All That Summer She was “Mad”:
illuminating Virginia Woolf’s authorial agency using modern trauma studies

by

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Thesis Abstract

Since Virginia Woolf’s suicide, critics and readers alike have speculated about the tumultuous nature of her mental state — glossing over her extraordinary life to focus rigidly on the circumstances behind her death. In response to such reductive speculation, this thesis moderates two overarching spheres of scholarship that view Woolf’s manic-depressive disorder and extensive history of sexual abuse as the genesis of her avant-garde writing style. I argue that Woolf purposefully represented her traumatic experiences within the pages of *Mrs. Dalloway*, especially through the character of Clarissa, and in doing so regained her authorial agency and a reunified sense of selfhood that had been fractured by years of trauma.

Chapter one focuses primarily on the work of French feminist theorists to illustrate the movement of l’écriture féminine and their belief that marginalized female writers can introduce narrative gaps, fragments, and ruptures into their work to gain literary authority in a patriarchal society. A close reading of Woolf’s essay *A Room of One’s Own* (1929) further reveals why her own unique style of writing must be read in connection to the likes of Hélène Cixous and Julia Kristeva. Throughout this thesis, I trace a parallel argument between the theoretical practice of l’écriture féminine and the more modern study of scriptotherapy, as both practices focus on how women who have been silenced, either by the patriarchal symbolic order or the psychological processes of a traumatized brain, can speak their truth to the outside world.

Chapters two and three delineate the risks of overgeneralizing Woolf’s experience of trauma using the work of a diverse array of literary trauma scholars, historians, and clinical researchers. While trauma was once believed to possess only the ability to disrupt narratives, literary scholars and clinical researchers have highlighted the restorative nature of scriptotherapy in having survivors confront their once incohesive traumatic memories through writing. This thesis highlights important passages from Woolf’s personal diaries and letters, in which she speaks of her writing process in a manner analogous to scriptotherapy, to illuminate how her textual representation of trauma both emulated her personal experience and served as a form of healing.

Finally, chapter four closely examines the purposeful doubling of Clarissa Dalloway and Septimus Warren Smith in *Mrs. Dalloway* (1925), in order to accentuate the reductive manner in which scholars have historically focused on the latter character in their studies of textual representations of trauma. Clarissa and Septimus possess a shared consciousness, and it is through this intrinsic unity that Woolf makes important claims about the gendered nature of trauma, as well as demonstrates her own healing potential through descriptions of Clarissa finally reconciling her fragmented selfhood through the lens of her party. By viewing Woolf’s writing and Clarissa’s party hosting in a continuous manner, one can clearly see that avenues exist in which survivors can work through their traumatic experiences and produce works of immense beauty and clarity. Ultimately, in foregrounding such a continuity, this thesis upholds sexual abuse as being an equally meaningful locus of trauma study as war violence, and one that should continue to be explored by future scholars.

**Keywords:** trauma, mental illness, l’écriture féminine, feminism, scriptotherapy
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Introduction

Commenting on Virginia Woolf’s central role in pioneering the modernist narrative, author Hisham Matar writes in a 2014 essay, published in *The New Yorker*, that “from [Woolf’s] first book, you can see her interest in discontinuities and consciousness… the melancholic acknowledgment of the impossibility of ever having a complete view.”¹ As a survivor of childhood sexual abuse, who dealt with both the symptoms of her trauma and significant mental health issues until her suicide in 1941, Woolf was well aware of how difficult it is to attain a “complete view” of another person’s private life. Matar further praises Woolf’s writing style, rife with interior monologue and polyvocal narration, for its ability to so delicately capture the messy intricacies of human subjectivity — asserting that “it is very rare indeed to observe a master wielding that vacuum blankness of the unsaid with such elegant precision.”² Woolf continually celebrated this sense of the unknown, working to illuminate the unspoken, the unseen, and ultimately, the gaps in understanding that inevitably arise from any conversation between two people, throughout her literary works. Yet, despite Woolf’s perceptive handling of such matters in her own writing, critics throughout history have failed to analyze her fiction with the same measured sensitivity, instead imposing their own complete views over her private life in regards to her tumultuous mental state and the effect it had on her career. In response to this overly-prescriptive scholarly phenomenon, this thesis seeks to demonstrate how reading Woolf through the lens of modern trauma studies can foreground the critical ways her abuse influenced her work, while concurrently illuminating the manner in which she maintained authorial agency throughout her career by engaging in the restorative practice of scriptotherapy. To gain a more comprehensive understanding of the influential scholarship that preceded scriptotherapy, I will

² Matar, “The Unsaid: The Silence of Virginia Woolf.”
turn to the work of several key French feminists, ranging from Hélène Cixous to Julia Kristeva, to demonstrate the powerful potential that lies in reading Woolf’s unique narrative style as l’écriture féminine — or, in other words, as a deliberate attempt to gain literary authority in a phallocentric world by formulating her fractured experiences into a cohesive narrative. This thesis will ultimately undertake the goal of illustrating why scholars should view Woolf as both a survivor of sexual abuse and someone who dealt with significant mental illness, but above all, as an incredibly skilled author who remained painstakingly dedicated to her work amidst the devastating shocks and blows of her traumatic life.

It is important to highlight that Woolf suffered five major depressive episodes, the majority occurring between the ages of thirteen and thirty-three, that greatly influenced her overall well-being for the entirety of her literary career. Yet, despite this obvious impact, Quentin Bell argues that Woolf’s own family failed to adequately address her unstable mental health, writing that “her insanity was clothed, like some other painful things in that family, in jest.” While pertinent information regarding Woolf’s mental illness and its treatment can now be found in any of the numerous biographies regarding her life, most discussion of her flagrant sexual abuse has been regulated to feminist spheres of academia. This separation is problematic to any comprehensive understanding of Woolf’s identity, as she dealt with the effects of sexual trauma and mental illness all of her life, and these two afflictions, as modern research has shown, would have heavily influenced each other in regards to the intensity and duration of their symptoms. Renowned biographer Hermione Lee further elucidates the integral connection between trauma and mental health, writing that “Virginia Woolf was a sane woman who had an

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illness… It was periodic and recurrent. It was precipitated, but not indubitably caused, by the things which happened to her. It affected her body as much as her mind and raised the insoluble and fundamental question, which she spent a great deal of time considering, of the relation between the two.” ⁶ Throughout this thesis, I will strive to unite these two discordonant strands of Woolf’s experience to explain how her reaction to the deaths of various family members, and extensive struggle with mental illness, are tightly woven with her sexual abuse at the hands of her step brothers, Gerald and George Duckworth. While it would be irresponsible to claim that Woolf’s “mad” behavior stemmed entirely from her trauma, sexual abuse certainly could have exacerbated specific aspects of her symptomatology, such as hearing voices and hallucinations, in conjunction with other environmental, genetic, and societal factors. In order to highlight how these factors may have influenced Woolf’s symptoms, I am providing a brief timeline of significant events in her life to be read in conjunction with my later close-reading of Mrs. Dalloway as textual scriptotherapy. Although this thesis operates under the understanding that both mental illness and trauma heavily influenced Woolf’s well-being, I focus specifically on her history of sexual abuse, and the manner in which she later represented such trauma in her texts, to strengthen my argument that she sought to re-integrate her own traumatic memories into a cohesive life narrative through the form of her novels.

22 Hyde Park Gate: A brief history

Adeline Virginia Stephen was born on January 25th, 1882 into a wealthy South Kensington household, in which her mother, Julia Stephen, served as a model for a group of elite painters, and her father, Leslie Stephen, was a publicly renowned intellectual, biographer, and historian.⁷ According to scholar Louise DeSalvo, the Stephen family was not a model of familial

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⁷ Lee, *Virginia Woolf*, 103.
bliss, but rather one “in nearly perpetual state of crisis and instability.” Before marrying Leslie, Julia had three children — Stella, Gerald, and George — with renowned public servant Herbert Duckworth, who all moved, after their mother’s re-marriage, to the Stephen family home at 22 Hyde Park Gate. Not long after this move, Gerald allegedly began molesting Woolf. She recalls one specific incident in a letter, writing “I still shiver with shame at the memory of my half-brother, standing me on a ledge, aged about 6 or so, exploring my private parts.” In regards to Woolf’s chilling admission, Bell commented in his later biography that Gerald's behavior was merely “unusual...for a man in his twenties” and failed to connect such abuse to Woolf’s subsequent symptoms or so-called “mad” behavior. It is clear that, like many scholars of this time, Bell possessed a less than comprehensive understanding of the insidious effects that such severe sexual abuse can have on a young girl.

Virginia’s first major depressive episode occurred after the death of her mother in 1895, a death which, to the young writer, represented a “deprivation of meaning” as she believed Julia, a woman who was “adept in intuition, analogy, and perceptions of spiritual significance at the interface of inner and outer worlds,” served as the loving counterbalance to her father’s harsh “sterility and male arrogance.” Julia’s absence forced Virginia to take on the additional emotional burden of caring for her father and siblings, while also marking the beginning of the period in which George Duckworth began sexually abusing her as well — repugnant behavior that only intensified when Stella Duckworth, Woolf’s last barrier against their advances, suddenly passed away in 1897 due to a bacterial infection within her stomach. In her personal

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10 Stephen Trombley, *All that summer she was mad: Virginia Woolf and her doctors*, (New York, Continuum International, 1982), 8.
essay “A Sketch of the Past,” Woolf deems the period of her life following the deaths of her mother and half-sister to be “the seven unhappy years” in regards to the “the lash of a random unheeding flail that pointlessly and brutally killed the two people who should, normally and naturally, have made those years, not perhaps happy but normal and natural.” Of course, this period of unhappiness was significantly amplified by the Duckworth’s flagrant abuse. Lee highlights specific photos from this time period in which George stands behind Vanessa and Virginia, appearing “large, eager, and bombastic,” next to the young girls who, in contrast, seem “grave, nervy, and withdrawn.” “He is always standing too close to them,” she writes, “or perhaps he only seems to be standing too close because of what we know. But certainly after Stella’s death, he did, suddenly get too close. With Leslie in deaf, isolated retreat, the sentimental and conventional George became their unofficial guardian and their passport to the outside world.” In her essay “Reminiscences,” Woolf remarks that George’s restraint seemed to “burst” after her mother’s death. She is much more clear about the extent of this abuse in a later essay titled “22 Hyde Park Gate,” describing how George would creep into her room and whisper “don’t be frightened… And don’t turn on the light, oh beloved. Beloved….” then fling himself “on [her] bed and [take her] in his arms.” This reign of terror began in 1895, when Duckworth was twenty-seven and Woolf was merely thirteen, and would last until 1904, when he was nearly a middle-aged man at the age of thirty-six.

George assumed total control over the lives of the Stephens sisters after the deaths of Julia and Stella, becoming both “presenter” and “censor” of their bodies in regards to entering the upper echelons of London society, and making Woolf feel like a “horse turned in the ring”

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13 Lee, 149.
14 Virginia Woolf, Moments of Being, 66.
15 Poole, The Unknown Virginia Woolf, 111.
16 Trombley, All that summer she was mad: Virginia Woolf and her doctors, 9.
under the weight of his overbearing presence. In “A Sketch of the Past,” Woolf details the harsh judgment she routinely felt from George, describing a specific moment in which he ordered her to take off her dress because he believed it to be too low-quality for her social status. She writes, “the sullen look came over him; a look in which one traced not merely aesthetic disapproval; but something that went deeper; morally, socially, he scented some kind of insurrection; of defiance of social standards. I was condemned from many more points of view than I can analyse…” This sense of condemnation extended into all spheres of Woolf’s life, and she began to feel trapped, perpetually, under the conspicuous gaze of her half brothers. It is no surprise that when Woolf’s father died of cancer, in 1904, she sank into a deep depression marked by hallucinations and an eventual suicide attempt. It was during this period that she often described herself as a fragile and “broken chrysalis” at the verge of coming apart. Yet, after many months, Woolf eventually recovered from her devastating depressive episode and subsequently entered into a period replete with happiness, immense change, and fervid intellectual growth. In the company of her siblings, Woolf left the ill-fated house at 22 Hyde Park Gate and moved to the bohemian neighborhood of Bloomsbury, where she was able to take part in extravagant weekly parties and meetings of Bloomsbury Group, a circle of philosophers, artists, and writers. Group member Leonard Woolf fell deeply in love with Virginia, but was forced to propose numerous times as Woolf struggled immensely to comprehend her romantic feelings for him — a struggle which can now be understood in light of her extensive history of abuse. In a letter, she details the complex nature of these feelings, while simultaneously exemplifying the extent to which her abuse affected her, writing, “as I told you brutally the other day, I feel no physical attraction in you. There are moments — when you kissed me the other day

17 Poole, 110.
18 Virginia Woolf, Moments of Being, 130.
19 Woolf, Moments of Being, 124.
was one — when I feel no more than a rock. And yet your caring for me as you do almost overwhmoms me. It is so real, and so strange.” Woolf eventually found herself truly captivated by Leonard’s kind-hearted nature and brilliant mind, and upon his third proposal, she accepted. In an intimate ceremony on August 10, 1912, the pair became husband and wife.

It is important to note that Leonard knew nothing about his wife’s tumultuous mental state before their marriage, with Bell writing that “Leonard had undertaken the care of a woman who had twice been mad and had once attempted suicide without — as far as I can discover — any serious and wholly unequivocal warning of what he was letting himself in for.... Neither Vanessa or Adrian gave him a detailed and explicit account of Virginia’s illnesses or told him how serious they might be, until this greatest and worst crisis.” This “greatest and worst” crisis occurred the following summer when, in the midst of what should have been newly-wed bliss, Woolf experienced a depressive episode so intense she attempted to commit suicide, and began behaving, according to scholar Roger Poole, more like patient than wife. As Woolf was forbidden by her doctors to do much anything besides sleep between 1913 and 1915, Leonard Woolf was made to document this period of time and enforce her recovery — a situation which Poole argues is indicative of the oppressive nature of the pair’s marriage. However, Lee is adamant that Leonard maintained his nurturing nature during this trying period, arguing that “it would be a mistake, fatal to the understanding of the Woolf marriage, to read Leonard Woolf simply as a cold, obstructive disciplinarian. He was a person of deep, articulate, excitable feelings, controlled by fierce self-training.” In light of this assertion, it is important to note that Leonard Woolf was not only blindsided by Woolf’s history of mental illness, but by her flagrant

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20 Poole, 96.
22 Bell, 18.
23 Poole, 128.
sexual abuse at the hands of the Duckworth brothers as well. In fact, he had nothing but praise for George Duckworth, writing profusely about his distinguished upbringing and mild temperament, going as far as to state that he thought him to be an “extremely kind man, and I think, very fond of Vanessa and Virginia.” I do not raise this evidence to implicate Leonard, but to illustrate the extent of Woolf’s inability to communicate her personal childhood traumas to those she loved most, an issue that would have undoubtedly fueled misperceptions and distrust between husband and wife.

