

**CHAPTER TWO**  
**LITERATURE REVIEW**

**2.1 Previous Studies**

It is critical to have a foundation or reference in the form of hypotheses or discoveries based on the findings of prior investigations, which may be utilized as supporting data. A previous study related to the concerns discussed in this study is one of the supporting data that, according to writers, should be made into a distinct component. The conclusions and theory technique employed in this case are the focus of prior research cited as a reference. Therefore, the writer studied several research results in the form of thesis and journal articles via the internet. Thus, previous studies with the same object and topic are chosen as guidance for the writer.

| <b>Study</b>    | <b>Objective</b>   | <b>Method</b>            | <b>Findings</b>   |
|-----------------|--|--------------------------|---|
| Fadillah (2021) | This study makes attention to comparing culture in literary works using time and place. In this case, the writer compares the British and Japanese novels from two different times to find the differences and affinities of PTSD in both books. | Descriptive qualitative. | The writer can see cultural differences between the two literary works about self-destructive behavior after experiencing a traumatic event. As reflected by Anna in <i>The Woman in the Window</i> , Western people tend to choose drugs and alcohol to escape their mental problems. In contrast, Japanese people in <i>Colorless Tsukuru Tazaki and His Years of Pilgrimage</i> tend to be alone and barely eat. |
| Silalahi        | Investigate the causes   | Descriptive              | The result of the study   |

|            |   |                          |   |
|------------|---|--------------------------|---|
| (2021)     | of anxiety disorder through the main character in the novel and explain how the treatments done by the main character reduce her anxiety disorder in the book.        | qualitative.             | shows that the cause of anxiety for the main character is because they had a horrible life experience, and the cause of the main character says PTSD.   |
| Rai (2020) | This research aimed to find out the agoraphobia problem experienced by Anna Fox found in the novel and the influences of agoraphobia on herself and her surroundings. | Descriptive Qualitative. | Based on the result of the analysis, it is found that Anna Fox's agoraphobia problem is because of PTSD (PTSD). The disease influences herself and her surroundings by ruining her body because consuming a lot of drugs makes her lose her job, have a bad temperament, and depression, and make her insecure.   |
| Gea (2018) | This research analyzes Hannibal Lecter's PTSD in Thomas Harris' Hannibal Rising novel. It describes that the main character has a psychological problem.              | Descriptive Qualitative. | This research shows that the war situation is one of the causes of Post Traumatic Stress Disorder. Hannibal Lecter's life changed after he experienced war situations, such as witnessing his parent's death and witnessing the murder of sister Mischa in the war. Then he also shows the symptoms of Post Traumatic Stress Disorder after experiencing the war. Those are flashbacks, troubled sleep, irritability of anger, trouble remembering, and detachment from others. |

The writer used several previous studies as reference material and references in the same discussion. The writer used Fadillah (2021) as a reference to support research related to PTSD using the same theory. The writer uses a psychological approach to analyze literary works. The similarity of previous research with this research is the object and discussion. The difference between previous research and this research is that this research is more specific in examining the data by identifying the symptoms, causes, and impacts. The writer classified the types of each discussion and then placed them with the existing data findings. Meanwhile, previous research is more general. In another sense, this research can complement previous studies with the same discussion. The writer hopes this research can fill the gaps and shortcomings of previous research and identify the data that makes the difference. Previous research compared it with other studies to identify PTSD according to the culture in each country. This is also in contrast to this study which only focuses on analyzing PTSD experienced by the main character.

Several previous studies were also from the same novel but with different topics. By examining the main character's personality and background, the writer uses previous research as a reference by identifying diseases suffered by the main character, such as Anxiety Disorder in Silalahi's research (2021) and Agoraphobia studied in Rai's research (2020). The writer used Silalahi's (2021) Journal of the references who have analyzed the same novel. According to the analysis of the main character's anxiety condition, the source of the main character's anxiety in the book *The Woman In The Window* is PTSD caused by a horrific life experience that causes her to lose her family and makes her feel responsible. In this novel, the

main character has various mental disorders due to her background in life. The writer needs that information to support this research, such as Anna's anxiety disorder, so that this can support data findings related to the topics discussed based on the theory used.

