

Overcoming Trauma: An Analysis of *The Silence of the Lambs*

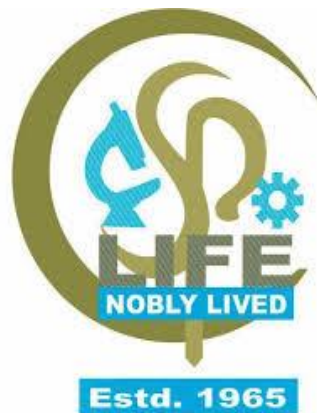
And Thank You for Your Service.

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Declaration

I do hereby declare that the project “**Overcoming Trauma: An Analysis of *The Silence of the Lambs and Thank You for Your Service***” is the record of genuine research work done by me under the guidance of Ms. Mary Sooria, Assistant Professor, Department of English, St. Paul’s College, Kalamassery.

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Certificate

This is to certify the project work “**Overcoming Trauma: An Analysis of *The Silence of the Lambs* and *Thank You for Your Service***” is a record of the original work carried out by Haritha Mohanan under the supervision of Ms. Mary Sooria, Assistant Professor, Department of English, St. Paul’s College Kalamassery.

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Introduction

“There are wounds that never show on the body that are deeper and more hurtful than anything that bleeds.” (Hamilton 151).

Like Hamilton says there are some wounds that never show in the body, but will hurt very badly. At times in life people would come across some pain or incident which would be deeply engraved in their minds till death. The present project deals with that kind of pain, in other words trauma. Trauma is a mode of mental situation that happens to someone who has undergone a horrible incident.

Trauma is the experience of severe psychological distress following any terrible or life-threatening event. Sufferers may develop emotional disturbances such as extreme anxiety, anger, sadness, survivor’s guilt, or PTSD. They also experience ongoing problems with sleep or physical pain, encounter turbulence in their personal and professional relationships, and feel a diminished sense of self-worth due to the overwhelming amount of stress. Traumatic experiences often arouse strong, disturbing feelings that may or may not abate on their own. In the immediate aftermath of a traumatic event, it is common to experience shock or denial. A person may undergo a range of emotional reactions, such as fear, anger, guilt, and shame. Feelings of helplessness and vulnerability are also common. Some may experience flashbacks and other signs of PTSD. Traumatic memories fade naturally with time. Persistence of symptoms is a signal that professional help is needed.

There have been a lot of books about trauma. It has slowly emerged as one of the most important area not only in psychology but also in literature. The field of trauma studies in literary criticism gained significant attention in 1996 with the publication of Cathy Caruth’s *Unclaimed Experience: Trauma, Narrative, and History* and Kali Tal’s *Worlds of Hurt: Reading the Literatures of Trauma*. Many studies that focus on trauma in literature focus a great deal on

repetitions that exist within the literary work because repetition is a common response to trauma and easily identifiable in text. Many survivors of trauma repeat aspects or the entirety of the event that was traumatic in their life in their mind and, sometimes, in their literature. Literary trauma theorists make note of these elements of repetition in a literary work and discuss the correlation therein.

Jean Martin Charcot investigated about the relationship between trauma and mental illness in women, later Sigmund Freud was initially influenced by Charcot and adopted some of his ideas. During the late 19th century, a major focus of Charcot's study was hysteria, a disorder commonly diagnosed in women. Hysterical symptoms were characterized by sudden paralysis, amnesia, sensory loss, and convulsions. Charcot was the first to understand that the origin of hysterical symptoms was not physiological but rather psychological in nature, although he was not interested in the inner lives of his female patients. He noted that traumatic events could induce a hypnotic state in his patients and was the first to describe both the problems of suggestibility in these patients, and the fact that hysterical attacks are dissociative problems the results of having endured unbearable experiences. In Salpetriere hospital, young woman who suffered violence, rape, and sexual abuse found safety and shelter, and Charcot presented his theory to large audiences through live demonstrations in which patients were hypnotized and then helped to remember their trauma, a process that culminated the abrogation of their symptoms. But trauma is not only happens to women or as a result of rape or violence, it may happen to all human.

The project deals with two kind of trauma that is childhood trauma and PTSD. A significant number of children are exposed to traumatic life events. A traumatic event is one that threatens injury, death, or the physical integrity of self or others and also causes horror, terror, or helplessness at the time it occurs. Traumatic events include sexual abuse, physical abuse, domestic violence community and school violence, medical trauma, motor vehicle accidents, acts

of terrorism, war experiences, death of loved ones etc.

Children who have experienced complex trauma often have difficulty identifying, expressing, and managing emotions, and may have limited language for feeling states. They often internalize or externalize stress reactions and as a result may experience significant depression, anxiety, or anger. Their emotional responses may be unpredictable or explosive. A child may react to a reminder of a traumatic event with trembling, anger, sadness, or avoidance. For a child with a complex trauma history, reminders of various traumatic events may be everywhere in the environment. Early childhood trauma will haunt them in every situation of their life. It is difficult to forget it. It will be easy to recover when it is treated in an early stage.

Posttraumatic stress disorder(PTSD), once called shell shock or battle fatigue syndrome, is a serious condition that can develop after a person has experienced or witnessed a traumatic or terrifying event in which serious physical harm occurred or was threatened. PTSD is a lasting consequence of traumatic ordeals that cause intense fear, helplessness, or horror, such as a sexual or physical assault, the unexpected death of a loved one, an accident, war, or natural disaster. Families of victims can also develop PTSD, as can emergency personnel and rescue workers.

Most people who experience a traumatic event will have reactions that may include shock, anger, nervousness, fear, and even guilt. These reactions are common, and for most people, they go away over time. For a person with PTSD, however, these feelings continue and even increase, becoming so strong that they keep the person from living a normal life. People with PTSD have symptoms for longer than one month and cannot function as well as before the event occurred.

