



## *Trauma as Embodied Belatedness: Reading The Body Keeps the Score Through the Lens of Caruth's Trauma Theory*

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### Abstract

This research analyzes the representation of trauma and memory in *The Body Keeps the Score* (2014) from the lens of Cathy Caruth's idea of Trauma as belated experience as developed in her book *Trauma: Exploration in Memory*. The *Body Keeps the Score* argues about how trauma lives in our bodies and how survivors relive the experiences when exposed to triggers instead of just remembering the trauma. This process agrees with the concept of Cathy Caruth's idea of trauma as experience of Belatedness, meaning those traumatic events are not fully understood at the moment but return later, even after the later repetitions they are not finished. This research uses qualitative textual analysis of *The body Keeps the Score* but from a specific lens of trauma as belated experience. This research also analyzes how our body remembers unclaimed traumatic experiences in our unconscious mind. By studying Van der Kolk's book *The Body Keeps the Score* through the lens of Caruth, we can dive deeper into trauma theories and also explain more clearly how trauma changes mind and body. This study debates that trauma is not just about past but it has continuous effect on mind and body. It also represents how *The Body Keeps the Score* explains trauma as a changing event for our body and brain's processing and reaction to triggers.

**Keywords:** Belated experience, unconscious mind, qualitative textual analysis



## Chapter 1: Introduction

### 1.1 Background of the Study

The 20th century has been an era of horrific happenings, from genocide to two world wars it causes deep physical and psychological cuts that people of that time could hardly understand. People were unable to interpret their surroundings. Before this era the concept of trauma was limited to the body and every scholar discussed and defined trauma in that perspectives but after the 20th century it changed. The focus shifted from body and connects it with mind. It helps the people and scholars in understanding how horrific events leave a deep scar on the human body and mind. It gives a broader definition of trauma and also helps us understand how the human body cannot fully understand extreme events at the moment and relives them later when they repeat themselves in different forms. As the definition of trauma changes researchers also shift their focus towards psychological issues. Sigmund Freud was one of those great scholars who studied trauma theory deeply in modern society. He closely observed people who returned from war or war land to analyze how the horrors of war affect their mind and body. He discovered that the memories of war were not only stressful for soldiers but they were also reliving the same pain in the foam of dreams or flashbacks. He explained this idea in his book *Beyond the Pleasure Principle* (1920). Later on, he introduced the idea of *Nachträglichket* which means trauma is not fully felt when it happens. It is almost like the brain could not process or understand the horrific happenings and went frozen, later on relives the experience when exposed to triggers to interpret fully.

This concept by Sigmund Freud became the base line for trauma study and Theory to which Cathy Caruth later on added. She expands the ideas of Freud in her books *Unclaimed Experience: Trauma, Narrative and history* (1996) and *Trauma: Exploration in Memory* (1995). She said, trauma, "an overwhelming experience of sudden or catastrophic events, in which the response to the event occurs in the often delayed, uncontrolled repetitive appearance of hallucinations and other intrusive phenomena" (Caruth 1996, p. 11). She explains trauma as an overwhelming experience that freezes our minds and later returns in the foam of nightmares or flashbacks. She mainly focuses on how traumatic events are received rather than on the actual event.

Caruth argues that traumatic events are so horrific and sudden that it makes our mind stuck and we can't fully understand it at the time of happening that is why they come later, again and again until fully understood. That is why patients often feel stuck in the past. They not only recall it as a normal memory but the relives the whole experience again and it feels like that traumatic event is happening again. She said trauma is "far from telling of an escape from reality—the escape from a death, or the referentiality of history—claims, as to escape" (Caruth 1996, p. 7). She also added that trauma is not just about the past but it keeps affecting the present and future. Her main focus was mind, theory or literature while on the other hand Bessel Van Der Kolk explained the same phenomena by using different approaches in psychology and neurosciences. In 2014 he published his book *The Body Keeps the Score* in which he summarizes different studies and researches on Post-traumatic Stress Disorder PTSD as well as the healing process. He simply argues that trauma not only affects the mind but also the body and the way we perceive emotions. Trauma is often viewed as a psychological problem, mostly treated by talking therapy but *The Body Keeps the Score* talks about how in mostly traumatic events talking therapy fell short. The book argues that traumatic experiences are embodied processes, stored in our



body and repeats during response to any triggers. Cathy Caruth explained trauma as a Belated experience, idea developed in *Trauma: Exploration in Memory*. By primarily reinterpreting Freud's writing on trauma, Caruth illustrates that the language of trauma is literary because it "defies, even as it claims, our understanding" (Caruth 1996, p. 5).

Our body changes completely after a traumatic event and it never went back to normal on its own. He argued that after a trauma our body started remaining on alert mode and they why our mind processes stress changes. It also disturbs the mind's understanding of feelings and senses. To him, our body Keeps the Score of every traumatic event even when our mind cannot process it completely. Ideas about trauma by Cathy Caruth and Bessel Van Der Kolk are quite understandable when connected to each other. For Van Der Kolk trauma, affects the body deeply because our mind undergoes survival mode during shocking events and that is why our body keeps the score of events that our mind cannot. Van der Kolk writes, "it changes not only how we think and what we think about, but also our very capacity to think" (Van der Kolk 2014, p. 43). To Caruth, traumatic events repeat themselves to be understood completely because our mind went blank at the time of happening due to shock. Both of them agree on the idea that traumatic events are not just normal memory neither are they stored as a memory and victims always relive the experience again. For Caruth, it happens through nightmares or flashbacks but for Van der Kolk it happens through body numbness or overwhelming emotions. Van Der Kolk also argues that talking about trauma is not enough for healing which Caruth agrees on. This research connects the ideas of Cathy Caruth and Bessel Van Der Kolk. It views *The Body Keeps the Score* through Caruth's Theory. Ideas about trauma and how it affects our mind and body becomes clearer and deeper when we connect the ideas of these two scholars. This study combines humanities and sciences and pave ways for other researcher from both different fields. This research combines the ideas of Bessel Van der Kolk and Cathy Caruth and define trauma a belated experience by doing deep textual analysis of few parts of book *The Body Keeps the Score*. This research helps in understanding how trauma changes and affects our mind and body at the same time.

### 1.2 Problem Statement

Cathy Caruth's trauma theory and Bessel Van der Kolk's book, *The Body Keeps the Score*, have been studied very deeply by many researchers but separately in different fields. They have not been studied and discussed much together irrespective of being so related and literary important. Most of the concepts of Caruth are mostly used in literature for the study of stories or films and also in a cultural perspective to look into history. On the other hand, Van Der Kolk's theory and work are mainly used in clinical and science related atmospheres as well as studied by therapists to understand trauma deeply. It helps in understanding Post-Traumatic Stress Disorder (PTSD) and also help in treatments. Both scholars talk about trauma and how it affects humans but their views were similar just belong to different fields. Because there is a clear gap between these two different fields, humanities and sciences, many scholars were unable to explore these two scholars together irrespective of being so similar. The gap is important because both Caruth and Van Der Kolk focus on how painful experiences are hard to interpret and remembered by body and mind. Caruth uses psychoanalysis and literary studies to explore how trauma shapes our language and repeats itself with the passage of time while Van Der Kolk uses neurosciences and clinical studies to define how trauma changes body and mind's functioning. Their ideas are not just like two researchers explaining their perspectives on same topic instead



their ideas depend on each other. Without Caruth's concept, the theory of Van Der Kolk sounds too brain centered and incomplete while if we look on the other side, without the ideas of Van der Kolk's, Caruth's concept feels too abstract and literature centered. Regardless of great research on Trauma Theory, every researcher views *The Body Keeps the Score* as a literary, clinical and psychological text and draws attention to better recovery and therapy. But there is a great gap between researches that explore the text through Caruth's Trauma as a Belated experience. This study will fill the gap of most people viewing *The Body Keeps the Score* as a self-help book by applying Caruth's idea about trauma being a delayed experience. This study will also look at how the body reacts this delay as well as reshapes our mind, memories and body after a traumatic experience.

