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Post-Traumatic Stress Disorder Symptoms in Kurt Vonnegut's *Slaughterhouse-Five*

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ABSTRACT

The present paper seeks to closely explore Kurt Vonnegut's *Slaughterhouse-Five* in terms of Judith Herman's surveys and categorization of post-traumatic stress disorder symptoms. It is an attempt to analyze the conflict between the will to deny horrible events experienced by the protagonists of the novel in World War II and the will to proclaim them aloud. The psychological distress symptoms including the inability to sleep, lack of concentration, flashbacks and state of surrender are thus investigated in the narrator and Billy Pilgrim as the two figures who are suffering from PTSD. These symptoms are analyzed in a way to call attention to the existence of unspeakable secret and simultaneously as means to deflect attention from it. The protagonists are both subjected to the dialectic of trauma in that they find it difficult to remain clearheaded, to see more than a few fragments of the picture at one time, and to retain all the pieces and to fit them together. It is even more difficult to find a language that conveys persuasively what they have seen.

Keywords: *Post-War American Novel, Hyperarousal; Intrusion; Constriction; Traumatic Disorder*

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1. Introduction

Slaughterhouse-Five or *The Children's Crusade: A Duty-Dance with Death* is regularly recognized as Kurt Vonnegut's significant autobiographical work. Billy Pilgrim has been traumatized as the result of attending in war and witnessing the bombarding of Dresden city. He and his fellow prisoners were kept in a slaughterhouse in Dresden where they witnessed bombing of the city and became some of its few survivors. Now he is a wealthy man and successful in optometry business but "has come unstuck in time" (Vonnegut 15). He travels between periods of his life, experiences past and future events out of sequence and repetitively. He is kidnapped by extraterrestrial aliens from the planet Tralfamadore. He spends time on Tralfamadore, in Dresden, in the War, in his post-war married life in the U.S.A. of the 1950s and early 1960s. He also predicts his death and makes a tape recording of his account of it. His being "unstuck" in time and his going backward and forward in time are the result of the turbulence of his mind and his visit to Tralfamadore planet is not

irrelevant. During the novel, he takes a long process to get rid of his unpleasant situation, to deny it at times and to banish it from his unconscious. As a matter of fact, Billy's story is the story of the narrator's life and his attempt to write a novel about it is indeed a struggle to heal his wounds.

The present study seeks to demonstrate that both the narrator and the protagonist of Vonnegut's *Slaughterhouse-Five*, Billy Pilgrim, were traumatized in the Second World War. Thus the symptoms of post-traumatic stress disorder can be traced in both characters. However, each seek for recovery in their own way, Billy's time travel to the planet Tralfamadore and talking about it on a radio show and the narrator's attempt to write a book about the massacre in Dresden. His will to keep in touch with his old war buddy for sharing memories of past, demonstrates his struggle to prevail his outrage at the cruelties of war. It is an effort to put an end to his suffering from post-traumatic stress disorder as the result of witnessing the cruelties of war. Although twenty three years have passed and the narrator is, at least apparently, living a



secure life with a good job and a family, yet he is still suffering from the consequences of the traumatic event. His insomnia and involvement in alcohols and telephones late at nights, the way he narrates his life events, the people around him and his experiences at war could be considered as clear examples in this regard. Indeed, it is him that is “unstuck” in time and his narration of Billy Pilgrim’s life story is a reflection of his internal conflicts.

The present paper first introduces the theoretical framework upon according to which the definition, sub-categories, and dimensions of trauma are examined with emphasis on Judith Herman’s theoretical standpoint. Then, the critical concepts which are employed in the present study are addresses and explored which include hyperarousal elements, intrusion, and constriction. In the Literature Review section the major recent studies of the subject are introduced. The main section of the paper comes next in which the novel under consideration is read with reference to the symptoms of trauma and instances of the critical concepts in both the traumatic narrator and Billy Pilgrim. Finally, in the concluding section, the instances of trauma in the novel are highlighted.

2. Theoretical Framework and Critical Concepts

2.1. Judith Herman’s Contribution to Trauma Theory

Judith Herman (born 1942), a psychiatrist, researcher, teacher, and author of the books *Trauma and Recovery*(1997) and *Father-Daughter Incest* (1981), is a major figure in the field of trauma and its recovery who has mostly focused on the understanding and treatment of incest and traumatic stress. *Trauma and Recovery* offered a profound insight into the nature of trauma and the process of healing it. Herman contends that psychological trauma is the affliction of the powerless that is rendered helpless by the overwhelming power. The ordinary response to this situation is to banish it from the unconscious. Atrocities, however, deny being buried and the conviction that denial does not work is as powerful as the denial (Herman 12).Therefore, she introduces a process of recovery that is the result of a twenty-year practice at a mental health clinic.

Trauma and Recovery consists of two parts: “Traumatic Disorders” and “Stages of Recovery”. “Traumatic Disorders” includes six chapters; the first of which addresses the curious history of studying psychological

trauma; when periods of active investigation have alternated with periods of oblivion. To study psychological trauma means bearing witness to horrible events which makes it impossible to remain neutral in the conflict between the victim and the perpetrator. The next five chapters introduce the main symptoms of this mental disorder and its influence on different aspects of personal and social life of the victim; how the victim is rendered helpless and powerless by the traumatic event and how traumatic events call into question the basic human relationships. The second part mainly focuses on the stages of recovery. As the core experiences of psychological trauma are disempowerment and disconnection, recovery is based on the empowerment and the creation of new connections for the survivor. Therefore, the pivotal stages of recovery introduced by Herman are: establishing “Safety”, “Remembrance and Mourning”, “Reconnection and Commonality”. It is in the second stage, “Remembrance and Mourning” that the survivor makes the final choice to confront the horrors of the past and speak of the “unspeakable”, a stage that demands extraordinary courage supported by the therapist alongside the security established by those surrounding the victim.

