

Trauma, Ethical Dilemma and Ethical Choice in Barker's War Novels¹

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Abstract In Barker's war novels, she depicts the war-induced trauma sustained by soldiers and war journalists on the battlefield, by military doctors, veterans, volunteers and civilians at home. These characters are plunged into an ethical dilemma and are obliged to make ethical choices when confronted with their plight. In time of war, trauma is inevitable and many characters in Barker's works suffer a lot when making ethical choices. By elaborating on the many unbearable trauma symptoms and the ethical dilemma her characters are confronted with and their ethical choices, Barker intends to expose the cruelty of wars and trauma engendered by wars and tries to remind people of the severe impact of war-induced trauma on individual lives, and calls on people to strive for peace in this world.

Key words trauma; ethical plight; ethical choice

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Pat Barker, a well-known contemporary British novelist, has been exploring the theme of trauma in her oeuvre except the last one. Her *Regeneration* trilogy, which "extended the artistic boundaries of the war novel" (Monteith 147), has secured her a place on the map of contemporary British literature. By writing from a strongly feminist perspective about the crushing effects of war-induced trauma and the ethical plight in which soldiers, war journalists, military doctors, volunteers and civilians are situated, and the ethical choices they are forced to make, she has

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successfully combined the trauma of both men and women, working-class people and professional people, those serving on the battlefield and staying at home front, and in the Great War and WWII, allowing it to converge at the same platform.

Following the success of the *Regeneration* trilogy, she has been showing consistent interest in writing about war trauma in her later war novels *Another World*, *Double Vision*, *Life Class*, *Toby's Room* and *Noonday*. In the eight novels, she explores the war-induced trauma sustained by soldiers fighting on the battlefield, by military doctors, veterans, volunteers and civilians at home. These characters are plunged into an ethical dilemma and are obliged to make ethical choices in face of their plight. In time of war, trauma is inevitable and many characters in Barker's works suffer a lot no matter what ethical choices they make. Owing to her achievements in contemporary British fiction, Barker was granted the Booker Prize in 1995, the Author of the Year Award in 1996 and Commander of the British Empire in the New Year's honours list in 1999.

Psychosomatic Responses and Body Language of Masculine Complaint

In Barker's war novels, she has monumentalized the First and the Second World War and the effect on the British people, and some symptoms of trauma have become something common among almost all the traumatic. In their traumatic encounter with wars, most characters in her fiction have contracted different symptoms, which have brought about quite a lot of unspeakable pains upon them. Their physical reaction to war-related trauma is another strong accusation they make against the cruel wars, in which their guilt of participation cannot be purged and mental sufferings cannot be alleviated.

In the *Regeneration* trilogy, quite a number of traumatized soldiers who receive medical treatment at the Craiglockhart Hospital suffer from different mental or physical symptoms generated by bearing witness to many disturbing scenes on the battlefield, of which psychosomatic responses are the most prominent. The most representative cases of psychosomatic response in the trilogy can be found in both Burns' and Wansbeck's unbearable experiences on the battlefield. Burns "had been thrown into the air by the explosion of a shell and had landed, head-first, on a German corpse, whose gas-filled belly had ruptured on impact. Before Burns lost consciousness, he'd had time to realize that what filled his nose and mouth was decomposing human flesh". Henceforward, he vomits severely whenever he tries to eat as "that taste and smell recurred" and he "relived the experience, and from every nightmare he awoke vomiting" (Barker, *Regeneration* trilogy 19). Burns' experience of being thrown up into the air by the explosion and landing head-first into the open

and rotting stomach of a German corpse at first brings him a sense of disgust against the terrible smell of the rotten corpse, while later his mental aversion results in his physical response, that is, vomiting. The shift of mental feeling into a physical response is termed psychosomatic response, which is one of the most typical symptoms sustained by Barker's characters in the trilogy.

Like Burns whose experience in the war makes him suffer from a psychosomatic response, Geoffrey Wansbeck, who murders a German prisoner for no better reason "than that he was feeling tired and irritable and resented having to escort the man back from the line" (Barker, *Regeneration* trilogy 443), is also harassed by the same sufferings. He has had no remorse over his murder of the German prisoner for eight months, however, when he is in hospital recovering from a minor wound, he starts to "suffer from hypnagogic hallucinations in which he would wake suddenly to find the dead German standing by his bed" (Barker, *Regeneration* trilogy 443). Besides, the ghost of the German prisoner in his hallucination becomes, visibly and olfactorily, more and more decomposed with each visit. What's worse, he starts to feel that he himself reeks of the same decomposing smell. On Wansbeck, the guilt of having murdered an innocent man has been transferred to physical sufferings, those of hallucinating and feeling his body stink. Both Burns and Wansbeck's experiences result in a weird condition change physically and make them suffer both physically and mentally.

