Chapter Four

Trauma Healing and Trauma Narrative

The preceding chapter focuses on Morrison’s representation of the characters’ traumatic stories in *Beloved*. As discussed, Morrison, who aims at making the unspeakable trauma accessible to the reader, skillfully constructs the narrative of *Beloved* in accordance with the characteristics of trauma narrative. In doing so, Morrison represents the unspeakable stories of Sethe, Paul D, Beloved, and other blacks surviving slavery. By telling the unspeakable trauma, the preceding chapter has unfolded to us the “how” but it does not tell us the “why”: Why should the traumatized characters recount the traumatic memory that should be repressed and forgotten? As we know, the function of trauma narrative to the listener who does not experience the traumatic event is to deliver the information concerning the traumatized subject’s painful past. Although traumatic memory is unspeakable and trauma narrative is unintelligible, the listener endeavors to figure out the truth by piecing together all the fragmented narrative and imagining the central, unspoken event. However, for the traumatized subject who has been acquainted with the traumatic event, what is the function of trauma narrative? Is there any good for the traumatized subject to recount her/his traumatic experiences, which she/he does not want to confront? Morrison figures out the answer to the above questions by interrelating trauma narrative with trauma healing.¹ In *Beloved*, the characters’

¹ Examining the narrative in *Beloved*, we can find that the characters’ trauma narrative includes the idea of trauma healing. For example, Sethe, in her trauma narrative with Paul D, asks herself that if she has “other things to do” (*Beloved* 70) than being trapped in her traumatic memory. She should “worry, for example, about tomorrow, about Denver, about Beloved, about age and sickness not to speak of love” (*Beloved* 70). Denver also reveals her longing for someone who can accompany her and rid her of the painful past (*Beloved* 19). Moreover, the arrangement of the whole narrative in
trauma narrative not only evinces their inmost desire for trauma recovery but also functions as an approach to trauma healing. For Sethe, Paul D, Denver, and other traumatized blacks, trauma narrative is helpful, even indispensable, because “[r]emembering and telling the truth about terrible events are prerequisites both for the restoration of the social order and for the healing of individual victims” (Herman 1).2

Intending to clarify the relationship between trauma narrative and trauma healing in *Beloved*, this chapter, firstly, emphasizes the significance of trauma healing by indicating the indelibility of traumatic memory and the characters’ miserable lives resulting from the unhealed trauma. For the traumatized subject, traumatic memory is unforgettable and, without trauma healing, she/he is constantly haunted by the unhealed trauma. Secondly, this chapter illuminates the significance of “the other” in the process of trauma healing by instancing two unsuccessful ways of trauma healing, repetition compulsion and acting out, which are put into practice without the participation of the other. At last, in terms of the participation of the other, this chapter explicates the role the other plays in trauma narrative and discusses how trauma narrative, as a way of trauma healing executed by within the interaction between the traumatized subject and the other, helps the traumatized subject to extract her/himself from the cruel predicament of being traumatized.

*Beloved* also corresponds to the process of trauma recovery. The novel is divided into three chapters and the opening sentence of each chapter—“124 was spiteful” (*Beloved* 3), “124 was loud” (*Beloved* 169), and “124 was quiet” (*Beloved* 239)—suggests the different stage of trauma healing. The traumatized subject is spiteful at the very beginning, then loud (proclaiming aloud their feeling of being traumatized), and finally quiet (for the trauma has been healed). Morrison’s arrangement of the opening sentences suggests that 124, the house where Sethe and Denver live, symbolizes the spatial form of traumatic memory and, most importantly, this arrangement interrelates the whole narrative of *Beloved* with the idea of trauma healing.

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2 Herman suggests that trauma narrative has a very important status in the process of trauma recovery. Her discussion of the relation between trauma narrative and trauma healing is the main point of this chapter and will be elaborated in the following pages.
I. The Indelible Memory

The operation of repression discussed in Chapter Two discloses the traumatized subject’s evasive attitude toward traumatic memory. Being unable to tackle the unassimilated trauma, the traumatized subject represses her/his painful experiences into the unconscious in the hope that she/he will never have to recollect or recount them. However, repression is not an effective way to rid the traumatized subject of her/his traumatic experiences because traumatic memory is only repressed, not vanished. Repression is not forgetting. As Derrida states, it “neither repels, nor flees, nor excludes an exterior force” (“Freud” 246). The repressed memory, rather than being excluded from the traumatized subject’s memory system, lurks in the unconscious, waiting for the sign, for the opportunity, to be evoked by the involuntary memory and to return to the consciousness someday. Moreover, comparing to the everyday memory, traumatic memory is indelible since, with its significance in the traumatized subject’s life history and the state of being unassimilated, traumatic memory is “a reproduction more faithful and pure [. . .] than if it were assimilated, taken in and made the subject of memory and narrative” (Matus 24). Therefore, considering the failure of repression and the indelibility of traumatic memory, Caruth suggests the difficulty of extricating oneself from the traumatic experience when she states that “[t]o be traumatized is precisely to be possessed by an image or event” (“Introduction” 3, emphasis mine).