PTSD happens mainly to veterans who was in a battle field. PTSD is also known as *Shell Shock* after First World War. For military Veterans, the trauma may relate to direct combat duties, being in a dangerous war zone, or taking part in peacekeeping missions under difficult and stressful conditions. Memories, images, smells, sounds, and feelings of the traumatic event can "intrude" into the lives of individuals with PTSD. Sufferers may remain so captured by the

memory of past horror that they have difficulty paying attention to the present. People with PTSD report frequent, distressing memories of the event that they wish they did not have. They may have nightmares of the event or other frightening themes. Movement, excessive sweating, and sometimes even acting out the dream while still asleep may accompany these nightmares. They sometimes feel as though the events were happening again; this is referred to as "flashbacks" or "reliving" the event. They may become distressed, or experience physical signs such as sweating, increased heart rate, and muscle tension when things happen which remind them of the incident. Overall, these "intrusive" symptoms cause intense distress and can result in other emotions such as grief, guilt, fear or anger.

The movies *The Silence of the Lambs* and *Thank You for Your Service* are chosen to explore childhood trauma and PTSD. Both films show two kinds of trauma experience. The first movie tells about a woman's trauma that happened when she was ten. The second movie is about veterans suffering from PTSD. It clearly shows the horror of PTSD. *The Silence of the Lamb* is one of the most suspenseful psychological thriller movie ever produced. Directed by Jonathan Demme and the screenplay of this film are adapted from the novel with the same title written by Thomas Harris. *The Silence of the Lambs* is starred by Jodie Foster playing the role as Clarice Starling, Anthony Hopkins as Hannibal Lecter, Scott Glenn as Jack Crawford, Ted Levine as James Gumb or Buffalo Bill, Anthony Heald as Dr. Frederick Chilton, and Brooke Smith as Catherine Martin.

The protagonist Clarice is the one who undergoes traumatic experience in this movie. She is an FBI agent and she got a case about Buffalo Bill who kidnaps women and skins them after killing them. She approach the brilliant psychiatrist Hannibal Lecter the "Hannibal, Cannibal" as she say. Lecter is in prison for eight years. She seeks help from him. First he refuses to help her but eventually he agrees to her. There blooms a relationship between them. They respect each other and Lecter consider Clarice as a way for escape from the prison. Lecter demands Clarice to

tell something about her childhood. She tells him about her father's death when she was only ten. He was shot dead by robbers. He wanted to know more as he knew that she had nightmares. So she told him about the nightmares she had when she was a child as she heard slaughtered lambs screaming. Though she tried to help one of those lambs, she couldn't. Later on she became an FBI agent as she wanted to escape from trauma by helping people. Hannibal Lecter helps her to catch Buffalo Bill. She encountered him and rescued the woman he kidnapped. Lecter escape from his cell and calls Clarice to ask if she got over her nightmare. Though she never replies, she hopes that she may escape from the nightmare of lambs screaming.

The movie "Thank You for Your Service" is a biographical war drama film written and directed by Jason Hall, in his directorial debut, and based on the 2013 non-fiction book of the same name by David Finkel. The film is about three soldiers who come back home after Iraq war. And three of them suffer from PTSD. Adam Schumann (Miles Teller), Solo Aeiti (Beulah Koale), Billy Waller (Joe Cole) these are the soldiers. Adam suffers from guilt that he was the reason for the death of his co soldier. Solo suffer from memory lose and mood swings, the main symptoms of PTSD. Billy Waller shows PTSD when he returns home and discovering his fiancé has gone and she has taken all his money and their child and left him. He suicides in front of her. After that we can see Adam and Solo suffering throughout the movie. This movie is a clear example for PTSD. The further chapter of this project will analyze the traumatic experience that the characters in both film goes through and how they deal with it.

Chapter 1

Trauma: A Zooming In

“Trauma is not what happens to you; trauma is what happens inside you as a result of what happens to you” (Gabor Mate- Trauma matters).

Trauma theory was developed in 1980s. The relationship between trauma and mental illness was first investigated by the neurologist Jean Martin Charcot, a French physician who was working with traumatized women in the Salpetriere hospital. Trauma is an internal, physical phenomenon. It can be defined as a psychological, emotional response to an event or an experience that is deeply distressing or disturbing. Emotion is the major way in which trauma manifests. Some common emotional symptoms include denial, anger, emotional outburst, sadness. All effects of trauma can take place either for a short time or a long time of time. If the effect of trauma can be identified immediately, it could prevent from permanence. Long term and short term trauma could be similar, but long terms are more severe. Trauma differs among individuals according to their subjective experiences.

Psychological trauma is a type of damage to the mind that occurs as a result of a distressing event. It is often the result of an overwhelming amount of stress that exceeds one’s ability to cope, or integrate the emotions involved with that experience. Trauma may result from a single distressing experiences or recurring events of being overwhelmed that can be precipitated in weeks, years, or even decades as the person struggles to cope with the immediate circumstances, eventually leading to serious, long-term negative consequences.

People’s reactions to traumatic events range from relatively mild distress that is fleeting to severe disruptions that make it difficult or impossible to function. Often, shock and denial are typical reaction to a traumatic event. Overtime these emotional responses may fade, but a

survivor may also experience reactions long-term. People will react to similar traumatic events differently. In other words, not all people who experience a potential traumatic event will actually become psychologically traumatized. Adults often say that like “he was so young when that happened. He won’t even remember it as an adult.”

Trauma can be caused by man-made, technological disaster, and natural disaster like war, abuse, violence, mechanized accident or medical emergencies or even a simple small thing that connect to a past incident. Response to psychological trauma can be varied based on type of trauma as well as socio demographic and background factors. There are several behavior responses common towards stressors including the proactive, reactive, and passive responses. Proactive response include attempt to address and correct a stressor before it has a noticeable effect on lifestyle. Reactive responses occur after the stress and possible trauma has occurred and aimed more at correcting or minimizing the damage of a stressful event. A passive response is often characterized by an emotional numbness or ignorance of a stressor.

Those who are able to be protective can overcome stressors and are more likely to be able to cope well with unexpected situations. On the other hand, those who are more reactive will often experience more noticeable effect from an unexpected stressor. In the case of those who are passive, victims of a stressful event are more likely to suffer from long-term traumatic effects and often enact no intentional coping actions. These observations may suggest that the level of trauma associated with a victim is related to such independent coping abilities.

