

## Framing Traumatic Life Experiences: Connie in Toni Morrison's *Paradise*

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### ABSTRACT:

Narratives of traumatized women form the structural foundation of *Paradise* – those who are violated not by the Whites, but by the men of an all-black town of a newly established paradisaal community. An idealized version of social order collapses in its aspiration to regulate and command human behaviour. The resultant experience of gendered trauma is exhaustively illustrated as Morrison cultivates the narrative in lingering traumatic memories. It will be demonstrated how Connie, who is perpetually traumatized by unusual experiences of life is re-traumatized from within, which eclipses the possibility of promoting love for life. She wants to redeem herself and other stigmatized women who are rescued by her. They are encouraged by Connie's compassion to tell their collective narratives, establish their communion with each other while compelling them to confront the *self*. This study highlights the complexity of distress and recovery, proposing formulation of valid and reliable support. Self-nurturing and compassionate imagery can foster reconciliation with the traumatized part of the self which can effectively diminish trauma-related feelings like stress and anxiety.

**Keywords:** life; memory; trauma; women;

### Introduction

*Paradise* contributes to new discourses of otherness by narrating the history of an all-black town, Ruby in rural Oklahoma and a Convent where five young women have taken refuge. By situating the novel in the late 1960s and early 1970s, Morrison examines the realities of racial integration and gender equality. Disappointed by Haven which has been the group's first settlement, they establish Ruby which successively failed miserably because racist and sexist ideologies cross

the borders of black settlements. Through the interwoven stories of numerous characters of the community, it is suggested that women are neither safe in the four walls of their houses, nor outside as the men of Ruby pitilessly attack the women of the Convent to push them out and/or kill them. Connie is one of the main characters whose life is traumatized by external realities. As she matures, she internalizes the trauma in search of penitence and peace of mind which is vividly portrayed by the writer through the style of writing. About her narrative features, Lister says that not only they decentered and non-hierarchical forms but they are

open narrative communities that challenge definitive renditions by privileging multiple voices and viewpoints; they elaborate stories through elliptical, discontinuous structures; they introduce narrative lines only to truncate them halfway through the telling, leaving the reader to wonder about the fate of particular characters; and they disrupt traditional, novelistic conventions of plot and characterization, making a subplot or an apparently minor character from one story the central focus of the next.<sup>1</sup>

### Theorizing Trauma

Trauma, according to Deborah Horvitz, has taken various forms: “over the past one hundred and twenty-five years, three unique forms of trauma have emerged into public consciousness: hysteria in the late Victorian era, combat neurosis following World War I, and violence against women and children in our era”<sup>2</sup>. Roger Luckhurst describes it as a “conceptual knot,”<sup>3</sup> a concept that ties together so many varied elements and disciplines of study, so any specific definition would be certainly reductive. Though it has a multidisciplinary history, trauma is often used to indicate an overwhelming experience which the consciousness fails to assimilate and which continues to haunt the survivor later through flashbacks, hallucinations and intrusive thoughts. The question of trauma is dialectical in nature as the experience of trauma itself. Whether trauma is produced by an external agent or it is an entirely psychic disorder is an enigma with no final answer. The traumatic experience is like giving voice to suffering while retaining the breakdown of experience. The traumatic experience resists closure. Just as the cure of trauma is considered to be a transitional process that offers gradual recovery but not a complete cure, in the same way, the theory also resists giving conclusive answers.

The writings of Cathy Caruth and Shoshana Felman have made a significant contribution to literature and trauma, especially where these two intersect <sup>4</sup> & <sup>5</sup>. They have focused on the paradoxes connected to trauma and lay emphasis on the difficulty, even impossibility of representation, as it is an inaccessible and incomprehensible phenomenon that defies understanding. According to Ruth Leys, the concept of trauma is “originally the term for a surgical wound, conceived on the model of a rupture of the skin or protective envelope of the body resulting in catastrophic global reaction in the entire organism”<sup>5</sup>. The meaning of the term *trauma* transformed in Freudian theory as it describes the wound of the mind rather than of body as a result of unexpected emotional shock. Sigmund Freud and Joseph Breuer propose in the *Studies on Hysteria* a new term “traumatic hysteria”<sup>6</sup>. In their jointly written essay “On the Psychological Mechanism of Hysterical Phenomena:

Preliminary Communication” published in the *Studies on Hysteria*, they describe “traumatic hysteria” as a memory disorder: “the causal relation between the determining psychical trauma and the hysterical phenomenon is not of a kind implying that the trauma merely acts like an *agent provocateur* in releasing the symptom, which thereafter leads an independent existence,” but “the psychical trauma—or more precisely the memory of the trauma—acts like a foreign body which long after its entry must continue to be regarded as an agent that is still at work”<sup>7</sup>. They clearly suggest that the event is internally stored within the individual which at a later time comes to the surface when the victim is confronted with a similar situation. Freud terms the interval between latency and the resurfacing of the event as “incubation”<sup>8</sup>. It is emphasized that “Hysterics suffer mainly from reminiscences”<sup>9</sup> but these symptoms vanish away as soon as the memory and its “*accompanying effect*” has been verbalized (1895, 6). In his late work *Moses and Monotheism*, written in the pre-war years, he revisits trauma, this time arguing that the compulsion to repeat after a period of “latency”<sup>10</sup> or “incubation”<sup>11</sup> also operates on cultural level. Later, he abandons the idea of premature sexual experience as the cause of hysteria.<sup>12</sup> One of the occurrences that might have brought him to the closing of this line of investigation is that the theory is unacceptable and beyond credibility for political reasons, and thus it came to an end<sup>13</sup>.

Traumatic experiences come to prominence for the second time with the onset of the First World War. Men having spent months on the war front, in close proximity to death, display the same symptoms as hysterical women show. The investigation into the nature of the symptoms resumes initially believing that the men, who have become mute and unresponsive, or lost their memory or capacity to feel, suffer from *shell-shock*: a concussion brought about by shells exploding in the battle field. A soldier’s personal trauma and consequential confusion between him being perpetrator or victim, led psychologists to change their belief that the hysterical symptoms are due to suppressed sexual desires and unfulfilled wishes. So Freud in *Beyond the Pleasure Principle* writes:

A condition has long been known and described which occurs after severe mechanical concussions, railway disasters and other accidents involving a risk to life; it has been given the name of ‘traumatic neurosis’. The terrible war which has just ended gave rise to a great number of illnesses of this kind, but it at least put an end to the temptation to attribute the cause of the disorder to organic lesions of the nervous system brought about by mechanical force.<sup>14</sup>

The case of traumatic neurosis is thus established as a mental not organic disorder. The idea of wish-fulfillment is not validated in case of traumatized war veterans who repeatedly put themselves into the horrible experience of fright by reliving painful incidents in their dreams, from which they do not derive any pleasure. Freud touches upon significant aspects of traumatic experience associated with intense fear, helplessness, failure to control the event as it occurs and its overwhelming power to influence itself repeatedly on human psyche through recurring traumatic dreams and intrusive memories.

This Freudian concept of trauma, and its history, is explored further by a psychiatrist, Judith Herman. In her influential text *Trauma and Recovery: The Aftermath of Violence—from Domestic Abuse to Political Terror*, she explains that “[p]sychological trauma is an affliction of the powerless. At the moment of trauma, the victim is rendered helpless by overwhelming force . . . . Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning”<sup>15</sup>. Caruth, a leading scholar in trauma theory and studies who is influenced by both Freud and Herman, wrote two seminal texts on trauma studies. These texts consider psychological aspects of trauma and translate them into a theoretical framework that can be used to explicate forms of art, specifically literature. In *Trauma: Explorations in Memory*, Caruth explains her point of view concerning the key question that trauma theorists are attempting to answer:

the pathology cannot be defined either by the event itself—which may or may not be catastrophic, and may not traumatize everyone equally—nor can it be defined in terms of a *distortion* of the event, achieving its haunting power as a result of distorting personal significances attached to it. The pathology consists, rather, solely in the *structure of its experience* or reception: the event is not assimilated or experienced fully at the time, but only belatedly, in its repeated *possession* of the one who experiences it. (emphasis in original)<sup>16</sup>

Thus, Caruth observes, trauma is only known at all “in and through its inherent forgetting”<sup>17</sup>. And it is through this forgetting that the victim suffers as the mind tries to understand the event that is never consciously experienced, the event paradoxically returns in the form of literal reenactments, nightmares, sleeplessness, irritability and emotional outbursts. Here, time and language seem to break down for the victim as the past refuses to remain in the *past*, eventually causing the victim to re-experience the pain repeatedly because the event is never fully grasped by the survivor. For the time being, the individual is thus dissociated from the event because the experience is so overwhelming that it cannot be registered cognitively by the mind instantaneously. The mind disassociates itself. This notion of dissociation in trauma is precisely described in the work of the psychotherapist, Bessel van der Kolk. He tries to explain trauma in a neurobiological way by investigating different brain mechanisms. The conclusion of his study is that the traumatic event is not stored in the mind in the same way as normal memory, but that it is preserved in the memory with timeless accuracy that accounts for the long-term and often delayed effects of PTSD. Van der Kolk argues that traumatic memory is not the same as narrative memory, which enables the individual to talk about past events in a chronological sequence but the traumatic memory is episodic, implicit, non-declarative memory, which resists verbal-semantic-linguistic representation<sup>18</sup>. Caruth also brings to notice that the definition of PTSD recognizes that an individual suffers not only by war experiences, but also by other traumatic experiences such as rape, child abuse, incest, and natural catastrophes (1995, 3). After this, the interest in trauma studies nurtured and critics such as Caruth and Dominick LaCapra received recognition.