Why they contract and suffer from such an unbearably painful symptom can be illustrated with Freud's earliest idea concerning the symptom formation of trauma in *Studies in Hysteria*, in which he thinks "an overpowering event, unacceptable to consciousness, can be forgotten and yet return in the form of somatic symptoms or compulsive, repetitive behaviours" (Berger 570). This kind of return is termed by Freud as "repetition compulsion". In essence, the psyche constantly returns to the scenes that arouse the unpleasant feelings because, by restaging the traumatic moment repeatedly, it hopes belatedly to process the inassimilable material, to find ways of mastering the trauma retroactively. Freud's theory on trauma symptoms explains well why Burns and Wansbeck's disturbing experiences in the war repeatedly and compulsively bring about their somatic symptoms, almost driving them to the brink of breakdown. Their symptoms are transferred from mental to physical reaction, making them acquire a very different feeling of their trauma, sensed by one sensory organ to another.

Burns' being catapulted headfirst into the decomposed body cavity of a corpse should cause his olfactory problem, however, this experience later leads to his gustatory problem, causes his nightly vomiting and hence emaciates him, making

him become “merely the skin-and-bone casing for a tormented alimentary canal” (Barker, *Regeneration* trilogy 19). While Wansbeck’s killing of a German guy not only brings his hypnagogic hallucinations of repeatedly seeing the man standing by his bed, but also results in his olfactory problem of feeling himself emanating the same stink. These psychosomatic responses of the traumatic combatants are physical reactions to psychic trauma, revealing from another perspective the horror of battlefields and the severity of war-induced trauma that soldiers have to sustain both physically and psychologically.

Apart from psychosomatic injury, Barker also depicts many various symptoms that appear on the traumatized soldiers whose agonizing war experiences bring about many sequelae, such as speech loss, stammering, nightmares, insomnia, hysteria, paralysis and so on. These sufferings of the returned men, as Brannigan argues, “constitute what Showalter calls the ‘body language of masculine complaint’ against the demands placed upon them in the war” (Brannigan 103). Men are commonly considered strong, tough and therefore should not complain or shed tears in face of difficulties, danger or even death. However, upon being exposed to so many bloody deaths and relentless slaughters on the battlefield, however tough and firm a man is, he can hardly acquire an internal tranquility and remain the same as before he fights in the war. The reactions of the returned men to trauma are involuntary expressions of protest: “Mutism, paralysis, stammering, blindness, deafness, nightmares, insomnia—these are the involuntary expressions of dissension from the war and, Barker implies, the social structures and ideological forces which precede the war (Kolk 106-107)”. The mutism of the combatants suggests something that should but cannot be uttered: “Mutism seems to spring from a conflict between wanting to say something, and knowing that if you do say it the consequences will be disastrous. So you resolve it by making it physically impossible for yourself to speak” (Barker, *Regeneration* trilogy 87). When trauma cannot be uttered, the only way to release one’s pain is to work it through by means of other symptoms.

Without a cathartic means to drain away their trauma, the severely traumatized men can do nothing but resort to “mutism, speech disorders, blindness and deafness” to lodge a complaint against the inhumane war. Thus, to reduce their sufferings of their agony and torture is to refuse to talk, see and remember, as in the cases of many shell-shocked soldiers: “We don’t remember, we don’t feel, we don’t think... By any proper civilized standard, we are objects of horror” (Barker, *Regeneration* trilogy 532). The response of veterans to their trauma is just as what Prior writes in his diary after he returns to the front in *The Ghost Road*: “Too close to deaths ourselves to make a fuss. We economize on grief” (Barker, *Regeneration* trilogy

570). If grief could be economized, what else could not be? Words and memories could be economized too. In this sense, the best way to alleviate one's trauma, hinted by Barker, is to acquire aphasia so as to avoid talking about his trauma, go blind in order not to see the hallucinations, and develop amnesia so that he cannot recall his memories of the war. Through her pen, witnesses of unspeakable traumas are reduced to silence or speech disorder. Her characters that are involved with wars and thus suffer mentally are made powerless and hopeless.

Mutism and speech impediment seem to be two symptoms common to most returned veterans. There are quite a number of soldiers who contract speech loss or impediment in Barker's war novels, for instance, Geordie, Stephen, Prior, Rivers, Callan and so on. The most impressive description of mutism is centered on one severely traumatized man Callan in *Regeneration* as the process to restore him back to speech is so disturbing. He has lost the ability to speak after being shell-shocked. When he is sent to the hospital to be cured of his aphasia, Dr. Yealland applies electroshock on him so as to force him to articulate a sound. The painful curing process of Callan is a shocking scene to be witnessed, which lasts several hours without stopping until he cannot bear the torture of the electroshock and finally utters "'ah' at a normal pitch, then other sounds, then words" (Barker, *Regeneration* trilogy 205). The cruelty carried out heartlessly on the mouth of Callan is therefore referred to, by Rivers, as "an oral rape" (Barker, *Regeneration* trilogy 208). After the continuous electric treatment, the mutism of Callan is cured at last.

