Going through Trauma in Sophie Andrews’ *Scarred*

**Mary Shaker**  
marygamal_84@yahoo.com

**Abstract**

This paper intends to show how literary narrative could be used as a tool to represent traumatic and post-traumatic experiences. This is done through applying the basic principles of trauma theory to Sophie Andrews *Scarred* (2008), a novel that shows how Sophie, a young adopted girl has been sexually abused by her adoptive father. The study aims at showing how literary narrative is used as a tool not only to highlight how the tormentor misuses his authority and domination over the victim, but also, how the victim could be negatively influenced by the traumatic experience he/she undergoes. To do this, the paper divides the heroine’s life to three phases: pre-traumatic setting, traumatic experience, and post-traumatic stress disorders. In the first section, the paper surveys the unjust atmosphere in which the heroine lives. In the second stage, the paper shows how this shaky realm discussed earlier leads to the antagonist’s malpractices. Eventually, in the last phase, the proposed paper shows how these malpractices and traumatic experiences cause the post-traumatic disorders from which the heroine complains. Thus, the paper shows how literary narrative could be used to represent both the traumatic experiences and the post-traumatic disorders clearly and vividly.

Keywords: Trauma, traumatic experience, post-traumatic stress disorder, trauma narrative, Scarred
Introduction

This research examines the impact of trauma and traumatic experiences on the children who suffer from traumatic events in their lives. “Trauma” is a word used to describe emotionally painful experiences or situations that overwhelm people's ability to cope, leaving them powerless. “Traumatic events are extraordinary, not because they occur rarely, but rather because they overwhelm the ordinary human adaptations to life” (1) said Judith Herman. Trauma has sometimes been defined in reference to circumstances that are outside the realm of normal human experience. Trauma has become increasingly significant in critical discourse since its appearance in the 1990s. Roger Luckhurst said that this was the period “when various lines of inquiry converged to make trauma a privileged critical category” (497). From that time, trauma theory has addressed public and private questions, and it combined resources from critical schools, like Freudian, psychoanalysis, feminism, new historicism and deconstruction (196).

This study applies this proposed hypothesis to the examined literary materials in Sophie Andrews’ *Scarred* (2008). The protagonist in this novel was subjected to a traumatic experience that resulted in PSTD that affected her life and her perception of the life around her. To put it in a logical sequence, this analysis is divided into three categories: the first is the pre-traumatic injustices to which this protagonist was subjected. The research focuses on how the atmosphere around this girl reclaimed the way for the injustices committed against her. Being a victim of traumatic abuse, this protagonist was surrounded by a fragile and chaotic atmosphere that paved the way for her abuser to torment her. This pre-traumatic setting is shown through the social, legislative, as well as the psychological realm in which she lived.

The second category which the research analyzes is the traumatic experiences this protagonist underwent. In this respect, the study shows both the cruelty of the victimizer as well as the naivety of the victim. Furthermore, the helplessness state in which the victims were doomed contributed, largely, to the spread of the abuse behavior. Thus, this segment of the analysis is highly important, since it sheds light on the causes as well as the factors that construct the traumatic action.

The third analytical phase which the chapter sheds light on is the consequences of the traumatic experience for these abused female protagonists. In this phase, a detailed representation of the physical as well as psychological consequences of this traumatic experience is given. Through analyzing the literary representation of these abused female protagonists, the paper highlights the negative impact of sexual abuse, as a sign of traumatic experiences, on the personality.
The study uses the structural analytical pattern in representing these phases mentioned above. In this respect, the research analyzes the novel on a parallel level; in each one of the stages outlined earlier, the study focuses on the literary representation of each abused female protagonist.

**Sophie Andrews**

Sophie Andrews is the author of *Scarred* (2008). In this book, she wrote about her life experience as a little girl sexually abused by her father and others for years; and how she triumphed over this painful experience and self-harm. Andrews lives now in the North West of England, and she works as an Assistant Director of a charitable association that helps vulnerable adults and young people. She is also a volunteer for Samaritans.

**Trauma Theory:**

The word “trauma” used to refer to an injury inflicted upon a body. An example of trauma that emerges most prominently in this context is the bitter experience of the soldier who faces death in the battle field. He goes through that terrifying experience silently as if he were desensitized by pain. Later on, he relives the pain in his repetitive nightmares (Caruth 11).

