



An Analysis of Female Characters in *A Thousand Splendid Suns* from the Perspective of Trauma Theory

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Abstract: This paper examines the psychological trauma of Mariam and Laila, the two female protagonists in Khaled Hosseini's *A Thousand Splendid Suns* (2007), through a systematic application of Judith Herman's (1992) triphasic recovery model, combined with narratological analysis of the novel's formal techniques. The study proceeds in three analytical steps. First, it identifies three intersecting sources of trauma—patriarchal marital coercion and son preference, Taliban-enforced dress codes and polygynous practices, and wartime family disintegration and maternal-child separation—and maps each source onto specific PTSD symptom clusters (emotional numbing, hyperarousal, and intrusive re-experiencing) as manifested through the novel's narrative devices, including focalized interiority, repetitive imagery, and temporal fragmentation. Second, it traces the protagonists' healing trajectory across Herman's three stages: stabilization through sisterly alliance, mourning via confessional storytelling, and reconnection through reconstructed self-identity. Third, it critically assesses the model's cross-cultural applicability, arguing that in contexts where institutional therapy is absent, relational bonds—specifically sisterhood—function as the primary mechanism of recovery. The analysis reveals that Mariam and Laila exhibit distinct trauma profiles: Mariam's trauma manifests predominantly as emotional constriction and resigned passivity, while Laila's is characterized by hyperarousal and persistent anxiety, differences that shape their respective healing trajectories. The study concludes that trauma recovery in the novel does not entail erasure of painful memories but their integration into a revised life narrative, and that sisterhood—rather than romantic love, state intervention, or religious consolation—constitutes the most effective vehicle for restoring agency among women in patriarchal, war-torn societies. This finding suggests a culturally specific modification to Herman's framework: where physical safety remains perpetually unattainable, the stabilization stage may operate concurrently with mourning rather than preceding it.

Keywords: *A Thousand Splendid Suns*; Trauma Theory; Patriarchy; War Trauma; Sisterhood; Narrative Analysis

1. Introduction

Khaled Hosseini's *A Thousand Splendid Suns* [8] has garnered critical acclaim not merely as a chronicle of Afghan women's suffering under decades of patriarchal oppression, religious extremism, and civil warfare, but as a meticulously crafted psychological portrait of how systemic violence infiltrates individual consciousness. The novel's dual protagonists, Mariam and Laila, endure experiences that clinically approximate post-traumatic stress disorder (PTSD)—emotional numbing, hyperarousal, intrusive flashbacks, and persistent social withdrawal—yet they also enact a gradual, painful process of recovery that resists simple categorization as either redemption or tragedy. This psychological depth renders the novel particularly amenable to trauma theory, a framework that, despite its Western clinical origins, offers precise terminology and processual models for analyzing how fictional characters internalize, endure, and gradually transcend overwhelming adversity.

However, the application of trauma theory to non-Western literary texts raises important methodological questions. Herman's *Trauma and Recovery* [7]—the foundational text for this study—was developed within the context of Western domestic violence and war-veteran PTSD, with its three-stage recovery model (stabilization, mourning, reconnection) predicated on assumptions about therapeutic intervention, narrative disclosure, and physical safety that may not obtain in resource-poor, conflict-ridden settings such as Taliban-era Afghanistan. This study engages this tension directly, using the novel as a test case for both affirming and critically revising Herman's framework.

The novel centers on two female protagonists whose life trajectories, divergent in origin, converge in shared misery. Mariam, the illegitimate daughter of a wealthy businessman and his housemaid, grows up in social ostracism and maternal neglect, forced at fifteen into marriage with the abusive shoemaker Rasheed [8, p. 56]. Laila, raised in a comparatively enlightened household, loses her parents to a rocket attack during the civil war and, pregnant and orphaned, accepts Rasheed's proposal as a survival strategy [8, p. 204]. Initially rivals, the two women gradually forge a profound sisterly bond that becomes their primary source of psychological resilience. When Rasheed attempts to strangle Laila, Mariam kills him to protect her sister, willingly accepts the death penalty, and achieves spiritual redemption in her final moments [8, p. 368]. Laila survives, reunites with Tariq, and eventually returns to Afghanistan to work at an orphanage, transforming her trauma into a vocation of care [8, p. 412].