In his biography, Bell notes that Woolf seemed to be irrevocably changed after her 1912 episode, and continued to suffer from similar symptoms until her death in 1941. The final years of Woolf’s life were marked by an increasing feeling of helplessness as World War II raged on, for her beloved London home had been destroyed in the Blitz, and her most recent publication, a biography about fellow Bloomsbury member Roger Fry, received less than glowing reviews from the critics she so deeply hoped to please. During this time, Woolf sunk, once again, into a state of intense depression and began filling her diary with pages and pages on death, the hopeless state of the war, and her unyielding fear that she would lose her artistic ability. On March 28, her coat pockets brimming with heavy stones, Woolf walked into the River Ouse outside of her home and left behind a suicide note for Leonard that began “I feel certain that I am going mad again. I feel we can't go through another of those terrible times. And I shan't recover this time. I begin to hear voices, and I can't concentrate. So I am doing what seems the best thing to do.” Throughout the letter she praises her husband for his unyielding love and patience, writing, “What I want to say is I owe all the happiness of my life to you. You have been entirely

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25 Poole, 145.
26 Bell, 27.
27 Lee, *Virginia Woolf*, 725
28 Henke, 272.
patient with me and incredibly good... If anybody could have saved me it would have been you. Everything has gone from me but the certainty of your goodness.”29 This evidence makes clear that Woolf viewed Leonard as a stable presence who, even in the midst of her most intensive battles with mental illness, she could trust to offer her unwavering love and boundless support.

Mapping influential spheres of Woolf scholarship

Virginia Woolf’s suicide has since fueled a deluge of speculative scholarship regarding how various aspects of her life, especially her experiences with mental illness and trauma, may or may not have influenced her untimely demise. This thesis will highlight each of the different critical spheres of writing on this subject, beginning with the predominant view, stemming from Bell’s frequent use of the term in his biography, that Woolf was unequivocally “mad” and her unique style of writing could only be produced by a “mad” mind. A later sphere of criticism, pioneered by Poole and Stephen Trombley, suggests that Woolf’s “madness” was caused by symptoms stemming from her extensive sexual abuse, and it was this abuse that produced her fragmented writing style. Although significant for its necessary illumination of the far-reaching impact of Woolf’s abuse, I believe this realm of scholarship strips the author of her artistic agency, as well as belittles her immense skill, due to Poole and Trombley’s overly-prescriptive argument that such abuse dominated every aspect of Woolf’s life. Fortunately, a more nuanced strand of criticism has emerged, in which feminist critics and trauma scholars now view Woolf’s fractured modernist writing style as one that not only discusses the complexity of traumatic experience, but purposefully represents her own disjointed memories of sexual abuse through a variety of syntactical devices. Ultimately, by textually representing her personal experience, and organizing such memories into a cohesive narrative in the form of her novels, these scholars

argue that Woolf was able to regain a sense of agency over her intrusive trauma and continue to produce works of immeasurable literary value.

This thesis will delineate how this modern strand of trauma-informed criticism, in shifting emphasis to the reparative work of Woolf’s narrative as she presents her trauma to the world, takes power away from the Duckworth brothers and allows for a more nuanced view of the genesis of her unique writing style. I promote this sphere of scholarship in my own argument due to its critical recognition that Woolf’s experience with mental illness, as well as her experience as a survivor of sexual abuse, should not be considered as being mutually exclusive. Rather, these two hardships complement each other in ways that give scholars a much more complete picture of Woolf’s complex conception of selfhood. Furthermore, I will strengthen my argument regarding the restorative nature of modern trauma studies with writings from key French feminist philosophers on the practice of l’écriture féminine — which feminist critic Elaine Showalter defines as the inscription of “the feminine body and female difference in language and text.”30 These philosophers view language as male-centric and part of a larger symbolic discourse that women have been written out of since the beginning of time. Thus, they argue that women must use their own experiences, presented in a non-traditional manner marked by textual gaps and inconclusive narration, to write themselves into being. By viewing Woolf’s texts as l’écriture féminine, it becomes clear how her writing style signifies her sexual abuse, while simultaneously seeking to represent and repair its memory in a world dominated by masculine conceptions of trauma.

From elucidating the trope of the “tortured artist” to serving as vessel for an array of Freudian theories, the name “Virginia Woolf” remains in perpetual danger of becoming detached

from the woman herself. I remain weary of this pitfall, which is why this thesis will rely upon a multidisciplinary analysis based upon Woolf’s writings, symptomatology, and clinical research studies in order to avoid overgeneralizing her personal experience. Ultimately, I both acknowledge and celebrate that I will never attain a complete view of Woolf’s multifaceted personal life, and instead seek to return some of the power that has been taken from her over time by certain scholars who merely viewed her body as a blank canvas upon which to advance their own critical agendas. One such example of this problematic scholarship is Bell’s frequent use of “mad” throughout his biography — most famously describing Woolf’s tumultuous mental state after her father’s death as “[a]ll that summer she was mad” — because as his editor notes in its opening pages, “[Professor Bell’s] biography of Virginia Woolf has formed the basis of chronology and our interpretation of her character.”\(^ {31}\) Such an assertion affirms that continued use of this term not only upholds her illness as a focus of intense critical interest amongst scholars, but also demonstrates how masculine-centered discourse can marginalize women and make them “other.”\(^ {32}\)

Determined to protect Woolf’s legacy from this sort of overly-prescriptive diagnosis, Poole decries Bell’s use of the term “mad” as crude and unrepresentative of Woolf’s lived experience in his 1978 “path-breaking study” *The Unknown Virginia Woolf.*\(^ {33}\) He insists that Woolf’s lapses into “madness” should be viewed as a “severing of nerves” that can be traced to specific traumas stemming from frequent childhood sexual abuse at the hands of her half brothers. In addition, Poole argues that Leonard’s controlling nature left her feeling trapped in an oppressive marriage and played an equally significant role in perpetuating Woolf’s trauma

\(^{31}\) Bell, 89-90.  
\(^{33}\) Henke, 4.
symptomatology, despite the evidence, demonstrated by numerous critics, that the pair had a loving partnership.\textsuperscript{34} Throughout The Unknown Virginia Woolf, Poole works to connect Woolf’s so-called “breakdowns” to the traumatic incidents that he supposed would have caused them by cross-referencing her novels with her personal writings, further analyzing how her mental distress “had been caused, how it had manifested itself, and how it was overcome.”\textsuperscript{35} Yet, despite claiming to offer Woolf the “complement of examining her subjectivity in a way which attempted to come up to her own very high standards,” Poole’s analysis appears just as forceful as that of any critic who ruminates on her mental illness.\textsuperscript{36} He was certain he could draw explicit conclusions about Woolf’s life from her texts — arguing that when novelists strive to create fiction different from their own realities, a “symbolic substitution” occurs which “tells more, if that were possible, about the lived particular than that particular itself.” Yet, critics have taken issue with some of his more far-fetched comparisons, in which he creates direct identifications between characters within Mrs. Dalloway and people in Woolf’s own life.\textsuperscript{37} In The Review of English Studies, Lee objects to Poole’s analysis and carefully delineates how reading Mrs. Dalloway through such an approach can create discontinuous parallels between fiction and reality:

“If the fiction is to be used as testimony for the life, equivalents have perpetually to be found, and these sometimes prove dubious. Leonard ‘is’ Rezia, who is frightened of Septimus's madness. Why then does Virginia Woolf insist on Rezia's sympathetic femininity and simplicity? Leonard ‘is’, at the same time, Richard Dalloway, ‘a good, naive, trusting soul’. But there is no evidence

\textsuperscript{34} Poole, 3.  
\textsuperscript{35} Poole, 3.  
\textsuperscript{36} Poole, 2.  
\textsuperscript{37} Poole, 5.
whatever that Virginia found Leonard ‘naive’. Such analogies give rise on one occasion to a very disconcerting piece of literary criticism.”

This explanation makes clear how even though Poole asserted that scholars should provide Woolf, author of some of the most “remarkable analyses of inner-subjectivity in the English language,” the same sort of sensitive reading of her own behavior and language, he still manipulated critical aspects of her life to strengthen his preconceived argument about her oppressive marriage.

A much more nuanced picture of Woolf’s personal life emerges when one reads her personal diaries from the period in which she was writing Mrs. Dalloway, especially entries regarding her deep feelings for Leonard. In the early 1920’s, Woolf felt quite lonely in the country and desperately wanted to move back to London, yet her husband was hesitant due to his belief that the tumultuous city environment would rapidly overwhelm her fragile mental state. Woolf describes the emptiness of her days and frustration with her health, writing:

“L… has the old rigid obstacle — my health. And I can’t sacrifice his peace of mind, yet the obstacle is surely now a dead hand, which one should no longer let dominate our short years of life — oh to dwindle them out here, with all these gaps, & abbreviations! Always to catch trains, always to waste time, to sit here & wait for Leonard to come in, to spend hours standing at the box of type...”

Of course, Clarissa’s regulation to an empty attic bedroom in Mrs. Dalloway may have been informed by Woolf’s feelings of separation from London society during this time. Lee confirms this notion, writing that “though Richard Dalloway’s politics (apart from his sympathy for the

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39 Lee, Virginia Woolf, 453.
poor) were the opposite of Leonard’s, her fiction of Clarissa Dalloway as an MP’s wife drew on some of her own wifely feelings from these years.\(^{40}\) However, Leonard ultimately realized that the potential danger of the city’s over stimulating environment was far less than that of Woolf’s existential boredom, and in 1924, the couple ended up moving back to London — a time period marked by intense socialization with which Leonard dealt to please his wife who adored the extravagant parties and abundant conversations.\(^{41}\) Lee asserts that this period of great freedom and marital happiness would have undoubtedly influenced the “party-going mood” of *Mrs. Dalloway*. In fact, atop Woolf’s second manuscript of *Mrs. Dalloway*, she penned a note stating that “certainly I’m less coerced than I’ve been…. A delicious idea comes to me that I will write anything I want to write.”\(^{42}\)

Undeterred by this evidence of a mostly joyous marriage, Stephen Trombley echoes Poole by continuing to emphasize Woolf’s supposed oppression in his writing of *All That Summer She was Mad: Virginia Woolf and her Doctors*, a book which seeks to explicate the various ways in which patriarchal medical treatment both furthered the degeneration of her mental state and influenced the style of her writing. Despite my hesitation in granting Trombley’s finalizing argument too much influence over my own analysis, I find his explanation of Woolf’s medical experience particularly helpful in assisting my critical understanding of how her medical treatment, being forced to lie in bed for days on end, may have caused ruptures in her understanding of self — an important component of trauma symptomatology which reappears throughout *Mrs. Dalloway*. Woolf’s earliest mention of her doctors can be found in letters, ranging from 1897-1903, to her friend Violet Dickinson, in which she deems her life to

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\(^{40}\) Lee, *Virginia Woolf*, 454.

\(^{41}\) Lee, *Virginia Woolf*, 466.

\(^{42}\) Lee, *Virginia Woolf*, 450.
be a “constant fight against Doctors follies.” Due to this innate skepticism between patient and
doctor, Trombley asserts that Woolf’s experiences epitomize the idea of “discourse of power,”
or a phenomenon in which patriarchal tradition empowers doctors to derive authority from their
education and beliefs rather than listening to patients discuss their actual lived experiences. As
Woolf was treated with forms of the dreaded rest cure for the duration of her life, her distrust
never lessened.

As means of illustrating Poole’s theory that Woolf used the creation of her novels to
“exorcise” certain traumatic events from her life, Trombley connects relevant passages in Mrs.
Dalloway to negative interactions Woolf had with her own doctors — writing that such specific
textual evidence demonstrates the extensive oppression she experienced under their care. He
further argues that Woolf’s medical treatment must be read as being part of a much larger social
phenomenon, caused by a system “bent on repressing all forms of deviance, a system which
seeks to maintain order by promoting uniformity of behaviour, at least among the classes which
cannot afford the luxury of eccentricity.” However, it is this question of who is perpetuating
hegemonic discourse that brings me pause when evaluating the integrity of Poole and
Trombley’s arguments. I believe that these two British scholars, due to their overly theoretical
reasoning, fail to befittingly discuss the effects of trauma on female subjectivity in a manner that
grants the proper amount of agency to Woolf and instead paint a portrait of the author that is just
as befallen by “madness” as those before her. Despite noble intentions, they reduce Woolf to a
victim of her situation and place a disconcerting amount of power in the hands of the malicious
Duckworth brothers. Thus, although this sphere of scholarship is undoubtedly progressive in its

43 Trombley, All that summer she was mad: Virginia Woolf and her doctors, 95.
44 Trombley, 306.
45 Poole, 3.
46 Trombley, 127.
illumination of Woolf’s experience of severe sexual abuse, I aim to nuance existing studies of Woolf’s literature through the addition of clinical research on the physical and psychological effects of sexual trauma, as well as the healing potential of scriptotherapy.

In order to address this absence of tangible research and sensitivity in understanding Woolf’s experience as a female trauma survivor, there has been a growing feminist intervention within the field of trauma studies over the last decade, in which contemporary scholars such as Suzette Henke have highlighted the restorative value of scriptotherapy in helping survivors heal from traumatic memories.\textsuperscript{47} The practice of scriptotherapy is based upon clinical research which demonstrates how survivors can regain their sense of selfhood after a traumatic incident by organizing their incohesive memories into written and spoken narratives — research which is incredibly relevant in relation to entries from Woolf’s own diaries in which she discusses how “it is only putting trauma into writing” that she can make herself feel “whole” again.\textsuperscript{48} By reading Woolf’s disunified writing style as a purposeful attempt at emulating her own fractured memories, I believe scholars can overcome the misinformed essentialism of Poole and Trombley in assuming that Woolf’s sexual abuse controlled every aspect of her life and literary career. To echo Maren Linett in her study of trauma in Jean Rhys’s novels, the primary focus of this thesis is to elucidate the manner in which Woolf’s sexual trauma informed her textual methods of representation, and how she used such representation to speak her experiences into understanding.\textsuperscript{49} Moreover, by analyzing the language of \textit{Mrs. Dalloway}, in concurrence with the works of noted trauma studies theorists and Woolf’s personal diaries, I hope to pull at the tension between critical analysis intent on her struggle with mental illness and analysis insistent on

\textsuperscript{47} Henke, 2.
\textsuperscript{48} Woolf, \textit{Moments of Being}, 72.
highlighting her sexual abuse — ultimately revealing how Woolf’s abuse undoubtedly influenced the intensity of her depressive episodes, but also resulted in traumatic memories which, in turn, inspired her modernist writing style. By drawing from two different disciplines of trauma study, the theoretical and the clinical, I will construct an interdisciplinary framework of analysis in order to avoid overgeneralizing Woolf’s experiences and illuminate the value of scriptotherapy in recovering from trauma.

