



## Encounter with the Grotesque: The Imbrication of Death and Trauma in Syrian Fiction

Khadeeja Mushtaq<sup>1</sup>, Muhammad Safeer Awan<sup>2</sup>

### Keywords:

Civilians,  
Death,  
Trauma,  
Violence,  
War.

### Abstract

*The Middle East is and has been an ongoing stage for wars and conflicts that have shaped and reshaped the demography of the region with little or no regard for the innocent civilians who are a major casualty in these wars. The crisis in Syria created the biggest tragedy in the history of modern warfare with more than 350 000 civilians killed and almost half of them displaced (Loft, 2023). The present paper undertakes a closer examination of a selected fiction from Syria (Death is Hard Work) to reveal a life without hope and meaning for the survivors of recent wars. As the analysis will reveal, their tragedy belies simple, unequivocal explanation; besieged by violence and death in the spiraling cycle of wars, the Syrians have suffered psychological trauma and emotional breakdown of an upending scale. There is a need to bring to light their experience of war along with the manifold and serious consequences on the civilian population in Syria. There is no doubt that the civilians are the worst effected in the recent wars, however, the scale of their psychological injury is yet to be determined.*

<sup>1</sup>Asst. Professor/PhD scholar, Department of English, National University of Modern Languages, Islamabad  
Email: [Kmushtaq@numl.edu.pk](mailto:Kmushtaq@numl.edu.pk)

<sup>2</sup>Dean, Faculty of Arts & Humanities, National University of Modern Languages, Islamabad.  
Email: [msawan@numl.edu.pk](mailto:msawan@numl.edu.pk)

## INTRODUCTION

The destruction witnessed by the civilians in Syria in recent years is bound to leave multiple unseen wounds and unhealed scars. Their trauma is expected to live through generations for as long as these wars and the terror they have invoked remain part of their cultural memory. For a long time, this terror and trauma will lay siege to the survivor-victims who have all kind of hope snatched from them. The list of the effectees is long: women, children, university students and the elderly are included among the sufferers. They have witnessed probably the worst form of terror in the modern history and there is no hope this will end soon. Is it possible for them to be at peace after witnessing gruesome deaths and total destruction of their homes and homelands? Can the children, who in their tender, formative years have everything snatched from them, forgive the world for its indifference and lack of empathy? The protracted wars have replaced dreams with nightmares - can the survivors ever learn to dream again? These are important questions. Recent studies on Syrian civilian population, who are dislodged from their own homes due to mass scale destruction, have avoided these questions. This paper will look for answers to these questions to bring into focus the nature of the psychological trauma experienced by the survivor-victims in Syria through a critical, investigative study of the Syrian novel, *Death is Hard Work*, written by Khalid Khalifa.

Trauma comes from Greek word which means ‘wound’ or ‘to pierce’ (Laplanche & Pontalis 1973). Laplanche and Pontalis also concur that trauma is a psychic phenomenon rather than a physical one with three distinctions, namely, a “violent shock”, the “wound” and “consequences affecting whole organisation.” They write:

Trauma’ is a term that has long been used in medicine and surgery. It comes from the Greek τραῦμα, meaning wound, which in turn derives from τινοςσχω, to pierce. It generally means any injury where the skin is broken as a consequence of external violence, and the effects of such an injury upon the organism as a whole; the implication of the skin being broken is not always present, however—we may speak, for example, of ‘closed head and brain traumas. In adopting the term, psycho-analysis carries the three ideas implicit in it over on to the psychical level: the idea of a violent shock, the idea of a wound and the idea of consequences affecting the whole organisation.

The author of the ground breaking work, *Death in Life: The survivors of Hiroshima* (1967), Robert J. Lifton has discussed trauma in relation to the notion of death. He puts the encounter with death – grotesque death - in the centre of his theorization and discusses death as a conceptual reality and not just a biological phenomenon. Tracing the impact of horrific deaths on the survivors, he underscores that they suffer greatly from that encounter. His other concepts like death immersion, death guilt, numbing, loss of meaning, and nihilistic tendencies stem from the same idea. Lifton argues that insights from death encounters can greatly contribute to the understanding of psychological problems. He defines a survivor as someone who has come into contact with death, or who has experienced death and has survived it. However, as Lifton argues, this survival comes at a cost. The encounter with death leaves deep imprints on the survivor's psyche so that whenever a survivor comes into contact with death, the sight triggers a chain reaction and reopens previous wounds or experiences with death. The feeling of being 'stuck' overwhelms the survivor at these times as his inner imagery breaks down and he loses touch with reality. This feeling of stasis is further aggravated by the feeling of guilt which Lifton describes as death-guilt. Death-guilt or the feeling of guilt as a result of trauma gives a moral dimension to the suffering. The survivor cannot come to terms with death, and agonizes over being left alive. These feelings can contribute to the trauma being experienced by the survivor. Lifton further complicates this trauma experience by linking it to the notion of psychic numbing. Psychic numbing relates to psychic and emotional death due to sudden or extended exposure. But Lifton calls this a defensive mechanism or a survival strategy by the survivor who undergoes a temporary psychic death in order to avoid a permanent death. The immediate response of the survivor when encountering traumatic event of catastrophic proportion is to shut himself down, "When made under conditions of acute trauma, that 'decision' is neither voluntary nor conscious" (Lifton 1967). But this shutting down may become chronic and the survivor will experience all or some death-related traumas. Psychic numbing is an impaired state in which the mind experiences a disconnection from reality.