There is also a distinction between trauma induced by recent situations and long-term trauma which may have been buried in the unconscious from past situations such as childhood abuse. Trauma is sometimes overcome through healing; in some cases this can be achieved by recreating or revisiting the origin of the trauma under more psychological safe circumstances, such as with a therapist.

Vicious trauma affects workers who witness their clients' trauma. It is to occur in situations where trauma related work is the norm rather than the exception. Listening with empathy to the clients generates feeling, and seeing oneself in clients' trauma may compound risk for developing trauma symptoms. Trauma may also result if workers witness situations that happen in the course of their work for e.g. violence in the workplace, reviewing violent video tapes). Risk increases with exposure and with the absence of help seeking protective factors and pre-preparation of preventive strategies.

If the traumatic situation is ongoing, it is imperative to get some help and be safe. Such people may need some help in finding a safe place to stay, talk with someone they trust about what happened, talking with family and friends may also be good. The thought that the feelings won't last for long and by dealing with the fears and thoughts, the sufferer will be able to get on with life. Bringing in life style changes such as accepting that it might take a bit of time to adjust, spending time doing nice things- relaxing, going for walks, visiting beautiful places, seeing friends will all bring in positive effects. The sufferer must treat themselves kindly and confront situations associated with the traumatic event gradually.

Contemporary literary trauma theory asserts that trauma creates a speechless fright that divides or destroys identity. This serves as the basis for larger argument that suggests identity is formed by the intergenerational transmission of trauma. However, a discursive dependence upon a single psychological theory of trauma produces a homogenous interpretation of the diverse representation in the trauma novel and the interplay that occurs between language, experience, memory, and place. Considering the multiple models of trauma and memory presented in the trauma novel draws attention to the role of place, which functions to portray trauma's effect through metaphoric and material means.

Childhood trauma have a lifelong effect as kids are resilient and not made of stones. Early childhood trauma generally refers to the traumatic experiences that occur to children ages 0 to

10. Reaction of infants and young children may differ from older children and because they may not be able to verbalize their reactions to threatening or dangerous events, many people assume that young age protects children from the impact of traumatic experiences. There are many experiences that can constitute trauma. Physical or sexual abuse can be clearly traumatic for children. Ongoing stress, such as living in a dangerous neighborhood or being a victim of bullying can be traumatic. In fact nearly any event can be considered traumatic to a child if it happened unexpectedly, someone being intentionally cruel and the child was unprepared for it.

Over the past decades, extensive studies suggested that childhood trauma contributed to an increased risk of diverse mental disorders that continued into adulthood, however, the potential mechanisms underlying this association remains unclear and complicated. In recent years, plenty of studies have enriched our understanding of the psychological sequel of childhood trauma in several aspects. For instance, previous studies have demonstrated that childhood trauma has strong effects on later psychological distress, such as depression and anxiety traits.

Childhood trauma does not have to occur directly to the child, watching a loved one suffer can even be extremely traumatic for children. It is important to remember that just because a child endures a tragedy a near-death experience does not mean that he will automatically be traumatized. Children who suffer from traumatic stress often have symptoms when reminded in some way of the traumatic event. Although many of us may experience reactions to stress from time to time, when a child is experiencing traumatic stress, these reactions interfere with the child's daily life and ability to function and interact with others. At no age are children immune to the effects of traumatic experiences. Even infants and toddlers can experience traumatic stress. The way that traumatic stress manifests will vary from child to child and will depend on the child's age and developmental level.

In order to resolve childhood trauma, the sufferer first need to understand it. Trauma can generate some momentous emotions, and unless they learn how to process these emotions, they

will continue to repeat the same damaging patterns that keep us stuck and hurting. Refusing to face the traumas of childhood causes them to fester like a sore; staying in the bodies as unconscious energy that wrecks everything from the employment prospects to their romantic relationships.

Childhood trauma is not impossible to heal. The victim should be aware of their situation. Then they can try to forget about those incidents or if it's difficult they should consult a doctor. Healing trauma starts with understanding it and the vast array of emotions that can come along with it. Once one identifies their trauma and starts down the road to acceptance the healing process begins, but it's a brutal journey that can scourge the soul.

Unresolved trauma leaves them in a constant state of "fight or flight". This state can lead to long-term physical issues and is one of the contributing factors of Post Traumatic Stress Disorder (PTSD). Childhood trauma is one of the hardest things to recover from and one of the deepest wounds to heal. When touched by danger and loss of self-sovereignty as a child, it haunts into their adulthood and the relationships we rely on for happiness and fulfillment.

Minimize the impact of childhood trauma by learning how to understand the ways in which trauma has affected their life. When they come to intimately understand those traumas and the way they've impacted them, they'll be able to accept those events and the emotions they elicit for what they are: a survival response to a situation they had no control over. The things that occur in one's childhood shape a person forever, but others can minimize their effects by taking an active stake in healing. Reclaim their power by taking back responsibility for their life and accepting that the perpetrators of the sufferer's past have no power over him anymore.

Post Traumatic Stress Disorder or PTSD is a psychiatric disorder that can occur in people who have witnessed or experienced a traumatic event such as natural disasters, serious accident, a terrorist act, war or combat, rape or other violence personal assault. Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event.

People with PTSD have intense, disturbing thoughts and feelings related to their experience that last long after the traumatic event has ended. They may relive the event through flashbacks or nightmares; they may feel sadness, fear or anger; and they may feel detached or estranged from other people. People with PTSD may avoid situations or people that remind them of the traumatic event, and they may have strong negative reactions to something as ordinary as a loud noise or an accidental touch.

Most people associate PTSD with rape or battle-scarred soldiers—and military combat is the most common cause in men. But any event, or series of events, that overwhelms you with feelings of hopelessness and helplessness and leaves you emotionally shattered, can trigger PTSD. This may happen especially if the event feels unpredictable and uncontrollable. PTSD can affect people who personally experience the traumatic event, those who witness the event, or those who pick up the pieces afterwards, such as emergency workers and law enforcement officers. PTSD can also result from surgery performed on children too young to fully understand what's happening to them.