Roger Luckhurst, in his article “Mixing Memory and Desire: Psychoanalysis, Psychology, and Trauma Theory”, asserts that the meaning of the word “trauma” changed over time. In the early editions of the Oxford English Dictionary, it meant a physical wound, the sense of a psychical injury appeared for the first time in Popular Science Monthly in 1895. The new meaning, however, was reinforced during the latter half of the nineteenth century as a result of the appearance of the mental sciences and the Victorian modernity. The illness known as “railway spine” was the result of railway accidents. Though the victims can escape the accidents unhurt, they still suffer from painful symptoms, such as flashbacks, nightmares and hallucinations. Then, the reason cannot be attributed to a physical wound. Therefore, terms like “traumatic neurosis” and “nervous shock” were coined in the 1860s to refer to the psychical injury. During the 1870s and the 1880s, what the historian Ian Hacking calls diseases of memory started to be discussed in the medical arena. These diseases of memory include hysteria, multiple personality disorder and amnesia (Waugh 497-498)

The investigations into trauma began in the study of hysteria at the Paris hospital La Salpêtrière with French neurologist Jean Martin Charcot, Sigmund Freud
and Pierre Janet in the 1880s (Herman 10). Freud’s concept of Nachträglichkeit occurred with the appearance of seduction theory of the neuroses, which was his first theory of trauma. Freud developed these traumatic theories by treating cases of hysteria in mostly female patients. After the feminist movement in the 1960s and 1970s, it became clear that women suffer more than men and that women are traumatized in private life more than in war. In 1980, the contemporary trauma studies began to emerge.

The field of trauma studies in literary criticism began to appear clearly in 1996 with the publication of Cathy Caruth’s Unclaimed Experience: Trauma, Narrative, and History and Kali Tal’s Worlds of Hurt: Reading the Literature of Trauma. Caruth pioneered a psychoanalytic post structural approach which indicates that trauma is an unsolvable problem of the unconscious that clarifies the inherent conflicts of experience and language (Balaev 1). Caruth turned to Freud’s writing to prove the inseparability of the history and its theorization. Cathy Caruth, Geoffrey Hartman and Shoshana Felman adapted medical ideas on psychic traumatic processes to the analysis of narrative texts.

The Pre-traumatic Setting

One of the major factors that leads to the occurrence of a traumatic action is the pre-traumatic setting. Crucial to this argument is the function that criticism plays in order to merge the gaps between traumatic experiences and the factors as well as the causes that lead to it. In the introduction to her book Not Even Past: Race, Historical Trauma, and Subjectivity in Faulkner, Larsen, and Van Vechten Dorothy Stringer explains: “In the face of trauma, criticism says what is missing, explains what could have been present, and demonstrates how lack persists, over and over.” (9). Thus, the function of literary criticism is to merge the gaps and to trace the causes and factors that lead to the occurrence of traumatic actions. In this respect, the pre-traumatic setting, as it is explored in this chapter, is a vital factor that leads to a traumatic experience. Each one of the abused female protagonists has been exposed to an unjust pre-traumatic setting.

The pre-traumatic setting played a key role in the subjugation of the protagonist and the narrator, Sophie. Throughout her book Scarred, published in (2008), Sophie Andrews foregrounded the pre-traumatic injustices to which the protagonist has been subjected. As she describes herself on the book cover: “she was a slave to her father pain was her only escape”. In other words, her father, who should represent a source of protection and rehabilitation, was a key source of misery and suffering. It is a story of an adopted girl who has been sexually abused by her
adoptive father. Neither the less, she is highly devotee to her father, and she keeps a high glow of love to him. However, many pre-traumatic injustices have been recorded by the narrator, which contributed to being abused.

The first pre-traumatic injustice to which Sophie was subjected is being adopted. She relates: “I always knew I was adopted. They told me I was special because they had chosen me. Or to be accurate, Dad had chosen me and Mum had gone along with it. I was a few months old when he picked me out as the child he wanted” (51). As she tells her readers, her adoptive parents were a “very respectable middle-class couple”. Her adoptive father was an “accountant”, while her adoptive mother was “a secretary”. Their marriage lasted for merely ten years and “no children had come along”. After going through various medical and obstetrical tests, the resounding result was that her adoptive mother “would never be able to have a baby” (51). Therefore, the couple decided to adopt her.

This adoption has various negative consequences to come. The first of which is her adoptive mother’s negative feelings towards Sophie. Sophie complains: “Later, when I was older and Mum was angry with me, she used to shout, 'I never picked you anyway; I wish I could take you back.'” (52). Moreover, the absence of her adoptive mother from her life was clear to the naked eyes. Sophie declares that each time she looks back at the photo albums she finds plenty of photos for her and her adoptive father, “but it's hard to find one of me with Mum” (52). Therefore, this absence reclaimed the way for her adoptive father to consider her as his private property. She acknowledges that: “From the start Dad was the one who did everything with me” (52).

In reality, adoption became a vital issue that concerns social workers and government priority in the UK. In the introduction to her book Creative Therapies for Complex Trauma: Helping Children and Families in Foster Care, Kinship Care or Adoption, Anthea Hendry states: “Adoption is changing in the UK as more children come into Social Care. Children who are permanently removed from their birth families, after a period in foster care, may be moved to live with adoptive families.” (5)

As Hendry pinpoints, since May 2015 more endorsement is made available for adoptive families through the government's Adoption Support Fund. She states: “Because of the increased availability of social media and accessible training courses, parents, Special Guardians and carers are much more aware of the needs of their children and are better informed about research about the effect of trauma on the infant brain” (6). Therefore, Sophie’s narrative account regarding adoption goes
hand in hand with Hendry’s statistical and historical account. Sophie, who also lives in the UK, is adopted by a middle-class family, who leads her to a catastrophic downfall.