According to Herman, over the past century, trauma emerged into public consciousness in three different periods, each time the investigation of it has flourished in affiliation with a political movement. The first was in the late nineteenth century in France when the study of hysteria grew out of the republican, anticlerical political movements. The second was after the First World War and specifically after the Vietnam War in England and the United States that the study on shell shock or combat neurosis emerged. Its political context was the collapse of cult of war and the growth of an antiwar movement. The last which surfaced into public consciousness in recent years, was sexual and domestic violence in a political context of feminist movement in Western Europe and North America. The synthesis of these three separate lines of investigation builds our contemporary understanding of psychological trauma (Herman, 7-9).

In the first cardinal symptom of post-traumatic stress disorder the human system of self-preservation seems to go onto permanent alert after the experience; the person startles easily, reacts irritably and sleeps poorly. Studies have now shown that

the psychological changes of this disorder are both extensive and enduring. Traumatized people relive the event long after it is past; they cannot resume the normal course of their lives since the trauma repeatedly interrupts as though time has stopped at the time of the incident. It has encoded in an abnormal form of memory which breaks into consciousness as flashbacks in waking states and as nightmares during sleep with all the vividness and emotional force of the original event. In the third cardinal symptom, constriction or numbing, the system of self-defense shuts down entirely. The result is an escape not by action in the real world but by altering the state of consciousness (Herman, 35-46).

The result of two contradictory responses of intrusion and constriction is self-perpetuating which is called the dialectic of trauma. This opposing psychological state is perhaps the most characteristic feature of the post-traumatic syndromes since neither of these symptoms allow for integration of the traumatic event and the alternation between them might be understood as an attempt to find a satisfactory balance between the two, something that a traumatized person lacks. The force upon the traumatized person's inner life and outer range of activity are negative symptoms that their significance lies in what is missing, they are not recognized and their origins in a traumatic event are often lost. These symptoms are so persistent and so wide-ranging, they may be mistaken for enduring characteristics of the victim's personality; therefore the person with unrecognized disorder is condemned to a diminished life, tormented by memory and bounded by helplessness and fear. However some studies show that most of the men who were persistently suicidal had heavy combat exposure who suffered from unresolved guilt about their wartime experiences. Thus the threat of annihilation that defined the traumatic moment may pursue the survivor long after the danger has passed (47-50).

2.2. *The Hyperarousal Element, Intrusion, and Constriction*

According to Judith Herman, the three main symptoms of post-traumatic stress disorder are categorized as "hyperarousal," "intrusion," and "constriction." While the Hyperarousal is the persistent expectation of danger, intrusion is the indelible imprint of the traumatic moment. As for constriction, it

is defined as the numbing response of surrender.

In the first cardinal symptom of post-traumatic stress disorder, hyperarousal, the human system of self-preservation seems to go onto permanent alert after the experience; the person startles easily, reacts irritably and sleeps poorly. Studies have now shown that the psychological changes of this disorder are both extensive and enduring. Instead of a baseline level of alert, patients have an elevated baseline of arousal in which their bodies are always on the alert for danger. They have an extreme startle response to unexpected stimuli or one associated with the traumatic event as if they cannot tune out repetitive stimuli that other people find annoying; instead they respond to it as though it were a new and dangerous surprise. This increase in arousal results in sleep disturbances since they persist during sleep. Therefore it takes longer for such people to fall asleep; they are more sensitive to noise and are awakened more frequently during the night.

Traumatized people relive the event long after it is past; they cannot resume the normal course of their lives since the trauma repeatedly interrupts as though time has stopped at the time of the incident. It has encoded in an abnormal form of memory which breaks into consciousness as flashbacks in waking states and as nightmares during sleep with all the vividness and emotional force of the original event. These memories are not encoded like the ordinary memories in a verbal linear narrative, they lack verbal narrative and context and are encoded in the form of sensations and images which gives the memory a heightened reality. Traumatized people relive the moment of trauma not only in their thoughts and dreams but in their actions; they also re-create the moment of terror, reenact it with a fantasy of changing the outcome.

The third cardinal symptom of post-traumatic stress disorder is constriction or numbing in which the system of self-defense shuts down entirely. The person is completely powerless and any form of resistance is futile; the result is an escape not by action in the real world but by altering the state of consciousness. Analogous states are observed in animals, which sometimes freeze when they are attacked since situations of inescapable danger may evoke not only terror and rage, but also paradoxically, a state of detached calm in



which terror, rage and pain resolve. These states are similar to hypnotic trance states, but while people usually enter hypnotic states under controlled circumstances and by choice, these states occur in an uncontrolled manner, without conscious choice. Therefore traumatized people may attempt to produce similar numbing effects by using alcohol or narcotics; something which appeared among soldiers in an attempt to remove their sense of helplessness and terror. This may be adaptive at the moment of total helplessness, but becomes maladaptive once the danger is past; since these states keep the experience walled off from ordinary consciousness and prevents the integration for healing (Herman, 35-46).

