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The Shifting Anatomy of Trauma: Intersections of Theory, Postcoloniality, and the Subaltern Experience

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Abstract

This paper examines the evolving conceptualisation and literary representation of trauma, with particular attention to the intersections of theory, postcoloniality, and subaltern experience. Rooted in Western modernism, trauma studies initially emerged as a response to the psychological dislocations of modern life, industrialisation, and war, framing suffering as an individual, clinically recognisable phenomenon (Bond 13). However, postcolonial scholarship and literary critique have challenged this Eurocentric model, highlighting the limitations of applying Western paradigms to non-Western contexts, where trauma is inseparable from structural violence, collective histories, and socio-political oppression (Craps 2012, 19; Watters 2010). The paper traces the development of trauma narratives in Indian English literature, from the immediate aftermath of Partition in Khushwant Singh's *Train to Pakistan* (1956) to the experimental forms of Rushdie, Ghosh, and Roy, which reflect the fragmented, non-linear nature of both historical and intimate trauma. Feminist and Dalit interventions further foreground gendered and caste-based oppression, demonstrating how trauma is experienced, transmitted, and narrated beyond the confines of Western therapeutic discourse. By integrating literary, theoretical, and postcolonial perspectives, this study argues for a reconceptualization of trauma that recognises its culturally and historically situated dimensions, amplifies subaltern voices, and interrogates the ethical responsibilities inherent in bearing witness to unspeakable suffering.

Keywords: trauma, postcolonialism, subaltern.

Traumatic events and experiences can leave lasting wounds that may remain unresolved and unhealed for decades across generations and even for centuries. The past has

a peculiar way of infiltrating the present and remaining alive – its legacies often continue to echo in complex and controversial ways. Therefore, struggling with the past while at the

same striving to move beyond it is a challenging task. The memories that resonate most deeply with our emotions are often tied to histories of violence. Remnants of the past surround us, and history serves as a reservoir of traumas – some past, some present, and others still unfolding – yet all remain active and enduring. Traumatic and violent histories are not new, but the emergence of a diagnostic language to recognize and label them as “traumatic” is a relatively recent development. The term “trauma” comes from the Greek word for wound and according to the *Oxford English Dictionary*, the first recorded mention of “trauma” in English occurred in 1693, when the second edition of *Blanchard's Physical Dictionary* defined it as “a wound from an external cause” (75). Throughout the seventeenth and eighteenth centuries, trauma was perceived primarily as a physical wound. The concept of “psychological trauma” did not begin to take shape until the late nineteenth century.

Today, a trauma aesthetic permeates our life and culture, becoming a central theme in literature, visual arts, cinema, music, and digital media. Trauma has evolved from a matter of medical and legal interest into a fundamental element of contemporary global culture. In today's world and culture, there are a varied number of reasons behind the marketing and consumption of trauma. Trauma, as Lucy Bond and Stef Craps note, has become “big business.” It is now everywhere—shaping contemporary art, leaving its mark on the architecture of memorials and museums, and even turning into a commodity. They point out how it is packaged within “leisure and consumer choices: dark tourist locations such as concentration camps, battlefields, plantations, and prisons draw millions of visitors each year, and their gift shops boast huge turnovers” (3). There seems to be a growing need to analyse these diverse ethical and ideological dynamics which are at play within this emerging “trauma industry”. Trauma today stands as an integral and inseparable concept pertaining to discussions

surrounding identity, memory and belonging. Presently we seem to inhabit a culture that glorifies victimhood and this in itself is reason enough to study the growth and evolution of the concept of trauma and the various connotations that surround this term.

Rooted in Western modernism, the concept of trauma reflects evolving attempts to understand suffering in a rapidly changing world. As technological progress and materialism reshaped modern life, human agency gave way to impersonal, mechanised structures, generating widespread insecurity and existential unease. Lucy Bond identifies two major nineteenth-century shifts that helped establish trauma as a critical discourse:

“Two contemporaneous developments brought trauma to the forefront of public consciousness... first, significant advancements in the mental sciences...; second, the increasing mechanization of industrial society transformed conventional modes of travel, labour, warfare, and leisure” (Bond 13).

1.1 Transition from Physical to Psychological Trauma: By the mid-nineteenth century, trauma began to be understood as more than physical injury. Railway accidents in Britain and Germany drew attention to the emotional shock caused by sudden catastrophe. John Erichsen's notion of “railway spine” and Hermann Oppenheim's research on traumatic neuroses among industrial workers showed that fear and psychological distress could persist without visible wounds, helping establish psychological trauma as medically legitimate.