PTSD develops differently from person to person because everyone's nervous system and tolerance for stress is a little different. While you're most likely to develop symptoms of PTSD in the hours or days following a traumatic event, it can sometimes take weeks, months, or even years before they appear. Sometimes symptoms appear seemingly out of the blue. At other times, they are triggered by something that reminds you of the original traumatic event, such as a noise, an image, certain words, or a smell.

While it's impossible to predict who will develop PTSD in response to trauma, there are certain risk factors that increase your vulnerability. Many risk factors revolve around the nature of the traumatic event itself. Traumatic events are more likely to cause PTSD when they involve a severe threat to your life or personal safety: the more extreme and prolonged the threat, the greater the risk of developing PTSD in response. Intentional, human-inflicted harm—such as

rape, assault, and torture also tends to be more traumatic than “acts of God,” or more impersonal accidents and disasters. The extent to which the traumatic event was unexpected, uncontrollable, and inescapable also plays a role.

Trauma or PTSD symptoms can result from many different types of distressing experiences, including military combat, childhood neglect or abuse, an accident, natural disaster, personal tragedy, or violence. PTSD has been known by names in the past, such as “shell shock” during the years of World War I and “combat fatigue” after World War II. Psychological trauma experienced during the war had an unprecedented toll on veterans, many of whom suffered symptoms for the rest of their lives. These ranged from distressing memories that veterans found difficult to forget, to extreme episodes of catatonia and terror when reminded of their trauma.

The public perception of PTSD is still rooted in this past, and some of the problems discovered during World War I regarding psychological trauma have not yet been answered. Though much has changed, many principles and challenges of PTSD treatment were first identified during World War I. If we are to learn lessons from the war and better acknowledge the sacrifices of those who served, we must also acknowledge the impact of psychological trauma, both then and now.

Soldiers described the effects of trauma as “shell-shock” because they believed them to be caused by exposure to artillery bombardments. As early as 1915, army hospitals became inundated with soldiers requiring treatment for “wounded minds”, tremors, blurred vision and fits, taking the military establishment entirely by surprise. An army psychiatrist, Charles Myers, subsequently published observations in the *Lancet*, coining the term shell-shock. Approximately 80,000 British soldiers were treated for shell-shock over the course of the war. Despite its prevalence, experiencing shell-shock was often attributed to moral failings and weaknesses, with some soldiers even being accused of cowardice.

During war, the veteran believes his/her life or others’ lives are in danger. She/he may feel

afraid or feel that they have no control over what is happening. After the event, the veteran may feel scared, confused, or angry. If these feelings don't go away or they get worse, the symptoms may disrupt the person's life, making it hard to continue daily activities. All veterans with PTSD have lived through a traumatic event that caused them to fear for their lives, see horrible things, and feel helpless. Strong emotions caused by the event create changes in the brain that result in PTSD. Most veterans who go through a traumatic event have some symptoms at the beginning. Yet only some will develop PTSD; the reason for this is not clear.

The victims of PTSD can carry a lot of grief along with survivor's guilt for many. When veterans come back from war, they can also struggle with substance abuse, anger issues, isolation, and more. The topic of treatment of veterans with PTSD is somewhat a controversial one since treatment options can vary from therapy and psychotropic drugs, to alternatives like marijuana, but since that is federally illegal, it is hard to bring to light. PTSD is a disorder characterized by failure to recover after experiencing or witnessing a terrifying event.

Veterans deal with even more issues like losing their houses, jobs, and more on top of dealing with mental stress. Psychiatrist and author Jonathan Shay explains how a veteran's personalities can be different when they return from combat that is, in a war a veteran should shut down his emotions that do not directly serve survival. And this is profoundly disconcerting to families when a soldier comes back, and he seems to be made out of ice. It is not that he is irrevocably and permanently incapable of feeling anything, yet this adaptation of shutting down those emotions that don't directly serve survival in combat is persisting. While in combat soldiers are trained to fight and survive, so that leaves them to repress their emotions.

Veterans do not realize that they may have a disorder like PTSD until after some time they recognize the many outbursts, severe anxiety, and insomnia/nightmares. To treat this, vets can get drugs to help with PTSD, but there are many downsides. It is clear that militarism is heavily ingrained in our society and PTSD is a consequence of it, inside and outside of war. These are

ideas that we have to grasp, because people suffer from these disorders whether you recognize it or not.

Some of the symptoms of PTSD are so commonly misinterpreted, misunderstood, or simply not acknowledged. They may be part of a bigger problem that seeking help can feel “unnecessary” even though the problems are intense. They are sometimes identified as something other than a symptom of the condition. Some people experiencing PTSD don’t understand what’s happening to them when they symptoms appear. They may have the need to withdraw, temper flare-ups for no good reason, anger management issues in general, nightmares, flashbacks, etc.

It’s no surprise that the members of a military family would have a difficult time looking at certain PTSD symptoms objectively when the sufferer seems unreachable, when they lash out or withdraw, etc. But these behaviors are symptomatic of PTSD. Not everyone who experiences trauma develops PTSD, but a significant number of people who experience trauma are at risk.

Sometimes arriving at the conclusion that help is needed is the hardest part. It can be difficult to know what PTSD symptoms are, what they mean, and how to properly manage them, or provide support for those who are trying to manage the symptoms properly. When a loved one withdraws, is frequently angry or easily angered, flies into rages or quiet depressions, or any other manifestation of PTSD symptoms, the entire family is affected. You may find that counseling is needed not just for your loved one, but for those dealing with the loved one’s condition.

Chapter 2

The Silence of the Lambs: The Echoes of Childhood Trauma

In the movie “The Silence of the Lambs” the protagonist Clarice Starling is the victim of trauma. Childhood trauma has explored the theme quite effectively. Though she is a definition of strong woman and FBI agent, she had a troubled childhood. In the film adaptation Clarice was played by Jodie Foster. Clarice Starling, as portrayed by Foster, was ranked the sixth greatest protagonist in film history on AFI’s 100 years, 100 heroes and villains making her the highest ranking heroine. With her sharp face intensity, Jodie Foster is outstanding as Clarice.