3. Review of Literature

Trauma and Life Stories by Kim Laky Rogers, Selma Leyesdorff and Graham Dawson (2006) is a collection of studies in terms of the works of anthropologists, sociologists, psychologists, and oral historians. It focuses on a wide variety of social, political contexts in Africa, Europe, and the Americas. The life-long impact of traumatic experiences is the subject of the essays collected. The book is an attempt to explore the relationship between the experiences of terror, the ways survivors remember and the language and form which they use to retell their stories. All contributions are concerned with painful aspects of the past which may have consequences in the present as private nightmares or public conflicts:

“We believe that it is a crucial theme to address, not only intellectually but also because the legacy of trauma raises such immediate personal and political issues and dilemmas it is important for us to remember that all the words printed here can have little significant impact on the ultimate loneliness of those who suffer such psychic wounds from social dislocation and violence. (P. 23)

The Trauma Question by Roger Luckhurst (2008) is a historical genealogy of trauma which tracks its origin from the 1860s to the present through industrialization and bureaucratization, law and psychology, military and government welfare policies. It draws upon a range of cultural practices from literature, memoirs and confessional journalism through to photography and film. The writer’s strong claim is that “cultural narratives have been integral not just in consolidating the idea of post-traumatic subjectivity, but have actively helped form it” (P. 15). At the end, the book suggests the

ways in which the traumatic paradigm might meet its limits.

In his article entitled “New Wars, Old Battles: Contemporary Combat Fiction for the High School Canon” Randal W. Withers (2011) considers the novels by Kurt Vonnegut as alternatives to established antiwar canon. He believes that the atomic strikes on Japan are widely discussed across America while the destruction of Dresden, Germany, is often quietly overlooked, even though the attack by Allied bombers on this peaceful city killed more than the Nagasaki and Hiroshima bombs. He finds this a motivation for Vonnegut to write his semi-autobiographical work, an account of his year as a prisoner of war in Dresden and how he survived the attack. Therefore, the main reason for *Slaughterhouse-Five* to be one of the most banned books in American high schools is its embarrassing portrayal of the atrocities committed by the United States.

In another article titled “Nothing’s Ever Final”: Vonnegut’s Concept of Time”, Philip M. Rubens (2011) explores Vonnegut’s concept of time based on a quotation of him in an interview with *New York Times*. He states that Vonnegut owes a debt for the crux of his ideas to several popular time theorists, the most considerable of all Henry Bergson who believes that man is not only free to move at random through time, but also able to experience a progressive interiorization into memory.

John R. May (2011) focuses on the impact of the Tralfamadorians on Billy Pilgrim’s world view in his article ‘Vonnegut’s Humor and the Limits of Hope’. Billy’s famous phrase “so it goes” is taken from what the Tralfamadorians say about the dead. They have convinced Billy that if men are like bugs in amber and “all moments, past, present, future always have existed, always will exist” (P. 29); accordingly, when he hears that someone has died, he simply shrugs and repeats his famous phrase. He also adds that the sameness Billy notices in his unstuck pilgrimage is the universality of death and the unavoidability of war.

In the Iranian context, Moghadam & Kolahi (2015) also attempted a study on *Slaughterhouse-five*. However, it has been the critical discourse analysis its Persian translation through ideological approach. Such scarcity of studies on the topic under investigation in the Iranian context suggests the need for the present study.

4. A Psychoanalytical Reading of *Slaughterhouse-Five*

4.1. The Hyperarousal Elements in the Traumatic Narrator

The narrator whose name is not mentioned throughout the novel suffers from insomnia; he thus involves himself with alcohol and the telephone late at nights. He asks the operators of the Bell Telephone Company to connect him with the people he has not heard of for many years. Bernard V. O'Hare, his 'old war buddy', is one of those he demands to keep in touch after years. Both attended World War II and were captured and imprisoned in Dresden, Germany, where they witnessed the bombardment of the city and the massacre of thousands of people. Almost twenty years after the incident he tends to write a book about the atrocities of war; he thus decides to reunite with Bernard for sharing old memories:

I have this disease late at night sometimes, involving alcohol and the telephone . . . And then, speaking gravely and elegantly into the telephone, I ask the telephone operators to connect me with this friend or that one, from whom I have not heard in years. (PP: 3-4)

The traumatic events appear to recondition the human nervous system; as a result, those affected by the disorder suffer from numerous types of sleep disturbances; it takes them longer to fall asleep and they are awoken more frequently during the night than ordinary people (Herman 35-36). The narrator of the first chapter very clearly states that he is suffering from a disease; he knows there is something wrong with him though he might not be aware of the reasons behind such behaviors. As a matter of fact it is the memories of war that he is still suffering from. The influences of such an experience on him are so strong that makes it impossible for him to forget it after almost twenty years. As a result his involvement with alcohol and telephone is an unsuccessful attempt to tune out the repetitive stimuli. Unsuccessful in that even in such a situation all he tries to manage is to find O'Hare to share memories with him.

One of the other features of hyperarousal is the lack of concentration, the psychological arousal of a traumatized person continues unabated and the system of self-preservation goes on permanent alert as if the danger might return at any moment which might cause problem in concentration (Herman, 35). This characteristic is vividly

traced in the narrator of the first chapter. The way he describes his life time events is like following the stream of consciousness of a person who is unstuck in time. He is retelling his twenty- year lifetime experiences after World War, his marriage, his business, the process for writing his book, his reunion with his friend and their return to Dresden in a non-chronological order that the reader finds difficult to follow. The shift from one period to the other is sudden and random:

As a trafficker in climaxes and thrills and characterization ... I had outlined the Dresden story many times....

I thought this bouncing was accidental. But I was mistaken. He had to show somebody what was in the bag, and he had decided he could trust me.

"There is a smashing thing," he said.

And we were flown to a rest camp in France, where we were fed chocolate malted milkshakes and all the other rich food until we were all covered with baby fat. Then we were sent home.... (PP: 4-6)

While he tries to explain his difficulties in writing his book, suddenly he shifts to the battlefield at the end of the war and describing soldiers taking souvenirs. Among them is an Englishman who trusted to show his belongings to him. The time used in this paragraph is present as if he is experiencing the incidents at that moment. Yet all of a sudden he changes the subject to the end of war when they were flown to rest camps. The way he describes their settlement at the camp is humorous as if he is making fun of the event and this is the result of the rage and disgust he is still carrying within himself. During the years following the war he has not been able to forget what had happened to him, he was also unsuccessful to fulfill his dream of writing a book about it. The result is a man suffering from a trauma and the consequences of it. His lack of concentration is one of the prominent results of it; his traveling to different time zones in the present and in the past.