## LITERATURE REVIEW

The psychic wounds of survivors are further aggravated due to technologically smart weapons that can cause destruction upon a large scale. These modern wars are devastating - individually, culturally and collectively. In *Refractions of Violence*, Martin Jay (2003) asserts that violence has become "a constitutive function of today's world, structuring and sustaining our way of existence and of socio-political and transnational intelligibility." Michael Hardt and Antonio Negri (2004) argue that contemporary warfare and violence have become "a permanent condition", "the primary organizing principle of society" and "the general matrix for all relations of power and techniques of domination". In *On Violence*, political theorist Hannah Arendt (1970) states that war "with the weird suicidal development of modern weapons" is the most severe form of violence involving "the wholesale slaughter of civilians." Scarry (1985) defines war as "a form of human brutality where the main activity is injuring and the ultimate goal is to out-injure the opponent." The trauma suffered during war is of specific nature hence specific categorization known as PTSD. The civilians, or the *survivor-victims* as I would like to call them here, are the worst hit by war. Because they are at the receiving end of terror, their trauma is deep and lasting. We want to know how their psychological trauma is manifested. And, do the existing models of psychological trauma, like PTSD, adequately explain the Syrian destruction? The consequences of the protracted war upon the emotional and psychological health of the survivor-victims are manifold and need to be interrogated seriously. Patricia A. Resick distinguishes traumatic stress from stress in her study "Stress and Trauma." She writes,

Although everyone experiences stress during life, traumatic stress is caused by life-threatening or self-threatening events that are accompanied by fear, helplessness, or horror. A range of disorders may result from traumatic stressors including adjustment disorder, acute stress disorder, post-traumatic stress disorder, and the dissociative disorders. Associated disorders may include depression, other anxiety disorders, and substance abuse. (Mostafa, 2009)

Traumatic stress or traumatic injury goes far beyond the daily experience of stress and pain. It goes deep inside and tears apart the innermost defences of the individual. A range of symptoms may follow this rupture of self; all of them defined and coloured by the traumatic injury. Kinzie (1988) notes that his Cambodians patients exhibited almost similar symptoms as those described in DSM III as post-traumatic stress disorder, but severer. He points out that the condition of the Cambodians was very different from

that of other refugees who had suffered less losses. A large number of Cambodians suffered from PTSD and showed symptoms like nightmares, intrusive thoughts, startle reaction, and anxiety. Kinzie also reported that pervasive depression was also very common. Their research is significant because it suggests that Western treatment methods were not very successful with the Cambodian patients who suffered more than just displacement. The research leaves unanswered questions about treatment methods for those who have suffered massive trauma.

### **Civilians' Trauma in *Death is Hard Work***

*Death is Hard Work* dwells on the characters' mental and emotional states as they embattle multiple traumas in a country ravaged with wars. The story opens in Damascus with the death of Abdel Latif al-Salim, whose final wish is to be buried in his ancestral village. Little did he know how difficult this would turn out to be, hence, the title of the novel – *Death is Hard Work*. What would have a few hours trip during peacetime turns into a projected, life-threatening three-day journey for his three children: Hussain, Bolbol, and Fatima. The siblings soon realize that death like life has lost all sanctity. They find themselves captured, interrogated, and imprisoned despite carrying a decaying dead body with them. As they negotiate through the numerous checkpoints and evade their own death, they come to doubt their decision to honour their father's death wish. At one point in their journey, Hussain, the eldest son, is ready to offer the decaying body to the dogs gathering outside their van:

It was becoming impossible to believe that their father's body merited such risk and sacrifice, that it should be treated so respectfully, when death reaped hundreds every day throughout the length and breadth of the country. (Khalifa, 2019)

Death and numbing of people's collective consciousness in the thickness of war are the main concerns of the novel. A country blighted by violence and war, Syria has turned into a deathbed where bodies fall every day, and where the "exceptional had become habitual, and tragedies were simply mundane" (Khalifa, 2019). Death is all-pervasive and is no longer a source of anguish. This growing indifference towards death is reflected in the novel as the al-Salim siblings navigate their way through air raids, tank convoys, militia, and road-side snipers: "Death passes by and you can't grasp it. In war, death is blind. It never stops to look at its victims" (Khalifa, 2019).

The novel opens in a world where death is a norm and is accepted with painful indifference. No longer a source of distress, it has become "an escape much envied by the living" (Khalifa, 2019).