When Callan is asked about whether he is happy about being able to speak after the use of electroshock, he smiles but remains silent. This annoys Dr. Yealland as his original intention is to restore his patient Callan back to speech. When Callan responds to his question in silence, it seems that his efforts have been in vain. Therefore, he applies electrode to the mouth of Callan, which stops Callan's smile immediately and elicits the eventual speech from him as desired. Here lies the irony of it as the mute patient is restored to articulate by force. One can never forget the terrible process of how Doctor Yealland restores Callan to speak. The mutism of Callan is an accusation against the brutal war and the menacing harm that it has brought upon the combatants. His refusal to speak can be regarded as a body language of masculine complaint against the brutalities he has experienced in the inhumane war and a physical protest waged upon the military authority that has called on and sent him and many other young men of his age to fight for the nation.

Prior, the major protagonist throughout the trilogy, contracts speech impediment and refuses to talk about his war experiences with the military psychotherapist W. H. Rivers when he is first sent to the hospital for treatment.

The first day when Dr. Rivers goes to see him, he keeps his mouth shut and refuses to speak, therefore, “getting a few simple facts out of him was like extracting wisdom teeth” (Barker, *Regeneration* trilogy 182). When he is obliged to speak, he “answered questions in monosyllables and finally, when asked whether he felt physically fit for service, said nothing at all, simply stared at Huntley, unable either to claim that he was ill or to deny it” (Barker, *Regeneration* trilogy 182). He rejects any communication with anybody in the hospital, and the only way for him to talk to his doctor is through writing on the paper. Later on, when situations turn out to be better, he stammers. Mutism is the most serious and typical symptom for traumatized men to display their rebellion and anger and voice their protests, while stammering becomes the second most serious one. That is why Prior at first remains mute and later on stammers. Stammering shows his reluctance to speak about his unbearably painful past. In Barker’s novels, combatants are not the only people who contract mutism or stammer, doctors who treat the traumatized men are not immune to the problem. Rivers, a military doctor who treats patients at the hospital, is “infected” by the traumatic symptoms of his patients, “He was getting all the familiar symptoms. Sweating, a constant need to urinate, breathlessness, the sense of blood not flowing but squeezing through veins. The slightest movement caused his heart to pound” (Barker, *Regeneration* trilogy 124). Apart from these symptoms, he stammers a lot. After witnessing the brutal experiment carried out by Dr. Yealland on Callan, Rivers responds to another story told by Yealland of how he cures an officer patient who stammers badly in one session, by “beginning to stammer rather badly. And whenever he’d hesitated over a word, he’d sensed Yealland calculating the voltage” (Barker, *Regeneration* trilogy 208). Unlike Geordie and Prior who stammer to avoid being understood, Rivers stammers for he has been traumatized by what he has observed and witnessed as a doctor.

Callan, Prior, Rivers remain mute or stammer in face of the unspeakable past, and Geordie, Stephen, Kit and Paul are among the many men who also keep silent. In *Another World*, the 101-year-old veteran Geordie remains silent about his war experiences, especially about his extremely gut-wrenching memories of how he stabs to death his severely wounded brother by his own hands: “As a young man just back from France, Geordie refused to talk about the war, and avoided all reminders of it...Refused all questions. When obliged to speak stammered so badly could barely make himself understood” (Barker, *Another World* 82). Geordie’s silence about his past reveals his pain of touching upon the topic of fighting in the war, and when he cannot avoid speaking about it, he chooses to stammer, which makes his words hard to be comprehended. It is clear that he does not want to be

understood as he deliberately keeps his past a secret from others. Stephen, a war journalist in *Double Vision* who reports cruel atrocities on the battlefield, is heavily traumatized and also refuses to talk about his trauma, making himself something like a clam. His silence about his war experiences and his refusal to communicate with even his wife results in their drifting apart, and in consequence her extramarital affairs and eventually a divorce. In *Life Class*, like other men who keep silent about their past, Paul, an art student who volunteers for the Belgian Red Cross during the First World War, does not want to talk about his work at the war hospital with his girl friend when the latter pays him a visit in France. He locks his pains inside his heart without confiding to her. Kit and Paul in *Toby's Room* both take part in WWI and their traumatic war experiences have caused great mental sufferings to them. They both refuse to talk about their past and keep it a secret to other people.

Many cases of combatants refusing to talk about their war experiences or stammering in Barker's works are not written as a coincidence. Instead, their archetypal models are Barker's step-grandfather who refuses to speak of his wartime experiences and her stepfather who has developed speech disorder that has prevented him from talking about his unspeakable past in the war. Their silence or speech impediment is the only means for them to avoid talking about the past which is so agonizing and beyond endurance that they simply choose not to speak.