This study addresses five specific research questions: (1) How does the novel represent the psychological consequences of patriarchal oppression, Taliban-imposed religious extremism, and wartime violence on its female protagonists? (2) In



what ways do Mariam and Laila differ in their manifestations of trauma—particularly regarding symptom clusters and narrative expression? (3) To what extent do the protagonists' narrative trajectories correspond to Herman's three-stage recovery model, and where do they deviate? (4) What role does female solidarity play in restoring agency, enabling narrative catharsis, and reconstructing self-identity? (5) Does the novel ultimately represent trauma recovery as achievable, partial, interrupted, or sacrificial—and what are the implications of this representation for trauma theory's cross-cultural applicability?

The paper is organized as follows. Section 2 reviews existing scholarship, identifying the research gap that this study addresses. Section 3 outlines Herman's trauma theory and its cultural limitations. Section 4 analyzes the three sources of trauma with close attention to narrative techniques. Section 5 traces the protagonists' healing journey through stabilization, mourning, and reconnection. Section 6 concludes by summarizing contributions, acknowledging limitations, and suggesting directions for future research.

2. Literature Review

Existing scholarship on *A Thousand Splendid Suns* has approached the novel through diverse interpretive frameworks, yet systematic trauma-theoretical analysis remains surprisingly sparse. This review first surveys trauma-oriented readings of the novel, then summarizes other major interpretive approaches and their limitations, and finally identifies the specific research gap that the present study addresses.

2.1 Trauma-Oriented Readings of *A Thousand Splendid Suns*

Several Chinese scholars have employed trauma theory as an interpretive lens, though with varying degrees of theoretical rigor. Qu Rongying and He Ping[14] offer one of the earliest systematic trauma readings, arguing that the protagonists' trauma originates from the dual forces of patriarchy and war, and that recovery is achieved through sisterly solidarity. However, their analysis relies on a generalized concept of "trauma theory" without specifying a particular model or stage framework, resulting in imprecise phase boundaries between suffering and healing. Duan Hong[6] proposes a "silence-explosion-redemption" tripartite structure for Mariam and Laila's traumatic arcs, identifying key textual moments where suppressed pain erupts into action. While this reading captures the novel's dramatic rhythm, it remains primarily content-based, with limited attention to narrative form or to the differential manifestations of trauma between the two heroines.

International scholarship has produced fewer trauma-focused analyses. Samina Akhtar and colleagues [2] provide a focused examination of Mariam's illegitimate birth as a foundational identity trauma, arguing that her execution constitutes a "legitimate end to an illegitimate beginning." This study offers valuable insight into Mariam's psychological formation but excludes Laila entirely, foreclosing comparative analysis. Liu Yi[11] examines the novel's female coming-of-age narrative through a hybrid lens of narrative theory and trauma concepts, tracing a movement from "individual awakening to community building." Though the most recent contribution, this study prioritizes the social dimension of recovery over its psychological stages, leaving the internal healing process undertheorized.

Taken together, existing trauma-oriented studies share four limitations: (a) they apply trauma concepts eclectically rather than employing a complete, stage-based recovery model; (b) they lack systematic comparison of the two protagonists' distinct trauma profiles and healing pathways; (c) they focus on thematic content while neglecting the narrative techniques through which trauma is formally encoded; and (d) they apply Western trauma frameworks uncritically, without interrogating their cultural specificity in the Afghan context.

2.2 Other Major Interpretive Approaches and Their Limitations

Beyond trauma theory, scholars have approached the novel through several established critical frameworks. Ecofeminist readings, represented by Jiang Yingying[10], reveal the structural parallel between patriarchal domination of women and the exploitation of nature, highlighting the ideological unity of these oppressive systems. While this lens illuminates the novel's ecological metaphors and systemic critique, it does not account for the differential psychological responses of individual subjects to the same oppressive structures. New historicist interpretations, such as Liu Zhe's [12] analysis, contextualize the novel within Afghanistan's cultural, social, and political history, demonstrating how mainstream gender values are discursively constructed. However, this macroscopic approach risks reducing the protagonists to passive products of historical forces, obscuring their subjective agency and psychological complexity.

