrate that traumatic memory has not vanished but continues to operate beneath conscious awareness. The unconscious therefore preserves emotional wounds that remain inaccessible through ordinary recollection, allowing traumatic experience to shape present behaviour despite the absence of conscious memory.

Within this psychoanalytical framework, repression functions as a protective psychological mechanism that temporarily preserves the integrity of the personality by preventing unbearable emotional experiences from entering conscious awareness. Nevertheless, repression cannot permanently eliminate traumatic memory. Emotional conflict preserved within the unconscious gradually returns through symbolic behaviour, psychological symptoms, dreams, involuntary recollections, emotional withdrawal, and repetitive behavioural patterns. Herman therefore introduces trauma as a continuing psychological process whose influence extends far beyond the original event. Recovery requires the gradual reconstruction of traumatic memory within a secure therapeutic environment where the survivor can confront painful experience without becoming overwhelmed by emotional suffering. Through this process, fragmented memories acquire coherent narrative form, allowing emotional integration and the gradual restoration of psychological stability.

The theoretical principles advanced by Herman provide an important foundation for understanding literary representations of trauma, repression, and psychological disturbance. Characters shaped by childhood abuse, domestic violence, war, emotional neglect, or severe interpersonal betrayal frequently exhibit the psychological patterns that Herman identifies throughout her work. Their emotional withdrawal, fragmented memories, recurrent anxiety, uncontrollable emotional reactions, and inability to establish stable relationships reveal the continuing influence of unresolved trauma upon adult identity. Herman therefore demonstrates that traumatic experience extends beyond the immediate moment of violence and becomes a lasting psychological condition that reshapes memory, emotion, identity, and human relationships.

Herman explains that prolonged and repeated trauma commonly develops when an individual is held in conditions of captivity. Within such an environment, the perpetrator seeks complete psychological domination over the victim. The primary objective is to deprive the victim of autonomy and gradually sever emotional connections with the self, with other people, and with the outside world. This systematic process of domination gradually weakens psychological resilience because the perpetrator cultivates persistent fear alongside an unexpected sense of gratitude. The victim recognises that survival depends entirely upon the captor, producing a "paradoxical emotional condition in which fear and dependence coexist" (Herman 77). As this process continues, the emotional strength required for resistance gradually diminishes, leaving the victim in a condition of complete submission. Herman states that, "Total surrender occurs when the victim is forced to violate her own moral principles" (Herman 84). This surrender does not occur suddenly. It develops through successive stages during which the victims capacity for independent judgement and emotional resistance progressively declines. Survivors of prolonged domestic captivity frequently describe the initial stage as robotisation because they gradually lose the sense that they possess any genuine choice concerning their own actions. Herman further explains that, "These survivors as well as concentration camp survivors describe the second stage as losing the will to live" (85). At this point, individuals exist in a condition of complete passivity and no longer attempt to satisfy even the most basic human needs. Emotional withdrawal becomes a necessary strategy for psychological survival, although it simultaneously deepens isolation and weakens personal identity.

The destructive consequences of captivity extend beyond the immediate experience of violence and profoundly damage the survivor's capacity to establish meaningful human relationships. Emotional attachment becomes increasingly difficult because prolonged domination destroys confidence in trust, intimacy, and personal security. Herman therefore argues that every meaningful human relationship limits the authority of the perpetrator because emotional connection interrupts complete psychological isolation. Even the smallest reminders of ordinary life possess considerable psychological value. Herman states that, "Even transitional objects are important in preserving a sense of connection" (81). Such objects may include jewellery, photographs, letters, or articles of clothing that preserve emotional ties with family, memory, and personal identity. Although these objects appear insignificant from an external perspective, they function as psychological anchors that sustain hope and preserve the victims awareness of life beyond captivity. They maintain continuity between past identity and present existence, preventing complete emotional disintegration during prolonged abuse.