### 1.3 Research Objectives

- 1) To study how *The Body Keeps the Score* portrays trauma in the body by using Caruth's ideas about trauma as a bleated experience
- 2) To investigate how the ideas of Bessel Van Der Kolk about body keeping the memory of trauma and Cathy Caruth's concept about trauma as a delayed experience are connected
- 3) To look at how our body and brain react to delayed trauma using Caruth's ideas and Van der Kolk's concepts in *The Body Keeps the Score*

### 1.4 Research Questions

- 1) How Van der Kolk's clinical experience coordinates with Caruth's theoretical structure and in what way *The Body Keeps the Score* represents trauma as a delayed process?
- 2) How does nightmares, flashbacks, stress and other body signs in Van der Kolk's *The Body Keeps the Score* align with trauma and delay that Caruth talks about?
- 3) How does *The Body Keeps the Score* talk about traumas that are unowned by body and in what way does the memory of our body act as a delayed process?

### 1.5 Significance of the Study

This study provides a lens to view *The Body Keeps the Score* from Caruth's point of view about trauma as embodied experience. It explores how delayed episodes of trauma repeat through body's reaction to stress or triggers. Application of Caruth's theory on Bessel Van Der Kolk book *The Body Keeps the Score* expands its literary and cultural level. This study will connect ideas from literature and science to contribute to studying trauma as research. Caruth was inspired by Freud and many researchers were inspired by her and did great in literature and humanities, on the other hand Van der Kolk's book is very famous in trauma studies. Despite being so similar they have not been linked before. By studying Van der Kolk's book *The Body Keeps the Score* through the lens of Caruth we can dive deeper into trauma theories and also explain more clearly how trauma changes mind and body. This perspective will add value to both fields by giving Caruth's concept a practical basis and adding depth into Van der Kolk's observations. It will also help other students of literature and history to study *The Body Keeps the Score* from a different perspective. It helps in understanding that this book is more than just self-help or therapy, but it also explains how trauma changes the human body and mind through real case study. It also helps therapists and other researchers of trauma to understand why the after effects of trauma continue to appear even patients are taking talking therapy, and why those flashbacks are not normal and feels heavy. This study provides a different perspective to view *The Body Keeps the Score* and trauma theory in general. This study helps in understanding trauma as a process that affects the body, mind and memory. This



study adds depth in literature as well as helps others to understand that trauma is not just a mental problem but it also affects body, mind, time, memory and human connections after the horrific happenings. It reveals the complex connection of human mind, body and memory.

### 1.6 Delimitation

This study primary focus on Trauma theory as a belated experience explained by Cathy Caruth and not on recovery or other therapy treatments. People study *The Body Keeps the Score* as a self-help book or for treatment purposes but in this study, it is studied theoretically rather than through a clinical or neuroscience lens. It only examines and apply Cathy Caruth idea of trauma as embodied belatedness, ignoring other trauma theorists unless necessary. This study looks at Cathy Caruth's idea of trauma as she explained in her books, as a delayed experience. It connects this idea of Caruth to Bessel Van der Kolk's book, *The Body Keeps the Score* (2014). This study does not add all the studies of trauma nor compares different theorists of trauma in detail. It only studies *The Body Keeps the Score* through Caruth's ideas rather than comparing the two scholars. It mentions other scholars when important or to draw a base line like Freud. It does not discuss treatments and effective ways to deal with trauma as discussed in *The Body Keeps the Score* instead, it only focuses on Van der Kolk's portrayal of trauma and his views on memory, trauma and body. The study uses a method named qualitative textual analysis and will only do analysis of selective parts so it does not include case studies or scientific experiments. All the data that is analyzed is from the book *The Body Keeps the Score*, which is closely read and interpreted through the lens of Caruth's idea of trauma as a belated experience. Lastly, the study only looks at trauma from Caruth's perspective while analyzing book *The Body Keeps the Score*.

### Chapter 2: Literature Review

In *Beyond the Pleasure Principle*, Freud one of the famous trauma theorist talks about his observation about trauma. He observed that after the traumatic incident, the nightmares do not help people to heal from their trauma. Those nightmares repeat themselves because the mind was too overwhelmed due to shook to understand at first. Caruth explains that the effect of trauma in mind is complex and cannot be healed easily. Caruth adds to Freud's work in her book *Unclaimed Experience*. She believed that trauma cannot be fully understood at first because by nature it resists understanding. Critics like Ruth Leys argue that Caruth's view oversimplify trauma theory by treating it as a universal experience instead of a specific theory like social and historical issue. The main goal is not to see if Caruth's theory is perfect or oversimplified but to see if it helps explain parts of van der Kolk's ideas in *The Body Keeps the Score* that might otherwise be overlooked.

Bessel Van Der Kolk's seminal paper Post-traumatic Stress Disorder and the nature of trauma (2000) helps in understanding psychological trauma in more detail in academic perspective. He argued that Post-traumatic Stress Disorder is more than just a psychological and emotional problem. In 2000 he said that after the horrific event, it completely alters the human's biology and emotions. In this seminal paper he mainly argued that traumatic incidents cause permanent damage and reorganize the human nervous system. After the incident affected individuals began to remain in survival mode even in a normal environment. He explores how these neurobiological changes also change therapeutic interventions. He mainly focuses on Brain Alterations and neurosciences and how trauma leaves an impact on them. The part of our brain Hippocampus is mostly



responsible for context and memory, so it helps in explaining why traumatic memories feel like the trauma is happening again rather than just a normal memory. Van der Kolk (2000) also explains how after trauma a human brain alert system becomes hyper reactive and keeps the body and mind in fight or flight mode even when there is no danger and the environment is safe. The central theme of Kolk's (2000) was that there is a clear difference between normal memory and traumatic memory. Our brain does not store trauma as a normal memory that's why when it repeats itself it feels like the incident is happening again. Normal memory is stored as linear stories while traumatic memories are stored in the right hemisphere which is responsible for complex emotions as the speech side of the brain shuts down because of shock. As a result, they repeat themselves in flashbacks, sounds or any other triggers. When flashbacks come the brain fails to detect them as a normal memory which causes the individual to experience the feelings of original trauma. To conclude he mainly investigates how trauma affects the central nervous system and store the traumatic memory in right hemisphere. He explains why individuals feel the same as the trauma is happening again when exposed to triggers and provide a deeper understanding of trauma that help in treatments. He shifted focus from simple questions like what is wrong with what happened? (Van der Kolk, 2000).