Feminist readings of female self-consciousness, exemplified by Hu Jie [9], trace the protagonists' growth toward autonomy and self-definition. This framework productively identifies the novel's affirmative arc but tends to treat trauma as a temporary obstacle to be overcome rather than a lasting psychological condition requiring sustained management. These readings are politically urgent but analytically limited: they excel at documenting oppression but offer minimal vocabulary for conceptualizing recovery, resilience, or the internal psychological processes that enable women to survive and resist.

2.3 Research Gap and the Present Study's Positioning

The preceding review reveals four critical gaps that the present study addresses. First, theoretically, no existing study has applied Herman's complete three-stage recovery model (stabilization, mourning, reconnection) to systematically trace both protagonists' full healing trajectories, from trauma onset through rehabilitation. Second, comparatively, scholarship has not adequately differentiated between Mariam's and Laila's distinct trauma profiles—Mariam's emotional constriction versus Laila's hyperarousal—nor examined how these differences shape their respective recovery pathways. Third, narratologically, previous readings have largely ignored how the novel's formal techniques—including free indirect discourse, repetitive symbolic imagery (the burqa, the stone wall, the sun), and fragmented temporal structure—encode traumatic experience and chart psychological change. Fourth, cross-culturally, trauma applications have treated Herman's framework as universally applicable without interrogating its assumptions about therapeutic intervention, narrative disclosure, and physical safety in non-Western contexts.

The present study differentiates itself through four specific contributions. Theoretically, it applies Herman's triphasic model systematically while critically revising it for the Afghan context, proposing that in settings where institutional therapy is absent and physical safety remains unattainable, sisterhood operates as the functional equivalent of the therapeutic alliance, and stabilization may proceed concurrently with mourning rather than strictly preceding it. Methodologically, it combines trauma-theoretical close reading with narratological analysis, examining both what trauma is represented and how it is represented through focalization, temporality, and imagery. Comparatively, it contrasts Mariam and Laila's trauma types, symptom expressions, and healing mechanisms to reveal that recovery is not monolithic but shaped by individual history and personality.

Thematically, it argues that sisterly solidarity—not romantic love, state intervention, or religious faith—constitutes the primary vehicle for restoring agency, enabling narrative catharsis, and reconstructing self-identity in the novel's world. This combined theoretical, methodological, and comparative approach advances scholarship beyond existing readings by providing the first comprehensive, stage-based, narratologically attentive, and culturally reflexive trauma analysis of *A Thousand Splendid Suns*.

3. Theoretical Framework: Herman's Trauma Theory and Its Cultural Limitations

3.1 Defining Psychological Trauma and PTSD

Judith Herman[7] defines psychological trauma as the psychological response to overwhelming, inescapable external force that induces extreme terror, profound powerlessness, and the constant perception of imminent destruction. Traumatic events may include natural disasters, warfare, sexual violence, and domestic abuse, but Herman emphasizes that society itself often compounds survivors' suffering through denial, stigmatization, and silence. Herman further observes that research and clinical treatment of trauma force society to confront universal human vulnerability and inherent human cruelty—two realities the public tends to avoid and forget. This creates a paradoxical mental state for trauma victims: they desperately wish to erase painful memories yet remain haunted by them permanently, while external onlookers easily disregard their suffering[7, p. 34].

The American Psychological Association identifies post-traumatic stress disorder (PTSD) through three core symptom clusters: emotional constriction—apathy, emotional numbness, and social withdrawal; hyperarousal—irrational, persistent fear and hypervigilance; and intrusive re-experiencing—recurrent nightmares, flashbacks, and involuntary memories. Additional manifestations include isolation, abandonment fears, and inability to trust others[3]. Mariam and Laila display these symptoms throughout the novel, though in markedly different configurations.

3.2 Herman's Three-Stage Recovery Model

Herman argues that psychological trauma fundamentally destroys two things: personal autonomy and supportive interpersonal bonds. Recovery therefore requires reconstructing both individual agency and social connection [7, p. 133]. Her three-stage model proceeds as follows:

Stage One: Stabilization focuses on rebuilding the survivor's sense of safety—physical, emotional, and environmental. Survivors must regain control over their bodies and immediate surroundings before deeper psychological work can begin. This stage emphasizes the restoration of bodily integrity, the establishment of a secure living environment, and the development of a reliable support network.

