

POST-TRAUMATIC STRESS DISORDER: A PSYCHOANALYTICAL STUDY OF MUNAWEERA'S 'WHAT LIES BETWEEN US'

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INTRODUCTION

This study examines post-traumatic stress disorder (PTSD) in the character Ganga novel "What Lies Between Us". PTSD is a mental disease that can lead to isolation, repression and other sensitive issues, specifically in children and teenagers (Kaminer 121). The research explores how PTSD disturbs Ganga's daily life. Emotional Processing Theory presented by Dr. Foa and M.J Kozak has been taken as theoretical framework. This study aims to make new approaches by understanding Ganga's experiences to cope with trauma and anxiety.

Psychoanalysis involves exploring a person's internal world to understand how it forms his emotions, behaviour and relationships (Sandbak 27). Embedded in Freudian ideas, it describes the influence of the unconscious mind on various parts of human life i.e. actions, feelings and relationships (27). Psychoanalysis has a deep link with literature as this has been widely applied in literature, which helps to expose those meanings which are hidden in texts (27). Psychoanalysis developed into an inclusive theory, with persons like Carl Jung and Anna Freud contributing to its growth (28). Literature has functioned as a fruitful ground for psychoanalytic exploration. In the modern world psychological complexities and challenges leads to an increased attention on understanding and addressing issues related to mental health of a person (28). Post-Traumatic Stress Disorder (PTSD) has gained much attention, exclusively within the domain of psychoanalytic theory because it offers valuable understandings of the psychological impacts of traumatic events.

Post-Traumatic Stress Disorder is a mental condition of a person which is prompted by either experiencing or witnessing a tragic or traumatic event (Javidi & Yadollahie 3). These events may include natural disaster, a terrorist act, a serious accident, rape or sexual abuse. Many people around us go through different traumatic event which have different effects on their health (3). The symptoms of PTSD may include re-experiencing, flashbacks, nightmares, hyper-arousal and severe anxiety (3). After encountering a traumatic event, a person recovers within some time but if the situation remains unstable for more than a month then it is considered the PTSD (Husna & Kuswoyo 4). The modern man has suffered with different kinds of Stress and tensions which have caused him to counter the psychological ailments that headed to a psychological disorder.

Symptoms of PTSD

Though PTSD is a mental disease but it effects both physical and mental aspects of man's personality. The symptoms of PTSD may develop in a patient immediately or within a month after the encountering or experiencing the traumatic event (Husna & Kuswoyo 5). In most cases, people recover from the traumatic memories but in some cases the symptoms become severe and hence result in PTSD (5). The symptoms of PTSD are generally divided into four groups;

a. Intrusive Memories (Recalling or re-experiencing the traumatic event as it is happening again).

- b. Avoidance (Avoiding those places, people and activities that were liable for the traumatic event).
- c. Negative Changes in thinking mood.
- d. Change in physical and emotional reactions.

Introduction to the Text

Ganga, a beautiful girl from Sri Lanka, lives with her parents, Amma and Thatha, in the hill town of Kandy. Despite the intense civil war, her childhood was filled with British children's books and swimming. Her father's death and physical abuse left lasting impacts on her, leading to PTSD symptoms and an attempt at suicide. Ganga's fear and terror led her to avoid sharing her experiences with others. These traumatic memories later turned in PTSD and she started developing symptoms of PTSD which caused her to attempt suicide.

The emphasis on the study of human mind was focused after World War II (Husna & Kuswoyo 6). Many neurologists and psychologists have been working to study the human psyche since then. In this regard, Dr. Edna Foa and M.J. Kozak presented Emotional Processing theory presents different features and types that highlights anxiety, fear and uncertainty. It shows that a person who is suffering with PTSD has fear, anxiety and hyper-arousal which is triggered by repeating traumatic memories, sleeplessness, nightmares and flashbacks (6). All of the factors mentioned above are joined together to arrange the present research entitled with the statement Post Traumatic Stress Disorder: A Psychoanalytical Study of Munaweera's 'What Lies between Us'

Objectives of the Study

The objectives of this research are;

- To analyse the complexities of Ganga's Mind activated by traumatic events and their impact on Ganga's life
- To identify Sri Lankan society's stereotypical and conventional customs about young girls which had long-lasting influence on Ganga

Significance of the Study

The proposed research article deals with the novel "What Lies between Us" under the theoretical framework of Emotional Processing Theory presented by Dr. Edna Foa and M.J.Kozak (1985 & 86) that is applied to Post Traumatic Stress Disorder. This research intends to reveal the psychological

condition of Ganga, narrator and the main character of the novel, after the incidents of her physical abuse and father's death. The present research aims to enhance new information and knowledge, in a novel dimension to learn the conception of anxiety, psychological depressions and fear which impose the victims and sufferers to act erratically.