The movie “The Silence of the Lambs” was directed by Jonathan Demme. He proved to be the rare maverick filmmaker who managed to find a place for his talents within the Hollywood system while still making movies in his own way and on his own terms. His notable movies include Philadelphia (1993), Melvin and Howard (1980), Beloved (1998) etc.

The movie commences with the main character Clarice Starling, a FBI trainee. She is pulled from her training at the FBI academy at Quantico, Virginia by Jack Crawford of the Bureau’s Behavioral Science Unit. He assigns her to interview Hannibal Lecter, a former psychiatrist and incarcerated cannibalistic serial killer, whose insight might prove useful in the pursuit of a psychopath serial killer nicknamed “Buffalo Bill”, who kills young women and then remove the skin from their bodies.

Starling travels to the Baltimore State Hospital for the criminally insane, where she is led by Frederic Chilton to Lecter’s solitary quarters. Although initially pleasant and courteous, Lecter grows impatient with Starling’s attempts at “dissecting” him and rebuffs her. As she is leaving, one of the prisoners flicks semen at her. Lecter, who consider this act “unspeakably ugly”, calls Starling back and tells her to seek out an old patient of his. This leads her to a storage shed, where

she discovers a man's severed head with a sphinx moth lodged in its throat. She returns to Lecter, who tells her that the man is linked to Buffalo Bill. He offers to profile Buffalo Bill on the condition that he may be transferred away from Chilton, whom he detests.

Buffalo Bill abducts a senator's daughter, Catherine Martin. Crawford authorizes Starling to offer Lecter a fake deal, promising a prison transfer if he provides information that helps them find Buffalo Bill and rescue Catherine. Instead, Lecter demands a quid pro quo from Starling, offering clues about Buffalo Bill in exchange of personal information. Starling tells Lecter about the murder of her father when she was ten years old. Chilton secretly records the conversation and reveals Starling's deceit before offering Lecter a deal of Chilton's own making. Lecter agrees and is flown to Memphis, where he verbally torments Senator Ruth Martin, and gives her misleading information on Buffalo Bill, including the name "Louis Friend".

Starling notices that "Louis Friend" is an anagram of "iron sulfide"- fool's gold. She visits Lecter, who is now being held in a cage-like cell in a Tennessee courthouse, and asks for the truth. Lecter tells her that all the information she needs is contained in the case file. Rather than give her the real name, he insists that they continue their quid pro quo and she recounts a traumatic childhood incident where she was awakened by the sound of spring lambs being slaughtered on a relative's farm in Montana. Starling admits that she still sometimes wakes thinking she can hear lambs screaming, and Lecter speculates that she is motivated to save Catherine in the hope that it will end the nightmares. Lecter gives her back the case files on Buffalo Bill after their conversation is interrupted by Chilton and the police, who escort her from the building. Later that evening, Lecter kills his guards, escapes from his cell, and disappears.

Starling analyzes Lecter's annotations to the case files and realizes that Buffalo Bill knew his first victim personally. Starling travels to the victim's hometown and discovers that Buffalo Bill was a tailor, with dresses and dress patterns identical to the patches of skin removed from each of his victims. She telephones Crawford to inform him that Buffalo Bill is trying to form a "woman

suit" out of real skin, but Crawford is already en route to make an arrest, having cross-referenced Lecter's notes with hospital archives and finding an autogynephilic man named Jame Gumb, who once applied unsuccessfully for a sex-change operation, believing himself to be a transgender woman. Starling continues interviewing friends of Buffalo Bill's first victim in Ohio, while Crawford leads an FBI HRT team to Gumb's address in Illinois. The house in Illinois is empty, and Starling is led to the house of "Jack Gordon", whom she realizes is actually Jame Gumb, again by finding a sphinx moth. She pursues him into his multi-room basement, where she discovers that Catherine is still alive, but trapped in a dry well. After turning off the basement lights, Gumb stalks Starling in the dark with night-vision goggles, but gives his position away when he cocks his revolver. Starling reacts just in time and fires all of her rounds, killing Gumb.

Sometimes later, at the FBI Academy graduation party, Starling receives a phone call from Lecter, who is at an airport in Bimini. Lecter asks her that "well, Clarice, have the lambs stopped screaming?" he assures her that he does not plan to pursue her and asks her to return the favor, which she says she cannot do. Lecter then hangs up the phone, saying that he is "having an old friend for dinner", and starts to following a newly arrived Chilton before disappearing into the crowd.

When we look close to her trauma, even after Lecter has killed more people in his escape from custody, Clarice still believes she was on the right track in getting his help. She needs his advice a vital clue in the case file, as Lecter suggested. Steadfast in her resolve, Clarice must hold out until the process that is threatening the "lambs" comes to an end. As a child Clarice took action by kidnapping the lambs to save it from being slaughtered; she actively joined the FBI to go after killers, like the one who killed her father; encountering Buffalo Bill, she tries to apprehend him herself. Her father was a police officer. He was shot dead when he reacted to a robbery. Clarice was only ten older then. So she believes that if she trap Buffalo Bill she can may

be escape from the trauma.

Clarice methodically follows up each clue provide by Lecter and others to gather evidence that eventually leads her to buffalo bill. Finally she trapped him and encountered him. If serial killer would stop victimizing innocents, and lambs were safe from men and knives, Clarice (and society) could sleep easily at night. She believes that it will heal her wounds. Clarice's every waking hour (and some of her dream time) is dedicated to the activity of detecting and fighting criminals, particularly serial killers, for the FBI.

Throughout the story, Starling is always doing something, forever moving, on her feet, hardly ever even sitting down. She is presented as a woman of action, running an obstacle works alone through the boggy woods. She changes all throughout the movie. Even though she struggle to escape from her worst childhood she reached her life goal, a FBI agent. She believes that the profession may help her to forget the trauma of her life. She is brave, smart and beautiful. Clarice wants to do her job the best she can (and even outdo her father), and will do whatever it takes, even if it means retrieving preserved heads from storage lockers and attending gruesome autopsies.