4.2. The Hyperarousal Elements in the Traumatic Billy Pilgrim

One of the problems of traumatized people might confront is their inability to sleep. This characteristic was mentioned about the narrator of the story who made this point explicitly that he was suffering from a disease of sleeping late at nights. Billy Pilgrim, the protagonist of his story, is



similar to him in this way. Yet the way he treats this problem is different:

Billy took off his tri-focals and his coat and his necktie and his shoes, and he closed the venetian blinds and then the drapes, and he lay down the outside of the coverlet. But sleep would not come. Tears came instead. They steeped. Billy turned on the Magic fingers, and he was jiggled as he wept. (PP: 51-52)

As a wealthy man, Billy possessed a Georgian house with all the facilities a rich man might have. One of this special furniture was a double bed with an electric blanket and a switch to turn on a gentle vibrator which was bolted to the springs of the box mattress. This vibrator called the Magic Fingers, was the idea of the doctor whom Billy took orders from due to Billy's complains about his weeping out of no reason every so often. The vibrator was indeed suggested by the doctor to help Billy take a nap every day, yet it was not helpful.

In her book *Trauma and Recover* Judith Herman (1992) states that the psychological changes of post-traumatic stress disorder are both extensive and enduring. Patients suffer from a combination of generalized anxiety symptoms and specific fears. Instead of having a normal baseline level of alert, they have an elevated baseline of arousal in which their bodies are always on the alert for danger. The increase in arousal persists during sleep as well as in the waking state, resulting in numerous types of sleep disturbance as a result people with post-traumatic stress disorder take longer to fall asleep, are more sensitive to noise and are awoken more frequently during the night than ordinary people. It is due to the fact that traumatic events appear to recondition the human nervous system (P: 36).

Though a wealthy and successful man in his business, Billy Pilgrim has not been able to overcome the grief and pain he has been carrying since the World War. He is living two kinds of life: on one hand is a Billy Pilgrim, an optometrist who is running his own business with five other optometrists working for him, netting over sixty thousand dollars a year. Also the owner a fifth of the new Holiday Inn and half of three Tastee-Freeze, a sort of frozen custard, stands. He is married and has two children, a daughter and a son. On the other hand is a Billy who is stuck in his memories of war, who suffers from insomnia and every so often finds himself weeping. This part of Billy's personality is kept for himself

and his doctor is the only person who knows about it.

The very first paragraph of Chapter Two which is indeed the beginning of the story about Billy Pilgrim clearly describes his states of mind. Billy's lack of control over his time travels makes the story more challenging for the reader to follow since Billy switches from a state of his life to the other frequently and often randomly. Chapters Two to Nine explore the life events of Billy since his birth, even his pre-birth as seen by him, until his death which is also predicted by him. The chronological chain of events is as follows: he was born in 1922, attended war in 1944 when he experienced his first emotional breakdown, was captured in 1945 when he witnessed the bombardment of Dresden, three years later in 1948, got married to a daughter of a wealthy optometrist and started his own business. In 1967 he was kidnapped by a saucer from the planet, Tralfamadore; in 1968 he was the only one who survived from a plane crash when he decided to tell the world about his life on Tralfamadore and finally his death in 1976 according to his own prediction:

Billy Pilgrim has come unstuck in time.

Billy has gone to sleep a senile widower and awakened on his wedding day. He has walked through a door in 1955 and come out another one in 1941. He has gone back through that door to find himself in 1963. He has seen his birth and death many times, he says, and pays random visits to all the events in between.

Billy is spastic in time, has no control over where he is going next, and the trips aren't necessarily fun. He is in a constant state of stage fright, he says, because he never knows what part of his life he is going to have to act in next. (P: 19)

What the reader confronts is a non-chronological state of events. For example, Chapter Two begins with a short biography of Billy to the year 1967 when he is a widower, has had a radio interview and a letter published about his experience in the planet Tralfamadore. During an argument with his daughter he travels in time to the battlefield in 1944 where he was first unstuck in time; there he traveled to his pre-birth, to the unpleasant memories of his childhood with his father, to 1965 when his mother passed the way; then to the New Years' Eve in 1961; back again in 1944 he traveled to 1957 to his office. Finally the chapter ends with his being captured by the

Germans in winter of 1944. This is the case for the rest of the chapters; full of flashbacks, random travels to the life time events from his birth in 1922 to his death in 1976. Therefore the reader needs to put these scattered pieces of puzzle together in order to make a vivid image out of it.

The system of self-preservation for a traumatized person goes on permanent alert and the psychological arousal continues as if the danger might return at any moment (P: 35). One result of such a mood is lack of concentration. In the novel *slaughterhouse-Five*, it's not only Billy Pilgrims, but also the narrator of Chapter One who is suffering from PTSD. Billy's being unstuck in time is an obvious proof; his time travels are also the result of lack of concentration of a narrator who is indeed suffering from the same disease.

4.3. *Intrusion Elements in the Traumatic Narrator*

The second important symptom of PTSD is intrusion in which the traumatic moment becomes encoded in an abnormal form of memory which breaks spontaneously into consciousness with all the vividness and emotional force of the original event. Traumatized people relive the event as if it was recurring in the present with flashbacks during waking states and traumatic nightmares during sleep:

I used my daughter's crayons, a different color for each main character. The destruction of Dresden was represented by a vertical band of orange cross-hatching, and all the lines that were still alive passed through it, came out the other side... The war in Europe had been over for a couple of weeks. We were formed in ranks, with Russian soldiers guarding us... thousands of us about to stop being prisoners of war. (P: 5)

Writing a book about war and specifically what he had experienced in Dresden had become an obsession with the narrator since he came back from the Second World War, yet each time it was postponed due to various reasons such as his inability to recall enough memories for writing a book or others considering the subject useless, "why don't you write an anti-glacier instead?" as Harrison Star, a movie-maker, told him (P:3). Therefore he always had the plan in mind but could not fulfill it.