Bassel van der Kolk in his study (2003) "The Neurobiology of childhood trauma and abuse" discuss and explore how early life trauma and violence that are deeply felt left a long-term mark on individuals and also effect their development by delaying it. He did not view early childhood trauma just as an incident that only disturbed child psychologically but Kolk in 2003 argues that it disturbed the normal biological system of that child resulting in language and memory problems. Trauma during early childhood result in causing unbalance in emotions regulation, difficulty in language and impulse control. It alters the child's memory storage processes and body reaction to triggers. One of the central ideas of this paper was that early life trauma disturbs child development and neurology so as the child grows it remains in their body and affects their adulthood by showing symptoms which is known as delayed experience. Van der Kolk (2003) mainly argues that childhood abuse physically changes and disturbs the developing brain of those children that have been traumatized. He also argues that during childhood our brain development looks for a healthy and stable environment to be developed normally but when a child is exposed to a trauma, his brain produces high levels of stress hormones like adrenaline which ultimately affect the brain development as well as memory and language. This results in a hyper reactive brain which cannot regulate emotions in a controlled manner. So now the child's nervous system stays on survival mode and on high alert. Now the trauma permanently changes child's brain and emotional regulation. He also explains trauma as a belated process. During trauma, Broca's area is shut down and affects child language that is why they cannot explain their story in a clear way. These experiences are not stored in normal memory so they become a part of delayed response of trauma. The body remembers the trauma until it repeats in future to be fully understood so it affects the adulthood. In short, Kolk's (2003) provides a structure to interpret trauma as a part of human life as reality not just in the past. It explains that traumatic events in early childhood alter the brain's normal development and keep the body in stress mode. In simple words to him childhood trauma is like a ghost that haunts the child's body for a long time and affects his adulthood (Van der Kolk, 2003, pp. 293-317).



In his study, Bessel van der Kolk (1994) *The Body Keeps the Score: Memory and the evolving psychobiology of post-traumatic stress* draws the physiological base and help to connect science with literature. Van der Kolk (1994) challenges the classic psychotic treatments. In his perspective severe trauma is not just a psychological issue but is a horrific experience for the body. In this paper, the central theme is that an overwhelming terror triggers a breakdown of normal memory alliance. The trauma is not processed as a past event, but rather is somatically stored in the central nervous system so it is reality. This article is the baseline text for a study of trauma as embodied belatedness, of an unabsorbed past that is physically held in the body and comes back, later to haunt the survivor's present reality and future. One of van der Kolk's (1994) main research argument is the brain's reaction to excessive fear, particularly in terms of the separation of the mind's alertness and the body's sensations. When a traumatic event happens, there is a shutdown in the brain's linguistic and analytical centers, including Broca's area, because high level of adrenaline and stress hormones released. Linguistic mind is in the state of being disconnected, and the event cannot be translated to words or a normal chronological memory. van der Kolk (1994) however, shows that the trauma is embedded experience and raw data that has not been processed in the way that would normally be processed is due to trauma. This is the biological aspect of "embodiment" meaning the trauma is not recalled as a story being recalled but it is literally written into the cells, the memory and the automatic nervous system of the person. Van der Kolk's (1994) analysis of the re-emergence of these somatic fragments over time supports Cathy Caruth's concept of "belatedness". The trauma was not consciously interpreted by the hippocampus, which means it is not stored like ordinary memory. Van der Kolk (1994) states that after being exposed to a trauma trigger in the present day, the brain does not recognize it as a memory. Instead, the brain gets hyper-reactive and throws the body back into the state of fight, flight or freeze that occurred during the event itself. This process feels very painful for individual as they experience it all again. The trauma is felt in the moment even if it is not remembered, but it also reconnects the past body to the present body. In short, van der Kolk's (1994) paper is important to understand the reality of the unclaimed past traumatic memory. The paper shows how the body keeps the score of traumatic representing that those who have suffered from trauma are stuck in a constant state of stress. In the end, this is the physical evidence for Caruthian trauma theory that the body is a storage device for the unspeakable trauma which holds the past that is not fully understood until it comes later as in nightmares, panic attacks and flashbacks (Van der Kolk, 1994, pp. 253-265).

Book *The Body Keeps the Score* by Bessel Van der Kolk is reviewed by Ho, Chan, Luk and Tang for academic purposes. The review is published in *Frontiers in Psychology*, a journal that is a medium for linking a gap between van der Kolk's clinical experience and the new neuroscience findings. The authors explain existing dramatic shift in trauma therapy from being mind oriented to body focused. One of the main focus of the review was to analyze how trauma disrupts "normal communication" meaning it disturbs language. Ho et al. (2021) focus on the work by van der Kolk on the Broca's area, the location of speech in the brain. It has been observed that there is a change in the functioning of this area when the brain encounter with traumatic flashbacks or stress. This makes it extremely painful for survivors to regulate their emotions. Language and logic play important role in processing memories in classic talk therapies. The reviewers



also aggress with Kolk's view that the process talking therapy they may re-traumatize the patient. This review also suggest that yoga and exercises are helpful in regulating emotions and reduces stress levels. They also suggested art as a source of reclaiming control over emotions. The review generally agrees with van der Kolk's understanding approach, but it also highlights some limitations. In short, in end the review by saying that it is still a masterpiece. It is able to breakdown classic treatments and shifted focus to body along with mind. It reveals that true trauma healing starts with calm body and healthy mind (Ho et al., 2021).

In "Unclaimed experience: Trauma and the possibility of history" Cathy Caruth (1991) show a new way to view trauma where she explains how our memory portrays what we learn from neurosciences. Trauma does not only make of just psychological experience of a horrific event but it includes all the elements of that experience as Caruth (1991) discuss. The main theme of her 1991 paper is that trauma is an "unclaimed experience" meaning a horrific event happen too quick and too unexpected that it was not fully interpreted at the moment of happening. This text is the theoretical understanding of trauma as an experience of embodied belatedness. It suggests that an event cannot be stored normally in memory and is belated. One of the main ideas of Caruth's (1991) analysis is that the time after the trauma and the way it is stored is beyond pleasure principle. She talks about how the survivor of a horrific event can be normal and unharmed mentally at that time but later on is overwhelmed by the horrific event. It is because that event is a direct event meaning a reality, rather than an indirect event meaning past. It is the delay which is the root of her theory of belatedness (Nachträglichkeit). Because our mind was not ready to accept the fear and shook when it took place so it is never interpreted. This unclear past is not recalled like a normal memory but forces the survivor to remember the event in form of flashback or nightmare and in repeated foam to re-experience the trauma. The event is not fully understood because it was too sudden to be understood completely. Some issues related to trauma and language are explored by Caruth (1991). The traumatic experience is not fully interpreted and that's why cause a stress in the victim's life and communication skills. One part of this repetitive return of the trauma is usually caused by flashbacks and nightmares causing the same pain to survivals felt during first time. The trauma is not something that can be treated by talking about it but it is a complex case. In short, this study by Caruth 1991 provides a transformation structure to think about trauma and how it is a complex process. The paper ends by stating that trauma is not just something that can be left in past but it is a reality, a never ending one. Her "unclaimed experience" is equal to the experience of a brain that cannot connect words, one that cannot recall memories to potray those experiences in verbal form but that lets the unclaimed experience haunt the body like ghost, reminding the survival about trauma they experienced (Caruth, 1991, pp. 182-192).