In *Beloved*, Morrison uses the tree-form scars on Sethe’s back to symbolize the traumatic memory which haunts the characters. The scars, which root and seed on Sethe’s back, is as indelible as her traumatic memory in slavery. The scars and the
traumatic memory are both “inscribed into the body in the form of permanent traces which structure [. . .] the repetition of affects and mental images associated with them” (Weigel 153). Moreover, Sethe’s scars contain the same feature of traumatic memory—it is invisible to the one who bears it but it truly exists. Traumatic memory, being repressed, lurks in the unconscious and is imperceptible; Sethe’s scars, spreading abroad on her back, cannot be seen by herself either.

Another symbol of the indelible traumatic memory in Beloved is the baby ghost which haunts the occupants in 124. Like Sethe’s scars, the baby ghost is invisible to the occupants but no one doubts its existence, “[t]he women in the house knew it and so did the children” (Beloved 3). Besides, the ghost, like traumatic memory, is not welcome but it appears abruptly from time to time. It manifests itself with signs, “merely looking in a mirror shattered it” or “two tiny hand prints appeared in the cake” (Beloved 3), to remind Sethe’s family of its existence. Unable to get rid of it, Sethe and Denver “put up with the spite in [their] own way” (Beloved 3), as helplessly as the traumatized subject who has no alternative but to live with the indelible trauma. Although Paul D drives out the ghost on the day of his arrival, it returns a few days later in human form. Beloved, the embodiment of the baby ghost and the family’s traumatic memory, shuts Paul D and other blacks out of 124 and traps Sethe and Denver into their painful past.

Living with her memories of slavery for eighteen years, Sethe has long been convinced of the indelibility of traumatic memory. She believes that traumatic memory will never vanish, even the atrocities she experienced are alive and waiting for her family. Therefore, Sethe keeps warning Denver against returning to Sweet Home, the place where she was abused, because she fears that the atrocities she
experienced will happen to her daughter again:

“Someday you [Denver] be walking down the road and you hear something or see something going on. So clear. And you think it’s your thinking it up. A thought picture. But no. It’s when you bump into a rememory that belongs to somebody else. Where I was before I came here, that place is real. It’s never going away. Even if the whole farm—even tree and grass blade of it dies. The picture is still there and what’s more, if you go there—you who never was there—if you go there and stand in the place where it was, it will happen again; it will be there for you, waiting for you. So, Denver, you can’t never go there. Never.

[. . .]” (Beloved 36, emphasis and explanation mine)

Sethe’s dread of the indelibility of traumatic memory reminds us of the sentence in the last chapter of Beloved—“It was not a story to pass on.” According to Lawrence, the term “pass on” can be interpreted as “to pass down” or “to die away” (244) and, if we adopt the latter, the sentence can be explained as “it is not a story which will be forgotten.” In fact, the double meaning of the sentence manifests the very predicament which the traumatized subject has to confront with: Traumatic memory is unspeakable (not to pass down) and unforgettable (not to die away) hence the traumatized subject is forced to remember what she/he cannot tell. This is the same predicament for the occupants of 124 because they have to live with the ghost which cannot be communicated. Roger Sale concludes that the characters’ predicament in Beloved manifests “Toni Morrison’s ambition to create a form, and a storytelling, that keeps alive the struggle to remember, the need to forget, and the inability to forget” (15).
II. The Unhealed Trauma

Traumatic events, generally involving “threats to life or bodily integrity, or a close personal encounter with violence and death” (Herman 33), intrude into the traumatized subject’s everyday life and impair her/his belief, confidence, dignity, and the sense of security. For the traumatized subject, traumatic events blight her/his life since they “overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning” (Herman 33); it is what Morrison calls “the severe fragmentation of the self” (“Unspeakable” 214). Unable to regain her/his life in its integrity, the traumatized subject abandons her/himself to despair, breaks off all relations with the outside world and has no interest in or plan for the future. Herman, in her research of the post-traumatic life, indicates that “[h]elplessness and isolation are the core experiences of psychological trauma” (197, emphasis mine).

The traumatized subject’s feeling of helplessness derives from her/his inability to resist traumatic events possessing overwhelming power. Moreover, for the person who loses her/his family or friends in traumatic events, the post-traumatic life is filled with a sense of guilt and helplessness for her/his inability to protect her/his beloved. Traumatic events take away what the traumatized subject treasures most and leave her/him the indelible scar. Without trauma healing, the traumatized subject lives her/his remaining years with endless sorrow, mourning for the dead instead of pursuing a better future. In Beloved, Baby Suggs loses nearly everything in slavery—her eight children, her husband, her grandchild Beloved—and finally she loses her enthusiasm for living. After witnessing Sethe’s killing Beloved, Baby Suggs lies on her bed and mourns for what she loses. “Suspended between the
nastiness of life and the meanness of the dead, she couldn’t get interested in leaving
life or living it” (*Beloved* 3-4). Stamp Paid, unwilling to see Baby Suggs moping her
life away, persuades her not to give up “her powerful Call” (*Beloved* 177) in the
Clearing but Baby Suggs responds with indifference. She says, “What I have to do
is get in my bed and lay down. I want to fix on something harmless in this world”
(*Beloved* 179). Without trauma healing, Baby Suggs is defeated by the
heartbreaking death of her family and becomes so despairing that she tells Sethe not
to fight: “Lay down your sword. This ain’t a battle; it’s a rout” (*Beloved* 244). At
the end of the story, after Beloved’s disappearance from 124, Sethe feels the same
despair that she repeats her mother-in-law’s doing, lying on her bed, mourning for her
daughter and waiting for death until Paul D returns to 124 to comfort her (*Beloved*
271-72).