Another journal used by the writer is Rai's journal (2020). This study discussed Agoraphobia In *The Woman In The Window*. The writer chose this research as a reference for researching the background life of the main character to know more about the main character's personality. In this study, the topic of discussion is more specific about the trauma she experienced, which caused the symptoms of agoraphobia reflected in Anna's character. The function of this study is to give some information for readers to know more deeply about agoraphobia, the symptoms, and the causes of agoraphobia. The last previous study is the journal by Gea (2018) discussed PTSD experienced by Hannibal that affects the personality and life in the *Hannibal Rising* novel. It describes that the main character has a psychological problem. Two questions appear to discuss, i.e., the causes and the symptoms of Post Traumatic Stress Disorder perceived by Hannibal Lecter, the main character. The writer chose this journal as the reference because this study uses the theory of Post Traumatic Stress Disorder by Glenn R. Schiraldi. Some concepts of the theory, i.e., symptoms and causes of Post Traumatic Stress Disorder. This concept helps this research to describe the causes and the symptoms of Post Traumatic Stress Disorder. Because this study discusses how the main character loses a loved one, it is related to the topic to be addressed,

and this can help the writer to analyze PTSD from the point of view of people who lost someone they love.

## **2.2 Psychological Approach**

Literary psychology regards literary works as a reflection of the psyche; the writer cached psychological symptoms, which can be processed into text and equipped with their mind. Projection of the writer's personal experiences and life events will occur. Literary psychology focuses on the psychological aspects of fictional characters found in works. According to Hilgard (1991), psychology might be defined as the study of human behavior. This occurs because conduct is a tangible entity that can be readily observed, whereas the mind is abstract. Following a person's actions is thought to lead to a knowledge of the soul's state. In short, we can learn about the features and conditions of a person's soul by observing their actions in daily life.

Psychology appears to be firmly attached to the human soul; the soul's reaction through conduct and its causes are investigated in depth in this study. The emergence of this research may also help address human issues. In comparison, literature is thought to be a representation of real life that is communicated through the means of words. There are several benefits to using literary psychology, including the fact that it is very suitable for examining in-depth aspects of character, that it can provide feedback to writers about character problems that they develop, and that it is beneficial in analyzing literary works and helping readers understand literary works. Psychology in literary works is

emphasized in characterization because it is closely related to psychology and human psychology. Furthermore, studying and explaining the character's behavior with a study of personality psychology.

### **2.3 Post-Traumatic Stress Disorder (PTSD)**

According to the American Psychiatric Association (APA), people with PTSD have powerful and distressing thoughts and feelings related to their experiences that persist long after the traumatic event has finished. Post-Traumatic Stress Disorder responds to traumatic experiences with anxiety and sorrow; they will continue to reminisce about the occurrence and avoid things that will remind them. Irritability, loss of concentration, loss of interest in interacting with the environment, feeling alienated from others, and having nightmares are all symptoms of PTSD. It is classified in the DSM-III as an extreme response to a significant stressor, including anxiety, avoidance of stimuli linked with trauma, and decreased emotional responses.

#### **2.3.1. Post-Traumatic Stress Disorder Causes**

Post-Traumatic Stress Disorder is caused by various risk factors and tendencies that work together to develop PTSD following a traumatic event. There are three causes of PTSD. According to Davison (2006), the causes consist of the following:

##### **1. Genetic Causes**

Anxiety problems are more likely to run in families. People who have first-degree relatives who suffer from anxiety disorders are more likely to get the

disease themselves. While it is not a definitive cause of PTSD, it does increase a person's susceptibility to acquiring the condition following a traumatic experience. Someone in the family with a mental illness, such as anxiety disorder or depression, is at a higher risk of developing PTSD than others in their family. For example, a mother with a history of PTSD can be passed on to her child in the gene so that it is more likely that her child will develop the same disease.