The Return of Traumatic Memories: Ghosts and Nightmares

The horrors of trench warfare and bombardments change the lives of Barker's veterans, sometimes irreparably, as they experience a variety of symptoms including hallucinations of seeing reappearing dead comrades, terrifying dreams, and hysterical symptoms. In her war novels, Barker "draws on and revises the literary genre of the ghost story, so that the specters that haunt the soldiers represent a form of psychological possession" (Whitehead 15). Many of the soldiers in her war novels are haunted by their own particular ghosts. The one who has been haunted frequently by hallucinations is Siegfried Sassoon who often sees weird scenes of mutilated corpses not only at night but also during the day. His hallucinations do not end and recur when he appears in the next novel *The Eye in the Door*. This time, instead of seeing mutilated and unrecognised corpses, he often sees his already dead comrade-in-arm Orme, "He woke to find Orme standing immediately inside the door. He wasn't surprised, he assumed Orme had come to rouse him for his watch...After a while he remembered that Orme was dead" (Barker, *Regeneration* trilogy 128). Even when six months have passed, the sight of Orme and some other dead men in his hallucinations still lingers with him. Still in *The Ghost Road*, his

hallucination continues with a sense of guilt when he is visited by the ghosts of his dead comrades who, he thinks, come and question him for not returning to fight at the front: "At Craiglockhart, Sassoon, trying to decide whether he should abandon his protest and go back to France, had woken to find the ghost of a dead comrade standing by his bed. And thereafter, on more than one occasion, shadowy figures had gathered out of the storm, asking him, 'Why was he not in the line? Why had he deserted his men' (Barker, *Regeneration* trilogy 554)"?

Sassoon's hallucinations have been torturing him day and night until he finally returns to the front. While in *The Ghost Road*, Wansbeck is frequently haunted by the ghost of a German prisoner whom he has murdered. Every night, he wakes up from his nightmare, only to see the dead guy standing by his bed and therefore feels extremely horrified. Not only combatants are haunted by ghosts, the military psychiatrist Rivers, in treating his patients, finds himself unable to dismiss the reality of their ghosts. At the end of the trilogy, he also sees the ghost of the witch doctor Njiru in his hallucinations whom he meets in Melanesia, and it seems that he is marching on the "ghost road" as well. His contraction of the same symptom of having hallucinations can be demonstrated theoretically by McCann's theory on the countertransference of trauma: "Trauma is contagious. In the role of witness to disaster or atrocity, the therapist at times is emotionally overwhelmed. She experiences, to a lesser degree, the same terror, rage, and despair as the patient. The phenomenon is known as "traumatic countertransference" or "vicarious "traumatization" (McCann 131-150). And Herman's statement well explains why Rivers is also infected by the same traumatic symptoms of the patients he treats, "Hearing the patient's trauma story is bound to revive any personal traumatic experiences that the therapist may have suffered in the past. She may also notice imagery associated with the patient's story intruding into her own waking fantasies or dreams" (Herman 140).

Sassoon's ghosts come from his survivor's guilt, while for Wansbeck who has been seeing the ghost of the German prisoner he murders for no good reason, the spectre embodies his unresolved guilt over the act of killing. A man killed cannot be resurrected and things done cannot be undone. Since he has no way to redeem the murder he commits and compensate for his doings, he can do nothing but feel guilty all the time. Thus, the ghost of his heart appears to harass him. To Rivers who treats shell-shocked patients, the guilt derives from his ambivalent feelings of whether he should restore the disturbed soldiers to psychological fitness to return them to the front to continue fighting and be slaughtered.

Ghosts, as Barker says in an interview with Mark Rawlinson, are "metaphors

for whatever in the past we haven't managed to resolve" (Rawlinson 166). Just as she says, ghosts represent something dreadful in the past that cannot be resolved. The ghosts that appear in the hallucinations of her characters stand for something they do not want to or dare not disclose to others, namely, their sense of survivor guilt, guilt derived from murder and secret from their dreadful past. World War I is the first war that has rendered such a tremendous disaster to mankind, especially to the European people, thus it is called by Ted Hughes as the "national ghost".