However, as the novel reveals, it would be naïve to describe the emotional crises in such a straight forward manner. The Syrian trauma is much more complex given the magnitude and severity of their suffering. When Bolbol tells a taxi driver that his father has died in hospital of old age and expects some sort of sympathy from him, the cold response from the taxi driver shocks him: “The driver laughed and informed him that three of his brothers as well as all of their children had died a month before in an air strike” (Khalifa 2019). Bolbol is suddenly faced with the ugly reality that in Syria encounter with death is a common occurrence. His own father, Abdel Latif, has been an active member of a rebel group and has been a witness to numerous deaths and extreme hardships: “like everyone living under the siege, he hadn’t eaten a full meal in months” (Khalifa 2019). He knew that old Syria was fast slipping away. Abdel Latif spends most of his time with the dead, looking after graveyards in the besieged town of S, the rebel’s stronghold. He is also charged with looking after a demolished church after Father Walim leaves the town. While there is nothing left to protect, Abdel Latif feels that his duty is “to care for the soul of the place” and “every now and then he would go there and wander around the rubble” (Khalifa 2019). This metaphor applies to Syria, which has turned into a huge rubble as incessant, indiscriminate shelling and bombing has brought down, one after the other, all standing structures. Lost under the debris is the “soul of Syria,” its culture, traditions and history. There are echoes of this changed Syrian character and landscape in the novel:

They left the village at dawn. The weak light revealed the extent of the devastation. It seemed as if souls were still moaning under the rubble, shreds of clothing and body parts strewn over the abandoned fields and mixing with the skeletons of their goats and mules. The dogs had scavenged what they could and left the rest for the flies. It was complete and utter ruin. (Khalifa, 2019)

The pre-war Syria is now only a memory. With more than half of Syria reduced to a rubble, nothing of old times remains. People can only reminiscence how it used to be like before war. At one point in the novel we get a glimpse of the old times when life was normal in Syria, when roads were surrounded with “groves of olives, peaches, and apricots and grapevines,” and when the “houses were spacious and welcoming” and “the doors were always left open” (Khalifa, 2019). This is all gone now and they find themselves in the cold clutches of something sinister like death, grotesqueness, fear, and death-in-life.

## Death as Traumatic Injury

The complete devastation of all that you know and love can be deeply disturbing and can cause long-term neurological and psychological damage (Smith 2018). Unfortunately, the destruction of Syria is complete: the country as well as the people are destroyed completely. The outer and inner realities have come together in a most devastating manner. With both worlds destroyed, the survivor-victims are no better than the ‘walking dead.’ What has life to offer to them now?

The Syrian setting exacerbates individual trauma into collective, cultural trauma. Kleber et al. (1995) point out that “the psychological atmosphere in a society is clearly a factor that facilitates or hinders the process of coping with stressful life events” (2). Without support and recognition from the society or family, which itself is shattered and destroyed and traumatized, the problems of the survivors are intensified. Researches carried out by Kleber et al. (1995) on combat veterans reveal intensifying “feelings of detachment and isolation as well as significant problems in the areas of intimacy and sociability” (3). This is also true of civilian survivors who find themselves at the mercy of a collapsed social world which offers no consolation or therapy for their trauma. It is in a social setting that trauma and its effects are played out hence there exists a strong relationship between the traumatized individual and his immediate environment. In *Death is Hard Work*, the characters’ trauma is played out in the backdrop of crumbling social world order. Their estrangement, bitterness and feelings of isolation are directly connected to the external reality. According to Summerfield (1995) the “cultural bereavement may turn out to be a key determinant of longer-term psychosocial outcomes for whole societies.”

The siblings’ in the novel take upon themselves to bury their father in his hometown to honor his death wish. The journey from the city to their hometown under normal conditions is not more than three hours but at times like these, it could take days. Even inside the city, they encounter indifference and hostility. Hussain, the eldest, has turned his minibus into an ambulance by installing a faux siren in it but he soon realizes that it’s no use whatsoever. No one makes way for him on the busy roads of Damascus even when they hear the ambulances approaching. This is in sharp contrast to the old times, before war destroyed the societal values, when the dead were “respected” and “cars would pull over, passer-by would stop; and cast you genuinely sympathetic looks....” (Khalifa, 2019). This indifference is also seen in the altered attitudes towards martyrs and martyrdom. Sickened by the daily occurrences of mass deaths, people no longer differentiate between the dead and the living. Also, the war has cast doubts on the integrity of all fighting groups. People do not know who to call a martyr and who not to.

This has resulted in an indifference towards something as sacred as martyrdom which is accorded great value in Islam. Several verses in the ‘Quran,’ the holy book of Muslims, glorify martyrdom or shahada, for example: “And do not think of those who have been killed in the cause of Allah as dead. Rather, they are alive with their Lord, receiving provision” (3:170); “And if you are killed in the cause of Allah or die – then forgiveness from Allah and mercy are better than whatever they accumulate [in this world]” (3:169). Muslims accord great honor to martyrs on account of these verses. A special reference in the novel to show growing disregard of the people for their beliefs shows that apathy has set in at the level of the society. Khalifa (2019) highlights the uncaring and apathetic attitude of the drivers when trucks loaded with martyrs fall behind them. The loud call, “make way for the martyrs, make way for the martyrs” falls on deaf ears and “no one cared” (12-13).