By working intimately with the serial killer Hannibal Lecter, Clarice Starling uncovers the identity of another serial killer, Buffalo Bill. She succeeds in rescuing the Senator's daughter he's kidnapped and in killing him, and becomes an FBI agent of whom her father would have been proud. In *The Silence of the Lambs*, lambs being slaughtered that she experienced as a child, serene a metaphor for the innocent people who will continue to be slaughtered despite her efforts. In addition to her experience in saving lambs, Clarice's drive to apprehend killers comes largely from the loss of her father.

In this movie Clarice and Lecter shares a different relationship. Lecter respect Clarice because of her bravery and the respect she gave him. Starling always strived for the protection of people from would-be slaughterers. Whereas Lecter is presented as a cannibal who believed that

people are better cooked, and eaten with fava beans and a good Chianti. Lecter's impulses as a psychiatrist drive him to learn Clarice's deepest secrets. Her training as an FBI agent makes her instinctively hide her fears. A character Campbell said to Clarice that "You tell him nothing personal, Starling. Believe me, you don't want Hannibal Lecter inside your head..." But only by exposing herself to him can she learn the information she needs to rescue the Senator's daughter and silence her screaming lambs.

It's seen that Clarice worries about getting too close to criminals like Lecter and Buffalo Bill, perhaps deterred by her father's fate. She jumps each time Lecter slams his sliding food tray, hesitates to take what he puts in it, even when it's only a towel. But when he does make contact, it's only to gently stroke her finger—her worries were unfounded. Clarice's confidence in her abilities as an FBI agent butts up against Lecter's record of outwitting all in his path and killing many. Confidence eventually wins out, as Clarice gets her information and Lecter confesses he is not after her, negating her personal worries about him.

A number of aspects makes the movie interesting. First of all "The Silence of the Lambs" has an uncommon plot line. Thomas Harris has written a bizarre relationship between Clarice Starling and Hannibal Lecter, and how Hannibal Lecter always makes a good behavioral analysis about Buffalo Bill. Thomas Harris was very successful in building the character of Hannibal Lecter

Secondly the visualization and the cast of the movie is amazing. Jonathan Demme makes the audience feel enthusiastic with this thriller movie, even when the movie shows about the process of autopsy of the Frederica Bimmel, the last victim of Buffalo Bill. The casts of this film also have a valuable part in this film. Sir Anthony Hopkins who plays as Hannibal Lecter is a wonderful actor. He makes the character of Hannibal Lecter life like. So when people talk about Hannibal Lecter, they will also talk about Sir Anthony Hopkins. Jodie Foster also played Clarice Starling very well. She successfully represented the young FBI trainee who is smart, ambitious, and fearless.

The movie also gives a number of messages. One of these messages is about the importance

of someone's life. Lastly the way how Clarice Starling tries to deal with her emotional traumatic childhood memory by doing quid pro quo games with Hannibal Lecter in order to get the psychological behavioral profile of Buffalo Bill is quite commendable.. In that situation she deals with the dilemma because it means that she has to remember her father's death and other painful experiences, and it can be a good chance too for Hannibal Lecter if he wants to spoil her. In other way, if she does not go along with Lecter's game, Starling will not be able to save Catherine Martin. In that position, she does a lot of way to face her anxiety and makes everything runs perfectly; one of the ways is defense mechanism.

Childhood trauma is not a disease but a mental situation. It is not impossible to heal. All we need to do is open up with someone we trust. Maybe they can't be of any help but they can listen. Opening up to someone relieves the burden. In the movie Clarice had Lecter to help her. He could read her even if she tells him or not. Discussing your problems with someone will surely enable that person to lessen the pain. The movie does not clarify if Starling escapes from trauma or not.

Chapter 3

Thank You for our Service: The Horror of PTSD

Post-traumatic stress disorder (PTSD), sometimes known as shell shock or combat stress, occurs after you experience severe trauma or a life-threatening event. It's normal for your mind and body to be in shock after such an event, but this normal response becomes PTSD when your nervous system gets "stuck." The National Institute of Mental Health (NIMH) explains that PTSD is "a disorder that develops in some people who have experienced a shocking, scary, or dangerous event." In the case of military personnel specifically, these types of events typically occur during times of war when soldiers find themselves face-to-face with not only their own morality but that of their fellow comrades as well.

What is it like to kill? What is it like to be under fire? How do you know what's right? What can you do to forget? In the novel *The Things They Cannot Say*, award-winning journalist and author Kevin Sites asks these difficult questions of eleven soldiers and marines, who by sharing the truth about their wars display a rare courage that transcends battlefield heroics. For each of these men, many of whom Sites first met while in Afghanistan and Iraq, the truth means something different. One struggle to recover from a head injury he believes has stolen his ability to love; another attempt to make amends for the killing of an innocent man; yet another finds respect for the enemy fighter who tried to kill him. Sites also shares the unsettling narrative of his own failures during war--including his complicity in a murder--and the redemptive powers of storytelling that saved him from a self-destructive downward spiral.

In "Thank You for Your Service" is a 2017 American biographical war drama film written and directed by Jason Hall, in his directorial debut, and based on the 2013 non-fiction book of the same name by David Finkel. Jason Dean Hall is an American screenwriter, film director, and former actor. He played the recurring character of Devon MacLeish in *Buffy the Vampire Slayer*. He had a guest starring role on *Without a Trace* as Jesse in season two. As a screenwriter, Hall co-

wrote *Paranoia* (with Barry Levy) and wrote the screenplay for *American Sniper*, for which he received an Academy Award nomination for Best Adapted Screenplay.

The movie starts with war. After a harrowing 15-month combat experience in Iraq, the much-decorated Adam Schumann (Miles Teller) returns home to Kansas and a loving wife, Saskia (Haley Bennett). Adam and Saskia have two young children, a daughter and an infant son born while Adam was still overseas. Adam suffers from PTSD as manifest by nightmares and frequent flashbacks for which his wife convinces him to seek help from an overburdened Department of Veterans Affairs. He also receives solace from two Iraq buddies living nearby, an American Samoan, Solo Aeiti (Beulah Koale), and Billy Waller (Joe Cole), who commits suicide in front of his fiancée (Erin Darke) after discovering she has taken all his money and their child and left him.

