The Sounds of Silence

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“... a story is a life that didn’t happen and a life is a story that didn’t get told.” – Elias Khoury Gate of the Sun

“... I had to ask myself, if I would be understood; and whether, if I talked candidly enough to make myself understood, would I be suspected of divided loyalties.” – A.B. Yehoshua, Mr. Mani

For the last number of years I have worked with literary narratives that address trauma, specifically the trauma of exile and displacement. In the course of my research, I realized that I was working with an interesting, and potentially a not altogether serendipitous, confluence — that is, a situation where the experience (displacement) and the psychoanalytic concept/process (displacement) mutually inform one another and share certain qualities and structures. Central to both of them is a sense of absence, of a gap, and these gaps find expression through various forms of silence — a silence that can convey and/or evoke anxiety, fear, or loss as well as communion, joy, and love. The silences that communicate trauma are silences that are often difficult to bear, and similar silences, I believe, often reside at the center of the psychoanalytic conversation motivating much of the work that we do with patients. These kinds of silence and the complications they convey confront us in the two novels I want to discuss this morning, Elias Khoury’s Gate of the Sun and A.B. Yehoshua’s Mr. Mani.

Before I speak about these two novels, I want address the concept or more accurately concepts of displacement. Displacement, as I’ve said, has two not
completely dissociated meanings. The experience of displacement identifies traumatic removal from one’s homeland brought about by war or conflict, a condition that has become all too common since the term made its initial appearance in this context immediately after World War II. A person, persons or community is forcefully removed from its place and relocated involuntarily. One loses one’s home, the center of one’s familial and communal existence.

The psychoanalytic process of displacement proves a bit more difficult to define. In *The Interpretation of Dreams* Freud tells us that displacement is one of “two governing factors to whose activity we may in essence ascribe the form assumed by dreams,” the other being “condensation.” While Freud is able to give a clear definition of how condensation works, along with seven examples of dream analysis where it occurs, his explanation of displacement is much less concrete. Freud explains that through the process of displacement, “[t]he dream is, as it were, differently centred from the dream thoughts — its content has different elements as its central point.” (SE IV, 305) Displacement draws our attention and our conscious energies elsewhere. (You can see here the similarity with the experience of displacement where one’s “center” is changed; one is forced to be “differently centred,” to locate one’s home elsewhere.)

We find a clearer description of displacement, or at least an illustration of displacement in a clinical setting, in Freud’s writing on Dora. Here, too, we find displacement “differently centred” quite literally since it makes its appearance in a footnote. “…[I]n a line of associations ambiguous words (or as we call them, ‘switch-words’) act like the points at a junction. If the points are switched across from the
position in which they appear to lie in the dream, then we find ourselves upon
another set of rails; and along this second track run the thoughts which we are in
search of and which still lie concealed in the dream.” (SE VII 65 n.1) So, here is a
concrete example of how displacement works. We are moved, via the “ambiguous
word” from one track to another. Consequently, the analyst experiences in language
a sense of instability, of not standing on solid ground, much as displaced persons
must navigate their existences between distinctly different homes.

The metaphor that Freud uses here operates in two registers: the aural — we
are listening for the “switch word” — and the spatial — we are shuttled between
separate lines, traversing space, attempting to follow the analysand despite the fact
that we (analyst, analysand, both together) may not know how we have arrived at
this unexpected destination. We find ourselves in a territory of ellipses, of
unspeakable truths. We may find ourselves transported into the landscape of
trauma that, by its nature, resists representation, interpretation, assimilation, or
integration into a patient’s narrative whole. These, in fact, are some of trauma’s
defining features. Trauma derails us, and can leave us (both patient and analyst) at a
loss for words. In some cases, silence may be the only way for us to encounter a
truth that is too awful to take in and cannot be perceived in its totality.