Parting Words: Trauma, Silence, and Survival (2001) is an essay by Cathy Caruth which is a famous work in literary trauma theory. Caruth's work is mostly read in academics and literature but she was also interested in rethinking the suffering and its connection to human language. As she disagrees with statement that trauma is a simple disease that can be addressed and cured. Caruth talks about a different perspective and concepts. In this paper, a 'breakdown of language' is her is her main focus. Caruth start from very basic works of Sigmund Freud and by keeping his work as a baseline, in "Parting



Words”, Caruth is bravely redefining Freud's *Beyond the Pleasure Principle* (1920). Caruth turns this classical understanding upside down. She believes that the nightmares and flashbacks that trauma victims experience is not an event of death but an “accompaniment” to life. Caruth says that trauma happens when an event is happening too quickly or too intensely or is too horrible to be understood in real time. The survivor's mind could no longer understand the event as it was happening, so that the survivor would suddenly living a life he or she was not fully aware of experiencing. The repetition is a way of the psyche to relive, to recognize, and to survive the event in order to be understood. The destructive, awkward drive toward awareness is the death drive for Caruth. Trauma does not make itself visible right away and so there is not a linear narrative. The silence of survivals is not about not saying something but it is about not being able to convey it as it was never fully understood. In this silence, Caruth dives into how the survivors' culture and literature is formed. Survivors will make efforts to communicate messages in repetitive symbolic expressions as there is no other communication mean. The time of silence is the time of remembrance. This is significant because Caruth is not so much interested in what is being said, she is more interested in what's not being said and what is repeated. “Parting Words” is a book that takes psychological theory to an ethical level and explain how silence becomes a form of survival. This is because the trauma of the person who were survivors is not fully making sense to them so it is the duty of listener to learn how to understand that trauma and if reading the trauma of the person being read by. Trauma victims cannot fully interpret what has happend to them so it is the responsibility of the listener to interpret it. Listening to trauma is a new kind of reading like an e-mail about a current crisis. While Caruth's argument is highly influential, there are also large number of critics to Caruth's statements that exists in the field of trauma studies. The complex relation between memory, language and history is the center of Cathy Caruth's book “Parting Words: Trauma, Silence, and Survival”. Redefining the Freud's death drive as a process of life, she provides a complex theory of the trauma that are marked in literature (Caruth 2001, pp. 7-26).

Nicole A. Sütterlin's *History of Trauma Theory* (2020), a comprehensive and critical overview from the 19th century to today, contains her chapter. The central argument of Sütterlin is that trauma cannot be simplified into a timeless medical fact but is a structure that depends on social and historical context. By changing the definition, she shows how ideas continue to develop with the passage of time. She argues that trauma theory should not be studied in a political environment or by using technologies. In this study she says that during the 19th century when the era of industrialization and machines was growing, she highlighted the issue of railway spine in the medical field. During this era, people starting showing psychological issues even when they did not have physical harm. She then shifted the focus towards early works of Freud. She then connects this case to Freud's WW1 soldier cases. This shift forces scholars to study repetition and belatedness. Later on, this helps in drawing foundations for Humanities and sciences. According to her 1980 was an important year for trauma theory because in this year Post-traumatic Stress Disorder was announced as an official diagnosis. She decried it as a cultural turn and link it with other trauma theorists. In short, she succeeded in de-neutralizing the classical concept about trauma by portraying it as an outcome of historical evolution. (Sütterlin 2020, pp. 11-22)



Ferenczi's Trauma theory (1998) discuss and highlight the importance of ideas given by Ferenczi that are often ignored by people. He argues that trauma comes from real experience rather than just a state of mind. He disagreed with the concept of Freud. According to Ferenczi, trauma is completed in two steps. First the child is abused and then the abuser denies it. Now the victim questions himself or reality which creates helplessness. Survival often blames themselves because of this confusion. Frankel agrees with Ferenczi's concept and opposes Freud's approach. In short, Frankel's work is significant because they challenge older views that mainly focuses on imagined trauma (Frankel 1998, pp. 41-61).

The Article of Andrews Barnaby looks at idea of trauma as a belated experience from a new perspective. He connects the ideas of Freud and Jean-Paul to help in understanding literature deeply through the perspective of time and stress. He argues that the concept of Freud about belatedness shows us the in reality we mostly forget real events and only remember them during belatedness. He said that Freud argues that people always come too late to their own life experiences. We often delay the process of understanding to reconnect with the past and disconnect with reality which means we mostly look at the past to construct meaning. In short Barnaby's work plays a significant role in understanding trauma in literature as it goes beyond the reality and shows its lasting connection with time. This explains the feeling of sadness or meaningfulness while looking back at past (Barnaby 2012, pp. 119-138).

During an interview Cathy Caruth talks about her ideas on trauma. Before this interview she views trauma as personal feeling but during this conversation she moved towards shared suffering and pain. She connects the silence of trauma to power group that suppress victim's voices. She argues that when a horrific event happens those in power try to hide it and result in oppression. She also talks about how watching people suffering online can numb other people instead of speaking up. She said that trauma is something that continues to affect the present so it should not be seen as something related to the past only (Caruth, Brochand and Tam 2019, pp.48-71).

Although a number of researchers have been discussing Cathy Caruth and Bessel Van der Kolk and some scholars also explained trauma theory in detail like Freud's idea about trauma and Caruth's *Trauma: Exploration of Memory, The Body Keeps the Score* was also analyzed deeply mainly in clinical and literary perspectives. But no other researcher viewed *The Body Keeps the Score* with the lens of Trauma as Belated experience, idea presented by Cathy Caruth. This study combines humanities and sciences and pave way for other researches. It closely looks at the trauma theory and highlight how our body never forgets any traumatic experience and then later on repeat it. This study also fills gap of how ideas of Caruth's and Bessel van about Trauma are similar.

### Chapter 3: Research Methodology

#### 3.1 Research Design

This study uses qualitative design for the research more specifically it focuses on textual analysis and theoretical interpretation. This approach is used because it fits the research questions and objectives as it focuses more on constructing meaning, structure and how perfectly a theory fits in the text. It does not involve any surveys to avoid variations. And this research method does not measure how common trauma symptoms are in people nor does it focus on the effectiveness of treatment. It interprets the ideas of Cathy Caruth of trauma as a belated experience and analyses how this idea explains Bessel Van der Kolk's *The Body Keeps the Score* on textual and conceptual level. The structure of this research



method is mainly analytical and descriptive. The analysis focuses on separating different themes, discussing arguments and main concepts of the text and how these factors change or complicate the theory. Description means closely looking at text and recording Van der Kolk's arguments and explanation of trauma but keeping the essence of the text same. Interpretation of theory means arranging Van der Kolk's arguments and descriptions within Caruth's concepts. The research is not experimental or survey based instead it uses critical thinking and interpretation analysis that aim at deeper understanding of the text and theory. It also explores trauma between two perspectives of different disciplines.

The approach of this method includes close reading of text but the focus is Caruth's idea. So, the close reading does not only include what Van der Kolk says about trauma but it also focuses on how he said that. It includes how he describes different cases and portrays trauma while using figurative language. It also discusses his focus shifting from clinical experience to generalizing the theory of trauma. Study focuses on selective parts that mainly focuses on trauma and its repetition which perfectly fits in Caruth ideas about trauma as a belated experience. This attention to detail method is important and carefully used because portray of trauma matters more than experience according to Caruth. That is why this study focuses on constructing deeper meaning from words like "keeping score". This study does not use comparative analysis of two scholars but view the tension between them and how they made each other's arguments stronger. The main goal is to analyses how both scholars describe similar ideas and how Caruth's ideas deepen the concept of van Der Kolk's neurobiological concepts. Mainly it focusses on how the concept about trauma of Cathy Caruth and Van der Kolk deepens understanding that they are not able to do on its own.