Research Questions

The questions for this research are;

1. How has traumatic stress of Ganga's physical abuse created intricacies, complication and disorder in her life?
2. How have Sri Lankan society's prejudices about young girls sparked anxiety and fear in Ganga?

Review of Literature

An examination of the previous body of literature discusses 'What Lies Between Us' by Munaweera shows the themes of women griefs, miseries, marginalization and male dominance in the Sri Lankan society. The authors have comprehensively discussed the novel with respect to the themes discussed above. In this chapter, different sources have been combined to understand how this novel has been viewed by the scholars.

The study of history shows that almost all the times the descriptions of trauma were due to the war and its effects on the man's lives (Kucmin et.al 3). The mythological stories tell that the existence of PTSD was there since the birth of man when according to Bible and Quran, Adam was expelled from the heavens and then he faced trauma for quite a long time (3). Furthermore, when we look it with the lens of historian, we get the information that PTSD existed 4000 years ago and most of the times it was the result of any conflict or war (3). So, the wars have been a prominent factor in causing trauma among the masses since the ancient times.

The link between trauma and literature is not a new phenomenon rather it is quite old (Seth et.al 289). The study of ancient Indian literature shows that PTSD existed long ago. In the article Anxiety Disorder in ancient Indian Literatur the authors have studied the traces of PTSD in ancient Indian literature. In primeval Hindu mythology, Ravana who was the ten-headed and twenty-armed king of demons from Lanka (present Sri Lanka), ruled together with his cousin Marriach, a demon known for his enormous strength, power and aggressive tendencies (289). Marriach used to get pleasure by

producing trouble, particularly by upsetting the rituals of Hindu saints (289). He made it hobby to throw bones into their sacrificial fires (289). Nevertheless, his encounter with Rama who was actually a young prince from Ayodhya, changed his path (290). Overlooking Rama's warnings, Marriach continued with his troublesome behaviour until Rama, showing incredible ability despite his youth, overpowered Marriach and threw him into the sea (290). This traumatic experience left Marriach with permanent marks, establishing as symptoms of post-traumatic stress disorder (PTSD). These include anxiety, avoidance, re-experiencing, stress and hyper-arousal (290). Marriach abandoned his wicked ways to seek comfort and rehabilitation and to turn to meditation and self-care (291). The authors in this article have tried to explain the traces of PTSD from the very famous incident of fight between Marriach and Rama that exists in Hindu Mythology.

In the article "History of trauma and posttraumatic disorders in literature" the authors have discussed PTSD in literature. The ancient Greek literature also tells about trauma and its painful impacts on the lives of character (Kucmin et.al 4). The great Greek Poet Homer in his poem The Odyssey presents Odysseus as the one who suffers from the traumatic memories of battle field and to the guilt of surviving the Trojan War (4). Similarly, in Homer's The Iliad, he describes trauma reactions in the protagonist Achilles who was overwhelmed with sorrow when he got the news of Patroclus' death (4). The traumatic memories of the loss of his friend turned into PTSD later on.

When we talk about English literature, we see the signs and symptoms of trauma and PTSD in it (Kucmin et.al 7). This is evident particularly in the plays of William Shakespeare. In his play King Henry IV Hotspur, one of the characters, can be taken the example of PTSD after analysing the monologue of his wife (8). His behaviour was characterised by loneliness, loss of interests, arousal and disturbing memories of battle field which is very close to PTSD descriptions (8). Likewise, Mercutio in scene IV of act I of "Rome and Juliet" shows the behaviour of a soldier, who is preoccupied by repeated nightmares of past battles and conflicts (8). The symptoms of trauma and anxiety can also be seen in "Macbeth". Lady Macbeth suffers from intrusive recollections and flashbacks which compels her to attempt to eradicate bloodstains from her hands and then finally take her own life (8). All these symptoms were due

to the traumatic event turned in PTSD. Keeping in view the above discussion from ancient Indian literature to English literature, the link between trauma and literature has become evident and an important point to study.