Stage Two: Mourning guides survivors to confront, narrate, and integrate fragmented traumatic memories. Through testimony to a trusted witness, survivors transform unspeakable experience into communicable narrative, reducing the power of intrusive symptoms. This stage involves reconstructing the traumatic story in a coherent sequence and grieving the losses inflicted by trauma.

Stage Three: Reconnection supports survivors in reconstructing a positive self-identity and expanding social networks beyond the trauma. This stage involves reintegrating into community life, finding meaning in post-trauma existence, and developing a commitment to advocacy or social engagement that transforms personal suffering into social purpose [7, p. 197].

3.3 Cultural Limitations and This Study's Adaptation

While Herman's model provides a robust heuristic, its application to *A Thousand Splendid Suns* requires critical adaptation in three respects. First, Herman assumes that stabilization—specifically physical safety—must precede mourning. In the Afghan setting, where war and domestic violence continue unabated, Mariam and Laila never achieve durable physical security. Their stabilization is therefore relational rather than environmental: they find safety in each other rather than in their surroundings.

Second, Herman privileges verbal narration—the "testimony" to a therapist—as the primary mode of mourning. In the novel, confession occurs not in clinical settings but through intimate, informal sharing between the two women, suggesting that the therapeutic function of narration can be performed by non-professional relational bonds.

Third, Herman's model implicitly assumes a linear progression through stages. Mariam and Laila's recovery proceeds less sequentially: mourning begins before stabilization is complete, and reconnection (through sisterly alliance) enables stabilization rather than following it. This study therefore treats Herman's framework as a flexible analytical tool rather than a prescriptive template, attending to both correspondences and deviations between the model and the novel's representation.

4. Sources of Psychological Trauma for Female Protagonists

Afghan women's layered psychological trauma in the novel stems from three mutually reinforcing forces: rigid patriarchal traditional norms, discriminatory policies twisted from religious texts by the Taliban, and unceasing civil warfare. This chapter separately analyzes how each force inflicts long-term mental wounds on Mariam and Laila, with particular attention to the narrative techniques through which their psychological damage is rendered.

4.1 Trauma Derived from Patriarchal Traditional Norms

Afghanistan remains a deeply patriarchal society where women hold minimal social status. From a sociological perspective, patriarchy centralizes all household power in male hands, enabling systematic male oppression of females [13]. Two core patriarchal customs generate irreversible trauma for the novel's heroines: the total deprivation of marital autonomy and the cultural obsession with sons over daughters. As Herman's trauma theory states, flawed social systems strip marginalized individuals of control over their own lives, forcing them into prolonged social isolation.

Traditional Afghan patriarchal culture denies women the right to choose their spouses independently, and Mariam acts as the most typical representative of this victim group. Born as an illegitimate child, Mariam is treated as a lifelong disgrace by the surrounding community. Within patriarchal households, women are classified as male property with no right to self-determination, and all major household decisions are monopolized by men. At fifteen, still grieving over her mother's suicide, Mariam is forced by her father Jalil to marry the much older shoemaker Rasheed [8, p. 56]. This forced marriage, depicted through Mariam's fragmented recollection and sense of helpless abandonment, marks the onset of her chronic trauma.

After seven consecutive miscarriages, Mariam loses fertility and fails to bear Rasheed a son, which drastically degrades her domestic status. Rasheed reduces her to a domestic servant and subjects her to frequent domestic violence. The root of Mariam's lifelong misfortune lies in the total loss of marital autonomy, a core product of patriarchal ideology. Domestic violence, a direct byproduct of this system, constitutes a major source of female psychological trauma. Lacking independent employment and social status, women like Mariam can only silently endure their husbands' abuse out of fear, carrying unerasable mental scars for their entire lives. The novel renders this abuse through stark, unadorned prose—Rasheed's punishments are described with clinical precision, emphasizing Mariam's bodily vulnerability and psychological entrapment.

Son preference constitutes another entrenched patriarchal stereotype that devalues girls and suppresses women's self-worth. Though Laila grows up with educational opportunities unavailable to most Afghan girls, she still suffers severe childhood trauma from her mother's blatant favoritism toward her two elder brothers. After her brothers enlist in military service, Laila's mother locks herself in their bedroom all day, staring at their photographs and completely neglecting Laila. The mother never picks Laila up from school, leaving the young girl vulnerable to bullying from local boys [8, p. 112].