### 3.2 Data Selection

This study chooses Bessel Van der Kolk's *The Body Keeps the Score: Brain, Mind and Body in the Healing of Trauma* (2014) for multiple reasons. One of the main reasons was that the book explores trauma and theory in a comprehensive way that makes it easy to understand and deeply go through trauma as a belated experience. Then this book fits perfectly with Caruth's ideas about trauma that makes it a perfect choice for this study. With millions of copies sold and being translated in different languages proves that it is easy to understand trauma through Kolk's writing style that makes it worth examining. Because van Der Kolk discusses several cases in his book *The Body Keeps the Score* that prove that traumatic experiences are belated in nature it is almost perfect choice for analyzing it through Cathy Caruth concepts because she also talks about trauma as a belated experience. Another reason was that the text is highly interdisciplinary in its nature. It blends together the insights from neuroscience, therapy and case studies to define trauma. For close reading this study selected specific passages from *The Body Keeps the Score* using a purposive sampling method. The main goal of the study was not reading the whole text but to mainly focus on passages of the text that directly talks about trauma, belatedness, repetition of trauma and embodiment. Most people view *The Body Keeps the Score* as a self-help book or therapeutic one but the data selected for this study is all about trauma, flashbacks, repetition and belatedness which gives insight about trauma and add value to its interpretation before going for healing through Caruth's ideas. Main focus case study includes Vietnam veterans that experience flashbacks even though it had been a long time since Trauma happened. These case studies provide us the insight of the main topic of this research study which was trauma as a delayed experience. It combines the ideas about



trauma from two scholars from different disciplines one from humanities and other from neurosciences. The analysis focuses on how Van der Kolk argues about neurological changing in individuals that experience trauma. It also talks about how childhood trauma leaves a long-lasting effect on the child and affects the development of the brain. Sections that explores emotional numbness, neurological changing, flashbacks and trauma as repetitive phenomena are given special attention. Finally, the study selected the text because of its interdisciplinary nature and how deeply it talks about trauma as a belated experience.

### 3.3 Theoretical Framework

The basics of this study mainly comes from Cathy Caruth explaining trauma but specifically focusing on core concepts. These concepts include repetition of trauma, belated experience, flashbacks and unclaimed experiences. Caruth talks about how trauma is highly related with time. During the happening of trauma it is not fully experienced because of it's shocking nature. Caruth explains that our mind becomes over-whelmed during traumatic events as they happen too suddenly and our body undergoes survival mode and repeats themselves in the form of flashbacks, nightmares. Survival may feel like that event is taking place again. Caruth says: "The story of trauma, then, as the narrative of a belated experience, far from telling of an escape from reality—the escape from a death, or from its referential force—rather attests to its endless impact on a life" (Caruth, 1996, p. 7). Caruth believes that a trauma always repeats itself as it was never fully experienced or understood so our mind keeps bringing that event in our consciousness. This repetition does not stop after one episode but it comes back again and again whenever body feels triggered. She further writes: "To be traumatized is precisely to be possessed by an image or event" (Caruth, 1996, p. 4).

The late return of trauma is not just like a memory but it is painful and survivals relives the experience again and again until it is fully understood by the body and mind. This idea become deeper and concrete when applied to Bessel van der Kolk's *The Body Keeps the Score* (2014). He also argues that traumatic memories remain unclear in mind and they are not stored like normal memories so they repeat itself in order to be clearer. After a traumatic experience when an individual's body gets triggered, they return to the past and relive the whole experience. Caruth argues that "the trauma consists not only in having forgotten a reality that cannot be known, but in having left behind the traces of what can never be fully understood" (Caruth, 1996, p. 18). It always feels like it's happening again. This return is not for once but it happens again and again whenever body and brain reactivate alarm system. Our body keeps track of our traumatic experiences even when we are not consciously aware of them. Van der Kolk compares psychological trauma to a splinter, noting that when a "splinter... causes an infection, it is the body's response to the foreign object that becomes the problem more than the object itself" (Macaskill-Webb, 2020, p. 61). Caruth named her one book *Unclaimed experience* and the title itself proposes the idea that traumatic memories are not hidden or controlled but they were never claimed in first place. After the happening the survival does not always feel terrible or keep remember them but it comes back from time to time, uncontrolled by survival. This idea fits with van DER Kolk's concept that the body keeps the score of traumatic experience when sometimes mind is unable to do it. The idea of repetition and lateness of unclaimed memories from trauma is discussed in *The Body Keeps the Score*. The concepts of belatedness, repetition and unclaimed experience form the understandable structure for



the analysis of *The Body Keeps the Score*. One of the main contributions of this study goes beyond textual analysis and thematic description or comparisons between them.

#### Chapter 4: Analysis and Discussion

##### 4.1 Trauma as Belated Experience in Van der Kolk's Cases

Van Der Kolk's book *The Body Keeps the Score* studies cases of traumatized individuals in detail. He talks about a Vietnamese venter who once was in a war land but hears the backfiring of a car even though it had been a long time since he came back. Then he talks about a woman who was once sexually abused as a child and now experience same feelings like the time of being molested when a co-worker stands near her even though it's been years since that incident. These are not just normal memories that appear time to time but they are unable to recall them as an event happened in past. They don't view it as something that had been passed but something that is still happening in present or can happen in future. Van der Kolk notes that for over a hundred years, "everyone who has been working with traumatized folks, including Freud himself, noticed that the people kept on coming back into the past, in some form or another" (Van der Kolk, 2013). He argues that it doesn't matter when the trauma repeats itself but what matters is that it returns through the body before it does through to the brain or memory. Case studies of this type when viewed from Caruth's perspective does not relay mainly on imaginations or normal dreams. Van der Kolk's case of his client justify this statement. The nervous system of survivals went into fight-flight-freeze mode without understanding what is happening. Trauma happened too soon and sudden. Just like the Vietnamese venter after the incident when later on he hears a car backfire years after, he feels the same way he felt when the actual trauma happened. His muscles tense up, his heart beat fasten, and he became very towards its surroundings. He was unable to think clearly and to process the moment as a safe one. The delay in remembering was not just a memory issue but it represents how the original trauma memory is built and stored. He can't remember it as something from the past because he didn't fully understand it when it happened. It only comes back as a feeling in the present. This repetition shows up clearly in van der Kolk's case studies. Years after the combat ambush, Tom explains that when he closes his eyes, he witnesses the same horrific events playing out in his mind. Describing the terrifying timelessness of this flashback during his brain scan, Tom said: "It's not a memory. It's happening right now" (Van der Kolk, 2014, p. 47). Tom doesn't misrepresent his experience, from Caruth's point of view, he is accurately describing the process of traumatic belatedness. It's not a representation of the past but a reoccurrence. Tom's flashback is just such a roar. When your body says something for first time it says it without you being aware of that you are able to hear it. This is a delayed return and Van der Kolk argues that the survivor has no control over this. By traumatic flashbacks, he means "sensory and emotional fragments" that "intrude on the present without warning" (Van der Kolk, 2014, p. 44). They cannot be requested by the survivor's order neither can they be let go by the survivor's will. This is not the only case where the two theories overlap or add depth to each. The traumatic event is unclaimed in nature just because it cannot be understood by the mid and body when it happened as it was too overwhelming and sudden. The survivor has not suffered the trauma but the trauma has suffered the survivor. Van der Kolk's clinical observations support this idea. In a hyperactive amygdala and a weak prefrontal cortex, the body's alert system is merged by signals that would not disturb someone who has not been traumatized. The body reacts before the mind is able to and the survivor feels different from what had



happened as if they had become a different person. The timelessness of trauma can also be expressed as "the tyranny of the past," a concept originally formulated by Pierre Janet and famously re-examined by Van der Kolk (2014, p. 176). For him time play important role for trauma survivals. The future feels uncertain because of fears, the present is filled with strong memories, and the past doesn't stay in the past. This change in how we feel time is not a mistake in thinking but it is a real brain issue. In Post-traumatic stress disorder (PTSD) the hippocampus, which helps us remember when things happened, does not function well. This means traumatic memories feel like they are happening now and not in the past. This idea can be explained by Caruth's work. The traumatic event did not feel like it happened at a specific time but it felt like a never-ending process. When these memories come back, they make the present feel painful and timeless.