Carolyn Dean (2010) argues that the survivor’s ability to honor their dead gives them a reason to live. In their determination to ensure the dignity of the dead, the survivors are looking for solace for themselves. In doing so, they find a strategy to deal with their trauma of death. Although the siblings encounter numerous obstacles during their journey, they do not abandon the dead body of their father. Nevertheless, on more than one occasion along their journey, Bolbol and Hussain do consider getting rid of the dead body and leaving it in the middle of nowhere. As despair grips the siblings at the second checkpoint, Hussain suggests that they throw the body on the road and leave before they are also implicated in their father’s ill fate. His total lack of feeling is a sign of complete psychological breakdown. He adds that “the dogs were eating plenty of bodies nowadays, so what difference did it make? Why didn’t they just leave it or bury it anywhere and go back to Damascus?” (Khalifa 2019). Yet, Bolbol, does not allow this. More than others, he needs to get this done for himself. Having lived most part of his life with unnamed fears, here is an opportunity to finally bury them along with his father. He needs to get this done despite the risks and challenges it poses to their lives. His life has lost all meaning; in his father’s death and his last wish he sees an opportunity for a new beginning. What he does not know is that with the war waging around them in all its ugliness, he and others will be pulled further into an abyss of despair and despondency. Although there are times when he regrets promising his father to do as he had asked and wishes if he is “transformed into a man with a little less sympathy” like his brother, Hussain (Khalifa, 2019).

At the second checkpoint, the siblings are asked to turn in the dead body to the authorities since it was long wanted by the Mukhabarat: “The officer explained that according to their records, Bolbol’s

father was still alive and still wanted. It didn't matter if in the meantime he had turned into a cadaver" (Khalifa 2019). This is not something the siblings could anticipate. That a dead body would cause so much trouble never crossed their minds when they decided to take this trip. As a trope for Syria, the dead body imbricates the psychological with the political. Abdul al-Salim's corpse represents Syria in that the different factions continue to wage their political and military battles even though Syria is a destroyed, albeit dead, state now. The battle lines are not even well defined now, the war being so entrenched and warring factions too many and everywhere. There seems to be no one in control in this war, and this makes the civilians the largest casualty. The taxi driver who drops Bolbol and his ailing father to hospital in the middle of the night does not want to leave the hospital building and Bolbol doesn't want to ask the reason, afraid of the answer. He was reminded of an earlier occasion when upon asking the same question from another taxi driver, he was rebuffed: "the driver had sneered and described his home in Zamalka in detail, including the fact that it had been bombed and his wife lay dead beneath the rubble. In the end he had asked Bolbol, "So what home do you mean, sir?" (42).

The corpse had become an object of revulsion without an identity; it wasn't merchandise and it wasn't a person. After death a person becomes a third sort of thing, neither animal nor mineral. (Khalifa, 2019)

In Syria, the dead now outnumber the living. The morgues are always full and a large number of dead bodies become food of the animals. Everyone in Syria knows that death is only a few steps away. A long struggle with death anxiety has made them indifferent and benumbed. They no longer fear death, even grotesque death. The general feeling is that death would overtake them "today or tomorrow, or by next month at the latest." They regard everyone not so much as "alive" but as "pre-dead." Khalifa tells us that even though it is not a particularly pleasant notion, "each citizen had to live under the shadow of this understanding" (Khalifa, 2019).

Death is everywhere they turn to: "it was a terrible flood drowning everyone" (Khalifa 2019). To escape from drowning, the civilians benumb themselves against the onslaught. Fear gives way to despair and tragedies like death are no longer received with sympathy. At the second checkpoint, the siblings are shifted to 'goods to declare' lane as if the dead body is a merchandise or a commodity. Later they are asked to produce the identity card of the deceased at which Bolbol starts explaining that the dead do not belong with the living: "that they slip away from their histories and families in order to affirm their membership in one family alone, the family of the dead..." (Khalifa, 2019).

The characters have learned to numb their feelings in the face of extreme terror. As grotesque killings continue without respite, they can only survive through cold indifference. This indifference is a manifestation of extreme helplessness the survivors experience. As they are unable to change their condition, they shut themselves off to reality, to pain. This is a survival tactic. Khaled Khalifa writes in the novel:

When people died, no one bothered asking after the how's and whys. They already knew the answers all too well: bombings, torture during detention, kidnappings, a sniper's bullet, a battle. As for dying of grief, for example, or being let down by your body, deaths like that were rare...."

If the siblings thought their troubles deserve more attention, they soon discover that they are wrong. The desensitization is at the level of society. At Lamia's place, where they stop to spend the night, they find that no one is interested in their story: "The story of their father's body got no sympathy from them; they had seen too many bodies already. As ever, death was so close to them that they had stopped giving it any particular consideration."