Crucial to Sophie’s narrative is the way her sense of attachment to this adoptive family. She states: “We lived in a comfortable three-bedroom semi in south London and I wanted for nothing. I was surrounded by toys, I had a lovely bedroom and a doting father who dropped everything the minute he got home to play with his little girl” (53). Thus, she acquired a sense of attachment to her adoptive father.

This attachment springs from her need for protection and security. In her book, *The secure base model: Promoting Attachment and Resilience in Foster Care and Adoption*, Mary Beek states:

> The starting point of John Bowlby's theory of attachment is an evolutionary one, in that babies are seen as having a biological drive to seek proximity to an adult, usually the primary caregiver or caregivers, in order to survive danger … The goal for the infant of this drive for closeness is to feel safe, secure and protected. This leads to a range of proximity-promoting attachment behaviours. (13)

According to Beek, attachment behaviours may attract the caregiver's attention in a positive way. This means that caregiver may respond to the child’s “cooing, smiling and reaching out” in a highly positive way. However, the kids may react to the caregiver’s responses in a form of protest by “crying and fretting”, which will also bring the caregiver closer in order to soothe the child and end the behaviour. (12). Beek continues her argument by stating that: “In the toddler years, attachment behaviours will include more direct actions, such as approaching, following, clinging and other behavioural strategies that can achieve proximity to the attachment figure” (13).

These strategies adopted by her adoptive father, the caregiver, and which are mentioned by Beek in the above quoted lines, have practical bases in Sophie’s narrative. Her adoptive father made use of these tools to smite the young girl’s heart. She states: “He'd take me home and for the rest of the evening he concentrated on me… Dad played with me and then put me to bed” (54). These aspects of showing care and rehabilitation have a very resounding impact on Sophie’s heart. She acknowledges, “I thought I’ve Dad as my best friend.” (54)

Her attachment to her adoptive father takes a verbal form. She confesses that he is her sole source of happiness; and he symbolizes security, true feelings and
friendship. She verbally states, “I didn't think there was anything odd about the amount of time Dad spent with me. I didn't know that it was any different for anyone else. I felt lucky to have a daddy who loved me so much.” (55)

What is so risky and crucial in this relationship and makes it the first pre-traumatic injustice to which Sophie was subjected is that Sophie has been trapped by the love of her victimizer. To explain this, Sophie has been ensnared by the over generosity and the apparent kind-heart of her adoptive father. Her father’s trap has been developed into a form of sexual eroticism referred to as “Electra complex”.

The term “Electra Complex” has been coined and developed by one of Sigmund Freud’s followers, Karl Jung, in which he maintained a psycho-analytic theory as opposed to Freud’s “Oedipus Complex”. In his view, “Electra complex” is deeper and extra effective as a psycho-theory than “Oedipus Complex”. He explains: “The conflict takes on a more masculine and therefore more typical form in a son, whereas a daughter develops a specific liking for the father, with a correspondingly jealous attitude towards the mother. We could call this the Electra complex” (Jung 348).

As Jung relates, “Electra took vengeance on her mother Clytemnestra for murdering her husband Agamemnon and thus robbing her—Electra—of her beloved father” (348). This odd attachment to the father has psychological justifications. At the time in which the acting mother disappears, leaving the baby daughter alone to face the risks of life; the father appears and acts as a double-function personal in the daughter’s life. Consequently, the daughter frees herself from the constraints of being loyal to her mother, whether adoptive or birth one, and throws herself in her father’s arms. This attachment is crucial on the outset: on one hand, it deprives the daughter from her natural linkage to her maternal figure. On the other one, it creates a risky alliance with her paternal figure, an alliance, which could lead her not only to reject her mother but also to attribute everything happening to her to her masculine heredity.

Applied to Sophie’s case, she has been highly attached to her adoptive father. By offering her emotional as well as materialistic attractive elements, he succeeded in trapping her. Regardless to the miseries and sufferings he caused her, she continues to love him. She confesses, “Despite what he did to me I loved him and was desperate to please him”. She was so keen not to lose him and not to be away from him, “I just wanted to make him love me, and to stop him leaving me. I was so petrified of losing him that I felt my life would end if he rejected me” (68). Thus,
The “Electra Complex”, that is going to be explained in later sections of this study, was the first Pre-traumatic injustice to which Sophie was subjected.

The second pre-traumatic injustice to which Sophie was subjected is the absence of her adoptive mother and the non-belonging she felt towards her adoptive family. She relates how the confrontation between her adoptive parents reflected the fatal mistake they committed by adopting her. She states:

They always started with a slanging match between my parents and ended up with lots of shouting and, in my mother's case, tears. Most of the shouting was directed towards me and I felt that they all thought everything was my fault. It was during one of these family sessions that my mother told me, as she had in the past, that she wished she had never adopted me and that she could take me back. (92)

This feeling of unattachment, that she feels towards her adoptive family in general and her adoptive mother in particular, has solid basis. One of these justifications is her mother’s assertion that she regrets adopting her. This assertion has formed a psychological barrier that cannot be crossed by either one of them. As Verrier pinpoints, “One very demanding aspect of adoption is the extent to which the adoptive mother has to handle the child's preverbal feelings of abandonment and rage” (67).