In the article, 'The Portrayal of Post-Traumatic Stress Disorder as Seen in The Main Character in The Woman in The Window Novel' the authors investigate how A.J. Finn's novel 'The Woman in the Window' signifies post-traumatic stress disorder (PTSD) in Anna Fox, the main character. People who are suffering with PTSD suffer with sorrow, anxiety and depression (Husna & Kuswoyo 4). They experience the symptoms like Symptoms include irritability, avoidance, loss of interest, nightmares, and feeling alienated (4). If PTSD is left untreated, it influences physical, emotional, behavioural, mental and spiritual aspects of a man's life. They argued that brain anatomy and psychological vulnerabilities can lead to post-traumatic stress disorder (5). Emotional dysregulation and anxiety result from irregularities in certain regions of human brain that regulate fear and emotions in people with PTSD. The authors observed two main factors causing to Anna's post-traumatic stress disorder: one was brain structure and the second was psychological causes (6). Her brain struggles to control emotions which then led to emotional disturbances and fear after facing the trauma of losing her family. This event also resulted in Agoraphobia, restraining her to her home and triggering panic attacks. Anna's extreme mood swings further specify her struggle with PTSD, as she catches herself incapable of controlling her anger or show her sentiments effectively (7). Physically, she faced faintness, and difficulty in breathing, whereas emotionally, she experienced nervous and isolated. Mentally, Anna encountered with hallucinations of her deceased family members and struggled with insomnia which later forced her to use alcohol and sleeping pills to cope (9). The study of Anna showed that how painful PTSD effects people's lives if it is not cured in time.

Sheikh, M. (2019) has done comparative study among three novels i.e., 'lucky boy', 'black wing' and 'what lies between us' to see the similarities in them. The writer stated in his review that the central theme of the work is motherhood, the relationship between immigration and trauma, and that the absence of a father figure indicates a decline in patriarchy. Two sections are there in Lucky Boy named after Solimar and Kavya, two mothers, where

the former is a Mexican mother and later is the Indian. It was decided by Sekaran unconsciously in the end to give poetic justice to Solimar in a tragic way. Solimar abducted her child to Mexico and raise him up. In the Novel Black wings, a conflict between mother and daughter was established by the writer Sheba Sarwar. The quarrel was because of her twin brother who went to search Yasmeen in storm and her mother was with her ex-lover, confession was made by her mother, the daughter kept on asking that if she and her brother was inferior than her lover to her. Sarwar beautifully left this conflict unsolved, evoked to an Islamic reference that is everyone will be called by his mother's name, instead of father. Yasmeen's father was died of guilt and grief that showed decline in patriarchy. Munaweera's consent in 'What lies between us' is about a child who was abused and get effected by this tragic event. Abused by the most trusted person was so painful. Further, it was revealed that she was abused by her father. Patriarchal decline happened when her father died. This novel has been reviewed by different authors and magazines where they have talked about motherhood and the experiences of a mother but no significant study has been found on it. This research deals with the impact of traumatic memory on the character of the novel Ganga and also talks about how these memories turned in PTSD. By the help of Emotional Processing Theory, the novel "What lies between us" has been analysed.

Research Methodology

The nature of current research article is qualitative and descriptive. In analytical methodology psychoanalysis has been used to process the present research article. Emotional Processing Theory developed by Dr. Edna Foa and M.J. Kozak (1985 & 86) has been incorporated as the methodology for this research.

3.1 Emotional Processing Theory and PTSD

For more than two decades, EPT has paved the ways for us to understand and analyse the complex nature of the effect of trauma on a man's life (Foa and Kozak 20). Originally, EPT has its origin from Lang's therapy for fear reduction back in 1970 but Dr. Edna Foa and M.J. Kozak have modified it (21). EPT deals with two types of fears;

- i. Adaptive or Normal Fear Structure
- ii. Maladaptive or Pathological fear structure

In normal fear structure, a person gets frighten on a normal incident. For example, if a person wants to cross the road but suddenly there comes a high-speed truck and crosses the person. The person will automatically care about himself because of activation of normal fear structure (21). Normal fear structure does not stand for a long time rather the fear is vanished once the danger is over (21). On the other hand, this is not the same case in pathological fear structure. In this, a person is terrified and frightened for most of his life because of severity of the incident (22). The pathological fear structure is comprised of;