1.2 Early Medical Explorations of Nervous Disorders: Late-nineteenth-century thinkers such as Charcot, Janet, and Freud shifted medical focus to the mind. Freud's theories of repression, dissociation, and repetition—developed in *Studies on Hysteria* and *Beyond the Pleasure Principle*—laid the foundations for modern understandings of trauma and memory.

1.3 Impact of World War I: World War I exposed the psychological toll of mechanised warfare. Symptoms labelled "shell shock" were often dismissed; states like Germany and France reframed trauma as hysteria or weakness to avoid responsibility.

1.4 Recognition of PTSD and the Vietnam War: The Vietnam War renewed attention to psychological suffering. With growing evidence and advocacy, PTSD was formally recognised in 1980, validating the reality of invisible war-related wounds.

1.5 The Evolution of the Definition of "Trauma": The definition of trauma has never been stable; it has shifted across historical, cultural, and disciplinary contexts. As Lucy Bond observes, trauma continually unsettles "the boundaries between mind and body, memory and forgetting, speech and silence." Building on Freud's model and the clinical category of Post-Traumatic Stress Disorder (PTSD), contemporary theory understands trauma as a delayed response to an overwhelming event that resists immediate comprehension, raising questions about memory, representation, and the limits of knowledge. A major turning point came with the American Psychiatric Association's inclusion of PTSD in the DSM-III (1980). PTSD was defined as a reaction to an event "outside the range of usual human experience," re-experienced through intrusive memories, dreams, or flashbacks, and accompanied by numbing, hyperarousal, guilt, or avoidance. This institutionalised trauma as a legitimate medical condition and offered a unified framework for diagnosis. Yet critics argue that the DSM's approach is limited: it marginalises psychodynamic perspectives, risks reducing survivors to patients, restricts what counts as trauma, and reinforces Eurocentric assumptions by privileging certain experiences over others.

Feminist scholars in the 1970s and 1980s challenged the dominance of combat-related trauma, arguing that such frameworks obscured

domestic abuse and other forms of gendered violence. Judith Herman contended that the most common post-traumatic disorders occur not in war but in civilian life, describing trauma as "an affliction of the powerless." She advocated a broader, more nuanced model that recognised chronic, relational, and domestic forms of violence. Building on Herman, Laura S. Brown emphasised "insidious trauma," the cumulative psychological harm caused by systemic oppression linked to race, gender, class, sexuality, and disability. This expanded trauma beyond isolated catastrophic events to include everyday structures of marginalisation. Trauma theorists further highlight its elusive nature. Richard Crownshaw notes that trauma "defies witnessing, cognition, conscious recall and representation," while Roger Luckhurst describes it as transmissible across bodies, relationships, and cultural systems. Cathy Caruth argues that trauma is defined by belatedness—the event is not fully known when it occurs but returns insistently in intrusive forms. Thus, trauma remains a dynamic, contested, and culturally inflected concept, continually reshaped by shifting histories, power structures, and theoretical perspectives.

2. EMERGENCE OF TRAUMA THEORY

Trauma theory emerged in the 1990s out of a broad field of clinical and psychoanalytic research, gaining prominence in literary and cultural studies as scholars turned their attention to testimony, memory, and the difficulties of representing catastrophic events. By the late twentieth century, trauma had shifted from a personal psychological condition to a cultural, political, and academic category, shaping identities and narratives while also raising concerns about the commodification and politicisation of suffering. This section examines how trauma theory developed as a humanistic field, interrogating the ethical and aesthetic challenges involved in representing historical wounds. Central to early debates were questions about whether literature could or should depict extreme events. Theodor

Adorno's reflections on art after Auschwitz expressed anxiety about aestheticising atrocity, though he later acknowledged that art can serve as a medium for bearing witness while also signalling its own limits. Thinkers like Blanchot and Lyotard expanded this conversation, emphasising the inherent unrepresentability of events such as the Holocaust. Lyotard identified Auschwitz as the defining *differend*—an experience that demands articulation yet resists linguistic expression—and argued that postmodernism itself emerged from this crisis of representation.