### **Grotesque Death**

As the novel deals with death, there are a growing number of instances when death in all its grotesqueness and ugliness confronts the helpless survivors. This encounter is deeply unsettling and has serious mental health consequences for the characters. At both times that Bolbol goes to collect his father's dead body from morgue inside the hospital, he felt sick. More than anything, it is the deplorable condition of the dead bodies in the morgues that he finds unbearable. In the hospital in Z, Bolbol finds the dead bodies piled "on top of one another like lemon crates" and feeling disgusted he gets hold of his father's release papers, signs his name in the hospital's register and "left like he was fleeing hell, almost deranged by fear" (Khalifa 2019). He is horrified at the sight of the dead bodies that are waiting outside the morgue: "some had lost their lower extremities, others half their heads." He knows he must shut himself off to this kind of terror, if he is to survive the encounters. Pushing them back from consciousness can help him cope with the gory reality. Moments later, he is with others and "the five of them sat in silence, sipping their coffee, surrounding the dead man, and waiting for dawn." Psychiatrists see bereavement as a serious threat to one's mental health and a leading cause of many physical and mental disorders. Keyes et al. (2014) conclude that a loved one's death can influence psychiatric disorders especially in case of sudden death of a loved one: "Sudden death of a loved one might therefore have

consequences specific to attachment loss as well as those explainable by stress mechanisms.” They reveal elevated levels of anxiety and “pervasive associations between unexpected death and other mood and anxiety disorders” (8). Their findings suggest a strong association between an unexpected death and manic disorders. Bolbol like all Syrian survivors have no time to grieve. Someone must see through the fake wall of resilience, that the survivors have built around themselves, and understand the true nature of their psychological and emotional pain.

Haitham’s body didn’t have any fingers, and the fate of those severed fingers remained a mystery, though his face and most of his other limbs had been returned. He had been shot in the back of the head before being cut up.... Nevine lifted the shroud from his face and looked into his eyes for the last time, wanting her hatred to reach its fullest extent. (Khalifa, 2019)

The grotesqueness effects a kind of despair as well as repressed anger at their helplessness. Like the rest of the mothers, Nevine also surrenders to her fate not knowing “how-to carry-on living” without her sons. The revolution means no more to her; everything seems trivial and meaningless: “She’d spent years embroiled in gratuitous conflicts whose triviality she felt only now” (Khalifa 2019). Bolbol feels inundated by emotions too heavy to carry. Death inspires thoughts that are more grotesque in character: “He often imagined whole communities committing suicide in protest against a life so soiled.”

Chronic numbing of unpleasant emotions as well as experiences of loss and terror can result in psychosomatic disorders over the course of time. As the war in Syria spiralled over years without hopes for an end, direct exposure and contact with gruesome reality has had a crippling effect on the Syrian population at large. The somatic manifestations of the underlying psychological problems are manifold. One of them is insomnia. The novel throws light how the Syrians besieged by war and endless trauma, are struggling with sleep depravity. We are told in clear terms that almost everyone in Syria suffers from insomnia: “Everyone suffered from insomnia and interrupted sleep.

### **Life-in-Death**

Abdul Latif’s second wife, Nevine, is an epitome of the horror that is visited upon the Syrians and her life-in-death condition captures the chronic nature of their trauma. Having lost her husband and both her sons to the war, she carries the burden of her life with agonizing indifference. Even her marriage with Abdul Latif cannot bring her back to life; she accepts him with a resigned heart: “Men were plentiful

everywhere; there was no use getting attached to one” (Khalifa 2019). When Abdul Latif falls sick and they know his time is near, she wants him to go back to his sons and refuses to allow him to be buried with her: “Several times he asked her to reconsider and allow him to stay close to her, as he wanted to die in her arms, but she wouldn’t discuss the matter. She wasn’t interested in surviving any more loved ones. She had no intention of being a custodian for any more graves.” It is not the fear of death that overwhelms her but, rather, the “abundance of time,” and in this state of mind, death is more endearing than life. As despair closes in upon her, she shuts out the painful memories so that “everything superfluous would be shed.”

Left with nothing but “graves”, Nevine’s greater problem is “how-to carry-on living” without her sons (88). She is deeply lonely and broken from inside, and her immediate environment does not help her either. The town is completely destroyed, only a few houses remain. Food supplies are scant; water and electric supply system is totally destroyed. Life is tough and starvation makes it worse: “Everyone wanted to smash their mirrors. It was hard enough looking at other people’s faces without feeling miserable, let alone one’s own.” The survivors fight over “a handful of herbs and a few wild mushrooms” which is all they are left with or survived on soups concocted out of “narcissus bulbs and nameless herbs.” Abdul Latif himself rummages through the rubble for anything edible: “rabbit, dog, cat – anything would do.” Life, under these circumstances, is a burden and a meaningless existence.

Nevine has stopped ‘living’ her life. Even her marriage with Abdul Latif does little to change her attitude towards life. There is no longer any joy for her in life; detached and indifferent, she only exists from day to day. Freed even of fear of death, she walks through the town during bombardment like a ghost, not caring about anything, not feeling any emotion and without any trace of life knowing that there is no one left to kill. The living is no better than the dead:

After losing their compassion, a person becomes little more than another corpse abandoned by the roadside, one that really should be buried. She knew that she was already just such a body, but she still needed to die before she could find peace under the earth. (Khalifa, 2019)