In the quote above, he is explaining about one of the outlines of his story he had made on the back of a roll of wallpapers using colorful crayons. While he is

describing the colors that signified the characters and the events, all of a sudden the tense of the sentence shifts to the present and the end of his story becomes the end of the war he attended twenty years earlier which led to the end of his captivity. His descriptions of this scene continues in four paragraphs in present as if he is lost there and living at that moment and experiencing the events.

The narrator's mind is so much obsessed with the atrocities he has witnessed at war and more specifically Dresden, that whatever he says or does is dominated by it. This is the main reason for talking about the incident in the first sentence of the first paragraph," All this happened, more or less (P:1), and then he tells the reader about his return to Dresden, his intention of writing a book about Dresden and finally all the pain and anxiety he took in the process of writing about it. The word Dresden is frequently repeated in almost every paragraph, twenty-two times throughout the chapter. It seems like, time has stopped there and every small reminder evokes traumatic memories.

One significant example is when he is talking about his working experiences as a police reporter for the famous Chicago City News Bureau, the first story he covers is about a young veteran whose ring was caught in the ornaments of the elevator of the office he was working for, the floor of the car went down and the top squashed him. When as a reporter he was asked whether that incident had bothered him or not, his response was: "Heck no....I've seen lots worse than that in the war" (P:8). Then, he continues, "Even then I was supposedly writing a book about Dresden" (P:8). This is an obvious example of his obsession with Dresden in every aspect of his life since war.

4.4. *Intrusion Elements in Traumatic Billy Pilgrim*

The whole story of Billy Pilgrim is full of flashbacks to his unpleasant memories at war from 1944 to 1945, when he enlisted as a chaplain's assistance, was injured in an attack, imprisoned by the Germans in Dresden and witnessed the bombardment of the city. In Chapters Two, Three and Eight, these flashbacks are repeated for three times; in Chapters Six and Seven, two times and the maximum of flashbacks belongs to Chapter Five in which he travels to the years 1944 and 1945 for five times. Some of these flashbacks happen during waking states resulted from small reminders that evoke



traumatic memories; some occur as nightmare during sleep. For example when Billy was on his way to Lions Club luncheon meeting in 1967, the neighborhood of Ilium's black ghetto reminded him of "some of the towns he had seen in the war" (P:48). The scenes he passed by looked like "Dresden after it was fire-bombed" (P:49).

In another scene while Billy was trying to sleep in his bed but was weeping instead, some crippled men rang the front door. These people were hired by a man to persuade people subscribe to magazines that were never delivered. One of these crippled men, who had only one leg, was on crutches; he was so jammed between his that his shoulder hid his ears. Observing these miserable people through his window, they appearance and the sound that their crutches made, reminded Billy of a time when he and the rest of American prisoners were being marched to their boxcars by the Germans. One of these companies was Ronald Weary who was wearing hinged clogs which had hurt his feet. The time travel Billy makes after perceiving this incident has two of the characteristics discussed above. First, it is made while he is sleeping or at least pretending to sleep and also it is evoked as the result of some reminders which are the crippled men, their crutches and the way they walked:

He closed his eyes, and opened them again. He was still weeping, but he was back in Luxembourg again. He was marching with a lot of other prisoners. Weary's eyes were tearful also. Weary was crying because of horrible pains in his feet. The hinged clogs were transforming his feet into blood puddings. (PP:52-53)

Judith Herman's statement about the strength of emotions at flashbacks is quite applicable to this paragraph. She points out that "small, seemingly insignificant reminders can also evoke these (traumatic) memories, which often return with all the vividness and emotional force of the original event (P: 37). Billy' starts weeping while observing the cripples since it reminds him of miseries he had experienced in 1944, therefore when he travels in time he finds himself weeping. Both incidents have the same emotional influence, with the same strength and the same vividness.

Sometimes this influence is so much that according to Herman "even normally safe environments may come to feel dangerous, for the survivor can never be assured that she will not encounter some reminder of the trauma" (P: 37). Such an

experience happened to Billy on his anniversary in 1964, while the barbershop quartet of optometrists was singing "That Old Gang of Mine":

Gee, that song went, but I'd give the world to see that old gang of mine. And so on. A little later it said. So long forever, old fellows and gals, so long forever old sweethearts and pals_God bless 'm_And so on. (P: 142)

He gave psychosomatic responses to the changing chords; found himself upset by the song and the occasion. As the quartet continued their song, Billy was emotionally racked once again and "fled upstairs in his nice white home" (P: 145). Since the presence of the quartet and their song reminded Billy of his memories of war and more specifically the destruction of Dresden in which except for the American prisoners and their four guards few people survived. Although twenty years had passed since the incident, and Billy was now a wealthy and successful man, there were moments he could not help thinking about his past life such as his anniversary where he felt upset and hurt. His luxurious house and the glorious party was not the place where he felt at peace because he could not tune out the annoying reminiscences of war; as a result he escaped to his bedroom found refuge in his electronic mattress.

4.5. Constriction Elements in the Traumatic Narrator

The third cardinal symptom of post-traumatic stress disorder is called constriction or numbing in which the person is completely powerless and any form of resistance is futile, therefore the patience may go into a state of surrender (P: 42). According to *Diagnostic and Statistical Manual of Mental Disorders*, a person suffering from PTSD should have three or more of the following characteristics: avoid thought, feeling about the incident; avoid activities, people and places; inability to recall; lack of interest in significant activities and finally detachment (APA, 468). This study attempts to follow some of these features both in the narrator and the main character of his story.