- a. Fear stimulus
- b. Response of Fear Stimulus
- c. Meaning of F.S

Fear Stimulus can be anything that frightens a person (22). For Example, a person who has cynophobia (fear of dogs), he may get scared instantly. The image of dog becomes fear stimulus for the sufferer. Now the second point is response of the fear stimulus, when the person will see the dog (which is fear stimulus for him), his body will automatically respond against it i.e., he may get panic, or may start shivering. Third point is the meaning of the stimulus e.g., the dog has sharp teeth and strong power of bite so he will bite me. Now, if the person adopts pathological fear structure about cynophobia, he will certainly be anxious and scare whenever he encounters a dog (22). Furthermore, the time frame of a normal fear structure is irrelevant, as it may terminate abruptly without causing any damage to the individual. But when we talk about maladaptive of pathological fear structure, the time frame in this type is undecided (22). It may last for months, sometimes for years and in some rare cases for the rest of life, depending upon the sternness of the incident and the response of the sufferer.

Emotional processing is defined by Foa and Kozak as the variation of the fear structure in which pathological associations are replaced with non-pathological associations (Foa and Kozak 22). The authors further clarified that there are two major conditions that are necessary for emotional processing to follow;

1. Fear Structure Activation
2. Amalgamation of the new statistics which is incompatible and discordant with the pathological elements of fear structure.

Activation is triggered when a person comes across a fear stimulus. This activation naturally includes both physiological and psychological responses that

prepare the individual to handle the potential danger (Foa & Kozak 26). It is now evident that the activation will be greater if there is a serious contest between the fear-arousing experience and the pathological fear structure (26). Emotional processing theory further shows that while activation is a crucial element, it alone is not sufficient for emotional processing (26). It involves the presence of information that encounters incorrect traits of the structure as well. There are many occasions where persons avoid or escape from situation leaving the fear structure unchanged (26). Emotional processing happens only when it is planned and amalgamated into present information (26). The lack of information by the patient will not add anything new in emotional processing and hence the correct diagnosis will not happen. Direct observation of fear structure and emotional processing is not possible (27). However, Foa and Kozak presented three variants of a successful EP (27).

I. Fear Structure's activation, specified by subjective and objective degree of fear

II. With-in session habituation

III. Between Session habituation

It is very common in our surroundings that a man faces or observes traumatic incidents off and then but if it is not treated then it may turn in PTSD (23). It is called as Universal Timeless Disorder (UTD) which means that traumatic or tragic incident, the painful memories attached to these incidents haunt a person at anytime, anywhere (23). PTSD is not time bounded that it will happen to a particular time or age. Rather, it can happen to anyone at any age or any place (Jitendar 226). Therefore, it is necessary to deal with traumatic memory at earliest to avoid any uncertainty and irregularity.

Data Analysis

Emotional Processing Theory supports to comprehend the psychological condition of Ganga, the narrator and the protagonist of the novel, with whom the traumatic and tragic incident of abuse was committed. The theory not only helps to discover the causes of the failure of defence mechanisms of the protagonist but also development of normal or Adaptive and Maladaptive or pathological fear structure in Ganga. The text of the novel also reveals the psychological and mental abnormalities in Ganga particularly with the help of EPT.

The story of the novel revolves around the life of Ganga from her childhood to her adulthood. Ganga

was never much comfortable with her parents because they both used to quarrel with each other off and then. That is why she spent her most of time away from them with Sita and Samson. Silence was the major thing that Ganga learnt since her childhood. She knew that she had to keep quiet in any situation, "by the age of seven I have learnt the lesson of silence perfectly" (Munaweera 16). The symptoms of denial and avoidance were developed in Ganga's personality since her childhood. She learnt to stay quiet and not to share her feelings with anyone. Ganga was encountering fear of losing her family and friends. Ganga and Samson both were very close to each other. Suddenly, Samson disappeared and, on his return, Ganga felt something strange in his behaviour, "I had missed Samson while he was gone. But now I see new quality quivering in his eyes, something frustrated and dark" (Munaweera 37). This is evident here that she was now facing adaptive fear structure in her psyche.