LaCapra proposes a dialogic study in which history and theory would be “mutually provocative” so as to deal with twentieth century traumatic history<sup>19</sup>. He

demonstrates how basic Freudian concepts, such as denial, acting-out and working-through, can be used “to elucidate the relation between cultures that come into contact as well as between the present and the past”<sup>20</sup>. In psychoanalysis, denial refers to the patient’s refusal to acknowledge his past, what he did or how he feels. LaCapra spells out the term *Acting-out* used by Jean Laplanche and Jean-Bertrand Pontalis in *The Language of Psychoanalysis* originally defined by Freud as an “action in which the subject, in the grip of his unconscious wishes and fantasies, relives these in the present with a sensation of immediacy which is heightened by his refusal to recognize their source and their repetitive character” *Working-through* allows the subject to accept certain repressed elements and to free himself from the grip of the mechanism of repetition. According to LaCapra, working-through should be the work of a historian in the way it transcends repetition and allows for an interpretation. It is in the interpretation that a possible future opens up to break the vicious cycle of traumatic repetition. He further elucidates that how *narrative* can help the traumatized individual in the cure of his mental wound, as it helps

to evoke experience, typically through nonlinear movements that allow trauma to register in language and its hesitations, indirections, pauses, and silences. And, particularly by bearing witness and giving testimony, narrative may help performatively to create openings in existence that did not exist before.<sup>21</sup>

But when the victim narrates the event it sometimes so happens that the listener becomes so involved in the painful incident that there is a chance that he might lose his mental balance. The writer warns against over-identification and proposes to put oneself in the other’s position without becoming a surrogate victim; he calls this method of helping the victim as *empathic unsettlement*<sup>22</sup>

The victim has to testify the traumatic event to be able to recover from trauma, but does not have to access the core of that event. There has to be an empathic listener who hears the trauma of the survivor’s testimony. In *Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History*, Shoshana Felman and Dori Laub stress that the testimony is not a monologue,—there needs to be a bonding, the intimate and total presence of an *other*—in the position of one who hears so that the testimony can have a healing potential<sup>23</sup>. The construction of a narrative about the traumatic experience and integrating it into the normal framework thus giving it a fixed place in the chronology of one’s life is prerequisite for the healing of trauma victims. The victim bears a solitary burden that he is the only witness who can testify, since nobody else can accomplish the task of testifying about what the witness has experienced. This burden thus places the witness in solitude, but to actually testify, one has to paradoxically emerge out of this solitude and—speak *for* others and *to* others<sup>24</sup>. One has to establish a connection with the painful past so the community might picture the traumatic event.

### **Textual Analysis**

Connie is ruthlessly murdered by the stakeholders of Ruby right on the forehead ignoring the fact that after the death of Magna, she has adopted the

leadership role in the Convent as she has given protection to those women of the community who think that their blood relations have not given them proper care and space which they require to recover from their traumatic experiences. She consoles and cooks food for the broken women, but herself is so traumatized that she prefers to sleep in the darkness of a cellar. Every night, she wishes to die but every morning, instead of feeling rejuvenated on taking a fresh start of the day, she feels heart-breaking "disappointment [on] not having died the night before"<sup>25</sup>. She is disgusted by her passive existence. She tries to reduce this feeling by sipping alcohol. Every night she drowns herself in the valley of sleep, wishing for it to be last night of her life, hoping that the paw of death would descend on her and she will be crushed "like a garden pest"<sup>26</sup>. She often wonders why death is not approaching her. She struggles to understand the cause of the delay in a space as narrow and dark as a coffin. She craves oblivion.

In such a situation, girls of Ruby have come to the Convent to relieve their painful thoughts but unfortunately the tales that they want to relate are all alike. Their voices are different but their tales are about "disorder" "deception" and "drift"<sup>27</sup>. After taking shelter, they leave the Convent for some time but they have to come back sooner or later. When Connie looks at them she feels that they are "broken girls, frightened girls, weak and lying"<sup>28</sup>; who have no plans for the future but only wishes. Connie never gets angry on listening to their dreams but enjoys their purity of feelings which remain with her long after they leave the place. Sometimes, when Connie's depression overwhelms her, she wants to kill all of them. She cannot fill their lives with happiness so she wants to bring relief to their disturbed souls by killing them.