Within my first chapter, I will turn to the work of prominent French feminist scholars to illustrate the theory of l’écriture féminine, showing how female writers can subvert hegemonic language structures through the use of shifting viewpoints, fragmented narratives, and silences in their own writing. In a similar manner, a close reading of Virginia’s fractured style reveals how she represents memories of her trauma through comparable textual devices. This thesis will trace a parallel argument between French feminism and trauma theory, for in the same manner that the patriarchy renders women into “silent sisters,” trauma prevents survivors from speaking about their experiences to the outside world. I will illustrate these concepts in tandem with my analysis of A Room of One’s Own in which Woolf explains how women can write themselves back into history by procuring time and space, free from societal obligations, to master the art of literature. Her use of polyvocal narration and her signature modernist writing style to make these arguments, in the vein of Hélène Cixous and Julia Kristeva, further points to why scholars must read her own work as an example of l’écriture féminine — especially in light of recent developments in trauma research that echo this practice.

In my second chapter, I will discuss the history of trauma studies and how it has shifted from narrowly focusing on the symptomatology of shell-shocked soldiers to being more inclusive of female experiences, while using the work of modern trauma theorists such as Christa
Schönfelder, Beatriz Rodriguez, and Cathy Caruth to characterize my points. This thesis points
to Cathy Caruth as a fundamental figure in the foundation of trauma theory, and how her
arguments, fueled by Derridean philosophy on the inherent “gap of knowing” in trauma writing,
provide a critical foundation for my own analysis. Furthermore, Caruth’s use of post-structuralist
philosophy can be linked to the French feminist movement discussed in my first chapter, as I
emphasize their shared focus regarding the inherent unknowability of gaps and ruptures in
speech. However, as trauma scholarship has developed over the last decade, critics have shifted
from what they view as Caruth’s over-generalizing, hypothetical view of trauma towards
promoting a more interdisciplinary approach of analysis, that balances the accounts of individual
survivors with a comprehensive body of clinical research. Although Caruth focuses on how
trauma disrupts literary narratives, contemporary scholars build upon her work, turning to recent
studies regarding the healing potential of trauma literature to illustrate how trauma can instead
give voice to once unspeakable experiences. This shift is critical to my own analysis, as I work
towards illuminating how Woolf used her writing as a way to both work through and heal from
the traumatic memories of her past. I will use my next chapter to integrate my exploration of
literary trauma studies with modern clinical research regarding why the brain cannot integrate
traumatic memories into its normal processes, and how such a failure can be overcome. In order
to highlight the highly specific and unique nature of PTSD, this thesis will create a clinical
mapping of recent medical research that foregrounds the healing potential of scriptotherapy, as
well as connects specific findings and symptoms to experiences Woolf wrote about in both Mrs.
Dalloway and her personal diary entries.

Having established a necessary critical background, as well as my own analytical
framework, the next chapter will highlight the reductive manner in which critics, such as Poole,
have foregrounded Septimus Warren Smith’s experience with PTSD as the sole representation of Woolf’s trauma in *Mrs. Dalloway* — ultimately undervaluing Clarissa Dalloway’s representation of a survivor’s ability to heal by confronting the traumatic event head-on. Both the literary representation of, and intense scholarly focus on, Smith’s PTSD indicates how the field of trauma studies has been dominated by patriarchal voices who view war trauma as being most worthy of discussion. Upholding the work of several modern feminist trauma theorists, I will argue that is is equally important to view Clarissa’s conception of self, fragmented by her intrusive memories of past relationships, as Woolf’s attempt to both discuss the unique manner in which women experience trauma, as well as write out her own traumatic memories into a cohesive narrative. By throwing an extravagant party, during which she comes to terms with the inevitability of aging through her confrontation with the elderly woman in the window, Clarissa is able to re-integrate her haunting past memories of Richard and Sally with her conception of self in the present, and return to the party as a confident, unified being. Viewing Clarissa through this lens illuminates the restorative potential of scriptotherapy and returns agency to Woolf by showing that one can indeed work through trauma and create, from its fragments, staggeringly beautiful works of art.

As scholar Lynn Layton writes in “Trauma, Gender Identity, and Sexuality — Discourses of Fragmentation,” the texts I’m studying provide the somewhat problematic impression that “their protagonists are in total control of their fragments, that they are auteurs who pick and choose how they wish to represent themselves at any given moment.” Of course, I could never capture the complete view of exactly how Woolf wished to portray herself through her work, just as modern scholars remain weary of older critics who sought to diagnose her complex mental

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condition and impose their own judgements upon her life. Woolf undoubtedly struggled with her mental illness and the effects of long-term sexual abuse, and at times, remarked feeling as if she had lost all sense of control over her writing. Thus, over the course of this thesis, I ultimately hope to enhance decades old scholarship, written by non-feminist scholars who have dominated the understanding of her mental illness and its relation to her literature, through the lens of contemporary trauma studies. In doing so, I will foreground Woolf’s authorial agency and establish a helpful framework, through which readers can interpret Clarissa Dalloway’s empowered conception of selfhood, for decades to come.

Chapter One: Reading Woolf as L’écriture Féminine

Before demonstrating how the writing of Mrs. Dalloway helped Woolf make sense of her own numerous traumatic experiences, I must first turn to A Room of One’s Own to illustrate her feminist convictions and highlight the essay’s connection to the subversive practice of l’écriture féminine. Within A Room of One’s Own, Woolf uses her polyvocal, non-linear narrative style to illustrate how highly intelligent women throughout history have been unable to amass a literary canon as extensive as that of male writers due to the expectation that they dedicate the majority of their time and energy to preserving the home and having children. Even if women are miraculously able to gather enough time to write, Woolf argues that the structure of the traditional sentence has been entirely produced by men “out of their own needs for their own uses,” and in result, is ill-suited for their adoption.51 According to Woolf, even the most talented of writers have inadvertently made such prose into “clumsy weapons” in their hands, and asserts that “the resources of the English language would be much put to the stretch, and whole flights of words would need to wing their way illegitimately into existence before a woman could say

what happens when she goes into a room." Arguments such as this one demonstrate Woolf’s belief that traditionally masculine sentence structures greatly limit the potential of female literature, and that women must seek a more innovative manner of writing if they wish to communicate their experiences to the world.

Due to the empowering nature of this argument, as well as her unique style of writing, I believe a compelling connection can be made between Woolf’s fiction and the work of French feminist theorists Hélène Cixous and Julia Kristeva in regards to their belief that women can write themselves into existence through the practice of l’écriture féminine, despite being traditionally excluded from the linguistic symbolic order. Throughout the pages of her 1975 essay “The Newly Born Woman,” Cixous illuminates the manner in which language binaries have historically placed women in inferior positions to men, and argues that the sole condition behind such a logocentric system is “women’s abasement” at the hands of the patriarchy. Within this hegemonic system, women are silenced by their inherent lack of masculinity, and Cixous writes that it is onto this silence that men project their sexually-driven desires. In response to being written out of the symbolic order, Cixous introduces the practice of l’écriture féminine as a third, ever-shifting element in the male/female binary and a way in which women can release themselves from such oppressive hierarchies by taking advantage of the very traits, such as their shared feminine sexuality, that elect them as outsiders. Through l’écriture féminine, women can write in a manner that falls outside the boundaries of anything known by man, and in turn destabilize the hegemonic order while gaining their own unprecedented form of linguistic authority.

52 Woolf, *A Room of One’s Own*, 91.
In a brilliant illustration of how women throughout history been excluded from the symbolic order of language, Woolf imagines an alternate universe in which William Shakespeare had an equally talented sister, insisting that “any woman born with a great gift in the sixteenth century would have certainly gone crazed,” as she eventually did when she committed suicide.\(^{54}\) It is evident that Woolf uses the figure of Shakespeare's silent sister, whose prodigious work never reached the public eye, as a masterful allegory for the abasement of female authors at the hands of the patriarchy. However, it is critical to note that while Cixous romanticizes the woman’s body as a site of patriarchal liberation, her idea of feminist texts being those that “strive in the direction of difference” and “revel in the open ended textuality” of conveying the female experience, Woolf is quite vocal in her distaste of the manner in which female authors attempt to emulate masculine prose.\(^{55}\) Woolf asserts that the proper way a woman should write is “as a woman who had forgotten that she is a woman, so that her pages [are] full of that curious sexual quality which comes only when sex is unconscious of itself.” In other words, Woolf argues that writers must avoid the reductive pitfall of a single-sex point of view in order to produce compelling work. Due to this innate philosophical difference, it would be irresponsible to designate Woolf as a harbinger of the “grand arrivée” of French feminist philosophy, as her belief in androgynous writing idealizes upholding mind over body in a manner that Cixous’s belief in a revolutionary “writing of the body” does not.

Yet, despite Woolf’s impassioned support of androgyny, this thesis argues that her illustrious oeuvre can still be read through the theoretical lens of l’écriture féminine, as it would be reductive to conflate her belief in the importance of writing beyond a single-sex point of view with her position as a marginalized figure in the symbolic order. In fact, some French feminists

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\(^{54}\) Woolf, *A Room of One’s Own*, 29.

have adopted a moderated theory of l’écriture féminine more conducive to Woolf’s experience, in which they illustrate how any writer, regardless of sex, can engage in linguistic subversion of the traditional male sentence structure and gain linguistic authority. In a similar manner to Woolf, Kristeva believes that recurring stylistic eccentricities exist in all women’s writing, but she is adamant that one shouldn’t uphold a “truly feminine specificity” when such similarities could result from any “socio-cultural marginality” or even a “certain structure (for instance hysteric) which the present market favours and selects among the totality of feminine potentiality.”

Although Cixous remains adamant in her support of an inherently feminine practice of writing, Kristeva notes the essentializing danger of relying too heavily upon the female body as marker of experience — especially considering that anyone can identify as female and face similar levels of oppression under the stringent standards of hegemonic society. She further addresses how female writers have been alienated from the linguistic order and reduced to silenced, abject beings, writing:

> In women's writing, language seems to be seen from a foreign land; is it seen from the point of view of an asymbolic, spastic body? Virginia Woolf describes suspended states, subtle sensations and, above all, colours-green, blue-, but she does not dissect language as Joyce does. Estranged from language, women are visionaries, dancers who suffer as they speak.

Although Woolf is indeed “estranged from language” due to her status as a female trauma survivor, Kristeva highlights how she can implement “ruptures, blank spaces, and holes” in her writing to express her traumatic experiences to the world in a manner unsuppressed by the

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hegemonic powers that be. Woolf’s adept decision, to textually represent her memories of trauma using disjointed sentences and a stream of consciousness narrative style, ultimately allows her to give voice to the once “unspeakable” subject of her sexual abuse. Thus, Kristeva’s sentiments — especially her belief that a subject’s philosophical position, rather than sex, determines his or her potential for linguistic subversion — further illustrate how it is not only possible, but imperative, to view Woolf’s unique style through the lens of l’écriture féminine even though she so openly advocated for women to adopt androgyny in their writing.

In Sexual textual politics, scholar Toril Moi turns to renowned post-structuralist theorist Jacques Derrida in her argument of why Woolf’s refusal to uphold female writing is indicative of her transcendence of the linguistic hierarchies that have oppressed female writers for so long. Throughout his work, Derrida calls for readers to trouble traditional binaries, like “male” and “female,” to show that such terms are nothing more than random, metonymic figures given meaning by patriarchal society seeking to create gendered power discrepancies. In other words, he argues that terms in a system of language derive signification solely from their relation to one another — for example, “femininity” would mean nothing to a society without a shared understanding of what traits constitute “masculinity” — and women have always been defined by their inherent “lack” of hegemonic traits. Thus, it is through her clarion call for an androgynous form of writing that Woolf refuses to perpetuate such problematic binaries, or what Cixous call the “Phallocentric Performing Theater” of male dominance. In fact, Moi argues that Woolf “seems to practice what we might now call a ‘deconstructive’ type of writing, one that engages with and thereby exposes the duplicitous nature of discourse” in her urgency to highlight

58 Kristeva, “Oscillation between power and denial,” 165.
61 Cixous, The Newly Born Woman, 85
the manner in which male voices dominate literature. Through her careful manipulation of the “sportive, sensual nature of language,” she is able to repudiate the views of those who view men as all-powerful arbiters of linguistic meaning and call for a new method of literary analysis altogether.

Within the pages of “Born from the Head: Reading Woolf via Kristeva,” scholar Miglena Nikolchina further highlights the problematic nature of such binaries by illustrating how blatant gender stereotypes fuel the two conceptions of madness most prevalent in society. She uses the example of how “mad” men, like Shakespeare’s King Lear, are most often described in terms such as as “mad and wise,” while their wives and daughters are diminishingly viewed as “mad and pitiful.” To explain this discrepancy, Nikolchina argues that scholars will often glorify male madness as the marker of a brilliant mind, while “mad” wives and daughters are reduced to nothing more than worthless figures “imprisoned in [their] own insanity, locked in a tireless limbo without any exit beyond.” Woolf exemplifies this phenomenon within her diary, writing that whenever she was in the midst of a severe depressive episode, it felt as if all “character & idiosyncrasy as Virginia Woolf completely sunk out.” Thus, it becomes impossible to detach the feminist subject matter and modern style of A Room of One’s Own from its author’s position as “silent sister” within the symbolic order, defined solely by her gendered difference to able-minded male writers. Based upon Poole’s description of Woolf’s oppression by powerful authority figures in her life, as well as her own family members’ descriptions of her “madness,” it follows that her unique literary style should be read through the lens of l’écriture féminine — a subversive practice described by scholar Elaine Showalter as one that “[undermines] the

64 Nikolchina, 34.
linguistic, syntactical, and metaphysical conventions of Western narrative,” ultimately helping the traumatized artist achieve a sense of self unification, and eventually, liberation.⁶⁶

In the same manner that l’écriture féminine calls for the use of textual ruptures, gaps, and silences to destabilize conventional Western narratives, a new form of subversive narrative has emerged over the past couple of years — one that stems from the inherent speechlessness a trauma survivor faces when trying to communicate his or her fractured memories to a unified world. This practice, deemed scriptotherapy by scholar Suzette Henke, refers to how reproducing memories of a traumatic event in narrative form “seems to affect an abreaction or catharsis that restores to the trauma survivor a sense of agency or control.”⁶⁷ Over the course of the next two chapters, this thesis will explore both the theoretical implications of scriptotherapy, and how, in the same manner as the practice of l’écriture féminine, it advocates for the use of unconventional textual practices to represent experiences that have been traditionally silenced by patriarchal society. I will further evaluate the clinical aspect of how these novels allowed Woolf to engage in scriptotherapy, making sense of her own experiences and reinstating the integral union between her body and mind that had been disrupted by her sexual abuse.⁶⁸ Ultimately, this thesis will look to these contemporary developments in feminist trauma scholarship to explain how the predominant critical discourse surrounding Woolf, especially the overly prescriptive arguments of Poole and Trombley, can be moderated through a trauma-informed reading of her work.