## 2. Brain Structure Causes

The brain is an integrative center that coordinates behavioral and neuroendocrine (hormonal and autonomic) responses to challenges. Some difficulties are stressful, and others are related to daily rhythms and the coordination of wake and sleep functions. PTSD affects the effectiveness of the brain as it can cause brain volume to shrink. Some brain parts that allow for shrinkage include Hippocampus, Thalamus, Frontal Amygdala, and Prefrontal Cortex. Stress temporarily increases hippocampal synaptic plasticity, which helps with information storage (Zoladz, Park, and Diamond (2011)). However, with prolonged stress, the hippocampus declines to a 'refractory' state, and because of this, the threshold for inducing hippocampal plasticity rises. While the hippocampus is refractory, the storage of new information (i.e., the formation of new memories) is restricted. This factor can be identified by checks carried out by medical experts or a history of CT scans. For example, someone who experiences a traumatic event will tend to feel stress and fear because the brain stores the traumatic memory.

### 3. Environmental Causes

This causal factor is due to violence or events threatening the victim's life. For example, criminal cases, domestic violence, sexual violence, accidents that kill someone, bullying, etc. In many accidents, the aftershocks of these events on the mind are generally not realized (Nevid et al., 2005). Various events experienced by a person can trigger a more profound impact. This cause is related to environmental factors around people with PTSD. There has been a shift in moral values, disparities in socio-economic conditions, an increasing proportion of the poor, a higher unemployment rate, and various other social and political problems, while meeting survival needs has become increasingly difficult (Direktorat Kesehatan Jiwa, 2017). This condition supports increased acts of violence, especially for groups considered weak and vulnerable, especially women and children. Victims of violence will feel helpless and hopeless and feel they have lost the ability to be able to help themselves, and experience tremendous psychological pain followed by a loss of feelings of self-worth as a whole human being which is manifested in a range of responses from feelings of anxiety and fear to severe depression. However, it must be understood that PTSD occurs not only because of that but because these mental disorders can also result from bullying. According to the United States Centers for Disease Control and Prevention (CDC), bullying is a bad childhood experience and can cause immediate and long-term psychological harm. Children who experience bullying have an increased vulnerability to anxiety and depression. Adults who experienced bullying as children experience



increased levels of agoraphobia (fear of crowds), generalized anxiety, and panic disorder.

#### 4. Psychological Causes

People with PTSD have abnormally high levels of stress hormones, which are released during traumatic events. The General Adaptation Syndrome (GAS) hypothesis focuses on releasing hormones (glucocorticoids) from the adrenal cortex that play a role in the stress response. Glucocorticoids are believed to be the primary mediators in GAS. Chronic release of glucocorticoids results in gastric ulcers and adrenal enlargement and undermines the immune system. Selye made significant contributions to the study of stress and is considered a pioneer in the relationship between GC physiology and stress (Thiel & Dretsch, 2011). These increased amounts of hormones could be the cause of some PTSD symptoms, such as hallucination and hyperarousal. People who suffer from certain mental illnesses, including anxiety and depression, are more likely to acquire PTSD. For example, someone who has an accident and loses something valuable because of that incident will be prone to PTSD because of the stress they suffer.

#### **2.3.2. Post-Traumatic Stress Disorder Symptoms**

PTSD symptoms are grouped into four main categories. According to Schiraldi (2009:7), PTSD symptoms are divided into four main parts: re-experiencing symptoms, avoidance symptoms, mood and cognition symptoms, and arousal and activity symptoms.

### 1. Re-experiencing Symptom

People often remember events or experience nightmares, disturbing images, and physiological reactivity to reminders of the trauma. Memories or trauma experienced can reappear unexpectedly in people with PTSD. Sufferers have strong emotional and physical reactions to cues that resemble or symbolize aspects of the trauma. Sometimes, memories or traumas can feel so real that they happen to the person as a flashback in their mind. For example, someone who has had an accident will remember it again if he passed by the scene when the accident occurred or when they saw another person in an accident. The memory of what happened to them will also be repeated.

### 2. Avoidance Symptom

These symptoms are about avoidance of stimuli associated with the event or numbness of the response in general. Some may try to avoid all reminders of events or situations that trigger traumatic memories, such as related places, items, and topics. They prevent the traumatic event's unpleasant memories, thoughts, or feelings. For example, a woman prefers to transfer to a new school because she has experienced bullying and harassment at her old school.