Within this intellectual climate, trauma theory developed through the work of Cathy Caruth, Shoshana Felman, and Geoffrey Hartman, all influenced by psychoanalysis and deconstruction. In the wake of critiques that deconstruction lacked ethical grounding, trauma theory repositioned textual analysis within questions of historical suffering. Caruth's *Trauma: Explorations in Memory* (1995) and *Unclaimed Experience* laid the foundations of literary trauma theory by arguing that trauma is marked by belatedness and by the failure of language to fully articulate experience. Literature, she suggested, can communicate trauma precisely through this failure, disrupting conventional narrative forms.

Felman and Laub's *Testimony* (1992) further shaped the field by emphasising the relational act of witnessing and the crucial role of the empathetic listener—an idea that extends to the reader of testimonial texts. The emergence of trauma studies thus reflects a collaborative, interdisciplinary convergence, drawing on literature, psychoanalysis, history, philosophy, and cultural theory to interrogate how traumatic events are remembered, narrated, and ethically engaged.

3. CONTEXTUALISING TRAUMA IN INDIAN ENGLISH FICTION

Trauma has become a central theme in Indian English fiction, offering writers a powerful lens through which to interrogate the

violent legacies of India's socio-political history. From colonial brutality and the cataclysmic Partition of 1947 to ongoing caste violence, communal tensions, gendered oppression, and displacement, trauma in this tradition is not only psychological but historical, political, and social. Fiction thus becomes a crucial space for articulating suffering that remains unrecorded in official discourse or national historiography. In the aftermath of Partition—one of South Asia's most traumatic ruptures—writers such as Khushwant Singh began documenting the human cost of communal violence. *Train to Pakistan* (1956) stands as an early landmark, depicting both the physical horror of mass killings and the emotional fragmentation they produce. In such narratives, trauma is not merely a backdrop but a haunting force that reshapes time, memory, and identity, inaugurating a sustained tradition of trauma writing in Indian English literature.

In the 1980s and 1990s, Indian English fiction expanded trauma narratives through experimental forms. Salman Rushdie's *Midnight's Children* (1981) and *Shame* (1983) used magic realism and metafiction to link personal and political trauma, while Amitav Ghosh's *The Shadow Lines* (1988) emphasised transgenerational memory of Partition and communal violence. Gendered and intimate traumas were foregrounded by Anita Desai, Shashi Deshpande, and Arundhati Roy, whose *The God of Small Things* (1997) mirrors the fractured nature of memory and abuse. Dalit writers like Bama and Meena Kandasamy highlight caste-based trauma, portraying structural violence as collective suffering. Across these texts, trauma shapes both narrative form and ethical engagement with history.

4. VOICING THE UNSPEAKABLE: TRAUMA, FICTION AND POSTCOLONIAL SUBALTERNITY

Throughout history, literature has served as a vehicle for representing human suffering, both real and imagined, raising

critical questions about the ethics of portrayal, the limits of narrative, and the role of storytelling in shaping collective memory. However, trauma, as opposed to human suffering, is specifically linked to a psychological condition that emerged and was formally recognized with the rise of Western modernity. Furthermore, the reproduction and interpretation of the “unspeakability” of trauma seems to be a recent development. So, the important question that arises here is how do we analyse the weight of the “unspeakable” when it comes to trauma? And what place might this idea hold in the way we talk about pain, memory, and healing?

Anne Whitehead argues that trauma can only be represented by mirroring its symptoms, producing narratives marked by fragmentation, repetition, and collapsed chronology. Because trauma is defined by its unspeakability, “trauma fiction” embodies a paradox: fiction seeks coherence while trauma resists articulation. This shift from medical to literary discourse raises ethical questions about representing suffering, identity, and agency. Contemporary writers respond by making visible historical traumas—war, slavery, incest, colonialism—while recovering silenced histories. To reflect the fractured nature of traumatic memory, they employ experimental forms, dissociative voices, and disrupted narrative structures drawn from modernist and postmodern techniques. Yet the term “trauma fiction” is paradoxical, since trauma is defined by its “unspeakability.” Cathy Caruth describes trauma as a rupture in comprehension, a “non-event” at the moment of its occurrence, grasped only belatedly through intrusive repetition. This belatedness destabilises temporal continuity and resists conventional narrative structures. Whitehead, extending Caruth, argues that trauma unsettles both individual experience and historical understanding, functioning as a haunting force that returns insistently. If trauma can be narrated at all, it demands experimental forms that reflect its disjointed temporality.