Kidnapped at the age of nine from a street of Brazil, she has to pass the rest of her life in serving Mary Magna. Magna, after cleaning her with baking soda and soap, dresses her and takes her to a ship with other American nuns. Though she has lifted the child from the street, the stubborn nun justifies her actions by saying that this life would be better as compared to the poverty stricken paths of the city from where she has picked her up. Magna liked her green eyes, tea-coloured hair and obedient nature. On the other hand, Connie loved the loving looks which radiated from Magna's eyes. Connie feels that getting injected and lying on a hospital bed is a worthy experience because in return for it, she is receiving the love of an adult, which she has never received before. Magna has casted a magical spell on the young child. She slept in the "pantry, scrubbed tile, fed chickens, prayed, peeled, gardened, canned and laundered"<sup>29</sup> in exchange for white bread and milk in glass bottles.

Her brief and intense romantic relationship with Deacon ended abruptly because that married man knows well that he is just playing with the feelings of a thirty-nine year old nun who lost her virginity at the age of nine in a street of Brazil. The excited girl used to wait maniacally for her lover but when the lover did not come on the day of appointment for which she has made rigorous preparations, she is transformed into a nervous woman who distracts her attention by biting nails in sheer madness. Maria Fraile-Marcos thinks:

As Connie gains strength with their relationship, Deacon is outraged and frightened by her seemingly uncontrollable powerful sexuality. These will continue to be pervasive images of the Convent women for some of the men and women of Ruby. Connie's behavior is in direct confrontation not only with the patriarchal logic that rules Ruby, but also with the Judeo-Christian construction of Mary, the impossible model of womanhood, as a passive, asexual icon whose virginal motherhood is a negation of women's sexuality.<sup>30</sup>

She endures loneliness and painful memories of her lost love. Mary Magna has taught her patience, "God's generosity, she said, is nowhere better seen than in the gift of patience"<sup>31</sup>. She passes ten years of her life in surrendering her flesh and soul to Christ and his mother. She feels ashamed and subdued herself but it is "[s]hame. Shame without blame"<sup>32</sup>, so "No beseeching prayer emerged"<sup>33</sup>. She feels extremely terrified when she thinks of God's wrath and to die "without His forgiveness"<sup>34</sup>. Ten years of spiritual devotion are rewarded. She is gifted with the ability to relieve pain of the sick. When the people of the community thank her, she never feels proud; instead she always says, "the gift [is] 'insight', something God made free to anyone who wanted to develop it . . . . The dimmer the visible world, the more dazzling her 'insight' became"<sup>35</sup>.

The last seventeen days of Magna's life have been very painful for her to bear. It appears as if her breath is coming and going. Her death is another fatal incident in the life of Connie which she has to bear, but providentially Mavis comes which distracts her attention from self-pitying thoughts of dying and death. Not anymore a child of four, it is by Magna's death bed that she realizes that she has "no identification, no insurance, no family, no work. Facing extinction, waiting to be evicted, wary of God, she felt like a curl of a paper—nothing written on it—lying in the corner of an empty closet"<sup>36</sup>.

Connie keeps herself busy in taking care of the broken women, helps them in working-through, as Page says that Connie helps the healing process of four Convent women by using the ingredient of

loud dreaming, through which Connie engages the women in sharing their life-stories. In loud dreaming, they not only unburden themselves of their traumatic pasts, but as each one talks, the others enter into her story, in full empathy with her, in intuitive fellowship akin to Lone's and Connie's reviving of the dead.<sup>37</sup>

Connie traces their bodies on the cellar floor in tangible forms so that they can re-inscribe their own stories. She cooks chickens, apples and creamy sauces of eggs, honey, pecans and butter. She wipes their tears and teaches them to relieve themselves of pain by thinking only of spirit and not of body, by relating them stories of paradise and motivates them to take bath in rain-water as it will act as a balm on their soring souls. She builds the image of a paradisaal space where women dance in an uncensored community, where they give expression to their "half-formed" and "never-dreamed" tales<sup>38</sup>. She deconstructs the binary opposition within the structure of Christian thought, the separation of spirit and flesh, by

stating: "Never break them in two. Never put one over the other. Eve is Mary's mother. Mary is the daughter of Eve"<sup>39</sup>. She trains them to redefine themselves with the past in mind. She thinks that she has taken them to such a safe zone where the Convent women will no longer be haunted or hunted. Her idea is wrong because later we see that they were hunted by the most respectable members of the community.

### Conclusion

Toni Morrison has drawn the character of Connie to show that how some people pass traumatic lives with patience and forbearance. She loses her virginity in a street and later, her lover betrays her as he disappears from the scene without giving her any intimation of his action. Being a nun, she feels guilty of her illegitimate relationship with the young man for the rest of her life. She does not know how to beg forgiveness from God. By avoiding love for life, remaining in the darkness most of the time, and serving the vulnerable members of the society, she establishes a strong relationship with God who bestows her with the gift of *insight*.

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