### 3. Mood and Cognitions Symptom

Negative mood changes include a chronic inability to recall crucial details of the traumatic incident, such as what happened, who was there, and the sequence of events. Sufferers frequently blame themselves for the cause of the incident, experience unpleasant emotions such as fear, terror, wrath, guilt, or humiliation, feel alienated or isolated, emotionally numb or disconnected, and have difficulties connecting with others. For example, someone will explode

with anger when someone touches their things because that item is the only memory given by the person they love.

#### 4. Arousal and Activity Symptom

Traumatized people may have trouble sleeping because they are constantly alert and restless. The body becomes so bad at receiving responses that the sufferer cannot tell the difference between actual danger and ordinary situations, as if the threat level filter has disappeared and even the slightest stimulus produces an explosive response. These symptoms are; having trouble in sleep or defending it keep waking up although they were sleepy. For example, A person will stay up all night because while they are sleeping, they will have nightmares about the traumatic event.

### **2.3.3. Post-Traumatic Stress Disorder Impacts**

Schiraldi (2009:5) explains that PTSD can affect a person's psychological capacities, self-concept, development, and relationships. If not treated, PTSD will worsen and impact the emergence of physical, emotional, mental, behavioral, and spiritual aspects.

#### 1. Physical Aspect

Changes in the physical aspect of people with post-traumatic stress disorder include being quickly tired, dizziness, shortness of breath, and panic. They will feel panic when they are in a threatening situation. When someone is uncomfortable and without the support of those around them, they will quickly feel lethargic. This triggers a person's body to feel helpless. In addition to decreasing stamina in the body, The panic and tightness that a person with

PTSD gradually feels make them lose a lot of energy, thus making them easily fatigued. Also, a person with this history has no more interest in their life, so when carrying out daily activities, they will feel helpless and quickly tired.

## 2. Emotional Aspect

In the emotional aspect, PTSD usually emotionally impacts a person through drastic mood changes. This is because they are keeping things to themselves in their minds, so when things get worse, they can not control themselves, and if it continues, it will negatively impact their mental health. In addition, sufferers will feel the impact on emotional aspects such as loss of passion for life, always being afraid of something, low self-esteem, and difficulty controlling anger. This can also be caused by the emotional desires they experience because there is no place to express what they feel.

## 3. Mental Aspect

While on the mental aspect, sufferers will usually feel the effects such as confusion, inability to solve problems, difficulty concentrating, unable to remember well. These increased amounts of hormones could be the cause of some PTSD symptoms, such as hallucination and hyperarousal. A person experiencing this condition often struggles with symptoms of intense anxiety. This gradual anxiety causes people with PTSD to experience hallucinations that bring them back to past events. This can happen because a person with PTSD usually cannot accept the reality of the traumatic events they experienced in the past. Hallucinations are also one of the effects of the brain's powerlessness to accept the fact.

#### 4. Behavior Aspect

In addition to the above aspects, PTSD also impacts changes in behavioral aspects of sufferers, including losing appetite, overeating, consuming a lot of alcohol or smoking, often crying, wanting to commit suicide, and locking up. A person experiencing this condition often struggles with symptoms of intense anxiety. To cope with these strong anxiety symptoms, people with PTSD may also use unhealthy means, such as consuming alcohol or even drugs. This can worsen the patient's condition. So they often experience sleep disturbances. This is because anxiety disorders that continue to occur make them experience nightmares about traumatic events that have happened to them in the past. In addition, people with PTSD will also feel aggressive, have territorial conflicts, feel rejected, or become dominant. Such incidents may present a real or imagined risk of bodily injury or death.

#### 5. Spiritual Aspect

PTSD also affects the spiritual aspect. What the spiritual means here is that they are often desperate for their lives and often lose hope for their future. People with PTSD often remember the events that traumatized them. The patient feels as if the incident is repeating itself. As described above, for emotional changes, sufferers will avoid places, activities, and people associated with the traumatic event. These factors will impact them, so they will continue to experience negative thoughts and feelings. People with PTSD tend to blame themselves or others. They are often discouraged because they lose interest in daily life. They tend to give up quickly, and not many even blame fate for what happened to their lives.