**Chapter Two: Tracing the Evolution of Literary Trauma Theory**

In her experimental short story “The Evening Party,” a work containing a number of stylistic elements that later reappear in *Mrs. Dalloway*, Woolf describes a conversation in which

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⁶⁷ Henke, 15.
a partygoer looks down at her hands and proclaims, “I am astonished that I should use this wonderful composition of flesh and nerves to write about the abuse of life… Come to think of it, literature is the record of our discontent.” Of course it is no question that Woolf herself, who dealt with the deaths of three beloved family members while suffering from rampant sexual abuse at the hands of her step brothers, was any stranger to such abuses of life. In the words of scholar Christa Schönfelder, this scene illustrates how the “literary imagination, with its ability to fictionalize and symbolize” can provide a platform for “experiences that appear to defy understanding and verbalization, that concern existential dimensions of the human condition — especially threatening experiences of vulnerability or morality — [to] be explored from multiple perspectives.” Despite trauma survivors’ critical need for such a platform of communication, scholarship regarding the connection between literature and trauma representation has only begun to increase over the few decades — a change that was sparked by the 1980 inclusion of Post-Traumatic Stress Disorder as an official diagnosis in the Diagnostic and Statistical Manual of Mental Disorders. In fact, the first book-length publication to grapple with such issues in Woolf’s work, Patricia Moran’s *Virginia Woolf, Jean Rhys, and the Aesthetics of Trauma*, was published as recently as 2007. Despite the novelty of the field, modern feminist scholars have already begun to trouble initial trauma scholarship by highlighting how society’s gendered understanding of trauma, in regards to its traditional ties to violent warfare, has silenced female voices and devalued their experiences. Rather than perpetuating patriarchal standards regarding what constitutes legitimate trauma, these scholars call for an increased study of sexual assault and childhood abuse in order to balance male-dominated trauma narratives with the perspectives

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71 Roger Luckhurst, *The Trauma Question*, (Hoboken, Taylor and Francis, 2013), 1.
of those who have been traditionally marginalized by society. Although Mater notes that “from [Woolf’s] first book, you can see her interest in discontinuities,” such textual discontinuities map critical sites of trauma that, until recently, have been left mostly untouched by scholars. In light of this absence of scholarship, over the course of the next two chapters, this thesis will use a combination of contemporary feminist trauma scholarship, clinical studies regarding the ability of scriptotherapy to mitigate the effects of PTSD, and close readings of *Mrs. Dalloway* to illuminate areas in which academics, such as Poole, may have undervalued the restorative potential of Woolf’s trauma writing.

This thesis situates trauma as its analytical focal point partly because Woolf was born into the late nineteenth century, a time period where the tumultuous nature of World War I and rapid social and technological change produced a marked increase in scholarly interest on the subject, as well as a feeling of pervasive cultural trauma caused by a fracturing of national identity. Although historians have reached a consensus that it would be irresponsible to highlight one “comprehensive” history of trauma — as doing so would propose the existence of a “single, uniform, trans-historically valid concept” across widely diverse cultures — Western scholars point to the 1860’s expansion of the national railroad as an indicator of when society began to view trauma as a mental rather than solely physical affliction.72 This conceptual shift in understanding was further propagated by the hospitalization of “mad” patients inside deteriorating asylums across the country, where those suffering from mental and physical disorders were confined through the use of barbaric restraints and treated as nothing more than animals.73 Yet, the perception of trauma most familiar to Woolf would have undoubtedly been that of the shell-shocked soldier of the Great War, who Lockhurst deems “one of the most iconic

72 Luckhurst, *The Trauma Question*, 36.
trauma victims of the 20th century.”\textsuperscript{74} Throughout World War I, soldiers fighting on the front lines dealt with various neurological symptoms, ranging from tremors to pounding headaches and amnesia, that were initially thought to be the result of exposure to exploding shells.\textsuperscript{75} As these symptoms persisted beyond the scope of available medical treatment, journalists on the ground began reporting how these soldiers suffered from afflictions of the “wounded mind,” just as serious and impactful as any physical wounds.\textsuperscript{76}

“Shell shock” grew to be such an immense problem that the British Army appointed psychologist Charles Myers in 1914 to conduct research on its troops in an attempt to gain insight into the peculiar phenomenon. After observing the behavior of numerous soldiers and collecting pertinent medical data, Myers concluded that such symptoms were indeed caused by “repressed” trauma and could most effectively be healed through “cognitive and affective reintegration.”\textsuperscript{77} However, this report was ridiculed by the general public, who believed that the afflicted soldiers were neither mentally or physically strong enough to be serving on the front lines. Embittered by his experience, Myers requested to be transferred back to England and did not publish his research until 1940 when Britain once again went to war. Despite the army’s initial doubt, Myers’s recommended treatment practices were broadly adopted during World War II, and continue to be used in the care of traumatized soldiers today. Due to Myers’s groundbreaking research, the experiences of those who served in World Wars I and II, as well as those who returned from the war to wander the streets of London, cloaked in disillusion, have become the predominant lens through which trauma is studied. Furthermore, the fragmented nature of the narratives used to relay these stories has become a hallmark of modernist literature,

\textsuperscript{74} Luckhurst, p. 86.
\textsuperscript{76} Luckhurst, p. 89.
now deemed “the literature of trauma” for its ability to give form and representation to an abstract mental condition.\textsuperscript{78}

Due to the predominance of these types of war narratives, modern feminist scholars have begun to question the overly-masculine conceptions of trauma so popular in contemporary culture, while simultaneously foregrounding non-hegemonic experiences in their work. In her 2016 essay “Narrating Gender and Trauma: An Introduction,” scholar Beatriz Caballero Rodríguez points to the finalizing power of patriarchal discourse in her examination of how existing research fails to depict trauma as an inherently gendered experience.\textsuperscript{79} By writing and disseminating more diverse trauma narratives, such as those regarding domestic violence and sexual assault, Rodríguez argues women can assume agency over the representation of their lived experiences and write themselves into existence in a world which has tried to erase them. This practice, of creating a narrative from one’s traumatic experience, can be traced to the 1990’s and a group of scholars at Yale, consisting of Cathy Caruth, Shoshana Felman, and Geoffrey Hartman, who used Derrida’s philosophy of deconstruction as means of confronting trauma’s essential “paradox” of communication. Although ambiguous in nature, they described this paradox as the “incommensurability and the impossibility of language and representation in relation to trauma, on the one hand, and the desperate need for a means of expression on the other.”\textsuperscript{80} In other words, the Yale scholars grappled with the idea that while survivors must express their trauma in order to heal, it is impossible for them to convey their incohesive, fractured memories of trauma through traditional systems of language. This paradox can be further tied to the theoretical movement of l’écriture féminine, as the Yale scholars also

highlighted how the patriarchal hegemony has silenced marginalized groups through its power of determining what constitutes legitimate linguistic expression. For, as trauma theorist Roger Luckhurst notes, “the trauma aesthetic is uncompromisingly avant-garde: experimental, fragmented, refusing the consolations of beautiful form, and suspicious of familiar representational and narrative conventions.”

The pioneering contributions of the Yale group are critical to my argument due to their consolidation of numerous disciplines into one multi-faceted approach to reading textual gaps and narrative discontinuities as evidencing trauma. As Ahmed Amara notes in “Virginia Woolf and the Poetics of Narrative Trauma,” Caruth’s “original and groundbreaking contribution lies in the ways in which she integrates neurobiological, philosophical, psychoanalytic, and literary insights into a comprehensive approach to trauma.” Although its trademark stylistic elements can make it difficult to discern any apparent meaning from a trauma narrative, Caruth explains in Unclaimed Experience that such literature provides an ideal platform for exploring this exact relationship between “knowing and not knowing,” one that sits at the crux of Woolf’s unique writing style and that I will continue to explore over the course of this thesis. Furthermore, Caruth believes that “trauma is not locatable in [a] simple and original event in an individual's past” — a statement I uphold in my work, as I believe it is impossible for modern readers to discern the extent of the impact certain events had over Woolf’s life. Instead, I will strive to illuminate the various locations in Woolf’s texts where she works to represent her memories of trauma, yet refrain from deeming certain events to be more influential than others over her life and work. By working in this manner, I seek to avoid contributing to the iconization of Woolf —

81 Amara, “Virginia Woolf and the Poetics of Trauma Narrative,” 21.
82 Amara, 21.
83 Amara, 12.
84 Cathy Caruth, Unclaimed Experience: Trauma, Narrative, and History, (Baltimore, Johns Hopkins University Press, 2016), 4.
a phenomenon which has rendered her “a powerful and powerfully contested cultural icon, whose name, face and authority are persistently claimed or disclaimed in debates about arts, politics, sexuality, gender…” rather than a complex human being with a diverse array of views and ideas.⁸⁵

Caruth’s understanding, fueled by post-structuralist philosophy on the inherent “gap of knowing” in trauma writing, provides a critical foundation for a number of observations I will make over the course of this work. Yet, her theories are only applicable to a certain extent due to her overly ambiguous definition of trauma, in which she paints a picture of a world where everyone, victims and perpetrators alike, share a mutual “history of trauma” caused by immeasurable cultural factors.⁸⁶ Schönfelder argues that Caruth’s understanding reduces trauma to nothing more than a “cultural trope,” a one-size fits all definition that, in turn, is haphazardly applied to entire groups of people. Instead, Schönfelder asserts that modern trauma scholars must work to “re-evaluate” and “reconceptualize” a working definition of literary trauma — ultimately unweaving a “tangled object” that needs to be clearly defined before any further progress is made in the field.⁸⁷ I will use Schönfelder’s definition of trauma, in which she positions herself in between the Diagnostic and Statistical Manual of Mental Disorder’s rigid medical definition and Caruth’s overly inclusive understanding of the cultural analogy, over the course of my analysis — ultimately considering trauma to mean any “profoundly distressing, painful, or shocking experience that affects the individual so deeply as to cause a disruption in, injury to, or breach within the structures of the mind and the psyche and that, as a result, may

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⁸⁶ Cathy Caruth, *Unclaimed Experience: Trauma, Narrative, and History*, 18.
⁸⁷ Schönfelder, 20.
have a persistent impact on an individual, especially regarding his or her relation to identity, memory, and the social environment.\textsuperscript{88}

As noted in chapter two, trauma theorists, in the name of troubling hegemonic power structures, have begun to turn from studying war veterans such as Septimus to analyzing the more “familiar” trauma undergone by female survivors of sexual assault and domestic abuse.\textsuperscript{89} Geoffrey Hartman addresses this new form of radicalism, writing, “It is especially through its concern with the marginal and repressed, with silenced or forgotten histories, that trauma writing tends to be profoundly political, often giving a voice to the oppressed and calling attention to wounds that have been hidden under the grand narratives of history and experimentations as far as the seminal works of postmodern fiction.”\textsuperscript{90} Hartman further departs from Caruth’s argument on the inherent unfathomability of trauma in acknowledging that “[l]iterary verbalization... still remains a basis for making the wound perceivable and the silence audible” and that writers have discovered various ways to depict trauma in a manner that both acknowledges its challenges of representation, while simultaneously strengthening reader understanding.\textsuperscript{91} Although he was part of the more conservative Yale school of trauma study, Hartman undoubtedly set the theoretical stage for modern scholars to highlight the various subversive capabilities of scriptotherapy.

In conjunction with viewing the writing of trauma narratives as a culturally subversive process, scholars like Henke, Schönfelder, and Rodriguez have begun upholding the restorative potential of trauma writing with much less apprehension than Caruth and Hartman.\textsuperscript{92} My analytical approach, as well as that of my contemporaries, departs from Caruth and relies heavily

\textsuperscript{88} Schönfelder, 20.
\textsuperscript{90} Schönfelder, 16.
\textsuperscript{92} Schönfelder, 34.
on the premise of an inherent continuity between Virginia’s life and the creation of her work. As a theoretical basis for their arguments, these scholars acknowledge the impossibility of fully separating any “adequate interpretation of a literary work” from the “notions of agency, personhood, cause, and effect” that would undoubtedly influence the creation of the text in question. To illustrate the critical importance of this continuity, Schönfelder highlights Deborah Horvitz’s argument in *Literary Trauma: Sadism, Memory, and Sexual Violence in American Women’s Diction*, in which she discusses how female trauma writing illuminates “the protagonists’ varying capacities to use art, especially narrative, as a method of ‘working through’ or healing from trauma” as a common occurrence. Horvitz disagrees with Caruth’s belief that trauma narratives can inflict violence upon those who read them, arguing that it is the empowering message of such narratives that are instead passed on to readers. She writes:

As I hope my study illustrates, power lies in the capacity to find or create individual, personal meaning from a traumatized and tortured past. If traumatic events are not repressed, they can be used: victims remember and imagine stories to be repeated and passed on. That is, when the stories of the past are consciously recognized, the cycle of violence can end, because the narratives, not the sadomasochism or the trauma, are repeated and passed on.93

Many modern scholars share Horvitz’s belief in the restorative potential of trauma writing. Published in 2005, Ann Kaplan’s *Trauma Culture* rails against “Caruth’s insistence on the ‘unspeakability’ and ‘unrepresentability’ of trauma” and instead argues that “telling stories about trauma… may partly achieve a certain ‘working through’ for the victim” as well as “permit[s] a kind of empathetic ‘sharing’ that moves us forward, if only by inches.”94

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94 Schönfelder, 37.
Possessions, Jennifer Griffiths further examines the process of reconstituting one’s self-image after a traumatic incident, with a specific focus on how survivors can use writing to reunite their bodies and minds. Rodriguez’s 2016 publication is one of the most recent works in this sphere of innovative trauma scholarship, foregrounding the premise that examining trauma’s gendered representation in literature can further help survivors use their own written narratives to surmount feelings of isolation. It is clear these scholars believe that trauma writing and healing are not incompatible, and by aligning myself with their work, I hope to better understand the restorative potential of Woolf’s writing and foreground her authorial agency in the creation of a novel as artful as Mrs. Dalloway.

Over the course of the next chapter, I will draw from Schönfelder, as well as her contemporaries, in incorporating clinical studies on the psychological aspects of trauma into my analysis to avoid partaking in dangerous overgeneralizations. As Schönfelder so aptly warns, “if trauma is not connected to specific traumatogenic events and circumstances (i.e., specific experiences at the level of the individual or specific historical events or conditions at the level of the collective) and instead treated as something inherent in the structures of human experience in general, trauma discourse risks losing its power to call for individual and political responsibility and action regarding various wrongs and traumatizing conditions.” The concrete limitations of traumatic stress studies help prevent such generalizing discourse, as clinical research is implicitly based upon individual scenarios and experiences rather than homogenizing, overly theoretical structures of analysis. Thus, to appropriately elucidate the connection between literature and healing from trauma, as well as work to shift its meaning from “general cultural condition” to a “multifaceted and complex aspect of human experience,” this thesis will use the multidisciplinary analytical approach, consisting of varying layers of literary analysis and

96 Schönfelder, 37.
clinical research, in order to further illuminate the complexity of Woolf’s selfhood and lived experience.  