Adam's unresolved psychological issues revolve around his failure to safely rescue a fellow soldier from a building under fire, Michael Emory (Scott Haze), who was dropped on his head and rendered hemiplegic but later expresses gratitude to Adam for being alive, and survivor's guilt about letting Sergeant First Class James Doster (Brad Beyer) take Adam's place on patrol one day. When the Humvee with Doster filling in for Adam makes a wrong turn and hits an improvised explosive device, Solo assists the men in their escape to safety, but Doster is inadvertently left behind and dies in the conflagration. Doster's grieving widow, Amanda (Amy Schumer), who is best of friends with Saskia Schumann, finally gains closure as she learns the circumstances of her husband's death towards the end of the movie and absolves Adam and Solo of responsibility for it.

Meanwhile, Solo suffers from such severe PTSD and memory loss that he is unable to fulfill a fervent desire to reenlist for another tour in Iraq. He falls in with a group of drug dealers led by a Gulf War veteran, Dante (Omar Dorsey). Adam rescues his friend and puts him on a Greyhound bus to California, where Solo will take Adam's reserved place at a rehabilitation

center specializing in the treatment of PTSD. Sometime later, Adam returns from his own stay at the rehabilitation center, being greeted by his wife and children back in their original home.

“Thank You for Your Service” is about three Army soldiers who have returned from multiple combat tours in Iraq, all of whom suffer from some form of PTSD. The film’s primary focus is on Adam Schumann, who is struggling to reintegrate into his home life, no thanks to a lack of support from the Department of Veterans Affairs and its almost nonexistent mental health care. Adam might hear dozens of folks thank him for his service, but right now he needs more than words.

“I was a good soldier,” begins narrator Adam Schumann, his statement grimly underscored with an early flashback to carrying a fellow soldier with a gushing head wound. He’s struggling to transition to civilian life with his wife and their two small children, while one of his two serviceman friend fares far worse: Will returns to an empty apartment, abandoned by his fiancée in his prolonged absence.

Hall lingers movingly on Will curling up on the floor of a bare room, with nowhere else to go and no one else to lean on. Meanwhile, Solo puts on a Teflon act for his pregnant wife until a video game triggers a terrifying meltdown. “Thank You for Your Service” is at its most affecting when following Adam and Solo through the bureaucratic labyrinth of mental health treatment. That it shouldn’t be this hard or take months for benefits to kick in is a point well worth making, and Hall is careful not to reduce his characters to tormented caricature.

Both Adam and Solo have moments of connection and levity with their wives amid the darker moments, and there’s a painful brotherhood in Adam’s visit to a wounded soldier whose life he saved. The Amy appears as the wife of a fallen soldier who presses Adam for details of his death. Schumer, face stripped of makeup, is gamely somber, but her brief presence here (perhaps just due to her outsize personality) still sticks out as an odd cameo.

The bigger problem is Solo’s trajectory; as his mental health deteriorates, he comes under

the sway of a drug dealer (Omar J. Dorsey) and rescues an abused pit bull. Both events may be torn from real life, but they feel clichéd nonetheless; the film also edges dangerously close to conferring sainthood on Adam as he runs interference for his friend. But Teller still does admirable dramatic work here, his performance a testament to the invisible pain borne by so many of our returning members of the armed forces.

Adam's trauma begins when he has been praised for his unique ability for locating roadside mines, Adam's last experience in Iraq was seeing a friend shot in the head and him having dropped that friend as he carried him down the steps of a building under fire by terrorists. The guilt and shame are overwhelming and demonstrate one of the many ways that PTSD can manifest in a soldier. Adam's two closest friends, Billy Waller (Joe Cole) and Tausolo 'Solo' Aieti (Beulah Koale) have their own kinds of PTSD. For Billy, the trauma is waiting back at home where his fiancée has cleared out their apartment and left without telling him. For Solo, he's suffering from post-concussion syndrome, PTSD with a deep effect on his memory.

PTSD takes so many different forms that it is impossible to come up with one catchall treatment as we find out when Adam and Solo attempt to navigate the Veterans Affairs system and find themselves unable to find help that isn't weeks or months away. The VA is swamped with PTSD patients whose traumas are manifested in numerous different ways. That there is no cure for PTSD. There's barely even a proper diagnosis. It's no wonder our vets are eager to go back to combat; it makes more sense than the bureaucracy waiting back at home.

Thank You for Service never shies away from portraying the hurt and trauma that comes from PTSD and the betrayal soldiers feel after making incredible sacrifices for their country only to spend weeks wrapped in red tape when they go for help. Suicidal ideation is one of many symptoms of PTSD and much of that may simply stem from the hopeless, helpless feeling engendered in waiting in endless VA lines only to be buried in paperwork and delays in treatment.

In Iraq, a regimented schedule and a clarity of duty, regardless of the nature of the deployment, at least provides a navigable structure. A soldier doesn't have time to dwell on what's wrong with life. They're too busy protecting themselves and their brothers in arms. Even if the reason for their deployment is nonsense, the duty to protect your friends gives a soldier purpose and drive that doesn't exist back home and *Thank You for Your Service* beautifully captures the heartbreaking notion that combat zones can be more comfortable than suburban homes.

Thank You for Your Service capitalizes on Miles Teller's unique qualities as an actor and casts him a role that is sympathetic but never cloying or manipulative. You feel sorry for him and he for himself but he's never pathetic. He registers his guilt in his eyes at all times, even when he appears joyous. This haunted quality is deeply affecting and is another talent that marks Teller as a future Academy award contender. The question *Thank You for Your Service* asks is do these veterans manage to heal their post-war trauma as they try to get back to normal life?