When news arrives of her sons' deaths, Laila's mother sinks into overwhelming grief, living solely for the prospect of wartime victory that would vindicate her sons—never for Laila herself. This deliberate maternal neglect makes Laila feel like an outsider within her own family and generates lasting psychological hurt. Trauma theory notes that survivors of severe trauma may struggle to provide proper care for their children, yet most traumatized parents compensate by showering their offspring with the love they never received [7, p. 56]. This explains Laila's parenting choices: despite enduring patriarchal bias as a child, she treats her daughter Aziza and son Zalmay with equal affection, using balanced maternal love to compensate for her own childhood trauma.

4.2 Trauma Triggered by Taliban's Distorted Religious Regulations

Islam serves as the dominant faith of Afghan citizens, whose core doctrines advocate the supremacy and mercy of Allah. However, after seizing power, the Taliban launched a rigid cultural campaign by distorting original Islamic teachings and implementing harsh discriminatory rules targeting women [15]. These manipulated religious codes create two major sources of trauma for Mariam and Laila: the abusive application of polygyny and mandatory full-body coverings. This analysis distinguishes authentic Islamic teachings from the Taliban's extremist twisted policies to avoid biased judgment of the religion itself.

The Quran permits polygyny under strict prerequisites: men may wed up to four wives only if they can guarantee equal treatment to each spouse; if equal justice cannot be maintained, monogamy is strongly recommended (*Quran* 4:3). The Taliban and local patriarchal communities ignore this prerequisite, abusing the scripture to normalize exploitative polygyny, which traps Laila in a catastrophic forced marriage.

After wartime disasters separate Laila from Tariq and kill her parents, Rasheed takes her in under calculated pretenses of kindness. Desperate and secretly pregnant with Tariq's child, Laila agrees to marry Rasheed to secure a legal identity for her unborn baby [8, p. 204]. Rasheed never shows basic respect to either of his two wives; both Mariam and Laila endure endless verbal and physical abuse under his roof. While early Islamic polygyny originally serves to protect widows and orphaned women, patriarchal men like Rasheed exploit the system to satisfy their selfish demands, creating an environment of domestic torment.

Clear distinctions exist between hijabs and burqas: hijabs refer to modest head coverings worn voluntarily by Muslim women, while burqas are full-body coverings mandated violently by the Taliban, leaving only a tiny mesh panel for vision [1]. Chapter 24, Section 31 of the *Quran* requires women to cover their bodies before unrelated male strangers, yet the Taliban drastically exaggerates this modest dress rule into a tool of gender segregation. Under Taliban extremist governance, official regulations ban women from most formal employment and force all females to wear burqas outdoors; violators face immediate violent punishment. Women are prohibited from leaving their homes without a male guardian [15, p. 112]. These mandatory coverings act as physical barriers separating women from public social interaction, depriving them of basic dignity, equality, and social recognition. The novel's descriptions of the burqa emphasize its suffocating enclosure—Laila's experience of wearing it for the first time is rendered through sensory deprivation and disorientation, conveying the psychological impact of enforced invisibility.

4.3 Trauma Brought by Continuous Warfare

Prolonged armed conflict devastates Afghanistan's social development and inflicts multi-layered trauma on women already oppressed by patriarchy and extremist religious rules. Wartime chaos amplifies the severity of their psychological wounds, manifested in family disintegration and forced maternal-child separation.

Following the collapse of Soviet support, the Najibullah regime lost power, and local resistance forces triggered large-scale civil war [16]. This political upheaval destroys Laila's entire peaceful life: the war kills her parents, separates her from Tariq, and pushes her into forced marriage with Rasheed. Without civil conflict, Laila's brothers would not have died on the battlefield; her mother would not have fallen into son-obsessed grief and neglected her; Laila would never have been left homeless and compelled to share an abusive husband with Mariam, nor would her daughter Aziza require placement in an orphanage.