Isolation is another predicament that the traumatized subject is confronted with
in her/his post-traumatic life. Traumatic events kill the traumatized subject’s
confidence in self security; the safe world she/he constructs collapses and her/his life
is threatened by overwhelming forces. To protect her/himself from further injury,
the traumatized subject retreats to the place where she/he considers as safe. She/he
also discontinues her/his interpersonal relationships because of her/him indulgence in
traumatic past or unwillingness to trust other people. From this perspective, Herman
points out that traumatic events isolate the traumatized subject because they “call into
question basic human relationships. They breach the attachments of family,
ffriendship, love, and community” (51). Furthermore, without trauma healing, the
traumatized subject would rather live in isolation than regain her/his social life for
her/his dread of being traumatized again.
In *Beloved*, the life of isolation is Sethe’s choice in order to protect her children from the atrocities in slavery. Having been abused at Sweet Home, Sethe tells Paul D, “I couldn’t let all that go back to where it was, and I couldn’t let her [Beloved] nor any of em [Sethe’s children] live under schoolteacher” (*Beloved* 163, explanation mine). Sethe endeavors to keep her children away from “the past that was still waiting for her” (*Beloved* 42) and, to achieve this aim, she isolates her family in 124 by cutting her connection with the outside world. Although Paul D suggests Sethe to move out of the haunted house, she rejects the plan: “No moving. No leaving. It’s all right the way it is” (*Beloved* 15). Living with the unhealed trauma, Sethe is convinced that isolating her children in a safe place like 124 is the best way to protect them. Arguing with Paul D, she proudly announces: “I stopped him [schoolteacher]. [. . .] I took and put my babies where they’d be safe” (*Beloved* 164, explanation mine). However, Paul D finds Sethe’s words controversial since “what she wanted for her children was exactly what was missing in 124: safety” (*Beloved* 164). Isolating her children in 124, Sethe prevents them from being traumatized in slavery but she also imprisons them in the haunted house, the space representing the traumatic memory she creates. Although Sethe insists that her love is not “too thick” (*Beloved* 164) and her protection works, Paul D refutes her idea: “How? Your boys [Buglar and Howard] gone you don’t know where. One girl [Beloved] dead, the other [Denver] won’t leave the yard. How did it work?” (*Beloved* 165, explanation mine). Paul D speaks directly to Sethe: “What you did was wrong” (*Beloved* 165) because he realizes that “[t]here could have been a way. Some other way” (*Beloved* 165) which would be more appropriate to protect Sethe’s children than merely isolating them in 124. From the viewpoint of trauma healing, Paul D’s argument is persuasive given
that the act of isolation cannot positively heal the trauma; it only passively precludes the possibility of being traumatized again. Furthermore, the traumatized subject’s isolation and the unhealed trauma combine each other into a vicious circle. The unhealed trauma isolates the traumatized subject; the life of isolation diminishes the possibility of trauma healing, and so on. In *Beloved*, this vicious circle is conspicuous in Sethe’s and Denver’s lives. Without trauma healing, Sethe not only traps herself in traumatic memory but also transfers the unhealed trauma to the next generation.³

### III. Trauma Healing without the Other—Repetition Compulsion and Acting Out

Besides applying the evasive ways of repression and isolation, the traumatized subject may seek other ways to heal the trauma and to abreact her/his resentment of being unfairly traumatized. However, trauma narrative as a way of trauma healing is not an acceptable scheme for the traumatized subject. The traumatized subject rejects trauma narrative because she/he is unwilling to share with other people her/his memories that are private, incommunicable, and even shameful. Dori Laub suggests that the traumatized subject “experience the feeling of belonging to a ‘secret order’ that is sworn to silence” (67). On the other hand, the traumatized subject’s rejection of trauma narrative cuts off her/his communication with other people and thus impedes the participation of the other in the process of trauma healing. As a result, without the other’s support, the traumatized subject is forced to deal with her/his trauma alone. The following two activities, repetition compulsion and acting out, are adopted by the traumatized subject as the ways of trauma healing both containing