Jason Hall succeeds in making the audiences see the real evidence of the trauma of US veterans. He shows the suffering they experienced after the war. In this film, trauma and depression are more dangerous than the war itself. Every scene is emotional. Jason Hall also delivers the importance of being open to your family through *Thank You for Your Service*. The women in the film are given little to do. They come in two varieties: either they're supportive, or they bail. And then there's Amy Schumer drabbed down and with dark hair. While it's intriguing to see her in a dramatic role, her few spoken lines essentially amount to a cameo.

At one point, Solo goes to a party and watches a brutal dogfight. When one of the pit bulls is left for dead, he picks up the battered, bloodied dog and takes him over to Adam's house. Mystifyingly, Adam stitches up the nearly dead dog, as if he were an expert surgeon. Was some key piece of exposition left on the cutting room floor? The only job we've heard he's had before his service was as a groundskeeper. But, miraculously, the wounded dog not only survives, but flourishes. Rather than providing a sense of the characters, this scene merely takes the viewer out

of the movie.

Having people to turn to for comfort, advice, and support makes our lives better. It has been shown that people with posttraumatic stress disorders (PTSD) tend to do better if they have good family relationships. This also holds true for people who are dealing with other mental health conditions such as depression, substance abuse problems, schizoaffective disorder, bipolar illness.

Families often want to hold barbecues and big welcome home parties for their loved one when they return. The service member often has mixed feelings about returning home because they now face a completely different day-to-day life than they have grown used to. Relaxing may be what they want, not a big party. Reworking “who does what”, who handles the money now, who takes the kids to school, who mows the lawn; these issues will need to be dealt with. Make sure that all family members talk to each other about what they want and expect, even before returning home.

One challenge everyone faces is adjusting to changes in the family; both the person returning from war and the family left behind have changed. War experiences have changed the person who was deployed. Children have grown and developed new skills in school. Spouses or other family members may have taken on more responsibilities and control in the family. Everyone needs to work and get used to a new family pattern that works for all involved. Be aware that problems in relationships that were already there before deployment may return. Returning service members need to relearn how to feel safe, comfortable and trusting again with family members. This involves getting reacquainted and communicating with spouses, children, parents, friends, coworkers and others.

Even when family relationships are good, the family often struggles when a person they love has serious mental health problems. Family members may be confused. They may feel disappointed, worried, and sad about what is happening with their loved one. As a result stress levels go up and may get very high. This can be hard on the person with the mental health condition and hard on their loved ones.

In this film Adam and solo's major support was their wives. They were with them under all circumstances no matter what. Sometimes they were confused, scared and sad about what is happening to their husbands. But they never gave up. Each incident that the soldiers go through they feel like a blast from the past.

Thank you for your service so effectively chronicles in the way veterans are too often used as political props, willingly or not; they're praised and thanked, but also trotted out and forced to slog through a veterans affair system that would rather just quietly rejoin society without asking for too much, or else go back to the battlefield, where they can't complicate the patriotism of those who realize it. The story undertakes an undeniably worthy subject. A person with PTSD should be aware that he cannot escape from it but he can manage it. The movie *Thank You for Your Service* is a perfect example of PTSD in veterance.

Conclusion

Roger Luckhurst's "Mixing memory and desire: psychoanalysis, psychology and Trauma Theory", describes trauma as something that enters the psyche that is so unprecedented or overwhelming that it cannot be processed or assimilated by usual mental processes. We have, as it were nowhere to put it, and so it falls out of our conscious memory, yet is still present in our mind like an intruder or a ghost. Trauma is a displaced anomaly that refuses the clean connections of logic. It is a memory that has no articulation and thus cannot have an accurate stream of events to define its reason. Psychological pitfalls such as false memory syndrome and hypnotic suggestibility render a subjective testimony dubious especially in light of the official penchant for objective analysis.

The present project dealt with two type of trauma that is childhood trauma and PTSD. Childhood trauma is the experience of an event by a child that is emotionally painful or distressful, which often results in lasting mental and physical effects. Childhood trauma can occur when a child witnesses or experiences overwhelming negative experiences in childhood. This can happen when a child experience abuse, neglect, violence. Trauma in early childhood can be especially harmful. A child's brain grows and develops rapidly, especially in the first three years. Young children are also very dependent on the caregivers for care, nurture and protection. This can make young children especially vulnerable to trauma. When trauma occurs early it can affect a child's development. It will haunt the child throughout their life. It will not heal but it can manage.

Post Traumatic Stress Disorder or PTSD is an anxiety disorder that can occur mainly after the veteran experiences a traumatic event. During this type of event, the veteran believes his/her life or others lives are in danger. She/he may feel afraid or feel that they have no control over what is happening. This is not only happen for veterans but also every individual who has gone through a life threatening event. After the event they may feel scared, confused or angry. When a veteran has PTSD, dealing with the past can be difficult, and feelings are generally kept bottled up. It can

manage through proper counseling and support of loved ones.

The films *Silence of the Lambs* and *Thank You for Your service* are chosen to explain childhood trauma and PTSD. Both films show different versions of trauma. In *Silence of the Lambs* the character Clarice Starling is struggling from her childhood trauma like the murder of her father when she was only ten year old and along with that the screaming of slaughtered lambs all this haunt her in her day to day life. She scared to see people get hurt this is the motive for her to become a FBI agent. She believes that if she became a FBI agent she can help people from getting hurt by criminals through that she can overcome her father's death and she can stop the screaming of lambs.

Thank You for Your Service shows Post Traumatic Stress Disorder or PTSD. The story is about three Iraq veterans who came home after war and their struggle to overcome PTSD. Adam Schumann, Solo Aeti and Billy Waller are the soldiers who suffer from trauma. Waller's trauma starts when he come back home and her fiancé was gone with her daughter. His trauma ends with his death. He suicide in front of his wife in a bank. Adam suffers from PTSD as manifest by nightmares and frequent flashback. He regrets that the death of one his comrade was caused by him and also he dropped a fellow soldier who was shot and rendered hemiplegic. Solo suffers from such severe PTSD memory loose and he get violent and out of control sometimes. He seeks his help in drugs. This film is a perfect example for PTSD and how it also affects one's family.

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