As a kid is born to a healthy family I.E. that consists of a father, a mother, and siblings, an overwhelming joy pervades the whole family. The baby is held, caressed, stroked, rocked, kissed and hugged from the moment of birth. Even during pregnancy, parents, and extended family members talk to the baby and caress the baby bump. This process of affection intensity enhances the child’s sense of attachment and belonging. It plays a central role in forming his psychological as well as mental awareness of the family bond that surrounds him. Arleta James, in her book The Science of Parenting, refers to the role the passion intensity of the parents plays in fostering the child cognitive, social, physical and psychological abilities. She states, “This loving connection, in turn, is the context for our social, emotional, cognitive, physical and brain development. Our attachment to nurturing parents causes all facets of our human development to grow.” (52)

However, in the adoption case, the child, sometimes, lacks that sense of affection intensity. On the contrary, the child does not feel attached to his/her adoptive mother/father. This shortage of affection intensity is, in the first place, attributed to the adoptive father/mother attitude towards his/her adopted kids.
Traditionally, all adoptive parents want to bond with their children and form a mutually strong attachment, and nearly all succeed in forming a happy and positive relationship. Yet some adoptive parents, especially newer ones, worry about bonding and attachment and whether they're doing things "right" to maximize the experience. This anxiety springs from the natural feeling that the birth parents may have a magical effect on the child. In his *Parenting an Adopted Child*, Andrew Adesman, states:

Some adoptive parents buy into the popular myth that biological parents have a magical secret connection to their children, one that usually enables them to know exactly what to do and when to do it. (Some biological parents may think they have such a mystical link, but there's no evidence of such a presence). (89)

Thus, as Adesman explains that adoptive parents may fail in forming a bond with their adopted kids. This failure causes a psychological barrier that neither the child nor the parent will be able to cross.

Applied to Sophie’s case, the absence of her adoptive mother formed her views regarding the concept of maternity. She states: “mothers are like that, in my experience. When the going gets tough, they're gone.” (150). The barrier between them gets higher and higher as Sophie acknowledges: “Though I was doing my best to be calm and civil, I was still very angry with her.” (260). Thus, her adoptive mother’s indifferent attitude towards Sophie was the second pre-traumatic injustice to which she was subjected.

The third pre-traumatic injustice to which Sophie was subjected was the disappearance and rejection of her birth mother. As a way of a psycho-therapy, Dr. Harvy, her psychiatric physician, suggests that she should meet her birth mother. On this specific occasion, she confronts Dawn, her attended nurse, with a resounding question: “What if she rejects me?”. To which Dawn answers in an attempt to relieve her: “If she does at least you'll have our support to get through it. And perhaps she won't reject you. She might want to get to know you”. However, Sophie, who has already suffered from the absence of her birth mother, responds: I laughed at what I considered Dawn's naiveté. 'Listen,' I said, 'she's already rejected me once before, remember? When I was a baby. If she could do it then, she can do it now. (Andrews 150)

Actually, Sophie, during the mischievous life she had led, tried to contact her birth mother: “I had first traced my birth mother just before I came into the hospital.
It had been my social worker, Jane, who suggested it and once I decided to go ahead it had only taken a day to find her, by looking through the records at Somerset House.” (150). Luckily enough, their first contact was a successful one: “(She) went on to say how much she had hoped I would get in touch”. However, Sophie confronted her birth mother with the wrong doing she caused for her: “I told her I was a complete mess and she said she was so sorry, and that she had thought she was doing the right thing by giving me up.” (150). Therefore, for the second time in her life, Sophie is wronged by her mother. Thus, the negligence of both her adoptive and birth mothers caused Sophie’s misconception of the concept of maternity and was the third pre-traumatic injustice to which she was subjected.

To conclude, the heroine represented in the selected literary text of this paper was subjected to pre-traumatic injustices. Sophie Andrews represented the pre-traumatic injustices to which her heroine was subjected. The first one of this injustice is being adopted. For her, adoption deprived that sense of attachment and belonging. A second injustice to which she was subjected is the feeling of unattachment to her adoptive mother. This constituted a barrier between them. The third pre-traumatic injustice is the absence of her birth mother which left her with such sense of unsafely and lacking protection, and misshaped her concept of maternity.

In the following section, the study shows how these pre-traumatic injustices, to which the heroine was subjected, reclaimed the way for her victimizers to abuse her emotionally, physically and sexually.

**Traumatic Experiences**

In the proceeding section of this paper the study showed how far the heroine, that is being examined, has been subjected to pre-traumatic injustices that will cause her miseries and sufferings afterwards. These pre-traumatic injustices are urgently needed by the victimizer as to reclaim his way to abuse his victims. Hence, once his way is reclaimed, this victimizer started to wage abusive attacks on the heroine. In this section of the research paper, the study shows how this heroine has been abused by a male figure.