**Chapter Three: Clinical Methods of Healing Trauma Through Literature**

In order to highlight the progression of Woolf’s symptoms as she grew to adulthood under the lewd gaze of the Duckworth brothers, as well as delineate clinically proven practices that promote healing in trauma survivors, this thesis will create a conceptual mapping of relevant findings in recent clinical studies, with a distinct focus on research surrounding childhood sexual abuse. Throughout my research, I have paid particular attention to the manner in which trauma disrupts processes of human memory, as the idea of a “ruptured narrative” is central to both Woolf’s writing style and my own analysis of how survivors choose to textually represent their traumatic memories. Although I will continue to reference these ideas throughout my close reading of significant scenes in *Mrs. Dalloway*, I hope that this chapter provides readers with a comprehensive understanding of modern trauma research in order to moderate the abstraction of literary trauma studies and formulate an interdisciplinary framework of analysis that can be used by future Woolf readers for decades to come. By no means, through the incorporation of such research, am I trying to claim that Woolf suffered solely from PTSD. Rather, I believe the causes and symptoms of such a condition must be fully understood in order to recognize the various ways in which it could have both influenced her mental illness and presented itself stylistically in her texts — ultimately granting readers a more complete view of her life and writing.

Although I laid out my full working definition of trauma in chapter two — any event shocking or distressing enough to affect an individual’s psyche or processes of memory — it is necessary to clarify that when used in a clinical setting, the term trauma denotes the event that is

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98 Schönfelder, 39.
incredibly disturbing or painful to an individual, while the mental and physical effects of the event in question are classified as Post-Traumatic Stress Disorder. Whether or not someone who has experienced trauma shows specific symptoms of PTSD depends on a multitude of personal and environmental factors, which is why the Diagnostic and Statistical Manual of Medical Disorders’ definition is constantly in flux in regards to its increased focus on a “response-based notion of trauma” in order to take such varying factors into account. Tracking these changes to the DSM is critical to understanding the broader societal implication of trauma studies, as the manual serves as the bedrock of a classification system used by psychiatric professionals worldwide, consequently holding immense weight in regards to defining what society considers a “normal” symptom of mental illness. In upholding a response-based understanding of trauma, it is critical to understand that viewing symptomatology through the narrow lens of traditional mind-body dichotomies is impossible, as PTSD symptoms “tend to be so powerful that they involve an intense mental and bodily experience, making trauma victims feels as if they are literally reliving the past in the present.” The most recent version of the DSM, the DSM-V, groups symptoms into categories based on their combination and severity. Symptoms categorized under “re-experiencing” and “avoidance” deal with unwanted, troublesome memories and intense periods of “prolonged physiological distress,” while symptoms falling under “negative cognitions and mood” can manifest as a complex range of emotions, from a strong desire to remain isolated from others to persistent self-blame by the individual. Finally, symptoms categorized under “arousal” are defined by manic and volatile behavior, which often presents in the form of disrupted sleep patterns and intense alertness.

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97 Schönfelder, 62.
98 Schönfelder, 65.
categories make evident, survivors are forced to repetitively confront their individual traumas with no clear indication of what parts of their body or mind will be affected.

The DSM-V has greatly expanded the boundaries of what researchers consider to constitute a traumatic experience, as it now includes not only forced sexual intercourse, but also “abusive sexual contact, non contact sexual abuse, [and] sexual trafficking” within its guidelines. This expansion is particularly interesting in light of Virginia Stephens’s relationship with the Duckworth brothers, who still worsened her PTSD symptoms, even when they were not physically molesting her, due to their intense focus on her appearance and social status.100 Furthermore, DSM researchers have worked to include a wider range of cultural backgrounds, genders, and ages in their studies in order to avoid over-generalizing their conclusions regarding the difficulties of living with certain symptoms of PTSD.101 Out of these various demographics, the rapidly growing field of childhood trauma studies is most relevant to my analysis as Woolf’s abuse began at the early age of 6, and, as leading trauma psychiatrist Judith Herman notes, “[r]epeated trauma in adult life erodes the structure of the personality already formed, but repeated trauma in childhood forms and deforms the personality.”102 Furthermore, when such traumas are perpetrated by someone within the family, and occur for long periods of time, Herman states that survivors will often manifest symptoms much more serious and obscure than those suffering from other forms of PTSD. This “complex” form of PTSD is marked by the “the simultaneous or sequential occurrence of child maltreatment, including psychological maltreatment, neglect, physical and sexual abuse, and domestic violence that is chronic, and that begins in early childhood and occurs within the primary caregiving system,” and can completely

100 Lee, *Virginia Woolf*, 144-145.
101 Schönfelder, 72.
shatter a survivor’s sense of identity while “ruptur[ing] systems of meaning.” According to Herman, these ruptures can result in suicide, self-harm, and various other dissociative and somatization disorders that last long into adulthood. As Woolf used the pairing of Septimus Smith and Clarissa Dalloway to represent the complex nature of her traumatic memories, this research provides an interesting lens through which to view the characters’ struggles to understand their own fractured subjecthood, as well as Smith’s violent suicide at the conclusion of the novel.

Although clinical trauma research has gained more influence within the sphere of traditional literary scholarship, the transition has happened rather gradually. Writer Louise DeSalvo is one of the few Woolf scholars to have published a book-length study, as recently as 1989, on the wide-reaching impacts of childhood sexual abuse on Woolf’s adult life. From her very first page, she classifies Woolf as an incest survivor, and proceeds to identify the specific risk factors which she then uses as points of reference in her case study. DeSalvo notes that this work is fueled by her belief that many of Woolf’s biographers inaccurately portray her as insane and fail to acknowledge that “Virginia’s anxious, ‘mad’ behavior” could have been driven, at least in part, by her traumatic experiences. Psychologist Lucia Williams helps delineate the risk factors DeSalvo identifies in her book, such as the fact that that Woolf’s abuse began when she was young, the abuse lasted nearly 20 years, the abuse occurred in many different forms, she was abused by both Gerald and George Duckworth, the abusers were close family members, and “another member of the family was also abused” in reference to Woolf’s sister Vanessa. As a child, Williams writes that Woolf felt incredibly isolated and was routinely overcome by a

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103 Herman, _Trauma and Recovery_, 119-21.
104 Herman, _Trauma and Recovery_.
105 DeSalvo, _The Impact of Childhood Sexual Abuse on Her Life and Work_, 1.
106 Lucia Williams, “Virginia Woolf’s History of Sexual Victimization: A Case Study in Light of Current Research,” in _Psychology_, (São Carlos, University of São Carlos, 2014), 1155.
“hopeless sadness” during which she would “[slink] off alone, feeling horribly depressed.”

During these depressive episodes, Woolf remarked that she felt powerless over her own body, as well as in her interactions with others. To describe a childhood altercation with her brother Thoby, Woolf writes, “I dropped my hand instantly, and stood there, and let him beat me…” and “I became aware of something terrible; and of my own powerlessness.” Furthermore, Woolf remarks that her abuse was accompanied by a deep sense of shame, questioning why she would “still shiver with shame at the memory of [her] half brother, standing [her] on a ledge, aged about 6, and so exploring [her] private parts.” She asks herself, “Why should I have felt shame then?”

DeSalvo further suggests that Woolf exhibited dissociative behaviors characteristic of severe PTSD, referring specifically to instances in which Woolf describes how “[a] disembodied trance-like intense rapture... used to seize [her] as a girl” and that she once struggled to cross a puddle because “everything suddenly became unreal; I was suspended…” These elements of dissociative behavior reappear in the character of Septimus, who, unable to integrate his traumatic memories of war into standard processes of memory, remains trapped in a world where his arm is nothing but a “piece of bone” and his “macerated” body is “spread like a veil upon a rock.” To illustrate the processes behind this disassociation, Bessel van der Kolk describes the psychological coping mechanism of “indifference,” used by soldiers in order to mentally escape the horrors of war and “the sight of mutilated comrades, the smell of their blood and bowels, the incessant sound of their cries and moans heard through the noise of machine guns and exploding

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108 Bell, 44.
109 DeSalvo, The Impact of Childhood Sexual Abuse on Her Life and Work, 105.
111 Woolf, Mrs. Dalloway, 68.
shells, and even the taste of death.”112 Due to his experience fighting on the frontline, Septimus no longer perceives himself as human, or as having access to experiencing the full range of emotions emblematic of the human experience. In the world of the sane, “communication is health; communication is happiness,” and as a trauma survivor Septimus finds himself unable to describe to either Rezia or his doctors the extent of the horrifying thoughts plaguing his mind.113

In a similar manner to how soldiers suffering from PTSD sometimes begin to feel utterly repulsed by the physicality of their bodies, Woolf, from early childhood, displayed symptoms of anorexia nervosa. Glenny notes that in the spring of 1888, the Stephens children were stricken with whooping cough and lost immense amounts of weight during the illness, however Virginia never regained her childish plumpness after her recovery — Bell writes that during this time period she became “marked . . . by that thin, fine, angular elegance which she kept all her life.”114 As Gerald Duckworth began abusing Woolf the following summer, Glenny poses the question of whether it was his abuse that caused her to engage in seemingly anorexic behavior from such a young age.115 Although studies, like the once conducted in 2014 by Dworkin, Javdani, Verona, and Campbell, have tentatively shown that CSA can increase binge-eating and purging in trauma survivors, a much more robust association can be drawn from clinicians’ reports of conversations with their patients.116 Despite being somewhat tenuous, this thesis highlights the connection between Woolf’s trauma and her disordered eating as these same associations between food, weight, and ridicule are foregrounded within Mrs. Dalloway. In my close reading, I will detail the manner in which Woolf uses Clarissa’s dinner party as means for her character to gain

113 Woolf, Mrs. Dalloway, 93
114 Bell, Virginia Woolf: A Biography, 25.
116 Williams, 1155.
agency in a patriarchal society by presiding over the distribution of food and drink, as well as the location where she is finally able to reunify her fractured sense of selfhood.

As research surrounding CSA has only become prevalent over the past couple of years, it is not surprising a collection of older 20th century biographers “victim-blamed” Woolf in their underestimation of the immense impact trauma can have on the wellbeing of a survivor, especially one already struggling with significant mental illness. For example, in Lee’s critically renowned biography *Virginia Woolf*, she asserts that Woolf’s memories regarding her sexual abuse have an air of “something inconclusive about them” and that her friends also present “confusing” reports in regards to this time period of her life. Lee criticizes DeSalvo for her consistent “manipulation” of CSA data, implying she “over-interprets” research in a manner to fit with Woolf’s behavior. Further moderating this liberal sphere of scholarship, Lee questions whether Woolf could have used George “as an explanation for [her own] terrifyingly volatile and vulnerable mental states,” as she seemingly reacted to his death with feelings of tenderness. I applaud Lee’s speculative nature, yet it is important to note the existence of clinical research comparing the emotional ties between survivors of CSA and their abusers to Stockholm syndrome, which may account for Woolf’s strange behavior in regards to her relationship with the Duckworth brothers. A more shocking example of this victim-blaming mentality can be found within the work of scholar Lyndall Gordon, who, in *Virginia Woolf: a writer’s life*, claims that “George’s behavior… may have been irresistible to a girl like Virginia,” and that he “thought [himself] very handsome and his combination of sensual lips and considerate manners made him the pet of society ladies.”

117 Lee, 152-153.
118 Williams, 1157.
119 Williams, 1157.
121 DeSalvo, 5.
still face this sort of gendered bias today, as one only needs to look at startlingly low number of sexual assault convictions in modern society to draw conclusions about the continued systematic privileging of male voices over female experiences.\textsuperscript{122} In the midst of today’s “Me Too” movement, the debate between scholars regarding the extent of Woolf’s abuse, despite the extensive amount of existing evidence, holds an especially weighty relevance.

\textit{Trauma and fragmented processes of memory}

I must now discuss one of the most prominent concerns amongst both literary trauma theorists and clinical physicians — that being the myriad ways in which trauma negatively affects cognitive functions of memory — in order to later delineate the immense restorative potential that trauma writing holds for survivors. In the words of van der Kolk, intrusion and amnesia can occur when “structures of autobiographical memory” fail to integrate trauma-related memories into their pre-existing lexicon of non-traumatic, day to day memories.\textsuperscript{123} As a result of this cognitive interference, it can become nearly impossible for survivors to willfully recall certain traumatic memories, and instead they fall victim to series of “sudden, uncontrolled intrusions” into their everyday lives.\textsuperscript{124} Furthermore, these often frightening memories are structured along “somatosensory or iconic levels,” meaning that the sheer power of what the survivor sees and feels, coupled with the startling “here and now quality” of such visions, can render them trapped in a state of “speechless terror.”\textsuperscript{125} Because these memories cannot be easily explained, they take on an incomprehensible, almost “haunting quality,” that make “trauma [survivors] feel locked up in the past.”\textsuperscript{126} In a study on the frequency of posttraumatic nightmares, Van der Kolk found that survivors will sometimes re-experience the same traumatic

\begin{quote}
\textsuperscript{122} Williams, 1157.
\textsuperscript{123} Bessel van der Kolk, \textit{Traumatic Stress: The effects of overwhelming experience on mind, body, and society}, 282.
\textsuperscript{124} Schönfelder, 75-75.
\textsuperscript{125} van der Kolk, “Trauma and Memory,” 287.
\textsuperscript{126} Schönfelder, 83.
\end{quote}
experience over and over again for up to 15 years. In his words, “traumatic memories are timeless, and ego-alien” — meaning that such memories continuously shatter the survivor’s sense of self and can produce immense inner-turmoil. These debilitating aspects of traumatic memory have become a prominent theme in literature, as authors focus on how such intensive memories can reorient the lives of their protagonists so that they begin to define every subsequent lived event through its relationship to the original trauma. One of the most culturally prominent examples of a survivor’s fixation on traumatic memory is that of Toni Morrison’s *Beloved*, a haunting narrative concurrently bound by the horrors of the supernatural and chattel slavery, in which Morrison explores the concept of repressed trauma — specifically the trauma of a collective group of people — and how it resurfaces later, sometimes insidiously, as “re-memory.” In *Beloved*, re-memory comes in the form of the ghostly return of the main character’s daughter, who slowly sucks the life out of her mother to represent the insidious nature of how trauma affects those who harbor it deep within their psyches.

Van der Kolk has further studied the intrinsic connection between literature and traumatic memory, writing that if survivors are continually re-exposed to the site of their trauma, whether in reality or through the form of intrusive memories, they will eventually find themselves unable to function in reality. In order to halt this degeneration of selfhood and sanity, he argues that it is necessary that they work towards “the integration of the alien, the unacceptable, the terrifying, and the incomprehensible; trauma must be ‘personalized’ as an integrated aspect of one’s personal history.” In other words, survivors must transform their once incomprehensible trauma memories into cohesive narratives in order to fully understand their experiences, as well
as recover a sense of stability in their tumultuous lives.\textsuperscript{131} Luckily, a number of modern research studies point to the conclusion that survivors can begin healing by narrating their past traumas through the written or spoken word.\textsuperscript{132} Through this form of “exposure therapy,” patients are forced to re-confront their trauma through either “in vivo” or “imaginal” exposure, where they can either physically return to the site of trauma or situate themselves there using their imaginations.\textsuperscript{133} This method of therapy places the survivor in a controlled trauma simulation during which a trained professional can aid the survivor, whether through guided visualization or writing, in lessening trauma’s paralyzing grip over his or her life.