Society influences one's thoughts, beliefs and actions by shaping social structures and norms which emphasize the rules and traditions of a society to be followed by all (Hossain and Ali 135). The society in which Ganga lived had many controversial, conventional and stereotypical concepts about the young girls. Every summer Ganga received gifts from her aunt Malini from the USA and these gifts included shorts, sandals and other women stuff. Ganga was never allowed to wear any kind of her gifts outside the boundary of her home. Her mother had strictly prohibited it, "I won't have people saying vulgar things about you" (Munaweera 48). When Ganga experienced her first period, her mother locked her in a dark room alone for next seven days. She warned her not to come out of the room and in these days no man should see her, "no one can see you. If a man sees you, it will be a bad luck" (Munaweera 49). The horrifying behaviour and treatment of Ganga by her mother left her in deep shock. The fear and anxiety in her nature was constantly rising due to mishandling by her mother. The psychoanalytical study of Ganga's behaviour shows that she was terrified in those seven days because of her mother. Her mother was constantly putting pressure on her under the stereotypical norms of society that, "if you aren't properly looked after now, no man will take you for his wife. You will stay here with us until you are old and dried up" (Munaweera 51). Ganga acted upon her mother's order but she couldn't pursue it further and on fourth

day, she opened the window and somehow Samson saw her. Ganga became much frightened after Samson stared her because she knew that she had broken the rules and now she would be treated as a bad girl and hence no one would marry her. All of these thoughts were happening in the mind of Ganga but she did not dare to tell her feelings to her mother. Her mother threw a party after the seven days in which the neighbours were invited. The women were gossiping about the young lady who eloped with her lover and was caught red handed, "And by the time parents found out, they were in a hotel and the deed was done" (Munaweera 55). The women continued to say that the accused girl had left her parents in shame and guilt and now no one would respect them. Ganga was listening to them keenly and attentively and she had absorbed the message from the conversation that she had to remain silent otherwise she could be charged with shame and guilt for herself and her family as well. The psychological condition of Ganga became miserable as she had no one to share her inner sentiments. First her mother's incompetency and illiterate behaviour and then the stereotypical concepts of society had made her under extreme mental pressure. Normal fear structures were developed in Ganga since her childhood when she said that she had learnt to be silent since childhood. The psychoanalytical examination of Ganga describes that after her abuse and the death of her father, the pathological fear structure began to developed in her psyche.

The major symptoms of PTSD are nightmares, flashbacks, re-experiencing and avoidance or denial (Husna & Kuswoyo 5). The symptoms can get worse with the time if the disease is not cured in time (5). Ganga was obsessed with Samson i.e., whenever she listened his name, or saw her picture, the same incident of her abuse reflected in her memories and made her scare and frighten. Her mother noticed her changed behaviour and this incident had also caused troubles for her in her school. She was one of the brilliant students of the class but after this tragic incident she remained silent and all her attention on her studies were diverted, "My body is awake, wide stark awake and waiting for danger, but my head is clouded" (WLBU Page, 66). All the time in school and home, she thought only about this incident. Nightmares are one of the major symptoms of PTSD (Bisson et.al 2). The patient passes through the horrible dream which reminds him about the traumatic event happened to him (2). It is very

common to those who have encountered a tragic event. Ganga faced nightmares constantly after her abuse, "I can't sleep. Every time I close my eyes, I hear him creeping up the stairs, coming for me" (Munaweera 79). Ganga could not come out of this trauma and fear throughout her life. When she grew old, she married to a guy names Daniel in the USA but these nightmares did not leave her. She was constantly haunted and fearful to these bad dreams, "The nightmare come. Sharp objects. Skin tearing slowly. A child crying in a hidden place. Water crashing over my head" (Munaweera 159). This shows the severity of the mental condition of Ganga after facing childhood trauma.

Flashbacks are the second major symptom in PTSD disease (Bisson et.al 2). The patient's mind, for the time being, is shifted to his past memories of traumatic incidents which are always painful for him (2). On her wedding day, she was wearing white dress and then sudden she remembered the death of her father that she was supposed to wear the same colour dress on her father's funeral, "White was the colour I should have worn to my father's burning" (Munaweera 189). Daniel looked at her and pointed out at the scar on his face, "He thought it was a beauty spot but it was a scar from a childhood cruelty that had faded now into this slightest demarcation" (Munaweera 188). These moments took Ganga in her past where she was a scared child who had been abuse and there was no one with whom she could share her inner feelings.

Re-experiencing is the third major symptom in this disease i.e., a patient witness or re-experience the same scenario or the event with himself or with any other person in his environment (Bisson et.al 3). The patient feels uncomfortable, terrified and scared all the time in this period. On death of her cousin Darshi's father Ganga was scared to see the dead body of Darshi's father because she was re-experiencing the same traumatic incident of her father's demise, "I remember what is to lose a father to feel unmoored in a great rushing stream one had never realized before it rushed under one's feet" (Munaweera 126). Samson had become fear stimulus for Ganga now i.e., whenever she watched his image, her mind responded with fear and anxiety and she felt like the same incident would happen again, "he is alive, watching. I am filled with the certainty that, as was true in my childhood, there is nowhere to hide" (Munaweera 160). Ganga's fear structure at the start was normal one but due to the severity of the

traumatic instances it turned in pathological fear structure that led to the development of PTSD.