Herman further distinguishes between repeated trauma experienced during adulthood and repeated trauma experienced during childhood. Trauma encountered during adult life damages a personality that has already undergone substantial psychological development. Childhood trauma, however, shapes the entire process of personality formation because it occurs during the earliest stages of emotional and psychological growth. A child confined within an abusive family environment confronts overwhelming developmental challenges. The child must preserve trust within relationships characterised by betrayal, discover safety within conditions dominated by

danger, maintain a sense of control within an unpredictable environment, and search for emotional strength despite complete helplessness. Since children remain entirely dependent upon adults for protection, they cannot escape the conditions that threaten their emotional survival. Consequently, they attempt to compensate for the absence of parental care through immature psychological defence mechanisms that temporarily protect the developing personality from unbearable emotional suffering. These defensive processes permit psychological survival during childhood, although they frequently become sources of emotional disturbance during adult life.

According to Herman, prolonged childhood abuse creates a pathological family environment that fundamentally transforms ordinary psychological functioning. The relationship between body and mind, external reality and imagination, conscious knowledge and unconscious memory gradually becomes unstable. Within these altered psychological states, traumatic experiences remain inaccessible through ordinary conscious recollection while continuing to influence emotional behaviour through symbolic and indirect forms. Psychological symptoms therefore conceal traumatic experience even as they reveal its continuing presence. Emotional conflict emerges through bodily reactions, unconscious behaviour, fragmented memory, and unexplained psychological distress because the original experience remains too painful for direct expression. This process corresponds closely with Freudian theories of repression, according to which intolerable experiences become excluded from conscious awareness while continuing to shape emotional life through unconscious processes.

In *The Silent Patient*, traumatic experiences are seldom processed in a complete or coherent manner at the moment of their occurrence. They return repeatedly through

fragmented memories, intrusive thoughts, and the gradual collapse of personal identity experienced by the victim. Theo Faber recounts the extramarital relationship of his wife in a manner that initially suggests that these events are unfolding alongside his therapeutic engagement with Alicia Berenson. Only near the conclusion of the novel does the reader discover that the events surrounding his wife had occurred much earlier. This narrative structure presents Theo own trauma in a fragmented form, reflecting the psychological dislocation that frequently accompanies traumatic memory. The temporal disruption within the narrative demonstrates that traumatic experience resists orderly recollection and continues to intrude upon present consciousness through disconnected recollections and emotional disturbances.

Alicia Berenson undergoes repeated traumatic experiences throughout her life. The death of her mother during childhood, the emotional rejection of her father who openly declares that he wishes Alicia had died in place of her mother, and the later betrayal by her husband Gabriel create successive psychological wounds that gradually fragment her emotional life. She develops an overwhelming conviction that she is unloved and abandoned, believing that no individual genuinely belongs to her. Such emotional deprivation produces an unstable sense of self and prevents the formation of a coherent personal identity. Her inability to articulate her suffering reflects the fractured nature of traumatic memory and the gradual disintegration of identity. Theo, acting as her psychotherapist, observes, "Her silence was a fortress, a place of safety" (Michaelides 89). The statement outlines silence as a protective psychological defence through which Alicia attempts to shield herself from emotional devastation. Her silence represents a conscious withdrawal from a world associated with betrayal, abandonment, and

emotional pain. The novel consequently suggests that survivors of severe trauma frequently seek psychological safety before any process of verbal expression is possible.

Theo initially regards silence as the greatest obstacle to psychological healing. As the therapeutic process develops, Alicia's journey complicates this assumption. Alicia communicates through painting with a degree of emotional depth that spoken language fails to achieve. Her artistic creations disclose fear, grief, betrayal, and emotional conflict through visual expression. Jean Felix, her close friend and art dealer, recognises this quality when he remarks that Alicia "refusal to comment" constitutes her true message (Michaelides 90). The statement indicates that silence itself possesses communicative power. When Alicia eventually speaks, her voice is described as sounding "like a creaking gate," yet the account she offers Theo is later exposed as false (Michaelides 95). By the conclusion of the novel, Theo himself recognises that "the talking cure itself" has failed (Michaelides 88). Readers consequently begin to question spoken testimony throughout the narrative. Although *The Silent Patient* acknowledges the significance of psychotherapy, it also proposes that silence would communicate psychological truth in forms beyond ordinary language. Certain traumatic experiences remain resistant to complete verbal expression because language cannot fully contain profound emotional suffering.