³ The influence of Sethe’s isolation on Denver has been discussed with the concept of “insidious trauma” in Chapter Two, pp.12-13.
What is repetition compulsion? According to Freud, it is the compulsion for the traumatized subject to relive her/his traumatic experiences repeatedly and intensely in dreams (*Beyond* 13). Freud develops this notion in order to conceptualize his observation that the patient “is obliged to *repeat* the repressed material as a contemporary experience instead of, [...] *remembering* it as something belonging to the past” (*Beyond* 18, Freud’s emphasis). However, readers may find the notion questionable since the action of re-experiencing the traumatic events contradicts the pleasure principle which, in the Freudian theory, governs the subject’s mental apparatus to keep her/his mentality in constancy. Interrelating repetition compulsion with the “death instinct,” Freud explains that the compulsion to repeat is “more primitive, more elementary, more instinctual than the pleasure principle which it over-rides” (*Beyond* 23). The compulsion to repeat is situated “beyond the pleasure principle” because it is “a more urgent task [...] which consists in binding the excitations in such a way as to allow for their subsequent discharge” (Laplanche and Pontalis 468). By repeating her/his traumatic experiences, the traumatized subject tries to negotiate with her/his traumatic past, to grasp its meaning and to assimilate it into her/his personal history. This process, as Peter Brooks suggests, is “the movement from passivity to mastery” (98). For the subject, being traumatized is to experience the traumatic event and to live with its effect passively. The compulsion to repeat reveals the traumatized subject’s active attempt to master her/his

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4 Death instinct is, according to Freud, “the instinct to return to the inanimate state” (*Beyond* 38). Freud suggests that there is “an urge inherent in organic life to restore an earlier state of things which the living entity has been obliged to abandon under the pressure of external disturbing forces” (*Beyond* 36). Repetition compulsion corresponds with death instinct because it represents the traumatized subject’s desire to bring her/his life back to the initial state before the traumatic event occurs.
trauma, to free her/himself from traumatic memory, and to regain the order of life. In *Beloved*, there are many instances of repetition compulsion and the most concrete one is Sethe’s re-experiencing the past after Beloved’s return in human form. Killed in the woodshed eighteen years before, the dead daughter of Sethe should belong to the past and lives only in memories. However, Beloved “come back home from the timeless place” (*Beloved* 182) and, when Sethe recognizes her as her daughter, the past is “ready to glide in” (*Beloved* 176). Unlike the traumatized subject who can only repeat her/his traumatic experiences in dreams, Sethe re-experiences the past in real life by means of reuniting with her dead daughter. Sethe tells herself: “I don’t have to remember nothing” (*Beloved* 183) because, with Beloved’s return, the past becomes the present and memories become realities. Moreover, Sethe considers that on the traumatic scene of her daughter’s death she is in passivity because, unwilling to see them living in slavery, she has no choice but to kill her children but now she can master the traumatic event, to “[t]hink on it then lay it down—for good” (*Beloved* 182). Sethe believes that Beloved’s return, as repetition compulsion, affords her an opportunity to “reenter the past they shared” (Vickroy 185), to undo the trauma she creates, to compensate her dead daughter, and to explain to her why she has to cut off her throat. These tasks are so imperative that Sethe disregards other things in her life; she tells herself: “I only need to know one thing. How bad is the scar?” (*Beloved* 184)

The traumatized subject believes that the compulsion to repeat offers her/him the chance to master her/his trauma. However, as Dominick LaCapra states, repetition compulsion is nothing but “an imaginary, illusory hope for totalization, full

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5 To master the trauma by re-experiencing it is the traumatized subject’s hope. In fact, this hope is illusory and the reason of its failure will be discussed in the following pages.
closure, and redemptive meaning” (*Representing* 193). The hope is illusory because the act of repetition compulsion cannot help the traumatized subject to make progress in trauma healing. Without the participation of the other, the traumatized subject has to deal with and communicate with the trauma alone. This exclusive communication makes the negotiation between the traumatized subject and her/his traumatic memory consequently reach an impasse. Caruth indicates that the compulsion to repeat manifests “the necessity and impossibility of grasping the threat to one’s own life” (*Unclaimed* 62, emphasis mine) since it “can do nothing but repeat the destructive event over and over again” (*Unclaimed* 63). As a result, repetition compulsion affords the traumatized subject no opportunity to master the traumatic experience, let alone free her/himself from traumatic memory. To make matters worse, repeatedly reliving the traumatic experience may trap the traumatized subject in her/his traumatic past and eventually “lead to destruction” (Caruth, *Unclaimed* 63).