Like everyone else, everything she had built was destroyed by the war – her family, her house – and “the only thing she could do now was wait to die.” Loneliness surrounds her, just as nothing stirs up her interest; before her marriage with Abdul Latif, she used to “wake up alone every morning, unconcerned

with the preoccupations shared by the rest of mankind.” Keyes et al (2014) show that sudden death can be significantly traumatic and enduring: “Unexpected death of a loved one is most frequently cited as the most severe potentially traumatic experience in one’s life, even among individuals with a high burden of lifetime stressful experiences. Unexpected death is associated with heightened vulnerability for onset of virtually all commonly occurring psychiatric disorders.” The sudden loss of her sons destroys Nevine’s peace and makes her vulnerable to depressive episodes and other anxiety disorders. She finds it difficult to connect with life around her and spends her time yearning for her lost sons. DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> ed.) recognizes and labels this condition as “persistent complex bereavement disorder.” Psychiatrists understand that it is common for the sufferers to feel extreme longing for a deceased loved one accompanied with self-destructive thoughts. Researchers including Shear et al (2011) point to the persistent nature of bereavement for some individuals which may manifest in other mental disorders. The sufferers will continue to experience intense emotions and display symptoms that disrupt normal functioning. This disabling or life-altering aspect of the disorder poses a serious threat to the mental health of the sufferer who feel “stuck” in the grieving process. This life-in-death condition has serious consequences for the sufferer’s physical as well as mental well-being: “A prolonged state of abnormal grief has been associated with elevated rates of suicidal ideation and suicide attempts. Cancer, hypertension and cardiac events are more likely after several years, and immune disorders and evidence of immune dysfunction are more frequent” (Fleming).

Carlson et al. have found symptoms of “diminished cognitive functioning” and “emotional numbing” among victims of post-traumatic stress disorder (Pappas, 2003). These and other findings suggest that traumatic events disrupt normal memory and cognitive integration leading to a failure to cope with an intense negative environment. As it happens with Nevine, trauma victims suspend connection with the external world, dissociating themselves from life around them, while keeping alive an inner attentional involvement. This numbing response “suggests loss of normal feelings due to the embodiment of trauma” (Pappas, 2003). Lifton also identifies many levels of disintegration or various forms of the breakdown of order that the trauma victims experience. He believes this disintegration is reflected in the emotional state the trauma victims develop and is characterized by despondency, abstraction and emptiness (86). When conditions are overstretched, the trauma victim experiences symbolic and bodily forms of death. Bolbol cannot reconcile with the loneliness and the horror of his

situation and feels “as though his head had been gnawed by the dogs that had attacked them and that he, too, was now just a cadaver” (Khalifa, 2019).

Even when life hits the survivors in all its grotesqueness, they find a way to survive just like Nevine does. Lifton (1967) argues that numbing is an involuntary, instinctive response to external situations of life-threatening proportion. However, it can be a conscious response also especially when a victim feels completely overwhelmed and helpless, as Herman notes: “The helpless person escapes from her situation not by action in the real world but rather by altering her state of consciousness” (Herman 1994). The survivors see this method of disengagement as a survival strategy. After having to willingly induce an altered state of consciousness in extremely traumatic situations, they force an altered face of reality upon themselves which is less painful and more bearable. These alterations in the consciousness are not immediately recognizable and can have long-term consequences on the victim’s mental well-being. Numbing is therefore both a reaction to a traumatic event and a coping strategy. In *Civilization and its Discontents* (1962), Freud is acutely aware of these issues. He reflects:

No matter how much we may shrink with horror from certain situations—of a galley slave in antiquity, of a peasant during the Thirty Years' War, of a victim of the Holy Inquisition, of a Jew awaiting a pogrom—it is nevertheless impossible for us to feel our way into such people, to divine the changes which original obtuseness of mind, a gradual stupefying process, the cessation of expectations and cruder or more refined methods of narcotization have produced upon their receptivity to sensations of pleasure and unpleasure. Moreover, in the case of the most extreme possibility of suffering, special mental protective devices are brought into operation.

## CONCLUSION

As the novel suggests, death comes to the survivors in one of the two forms - mental or physical. Those who escape physical death by some stroke of luck, experience the life-in-death. They walk the earth and fend for the needs of their bodily frame without real emotions. Compared to physical death, this form of death is so much worse and agonizing. Unlike the common belief, in this state, the survivor finds no relief from traumatic stress. Emotions such as anxiety, depression, agitation, and frustration, that are too heavy and toxic to carry, constantly and incessantly plague the survivors. However, the trauma of the victims/characters in the text, is best understood by living their lives. They have lost everything -literally everything- and have been internally and externally displaced; their children do not go to schools; they have limited available medical care; they have no means to earn their living and are dependent on aid; most women are widowed and are tending after their children without any support; there are no opportunities for the young ones so they end up joining one fighting group or the other. From the comfort and security of our homes, with full tummies, it is easy to sympathize with their plight and do nothing about it. However, it is our collective responsibility to make sure that this world is home to everyone. Lifton contends that ‘death’ and traumatic reactions to horrid death experiences have “traditionally been omitted from posttraumatic stress” (“From Hiroshima to the Nazi Doctors”).