Alicia's silence functions as a powerful form of communication that reveals the magnitude of her psychological distress. Her refusal to speak directs attention towards the emotional world concealed beneath her outward stillness. Theo reflects that "her silence was louder than any words she could have spoken" (Michaelides 45). This observation encourages readers to examine the emotional reality hidden beneath external behaviour.

When verbal communication is impossible, Alicia's diary gradually reveals her fears, anxieties, and emotional instability. The entries disclose a psychological condition marked by uncertainty and internal conflict. Her opening declaration, "No crazy thoughts allowed" (Michaelides 3), immediately suggests that disturbing thoughts exist beneath the surface of conscious awareness. The diary therefore records only a partial account of her psychological condition, leaving many painful experiences concealed beneath the written narrative. Throughout her treatment, the diary becomes a valuable source that enables Theo to approach the emotional history concealed behind the silence of Alicia. Its fragmented structure closely resembles the fragmented character of traumatic memory itself, where disconnected recollections gradually emerge without chronological order.

Visual art is the principal medium through which Alicia externalises emotional experiences that language cannot adequately express. Her paintings reveal hidden psychological conflict and preserve memories that remain inaccessible through ordinary speech. The final painting depicting Alcestis occupies a central position within this symbolic system. Alcestis, the tragic heroine of Greek mythology, willingly sacrifices her own life to preserve the life of her husband. The myth therefore establishes an important symbolic connection with Alicia's emotional history. Theo interprets the painting as "a cry for help, a desperate attempt to communicate what she could not say in words" (Michaelides 210). The painting functions as an emotional confession through symbolic representation, expressing betrayal, abandonment, sacrifice, and despair without spoken explanation. This artistic expression corresponds closely with Judith Herman's discussion of trauma, which proposes that survivors frequently depend upon creative forms of expression when ordinary language proves insufficient for communicating overwhelming

psychological pain. The paintings of Alicia therefore become visual testimonies that preserve memories too painful to articulate directly, allowing hidden emotional experiences to emerge through symbolic artistic creation.

The traumatic childhood experiences of Theo Faber profoundly shape his professional identity as a psychotherapist. At the beginning of *The Silent Patient*, the author encourages readers to believe that Theo has successfully overcome the emotional wounds of his early life. As the narrative progresses, however, it gradually becomes evident that his childhood trauma remains unresolved and continues to influence his emotional responses and moral judgement. The eventual revelation that Theo commits murder demonstrates that the psychological injuries of his childhood have continued to govern his behaviour throughout adulthood. His unresolved emotional conflicts significantly complicate his capacity to provide effective therapeutic care for Alicia Berenson. As his treatment progresses, the distinction between patient and therapist gradually dissolves because Theo becomes emotionally invested in Alicia beyond the ethical limits of professional practice. Reflecting upon his emotional attachment, Theo states, "I saw myself in her. Her silence mirrored my own childhood, the years I spent in my room, unable to speak" (Michaelides 75). This confession reveals the depth of his identification with Alicia suffering. Her emotional condition awakens memories of his own childhood isolation and psychological pain. Consequently, Theo unconsciously projects his personal emotional history onto Alicia, allowing his unresolved experiences to shape his clinical judgement. His inability to distinguish Alicia's trauma from his own demonstrates one of the major limitations of psychological treatment when the therapist carries unresolved emotional wounds. An additional complication arises from the

concealed relationship between therapist and patient. Theo already possesses personal knowledge of Alicia before assuming responsibility for her treatment, although this fact remains unknown to every other character. Such concealed familiarity inevitably influences the therapeutic process and compromises professional objectivity. Near the conclusion of the novel Theo openly admits, "I thought I could save her but in the end I could not even save myself" (Michaelides 320). This confession acknowledges the inadequacy of his therapeutic methods and reveals the continuing influence of his unresolved childhood trauma. The novel consequently proposes that recovery from severe psychological trauma requires emotional transformation that extends beyond professional intervention alone.