#### 4.2 Body as Embodied Memory

Where Caruth says that trauma lives where the unclaimed experience lives. She explains what happens when trauma happens is that body now have unclaimed experience. Trauma for Caruth is the how and the why of belatedness but it is also what experiences are yet to claimed. Trauma is not merely an event that happened in the past; it is an unintegrated presence in the present. As Caruth (1996, p. 4) explains, trauma is fundamentally "an overwhelming experience of sudden or catastrophic events in which the response to the event occurs in the often delayed, uncoordinated flash-backs". It is not just memory in the brain but more like something in the mind that does not fit normally. Van der Kolk describes this well in *The Body Keeps the Score*. The story is the representation of how the body recalls past experiences that are not processed, holding on to them and bringing them back to life. Van der Kolk suggests that trauma lives in the body and registers as a rhythm that result in changes in the functioning of the body and is repetitive over and over again. Van der Kolk (2014, p. 96) emphasizes that somatic recovery is impossible unless a trauma survivor develops interoceptive awareness, arguing that individuals must ultimately learn to recognize and tolerate their internal bodily sensations to regain a sense of agency. The feelings are never signing or symptoms but they are always what is happening in the body. After a traumatic experience when an individual's body gets triggered, they return to the past and relive the whole experience. It always feels like it's happening again. This return is not for once but it happens again and again whenever body and brain reactivate alarm system. Someone who has been a survivor of childhood abuse may not be able to tell us what happened but they may find themselves moving in a particular way, whose posture that he perceives when looked at by the eye of others would cause his body to shrink, whose pain when he is touched in a particular area will cause fear to quickly sink into him. These states of the body are not the after-effects of trauma but rather the very original trauma itself and it still exists and lives outside the control of our conscious memory. The regions of the brain involved with creating and understanding words such as Broca's area turn off if a person is too frightened, that is why they become unclaimed experiences. The experience is not words, but it is experiencing that and, in this case, when the survivor is not lacking in words, but words are closing up when there is an overwhelming stress process. Frightened individuals, writes van der Kolk (2014, p. 61), "look at everything and see nothing" because their thalamic filtration systems are utterly overwhelmed by the trauma response. The event is recorded and the person feels it and suffers through it, but is unable to fully understand it. It is unclaimed and un analyzed and so cannot be merged into actual narration of life. This is the original experience which still lives in the body, in



the nerves, in the form of the hormonal processes. This somatic experience of unclaimed experience is expanded on in the discussion of dissociation by van der Kolk. Since his measure, dissociation isn't only a psychological protection mechanism, it is a neurobiological response to extreme threat. When fight or flight is not possible brain can enter a freeze process and turn off sensory and emotional processing to endure the intolerable. Van der Kolk claims that the body does not forget what the mind forgets as said in his 2014 book. But it is not a just a mental remembrance, but a physical one. The unclaimed experience is stored as some kind of bodily secret that cannot be brought back up into consciousness from the past. When the body cries to the wound that cannot be verbalized as described by van der Kolk. There may be sexual abuse as a child which may result in a chronic pelvic pain without any organic factors. A veteran who has been in combat might experience pain to a part of his body stomach pain or headache. These symptoms are markers of the body's struggle to remember and to carry a version that was not understood or claimed at first. Rather than viewing the self-system as a still body, modern somatic psychology treats it as an ongoing dynamic; as Van der Kolk (2014, p. 97) notes, neurobiological self-awareness relies on a constantly shifting network of internal tracking, meaning that identity is fundamentally a biological process rather than a fixed thing. Trauma is living the body that was not lived for first time. If considered in verbal therapy, it will have a great effect on this somatic unclaimed experience. If trauma is primarily a narrative memory, rather than physiological or psychological one then talking is not alone a sufficient treatment to break the physiological impact or marks of the trauma, but a helpful means to provide a coherence and meaning in opposition to which the body resists. Caruthian in their own terms, they are efforts to claim the unclaimed; not because the trauma is now or ever becoming a coherent narrative but because the body now has to deal with what it could not have withstood earlier.

#### 4.3 Flashback and Repetition of Trauma

In van der Kolk's patient stories what we witness most is how often the same pain returns, like a memory hitting in the middle of normal life. Not just memories hitting now and then but these people get pulled back in past continuously trapped in loops of rapid episode, night horror, unwelcome pictures flashing up, bodies acting out old wounds without warning. Freud called this looping a repetition compulsion long ago, while Caruth sees it as time breaking down under trauma's burden. Being haunted is not portray as a mere literary metaphor here; rather, as Caruth (1996, p. 4) argues, trauma manifests as a literal history that defies standard comprehension, effectively meaning that the survivor is fundamentally possessed by an unintegrated past. These individuals aren't reliving the past by choice rather something forces them back, body and mind pulled into moments still refusing to let go. Flashbacks hit like shards of sensation, slipping into the present without notice; as Van der Kolk (2014, p. 44) demonstrates, these intrusive flashbacks are composed of unintegrated "sensory and emotional fragments" that utterly disrupt the survivor's time line. In one case smell of wet leaves takes him back and he was not thinking about it but living it. In some cases, touch on skin triggers panic in survivals even long after the trauma ended. Another person watches glass breaking again each time their mind roam near the crash. This is not normal recall because that unfolds differently. It shapes itself, fits into life's timeline and adjusts with time. But trauma stays constant. It lives outside speech, stored as movement, noise and pressure. No matter if it repeats once or ten times, the experience never transforms. It always remains similar in every repetition. Traumatic



memory is not processed like standard narrative tales that carry cohesive meaning; instead, raw sensory pieces stay locked in isolation—manifesting as overly bright colors, breath caught mid-lung, or the heat rising from pavement before an impact. As Van der Kolk (2014, p. 176) explains, these unintegrated imprints lack a linguistic timeline, remaining frozen in the nervous system as timeless, physical sensations. Trauma as that were mostly experienced in childhood affect neurophysiology and behavior of the brain as it is the most crucial age of development. Individuals with traumatized past face problems in their adulthood while building relationships specially with trust. Traumatic experiences leave a mark on personality and can be a reason of negative trade in individuals

Like other normal stories, traumatic memory stands out. Because the moment hits too fast to make sense at the time, it slips outside normal telling. Instead of unfolding like a story, it hits back without warning and what comes back again is not told rather it is felt all over again. Flashbacks do not play like scenes from history, they act as if it is happening now. They bring what was never fully taken to life and experience it. Van der Kolk's patients report about back in the war was never just a memory of it. Their words fit perfectly with his theory, each story reinforcing the idea without needing proof. Instead of recalling trauma like regular memories they rejoin them fully. Now the experience that was once remembered becomes lived again and without any warning. The memories of trauma that keeps showing up again matters deeply in each story. Why would survivals go back to get hurt? Freud asked himself that one day. Caruth takes that question further, saying the loop isn't about taking control but pointing at something unseen. Traumatic memories come around not to get fixed or healed but to speak. But speaking fails, it missed its moment originally. As time passed, it grew louder and louder without communication. A scene that happen too fast is now being pulled slow. Each return slip through memory like a door that had been left open. Traumatic narrative is ultimately not shaped right; it lacks a coherent start, a clear path, and a definitive finish. As Caruth (1996, p. 7) argues throughout her framework, trauma defies standard chronological understanding because its suddenness destroys the mind's ability to witness and categorize the event on a standard linear timeline. Once lived as a horrible memory, so lives many times after the same way. Caruth explains that our mind becomes over-whelmed during traumatic events as they happen too suddenly and our body undergoes survival mode and repeats themselves in the form of flashbacks, nightmares. Survival may feel like that event is taking place again.