Before going further in analyzing the way this abuser has tormented his victim, the study tries to answer an inevitable question; how did this shaky atmosphere in which this heroine lives, and the pre-traumatic injustices to which she has been subjected, cause the traumatic experiences she has witnessed?
The resounding answer for this question is the heroines’ failure to adapt to the life they led. As Alexander C. McFarlane in his article “the Black Whole” published in the book *Traumatic Stress; the Effect of Overwhelming Experience on Mind, Body and Society*, explains how the social and individual failure to cope with traumatic experience can lead to their downfall. He pinpoints:

Throughout history, some people have adapted to terrible life events with flexibility and creativity, while others have become fixated on the trauma and gone on to lead traumatized and traumatizing existences. … Many survivors seem to be able to transcend their trauma temporarily and harness their pain in acts of sublimated creation …. (4).

According to McFarlane, some people are unable to cope with the traumatic events around them as a result of their failure to adapt to these traumatic circumstances. She gives examples of some writers during the Nitzera who escaped from their miserable life simply by committing suicide. McFarlane’s understanding is half of the story. Adaptation is not the sole solution for coping with the traumatic experiences a person passes with. However, adaptation is a simple way of treatment and curing the post-traumatic experiences that a person undergoes. Alternatively, the first step towards coping with the traumatic experiences is recognition and realization. In an article entitled “In Focus: Recognizing Trauma As a Means of Engaging Patients”, that was published on The Commonwealth Fund Centennial, Martha Hostetter and Sarah Klein confirm the care providers need for the importance of recognizing trauma as a best way for coping with the depression that a person feels. They state:

Given the prevalence of traumatic exposure in the U.S. population, advocates advise health care providers to assume that any one of their patients may have experienced trauma, an approach known as universal precaution. And most (but not all) advocates also encourage primary care providers to screen for trauma, using formal tools that ask patients whether they’ve experienced traumatic events without requiring them to elaborate. (Hostetter and Klein)

This understanding calls for the need for recognizing the traumatic experiences a person undergoes. According to the advocates of this hypothesis, health care providers must encourage their patients to, first, recognize the horrible experiences by which they pass, and, then, seek ways and methodologies to either cope with or treat these horrible traumatic experiences. Applied to the text being analyzed, the examined heroine in this study has recognized the traumatic events by
which they passed. Analytically, this traumatic experience could be divided into: psychological, physical and sexual abuse.

As For Sophie Andrews’ *Scarred*, the traumatic practices took various forms. Sophie, the young girl who has been pre-traumatically wronged by all of her birth mother, her adaptive one and her adaptive father, has also been psychologically and sexually abused. These three forms of abuse represent the traumatic practices to which she was subjected. Prior to any further indulgence in the detailed analysis for the novel, it is worth mentioning the linkage between the pre-traumatic injustices to which Sophie was subjected and the traumatic experience she witnessed. Being doomed to live with a reckless adaptive father, a careless adaptive mother, and a harsh-heart birth mother, the way has been reclaimed for her abusers to impose their hegemonic and abusive practices.

Psychologically, Sophie has been traumatically abused by being sent to a “nuthouse”. For her, residing in this place, which is specialized in treating children with psychological disorders, is more than a death verdict. To avoid being sent to this “nuthouse”, she kept telling her acquaintances that she feels better and moving well:

“I kept on telling my friends that I was well, but they wouldn't listen. I kept on telling my social worker that I was fine now, but she wouldn't listen either. I told my family that I was feeling great, but they ignored me too” (1). She felt that the whole world has turned against her. Therefore, she wished if she could die, for Sophie, being sent to a nuthouse is more than a death penalty imposed upon her. Actually, what complicates her situation, and makes her dilemma more problematic is that being doomed to live in a nuthouse will dissociate her from her surroundings. As Niki Gomez-Perales, in her book *Attachment-Focused Trauma Treatment for Children and Adolescents*, pinpoints that the feeling of isolation furthers the child traumatic situation. She states: “Complex trauma disorders include but are not limited to the dissociative disorders. They also include those referred to as developmental trauma disorders, attachment disorders and some forms of post-traumatic stress disorder (PTSD).” (4)

For Gomez, attachment disorders are another form of traumatic disorders. In both cases, the child lacks that sense of protection and rehabilitation that he/she could find amidst the guardianship and the custody of his/her loved ones. For this reason, Sophie cries: “The thing was, I wasn't a nut. Just a scared, lonely sixteen-year-old. But no one would listen to me” (1).
Sophie’s feeling of inability and fear took an articulated form. She relates: By this time tears were streaming down my face. “Please don't leave me, Mum,” I pleaded. “I'm better now. I don't need this, I really don’t” (2). However, the adaptive mother rejects her appeal: “You know this is the only answer, Sophie. There's no one who can help you now, except the doctors here.” (2). This had a negative impact upon Sophie: “I wanted to scream and tell her she was wrong and that this was a huge mistake. I just wanted to go home. But I stayed silent. Mum never listened to me anyway.” (2)

The mother’s negligence for Sophie’s appeal is a practical form of the psychological traumatic practices Sophie has felt. On being sent to a nuthouse, the child cries and asks for a form of attachment and union with her family. Unfortunately, her adaptive mother’s rejection marked another psychological pain for the child. She states: “My face felt swollen with tears. I felt so alone and scared. I longed for someone - anyone - to hold me and tell me that everything would be OK.” (2). Thus, Sophie, verbally, states that she needs an attachment and rehabilitation more than being sent to a nuthouse. This is a practical application for Gomez’s abstract ideas mentioned above. Therefore, it is safely concluded that sending Sophie to a nuthouse is a form of psychological trauma to which she was subjected.