Theo Faber, the first person narrator and psychotherapist repeatedly argues that emotional pain and violent impulses originate "in the land before memory, in the world of early childhood, with abuse and mistreatment" (Michaelides 123). This observation establishes childhood experience as the principal foundation of adult psychological development. Theo therefore believes that any attempt to understand the adult psyche requires a careful exploration of childhood experience. It is therefore significant that, immediately after deciding to treat Alicia Berenson, the first word recorded in his notebook is "CHILDHOOD" (Michaelides 91). Throughout the narrative he repeatedly visits Alicia's childhood home and examines the circumstances of her early life. Upon arriving there, he reflects that "the roots of her adult life...were buried here" (Michaelides 154). His investigation extends beyond physical surroundings to include her relationships with her parents, believing that these early experiences hold the key to understanding her psychological condition. At the same time, Theo remains unable to free himself from the

emotional burdens of his own childhood. His father repeatedly convinces him that he possesses no value, leaving emotional scars that continue into adult life. This damaged self-perception later governs his marital relationship with Kathy, whose emotional betrayal confirms the feelings of worthlessness that originated during childhood.

Theo describes himself as "useless, ugly, worthless, nothing" (Michaelides 78). The repetition of these expressions shows how childhood emotional abuse continues to shape adult identity. Symbolic patterns within the novel further emphasise this psychological continuity. The narrative opens with young Theo attempting to catch snowflakes during childhood and concludes with the adult Theo repeating the same action. This recurring image symbolises the enduring presence of childhood memory and demonstrates that the emotional past remains inseparable from adult consciousness. The novel therefore suggests that childhood trauma continues to influence identity long after the original events have passed.

Psychological trauma frequently develops through physical abuse, sexual violence, verbal humiliation, emotional neglect, bullying, bereavement, serious accidents, persistent feelings of inferiority, betrayal, and other experiences that overwhelm emotional endurance. When examined through this psychological framework, the fiction of Alex Michaelides emerges as a sustained literary investigation into the enduring consequences of childhood trauma and emotional suffering. His narratives consistently explore unresolved psychological wounds, particularly dissociative trauma, and examine the continuing influence of these experiences upon identity formation, emotional regulation, interpersonal relationships, and personal perception. *The Silent Patient* adumbrates Alicia Berenson and Theo Faber as individuals whose childhood experiences

continue to govern their adult existence. Their emotional development remains inseparable from early experiences of abandonment, rejection, abuse, and psychological neglect. Alicia responds through prolonged silence, symbolic artistic expression, and emotional withdrawal, whereas Theo channels his unresolved suffering into obsessive therapeutic ambition and destructive behaviour. Their lives demonstrate that traumatic experience does not disappear with the passage of time. Hidden emotional wounds continue to influence thought, behaviour, desire, and moral judgement until they are consciously confronted and psychologically understood. Through these two central characters, Alex Michaelides presents childhood trauma as a continuing psychological force that shapes adult identity, determines emotional relationships, and directs the tragic course of human life.

Prolonged exposure to severe psychological stress frequently results in dissociative trauma, a condition in which children mentally detach themselves from overwhelming emotional experiences as a means of psychological survival. Dissociation functions as a defensive response that enables the child to endure circumstances that would otherwise become psychologically unbearable. Within The Silent Patient, dissociative trauma emerges as the principal explanation for Alicia Berenson's prolonged silence, illustrating the manner in which the human mind responds to overwhelming emotional shock through psychological detachment and repression. Alex Michaelides presents dissociation and silence as interconnected defensive mechanisms that preserve the fragile integrity of the self during moments of unbearable suffering. At the same time, these protective responses gradually become significant barriers to emotional recovery

because they prevent traumatic experiences from being consciously processed and integrated into memory.

Throughout *The Silent Patient*, childhood repeatedly appears as the determining foundation of adult identity and behaviour. Michaelides establishes a significant psychological parallel between Alicia Berenson and Theo Faber by presenting both characters as survivors of severe childhood trauma whose early experiences later develop into profound psychological disturbances. Alicia experiences her earliest traumatic event during her mother's suicide attempt, when she is strapped inside the vehicle and becomes an unwilling witness to the horrifying event. This experience constitutes the beginning of her dissociative trauma because Alicia perceives the incident as an attempted murder directed towards her as much as an act of self-destruction. The overwhelming terror generated by this experience leaves a permanent psychological imprint that continues to disturb her emotional life throughout adulthood. The memory remains deeply embedded within her unconscious and repeatedly shapes her responses to later experiences of abandonment, betrayal, and emotional insecurity.