In \textit{Virginia Woolf and Trauma: Embodied Texts}, Suzette Henke and David Eberly argue that Woolf used a similar form narrative writing to achieve “healing through the aegis of traumatic reformulation,” a process the pair has since deemed scriptotherapy in order to capture the intrinsic connection between creation, reexperiencing, and healing.\textsuperscript{134} Their theory is best evidenced by Woolf’s declaration, in “A Sketch of the Past,” of how writing has helped her make sense of the “shocks” and “blows” of her traumatic youth. She writes, “It is only by putting it into words that I make it whole; this wholeness means that it has lost the power to hurt me; it gives me, perhaps because by doing so I take away the pain, a great delight to put the severed parts together.”\textsuperscript{135} Woolf’s revelation, that putting together the fragmented memories of her trauma through writing helps “take away the pain,” clearly emulates what modern researchers, such as van der Kolk, have demonstrated in their own studies. Earlier in the diary entry, Woolf describes feeling as if she routinely oscillates between the intense shocks of traumatic memories, and the

\textsuperscript{131} Herman, 176.
\textsuperscript{132} Schönfelder, 106.
\textsuperscript{133} “Exposure Therapy Helps PTSD Victims Overcome Trauma’s Debilitating Effects,” American Psychological Association, accessed October 20, 2019, \url{https://www.apa.org/research/action/exposure}.
\textsuperscript{134} Eberly, \textit{Virginia Woolf and Trauma: Embodied Texts}, 15.
\textsuperscript{135} Woolf, “A Sketch of the Past,” 72.
“cottonwool of [her] daily life” in which “nothing is lived consciously.”\(^\text{136}\) According to Herman, these spans of unconscious living reflect the manner in which trauma survivors will numb their emotional capacities as a defense against the intense pain of trauma.\(^\text{137}\) As delineated above, such modern trauma research holds immense potential for illuminating why Woolf textually represents her fractured memories in the unique way she does. Schönfelder best captures the reasoning for my desire to create a transdisciplinary structure of analysis in the passage below, establishing trauma studies as a discipline which must move away from abstraction and ahistoricism to produce meaningful conclusions regarding a survivor’s experiences. She writes:

> It is precisely because of the inherent tensions between these disciplines that an interdisciplinary dialogue is fruitful — and this applies especially to a notoriously slippery, complex, and controversial subject such as trauma. More specifically, as outlined above, an interdisciplinary approach constitutes a crucial pillar of my theoretical trajectory for several reasons: exploring trauma through the lens of psychiatry and psychology allows me to move away from the paradigm of literary and cultural studies that conceptualizes trauma in metaphorical and aestheticized as well as abstract and ahistorical terms.\(^\text{138}\)

In my subsequent close readings, I will draw upon a multitude of disciplines, ranging from the theories of 20th century French feminists to clinical trauma research, in order to draw connections between Woolf’s personal diaries and how she represents traumatic memories in her literature. Of course, this thesis does not cover Woolf’s body of work in its entirety, yet I foreground a collection of scenes from *Mrs. Dalloway* that I believe most vividly reflect her use of scriptotherapy and gendered experience of trauma. The plot of *Mrs. Dalloway* is essential to

\(^{136}\) Woolf, “A Sketch of the Past,” 70.

\(^{137}\) Herman, 37-38.

\(^{138}\) Schönfelder, 86.
my analysis as the Woolf’s doubling of her protagonists, Septimus Warren Smith and Clarissa Dalloway, befittingly demonstrate the gendered nature of trauma — Septimus suffers from PTSD as a result of fighting in the Great War and ultimately commits suicide, while Clarissa appears to live a frivolous life, marked by shopping on Bond Street and hosting extravagant parties, as a high society woman. However, certain elements of Clarissa’s experience, from feeling trapped in a loveless marriage to yearning for the affection of an old female friend, illustrate the manner in which traumatized women have been forced to deal with their symptoms in secret, as the significance of their experiences remain unrecognized by society. Most importantly, Clarissa’s steadfast devotion to hosting her party, in which she confronts memories of figures from her past head on, illuminates the restorative potential of trauma writing in a manner that Smith’s death, so upheld by trauma scholars as being indicative of Woolf’s experience, cannot.

Chapter Four: It Is Clarissa, For There She Was

A shared consciousness between two strangers

Within the final pages of Mrs. Dalloway, the traumatized war veteran Septimus Smith, in a purposeful attempt to escape involuntary hospitalization at the hands of his doctors, jumps out of his apartment window and swiftly impales himself upon the sharp fence below. Although Clarissa Dalloway has never met Septimus, her much-anticipated party is still touched by his suicide when the renowned doctor, Sir William Bradshaw, bursts into the room and apologetically attributes his lateness to the sudden death of his patient. Woolf writes, “the clock began striking. The young man had killed himself…” to describe the subsequent moment in which Clarissa briefly steps away from the chaos to reflect upon how life always seems to go on, even in the event of an immense loss like Septimus’s death.\(^\text{139}\) Despite the sudden nature of this

\(^{139}\) Woolf, Mrs. Dalloway, 186.
tragedy, Clarissa is quite certain that “she did not pity [Septimus]; with the clock striking the hour one, two, three, she did not pity him, with all this going on,” because, in fact, she feels “somehow very like him” in regards to being feeling overwhelmed by life’s unrelenting hardships. Woolf’s use of onomatopoeia — the methodical sound of “one, two, three” — to emphasize the unrelenting passing of time further highlights its utter meaninglessness in the face of a trauma survivor’s fractured consciousness.

Although it is not until Mrs. Dalloway’s conclusion that Woolf confirms the existence of a shared connection between Septimus and Clarissa, with Clarissa making the illuminating remark that she feels very much like him upon learning of his suicide, the pair serve as doubles to each other throughout Mrs. Dalloway — each grappling with their own recurring traumatic memories from the past, and how such memories continue to influence their actions in the present. Woolf uses a variety of animal descriptions to highlight the pair’s similarities, for even though they are not seen side by side for the entirety of the novel, their likeness is indicated by Clarissa’s nose being described as “beaked like a bird,” while Septimus is also referred to as being “beak-nosed” like that of a “young hawk.” Furthermore, Clarissa has the “touch of the bird,” while Septimus is often called a “hawk or crow,” a name he decides is fitting because just as crows destroy crops, he had been senselessly forced to kill men fighting in the Great War. Further cementing their narrative function as two parts of the same whole, Clarissa and Septimus possess an intense connection to the natural world around them, finding brief moments of spiritual solace in the surrounding trees and mist that the rest of the novel’s characters seem to ignore. Finally, Woolf repeatedly interjects her narration of the day with lines from a Shakespearean funeral dirge, “Fear no more the heat ’o the sun / Nor the furious winter’s rages,”

140 Woolf, Mrs. Dalloway, 14, 20, 148.
141 Woolf, Mrs. Dalloway, 4, 148.
to serve as a reminder to both characters that death should not be feared, but rather viewed as a welcome respite from “winter’s rages” of life. However, it is important to note that despite their inherent similarities, the two handle the “heat of the sun” in disparate manners in relation to their own personal traumas.\textsuperscript{142} While Clarissa forces herself to continually put out fires within her life, such as the “match burning in a crocus” she associates with her love for Sally Seton, to fit in with societal expectations of an upper-class housewife — Septimus feels in danger of becoming consumed by his fire’s fiery heat, and of “falling down, down... into the flames!”\textsuperscript{143} This constant repetition, scholar Allie Glenny argues, is intoned in a manner suggesting that, “like the heroine of Cymbeline, Clarissa experiences a living death” due to her refusal to embrace the danger and excitement of living a fulfilled life.\textsuperscript{144}

Although Clarissa and Septimus handle the heat of the sun differently, this thesis strives to reach beyond the level of mere aesthetic similarity, and argues that Clarissa and Septimus understand each other through an inherent shared consciousness, which serves to both structure the novel and textually represent Woolf’s own gendered experience of trauma. Originally, Woolf planned to have Clarissa commit suicide at the novel’s conclusion, yet instead chose to develop the character of Septimus as means of viewing “the world seen by the sane and the insane side by side — something like that,” and representing the innate difference in male and female experiences of trauma.\textsuperscript{145} As Poole explains, “[l]ike a Cubist painter, Woolf wants to show different facets of the whole” by utilizing the shared consciousness of the two characters to make sense of the multitude of past, present, and future memories they confront over the course of the novel.\textsuperscript{146} He further argues that this continuous parallel, between the “socially prominent Mrs.

\textsuperscript{142} Woolf, \textit{Mrs. Dalloway}, 9.
\textsuperscript{143} Woolf, \textit{Mrs. Dalloway}, 32, 66.
\textsuperscript{144} Glenny, 121.
\textsuperscript{145} Woolf, \textit{A Writer’s Diary}, (New York, Mariner Books, 2003), 52.
\textsuperscript{146} Poole, 205.
Dalloway” and “the insane outsider, Septimus Smith” demonstrates Woolf’s understanding “that placement on one side or the other of that line,” in reference to being categorized as mad, “often depends upon circumstances and who is doing the perceiving.”

Through this conscious authorial decision, Woolf uses Septimus to illuminate the fervid passion that Clarissa believes is missing from her soul, writing, “it was not beauty; it was not mind. It was something central which permeated; something warm which broke up surfaces and rippled the cold contact of man and woman, or of women together.”

Although Septimus feels in constant danger of being consumed by intrusive memories, he refuses to let his doctors seize control of his life, going as far as to ask Rezia to burn his writings to prevent them from falling into the hands of Dr. Holmes, who would see them as nothing but the musings of a mad man. On the other hand, Clarissa has spent the majority of her life feeling that “it [is] very, very dangerous to live even one day,” and Septimus’s suicide leads her to the realization that she has spent the majority of her life living on the “on the fringes of life, walking on the porch at Bourton, watching the woman from her window, standing at the edge of the Serpentine, and even dying vicariously through [Septimus].”

As Henke notes, Clarissa’s “ideals have been tempered, her beliefs eroded in the gradual process of adaptation and compromise.” Both Septimus and Clarissa have “beasts” raging in the depths of their souls, yet Clarissa eschews the excitement and exuberance of life in order to remain safely entrenched in the upper echelons of London society. However, it is due to their shared consciousness, DeMeester explains, that Clarissa is still “uniquely able to receive Septimus’s message because she senses the brutal monster — the vulnerability, the frailty, the evil — stirring about in her and her social and political circles where

147 Poole, 207.
148 Woolf, Mrs. Dalloway, 46.
149 Woolf, Mrs. Dalloway, 11.
150 DeMeester, 90.
it is “wreathed about with chatter, defaced, obscured… let drop every day in corruption, lies, chatter.” Unlike the rest of the people at her party, who are saddened to hear of a stranger’s suicide, Clarissa can see that there exists an “embrace in death” — one that reaches “[a] centre” which is no longer shrouded by the mundanities of everyday life.

Although Clarissa’s decision to sacrifice her passion for a stable life with Richard causes others, such as Peter Walsh, to view her as being “hard” and “cold,” I believe that viewing her disunified selfhood through the lens of critical trauma studies shows how such behavior serves as a representation of the manner in which extensive trauma can fragment the psyche, making a survivor’s place in society feel increasingly destabilized. The irregular manner in which Clarissa’s trauma presents itself, so different than Septimus’s more traditional exemplification of “shell shock,” is a testament to Woolf’s unique status as a survivor of sexual abuse and how, until now, most scholars have overlooked such experiences as meaningful locus of trauma study in Mrs. Dalloway. Thus, in order to foreground Clarissa’s experience, I will draw from the work of Suzette Henke, as well as other modern trauma scholars, to illustrate how the language Clarissa uses to talk about hosting her party emulates the language Woolf uses to talk about the process of writing in her diaries, and that this continuity is critical to understanding the eventual unification of Clarissa’s fractured sense of self, as well as the restorative potential Mrs. Dalloway holds as a trauma narrative.

Due to this critical continuity between the purpose behind Clarissa’s party throwing and Woolf’s narrative writing, I work to illuminate Woolf’s empowered selfhood over the course of my close-readings using Henke’s theory of scriptotherapy — a decision stemming from Woolf’s musings that the very acting of writing helped her make sense of the “shocks” and “blows” of

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152 DeMeester, 88.
153 Woolf, Mrs. Dalloway, 184.
154 Woolf, Mrs. Dalloway, 149.
her traumatic youth. According to DeSalvo, Woolf “wrote about her sexual abuse in order to understand why it happened and how it affected her. She wrote about it in her fiction, in her essays; she wrote about it in her memoir and in her letters…” Furthermore, As Woolf worked on “the mad part” of the novel during a time she was also “tied, imprisoned, [and] inhibited” while recovering from a depressive episode, I will turn to her diaries to make critical connections between pertinent events in her own life and how she chose to represent such events within her texts. Based on this extensive collection of evidence, I will read Mrs. Dalloway, and specifically the characters of Clarissa and Septimus, as being part of a textual space within which Woolf both represented memories of, and textually worked through, her own trauma. In this statement, Henke further explains how scriptotherapy can aid the traumatized subject in grappling with his or her intrusive thoughts, allowing them to present such painful memories, if needed, under the guise of fictional characters:

What cannot be uttered might at least be written — cloaked in the mask of fiction or sanctioned by the protective space of iteration that separates the author/narrator from the protagonist/character he or she creates and from the anonymous reader/auditor she envisages… It is through the very process of rehearsing and reenacting a drama of mental survival that the trauma narrative effects psychological catharsis.

Due to such evident unity across Woolf’s real and fictional timelines, Katt Blackwell-Starnes asserts that such “autobiographical elements” present within Mrs. Dalloway are “neither

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155 DeSalvo, 12.
shocking nor surprising.” Even more notably, by including these autobiographical elements, Woolf is able to undergo a “psychological catharsis” during the writing of her novels.\textsuperscript{158}

Through its illumination of the often overlooked manner in which Clarissa represents Woolf’s gendered experience of trauma, as well as the restorative potential of trauma narratives, this thesis seeks to moderate Poole’s overly reductive argument that draws parallels between Woolf’s inability to “externalize the horror of incarceration in her marriage” and Septimus’s inability to “externalize the horror of being unable to feel….“\textsuperscript{159} Such an argument privileges Septimus’s traditionally masculine experience of war trauma as being more significant than sexual abuse, as well as propagates the false narrative that Leonard oppressed Woolf within the confines of their marriage. As critic Harvena Richter asserts in a 1984 review of The Unknown \textit{Virginia Woolf}, “if Poole was trying to prove that Virginia was not at times mentally unbalanced, he succeeds only in presenting the figure of a woman who seems far less sane than any of her writings suggest: someone so full of hate, jealousy, and suspicion that she takes on the guise of the traditional madwoman in the attic.” Although I find Richter’s review to be especially condemning, he clearly delineates how, in Poole’s quest to free Woolf from accusations of madness, the scholar only proliferates the unfortunate tradition of trying to rewrite Woolf’s life story in a manner most fitting with his overly reductive narrative.