Another traumatic form to which Sophie was subjected is being sexually abused by her adaptive father. As being mentioned in a proceeding section of this paper, Sophie’s adaptive mother left her completely to be rehabilitated by her adaptive father. This rehabilitation gave him a wider opportunity to, sexually, harass her. She states:

he pulled me towards him, pushed up my nightie, got on top of me and had full, penetrative sex.

I was scared and in terrible pain. It hurt so much that I thought I was going to die. I knew what was happening - I had learned about sex - but I didn't understand why my dad was doing it to me. (44)

This sexual assault caused her physical, as well as, psychological pains. First, Sophie conceded on doing this just to please her adaptive father:

I knew, deep down, that what he had done was wrong. But I so wanted to make him happy, and there was a part of me that felt special, too, because he told me that whatever happened we had each other, and that I was his special girl. So I shut away all the scared feelings and the pain and kept
telling myself, this is Dad, so it must be OK, he loves me, he wouldn't do anything wrong. (44)

However, with the passage of time, Sophie’s feelings towards her adaptive father’s sexual assaults have changed. She stopped considering it as an amusement for her father; nevertheless, she started to a self rebuke for what went on:

I was in a terrible state. Dad and Dave's assault on me in the night had been bloody and brutal and now the pain I felt inside was too overwhelming to ignore any more. I hated myself and I felt a powerful urge to punish myself. I deserved the worst I could do. (102)

Thus, the mature girl now realized that her adaptive father’s odd deeds could result in a physical, as well as, psychological damage for her. Therefore, she started to blame herself and reconsider her relationship towards him. To sum up, Sophie has been subjected to psychological, as well as, sexual traumatic experiences. Sending her to a nuthouse caused her a psychological pain, and, sexually assaulting her caused her psychological, as well as, physical pain. These traumatic events had a severe impact upon her personality, the matter that would be thoroughly discussed in a subsequent part of this research.

Post-Traumatic Practices

In the proceeding sections of this paper, the journey which the heroine undertakes from undergoing pre-traumatic injustices, that had reclaimed the way for her victimizer to torment her, through the cruel traumatic practices which they underwent, has been explored. As seen earlier, the heroine has been unjustly inserted in social as well as individual circumstances that made it so easy for her victimizer to commit such horrible crimes. However, in the upcoming section, the study examines the impact of these traumatic practices on the psychological, physical, as well as the social status of this heroine.

Generally, post traumatic stress disorder (PTSD) is a type of psychiatric abnormality that might occur as a result of the case or the person being subjected to psychological, physical as well as sexual abuse. According to the American Psychiatric Association, PTSD is defined as:

a psychiatric disorder that may occur in people who have experienced or witnessed a traumatic event such as a natural disaster, a serious accident, a terrorist act, war/combat, or rape or who have been threatened with death,
sexual violence or serious injury (Diagnostic and Statistical Manual of Mental Disorders 5).

Another conceptualization for the PTSD is offered by The National Institute of Mental Health (NIMH), in which it defines PTSD as: “Post-traumatic stress disorder (PTSD) is a disorder that develops in some people who have experienced a shocking, scary, or dangerous event.” (Post-Traumatic Stress Disorder) Historically, PTSD was generally recognized under many titles and names in the past. For example, it was referred to as “shell shock” during the years of World War I and “combat fatigue” after World War II. However, PTSD does not just happen to combat veterans or those who experienced war atrocities only. PTSD can occur in all people, of any ethnicity, nationality or culture, and at any age. (Patra and Sarkar 10)

Clinically, PTSD has been associated with many signs and symptoms. Some of these outcomes and consequences are psychological and others are physical ones. In an article entitled “Evidence for PTSD as a Systemic Disorder“, that was published in Comprehensive Guide to Post-Traumatic Stress Disorder, A. Bukhbinder and P.E. Schulz state: “PTSD is associated with behavioral changes, including tobacco consumption, illicit drug use, and alcohol abuse, that can have additional deleterious effects on brain and body function” (Bukhbinder 34). The outcomes of PTSD are clear for the naked eyes. Bukhbinder’s study suggests that PTSD effects fall into two categories: primary and secondary ones. This study has begun to explicate the specific neuroanatomical changes associated with PTSD that underlie certain neuropsychiatry symptoms and findings. As for the primary category, it is best manifested in the neuroanatomical effects that are represented in the psychiatric disorders that may appear as a result of PTSD. This first-hand outcome leads to the second category. This secondary category is represented in the physical damage a person/individual might encounter as a result of the psychological loss which he/she feels as a result of the psychiatric damage mentioned above. In other words, a person undergoes sexual, physical or psychological abuse. This abuse leads, significantly, to a certain psychological disorder, which is generally referred to as PTSD. This psychological deterioration leads, ultimately, to some sort of physical damage this person might commit against himself or his surroundings. Thus, both the primary outcome (psychological loss) and the secondary one (physical damage) are clear effects of PTSD.