Contemporary fiction, therefore, often engages with haunted histories, where unresolved violence persists as spectral presence, challenging how cultures remember, interpret, and transmit historical truth.

Another seminal contribution to the study of trauma fiction is Laurie Vickroy’s *Trauma and Survival in Contemporary Fiction*, in which she examines how contemporary narratives engage with the representation of trauma. Vickroy highlights the complex ethical, psychological, and aesthetic challenges that trauma narratives pose for both writers and readers, as well as their broader cultural significance. In her study, Vickroy interrogates the intricate interplay between socio-cultural imperatives and the intimate dynamics of personal relationships depicted in trauma fiction, revealing how these narratives balance the demands of society with the inner emotional struggles of individuals. In the Preface, Vickroy writes:

Trauma narratives, I contend, are personalized responses to this century’s emerging awareness of the catastrophic effects of wars, poverty, colonization, and domestic abuse on the individual psyche. They highlight postcolonial concerns with rearticulating the lives and voices of marginal people, rejecting Western conceptions of the autonomous subject and describing the complex negotiations of multicultural social relations.

Vickroy argues that trauma is an “indicator of social injustice or oppression,” representing the ultimate cost of destructive sociocultural systems. Trauma narratives, she notes, reflect growing awareness of the psychological effects of war, poverty, colonisation, and domestic abuse. In postcolonial contexts, such narratives reclaim marginalised voices, challenge Western notions of the autonomous subject, and foreground the

complex negotiations within multicultural societies.

The term “fiction,” derived from the Latin *figere* (“to shape”), highlights the crafted and imaginative nature of narrative. Trauma, however, is a historical wound—material or psychic—raising the question of how fiction renders experiences that resist language. As Robert Eaglestone suggests, trauma becomes a “limit case” for representation, requiring ethical engagement and careful witnessing. The boundary between testimony and fiction remains unstable, shaped by narrative technique and the reader’s belief in truth. Pierre Janet’s foundational work shows that trauma fragments experience, remaining frozen in time until transformed into narrative memory, enabling integration and healing.

Caruth cautions that converting traumatic memory into coherent narrative risks diluting the precision and intensity that define traumatic recall. Rendering trauma into an easily understood story can deny its essential incomprehensibility and the shock it inflicts on understanding. Yet, she argues that the impossibility of a fully coherent narrative does not negate the possibility of transmitting truth. This truth may emerge through a refusal of conventional frameworks—an active, creative form of listening that accesses knowledge not yet shaped into narrative memory. Such resistance opens space for testimony that exceeds familiar modes of comprehension. Caruth stresses the ethical importance of developing new ways of reading and listening that can communicate not only what is intelligible but also what defies understanding, enabling genuine historical transmission. Lucy Bond similarly argues that trauma challenges referentiality; because literature embraces ambiguity and rhetorical instability, its very failures of representation make it uniquely capable of witnessing traumatic experience.

Caruth argues that literary language is uniquely suited to conveying experiences that

elude conventional memory, offering a mode of expression capable of registering what remains inexpressible through direct communication. She insists, however, on the ethical imperative of bearing witness, proposing that trauma can forge new forms of community by linking disparate historical experiences. Her notion of a “new kind of listening” enables a movement out of traumatic isolation, grounded not in what we already know but in what we have yet to recognise about our own ruptured pasts. Trauma thus becomes a connective tissue across cultures. Scholars similarly note that trauma can only be effectively represented through complex, often modernist or postmodernist forms. Felman and Laub’s invocation of Paul Celan—“the breakage of the verse enacts the breakage of the world”—captures how fractured narrative structures mirror traumatic disorientation, unsettling readers and resisting easy consumption while compelling deeper engagement with the difficulty of witnessing.

Scholars such as Stef Craps and Roger Luckhurst argue that dominant trauma theory privileges a modernist, Eurocentric, clinically derived model that sidelines non-Western experiences and narrative forms. Trauma, often conceptualised in Western traditions as a single, isolatable event treatable through individual therapy, reflects its origins in a white, Western context shaped by Freud and later psychiatric frameworks. This universalising approach, as Derek Summerfield warns, risks becoming imperialistic by devaluing indigenous knowledge systems. Postcolonial and non-Western narratives therefore intervene critically by foregrounding traumas rooted in colonialism, caste violence, racial oppression, ethnic cleansing, and displacement—experiences that exceed Western psychological models. These texts often centre subaltern voices and deploy alternative strategies such as fragmentation, silence, oral storytelling, and magical realism, reframing trauma as cultural, political, and collective. They also highlight how

agency is eroded within oppressive environments, requiring a reframing of trauma beyond Western clinical discourse and grounding it instead in local histories, communal practices, and nonhuman relations. Craps and Buelens' 2008 *Studies in the Novel* special issue underscored these gaps, noting trauma theory's focus on white Western subjects despite its stated cross-cultural aims. The challenge, then, is to interrogate and decolonise trauma theory while recognising diverse cultural understandings of suffering and healing.