But what are our attitudes toward silence? Our encounters with silence in the
consulting room are not infrequent, and classic interpretations of the patient’s
silence as withholding, hostile, or as an expression of resistance betray the
frustration the analysand’s silence engenders in her analyst. The analyst’s silence,
often understood as a default response, proves to be every bit as complicated, often
because of the longstanding idea that this silence reflects the analyst’s “objectivity” and “neutrality.” Consequently, the response the a patient has to the analyst’s ostensibly “neutral” silence becomes grist for the analytic mill (“How does my silence make you feel?” the analyst asks), while the patient’s silence might be understood as an impediment to the analytic process. In both instances, the analyst’s traditional response to silence is to locate it elsewhere (in the patient, in professional requirement), and thus to displace it, making it that much more difficult to confront the unspeakable by foreclosing the silence through which trauma might speak.

If it is difficult to approach trauma that communicates through silence in the consulting room, it would seem virtually impossible to convey trauma through silence in literature since, even more than psychoanalysis, literature is a medium that relies on language. So, as you can imagine, literature’s relationship with silence is complicated both by the method of communication and by the structure of the encounter that takes place between the material and the reader. This morning I want to look at how two novels engage silence to communicate trauma, specifically the traumatic nature of exile, and how the unusual format of these novels might help us to think about the analytic conversation.

A.B. Yehoshua’s Mr. Mani and Elias Khoury’s Gates of the Sun both address the violence and exile of a particular family and, by extension, of an entire people. What makes these two works so distinctive, however, is the unusual presentation of the narratives. Both Gates of the Sun and Mr. Mani are one-sided dialogues. If that sounds a bit odd, let me explain. Gates of the Sun records the ongoing “conversation”
between a caretaker/doctor with/to a comatose patient. Yehoshua’s *Mr. Mani* presents five “conversations,” but in each dialogue, one of the participant’s contributions to the conversation is missing. Both novels are, quite literally, built around silence. Significantly, in neither novel do the speakers address the reader. Instead, the reader “hears” the speaker and also “hears” the silence of the other party. But this silence is not an absence. Nor is it benign or disengaged. In fact, it is the fact that the silence instigates engagement that merits our attention.

While both novels share this unusual one-sided dialogue, other structural elements of the novels are quite different. Yehoshua’s *Mr. Mani* is made up of five dialogues, each a conversation between two different characters, moving backward in time from 1982 to 1848. It might seem, at the novel’s outset, that you, the reader, are being encouraged to “fill in” the missing part of the conversation, but that idea collapses at the point that your assumptions miss the conversational mark. Instead, the reader listens while each speaker confronts his or her inability to convey a life changing, traumatic experience to a missing conversational partner.

By structuring his novel in this way it becomes evident that the issue for Yehoshua’s characters is not that they lack the words to convey their experiences. Instead, they complain because they are repeatedly interrupted. Their discourse is not met with the silence it deserves. While the actual content of the interruptions is missing, we feel their consequences in the speakers’ responses. “Just a minute. Listen…” “Will you wait one minute!” the daughter of the first dialogue insists in response to her mother’s interruptions. In the second dialogue the German soldier serving in Crete entreats his grandmother, “I know, Grandmother… hold on a
minute... for God’s sake... can’t you listen just this once...” In the fourth dialogue, a young Polish doctor, attempting to explain his experience in Jerusalem asks, “Are you not listening to me?” before finally resigning himself to his father’s interruptions. In each case, the silence of the conversational other introduces and ultimately represents the misattunement, alienation and frustration the speaker feels as he or she struggles to be fully heard. As a result, the person who truly hears the trauma conveyed in the narrative is the reader who acknowledges the necessity of a radical silence, one that is imposed by the impossibility of any adequate response.