Herman [7] records the devastating psychological toll of World War I, where millions of soldiers witnessed constant mass casualties and suffered severe mental breakdowns, exhibiting hysterical outbursts, emotional withdrawal, and cognitive impairment (p. 46). If adult male soldiers cannot withstand wartime trauma, the psychological damage endured by adolescent girls like Laila becomes far more severe. Nevertheless, Laila retains unbroken inner resilience through all suffering, a spiritual strength that later inspires Mariam to resist oppression.

The Taliban was formally founded in August 1994 and established an interim authoritarian government that enforced distorted Islamic regulations nationwide [15]. Officials mandated traditional male beards, full female burqas, the closure of all girls' schools and women's public bathhouses, and a total ban on female formal employment. Under widespread poverty and national debt caused by long-term warfare, Laila is forced to send her young daughter Aziza to an orphanage to reduce household burdens—merely because Aziza is a girl [8, p. 305]. Though the orphanage offers basic safety amid conflict, maternal separation creates trauma for Laila, who has already lost every other family member. The novel captures this separation through Laila's internal anguish, her recurring nightmares of losing Aziza, and the symbolic weight of the orphanage as a site of both safety and abandonment.

5. Trauma Rehabilitation of the Two Heroines

Traumatic memories leave permanent imprints on survivors' minds. Though Mariam and Laila repeatedly attempt to forget their pain, they cannot fully escape its influence. According to Herman's three-stage trauma rehabilitation theory, effective healing relies on three core methods: rebuilding supportive interpersonal relationships, narrating and processing traumatic memories, and reconstructing a stable, positive self-identity. Trauma rehabilitation does not mean complete erasure of painful memories; instead, it requires survivors to accept past wounds, live fully in the present and embrace the future without lingering psychological bondage.

5.1 Stage One: Stabilization — Rebuilding Secure Interpersonal Bonds

The core damage of trauma lies in broken emotional connections and lost personal autonomy; thus, the foundation of recovery is reconstructing safe, trusting human relationships. Rehabilitation cannot be achieved in complete isolation, and all healing progress begins with the stabilization stage focused on restoring a sense of safety.

Initially, Mariam and Laila view each other as rivals for Rasheed's favor, trapped in mutual hostility and misunderstanding. Gradually, shared suffering dissolves their resentment and forges profound sisterhood. Laila's companionship relaxes Mariam's lifelong defensive mindset, allowing her to discover long-lost self-value and inner safety. Persuaded by Laila, Mariam abandons passive endurance and agrees to attempt escaping Rasheed's household together [8, p. 278]. This sisterly alliance launches Mariam's journey of self-salvation. Her final act of defending Laila against Rasheed's murder attempt restores her lost personal agency and releases years of repressed traumatic pain.

Herman [7] argues that once survivors recognize their status as victims and integrate traumatic experiences into their life narratives, they gain the courage to take concrete protective action, strengthen trusting alliances and reclaim a sense of control over future risks (p. 162). Mariam's sacrifice and Laila's mutual support suggest that marginalized traumatized women can resist systemic oppression through solidarity. As Herman further states, trauma survivors regain inner strength by consciously confronting fear rather than retreating from it, completing self-protection and psychological repair through active resistance. Though Mariam pays with her life, she achieves emotional relief through protecting the only person who ever treats her with kindness.

The stabilization stage first restores bodily safety before expanding to environmental and emotional security. Separated by war for years and trapped in an abusive forced marriage, Laila carries deep, unresolved trauma until she reunites with Tariq. Their reunion becomes her spiritual anchor, allowing her to release decades of accumulated grievances and buried secrets. Emotional catharsis alleviates her long-term nervous tension, completing the first critical step of trauma recovery.

Consistent with clinical trauma intervention principles, reconstructing a safe, trustworthy emotional bond forms the primary requirement for regaining inner stability. Traumatized survivors often swing between desperate craving for constant companionship and extreme self-isolation; reliable lovers and family members provide vital emotional support. After escaping Rasheed's control, Laila rebuilds her romantic relationship with Tariq, permanently freeing herself from domestic violence. Living alongside Tariq creates a peaceful new living environment, laying a solid foundation for her complete physical and psychological recovery.