In Barker's war novels, the sleep of soldiers or war journalists is frequently intruded by nightmares in which they are forced to be brought back to the "rememory" of traumatizing situations, and the visceral and repetitive reliving of trauma is represented in brutal memories. The most typical nightmares depicted by Barker are those of Stephen's and Geordie's. In *Double Vision*, Stephen, a traumatic war journalist committed to the exposition of brutalities, is frequently haunted in his nightmares by the disturbing scenes he has witnessed, of which the focal and routine image is one of the raped and murdered girl he finds in Sarajevo. Ever since he discovers the bloody death of the girl in Sarajevo, he cannot escape from the involuntary compulsion to recall the wretched scene in his nightmares. When he sleeps at night, he keeps thinking about the girl and how "her eyes had looked up at him", and he feels "her head was beside his on the pillow". What makes it worse, when he rolls over to get away from her, he found "her body underneath him, as dry and insatiable as sand" (Barker, *Double Vision* 55). This illusion of having the girl underneath his body brings him great fright even after he wakes up, "He daren't switch the light on, because in this state he found light more frightening than darkness. All the while the details of the dream went on invading his waking mind. Being buried alive ... he was too afraid the dream would return" (Barker, *Double Vision* 72).

Stephen suffers from the great torture of being repeatedly returned in his nightmares to the scene that arouses his trauma. It is during the nightmares that he experiences the fright of being an eyewitness of such violence. The horror that goes with his nightmares is indescribably disturbing, which always makes him wake up in extreme terror. Freud's comment on the transformation of repressed memories in the form of nightmares well describes the situation Stephen is situated in: "Dreams occurring in traumatic neuroses have the characteristic of repeatedly bringing the patient back into the situation of his accident, a situation from which he wakes up in another fright" (Freud 13). His rememory of this raped and murdered girl is so consistent and persistent that he relives the frightening event in the form of traumatic dreams. With regard to the transformation of trauma in the form of

nightmares, Allan Young has also expressed similar views: “It (trauma) permits the past (memory) to relive itself in the present, in the form of intrusive images and thoughts and in the patient’s compulsion to replay old events” (Young 7).

Like Stephen who is severely tormented by the same nightmare, Geordie, a World War I veteran in *Another World*, is always molested by the recurrent nightmares of seeing the horrifying and screaming mouth of his own severely-wounded brother Harry, into whose heart he stabs a knife to stop his pain. He repeats this nightmare even decades after the end of the war, especially on the verge of his death. To him, the effect of the Great War shows no sign of being laid to rest, especially when the screaming mouth of his dead brother keeps recurring to trouble him in his nightmare: “Harry disappears, bit by bit, like the Cheshire cat, until only the screaming mouth is left. Night after night he feels himself falling towards that mouth” (Barker, *Another World* 146). To him, trauma is like the screaming mouth of Harry that is big enough to swallow him.

In displaying soldiers’ trauma, Barker adopts the striking image of “mouth” which becomes the symbol of trauma in her war novels. In *Regeneration*, the tortured “mouth” of the speechless Callan being treated by Dr. Yealland with the use of electroshock therapy lingers in Dr. Rivers’ nightmares, “He was in the electrical room, a pharyngeal electrode in his hand, a man’s open mouth in front of him” (Barker, *Regeneration* trilogy 207). The image of Harry’s screaming mouth in *Another World* also becomes the symbol of trauma as it represents pain and sufferings of a dying man. In her presentation of trauma in *Double Vision*, Barker also uses the singularly disturbing paintings of Goya to represent the carnage of war and an outraged conscience in the face of death and destruction. “Goya is depicted to be exemplary of an artist committed to the ethical representation of war and terror...The mouths in his paintings cry out to be heard, and produce a roar which cannot be ignored” (Brannigan 159). By choosing the paintings of Goya that become testimonies of the horrors of war, she wants to form a contrast between the terror of carnage represented in Goya’s paintings and the terror of the wars Stephen covers. The images of the “mouths” in Goya’s paintings, which also symbolize man’s pain and trauma, have become one arresting feature in her war novels that cannot be ignored or forgotten. When people are in pain, they will cry out by instinct. By creating different “mouths” that have become the equivalent of trauma, she successfully conveys both the physical and mental sufferings of her characters.

The nightmares of Geordie, Stephen and Prior are all the results of the belated responses to the original or violent events they experience in the past, which do not traumatize them right away, but return belatedly to harass them in the form of

nightmares. Since trauma refuses to be put to rest and keeps surfing on the minds of war-ravaged men, it will have to be relived repeatedly in the form of nightmares and hallucinations. No matter how hard the traumatized men in Barker's and Heinemann's works struggle to go through a quagmire of painful feelings, they cannot fight back the demons that return to haunt them. Their waking nightmares have become living fossils of memories they are forced to be confronted with. To relieve the horrors is just like tearing open old wounds before they heal up. Thus, these returned men have to sustain the endless trauma as Prometheus has suffered, waiting for the visit of an eagle in the forms of ghosts and nightmares every day.

Ethical Dilemma and Ethical Choices

In writing about war-induced trauma, Barker not only focuses on their various psychosomatic symptoms and their hallucinations and nightmares, but also penetrates in depth into their hearts so that readers can detect how painful they feel when they are caught in an ethical dilemma and forced to make difficult ethical choices. In her war novels, different characters are portrayed to be trapped in this type of dilemma.