The narrator was insistent on writing a book about his experiences at war and specifically the destruction of Dresden. For him this subject was significant enough to make both a masterpiece and a good fortune out of it. Yet when he started writing, he found it more challenging than what he had expected since he could not recall memories, not enough to write a book about it:

But not many words about Dresden came from my mind then-not enough of them to make a book, anyway. And not many words come now, either, when I have become an old fart with his memories and his Pall Malls, with his sons full grown. (P:2)

As a result, he decided to seek for his old war buddy, and finally found him on the telephone during his night quest. It is considerable that O'Hare was also awake, suffering from insomnia; though he did not show enthusiasm for being a help and his excuse was that he could not remember much, he accepted him as a guest. Yet this reunion was an unsuccessful attempt for recalling old memories. It seemed any form of resistance was futile, consequently they preferred to go into a state of surrender at that time, "O'Hare and I gave up on remembering, went into the living room, talked about other things" (P:13).

One of the other characteristics of this state is that the patient avoids any thought, feeling or even conversation about the event. Apart from his tendency to forget an unpleasant memory, this amnesia might be the result of some political and social reasons. Soldiers in every war complain that no one wants to know the real truth about war; it is due to the fact that war, victims and everything painful and unpleasant about it, is something the community wants to forget. They are some strong motives behind who wish to forget and very often success in doing so (PP:7-8). As we read in the novel:

Even then I was supposedly writing a book about Dresden. It wasn't a famous air raid back then in America. Not many Americans knew how much worse it had been than Hiroshima, for instance, I didn't know that either. There hadn't been much publicity. (P:8)

After the World War, the narrator studied at the Department of Anthropology at the University of Chicago where they were taught that there was no difference between anybody and that, nobody was ridiculous or bad or disgusting. Meanwhile he worked as a police reporter for the Chicago City News Bureau. Even then he was thinking of writing a story about Dresden but did not dare to express it openly, therefore he was making it in his imagination due to the prevailing atmosphere; people were not aware of the magnitude of the disaster and not many Americans knew that it was much worse than Hiroshima. Those in power were

unwilling to disclose secrets about war, not only to the general public but also to those who were in a way involved. That's why a response the narrator got from a letter to the Air Force about Dresden, shocked him, even though many years had passed after the incident.

I wrote the Air Force back then, asking for details about the raid on Dresden, who ordered it, how many planes did it, why they did it, what desirable results there had been and so on. I was answered by a man who, like myself, was in the public relations. He said that he was sorry, but that information was top secret still. (P:9)

Alternations of consciousness are at the heart of constriction or numbing, the third cardinal symptom of post-traumatic stress disorder. Sometimes situations of inescapable danger may evoke not only terror and rage but also paradoxically a state of detached calm. These detached states are similar to hypnotic trance states. But people usually enter hypnotic states under controlled circumstances and by choice, traumatic trance states occur in an uncontrolled manner, usually without conscious choice. Traumatized people who cannot spontaneously dissociate may attempt to produce similar numbing effects by using alcohol or narcotics(P: 44).

The narrator points out his interest in alcohol many times in the novel. He takes refuge to alcohol for his insomnia late at nights," I have this disease late at nights, involving alcohol... I get drunk..." (P:3). Also when he finds his war friend, O'Hare, on the phone, he thinks drinking is essential for remembering memories.

Listen.... I'm writing this book about Dresden. I'd like some help remembering stuff. I wonder if I could come down and see you, and we could drink and talk and remember. (P:4)

According to Grinker and Spiegel, uncontrolled drinking increased to the combat group's losses; their use of alcohol was an attempt to obliterate their growing sense of helplessness and terror (P:44). Confronting an old buddy of war after twenty years might relive unpleasant memories for the narrator which he found annoying. In order to get rid of this sense, he took refuge in alcohols. As a result he decided to take a bottle of whiskey with him, "I was carrying a bottle of Irish Whiskey like a dinner bell" (P:10). O'Hare, on the other hand, has more tendencies to forget his past and this is quite obvious in his way of



life, his relationship with his family. His wife claimed that he had quit drinking since war, “she explained that O’Hare couldn’t drink the hard stuff since the war” (P:10).

4.6 Constriction Elements in Traumatic Billy Pilgrim

It was in December 1944 that Billy Pilgrim was traumatized for the first time. He was needed in the headquarters company of an infantry regiment fighting in Luxembourg as a chaplain’s assistance. When he joined, the regiment was in the process of being destroyed by the Germans in the Battle of the Bulge which was the last mighty German attack of the war. Billy survived but was “a dazed wanderer far behind the new German lines” (P:26). There were three other wanderers: two scouts, an antitank gunner, Roland Weary. Billy was the only one who had “no helmet, no overcoat, no weapon and no boots”, he was “empty-handed, bleakly ready for death” (26). On the third day of wandering someone shot four times at them; the three of them were safe in a ditch while Billy did not show any reaction to the shot that was aimed at him:

The third bullet was for the filthy flamingo, who stopped dead center in the road when the lethal bee buzzed past his ear. Billy stood there politely, giving the marksman another chance. It was his added understanding of the rules of the warfare that the marksman *should* be given a second chance. The next shot missed Billy’s kneecaps by inches, going end-on-end, from the sound of it. (P:27)

Judith Herman states in her book that for someone who becomes powerless as the victim or witness of a trauma, the system of self-defense shuts down entirely; as a result of this, the person tries to escape from this situation not by action rather by altering his or her state of consciousness. Such states are observed in animals which freeze when they are attacked. A rape survivor compared her situation with a rabbit stuck in the glare of headlights. Herman also points out that this altered state of consciousness might be one of nature’s small mercies, a protection against unbearable pain (PP:42-43).