When something traumatic happens, stress chemicals like adrenaline and cortisol passes through the brain. These boost how clearly sounds, smells, and emotions get stored and yet they disrupt the part that organizes memories in odder. So, the memories that forms are sharp in feeling but in broken pieces in story. Every time a reminder hit the amygdala, the physical reaction returns just like before. This alter the brain a little and instruct it to respond faster next time. It keeps happening not because survival command it but because nerves are being instructed that way. Van der Kolk notes the body holds onto this instruction like a sound hitting repeatedly. Talking will not stop it once the cycle takes hold. Out of nowhere, a pattern shows up again and again, van der Kolk names it "reenactment," where people stuck in past trauma live through pieces of it without realizing. Picture someone hurt as a kid and ending up with others who treat them badly in future too or imagine a veteran, returning from battle a long time ago, speeding down roads like danger pulls them forward. Behind such moments there is not decision-making but something complicated, the physical need to finish what never got claimed, to face what



could be painful to be faced. Caruth ideas helps in making sense of how these loops hold together. What feels like memory is really a first interaction with something that arrived too early. Only now does it surface, carried forward by doing rather than recalling. A moment delayed becomes one lived, pulled from silence where it once had no home. What happens during traumatic nightmares adds another layer here. These episodes call out trauma exactly as it happened, no hiding, no changes, just raw replay. Regular dreams changes things around but not these nightmares. They feel real while happening. Freud struggled with that idea. Dreams supposed to be about desires, yet people keep reliving terror at night. That did not fit. His theory expected escape, not repetition. Van der Kolk steps in with a different perspective. He sees those nighttime horrors not as mental stories but bodily reactions. Something deeper than normal dreams. Somatic data shows that the traumatized body frequently acts before conscious thought can process immediately, transforming nightmares into automatic physiological reflexes rather than standard psychological messages (Van der Kolk, 2014, p. 61). Consequently, as Hirth (2018, p. 346) observes in her critique of classic literary trauma framework, the experience fundamentally resists human grasp while simultaneously insisting on being known. These dreams are not like puzzles needing assembling. They insist on being lived again. Something horrible did happen, it lives in the body and the discharge has not come yet.

#### 4.4 Belatedness Through Brain and Mind

Most important contribution of Van der Kolk in trauma research is his close look at how injury reshapes the brain functioning and activity. Caruth focus on trauma through literature and psychoanalysis, he uses her ideas as base in physical changes within the nervous system. Together, their work fits perfectly. Her concept of delayed response shifts from abstract idea into something understandable, that can be seen in disrupted neural signals after trauma. In our brain these are four areas shape how trauma come late and these includes amygdala, prefrontal cortex, hippocampus and insula. Fear overtakes too strongly when the amygdala races ahead without any interval that mistakes it for emergencies. The response is delayed and control slips, not for trying hard enough but because under pressure the response got delayed. Memories get tapped in time since the hippocampus struggles to arrange events where they belong. Then there is the insula, caught between feeling everything and nothing at once. The bodily signals flood in or disappear completely. This mix leaves some bodies screaming while others go blank, neither state chosen nor trusted. Together these shifts form an unseen network shaping reaction long after trauma ends. Science sees this clearly through studies tracking breath, brainwaves, and silence. how nerves work shows why trauma hit back late. When the hippocampus struggles, memories fail to hit as trauma had passed long ago. Because the prefrontal area shuts down, there is no way to sort what happened before and after. Since the amygdala hits too hard, muscles stay tight like danger still roam nearby. That moment of trauma never got handled right at the time. Because of the overwhelming the mind had no space at that time. So, echoes pulled forward while main parts stay inactive. As Van der Kolk (2014, p. 21) puts it, traumatic injury is not merely the cognitive recall of old scenes; rather, it manifests as lasting physical and psychological imprints left behind inside the survivor's flesh and thought. These marks are a proof of delay that the body is holding what the mind could not interpret when it first hit.

Caruth believes that a trauma always repeats itself as it was never fully experienced or understood so our mind keeps bringing that event in our consciousness. This repetition



does not stop after one episode but it comes back again and again whenever body feels triggered. Sometimes a break in thinking shows up where time feels broken. Caruth talks about trauma like an actual pain not just poetic words but something real inside the mind that is falling apart. This split is not symbolic, it shifts how someone holds onto that memory now and then when it happens. Van der Kolk sees physical traces behind such ideas. brain scans reveal what pain reshapes the development of brain silently. Not simply just saying that trauma leaves marks but he points at tissue changes you can track across MRIs. When awareness slip through moments without fixing them, that matches damage found in memory centers. A gap in placing events when they happened fit precisely with weakened connections deep within the skull. The way past hit present uncontrollably it disturbs the normal functioning of brain. Now instead of calm thinking there is a jumpy alarm deep in the brain that is always scanning and on alert mode making everything seem like a threat. When something hits that feel like a thread leaves the body of survivals detached from their skin, breath and their hands. Childhood trauma, as van der Kolk explains, shapes how belatedness unfolds throughout growth stages. Because early trauma hits when brains are still forming, it reshapes both current function and future development. In homes filled with abuse, a young mind adapts prioritizing danger signals instead of curiosity, bonding, or joy. Constantly bathed in stress chemicals, the developing brain adapts to survival-driven states rather than standard processing; as Van der Kolk (2014, pp. 159–160) demonstrates, this persistent neurobiological alteration in children culminates in a complex clinical presentation that he names "developmental trauma disorder. That delay bound with early wounds is not just about symptoms showing up later rather it is about main abilities arriving late or never at all. Efforts done for emotional balance, connection, and making sense of experience gets overpower by survival demands. Because growth of brain shapes how we handle pain, delays in it can deepen the idea of late responses. When shock hits back because the brain cannot process it in at once, young brains adapt that gap. Now instead of just missing single moments, kids miss main processes they need to ever understand those times of horror. So, gaps grow from the start, lasting far beyond childhood, adults keep going on without inner self needed to face past events. That gap stays built in, growing a cycle where trauma simply waits for the return. What happens first inside the body often matters more than thoughts during traumatic moments. Normally, signals move from physical senses up to the brain, getting sorted into understanding. During distress because raw alerts hit back without waiting or warning, alarmed reactions disturb past reasoning centers completely. Sensations hits in before our mind and body got any chance to process them fully. Van der Kolk puts it simply by saying that memory lives in flesh even when mind and thoughts fails to keep track. Late arrival defines the gap that why trauma repeats again and again even after years had passed since it happened.

#### 4.5 Silence Taking Over

Silence speaks louder than words in both Caruth and van der Kolk's concepts. As Caruth suggests, trauma fundamentally slips through language like smoke, known more by what it breaks within the survivor's psyche than what it explicitly tells. Analyzing this linguistic crisis, Hirth (2018, p. 346) highlights how traumatic narratives consistently defy conventional expression, remaining hovering and ungripped within the text. Trauma hits back closely in order to be seen and interpreted but it does not fit in any shape we try to give it or a story. From clinical perspective, van der Kolk observes the mind go quiet under



shock. The words scatter when parts of the brain shut down. Trauma stored beyond sentences and speeches, in parts that is only felt not said cannot be healed just from speaking out called talking therapy. Sometimes terror hits so fast that words vanish completely from our minds. Van der Kolk explains that extreme fear can triggers old circuits that are deep below in conscious thought. Because survival mode hits in early and undergoes fight or flight mode or either freezes the higher mind lags behind. Speech stumble when neural control shifts downward. Main site, Broca's area simply shutdown or enter inactive mode under such condition. So, during horror, speaking becomes impossible and it is not by choice, but due to biology. Human body is structured like that. It happens physically because the brain drops language to focus on staying alive as it is on survival mode.