5.2 Stage Two: Mourning — Narrating and Integrating Traumatic Memories

The second rehabilitation stage centers on mourning and memory integration: survivors recount their traumatic experiences to transform fragmented painful recollections into integrated parts of their life narratives. Narrative therapy proves highly effective here: sharing suffering with a loyal, empathetic listener enables survivors to reinterpret their trauma and achieve emotional catharsis.

Narrative therapy encourages trauma survivors to openly recount painful pasts to trusted witnesses, shifting their identity from passive victims of misfortune to active narrators of their own life stories. Laila acts as Mariam's faithful listener, absorbing all her suppressed bitterness and helplessness accumulated over decades. While accompanying Laila and Aziza, Mariam gradually opens up and confides the loneliness and humiliation of her childhood to her sister [8, p. 245]. Full verbal release relieves the heavy psychological burden that haunts her for decades.

Trauma theory confirms that recounting suffering to a sympathetic audience allows inner emotional discharge, greatly facilitating psychological healing. Through continuous confession, Mariam slowly re-evaluates her own life, awakens long-dormant self-awareness, and gathers the courage to face her broken past and tragic fate head-on.

Sharing personal trauma with trusted confidants constitutes the core of the mourning stage. After wartime separation, Tariq's unexpected reappearance provides Laila with irreplaceable spiritual support. She fully discloses all abuse and hidden secrets endured during her years with Rasheed without reservation, as their deep childhood affection creates mutual trust.

During this narrative phase, Laila transforms from a silent victim into an active storyteller reviewing her own trauma. Tariq's constant comfort, encouragement and understanding allow her to process all past hardships, gradually walking out of the haze of trauma and embracing a brand-new future life.

5.3 Stage Three: Reconnection — The Reconstruction of Self-Identity

Severe traumatic experience shatters survivors' self-perception and distorts their understanding of reality. The final rehabilitation stage requires traumatized women to break free from cultural and systemic shackles, reconstruct independent self-identity through self-exploration, and define authentic self-worth beyond labels imposed by patriarchal society. True self-discovery means recognizing inner desires and establishing stable personal value judgment.

Before meeting Laila, decades of domestic violence reduce Mariam to emotional apathy, who passively accepts her predetermined tragic fate. Laila's arrival disrupts this numb resignation. After learning Aziza, Laila's illegitimate daughter, Mariam abandons the lifelong shame she associates with her own illegitimate identity and opens her heart to Laila and the children. Though infertile, she discovers maternal fulfillment through caring for Aziza and Zalmai, regaining vital hope for living.

Mariam accepts Laila's escape proposal despite their failed attempt, marking her first active resistance to Rasheed's tyranny. When Rasheed attempts to murder Laila, Mariam bravely intervenes and accidentally kills her husband. She refuses Laila's escape plan to avoid dragging her into legal danger, voluntarily surrendering to authorities to accept punishment [8, p. 368]. Though sentenced to execution, Mariam leaves the world without regret. Born as a source of family shame, she dies bearing precious identities: loyal friend, devoted companion, protective maternal figure and fearless defender. She finally recognizes her own unique value and reaches inner reconciliation with her lifelong trauma. Built on solid sisterly trust, Mariam's final sacrifice allows her to plan her own destiny for the first time, completing full reconstruction of self-identity in her last moments.

As a well-educated representative of Afghanistan's younger female generation, Laila holds an innate longing for freedom and self-realization. Yet wartime disaster forces her into submission: she becomes Rasheed's second wife and bears two children under constant violent oppression. Her initial small-scale resistance only invites harsher abuse, pushing her into temporary surrender until Mariam's sacrifice liberates her from deadly domestic torment.

After escaping alongside Tariq, Laila rebuilds a peaceful family overseas, yet ultimately chooses to return to war-torn Afghanistan, her spiritual homeland. She takes up work as a teacher at a local orphanage, fulfilling the hopeful vision her father once held for her to become a valuable, independent woman [8, p. 412]. Working with vulnerable orphaned girls allows Laila to continuously heal her own wartime trauma and carve out a meaningful, independent social identity within Afghan society. Even after trauma recovery, she maintains deep emotional bonds with other marginalized women, no longer trapped by perpetual fear, completing her lifelong pursuit of authentic selfhood.