In *Beloved*, Beloved’s return as repetition compulsion does not heal Sethe’s trauma; instead, it traps Sethe in her traumatic memory and misinforms her of the correctness of her isolation. After recognizing Beloved as her daughter, Sethe tells Beloved: “you came back here to me and I was right all along: there is no world outside my door” (*Beloved* 184). For Sethe, “[t]he world is in this room. This here’s all there is and all there needs to be” (*Beloved* 183). Reliving the past with her dead daughter, Sethe not only cuts her connection with the outside world but also keeps Denver and Paul D at a distance. She is “wrapped in a timeless present” (*Beloved* 184) and eager to undo the trauma she creates. Without the participation of the other, Sethe communicates with Beloved alone, explaining to her how much she loves her and why she has to kill her. “Sethe pleaded for forgiveness, counting,
listing again and again her reasons: that Beloved was more important, meant more to her than her own life. That she would trade places any day. Give up her life, every minute and hour of it, to take back just one of Beloved’s tears” (Beloved 242). However, the negotiation between Sethe and Beloved reaches an impasse because the unforgiving daughter refuses to communicate with her mother. No matter what Sethe says, Beloved does not understand and “wasn’t interested” (Beloved 241). Moreover, Beloved chastises Sethe for cutting off her throat; she enslaves Sethe and makes demands capriciously. Beloved “never got enough of anything” (Beloved 240). She spends all Sethe’s money, consuming the food in 124, “getting bigger, plumper by the day” (Beloved 239), while Sethe becomes thinner and thinner. Lawrence describes Beloved as a “vampire” who “sucks out Sethe’s vitality, fattening on her mother’s futile attempts to ‘make her understand’” (239). Even Denver, after seeing “Beloved lapping [Sethe’s] devotion like cream” (Beloved 243, explanation mine), realizes that Beloved’s return brings her mother “a monstrous consumption” (Schopp 215) than an opportunity to get rid of her traumatic memory.

Another way for the traumatized subject to heal the trauma without the participation of the other is “acting out.” Unlike repetition compulsion, which is executed in dreams, “acting out” means the traumatized subject unconsciously reenacts the traumatic moment in real life. According to Freud, during the treatment the patient may reproduce the traumatic moment “not as a memory but as an action” (Inhibitions 150). Freud points out that the patient “acts it [the traumatic moment] before us, as it were, instead of reporting it to us” (An Outline 176, explanation mine). Van der Kolk and van der Hart explain that the traumatized subject reenacts the traumatic moment rather than recounts it because “[w]hen people are exposed to
trauma, [. . .] they experience ‘speechless terror’” (442). For the traumatized subject, traumatic experience “cannot be organized on a linguistic level and this failure to arrange the memory in words and symbols leaves it to be organized on [. . .] behavioral reenactments” (van der Kolk and van der Hart 442-43). On the other hand, acting out functions as an “important defense” (Galatzer-Levy 147) by which the traumatized subject makes an “energetic reaction” (Freud, Studies 8, Freud’s emphasis) to the traumatic event and tries to abreact the resentment of being unfairly traumatized. Herman studies the motive of acting out and suggests that the traumatized subject’s reenacting the traumatic moment is “one form of the wish for catharsis” (189). Moreover, in the case of atrocities like rape, child abuse, or holocaust, the traumatized subject’s acting out may turn into the so-called “revenge fantasy” in which “the roles of perpetrator and victim are reversed” (Herman 189). In “revenge fantasy,” the traumatized subject unconsciously reenacts the atrocity, performing not the victim but the perpetrator to retaliate, imagining that such a reversal and retaliation will abreact her/his resentment and restore her/his own sense of confidence and power.

In Beloved, the first instance of acting out is Beloved’s strangling Sethe. On that scene, Sethe leads Denver and Beloved to the Clearing, recollecting Baby Suggs’ prayer and asking for advice. Sitting on Baby Suggs’ rock, Sethe feels “[t]he fingers touching the back on her neck” (Beloved 96). At first she thinks it is Baby Suggs’s spirit consoling her but suddenly the fingers move “toward her wind-pipe” (Beloved 96) and choke her almost to death. Sethe does not know who tries to strangle her but Denver recognizes the attacker. She tells Beloved:

“You did it, I saw you,” said Denver.
“What?”

“I saw your face.  You made her choke.”

“I didn’t do it.” (Beloved 101)

Beloved denies having choked Sethe’s neck because acting out is an unconscious doing and Beloved performs it without knowing what she has done. On her way back to 124, Sethe recollects that the fingers strangling her are much the same as the touches of the baby ghost in 124 (Beloved 98). Sethe’s recollection confirms Denver’s words and assures us that Sethe’s choking in the Clearing is Beloved’s acting out. Intending to retaliate against Sethe for cutting off her throat, Beloved reenacts the traumatic scene in the woodshed eighteen years ago, reversing the role and acting as the perpetrator to strangle her mother. Another concrete instance of acting out in the novel is Sethe’s attempt on the life of Edward Bodwin. Sethe’s acting out is noteworthy because it is not only a revenge fantasy but also corresponds to Lacan’s notion of acting out which emphasizes “the intersubjective dimensions of recollection” (Evans 3), that is, the participation of the other in trauma narrative. Dylan Evans explains that Lacan supplements Freud’s definition of acting out by considering the dimension of the other:

[R]ecollection does not merely involve recalling something to consciousness, but also communicating this to an Other by means of speech. Hence acting out results when recollection is made impossible by the refusal of the Other to listen. When the Other has become “deaf,” the subject cannot convey a message to him in words, and is forced to express the message in actions. The acting out is thus a ciphered message which the subject addresses to an Other. (3)
Scrutinizing the context in the novel, we discern that Sethe’s acting out results from Beloved’s refusal to listen. As discussed, Sethe endeavors to persuade Beloved that “what she had done was right because it came from true love” (*Beloved* 251) but Beloved refused to listen. Unable to make Beloved comprehend her motive of infanticide, Sethe has nothing to do but reenacts the traumatic moment. Mr. Bodwin’s appearance gives Sethe a chance to act out, showing Beloved how much she loves her. On that scene, Mr. Bodwin drives a cart down Bluestone Road, heading for 124 to pick up Denver to work. Being desperate to act out, Sethe sees a man wearing a wide-brimmed hat (Mr. Bodwin) approaching the house and mistakes him for schoolteacher—“Guiding the mare, slowing down, his black hat wide-brimmed enough to hide his face but not his purpose” (*Beloved* 262). Sethe believes that she is re-experiencing the traumatic event eighteen years before and schoolteacher/Mr. Bodwin “is coming into her yard and he is coming for her best things” (*Beloved* 262). Indulged in her revenge fantasy, Sethe determines to retaliate and to reverse the role as the hunted; she runs toward Mr. Bodwin with an ice pick in her hand, acting the perpetrator to hunt the white man and to show Beloved that she will do everything to protect her children.

Acting out, like repetition compulsion, is not an effective approach for the traumatized subject to drive away her/his traumatic memory. Freud considers that acting out is the traumatized subject’s “abnormal reactions” which should not be executed outside the treatment (*An Outline* 177). This argument is persuasive because the traumatized subject may abreact her/his resentment of being traumatized during the moment of acting out yet she/he cannot ultimately free her/himself from traumatic memory by means of revenge fantasies. Moreover, the traumatized
subject's acting out often takes “the form of aggressive behaviour directed either at the self or at others” (Laplanche and Pontalis 4) and these violent actions may put the traumatized subject or other people at risk of serious and irreparable harm. Herman indicates that violent actions in the traumatized subject’s revenge fantasy actually increase her/his torment because “[t]hey exacerbate the victim’s feelings of horror and degrade her image of herself. They make her feel like a monster. They are also highly frustrating, since revenge can never change or compensate for the harm that was done” (189). In *Beloved*, the traumatized characters’ acting out does not bring relief. Neither Beloved nor Sethe derives comfort from their acting out as retaliation. Beloved’s strangling Sethe in the Clearing does not heal her trauma because from then on she keeps chastising her mother for cutting off her throat. In Sethe’s case, Sethe’s acting out, instead of bringing relief, nearly cause serious and irreparable harm to Mr. Bodwin and herself alike, since she mistakes the benefactor for the perpetrator. Had Denver not stopped her mother’s acting out in time, Sethe would feel great shame and regret after restoring to reason because she returns evil for good, killing by mistake the kind old man who are always available when Sethe’s family are in need of help.6

**IV. The Significance of the Other in Trauma Healing**

The above discussion on repetition compulsion and acting out in *Beloved* shows us that the traumatized subject’s intention of healing the trauma without the participation of the other cannot be accomplished. However, readers may question: why is the participation of the other so significant in trauma healing? To answer this

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6 Mr. Bodwin helps Baby Suggs to begin a new life after she leaves Sweet Home. He also rescues Sethe from the gallows for her infanticide and offers Denver a job to sustain her mother and Beloved who are “only interested in each other” (*Beloved* 240).
question, we need to know how the subject is constituted. Psychoanalysts believe that the constitution of the subject is based on the differentiation of the other. In other words, only by recognizing the being of the other can the subject constitute her/his subjectivity. Freud discovers the “Oedipus complex,” by which he stresses that the little boy determines his identity in virtue of recognizing his mother, who does not have the penis—“the paternal metaphor” (Boothby 153), as the other. Lacan names the process of the constitution of the subject as “alienation” (“The Subject” 210), through which the subject is constituted by differentiating the other from “the Ideal-I” (“The Mirror Stage” 2), the unified whole without the other.7 Following Freud and Lacan’s perspectives, it is clear that the constitution of the subject depends on the interaction between the subject and the other. Bearing this in mind, now we go back to answer the question. Trauma, as was stated above, is “the severe fragmentation of the self” (Morrison, “Unspeakable” 214). For the traumatized subject, traumatic events “shatter the construction of the self that is formed and sustained in relation to others” (Herman 51, emphasis mine). As a result, the aim of trauma healing is to reconstruct the damaged subject and, since the constitution of the subject depends on the other, the participation of the other becomes a prerequisite for the success of trauma healing. Herman agrees to this idea, pointing out that trauma healing should focus on the interaction between the traumatized subject and the other: “Recovery can take place only within the context of relationships; it cannot occur in isolation. In her renewed connection with other people, the survivor re-creates the

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7 The Ideal-I is a mirage, a fictional image of the complete subject formed at what Lacan calls “the mirror stage.” Lacan explains that the mirror stage takes place from the age of six months to eighteen months (“The Mirror Stage” 1-2). During that period, the baby builds her/his primal subjectivity, the Ideal-I, through the mirror image combining the reflection of her/his own body, the people and the things around her/him. For the baby, she/he assumes that she/he is the world since the combined mirror image represents a form of totality, a unified whole without the other.
psychological faculties that were damaged or deformed by the traumatic experience” (133).