Another symptom of PTSD is avoidance or denial (Chen 1). A person does his best to avoid those situations which reminds him about the traumatic incident (1). The sufferer tries to deny the event that happened to him out of shame (1). Ganga was studying medicine in the USA. The culture in the USA was entirely different from the culture of Sri Lanka. The students could make gossips on any topic i.e., sex, parents' divorce, molestation & abuse, rape & murder (Munaweera 128). Ganga always tried to avoid these gatherings because she didn't want to be the part of this. She never wanted to share her feeling because of the fear of losing her dear ones and that is why she used to leave the conversation before her turn, "they are fishermen trying to hook me and heel in some deep-sea from my memory, up through my throat out of my body" (Munaweera 128). One day Darshi asked her about Samson, the name she was taking in her dreams. Ganga was shocked to hear this name from her and denied to recognize any person with this name (129). This shows that Ganga had not recovered from the past memories even when there is a change in her environment.

The psychoanalysis of Ganga's character shows that she was having all the major symptoms of PTSD. She faced nightmares throughout her life even when she was a mother as well. She named her daughter Bodhi and both Ganga and Daniel loved her so much. Ganga remained busy in her daily routine after the birth of Bodhi but still the nightmares did not come to an end. Furthermore, she also experienced flashbacks and re-experiencing the traumatic event of her abuse after the demise of Darshi's father. She remembered the death of her own father who drowned in a monsoon night and died. On her uncle's death, she became much frightened and terrified, "This is the kind of grief I do not want to remember, do not want to enter" (Munaweera 125). Ganga also avoided those situations and the people who made her to remember her past. She denied to share anything from her past due to fear of losing the loved ones and also due to shame, honour and guilt. Ganga's condition was deteriorating day by day and the symptoms of PTSD began to complex.

The complex symptoms of PTSD lead the disease to Complex Post-Traumatic Stress Disorder (Resick et.al 241). In complex PTSD, the patient experiences some additional but complex symptoms i.e., difficulty in controlling of the emotions, feeling

annoyed and distrustful etc (241). When she got to know that it was not Samson who tried to abuse her but her father, she became upset and worried. After this revelation she was thinking about her daughter all the time. She wanted her to be like her and stood firm against the wrong, "there are people in the world who can hurt her like they hurt me. But if she is as strong as Iron then she will survive the world of men as I did" (Munaweera 243). Ganga was now more attentive as she was taking extra care of her daughter. She thought about those times when Daniel hugged and kissed Bodhi, "I listen; I am attentive. They make me remember. All those times Daniel hugged Bodhi to him. All those times he went to comfort her and left me alone" (Munaweera 263). Ganga's mental health had become complicated particularly after the exposure of the truth.

From Childhood to adulthood Ganga remain quiet most of times. The major reasons were the harsh and rigid treatment of her mother towards her and the second was the stereotypical and orthodox thoughts of the society which resulted in Ganga's silent and increased troubles, complexities and problems in her life. Normal and pathological fear structures were developed in her and slowly she became the patient with PTSD. She remained in trauma throughout and when the symptoms began to complex, she could not handle it and made an unsuccessful suicide attempt with her daughter and in this attempt, she survived but her daughter died.

This research has dealt with the problems of the impact of traumatic events and the pressure of society to keep oneself under control. People do not talk about their abuse and painful experiences because they are always in the state of fear and trauma. In Ganga's case, she was abused by her father and she could never tell this to anyone because she knew that she would get no support at all, not from her mother, "And in turn, this is my inheritance: silence and shame. A silence around the body so complete that the idea of breaking it was worse than the specter of death. A shame so deep that it needed to be buried. And the soil this secret would be buried in, my flesh. I wonder what it would have meant if I could have spoken up in my childhood. What would it have meant if I knew would have been believed? This is not the justification. This is only my truth" (Munaweera 285). This is where the further research is required in the field of feminism particularly in feminism and body and feminism and culture. This research also gives a message that these crimes

should be eradicate sooner as soon and society as a whole should play their part. A lot of responsibility is due on society's shoulder in this regard. This article also addresses parents as well to make sure that no such attitude and behaviour can be shown by them to their children.

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