Moreover, prolonged psychic numbing among characters is seen to produce apathy and eventually despair. Ten years into the conflict, Syrians have managed to cope through repression by limiting their psychological and emotional investment in the conflict. A relentless exposure to shelling and killing, which has become a norm in present day Syria, together with total destruction of community life and health facilities, is expected to have far-reaching mental health consequences for civilian population. For victims as these, whose contact with trauma is long-standing, numbing can lead to chronic mental illness reflected in the breakdown of their cognitive functioning and loss of meaning from life. This is a form of figurative death and is reflective of a complete knocking-down of the inner imagery. The novel, *Death is Hard Work*, reveals a life immersed in death and darkness. The characters’ lives are inextricable from death or the dead, as the war-play continues. They deal with this psychological onslaught by diminishing their capacity to feel any emotion. Can we imagine life without hope/emotions? The destructibility of this kind of trauma for humans under precarious circumstances cannot be questioned and Western practices of treatment for war-victims need to be reconsidered in view of the new death machinery, which can strike damage far greater than physical combats.



## REFERENCES

- Arendt, H. (1970). *On Violence*. Harcourt Brace Jovanovich.
- Barret, D. & Jaffar Behbehani. (2003). "Post-Traumatic Nightmare in Kuwait Following the Iraqi Invasion." *The Psychological Impact of War Trauma on Civilians: An International Perspective*. Praeger Publishers.
- Barrett-Lennard, G. (1962). Dimensions of therapist response as causal factors in therapeutic change. *Psychological Monographs: General and Applied*. Vol. 76 (43), pp. 1-36.
- Basheti, I. et al. (2019). "The Syrian Refugee Crisis in Jordan: A Cross Sectional Pharmacistled Study assessing Post-Traumatic Stress Disorder." *Pharmacy Practice*, Vol. 17(3), 1475, pp. 1-10.
- Becker, D. (1995). "The Deficiency of the Concept of Posttraumatic Stress Disorder When Dealing with Victims of Human Rights Violations." *Beyond Trauma: Cultural and Societal Dynamics*. Rolf J. Kleber et al. (Eds.), Plenum Press.
- Benford, R. D. & David A. Snow. (2000). *Framing Processes and Social Movements: An Overview and Assessment*. University of North Carolina.
- Berger, J. (2016). *Hold Everything Dear: Dispatches on Survival and Resistance*. Verso.
- Dean, C. (2010). *Aversion and Erasure: The Fate of the Victim After the Holocaust*. Cornell University Press.
- Dean, C. (2019). *The Moral Witness: Trials and Testimony after Genocide*. Cornell University Press.
- Fleming, K. "Persistent Complex Bereavement Disorder DSM-5." Theravive, <https://www.theravive.com/therapedia/persistent-complex-bereavement-disorder-dsm-->
- Freud, S. (1962). *Civilization and its Discontents*. Norton & Company.
- Freud, S. (1939). *Moses and Monotheism*. Trans. Katherine Jones. Vintage Books.
- Freud, S. (1895). Project for a scientific psychology. In J. Strachey (Ed. & Trans.), Standard edition of the complete psychological works of Sigmund Freud. The Hogarth Press, Vol I, pp. 45-61.
- Freud, S. (1963). *General Psychological Theory: Papers on Metapsychology*. Philip Rief (ed.), Simon & Schuster.
- Hamza, M. & Kevin Clancy (2020). "Building mental health and resilience: Regional and Global Perspectives from the Inaugural Syrian American Medical Society Mental Health Mission Trip (July 2 to July 7, 2019)." *Avicenna Journal of Medicine*. Vol.10, No. 1, pp: 54-59. DOI: [10.4103/ajm.ajm.157.19](https://doi.org/10.4103/ajm.ajm.157.19)
- Hardt, M. & Antonio Negri (2000). *Empire*. Harvard University Press.

- Herman, J. (1994). *Trauma & Recovery: From Domestic Abuse to Political Terror*. Pandora.
- James, P. (2003). *Poisoned Dissociative Containers: Dissociative Defences in Female Victims of War Rape. Psychological Impact of War Trauma on Civilians: An International Perspective*. Praeger Publishers.
- Janoff-Bulman, R. *Shattered Assumptions: Towards a New Psychology of Trauma*. Free Press. Online.
- Jay, M. (2003). *Refractions of Violence*. Routledge.
- Kevin, F. Persistent Complex Bereavement Disorder DSM-5.  
<https://www.theravive.com/therapedia/persistent-complex-bereavement-disorder-dsm-5>
- Khalifa, K. (2019). *Death is Hard Work*. Faber & Faber.
- Kinzie, J. D. (1988). "The Psychiatric Effects of Massive Trauma on Cambodian Refugees." *Human Adaptation to Extreme Stress: From the Holocaust to Vietnam*. John Wilson et al. (eds). The Plenum Series, pp.305-318.
- Kolk, V. D. et al. (2007). *Traumatic Stress: The Effects of Overwhelming Experience on mind, body, and society*. The Guilford Press.
- Krippner, S. & Teresa M. McIntyre. Eds. (2003). *The Psychological impact of war trauma on Civilians: An International Perspective*. Praeger Publishers.
- Krippner, S. & Teresa McIntyre. (2003). "Overview: In the Wake of War." *The Psychological Impact of War on Civilians: An International Perspective*. Praeger Publishers.
- Kroll-Smith, S. J. & Stephen R. Couch. (1993). "Technological Hazards: Social Responses as Traumatic Stressors." *International Handbook of Traumatic Stress Syndromes*, Plenum Series.
- Larkin, P, Georgina S., & Esme, K.W. (2023). The Syrian Civil War: Timeline and Statistics. *Research Briefing*, House of Commons Library, 8-12.
- Laplanche, J. & Jean-Bertrand Pontalis. (1998). *The Language of Psycho-analysis*. Translated by Nicholson-Smith. Karnac Books.
- Laub, D. & Andreas Hamburger (eds). (2017). *Psychoanalysis and Holocaust Testimony: Unwanted Memories of Social Trauma*, Routledge.
- Laub, D. (2017). "Traumatic Shutdown of narrative and symbolization: A failed empathy derivative. Implications for therapeutic interventions." *Psychoanalysis and Holocaust Testimony*, Routledge.

