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Shell-Shock in Death of a Hero: A Study in the Light of Psychoanalytical Theories

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Abstract---This paper investigates the psychological trauma precipitated by war in *Death of a Hero*, a semi-autobiographical novel by Richard Aldington, the veteran who served as a soldier in World War I. So, the writer himself witnessed the appalling horrors of war and turned them into a novel. This reveals how the war horrors shatter the sensitive artist psychologically and drive him to commit suicide. Although this novel departs from historical details in the protagonist's tragic end, it offers a pathetic description of the writer's agonies which transgresses its setting; i.e., England World War I, and presents a Mankind's dilemma everywhere. As a narrative, this novel pauses upon the hero's psychological sufferings in the midst of a fragmented family which represents the British dissolute society at that time, and shows their effects in developing Post-Traumatic Stress Disorder later on. That society was akin to another wasteland. The paper adopts a psychoanalytic approach as it attempts to penetrate into the hero's traumatic experiences. Hence emerges the significance of such a psychoanalytic approach.

Keywords---neurosis, psychoanalysis, soldier, trauma, war.

Introduction

The post-traumatic stress disorder, known as "shell shock", dates back to WWI with symptoms that were associated with the soldiers only. However, it was not new in psychological studies; it was there since the first battle in history. The term was first used during WWI; it was called "masculine shell shock" as it was associated with soldiers who were mostly "men". After the war of Vietnam in

1980, it was turned into Post-Traumatic Stress Disorder by the American Psychiatric Association as:

Posttraumatic stress disorder (PTSD) is a psychiatric disorder that may occur in people who have experienced or witnessed a traumatic event such as a natural disaster, a serious accident, a terrorist act, war/combat, or rape or who have been threatened with death, sexual violence or serious injury. ("Posttraumatic Stress Disorder")

Psychoanalysis has dug deep into the symptoms and causes of this psychological disturbance with other branches of neurology and psychology since the time of Freud. This study, which traces this disorder in a semi-autobiographical novel written by the English veteran and writer, Richard Aldington, shows variable symptoms of PTSD inflicted soldiers after war in addition to men facing bullets (Warden et al., 2009; Friedl, 2018).

Literature review

In tracing the origin of the term, "Shell- shock", it is clear that it is associated with shells and bombs, yet its symptoms were mentioned in old literature and scripts, even before developing modern weapons. In the *Bible*, it is suggested that some soldiers should be shifted and have rest due to "nervous breakdown" caused by war as follows: "When thou goest out to battle against thine enemies, and seest horses, and chariots, and a people more than thou the officers shall say, what man is there that is fearful and fainthearted? Let him go and return unto his house, lest his brethren's heart faint as well as his heart". However, the term, "shell shock" came to existence in WWI to describe the symptoms of panic, fear, isolation, nightmares, deafness or blindness in some cases. It was first introduced by the British psychologist Charles Myers who was appointed to deal with these cases among the British soldiers. The symptoms first "included fatigue, tremor, confusion, nightmares, and impaired sight and hearing" (Jones, 2012). That is revealed in an article published in American Psychology Association by Dr. Edgar Jones:

Shell shock took the British Army by surprise. In an effort to better understand and treat the condition, the Army appointed Charles S. Myers, a medically trained psychologist, as consulting psychologist to the British Expeditionary Force to offer opinions on cases of shell shock and gather data for a policy to address the burgeoning issue of psychiatric battle casualties (Jones, 2012).

Therefore, the founder of psychoanalysis, Sigmund Freud, was urged to make a turning point in his studies and talk about "death instinct", which was called "thanato", as opposite to the "sexual instinct" referred to as "eros". This was argued in his book *Beyond Pleasure Principle*, first published in Germany in 1920. So, after WWI Freud speaks about "war neurosis" that arises from the conflict between the "sexual instinct", which means life-preservation instinct and "death instinct" that he explains. *Psycho-Analysis and the War Neuroses* is a collection of papers written by neurologists and psychoanalysts about "war neurosis" in soldiers that was also called "shell-shock". The results of the theories and case-studies were revealed by Dr. S. Ferenczi, Dr. Karl Abraham, and Dr. Ernest Simmel in the Symposium held at the Fifth International Psycho-Analytic

Congress at Budapest in September 1918 and cited in the book. In his introduction to the book, Freud digs into the term “war neurosis” as follows:

The war neuroses, in so far as they differ from the ordinary neuroses of peace time through particular peculiarities, are to be regarded as traumatic neuroses, whose existence has been rendered possible or promoted through an ego-conflict; The conflict takes place between the old ego of peace time and the new war-ego of the soldier, and it becomes acute as soon as the peace-ego is faced with danger of being killed through the risky undertakings of his newly formed parasitical double. Or one might put it, the old ego protects itself from the danger to life by flight into the traumatic neurosis in defending itself against the new ego which it recognises as threatening its life.