Alicia experiences an even deeper psychological wound following the death of her mother through the emotional cruelty displayed by her father. During the period in which she desperately requires affection, protection, and emotional reassurance, her father directs his grief, frustration, and resentment towards her. His declaration that he wished Alicia had died in place of her mother becomes one of the defining moments of her psychological development. Such emotional rejection functions as a symbolic form of psychological infanticide because it destroys the child's developing sense of worth and emotional security. From that moment onward, Alicia unconsciously accepts the belief

that her existence possesses little value and that she is fundamentally undeserving of love or protection. This destructive belief gradually becomes one of the central foundations of her dissociative trauma and continues to influence her emotional responses throughout adult life.

The psychological injury created during childhood is reactivated many years later through Gabriel's betrayal. During the violent confrontation within the novel, Gabriel chooses self-preservation when confronted with mortal danger. His decision symbolically recreates the emotional structure of Alicia's earliest traumatic experience because she once again becomes the person considered expendable by an individual whom she deeply loves and completely trusts. This repetition overwhelms the fragile psychological defences that have sustained her for many years and precipitates a severe dissociative collapse culminating in Gabriel's murder. Alicia perceives this act through the psychological logic of accumulated trauma and believes that Gabriel destroyed her emotionally long before the fatal shooting occurred. The murder therefore emerges as the catastrophic culmination of unresolved childhood trauma that has remained psychologically active beneath conscious awareness for many years.

Theo Faber follows a similarly tragic psychological trajectory. Raised within a household characterised by physical aggression, verbal humiliation, and emotional neglect, Theo gradually internalises his father's cruelty as an enduring component of his own personality. His mother's emotional helplessness further intensifies his feelings of abandonment and insecurity. These childhood experiences contribute to the formation of dissociative trauma that later manifests through emotional detachment, substance misuse during his university years, persistent feelings of inadequacy, obsessive attachment, and

an overwhelming desire for emotional validation. His dependence upon Kathy reflects an unconscious search for the affection and acceptance that remained absent throughout childhood. Theo consequently constructs his adult relationships upon emotional needs that originate within unresolved childhood deprivation.

The psychological consequences of Theo's traumatic childhood gradually become visible through obsessive behaviour, intrusive thoughts, stalking, emotional instability, and violent fantasies that reproduce the behavioural patterns previously demonstrated by his father. His inability to respond constructively to betrayal illustrates the destructive influence of unresolved dissociative trauma upon judgement, emotional regulation, and moral decision making. Ironically, Theo eventually becomes the indirect catalyst responsible for reawakening Alicia's deeply repressed childhood trauma. His actions immediately preceding Gabriel's murder activate emotional memories that Alicia has struggled to contain throughout her adult life, thereby contributing indirectly to the fatal outcome. Both Alicia and Theo remain haunted for many years by childhood experiences that continue to determine their emotional lives through depression, obsession, psychological withdrawal, and violence.

Only near the conclusion of the narrative does Theo fully comprehend the extent of his own psychological responsibility in recreating the conditions that produced Alicia's emotional collapse. His explanation represents an attempt to understand the unconscious repetition that his behaviour has initiated. He finally acknowledges:

> I finally understood what I had re-enacted, the long forgotten land mine on which I had trodden. Gabriel was the second man to condemn Alicia to

> death; bringing up this original trauma was more than she could bear which is why she picked up the gun and visited her long awaited revenge not upon her father, but upon her husband. As I suspected, the murder had much older, deeper origins than my actions. (Michaelides 285)

This recognition explaines that Theo ultimately perceives Gabriel's betrayal as the symbolic repetition of the original emotional rejection experienced during Alicia's childhood. The murder therefore possesses psychological origins extending far beyond the immediate circumstances surrounding the crime.