Rodriguez takes issue with this method of analysis, as she argues that studying PTSD solely through the lens of warfare fails to encapsulate how trauma is an inherently gendered experience. Since trauma study’s pertinence to literature was established decades ago in regards to journalistic reports on the “wounded minds” of soldiers, the critical material surrounding Septimus’s representation of trauma is comprehensive and generally well-respected. However,

\textsuperscript{159} Poole, 140.
Woolf was a survivor of sexual abuse rather than a war veteran, and although the historical trauma of World War I undoubtedly influenced her writing, I believe it is only by reading Clarissa as a traumatized subject that one can comprehend the inherent unevenness of the representation of female traumatic experience in *Mrs. Dalloway* that results from Woolf’s own unique lived experience. As Hartman asserted, the “radical aspect” of trauma study becomes much more clear when it “draws its attention to ‘familiar’ violence such as rape, and the abuse of women children.” By failing to recognize the manner in which Clarissa represents Woolf’s experience of “familiar” violence, Poole ignores her potential to subvert societal standards of what constitutes legitimate trauma.

Due to the proliferation of critics who uphold Septimus’s trauma as being representative of Woolf’s experience, this thesis seeks to highlight how Clarissa spends the majority of the novel in a similar state of disunity, torn between her identity as wife of Richard Dalloway and memories of her more youthful, passionate self. It is only by bringing these disparate fragments together through the form of her party, the site of her edifying introspection on the nature of sanity and insanity in regards to both Septimus’s death and her own banal life, that Clarissa is able to unify her conception of self and confront Peter Walsh and Sally Seton in the present moment — a decision which represents the reintegration of traumatic memories into her consciousness in order to ‘recreate the flow’ of . . . life and restore a sense of continuity.”

Woolf’s decision to have Clarissa continue to carry onwards in the midst of her own perceived oppression, despite feeling envious of Septimus for escaping stringent societal norms, clearly illustrates the restorative quality of the party in positively shaping the way Clarissa begins to perceive her selfhood by the conclusion of the novel. For these reasons, I find it critical to

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foreground Clarissa’s experience in my analysis as this restorative quality is made much less apparent when scholars, such as Poole, analyze solely Septimus through the lens of trauma theory and fuel his forceful argument that Woolf’s abuse dominated both her life and life-writing.

*She sliced like a knife through everything*

In the opening pages of *Mrs. Dalloway*, Woolf makes clear that Clarissa is undergoing some sort of identity crisis as she walks through the bustling streets of London, noting that she feels “very young,” while “at the same time unspeakably aged” and wishes for the ability to live her life over again — especially in regards feeling like “she [knows] nothing; no language, no history.” Furthermore, she describes Clarissa’s utter lack of bodily solidity, reflecting on how “she slice[s] like a knife through everything; at the same time [is] outside, looking on.”162 Clarissa’s sense of fragmented identity seems to stem from her marriage to her husband, Richard, as she thinks:

> But often now this body she wore (she stopped to look at a Dutch picture), this body, with all its capacities, seemed nothing — nothing at all. She had the oddest sense of being herself invisible, unseen, unknown; there being no more marrying, no more having of children now but only this astonishing and rather solemn progress with the rest of them, up Bond Street, this being Mrs. Dalloway; this being Mrs. Richard Dalloway.163

Clarissa feels consumed by the societal expectation that she transform herself into the perfect housewife, as she has not only been transformed into “Mrs. Dalloway,” but “Mrs. Richard Dalloway.” Furthermore, the inclusion of the phrase “but often now” serves to show that she has

not always thought this way about her body, but the nature of aging and its “rather solemn progress” has caused her to feel panicked about her life’s inevitable conclusion of death. Due to this intense anxiety about aging, Clarissa thinks of her figure as something that can be easily discarded, like a party dress, or forcefully manipulated in order to present a unified front to the outside world. When she looks in the mirror, she purses her lips to “give her face point,” and it is only through this action that she can become a “definite” being, “her self when some effort, some call on her to be herself, drew the parts together.” As Clarissa must work actively to compose these parts of herself, “she alone [knows] how different, how incompatible” the scattered segments of her psyche truly are in comparison to the unified image she presents to the world. This passage illustrates that Clarissa feels an intense sense of disunity between her body and mind — a common symptom of trauma in which the survivor undergoes the “experience of being an outside observer of or detached from oneself.”

Although, as Lee notes, “passionate celebrations of London filled the diaries and letters and spilled over into Mrs. Dalloway,” Woolf still felt perpetually “haunted” by the threat of sinking into another deep fit of illness, and “in her novels, and as in her letters to Jacques, present life was shadowed and intercut with the past.” Seeing as Mrs. Dalloway is replete with characters whose lives are also “shadowed and intercut with the past,” it follows that Woolf’s own experiences — of battling illness in marriage, of being made childless under the orders of her doctors — would reappear throughout its pages. Mrs. Dalloway is replete with a sense of immense emotional distance between Clarissa and her husband, Richard — one that is augmented by frequent descriptions of her “nun-like, chaste existence, sleeping alone in her

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164 Woolf, Mrs. Dalloway, 37.
165 Poole, 73.
167 Lee, Virginia Woolf, 467.
bedroom, and resting during the afternoons while her husband is away on committee work.”
Clarissa sleeps alone in the attic bedroom, and no matter how hard she tries, “she [can] not dispel
a virginity preserved through childbirth which [clings] to her like a sheet.”\(^{168}\) This image of
Clarissa as an asexual being is further strengthened by descriptions such as “like a nun
withdrawing, or a child exploring a tower, she went, upstairs, paused at the window, came to the
bathroom.” She reflects on how “there [is] an emptiness about the heart of life; an attic room”
that is felt when all of the additional rituals and concerns are stripped away.\(^ {169}\)

Just as Septimus exhibits an intense fixation on the loss of his friend Evans, so intense
some critics regard it as homosexual, Clarissa is haunted by thoughts of a long ago passionate
romance, and “the most exquisite memory of her whole life” — a kiss that she once shared with
past love interest and friend, Sally Seton.\(^ {170}\) However, Clarissa eventually gives up this
friendship, one possessing an ardent “quality which could only exist between women,” for the
normalcy and social status of a life with Richard Dalloway.\(^ {171}\) As scholar Allie Glenny explains,
on one hand, Clarissa derives personal satisfaction from the emotional “gulf” between herself
and Richard, yet on the other, she sometimes refers to such a distance as being forcefully
imposed upon her. She writes:

It is Richard who (reminiscent of Leonard Woolf) daily compels her to retire into
the seclusion of the bedroom for one hour after lunch, and will do so until the day
he dies. It is Richard who insists that she must sleep without disturbance, in other
words, that she must abandon the marital bed. For really she prefers to read alone,
“He knew it.” If Peter would have denied Clarissa her desire for personal space,
Richard, albeit perhaps unwittingly, turns it back upon her, instituting a dependent-caretaker relationship that effectively infantilizes his wife and mitigates against real communication.172

Richard finds that he cannot even say “I love you” aloud to his wife, believing rather that “she understood; she understood without his speaking; his Clarissa.”173 Yet, he is not the only character who finds himself unable to express the depth of his feelings to Clarissa. The rather exuberant Peter Walsh finds his voice equally silenced when his demanding inquiry of “are you happy, Clarissa? Does Richard —” is interrupted by her daughter, Elizabeth, suddenly bursting into the room. These two scenes should be read through the lens of trauma scholar Patricia Moran’s argument that Woolf, informed by her own experience of abuse, foregrounds the tension between wholeness and rupture in her work — the author often undermining her own narrative in an “interrupted moment” that is in “essence an expression of traumatic experience.”174 As Clarissa’s sense of selfhood is fractured, Richard and Peter only communicate with the parts of her psyche that they can understand. Like a trauma survivor unable to comprehend his or her own chaotic past memories, Clarissa’s disunified selfhood prevents communication from occurring with those around her — further contributing to the melancholic loneliness and pervasive silences that fill the pages of *Mrs. Dalloway*.

*The woman in the window*

Despite this sense of disunity, it is clear that Woolf felt inspired to push the boundaries of her own authorial agency in the writing of *Mrs. Dalloway* — a desire that may have also been shaped by her admiration of female authors of the time, like Dorothy Richardson, who were

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172 Glenny, 120.
implementing modernist techniques and highlighting the unique subjectivity of the female experience in their own work. Of Richardson, Woolf writes:

She has invented, or if she has not invented, developed and applied to her own uses, a sentence which she might call the psychological sentence of the feminine gender. It is of a more elastic fibre than the old, capable of stretching to the extreme, of suspending the frailest particles, of enveloping the vaguest shapes.\textsuperscript{175}

This declaration invokes l’écriture féminine, a practice which urges women to write themselves into existence, asserting that they are “spacious singing Flesh: onto which is grafted no one knows which I” in order to gain power in a patriarchal society.\textsuperscript{176} Woolf’s praise of Richardson must be viewed more potently than one writer appreciating the work of another, as her alignment with such a subversive text further points to how she may have viewed literature in a similar manner — as a prime site for the exploration of feminine subjectivity. Thus, Clarissa Dalloway, so emblematic of modernist narrative form in her “emphasis on interiority, memory, psychological verisimilitude, personal isolation, and development of fragmented nonlinear plots,” should be read as a subversive character in her ability to represent Woolf’s unique experience of sexual trauma, while simultaneously demonstrating its healing potential through her intense focus on uniting disparate parts of her past and psyche.\textsuperscript{177} In order to mediate Poole’s aggrandizing discourse regarding the effects Woolf’s trauma had on her overall wellbeing and productivity, this thesis will highlight moments of textual resolution in which Clarissa successfully confronts the disparate fragments of her past. Woolf herself propones the restorative function of her novels, writing “I suppose that I did for myself what psycho-analysts for their

\textsuperscript{175} Schönfelder, 191.
\textsuperscript{177} Moran, \textit{Virginia Woolf, Jean Rhys, and the Aesthetics of Trauma}, 3.
patients. I expressed some very long felt and deeply felt emotion. And in expressing it I explained it and then laid it to rest.”  

Despite her fragmented sense of selfhood, Clarissa is able to find a sense of wholeness and fulfilment on her morning walk through London:

But that somehow in the streets of London, on the ebb and flow of things, here, there, she survived, Peter survived, lived in each other, she being part, she was positive, of the trees at home; of the houses there, ugly, rambling all to bits and pieces as it was; part of the people she had never met; being laid out like a mist between the people she knew best, who lifted her on their branches as she had seen the trees lift the mist, but it spread ever so far, her life, herself.  

Woolf’s syntax — one long sentence punctuated by a multitude of seemingly disparate fragments, represents the half-formed thoughts and rapidly shifting memories of a trauma survivor. Although Septimus’s thoughts are also conveyed in this stream of consciousness style when he experiences intrusive flashbacks inside Regent’s Park, Clarissa finds joy, rather than despair, in feeling that her soul is an integral part of so many different entities. As Glenny explains, she shares Septimus’s “distressed aversion to the physical and the biological but is ultimately able to reunite body with self through a creative act, her party… Like her, he responds intensely to life, but unlike her, he possesses no effective means of assimilating the stimulus of the ecstatic.”  

Clarissa is able to assimilate the ecstatic by thinking about her party happening later that day, during which she plans to organize the disparate fragments of her past and present, and it is through this mindful thinking pattern that she is able to mitigate the overwhelming intensity of life that ultimately consumes Septimus. Even when Peter is about to question

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180 Glenny, 155.
Clarissa’s happiness with Richard, she diffuses the situation by crying “My party to-night! Remember my party to-night,” the sound of clock chimes almost drowning out her voice.\footnote{Woolf, \textit{Mrs. Dalloway}, 48.}

In the same manner that Woolf speaks of using writing to make sense of the various horrors of life, modern trauma scholars recognize the artful manner in which Clarissa is able to cultivate elegance and order from the chaos of her parties. As Christine Froula explains in “Mrs. Dalloway’s postwar elegy,” Clarissa’s “attempt to organize post-traumatic chaos is elegiac in nature… [she] embodies the elegy’s very principle: the necessity of relinquishing the dead and of forming new attachments in order to carry on with life,” while her parties “mediate the mourner’s arduous journey from loss, grief, and rage to renewed life and hope.”\footnote{Christine Froula, “Mrs. Dalloway’s Postwar Elegy: Women, War, and the Art of Mourning,” \textit{Virginia Woolf and the Bloomsbury Avant-garde: War, Civilization, Modernity}, (New York, Columbia University Press, 2006), 126-129.} Meanwhile, Henke views the party as an artistic creation which wrenches her guests from the dullness of habitual activity and serves as a stage for moments of heightened consciousness.\footnote{Henke, “Mrs. Dalloway: The Communion of Saints,” 145.} DeMeester furthers this idea of Clarissa as artist by writing, “One gets the sense that the order, the pattern that emerges at her party is not organic but cultivated. Clarissa envisions the components — the people, flowers, the china — converging, crystallizing into an intricate pattern of perfect balance and symmetry.”\footnote{DeMeester, 89.} Within the party, the “young people could not talk,” yet Clarissa does not worry for she has brought them together in unity, “they looked” and this facade is enough.\footnote{Woolf, \textit{Mrs. Dalloway}, 177.} Although some people, like Peter, struggle to understand her reason for hosting such grandiose parties, Clarissa is sympathetic as “nobody could be expected to understand… they’re an offering; which sounded horribly vague.”\footnote{Woolf, \textit{Mrs. Dalloway}, 121.} To Clarissa, the parties are not a grand social gesture, but a personal coping mechanism — an offering to the beast within her soul — to help
unite the disparate fragments of her life. Just as trauma scholar Michèle Crossley explains how scriptotherapy helps survivors overcome the “threat of chaos, of meaninglessness” stemming from abuse, Clarissa’s parties help her feel the underlying beauty and fun buried beneath life’s traumatic excesses.  