In Scarred, the heroine was subjected to PTSD as a result of the traumatic practices imposed upon them. The psychological loss, which is the primary effect of the traumatic experiences they underwent, has led them to a physical damage that is
clearly seen. In the upcoming pages, the study explores the relationship between the psychological loss this heroine felt after being traumatized, and the physical damage she was subjected to either submissively or optionally.

Sophie Andrews’ protagonist, Sophie, has gone through PTSD consequences. The first one of these horrible consequences is being admitted to The Nuthouse, a place for treating people with mental disorders. She narrates:

I kept on telling my friends that I was well, but they wouldn't listen. I kept on telling my social worker that I was fine now, but she wouldn't listen either. I told my family that I was feeling great, but they ignored me too. I felt the world had turned against me and I wished I was dead. Even dying had to be better than being sent to a nuthouse. And that's where they were sending me. (1)

Being admitted to the nuthouse represents a nervous shock for Sophie. She states to be isolated from the whole surroundings symbolizes a penalty that she does not deserve at all. This shock might, badly, affect her mental as well as physiological abilities afterwards. Commenting on the negative role a nervous shock plays in destructing the patient’s mental as well as his/her physical abilities, Allan Young in his *The Harmony of Illusions: Inventing Post-Traumatic Stress Disorder*, understands that nervous shock may result in severe consequences such as:

[The effects of shock] consist in a disturbance of the functions of the circulatory, respiratory, and nervous systems, the harmony of action of the great organs being disarranged. On the receipt of a severe injury the sufferer becomes cold, faint, and trembling; the pulse is small and fluttering; there is a great mental depression and disquietude; the disturbed state of mind revealing itself in the countenance, and in the incoherence of speech and thought; the surface becomes covered by a cold sweat; there is nausea, perhaps vomiting, and relaxation of the sphincters. (14)

For Young, in extreme cases, the depression of power characterizing shock may be so great as to terminate in death. Therefore, sending Sophie to a Nuthouse, as a direct consequence for being raped by her adoptive father, characterizes a great shock that has turned all her life up-side-down.

Another physical sign of Sophie’s PTSD is suffering from MS (Multiple Sclerosis) at the age of thirty as a result of her experience. One day while she was driving to her work, her vision wasn’t clear. Few weeks later she began to feel burning sensation in her legs and hands. She had a full body MRI scan, lumbar
puncture and brain, ear and eye tests to discover that she has MS. “Multiple sclerosis (MS) is a chronic disease affecting the central nervous system (the brain and spinal cord). MS occurs when the immune system attacks nerve fibers and myelin sheathing in the brain and spinal cord. This attack causes inflammation, which destroys nerve cell processes and myelin – altering electrical messages in the brain.” (Hopkins 1). When she asked her doctor about the reason for her disease, she was shocked by the answer as he clarifies:

‘Million-dollar question, Sophie. Depends which medical book you read. Some research suggests relates to viral infections as a child and other schools of thought relate to shock or trauma in childhood. It’s not easy to work out, but luckily the headway in treatment has moved on much quicker than the headway in finding a cause.’

The word ‘shock or trauma in childhood’ rang in my ears over and over again. My dad had done this.
Outside the room Jenny jumped up. I was in a daze.
‘What is it, Sophie?’ she asked. ‘Did he say what it was?’
‘Yes.’ I answered. As I turned round to face her my eyes filled with tears. ‘ He said it’s my dad.’ (294-295)

Moreover, Sophie suffers from having scars or marks that are caused by cutting her outer skin by a razor blade. She narrates: “The reality was very different, though. I did get in the bath, hilt I didn't die. I cut myself, over and over again, trying to punish myself and blot out the pain and hurt. (29). For Sophie, this action of injuring herself using a razor blade is an act of self punishment. The real motive behind committing such deed is to have a sort of self purification. In other words, Sophie feels purified by punishing herself for letting her adoptive father get a grip on her. She acknowledges: “The feelings welled up inside me - pain, anger, fear, hurt. I felt the pressure build up inside my head as if it was going to explode. I had to do something to relieve it. But my blades had gone” (30). The disappearance of the blades signifies despair for Sophie. Through this blade she can get rid of the pangs of conscience for being raped by her adoptive father.