6. Conclusion

A Thousand Splendid Suns weaves together overwhelming despair, silent endurance and constant fear, yet simultaneously fills its narrative with gentle warmth, mutual care and persistent hope. Patriarchal culture, Taliban religious extremism and endless warfare chain Mariam and Laila in systematic oppression, condemning them to repeated domestic violence and unceasing wartime suffering. Nevertheless, mutual affection, inner courage and united solidarity turn the two women into each other's spiritual sunshine, enabling them to discover lasting hope amid despair.

This paper has applied Judith Herman's triphasic trauma recovery model to analyze the layered psychological trauma endured by the novel's dual female protagonists, identifying three primary trauma sources: patriarchal traditional oppression, discriminatory policies twisted from religious texts by extremist regimes, and irreversible wartime destruction. It has systematically dissected the complete trauma rehabilitation path followed by Mariam and Laila, corresponding to Herman's three-stage recovery framework: stabilization through secure interpersonal bonds, mourning via cathartic narrative confession, and ultimate self-reconnection through identity reconstruction.

The comparative analysis of Mariam and Laila reveals several significant findings. First, while Herman's framework effectively illuminates the general structure of their recovery, it does not fully account for the distinct trauma profiles of the two protagonists. Mariam's trauma manifests predominantly as emotional constriction and passive resignation—a response shaped by decades of uninterrupted abuse and social isolation. Laila's trauma, by contrast, is characterized by hyperarousal and persistent anxiety, reflecting her intermittent experiences of hope and subsequent disappointment, as well as her sharper awareness of alternative possibilities for women's lives. These differences suggest that individual personality, educational background, and the timing of traumatic events significantly shape trauma expression and recovery potential—factors that Herman's model treats only implicitly.

Second, Herman's framework reaches its limits in three specific areas when applied to the Afghan context: the assumption that physical stabilization must precede emotional mourning; the privileging of professional therapeutic intervention; and the implicit linearity of the three-stage progression. In the novel, these assumptions are subverted: Mariam and Laila achieve emotional stabilization through their mutual narration of trauma (mourning), not before it; sisterhood substitutes for the absent therapist; and their recovery oscillates between stages rather than progressing in a straightforward sequence. Third, the analysis demonstrates that sisterhood functions as more than emotional support—it operates as the functional equivalent of the therapeutic alliance described by Herman. Through their bond, Mariam and Laila perform all three recovery functions: they provide each other with safety (stabilization), serve as trusted witnesses to each other's testimony (mourning), and help each other envision a post-trauma identity (reconnection). This suggests a significant modification to individually oriented trauma models: in collectivist, resource-poor contexts, relational recovery may precede and enable individual recovery, rather than the reverse.

Fourth, the novel represents recovery not as a uniform achievement but as differentiated by circumstance and sacrifice. Mariam's recovery is sacrificial—she achieves full self-reconciliation only in her final moments, through an act of lethal resistance that precludes a future life. Laila's recovery is partial but ongoing—she continues to heal through meaningful work and continued relationships, suggesting that recovery is a process rather than a destination. This dual representation complicates Herman's assumption that successful recovery culminates in stable reintegration, acknowledging that for some survivors, redemption may come only through death, while for others, it lies in sustained, imperfect struggle.

Finally, the novel connects personal trauma to political and historical violence in ways that extend Herman's primarily clinical framework. Mariam's and Laila's individual psychological wounds are inseparable from Afghanistan's national trauma—the Soviet invasion, civil war, Taliban rule, and U.S. intervention. Their recovery is therefore constrained not only by internal psychological barriers but by external historical forces beyond individual control. This finding underscores the need for trauma theory to integrate socio-political analysis more fully, recognizing that personal healing in contexts of ongoing collective violence cannot be achieved through individual therapeutic work alone.

This research contains several limitations. Firstly, the paper applies a single trauma theoretical framework without integrating complementary theories such as intergenerational trauma or collective cultural trauma. Secondly, the analysis of specific PTSD symptom manifestations within the text could benefit from deeper textual close reading. Future research can fill these gaps by combining multi-dimensional trauma theories and conducting more detailed comparative analysis between Hosseini's two major novels (*The Kite Runner* and *A Thousand Splendid Suns*) to enrich cross-cultural research on female wartime trauma. Additionally, future studies might examine how the novel's reception among Afghan readers complicates or confirms the Western trauma framework applied here.

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