In *Beloved*, even though Sethe chooses to live in isolation in order to protect her family from further injury, she and her daughter still yearn for the presence of the other who will bring comfort and share their burden of the past. Living with the unhealed trauma, Sethe feels hopeless for the future but Paul D “was adding something to her life—something she wanted to count on but was scared to” (*Beloved* 95). For Sethe, Paul D is the other whom she can trust and whose appearance gives her the courage “to launch her newer, stronger life” (*Beloved* 99). When Sethe is baking the biscuits before the cooking stove, Paul D embraces her from behind and “his hands under her breasts” (*Beloved* 17). Sethe weeps for feeling relieved because, eventually, there is someone who can share her burden represented by the weight of her breasts (*Beloved* 17-18). Before recognizing Beloved as her daughter, Sethe cherishes the days with Paul D and confesses to herself that “she wanted Paul D. No matter what he told and knew, she wanted him in her life. [. . .] Trust and rememory, yes, the way she believed it could be when he cradled her before the cooking stove” (*Beloved* 99). Denver, like her mother, yearns for the company of the other. After Denver’s two brothers leave the house and Baby Suggs dies, loneliness “wore her out” (*Beloved* 29) and Denver can only “appreciate the safety of ghost company” (*Beloved* 37). When Beloved appears in front of 124, Denver takes good care of her, feeling “relieved and easeful” (*Beloved* 55) because she believes that Beloved is her sister, the trustworthy family member who will accompany her and end the sufferings of her family. However, after seeing Beloved chastising Sethe, Denver realizes that Beloved is not the benevolent other whom she can rely on. To
save her mother, Denver has no choice but to “leave the yard [. . .] and go ask somebody for help” (*Beloved* 243). Lady Jones and other blacks respond heartily to Denver’s demand, donating food to sustain her family. The relationship re-established between Denver and the black community reconstructs the damaged self of Denver, making her a confident woman and offering her the force and courage to stop Sethe from her attempt on Mr. Bodwin’s life.

**V. The Role of the Other in Trauma Narrative**

On the relation between the subject and the other, Emmanuel Levinas stresses the importance of interlocution by indicating the “impossibility of approaching the other without speaking” (7). He considers the being of the other as an “interlocutor,” a “partner” to the subject within a relation of mutual understanding (6-7). As a result, the participation of the other in trauma healing inevitably involves trauma narrative between the traumatized subject and the other. Trauma narrative, as discussed in Chapter Two, is more like a form of monologue. The speaker cannot clearly express her/his experiences and feeling; nor can the listener fully understand what happens and how the traumatized subject suffers. However, Levinas’ discussion on the role of the other manifests that the other in trauma narrative should not act only as a listener who passively receives information. In trauma narrative, the other could be the interlocutor. With positive attitude, the other tries to convert the traumatized subject’s monologue into the dialogue by which the traumatized subject and the other can communicate with each other. Being an interlocutor, the other plays the role as a guide “in whose presence the survivor can speak of the unspeakable” (Herman 175). Following the other’s guidance, the traumatized subject gets rid of “the wordlessness
of the trauma, she discovers that there is a language for her experience” (Herman 158).

In *Beloved*, Paul D is the other/interlocutor who leads and encourages Sethe “to tell, to refine and tell again” (*Beloved* 99) her traumatic experiences. Paul D urges Sethe to share with him the burden of the past:

“leave it [Sethe’s trauma] to me. See how it goes. No promises, if you don’t want to make any. Just see how it goes. All right?”

“All right.”

“You willing to leave it to me?”

“Well—some of it.” (*Beloved* 46, explanation mine)

Even though Sethe inclines to be reserved in her trauma narrative, readers foresee the possibility of trauma recovery from their dialogue. This process of talking cure continues until Paul D and Sethe argue over the death of Beloved and Paul D moves out from 124.

Another role the other/interlocutor plays in trauma narrative is an ally, a comforter who accompanies the traumatized subject, offering a sense of security, and alleviating her/his pain when she/he is recounting the unbearable memories. In *Beloved*, Paul D considers himself as an ally. His job is to protect Sethe and to assure her that she is not alone in trauma narrative. Paul D says, “Sethe, if I’m here with you, with Denver, you can go anywhere you want. Jump, if you want to, ’cause I’ll catch you, girl. I’ll catch you ’fore you fall. Go as far inside as you need to, I’ll hold your ankles. Make sure you get back out” (*Beloved* 46). Although Paul D does not further explain his words, we can understand that the action—“to jump” and “to go inside”—in Paul D’s saying means “to explore and to recount the painful past.”

For Sethe, Paul D is her best companion who will wait for her and keep her safe if she
decides to “jump into” or “go inside” her repressed memories.