In *Regenerations*, Sassoon, as a military officer, is situated in an ethical dilemma of whether to continue to advocate fighting and encourage his men to fight bravely on the battlefield or to voice a strong protest as he is fully aware of the absurdity of the war that has cost lives of millions of young people. On the one hand, he not only has the responsibility to preach and emphasize the glory and honour of fighting for his own country, but also has the duty to watch over his men and ensure the minimum casualties of them on the battlefield. However, on the other hand, after witnessing and enduring the suffering of the troops, he can no longer be a party to prolong these sufferings for ends which he believes to be evil and unjust. (Barker, *Regeneration* trilogy 5). He is thus trapped in the ethical dilemma and feels agonized at heart. Confronted with this plight, he, however, has to make an ethical choice concerning this.

As Sassoon protests vehemently and poignantly against the prolongation of the cruel war, he is sent as a patient to the Craiglockhart hospital with the other shell-shocked soldiers. When in the hospital, he feels guilty of not staying with his men at the front. There he starts to realize that the only result of his protest has been to remove him to a place of greater safety, while his men still have to encounter what he believes to be unnecessary danger at the front. Therefore, his mental struggles oscillate between responsibility and guilt, placing him in a dilemma. His dilemma of whether to go back to fight in the senseless and cruel war or to stay away from

it causes him to have hallucinations in which he sees the dead men coming into his room to question him. At last his sense of duty triumphs over his negative emotions against the war, and he finally volunteers to return to battle, back “to the sausage machine” (Barker, *Regeneration* trilogy 214) although his opposition to the war has not changed. For him this is really a hard decision to make. Sassoon’s original “‘solution’ was to tell himself that he was going back only to look after some men, but that formula would not survive the realities of France”, for “however devoted to his men’s welfare a platoon commander might be, in the end he is there to kill, and to train other people to kill” (Barker, *Regeneration* trilogy 219). Therefore, there is only one very obvious way out, that is, the sense of duty as a commander wins over Sassoon’s strong objection to fighting in the war, and he has no other desirable choices but to choose to go back “with the intention of being killed” (Barker, *Regeneration* trilogy 219) . Confronted with such a difficult ethical choice, he is forced to make a decision to “support” the war and return to the battlefield, only to be killed at last.

Rivers, as a psychiatric doctor responsible for curing the shell-shocked patients in the *Regeneration* trilogy, is confronted with no less mental struggles than Sassoon. He, in treating patients suffering from different symptoms of ‘shell shock’, is also launched into a paradoxical ethical predicament of duty and guilt. Not long after *Regeneration* begins, Rivers is seen to be trapped in a predicament when he treats Sassoon, a “patient” who does not suffer from war neurosis, but anti-war neurosis. His talk with Sassoon shows his inner struggle, “You realize, don’t you, that it’s my duty to... to try to change that? I can’t pretend to be neutral” (Barker, *Regeneration* trilogy 16). On the one hand, he bears witness to the enormous trauma his patients endure and hopes to exorcise the ghosts in their hallucinations or nightmares. While on the other, he is caught up in the ironies of his situation: He is only too aware that his job is to make men “sane” enough again to return to the trenches, which precipitates their breakdowns in the first place. In treating his patients, Rivers’ role is both a listener and witness of their testimonies, pains and sufferings on the battlefield, hence he is infected by the contagious symptoms suffered by his patients. Oscillating and struggling between his conscience and his obligation of being a military psychotherapist, he contracts the same psychological crisis, and hence later he begets PTSD as the other shell-shocked soldiers and acquires similar symptoms of having hallucinations and seeing ghosts. The acquisition of traumatic symptoms is the outcome of the transmission of trauma among people. As Luckhurst says, trauma appears to be worryingly transmissible, which leaks between mental and physical symptoms, between patients and doctors

via the mysterious processes of transference or suggestion, and between victims and their listeners or viewers who are commonly moved to forms of overwhelming sympathy (Luckhurst 3).

Being a scholarly and considerate man who has been a social anthropologist before the war, Rivers has to wrestle with his own conscience and sub-conscious as much as with those of his patients. His dilemma is enlarged when he has to sign to discharge the physically and mentally fit pacifist Siegfried Sassoon to the battle. He is rather anguished as he is fully aware of the disastrous effect on the latter, "He wasted no time wondering how he would feel if Siegfried were to be maimed or killed, because this was a possibility with any patient who returned to France" (Barker, *Regeneration* trilogy 218). He understands the real intention of Sassoon to return is to go back and be killed. "If death were to be denied? Then he might well break down. A real breakdown, this time" (Barker, *Regeneration* trilogy 219). Restoring the officer Sassoon who objects to the war to "mental fitness" and discharging him to the front is equal to a doctor leaving a patient to die without taking any measures. However, he has no other alternatives but wait for it to happen, "watching" him killed or break down completely if he survives. His role of being both a savior and an "accomplice" is where his dilemma lies and how his trauma is derived from.

