

Shared Trauma and Healing in Toni Morrison's *Home*

Edward Hernández

October 12, 2015

Abstract

This paper traces the narrative arc of Toni Morrison's *Home*, highlighting Frank and Cee's joint healing process and applying this process as a framework under which to practice narrative medicine with respect to moral injury.

1 Introduction

Toni Morrison, in the novel *Home*,¹ explores the themes of shared suffering and shared healing. In the text, Frank Money, a Korean War veteran, struggles with moral injury both from the war and from his childhood. At the same time, he must rescue and care for his sister Cee, who is physically ill, having been subjected to inhumane experimentation. This paper will examine this narrative arc and its implications for healing through the narrative medicine lens provided by Rita Charon.² Charon identifies five elements of a text to which a close reading ought to attend: frame, form, time, plot, and desire. Each is critical to a full appreciation of *Home*., but for the sake of depth, I will focus on two in this paper: form and desire.

2 Form

The form in which the narrative of *Home* is told is striking. Even assigning a genre to the text is tricky. As Leah Hager Cohen describes it, it is “on the basis of its publishers description

1. Toni Morrison, *Home* (New York: Knopf, 2012).

2. Rita Charon, *Narrative Medicine: Honoring the Stories of Illness* (New York: Oxford University Press, 2006), ch. 6.

a novel, on the basis of its length a novella, and on the basis of its stripped-down, symbol-laden plot something of an allegory.”³ Beyond the genre confusion, the text is odd in that it is quilted together of dissimilar pieces, told by two narrators of different types, with wildly different styles. Some chapters feature an omniscient narrator telling Frank and Cee’s stories in the third person with smooth, controlled prose. Others are told by Frank himself, in short, jagged, halting, first-personal sentences. While Frank is not an omniscient narrator, he speaks directly with the reader and the other narrator.

These stylistic choices serve to highlight Frank’s complex relation to his own story. It is his story in that it is about him. It is the story of his life, of his childhood, his experience in the war, his journey to rescue his sister. But no matter how personal it is, the story does not belong solely to him. It is also Cee’s story, of their shared childhood, of her rescue by Frank, of how his experiences impact her. It is the story of the killed man, of his death, of the children witnessing his burial, of his ritual re-burial. These stories cannot be fully told without being told together.

In the same way that the story cannot be individual, Frank and Cee do not suffer in isolation. Frank suffers in the same way as many veterans of combat. His time on the battlefield in Korea damages his mind and his spirit. He experiences what Rita Nakashima Brock calls “moral injury,” which she describes as “the collapse of your moral meaning system and your moral foundations because of things that you’ve experienced.”⁴ He killed a Korean girl during the war, knowing full well that the act was horrible. This produced cognitive dissonance between his positive, righteous self image, feeling “so proud grieving over [his] dead friends”,⁵ and the guilt and shame he felt for his actions. While Frank’s suffering stems from very personal experiences, many veterans commit or experience similar horrors, and subsequently have to deal with the same sort of dissonance and injury. Frank’s moral pathology is shared by many who fought with him.

Similarly, Cee’s encounter with the doctor is part of a larger pattern, of exploitative research on Black bodies and on Black women’s reproductive systems specifically. White science and medicine have long been attracted to the study of the Other. Throughout the 19th century, Khoikhoi women like Saartjie Baartman were studied and exhibited while they were alive, and

3. Leah Hager Cohen, “Point of Return: ‘Home,’ a Novel by Toni Morrison,” *New York Times* Sunday Book Review (2012).

4. Rita Nakashima Brock and Joanne Braxton, “What is Moral Injury and What Can We Do About It?” (Video Interview, 2015).

5. Morrison, *Home*, p. 133.

dissected after they were dead, to discover the secrets of their physiological (especially sexual) differences from the white body.⁶ As recently as 1972, the Public Health Service studied the effects of syphilis on black men’s reproductive systems without offering them any treatment or even notifying them that they had the disease. Perhaps the most striking similarity to Cee’s case is the work of J. Marion Sims, considered “the father of modern gynecology”, whose work consisted primarily of exploratory surgery on enslaved black women without anesthesia.⁷ Cee, like Frank, suffers together with others who have similar traumatic experiences.

The sharing of particular sorts of experiences is not the only way that the sufferers of trauma are tied together, however. This is perhaps more visible in the case of the killed man. Neither Frank nor Cee are killed with him, nor do they see him killed. They do not interact with him while he is alive, nor do they knowingly interact with his killers. Nonetheless, they are effected by his death. Seeing him buried is a traumatic experience which haunts both of them for years. Being in the same community as those who undergo trauma effects all members of the community in some way, however small. Additionally, recent research is beginning to show that this sort of trauma can be passed down, from one generation to the next,⁸ meaning that our stories are inseparable not only from everyone in our communities, but everyone who came before us. This is why the text must be written from different perspectives, including the omniscient.

3 Desire

Frank, as a narrator, desires to admit his experiences. He struggles throughout the novel to tell us the truth, and as the novel progresses, this produces in the reader a growing desire to know the truth. In chapter 15,⁹ he finally gives in, and tells us what he has been withholding, that he killed the Korean girl. It is hard to say that this realization gives the reader any “pleasure”, but it certainly releases much of the pent-up anticipation, anxiety, and curiosity about Frank’s wartime experiences. Reaching this realization with Frank as he reaches the

6. Sadiya Qureshi, “Displaying Sara Baartman, the ‘Hottentot Venus’,” *History of Science* 42 (2004): 233–257.

7. Sarah Spettel and Mark Donald White, “The Portrayal of J. Marion Sims’ Controversial Surgical Legacy,” *The Journal of Urology* 185 (2011): 2424–2427.