Within the lives of both Alicia and Theo, childhood trauma emerges as the decisive force governing psychological deterioration throughout adulthood. Their unresolved dissociative trauma continues to manifest through emotional withdrawal, obsessive attachment, depression, violent impulses, distorted perception, and ultimately homicide. Michaelides demonstrates that traumatic experiences endured during childhood continue to shape personality development long after the original events have passed. The unconscious preserves emotional wounds that remain capable of determining behaviour whenever later experiences reproduce the emotional structure of the original trauma. Consequently, the tragic actions committed by both characters originate within psychological injuries that have remained unresolved for many years. The novel, therefore, brings in the enduring consequences of unresolved childhood and dissociative trauma upon adult identity, emotional development, interpersonal relationships, behaviour, and moral judgement. And Michaelides ultimately presents childhood trauma as a psychological force capable of shaping the entire course of human existence when emotional woundsremain untreated and unresolved.

Chapter Four

Conclusion

The present study has examined Alex Michaelides*The Silent Patient* through the theoretical perspectives of Sigmund Freud and Judith Herman in order to investigate the complex relationship between repression, trauma, the unconscious, silence, and psychological identity. Although the novel initially appears to belong to the tradition of crime fiction, the analysis has demonstrated that its central concern extends beyond the investigation of murder into the hidden dimensions of the human psyche. Michaelides constructs a narrative in which criminal action functions as the visible consequence of invisible psychological conflicts rooted in childhood trauma and unconscious repression. The study has therefore established that the murder of Gabriel is neither an isolated criminal act nor an impulsive act of violence. It emerges as the culmination of long standing psychological suffering that has remained unresolved within the unconscious mind. Through the integration of Freudian psychoanalysis and Judith Herman trauma theory, the novel reveals that the origins of violence frequently reside within forgotten emotional experiences that continue to determine adult behaviour.

The Freudian concept of repression has provided the principal theoretical framework for understanding Alicia Berenson psychological condition. Freud argues that unacceptable wishes, painful memories, and unbearable emotional experiences are forced into the unconscious, where they continue to influence behaviour through indirect psychological expressions. The study has demonstrated that Alicia's silence functions as

one of the most powerful manifestations of repression. Her refusal to speak following the murder is neither a simple expression of guilt nor an indication of psychological collapse alone. Silence is a defensive psychological structure through which the unconscious attempts to preserve the ego from emotional destruction. Her childhood memories concerning her mother's suicide attempt, her father's emotional rejection, and Gabriel's betrayal remain buried beneath conscious awareness until accumulated emotional pressure ultimately exceeds the capacity of repression. The murder therefore represents the violent return of repressed trauma that has remained psychologically active throughout her life. Michaelides successfully transforms Freudian theory into literary representation by presenting unconscious conflict through silence, artistic production, fragmented memory, dreams, and symbolic imagery.

The investigation has also indicated that Judith Herman theory of psychological trauma provides an equally valuable framework for interpreting the novel. Herman argues that traumatic experiences alter memory, emotional regulation, identity, and interpersonal relationships, particularly when trauma occurs during childhood. The present study has established that Alicia's childhood experiences correspond closely with Herman description of traumatic fragmentation and dissociative survival. Alicia develops psychological strategies that enable temporary survival through emotional detachment, silence, artistic expression, and withdrawal from ordinary human relationships. These responses initially function as mechanisms of psychological protection. Eventually they become obstacles that prevent emotional recovery because traumatic memory remains unprocessed within the unconscious. Michaelides therefore describes silence and dissociation as interconnected responses to overwhelming psychological suffering. The

inability of Alicia to communicate verbally does not indicate the absence of emotional life. Her paintings, diary, symbolic imagery, and fragmented memories are alternative languages through which trauma seeks expression.

The analysis has further demonstrated that Theo Faber occupies a psychological position that extends far beyond the conventional role of detective or therapist. Theo gradually emerges as a second traumatised subject whose unresolved childhood experiences shape every aspect of his professional identity. His abusive father, emotionally unavailable mother, obsessive attachment to Kathy, and compulsive desire to rescue Alicia reveal the continuing influence of unresolved childhood trauma upon adult personality. Freud's concept of repetition compulsion becomes particularly significant in understanding Theo's behaviour. Throughout the novel he unconsciously recreates emotional situations that resemble his own childhood experiences, believing that he can finally master the psychological wounds that have remained unresolved for many years. His therapeutic relationship with Alicia gradually transforms into an unconscious attempt to heal himself. The study has therefore established that the therapeutic failure of theo originates from his inability to distinguish his own unresolved psychological conflicts from those experienced by his patient. His professional judgement gradually collapses because personal trauma continuously intrudes upon clinical objectivity.