- Lifton, R. J. (1967). *Death in Life: Survivors of Hiroshima*. Random House.
- Lifton, R. J. (1993). From Hiroshima to the Nazi Doctors. *International Handbook of Traumatic Stress Syndromes*. Plenum Series.
- Lifton, R. J. (1988). "Understanding the Traumatized Self: Imagery, Symbolization, and Transformation." *Human Adaptation to Extreme Stress: From the Holocaust to Vietnam*. John Wilson et al. (eds). The Plenum Series, pp.7-31.
- Lifton, R. J. (1980). "The Concept of the Survivor." *Survivors, Victims, and Perpetrators: Essays on the Nazi Holocaust*. Joel E. Dimsdale (ed.). Hemisphere Publishing Corporations.
- Lifton, R. J. (2011). *Witness to an Extreme Century: A Memoir*. Free Press.
- Lifton, R. J. (1993). "From Hiroshima to the Nazi Doctors: The Evolution of Psychoformative Approaches to Understanding Traumatic Stress Syndromes." *International Handbook of Traumatic Stress Syndromes*. John Wilson & Beverley Raphael (eds). Plenum Series.
- Lifton, R. J. (1926). *The Nazi Doctors: Medical Killing and the Psychology of Genocide*. Basic Books.
- Loft, P. (2023). "Syria's civil war in 2023: Assad back in the Arab League." House of Commons Library. commonslibrary.parliament.uk
- McDonald, A. et al. (2017). *Invisible Wounds: The impact of six years of war on the mental health of Syria's children*. Save the Children.
- McHugo, J. (2015). "Syria: Apex of the Arc of Instability." *Irish Pages*, Vol. 9, No.2, pp. 107-124.
- McIntyre, T. & Margarida Ventura (2003). "Children of War: Psychosocial Sequelae of War Trauma in Angolan Adolescents." *The Psychosocial Impact of War Trauma on Civilians: An International Perspective*. Praeger Publishers.
- Pappas, J. (2003). "Poisoned Dissociative Containers: Dissociative Defences in Female Victims of War Rape." *Psychological Impact of War Trauma on Civilians: An International Perspective*. Praeger Publishers.
- Parker, K. (1988). "Dominant Attitudes of Adult Children of Holocaust Survivors toward their Parents." *Human Adaptation to Extreme Stress: From the Holocaust to Vietnam*. John Wilson et al. (eds). The Plenum Series, pp.193-218.
- Parson, E. R. (1988). "Post-Traumatic Self Disorders (PTsfd): Theoretical and Practical Considerations in Psychotherapy of Vietnam War Veterans." *Human Adaptation to Extreme Stress: From the Holocaust to Vietnam*. John Wilson et al. (eds). The Plenum Series, pp.245-284.
- Pearlman, W. (2018). "Becoming a Refugee." *Review of Middle East Studies*, Vol.52, No.2, pp. 299-309.
- Pearlman, W. (2016). "Narratives of Fear in Syria." *Perspectives on Politics*, Vol. 14, No.1, pp-27-37.
- Pearlman, W. (2016). "Narratives of Fear in Syria." *Perspectives on Politics*, Vol. 14, No.1, pp-27-37.
- Perlman, M. (1998). *Imaginal Memory and the Place of Hiroshima*. State University of New York Press.
- Perkins, J. D et al. (2018). "Mental Health in Syrian children with a Focus on Post-Traumatic Stress: A Cross-Sectional Study from Syrian Schools." *Social Psychiatry and Psychiatric Epidemiology*, Vol. 53, pp. 1231-1239.
- Philips, C. (2016). *The Battle for Syria: International Rivalry in the New Middle East*. Yale University

Press.

Summerfield, D. "Why Export Mental Health?" McGill Transcultural Psychiatry. McGill Blogs.

Summerfield, D. & Hume, F. (1993). "War and Posttraumatic Stress Disorder: The question of Social Context." *Journal of Nervous and Mental Disease*, online.

Summerfield, D. (1991). "The Psychological effects of Conflict in the Third World." *Development in Practice*, Vol. 1 (3), pp. 159-173.

Summerfield, D. (1995). "Addressing Human Response to War and Atrocity." *Beyond Trauma: Cultural and Societal Dynamics*, edited by Kleber, Rolf J., et al, Plenum Press.

"Syria: Events of 2018." *Human Rights Watch*. Online. <https://www.hrw.org/world-report/019/country-chapters/syria>

"Syria Crisis." Unicef, November 2019.

<https://www.unicef.org/mena/media/6936/file/Factsheet%20syria%20November%20update.pdf%20.pdf>