8. Brian G. Dias and Kerry J. Ressler, “Parental olfactory experience influences behavior and neural structure in subsequent generations,” *Nature Neuroscience* 17, no. 1 (January 2014): 89–99; Catherine Love et al., “Exploring Weathering: Effects of Lifelong Economic Environment and Maternal Age on Low Birth Weight, Small for Gestational Age, and Preterm Birth in African-American and White Women,” *American Journal of Epidemiology* 172, no. 2 (June 2010): 127–134.

9. Morrison, *Home*, p. 133.

resolve to tell it satisfies both the narrator's and reader's desires at once. As unpleasant as it is to read, it is a release, a satisfaction, and thus a "pleasure of the text" as Roland Barthes discusses them.¹⁰

Likewise, Frank, as a character, wants closure for the killed man. After seeing him buried, he is so traumatized that he either forgets the experience or claims to (much like the story of shooting the girl).¹¹ I would argue that seeing the man unceremoniously buried constituted a moral injury undermining Frank's moral beliefs about the value of life. Whether or not he remembered, and whether or not the injury was moral, he is haunted by the experience, and cannot make peace with it until years later, when he is able to return to the burial site and give the man a proper, marked grave. This resolution, propelled by the desire of Frank the character, is a *pleasure* to the reader as well. It is the happiest ending we can hope for in a story of trauma: the characters who survive make peace with it and begin to heal. This ritual heals not only Frank, whose desire propels it, but Cee as well, who, as we see in the final scene, was also haunted by the killed man. Hager Cohen points out that this realization, that Cee also sees the man, "underscores the book's most powerful proposition: that there is no such thing as individual pathology."¹²

Nakashima Brock briefly discusses this idea as well in an interview. She describes the ways in which her father's wartime experience was a shared trauma among her family, to whom he returned almost unrecognizable.¹³ Since we as people and communities are so intertwined, we inevitably share our trauma and our pathology. We share our desire for healing just as narrator, character, and reader share the desire in *Home*. We must harness this connectedness, our shared desire, to heal as communities, just as we are hurt as communities.

4 Conclusion

Moral injury is pernicious. It not only harms us deeply, but it harms those around us, and largely, it harms us without us knowing. Since most of us have little to no understanding of what it is to be morally injured, we have no understanding of how to heal from these injuries. Some work is being done to give a psychological account of moral injury, and suggest clinical

10. Charon, *Narrative Medicine: Honoring the Stories of Illness*, p. 124.

11. Morrison, *Home*, p. 5-6.

12. Cohen, "Point of Return: 'Home,' a Novel by Toni Morrison."

13. Brock and Braxton, "What is Moral Injury and What Can We Do About It?"

practices for its treatment,¹⁴ but the work is far from complete, and what sparse recommendations there are for treatment rely on the presence of “benevolent moral authority.”¹⁵ Treatment under this model may include “an imaginary conversation with another person who [the patient has] great respect for and who can weigh in as a relevant and generous moral authority.”¹⁶ This is typical of a psychology which embraces controls and fails to incorporate and embrace the complexities of spirits and communities. The researchers picture healing happening person by person, by imagining a community. But can we believe that Frank would heal, if he only *imagined* telling the truth? We need instead of *imagined* conversations, *actual* conversations, where all those effected can heal together. Toni Morrison’s *Home* points us toward the answer: we desire to tell the truth to each other, and to hear the truth from each other; and when we do, healing can begin.

14. Brett T. Litz et al., “Moral injury and moral repair in war veterans: A preliminary model and intervention strategy,” *Clinical Psychology Review* 29, no. 8 (December 2009): 695–706.

15. *Ibid.*, §7.2.

16. *Ibid.*, §7.2.5.

References

- Brock, Rita Nakashima, and Joanne Braxton. “What is Moral Injury and What Can We Do About It?” Video Interview, 2015.
- Charon, Rita. *Narrative Medicine: Honoring the Stories of Illness*. New York: Oxford University Press, 2006.
- Cohen, Leah Hager. “Point of Return: ‘Home,’ a Novel by Toni Morrison.” *New York Times* Sunday Book Review (2012).
- Dias, Brian G., and Kerry J. Ressler. “Parental olfactory experience influences behavior and neural structure in subsequent generations.” *Nature Neuroscience* 17, no. 1 (January 2014): 89–99.
- Litz, Brett T., Nathan Stein, Eileen Delaney, Leslie Lebowitz, William P. Nash, Caroline Silva, and Shira Maguen. “Moral injury and moral repair in war veterans: A preliminary model and intervention strategy.” *Clinical Psychology Review* 29, no. 8 (December 2009): 695–706.
- Love, Catherine, Richard J. Davis, Kristin M. Rankin, and James W. Collins Jr. “Exploring Weathering: Effects of Lifelong Economic Environment and Maternal Age on Low Birth Weight, Small for Gestational Age, and Preterm Birth in African-American and White Women.” *American Journal of Epidemiology* 172, no. 2 (June 2010): 127–134.
- Morrison, Toni. *Home*. New York: Knopf, 2012.
- Qureshi, Sadiah. “Displaying Sara Baartman, the ‘Hottentot Venus’.” *History of Science* 42 (2004): 233–257.
- Spettel, Sarah, and Mark Donald White. “The Portrayal of J. Marion Sims’ Controversial Surgical Legacy.” *The Journal of Urology* 185 (2011): 2424–2427.