As I discussed the association between anorexia and survivors of sexual abuse earlier in this thesis, it is important to briefly discuss Glenny’s argument that through Clarissa’s dinner party, Woolf works “to explicate the relationship between food and sociopolitical power within patriarchy while also considering how food may be used as a medium for self-definition within a patriarchal cultural framework.” She notes how the men in power within the novel also hold “privileged positions” in regards to food supply. Consider how for Hugh Whitbread, lunch arouses “not a sense of divine ecstasy but of glutinous delight” and reminds him of how secure his social status is within the world. Meanwhile, for women, “access to power, as to food, is only ever vicarious and the physiological, political, and personal sustenance thus received never really nourishing.” Glenny asserts, that of all Woolf’s main characters, Clarissa most closely emulates the “anorexic use of food” as a way of “mediating between the artificial polarities of spiritual and sensual uneasily cohabiting within her.” Ultimately, by holding power over the serving of dinner at her party, the hostess “connects her essential self on a profound level with other identities (for, as Lady Bruton notes, one feels one is webbed to the friends one has lunched with) and, further, with the ineffable center of existence itself.” Thus, while Septimus becomes fixated on the “the sordidity of the mouth and belly,” disgusted at the manner in which

187 Schönfelder, 84.  
188 Glenny, 117.  
189 Glenny, 125.  
190 Glenny, 117.  
191 Woolf, Mrs. Dalloway, 123.
Dr. Holmes consumes his porridge, Clarissa is able to surmount the traumatized subject’s disgust of food by placing herself in the powerful position of being its provider.\textsuperscript{192}

Despite the success of her party, Clarissa still struggles with feeling “something not herself, and that everyone was unreal in one way,” until the moment she learns of Septimus’s death — an event that causes her to realize she has been holding on much too tightly to her memories of the past and “she must leave them” behind in order to truly embrace the present. \textsuperscript{193} Clarissa thinks herself very much like him as she reflects on how just that morning she had also felt “the terror; the overwhelming incapacity… in depth of her heart an awful fear.”\textsuperscript{194} Yet, she notes gratitude for the fact that Richard was there beside her, so she could crouch in his comforting presence, like a small bird, in an act of self-preservation. Due to the pair’s shared consciousness, Septimus has dealt with similar intrusive memories over the course of the novel, yet he is unable to consolidate such flashbacks in the manner that Clarissa successfully does through her parties. Rather than consigning himself to doctors he does not trust, he kills himself, in an act that both he and Clarissa see as self-preservation. For, while “they went on living (she would have to go back; the rooms were still crowded; people kept on coming),” Septimus had preserved the “thing there was that mattered” through death. Septimus will remain young and eternally pure, while “they (all day she had been thinking of Bourton, of Peter, of Sally), they would grow old.”\textsuperscript{195} Scholar Janet Lyon further explains the importance of the shared consciousness, writing, “Septimus’s throbbing interiority is preserved for its next stage: it becomes a space that Mrs. Dalloway sympathetically inhabits when she learns of his suicide.”\textsuperscript{196}

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\textsuperscript{192} Woolf, \textit{Mrs. Dalloway}, 88. \\
\textsuperscript{193} Woolf, \textit{Mrs. Dalloway}, 171. \\
\textsuperscript{194} Woolf, \textit{Mrs. Dalloway}, 185. \\
\textsuperscript{195} Woolf, \textit{Mrs. Dalloway}, 184. \\
\textsuperscript{196} Janet Lyon, "On the Asylum Road with Woolf and Mew," \textit{Modernism/modernity} 18, no. 3 (2011): 551-574.
\end{flushright}
As Clarissa ponders Septimus’s decision, she watches an elderly lady move through her house, across the window, and wonders if the woman can see her as well. “It [is] fascinating,” Clarissa thinks, “with people still laughing and shouting in the drawing-room, to watch that old woman, quite quietly, going to bed.” As Clarissa’s party rages on below, she finds a sort of subtle beauty in watching the woman perform her night routine in solitude, realizing that she will eventually become this woman and be utterly alone in life. In accepting the inevitable progression of aging, she also realizes the silliness of being “forced to stand [there] in her evening dress,” fretting about returning to Sally and Peter and the rest of them, while she had just witnessed, at least in her mind, a man “sink and disappear.” Clarissa’s meditative reflection upstairs serves as the ultimate restorative moment in Mrs. Dalloway — for although she had “lost herself in the process of living,” she realizes “no pleasure could equal” finding herself again. This restoration of selfhood is made complete when Clarissa is startled by the fact that “in the room opposite the old lady stared straight at her!” An intense moment of sudden unity is reached as the old woman’s gaze completes the restorative connection between the two. As the woman puts out her light, “the whole house... dark now with this [the party or life itself] going on,” Clarissa prepares to return back to the party — the refrain of “fear no more the heat of the sun” echoing in her mind to illustrate that she has finally made peace with her all-consuming fear of death. Due to this unification of her once fractured selfhood, Clarissa can finally accept Peter and Sally as they exist in the present, rather than continually being consumed by thoughts of them in the past. She even reflects on her gratefulness for her husband, someone she has thought of only in regret for the majority of the novel, for remaining steadfast in his presence whenever terror seized her soul. As she moves to return to the commotion below, feeling much

197 Woolf, Mrs. Dalloway, 186.
198 Woolf, Mrs. Dalloway, 186.
more empowered than before, the novel’s perspective suddenly shifts to Peter Walsh, who proclaims “It is Clarissa” upon seeing her standing confidently at the top of the stairs, her fully unified self visible for the first time — “for there she was.”

**Epilogue**

It is not until the final pages of *Mrs. Dalloway* that Clarissa throws her much anticipated party, effectively uniting her conception of selfhood in the present with fragmented memories of her past. The sense of beatitude Clarissa attains from hosting this event clearly emulates the pleasure Woolf received from using her novels to make sense of the traumatic “shocks and blows” which interrupt the “cotton-wool” monotony of her everyday life, writing that “it is the rapture I get when in writing I seem to be discovering what belongs to what; making a scene come right; making a character come together… we are parts of the work of art.” Furthermore, she discusses how this specific manner of writing helped her uncover intricate patterns of human connection hidden away beneath the veil of trauma clouding her everyday existence. As evidenced by such quotations, Woolf carefully worked to create continuity between the complex art of party throwing and the craft of her writing, as well as between the titular character of Clarissa Dalloway and her own personal life, throughout *Mrs. Dalloway*. By illuminating such connections, and foregrounding clinical research on the restorative nature of writing for trauma survivors, this thesis has highlighted the manner in which Woolf’s novels served as a form of scriptotherapy — through which she could textually re-enact her own traumatic memories of sexual abuse from a safe distance and ultimately allow herself to work towards healing her own battered psyche.

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In order to illuminate the risks of overgeneralizing Woolf’s traumatic childhood, as well as aid readers in their understanding of how the organization of language in *Mrs. Dalloway* served a therapeutic purpose, this thesis further upholds modern clinical research on the potential for scriptotherapy to help individuals successfully re-integrate trauma memories into their everyday consciousness and incite healing. This clarifying modern research, marked by its restorative framework, has led me to return to the subversive theory of formative French feminist philosophers, and in doing so I’ve shown how it is critical to read the textual gaps and silences within Woolf’s work as an example of l’écriture féminine, or the manner in which marginalized writers can gain agency in a society dominated by male hegemony and the silencing of female voices. The specific research conducted by these trauma specialists has clarified how as marginalized members of society, women, such as Woolf, can unlock a heightened understanding of the world by taking advantage of the very traits that elect them as outsiders. In the same *New Yorker* article within which he discusses Woolf’s modernist writing prowess, Hisham Matar furthers this assertion of authorial agency, writing, “What takes our breath away in [her] literature is not the new but the encounter with what has been silently known.”  

Since the literature of trauma has been limited to traditionally masculine experiences, such as war, for so long, Woolf’s ability — to create several critically-acclaimed novels that both discuss and represent sexual trauma through their avant-garde styles and focus on female characters — is indicative of a highly-skilled writer capable of subverting the patriarchal literary paradigm. Thus, propelled by linkage between modern developments in trauma studies and the l’écriture féminine of 20th century French philosophers, this thesis seeks to fully realize the societal significance, accomplishment, and courage of Woolf’s groundbreaking work.

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Despite her literary genius and conscious use of restorative practices such as scriptotherapy, it is important to recognize that Woolf battled with intense depressive episodes and hallucinatory voices all of her life — afflictions which only grew more intense as society around her prepared for the uncertain chaos of World War II. Due to her and Leonard’s intense fear that the German army would eventually invade the mainland, the couple formed a suicide pact, keeping enough gasoline stored in their garage that they would be able to asphyxiate themselves in the case that Nazis sought to eradicate British society as they knew it. As scholar Claire Kahane writes in “Snakes, Toads, and Duckweed,” Woolf was “anticipating a national violation on the real historical horizon: a future rape writ large” during this time, a worry that would certainly been exacerbated by her past experience with sexual abuse.\textsuperscript{202} This formidable invasion never came, yet, merely two months after her 59th birthday, Woolf filled her pockets with stones and walked into the River Ouse, leaving behind multiple versions of a suicide note on which she had painstakingly worked.\textsuperscript{203} In her letter to Leonard, the one quoted most frequently by biographers, Woolf praises Leonard for his unyielding devotion and love, writing “I begin to hear voices and can’t concentrate. So I am doing what seems the best thing to do.”\textsuperscript{204} However, Henke notes that a shorter version of this letter also exists, in which Woolf’s distress seems much more palpable and death more imminent — there she writes, “But I know that I shall never get over this: and I am wasting your life. It is this madness… You see I can’t write this even, which shows I am right.”\textsuperscript{205} Eberley and Henke posit that, due to her stringent dedication to her work and “art of word-shaping,” it makes perfect sense Woolf would draft multiple versions of her suicide notes, each shaped by their intended recipient. The scholars

\textsuperscript{202} Eberly, 273. \\
\textsuperscript{203} Lee, 274. \\
\textsuperscript{204} Eberly, 272. \\
\textsuperscript{205} Eberly, 272.
further assert that it “would seem all the more crucial, then, for twenty-first century readers to define Woolf’s heritage in terms neither of “madness” nor of suicide, but through acts of writing, which sustained her and bequeathed so many literary gifts to her readers”\textsuperscript{206} For, although Woolf dealt with severe depressive episodes, as well as other symptomatology connected to her childhood sexual abuse, she “functioned successfully, into her 60th year, as a creative and productive writer who incorporated her experiences as a trauma survivor into an extraordinary modernist oeuvre.”\textsuperscript{207}

This revelation, that Woolf implemented her traumatic experiences into her own writings to create a brilliant collection of work, is critical to my own argument, as throughout this thesis, I have illuminated the importance of reading her experiences of “madness” through a trauma informed lens while remaining cognisant of her own authorial agency and complex conception of selfhood. Woolf was sexually abused for the duration of her childhood and adolescence, a collection of traumatic incidents that, as proven by modern clinical research, undoubtedly affected her mental and physical health, and have been improperly represented by her earliest critics and biographers. I applaud Poole and Trombley for highlighting the immense impact such abuse can have on the life of a survivor, yet at the same time, hope to have tempered their somewhat finalizing prescription that Woolf’s experience with trauma not only completely dominated her life, but also was responsible for her distinct narrative style. Poole and Trombley designate Woolf’s polyvocal narration and stream of consciousness shifts as clear markers of her abuse at the hands of the Duckworth brothers, yet offer no discussion of the restorative potential enacted by Woolf writing in this manner, and reduce her agency in doing so. As loss of one’s

\textsuperscript{206} Eberly, 15.  
\textsuperscript{207} Eberly, 15.
agency is a foundational experience of trauma, Poole and Trombley’s reductive analysis only perpetuates, even if unintentionally, its violence.

Thus, using the work of scholars such as Schönfelder, Henke, and Eberly, I have demonstrated how, through her pointed description of Clarissa’s fragmented identity and the way in which she finally unifies her psyche through her realization of her shared consciousness with Septimus, Woolf depicts her experience of abuse in a manner that demonstrates the restorative potential of trauma narratives. I believe this trauma-informed method of literary analysis will continue to grow, especially through the addition of other pertinent disciplines such as medicine and psychology, and foreground textual spaces where marginalized authors have strived to write themselves into existence. For future scholars studying Woolf, Schönfelder foregrounds several questions she believes are critical to the sensitive understanding of the “complexities and paradoxes of trauma.” She asks, “What kinds of responses are psychologically and politically empowering for trauma survivors?”, “to what extent should we strive for knowledge of trauma?”, and “to what extent should we insist on aspects of incomprehensibility and attend “to the traces of that which remains foreign to us?” This incomprehensibility, the impossibility of ever having a “complete view,” is inevitable, as scholars of today will never be able to fully comprehend Woolf’s medical diagnosis, the extent of her sexual abuse, or the manner in which her treatment spurred, maintained, or abated her symptoms. A thorough consideration of these questions is essential to fostering a sensitive expansion of this interdisciplinary framework of trauma analysis, for, as has been shown in the case of scholars such as Trombley and Poole, it is all too easy to further strip survivors of their agency. As noted earlier in this section, only her vast collection of writing remains, and hand-selecting passages to fit a certain narrative only furthers harmful narratives that uphold the name “Virginia Woolf” as if she were an ephemeral

208 Schönfelder, 77.
idea, subject to being shaped to fit any array of scholarly theories, rather than a complex, self-reliant human being.

Woolf’s life was replete with tragedy, and her death was certainly no different. In opposition to Poole’s romanticized remark that drowning oneself “had no terrors for Virginia… she regarded it as a happy release, a going home,” Henke reminds readers that the “the water of the River Ouse would have been frigidly cold in March; the sludge of the riverbank viscous and muddy; the stones, desperately gathered, solid anchors to oblivion.” However, it interesting to note that in the same manner Septimus begged Rezia to burn his writings before his fateful plunge out the window, Woolf asked Leonard “will you destroy all my papers [?]” in her own suicide note. Even in the midst of an all-consuming depressive episode, Woolf maintained a sense of authorial agency, knowing that her writing was her main vessel for composing her fractured psyche and presenting her unified self to the world, and did not want to risk having papers of such value be seized by fascist Nazi troops. Furthermore, just as Clarissa Dalloway looks into her neighbor’s window and sees her future, unified self in the figure of the old woman, a shared connection that allowed her to return to her party and re-integrate her past memories of Sally and Peter with the current versions standing in front of her, I hope that Woolf could gaze upon her novels and be comforted by the successful manner in which she wove her past traumas into coherent, groundbreaking narratives. For, before she let herself be silenced by the rapidly flowing waters of the river Ouse, Woolf wrote in her memoir that “the whole world is a work of art… But… certainly and empathetically there is no God; we are the words; we are the music; we are the thing itself.” Despite her mind being consumed by obsessive thoughts, Woolf still sought to capture the artistry and complexity of the human consciousness, engaging with her

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209 Eberly, 274.
210 Eberly, 274.
trauma in the most intimate, sometimes uncomfortable, of manners by formulating her personal experiences into a novel capable of being read by all. Woolf fully embraced the heat of the sun — the shocks and blows hidden behind seemingly mundane aspects of everyday life — and in turn has been recognized and celebrated as one of the most brilliant modernist writers of all time.
Works Consulted


Lyon, Janet. “On the Asylum Road with Woolf and Mew,” *Modernism/modernity* 18, no. 3


Schönfelder, Christa. Wounds and Words: Childhood and Family Trauma in Romantic and Postmodern Fiction. Bielefeld: Transcript Verlag, 2013.


Harcourt, 1980.