One of the most significant findings of this study concerns the structural relationship between Alicia and Theo. Although both characters occupy different narrative positions, they function as psychological parallels whose lives are shaped by remarkably similar childhood experiences. Both endure emotional neglect, parental rejection, fear, insecurity, abandonment, and unresolved psychological pain. Their adult

identities consequently develop through obsession, emotional dependence, distorted perception, and impaired emotional regulation. Alicia responds through silence, artistic creation, and eventual violence, whereas Theo responds through psychotherapy, obsessive investigation, manipulation, stalking, and moral disintegration. The study has therefore established that the novel presents childhood trauma as the central force governing adult identity irrespective of profession, intelligence, or social position. Psychological suffering remains active until consciously confronted and emotionally integrated.

Another important finding concerns the symbolic function of silence throughout the narrative. The analysis has denoted that silence possesses multiple psychological meanings simultaneously. Silence functions as repression, resistance, protection, communication, confession, emotional imprisonment, and psychological survival. The silence of Alicia does not signify the absence of meaning. On the contrary, it becomes the most expressive element within the novel because every painting, diary entry, symbolic gesture, and psychological reaction emerges from the space created by her refusal to speak. Michaelides therefore challenges conventional assumptions concerning language by suggesting that traumatic experience frequently exceeds verbal representation. Art consequently becomes an alternative psychological language capable of expressing emotional realities that ordinary speech cannot adequately communicate. Alicia's paintings, particularly those associated with Alcestis and other symbolic representations, become visual manifestations of unconscious memory and psychological suffering.

The study has also established that Michaelides successfully integrates mythological symbolism with psychological theory. The figure of Alcestis extends

beyond literary ornamentation and functions as a symbolic framework through which Alicia interprets betrayal, sacrifice, love, abandonment, and revenge. Her identification with Alcestis demonstrates how traumatic subjects frequently construct symbolic narratives that provide emotional meaning for otherwise incomprehensible suffering. Likewise, recurring images of snow, fire, jasmine, colour symbolism, smoking, diaries, and artistic creation contribute to the psychological architecture of the narrative. These recurring motifs function as symbolic expressions of repression, traumatic memory, emotional fragmentation, and unconscious desire. Michaelides therefore produces a narrative in which symbolism and psychology remain inseparable components of literary meaning.

The present study has further demonstrated that *The Silent Patient* questions conventional distinctions separating victim from offender, healer from patient, and sanity from psychological disturbance. Alicia commits murder, yet the analysis has shown that her action emerges from decades of accumulated emotional trauma. Theo appears as therapist, investigator, and narrator, yet gradually becomes morally compromised through unresolved childhood experiences and obsessive behaviour. Michaelides therefore destabilises simplistic moral classifications by directing attention towards the psychological origins of human behaviour. The novel suggests that criminal acts frequently possess histories extending far beyond the immediate circumstances surrounding the crime. Psychological violence inflicted during childhood continues to shape adult conduct long after the original events have disappeared from conscious memory.

Finally, the study concludes that The Silent Patient offers a profound literary

examination of the fragile relationship between memory, trauma, identity, and psychological survival. Michaelides demonstrates that the human mind possesses extraordinary capacities for psychological defence through repression, dissociation, silence, artistic expression, and symbolic communication. At the same time, the narrative reveals that defensive mechanisms alone cannot produce genuine psychological healing because repressed emotional experiences continue to seek expression through indirect and frequently destructive forms. The novel therefore contributes significantly to contemporary psychological fiction by illustrating that healing requires acknowledgment of traumatic memory, emotional recognition, and the recovery of authentic human connection. Through the combined insights of Sigmund Freud and Judith Herman, *The Silent Patient* emerges as an important literary exploration of the enduring psychological consequences of childhood trauma, the hidden operations of the unconscious, and the tragic consequences that arise when emotional suffering remains unrecognised and unresolved.