In *Crazy Like Us*, Ethan Watters critiques the global spread of Western psychiatric models, showing how trauma is often "exported" to postcolonial nations as a ready-made diagnosis requiring Western therapy. Describing post-tsunami Sri Lanka, he notes that American victims tend to speak of something "broken" in the mind, whereas Sri Lankan survivors describe a rupture in their social and physical worlds—revealing how Western experts frequently misread culturally embedded experiences of suffering. Such interventions, Watters argues, can be damaging, exposing how an uncritical reliance on Western clinical concepts reinforces the limitations of empirical trauma theory.

Postcolonial scholars similarly warn against imposing Eurocentric models onto culturally distinct contexts, as doing so suppresses diverse forms of experiencing and expressing trauma. Stef Craps argues that decolonising trauma studies requires acknowledging non-Western traumas for their own sake and attending to the specific histories, contexts, and representational strategies that shape them. Yet a fully developed alternative framework remains elusive, underscoring the lingering dominance of Western theory. The structural violence faced by subaltern communities—rooted in race, caste, gender, and class—continues to be overlooked. Fanon's work remains foundational here: his accounts of racial objectification reveal how systemic

oppression inflicts enduring psychic wounds, illustrating the profound, culturally situated nature of postcolonial trauma.

Postcoloniality requires recognising not only colonialism's historical damage but its ongoing afterlives within post-independence nation states. As Ashcroft, Griffiths, and Tiffin observe, postcolonial societies remain subject to "overt or subtle forms of neocolonial domination," where new elites reproduce old hierarchies, making postcolonialism "a continuing process of resistance and reconstruction" (*The Post-Colonial Studies Reader* 2). Neil Bissoondath similarly notes that postcolonial nations often "mimicked the worst" of the coloniser, exploiting land and people in the same way (*A Casual Brutality* 200–201). Pramod K. Nayar terms this persistent inequality "postcolonial subalternization," where women, lower castes, and minorities become the new "Others" (Nayar 69; 100). Ranajit Guha defines subalterneity as "the general attribute of subordination... in terms of class, caste, age, gender and office" (*Subaltern Studies*, Preface vii). Drawing on Gramsci's original usage in the *Prison Notebooks*, the Subaltern Studies Collective expanded "subaltern" to analyse the structural marginalisation embedded within both colonial and postcolonial South Asia. In *Elementary Aspects of Peasant Insurgency in Colonial India* (1983), Guha states that peasant groups were not passive victims during the fight for the liberation of the Indian subcontinent, but were active agents of resistance during this struggle against the colonial rule. Calling these movements "subalternist" Guha defines the term "subaltern" in the Preface to *Subaltern Studies I: Writings on South Asian History and Society* (1982) as follows:

The word "subaltern" in these pages stands for the meaning as given in the Concise Oxford Dictionary, that is, 'of inferior rank'. It will be used in these pages as a name for the general attribute of subordination in South Asian society

whether this is expressed in terms of class, caste, age, gender and office or in any other way. (vii)

The post-independence nation-space is therefore marked not only by the exploitation of peasants and labourers or the massacre of Dalits, but also by the continued marginalisation of religious minorities, the subjugation of women across social classes, and the victimisation of sexual subalterns.

Gayatri Chakravorty Spivak's "Can the Subaltern Speak?" (1988) argues that the subaltern—especially subaltern women—are structurally prevented from speaking or being heard within dominant power systems. Critiquing both Western intellectuals and the Subaltern Studies Collective for ignoring gender, Spivak shows how hegemonic structures mute and mediate women's voices. This insight reframes subaltern trauma as a site of deep contestation: postcolonial subjects continue to face neo-colonial oppression by new elites, making their marginalisation ongoing rather than historical. Because trauma itself resists linear expression, the subaltern's suffering is doubly silenced—by systems of power and by the limits of language.

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