Silence is the heart of Caruth's idea. Not because survivors choose not to speak, but because traumatic moment let itself slips outside words. When shock hits fast without warning understanding lags behind, arriving too late. Caruth says about it that the event escapes notice even as it unfolds. Without grasp, there can be no story telling. So, this quietness is not weakness or refusal to speak out of willingness. It belongs to the shape of trauma, built into its core. A trauma missed in real time stays out of reach later and never interpreted clearly, never shaped by thought, and left voiceless. Time after time, van der Kolk sees this idea acting out in real life sessions. Some people go on speaking about their trauma year after year, still carrying the same pain. Words alone does not shift the weight and pain of trauma. He notices that there is a limit to how much they can do talking and that is because raw memories live outside speech, tapped into senses and feelings untouched by sentences and speeches. Even with every fact lined up, the person, event, timing, location, the body might stay stuck back there at the time trauma, frozen mid-storm. Out here, the story never touches the flesh or body. The body ignores the words as if they were about someone else. This gap, where thoughts are above physical truth, body holds a kind of forgotten pain. A person might name the event in their mind yet still feel no real connection to it as if their body numb. What lives inside muscles and breath stays separate, locked away from understanding and interpretation?

Something about Caruth's perspective on words in stories feels quietly revealing. She does not show it through clean lines instead by how broken pieces sit together that are repeating, out of time that storytelling might say what facts alone leave shallow. Where normal talk falls short, fiction comes forward, carrying weight through holes and echoes instead of answers. Though van der Kolk writes science, his voice slips sideways into rhythm like poetry. Each person's tale avoids order and their moments are arranged oddly that repeat without warning, float across years as if time itself got bruised too. Shattered pieces carry the unclaimed story. These patterns mark where pain lives, again and again, in the survivor's voice. When words fail that is exactly when harm and trauma peaked. Van der Kolk lets structure collapse like memory under pressure. What stands out clearly shows up in how van der Kolk talks about detachment. When danger feels impossible to escape the brain breaks apart the moment and some pieces slip below awareness. A person might not recall the story of what happened but still carry weight of the trauma through tension in muscles, sudden moods, blank stares that come from nowhere. That split is not broken memory but it is how the mind protects itself from overload and pressure. But those buried moments never truly leave the body and mind, they settle into body, ready to be provoked when something brings them back.



Unarranged and out of order broken pieces show up later than they should. When it happens, the moment breaks apart instead of arriving as a whole. Each fragment flows back on its own time and remain unconnected and misplaced. Memory does not come forward as a whole but what happened comes anyway, in chunks during sudden triggers that seem random. Evaluating the structural fragmentation of traumatic memory, Caruth (1996, p. 7) argues that such stories inherently lack standard chronological shape, meaning that one narrative part never clearly or logically leads to another. People studied by van der Kolk live like this way. Raw sensations visits without any warning, asking to be seen even while refusing to be sensed. Instead of depending on words or talking therapies, practices like yoga, EMDR, theater, and neurofeedback engage physical sensation, motion, and timing helping fragments to be back together what got split apart. The core task of trauma recovery, as Van der Kolk (2014, p. 205) contends, fundamentally centers on an individual reclaiming sovereign ownership and control over their own body and thoughts. That sense of reclamation reflects what Caruth describes as “claiming” lived events. But for both of them this act is not about crafting and listening clearer stories rather, it shifts the focus to how the body holds onto its past, turning what felt endless into something completed.

#### Chapter 5 Results and Conclusion

This study began by looking at Bessel van der Kolk's *The Body Keeps the Score* using ideas from Cathy Caruth's concepts on trauma, especially how she sees traumatic events showing up long after they happen. The study shows that van der Kolk's descriptions that were based in brain science and therapy are not just in coordination with Caruth's thinking and ideas but actually acts out what she describes. Their meeting point is not accidental coincidental but it unfolds across multiple shared themes. Although they are rooted in different fields, humanities and sciences, their views add depth in one another in a way that is hard to ignore. Then comes the link between Caruth's idea of delayed time and what happens inside the body during trauma, as shown in van der Kolk's work. When extreme stress hits the body, brain areas like the hippocampus and prefrontal cortex slow down, yet the amygdala fight up sharply in result the moment never stored into memory but stays stuck and trapped as raw and painful sensation. Flashbacks, restless sleep, constant alertness and stress, they are not recalled at all rather full-body replays that drag the past into present. That lag arrives before thought and mind can catch up, then comes back long after. Painful sensation holds everything because timing falls apart. It was too early when it first strikes and too late once awareness shows up. Caruth's idea about unclaimed experiences gains strength in van der Kolk's description of trauma resting into the body beyond story-based recall. Though told as past events, survivors often do not recognize these moments as their own life history as if they are numb towards these moments. Instead, those memories grip them through physical feelings, reflexive actions, and mental detachment that seem foreign within daily awareness. What slips from conscious repeats in flesh and pulse that held without consent. Because when thoughts fail to hold onto pain, bones and nerves may still carry it forward. Van der Kolk puts it simply by saying that the body recalls what thought erases.

Now here comes the main point, what van der Kolk saw in his patients that they are reliving trauma over and over and this matches what Caruth and Freud once wrote about trauma but they used different words. These are not desire that pulls people back into those painful moments instead it is something else that is left undone or unclaimed inside the mind's processing. When the brain fails to record an event properly than the body



keeps trying, again and again in order to be processed completely. Signals hangs between the amygdala and hormone flows, looping through senses tied to old alarms. Every time one of these signals lights up, it carves deeper the wound that is already there. These acts are not picked freely as they emerge from nervous systems frozen mid-response, still waiting for danger that had long gone. Now keeping in mind this, trauma does not just disrupt stories but it unravels them. Brain scans show why. Body tensing up, words freeze up, whole regions go quiet all of this happens because of trauma. What hits back is not a tale but flashes the smells, jolts and heat. Speech fails here and it is not from choice of survivals. Meaning needs more than sentences now. Bodies speak when syntax collapses. Reading van der Kolk via Caruth forces each thinker further. Because of Caruth, ideas about stress and memory find real-world roots in bodies and brains. Van der Kolk's work on patients grows richer when touched by delayed response and explains why trauma was not fully lived when it strikes for the first time. The findings of study stand out between fields, neither just science nor just theory but an insight into trauma as story unfolding late, time bending back, flesh remembering what mind forgets.

The returns of traumatic memories do not follow a normal recall but they arrive uninvited, sharp and immediate without any warning. Research into brain activity reveals that physical traces are left behind by distressing experiences. Parts of the nervous system react as if danger still exists, even when there is none around. This research puts two ideas together, showing how the body holds on to moments that were never fully faced. When thought stops the sensation continues and when awareness turns away the nerves remember instead. Flashbacks, bad dreams, physical pain all of these are not just aftereffects noted by van der Kolk. They form the main way trauma lives, long past the moment it began. An event that happen too early and sudden to understand comes back later, refusing to disappear. What happens inside the body after the traumatic experience changes how healing will work? Because trauma repeats itself physically long after the event, talking about it does not fixes its damages. Approaches like movement, guided eye sweeps, sound, brain training lights step into that gap. They offer space where sensation completes what speech could not carry at the time. Meanwhile, Caruth's thinking shows trauma goes beyond brain science, it shakes how people make sense of life, memory, and being seen. What happens when nations face large-scale horrors like war, mass killing, or deep injustice will always hinge on tools they have to acknowledge pain that defies normal words. Looking at van der Kolk's *The Body Keep the Score* with Caruth's lens implies that trauma lives in the body and repeat itself again and again to be understood completely and it also alter the brain's functioning and nervous system.

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