Rivers' ethical dilemma comes from his inner struggle between duty and guilt, just as what has been remarked by Vickroy, "Military therapists faced conflicts between their obligations to soldiers and to the war effort; the emphasis was on sending men back into combat" (Vickroy 16). Being a military psychotherapist, he has the responsibility to abide by the rules stipulated by the military authority as it is his duty to do so. However, his job of curing shell-shocked patients is against his conscience as he is completely aware of the possible tragic outcome for those returned men who will be sent back to fight in the war again if they are restored to suitable mental sanity. His dilemma reflects what Luckhurst remarks, "Many of those treating shell shock discovered that military psychiatry was an impossible profession, caught between contradictory imperatives of cure and fitness for return to service" (Luckhurst 51). Difficult as this ethical choice is, Rivers has to decide which choice to make. He is forced to make an ethical choice to sign on the paper to discharge Sassoon to the battlefield. Doctors who have conscience will all think it a difficult and painful choice to make.

Another figure who is also trapped in an ethical dilemma between his duty and guilt in his work is the war journalist Stephen in *Double Vision*. In this novel, through Stephen's memories and Ben's photos taken on the frontline, Barker leads

her readers into a brutal and atrocious modern world: the attack on the twin towers in the U.S. on September 11, the rape and murder of a young girl in Sarajevo, the execution of innocent civilians on the modern battlefield in Bosnia and so on. Stephen is strongly affected by the destructive effect of modern wars and cannot escape from his inner shadows caused by reporting wars and thus becoming an eyewitness to the wartime atrocities. His presence and witness of the cruel murders and brutalities on the battlefield make him feel complicit in the war crimes. When he views the photograph of the nameless raped and murdered girl, he thinks, "it was difficult not to feel that the girl, spread-eagled like that, had been violated twice" (Barker, *Double Vision* 121). After his colleague Ben is shot while taking photos of the Soviet tanks in Afghanistan, he feels heart-broken. When he returns to pay a visit to Ben's widow, he finds in the study more photos taken by Ben earlier. The sight of these photos has again brought him back to the traumatic past in Afghanistan, "Further along, a man's face, distorted with anger, one hand half covering the lens. Another was of an execution. A man on his knees staring up at the men who are preparing to kill him" (Barker, *Double Vision* 123). Although he has never shot or killed any man on the battlefield, he shares the same kind of trauma as those soldiers who fight and kill in the war, which is as Cole says, he returns from the wars "in vexed and complex ways" (Cole 187).

It seems to him that reporting the brutal violence is being complicit in committing murder and as a result has made him feel agonized. His trauma of being a witness to the brutalities in the wars conforms to what Jenny Edkins says in *Trauma and the Memory of Politics*: "Witnessing violence done to others and surviving can seem to be as traumatic as suffering brutality oneself. Here a sense of shame is paramount. The survivor feels complicit in the betrayal perpetrated by others (Edkins 4)". Stephen feels exactly the same as what has been remarked by Edkins to be complicit in violence, regarding himself as an accomplice in the war crimes committed by others simply because of his mere presence at the spot of the death. On the one hand, it is his job to report what he has watched on the battlefield, true and real. However, on the other hand, he doubts about the ethical problem of what and how to report. As a result, he lingers between his duty and guilt, and questions himself whether it is morally justifiable for him to report what he has seen: "It's the argument he's having with himself, all the time, between the ethical problems of showing the atrocities and yet the need to say, "Look, this is what's happening" (Barker, *Double Vision* 119). His sense of guilt gnaws at his heart, plunging him in a real predicament. What's more, as he survives the death of his colleague Ben, feelings of survivor's guilt and unacknowledged grief and

anger come together. At last, this pain derived from his dilemma is so enormous and beyond his endurance that he chooses to give up his job and return to the peaceful pastoral to heal. When having to make an ethical choice to continue to witness atrocities on the battlefield and report them or to stop being an eye-witness of all these pains, he chooses the latter. The choice he has made is finally able to restore him to mental peace. However, his colleague Ben is not as lucky as him for Ben has been shot to death when he ventures his life to take photos of the Soviet tanks on the battlefield. A lot of war journalists also feel traumatic and feel it hard to make a choice. If they continue to report on the battlefield, they will be obliged to witness war atrocities and bear pains and trauma induced by being an eye-witness. However, if they stop reporting, they will also feel guilty as it is their job and duty to report what they have witnessed on the battlefield. No matter what choices they make, they will be traumatized.