The last role the other/interlocutor can play in trauma narrative is the advisor. Imprisoned in traumatic memory, the traumatized subject narrows her/his interest to the irrecoverable past and lives with negative thinking. In trauma narrative, the other/interlocutor can proffer advice, instructing the traumatized subject to review what happened from different perspectives and to put a stop to self-pity. Acting on the other’s advice, the traumatized subject may realize that “she is not doomed to suffer this condition indefinitely; she can expect to recover” (Herman 158). In 

*Beloved*, Paul D proffers advice to Sethe, suggesting that there could be a new life for Sethe and her daughter. Paul D tells Sethe: “I got here and sat out there on the porch, waiting for you, well, I knew it wasn’t the place I was heading toward; it was you. We can make a life, girl. A life” (*Beloved* 46). For Sethe, to live a life with Paul D is tempting because he “represents the possibility of a future, of a story that can go on” (Morgenstern 111).

**VI. Trauma Narrative and Trauma Healing**

In her study of trauma and recovery, Herman regards trauma narrative as an indispensable stage of trauma healing.\(^8\) She notes that, although recounting the traumatic past is the last thing the traumatized subject wants to do, “[s]haring the traumatic experience with others is a precondition for the restitution of a sense of a meaningful world” (70). Herman and other psychotherapists’ interest in and emphasis on the significance of trauma narrative derives from Freud’s notion of

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\(^8\) According to Herman, trauma recovery “unfolds in three stages” (155). The fist stage is “the establishment of safety” (155). The second is telling the story of the trauma “in depth and in detail” (175) and the third stage is “reconnection with ordinary life” (155).
“talking cure.” During his treatment of the traumatized patient, Freud notices that the patient’s “hysterical symptom” disappears when the psychoanalyst “had succeeded in bringing clearly to light the memory of the event [. . .] and when the patient had described that event in the greatest possible detail and had put the affect into words” (Studies 6, Freud’s emphasis). Freud’s research on “talking cure” enables the psychotherapists to put their trust in trauma narrative whenever they are considering an effective approach to heal the trauma.

However, readers may question the function of trauma narrative in trauma healing, asking if trauma narrative is really a prerequisite for trauma recovery. To answer this question, we have to review the definition of trauma. Trauma, as discussed in Chapter Two, haunts and plagues the traumatized subject because traumatic memory, unlike narrative memory, cannot be pinned down and assimilated into one’s personal history. To heal the trauma, psychotherapists need to help the traumatized patient “to convert traumatic memory into narrative memory” (Leys 647-48), transforming the unspeakable trauma into the coherent, assimilated life story, and this task can be done “by getting the patient to recount his or her history” (Leys 648). Therefore, trauma narrative is a prerequisite for trauma recovery. Vickroy stresses the significance of “dialogical interrelation” in trauma healing, indicating that this kind of interrelations “can be vitally important to helping individuals emerge from traumatic stasis and repression if their experience is integrated into a narrative memory structure in a relationship with, for example, a therapist or a witness” (184). In trauma narrative, with the support of the other/interlocutor, the traumatized subject narrates in detail her/his unbearable memories. The narration/reconstruction of her/his past enables the traumatized subject to confront and master her/his traumatic
experiences, “the person can look back at what happened; he has given it a place in his life story, his autobiography, and thereby in the whole of his personality” (van der Kolk and van der Hart 448). The process of narrating and assimilating traumatic memory is also the process of empowerment, making the traumatized subject the author of her/his personal history and encouraging her/him to revive her/his life which has been stagnant from the moment of being traumatized.

In *Beloved*, Morrison “foregrounds the dialogic characteristics of memory” (Mobley 192, emphasis mine); she constructs “dialogical spaces for characters” (Vickroy 184) in order to unfold their trauma narrative and to open up the possibility of each character’s trauma recovery. The trauma narrative between Denver and Janey Wagon is the turning point of the plot in *Beloved*; it also brings the possibility of trauma recovery for the occupants in 124. Meeting each other in Mr. Bodwin’s house, Janey asks Denver what happens to her mother. Denver hesitates about telling the truth but she realizes that “[n]obody was going to help her unless she told it—told all of it” (*Beloved* 253). Denver discloses to Janey what happens in 124, saying “the girl in her house who plagued her mother as a cousin come to visit, who got sick too and bothered them both” (*Beloved* 254). Denver’s trauma narrative forces herself to confront the predicament of her family. It also reconnects the Sethe family with the black community, urging the black women to get together, standing in front of 124, singing songs and driving out Beloved/trauma from the house. At the end of the novel, after Beloved disappears, Paul D returns to 124 to continue his trauma narrative with Sethe. Paul D tells Sethe, “I need to talk to you” (*Beloved* 271), because “[h]e wants to put his story next to hers” (*Beloved* 273). Although Sethe lies on the bed and mourns for the leaving of Beloved, Paul D comforts her and
tells her “You your best thing, Sethe. You are” (*Beloved* 273). The open ending of the novel presents “no definitive sense of closure” (Peach 125); readers cannot assure themselves if Sethe recover from her trauma; however, the reopening trauma narrative between Sethe and Paul D brings hope to readers and implies that the ultimate recovery of Sethe is on the way.