According to Jan Sutton, in his *Healing the Hurt Within: Understand Self-injury and Self-harm, and heal the Emotional Wounds*, he defines self-harm as:

Self-injury is an expression of acute psychological distress. It is an act done to oneself, by oneself, with the intention of helping oneself rather than
killing oneself. Paradoxically, damage is done to the body in an attempt to preserve the integrity of the mind. (3)

To conjure all such negative feelings, Sophie expressed her concept of self purification through a poem she wrote in a therapy class. The poem says:

The blade will tear my flesh apart,
The blood will flow away.
The wound is deep — I feel no pain,
My heart fills with dismay.
And later, when the blood runs dry,
The scars I'll need to see,
They'll stay as a reminder,
Of the badness within me.
And as I rip the flesh apart,
My thoughts spin round and round.
Still, my badness lies within,
My heart begins to pound.
I see my blood trickling down —
Trickling down my arm,
Before, I felt so hurt and sad,
Now, I'm scared yet calm.
But then, I start to feel so hurt,
Though there's still no physical pain,
The hurt is still inside my head,
So I cut my arm again. (154)

These scars, which meant to be a self purifying punishment, represent a release for her. Through them, she releases all her negative feelings. One of her fellow mates confesses: “It's such a release, isn't it? When you see that blood and you feel the pain?” (155). However, at a certain point in the narrative, Sophie decides to give up this self harm and self punishment. She acknowledges:

I had hoped I would never feel like self-harming again. But in reality, rather like an alcoholic who doesn't stop craving a drink, I finally had to accept that I would always feel like harming myself when I was at my lowest point. Accepting that, and embracing it, was the key that would allow me to channel in a different way the feelings that went with the urge to self-harm,” (298).
Another PTSD consequence of getting raped and subjected to traumatic practices by her adoptive father is her inability to determine her sexual needs. For some time, Sophie is unable to reject any male proposal to have an affair with her. She narrates how she has subjected, willingly, to a subway passenger’s offer. She states:

I lay on the bed, motionless, while he had sex with me. I wasn't even thinking about what was going on. I had long ago learned to shut down my body and mind completely. (59)

Even when she shared a room with a male roommate, she agrees to have sex with him, the matter which reflects her inability to determine her needs. Moreover, she, for some time in her life, has turned to be a lesbian. She describes her girlfriend as:

I was convinced this was someone who really understood me and soon became heavily involved with her.

I worked as normal during the week, but every weekend I went to see her in Southampton where she lived, and got into a spiral of self-destruction which we encouraged one another in. (272)

Thus, all these PTSD consequences took place as a result of the traumatic experience by which she passed. The nervous shock on being sent to a Nuthouse, suffering from MS, the scars and bruises on her arms, the inability to determine her sexual needs, and being a lesbian for some time, all these are regarded as signs and symptoms for PTSD that is undergone by Sophie as a result of getting raped by her adoptive father.

**Conclusion:**

Thus, the impact of traumatic experience can change who you are, or how you view and react to people and certain situations. An abuser cannot inflict abuse on someone and expect them to forget it and be all right afterwards. Abuse can affect people for a very long time after it has occurred. It may affect people: physically, psychologically, emotionally, etc. This was shown through the relationship between Sophie, the protagonist, and her adopted father.
Sophie passes with many traumatic events. Psychologically, Sophie has been traumatically abused by being sent to a “nuthouse”. For her, residing in this place, which is specialized in treating children with psychological disorders, is more than a death verdict. To avoid being sent to this “nuthouse”, she keeps telling her acquaintances that she feels better and moving well. Another traumatic form to which Sophie was subjected is being sexually abused by her adaptive father. This sexual assault causes her physical, as well as, psychological pains. Thus, Sophie is subjected to psychological, as well as, sexual traumatic experiences. Sending her to a nuthouse causes her a psychological pain, and, sexually assaulting her causes her psychological, as well as, physical pain. These traumatic events have a severe impact upon her personality.

These consequences are seen on many levels. The first one is the psychological loss she feels on being sent to the Nuthouse. Another physical sign for Sophie’s PTSD is having scars or marks that are caused by cutting her outer skin by a razorblade. These scars, which meant to be a self purifying punishment, represent a release for her. Through them, she releases all her negative feelings. Another PTSD consequence of getting raped and subjected to traumatic practices by her adoptive father is her inability to determine her sexual needs. For some time, Sophie is unable to reject any male proposal to have an affair with her. Moreover, she, for some time in her life, has turned to be a lesbian. Thus, all these PTSD consequences take place as a result of the traumatic experience by which she passes. The nervous shock on being sent to a Nuthouse, the scars and bruises on her arms, the inability to determine her sexual needs, and being a lesbian for a while time, all these are regarded as signs and symptoms for PTSD that is undergone by Sophie as a result of getting raped by her adoptive father.
Works Cited

Primary Sources:

Secondary Sources:
Beek, Mary. *The secure base model: Promoting Attachment and resilience in Foster Care and Adoption*. Britain: British Association for Adoption and Fostering (BAAF), 2014.

Gomez-Perales, Niki. “Complex Trauma and Dissociation”. Attachment-Focused Trauma Treatment for Children and Adolescents. NEW YORK: Routledge, 2015.