Billy’s recognition of war was limited to maneuvers he had in south Carolina in which everything was theoretical and funny. In one of the attacks made by the theoretical enemy, they were all dead, but soon after the theoretical corps started laughing and had a hearty meal together. Apart from this, his role as a chaplain was an inferior and funny one, he was powerless to harm the enemy or

to help his friends, expected no promotions or medals, has a meek faith in loving Jesus which most soldiers found putrid. As soon as he joined his regiment, it was destroyed in such a mighty attack that almost all of the members were killed. There he witnessed the real cruel face of war he had not imagined before. This burden was too much to bear for a twenty-one-year old naive who had already joined the World War. His natural reaction was thus going into a state of surrender, detached calm and numbness in which terror, rage and pain dissolved. In addition to this he had to suffer the humiliation of being criticized by Ronald Weary which made the situation more intolerable:

“Saved your life again, you dumb bastard,” Weary said to Billy in the ditch. He had been saving Billy’s life for days, cursing him, kicking him, slapping him, making him move. It was absolutely necessary that cruelty be used, because Billy wouldn’t do anything to save himself. Billy wanted to quit. He was cold, hungry, embarrassed, incompetent. He could scarcely distinguish between sleep and wakefulness now. (P:28)

His young age, physical and mental situation, the gloomy atmosphere of the battlefield and the way Ronald Weary treated him took Billy to a state of numbness which cut from what was happening around him. It was the first time that Billy came unstuck in time and began his time travels to different periods of his life. The first travel he made, was to his death time and then his pre-birth and finally very symbolically to a moment in childhood when he was very terrified with his father’s method of sink-or-swim which he threw him into the deep end and Billy was going to “damn well swim” (P:35). The result was his being numb and finally unconscious. This situation was very similar to that of Billy at the time of war. He had to learn the rules of surviving if he wanted to survive yet he was too terrified to keep his consciousness. This state of numbness maintained and became so fatal during their capture by the Germans that led Billy to a prison hospital where he continued his time travels.

The war was over, yet life went on and Billy Pilgrim little by little initiated a new life for himself. He married a daughter of a wealthy optometrist and started his own business. Ten years after the World War, Vietnam War started. This time Billy seemed indifferent and did not show any reaction to what people discussed about the

atrocities committed. When a major in marines spoke in favor of Americans and supported increased bombing in North Vietnam, Billy was silent:

Billy was not moved to protest the bombing of North Vietnam, did not shudder about the hideous thing she himself had seen bombing do. He was simply having lunch with the Lions Club, of which he was past president now. (P:50)

According to Herman, events continue to register in awareness yet as though disconnected from their ordinary meanings and the patients may feel as though the event is not happening to them and they are observing from outside (P:42-43). This is exactly the reaction of Billy Pilgrim who was not moved by any of the discussions about Vietnam War, as if he had never witnessed similar atrocities in World War II. Bombardment of Vietnam not only recalled memories about Dresden but also made him keep silence because Billy, despite his enthusiasm about living, had a new method for keeping going. A method which was summarized in a framed prayed on his office wall:

GOD GRAND ME
THE SERENITY TO ACCEPT
THINGS I CANNOT CHANGE,
COURAGE
TO CHANGE THE THINGS I CAN,
AND WISDOM ALWAYS
TO TELL THE
DIFFERENCE.

Since he had reached this recognition that past, present and future were among the things he could not change. A lot of his patients, who saw the prayer above on Billy's office wall, told him that it had helped them to keep going.

Some of the traumatized people may attempt to produce numbing effects by using alcohols, something which was frequently observed among soldiers in wartime. Billy Pilgrim, unlike the narrator of the first chapter, is not obsessed with alcohol very much. Yet there are only two situations in which he drinks. Once in 1961 on New Year's Eve:

It was New Year's Eve, and Billy was disgracefully drunk at a party where everybody was in optometry or married to an optometrist. Billy usually didn't drink much, because the war had ruined his stomach, but he was snootful now, and he was being unfaithful to his wife Valencia for the first and the only time. (P:37)

Ruined stomach was only an excuse for avoiding alcohol. The other time Billy

was drunk was on his daughter's wedding night when he entered his daughter's bedroom and confronted the empty closet and drawers and some the possessions she had not taken with herself. Her telephone rang; there was a drunk on the other end whom Billy could smell his breath of mustard gas and roses.

5. Conclusion

The present study sought to argue that the narrator and the protagonist of his story, Billy Pilgrim, in Kurt Vonnegut's *Slaughterhouse Five* are both suffering from post-traumatic stress disorder as the results of the atrocities they have witnessed in the Second World War and more specifically in the bombing of Dresden. Their ordinary response is to banish these memories from consciousness since they are too terrible to share. However, denial does not work; atrocities refuse to be buried. The result of this conflict is to put an end to their nightmares, to step toward the process of recovery and the will to speak the unspeakable after more than twenty years. In the present research, the main focus was on the studies of Judith Herman on post-traumatic stress disorder and the categorization she makes on the symptoms of this disease as well as the stages of recovery she suggests for it.

All the chapters of the novel could be divided into two parts. The first part includes the opening and the closing chapters in which the narrator is the main character. He is a veteran of the Second World War who is traumatized during the bombardment of the German city, Dresden; the consequences of the event on him are shown as the symptoms of his mental disorder, PTSD. Although more than twenty years have passed since the incident, the narrator still relives the event in such a way that it has totally influenced his present life. The second part, including chapters Two to Nine, is indeed the narrator's written account of his experiences at war. The protagonist of this part is Billy Pilgrim who has a lot in common with the narrator since he has witnessed the same atrocities at World War II. He is also unable to cope with his memories in that the impact of the disaster was so profound that he has become completely unstuck in time.