In *Life Class*, the art student Paul is also thrown into an ethical dilemma between his job and guilt. When the First World War breaks out, Paul shows great enthusiasm as the other British civilians and joins in the war as a volunteer for the Belgian Red Cross, tending on the mutilated, dying soldiers from the front line. He has become an eyewitness of many disturbing scenes: "He went to one hospital where there were five hundred men lying on the straw, covered in piss and shit—some of them hadn't had their wounds dressed in a fortnight. No anesthetics, no disinfectant, nothing. Whole place stank of gangrene" (Barker, *Life Class* 119). Watching the severely wounded soldiers left to survive for themselves due to lack of drugs or medical services makes him feel grieved. His heart aches a lot whenever he is exposed to scenes of bloody deaths. His trauma derives not only from bearing witness to the pain, but also from his reluctance and even resentment of taking care of the wounded and watching them return to the front to be killed again after their recovery, "The staff resented having to nurse somebody back to health in order for him to be shot. Obviously, this might be the fate of many of the patients, but only on the battlefield" (158). He, just like the military doctor Rivers in the *Regeneration* trilogy, is also plunged into an ethical plight of whether to save the wounded or not for he is also fully aware of the tragic outcome for them. However, as a volunteer, his duty is also to help tend on the sick and help them recover. He has to make a choice when confronted with the dilemma of whether to help save the traumatic soldiers or not. His experience as a volunteer has changed his life and mindset so much that by the time he returns home, Paul must confront not only the impossible challenge of how to express all that he has seen and experienced, but also the fact that life and love will never be the same for him again. Memories of his war

experiences prevent him from living a normal life as before.

Toby and Elinor, brother and sister in *Toby's Room*, fall in love with each other and develop incestuous love between them. Their love is against morality and therefore they are situated in an ethical plight when they cross the border of incest. They realize that it is against ethical norms to have this kind of love between them, so they feel extremely painful after having sex with each other and have to make an ethical choice to stop or continue their love. After many times' inner struggle and conflict, they finally decide to be separated from each other, with Toby going to join the army in the First World War and Elinor working a volunteer at the home front. The ethical choice they make is a compromise with the social norms and allows them to return to their normal life again, though their life will never be the same as before after all this. To Elinor, the incestuous love between Toby and her "was a catastrophe that had ripped a hole in the middle of her life" (Barker, *Toby's Room* 10).

Toby, while he is working as a doctor at the battlefield, bullies a horse boy by "raping" him. His behavior is witnessed by Kit and reported by him to the Padre. Toby is then given two choices: to die at the battlefield or to be charged at the military court. In order to avoid the shame of putting his family through all this, Toby makes up his mind to commit suicide at the battlefield. He takes Kit to go with him, intending to kill him at the same time. But when he is pointing his revolver at Kit, he hesitates for a while. He is faced with an ethical choice: whether to kill his "enemy" Kit for reporting him or to let him go. As a man of compassion and conscience, he finally lowers his revolver and puts it in his mouth and blows the back of his head off. The ethical choice he makes is to kill himself but not Kit who reports him to the Padre, and to bring an end to his shame.

It is obvious that when doctors, soldiers, volunteers are confronted with duty and guilt, they will make up their minds to choose duty over guilt though the choice is not an easy one to make.

By means of her seemingly unsentimental narration of the unspeakable traumatic experiences of people living close to the margins of survival, Barker brings to light the trauma and ethical dilemma of many people whose trauma, as Peter Childs discloses, "remains in the collective memory as a persistent traumatic experience that has been insufficiently addressed or acknowledged" (Childs 62). Through the cases of Sassoon, Rivers, Stephen, Paul, Toby and Elinor, Barker reveals that not only soldiers who fight and kill on the battlefield are plunged into an ethical dilemma, military doctors, war journalists and volunteers who bear witness to wartime atrocities are also situated in this plight. In their involvement with wars,

they are obliged to make ethical choices. Their difficulty in making ethical choices reveals the cruelty of inhumane wars and the extreme trauma of them.

Conclusion

Barker, in returning repeatedly to the terrain of the First World War that has become a topic of interest to her, Barker attempts to probe into war-induced trauma and ethical plight of many British people in time of war. As a female writer, she successfully writes on the topic of war that has been a male-dominating field of writing and obtains her own unique achievement. By registering a different sense of history as a catalogue of unspeakable traumas and by ingeniously fusing fiction with history in her writing, Barker has become a distinctive voice and outstanding figure in contemporary British literature. By elaborating on the many unbearable trauma symptoms and the ethical dilemma they are confronted with and the ethical choices made by the combatants, military doctors, journalists and volunteers, she intends to expose the cruelty of wars and trauma engendered by wars and tries to remind people, for whom WWI and WWII are distant events, of the severe impact of war-induced trauma on individual lives, and calls on people to strive for peace in this world.

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