In Elias Khoury’s *Gate of the Sun* the speaker addresses a comatose patient, a silent other, but in this novel the unresponsive other makes it difficult, at least initially, for the speaker to differentiate his personal trauma from that of his comatose companion or from the trauma of the Palestinian people as a whole. The comingling of these three identities is evident from the beginning of the conversation as “Dr. Khalil,” the narrator/speaker searches for a “beginning,” a point of entry into his story. His search continues throughout the novel, and emblematic of this search Dr. Khalil invokes the classic Arabic formula, “Once upon a time, there was — or there wasn’t.” Why, he asks, must there be such contingency? “That way the story is put on the same footing as life, because a story is a life that didn’t happen, and a life is a story that didn’t get told.” This brief but insightful comment speaks to the complicated relationship between the concepts of the truth and the actual, and suggests the possibility that the “story” is always at a remove from, but is no less compelling than, the lived experience. For Khalil, in the space between the
life and the story, in the place that is occupied by what “didn’t happen” and what “didn’t get told,” silence takes up its habitation.

And so Dr. Khalil returns over and over again to a series of beginnings, all of which are false starts, each of which disappears into silence. Each beginning opens on to a new narrative, but that story belongs to someone else. Like Yehoshua’s characters, Dr. Khalil “hears” the comatose Yunes’ unspoken objections to his story. Yunes “objects” to the stories Khalil tells, “refuses” to correct him when he’s wrong, and is always “insisting” that Khalil go back to the beginning.

While the pain and trauma of the Palestinian people is always present in Khalil’s “stories,” it is never the focus of them, never the “stuff” of his conversation. When it does become the focus, the characters find themselves ultimately silenced. This process happens twice at the central point in the narrative, when Khalil recounts the arrival of French actors who wish to mount a play about the Shatila massacre, and have come to get the “real” story.

The impossibility of hearing the “real” story comes with the “testimony” of a young woman named Dunya. Dunya is asked to tell her story repeatedly, and eventually she speaks at a televised Women’s Conference as a “Palestinian testimony.” Khalil reports of her testimony of rape:

She looked straight ahead and started speaking. This woman was telling a completely different story. ... She spoke and spoke in a flat, white voice without any trace of emotion, as though she were telling some other woman’s story. As though it had nothing to do with her. ...
Dunya became a story telling her own story. ... That was the first and last time she spoke about the gang rape. (pp. 256-7)

Dunya's decision to tell her story results a radical dissociation. She tells "a completely different story" "some other woman's story." Her loss of herself in the remembering of the violence perpetrated against her leaves her listeners incredulous, and results in her silence. Only when Khalil repeats the story, when he recounts how both her loss of self — she is "some other woman" — and her loss of words — this "was the first and last time she spoke" — are a direct consequence of addressing the trauma do we realize that her silence is her most authentic communication.

The description of Dunya’s “testimony” offers some valuable insight regarding the way silence and displacement work together. Dunya’s dissociated state, what I often think of as a kind of radical displacement in affective terms, leaves her empty, outside of herself. The fact that she tells “a different story” as if she is “some other woman” resonates with Khalil’s adage that “a story is a life that didn’t happen.” In this circumstance Dunya becomes “a story telling her own story,” that much further removed, that much further displaced or exiled from her own experience. Consequently, Dunya goes silent, never telling the story again. Does this imply, as the second half of Khalil’s adage suggests, that only then, only in silence, does this trauma become part of her life? If that’s the case, then isn’t the trauma to be precisely in the silence?

Here, then is the lesson we can take into our clinical life. We must learn to value silences and to understand the challenges they pose. Some silences respect the
uninterpretable nature of discourse. In Yehoshua’s novel the characters want to be heard uninterrupted, and our patients may long for our engaged and receptive silence that allows them to navigate the treacherous terrain of their disappointment, pain, and loss without additional intrusion. Rather than providing our silence as “analytic neutrality,” can we offer our silence instead of our interpretations?

And sometimes, as in Khoury’s novel, the patient’s silence is the alternative to a radical dissociation, to losing one’s “life” by telling one’s “story.” If we can accept that the space between the patient’s life and his story can be navigated only at the expense of internal integrity, then maybe we can hear the silence as neither hostile nor withholding but as an exiling of language for the continuity of self. Thought of in these ways, silence for both the analyst and the patient sounds very different indeed.

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