The present study attempted to provide profound and analytical answers to those research questions addressed earlier in the paper. It has been claimed in this study that both characters, the narrator and Billy



Pilgrim, are suffering from post-traumatic stress disorder. However what both characters lack, is a balance between two extremes states of intrusion and constriction; the dialectic of these opposing states is the most characteristic feature of traumatic syndromes. As intrusive symptoms diminish, constrictive symptoms come to predominate. Accordingly, the traumatized people may no longer seem frightened and may resume the outward form of their previous life. However the severing of events from their ordinary meaning and the distortion in the sense of reality persist. Therefore, while the trauma-related symptoms seem to fade over time, they can be revived, even years after the event, by reminders. That is why nightmares and other intrusive symptoms recurred in the Second World War combat veterans of this novel after a delay of twenty years.

References:

- Crossley, M. (2000). *Introducing Narrative Psychology: Self, Trauma and the Construction of Meaning*. Buckingham: Open University Press.
- Courtois, C. and Julian D. eds. (2009) *Treating Complex Traumatic Stress Disorders (Adults): An Evidence-Based Guide*. New York: The Guilford Press.
- Desalvo, L. (2000). *Writing as a Way of Healing: How Telling Our Stories Transforms Our Lives*. Boston: Beacon Press.
- Figley, C. (1985). *Trauma and Its Wake: the Study and Treatment of Post-Traumatic Stress Disorder*. Vol. I. New York: Brunner/Mazel.
- Figley, C. ed. (2006). *Mapping Trauma and It's Wake: Autobiographical Essays by Pioneer Trauma Scholars*. New York: Routledge.
- Herman, J. (1992). *Trauma and Recovery: The Aftermath of Violence from Domestic Abuse to Political Terror*. New York: Basic Books.
- Herman, J. (2015). "Epilogue." in *Trauma and Recovery: The Aftermath of Violence from Domestic Abuse to Political Terror*. Third Edition. New York: Basic Books.
- Horowitz, M. (2010). *Grieving As Well As Possible: An Insightful Guide to Encourage Grief's Flow, Navigate Difficult Moments, and Put Your Life or a Friend's Life Back Together*. California: Grey Hawk Publishing.
- Horowitz, M. (2001). *Stress Response Syndromes: Personality Styles and Interventions*. Maryland: Jason Aronson.
- Horowitz, M. (2011). *Stress Response Syndromes: PTSD, Grief, Adjustment, and Dissociative Disorders*. Maryland: Jason Aronson.
- Hume, K. (2011) "Vonnegut's Self-Projections: Symbolic Characters and Symbolic Fiction." *The Journal of Narrative Technique* 12 (1982): 177-190. Retrieved from www.jstor.org/stable/30225939
- Johnson, C. (2011). *War in Kurt Vonnegut's Slaughterhouse-Five*. Farmington Hills: Greenhaven Press.
- Jong, J. ed. (2002). *Trauma, War, and Violence: Public Mental Health in Socio-Cultural Context*. New York: Plenum Publishers.
- Levin, S. (2002) *Trauma, Tragedy, Therapy: The Arts and Human Suffering*. London: Jessica Kingsley Publishers.
- Luckhurst, R. (2008). *The Trauma Question*. Abingdon: Routledge.
- Mathieson, K. (2011). "The Influence of Science Fiction in the Contemporary American Novel." *Science Fiction Studies* 12 (1985): 22-32. Retrieved from <http://www.jstor.org/stable/4239659>
- May, John R. (2011). "Vonnegut's Humor and the Limits of Hope." *Twentieth Century Literature* 18(1972): 25-36. Retrieved from www.jstor.org/stable/440692
- Moghadam, N. & Kolahi, S. (2015). Critical Discourse Analysis of the English Text-*Slaughterhouse-five* and its Persian Translation through Ideological Approach. *International Journal of English Language & Translation Studies*. 3(2),10-17. Retrieved from <http://www.eltjournal.org>
- Moon, B. (2006). *Ethical Issues in Art Therapy*. Springfield: Charles C Thomas Pub LTD.
- Rogers, A. (2006). *The Unsayable: The Hidden Language of Trauma*. New York: Ballantine Books.
- Rothschild, B. (2000). *The Body Remembers: The Psychophysiology of Trauma and Trauma Treatment*. Los Angeles : W. W. Norton & Company.
- Rothschild, B. (2010). *8 Keys to Safe Trauma Recovery: Take-Charge Strategies to Empower Your Healing (8 Keys to Mental Health)*. Los Angeles: W. W. Norton & Company.
- Rubens, P. (2011). "Nothing's Ever Final': Vonnegut's Concept of Time" *College Literature* 6 (1979): 64-72. Retrieved from <http://www.jstor.org/stable/25111247>
- Van Der K., Bessel et al, eds. (2006). *Traumatic Stress: The Effects of Overwhelming Experience on Mind, Body, and Society*. New York: The Guilford Press.
- Vonnegut, K. (2000). *Slaughterhouse-Five or The Children's Crusade: A Duty Dance with Death*. New York: Rosetta Books, LLC.
- Warren, B. ed. (2008). *Using the Creative Arts in Therapy and Healthcare*. East Sussex: Routledge.
- Williams, M. and Soili, P. (2013). *The PTSD Workbook: Simple Effective Techniques for Overcoming Traumatic Stress Disorders*. Oakland: New Harbinger Publications.
- Withers, R. (2011)"New Wars, Old Battles: Contemporary Combat Fiction for the High School Canon Author(s)." *The English Journal* 88(1999): 62-69. <http://www.jstor.org/stable/822189>