Psychoanalytical studies ascribe this to infantile stages that make some people fragile and liable to traumas more than others. The first phase of human life is crucial to the formulation of their personalities later on. Dr. Karl Abraham explains that according to his studies on the cases of WWI’s soldiers in the same book as:

The previous history of such people, and naturally, still more, a penetrating analysis, teaches us why the one in spite of the severest physical and mental influences of the war remains to all intents and purposes healthy, and why the other reacts to relatively trifling stimuli with a severe neurosis. It transpires with great regularity that the war neurotics already before the trauma were labile people—to designate it.

These soldiers vary in developing the symptoms of “war neurosis” according to their previous experience in childhood within their environment, and according to their personality, too. In his article “War Shock and Freud’s Theory of the Neurosis” cited in the same book, Ernest Jones says that “current repressed wishes cannot directly produce a neurosis, but do so only by reviving and reinforcing the wishes that have been repressed in older unresolved conflicts.” Thus, it is a feeling of disappointment that “tends to regress back to an older period of life, and thus to become associated with similarly baulked and repressed wishes belonging to older conflicts”. Many patients would be recovered by hypnotism and psychoanalytical sessions of the unconscious treatment applied by the doctors whose studies were revealed in the symposium ([Hanahan, 2014](#); [Lester et al., 2010](#)).

The psychoanalytical studies in this book dwell on the clash inside the ego of the person suffering from that disorder. Neurosis arises when the soldier finds himself abandoning whatsoever related to his self-assertion for the welfare of the mass. His sense of selfhood is lost. Besides, he faces a clash with his super ego as every principle he was raised up to adhere to would be substituted by the new dictations such as murder, trickery, and so on for the sake of community. The new sets of standards create a split inside the soldier’s psyche. Yet, soldiers differ in their susceptibility to trauma. So, the psychoanalytical studies trace the childhood evolution of the child to deduce the real reason which affects his/ her personality. It is the main reason that makes one person more vulnerable than the other. It is due to what is Ernest Jones called “‘infantile fixation’ at a given point in development,” which indicates hindrance of one stage of the infantile psychosexual stages of development. This disorder has been clarified in an article included in the book *Psycho-Analysis and the War Neuroses*, in which Jones attributes neurosis to a fixation in an infantile stage defined by Freud such as “oral fixation” ([Andrews et al., 1990](#); [Lewis et al., 1998](#)).

In a book entitled *Saikologiat al-Huroob and Dawr al-Ilaj al-Nafsi, Idtirab Doughout ma baadal-Sadma*, (War Psychology and Disasters and the Role of Psychotherapy), published in Lebanon in 1999, Dr Ghassan Yacoub defines PTSD as:

[It is a] psychological illness classified and labelled by the American `Psychiatric Association (1980, 1987, 1994). It arises when someone is faced by a severely painful incident (trauma) that exceeds the normal borders of human experience, such as: war disasters, witnessing murders and violence acts, physical assaults and rape, natural catastrophe, witnessing a harsh physical assault on a family member, etc. This is revealed afterwards in the form of physical and psychological symptoms (avoidance, dullness, troublesome images and thoughts, insomnia and sleep disorder, sweating, startling, fear, caution, weakness of memory and difficulty in concentration, etc.

Dr. Yacoub asserts that these symptoms of PTSD are not necessarily found in some people, as this is related to the genetic factors, the psyche of the person, his vulnerability and his environment. Yet, he states in earlier studies that this disorder might take up to 8 years to appear after the exposure to trauma, as happened with the soldiers after WWII, and might last for a long period of time extended to forty years, as happened in the war of Vietnam ([Esmaeli et al., 1995](#); [Viano et al., 1989](#)).

Method

This research is a case study that depends on observation and analysis of the novel. It analyses the characters according to the psychoanalytical theories. It pours into the stream of literary criticism field as it gets the findings from the formal revelations of the texts. It is a qualitative and applied study according to characters' analyses. The data are got by the speech, behaviour and stream of consciousness of the main character, The hero is the mouthpiece of the writer who gives details of the horrible war, he himself witnessed. The findings of the study are applicable to literature as to real life alike as its plot and incidents stem from reality ([Fonagy & Target, 1994](#); [Yakeley, 2018](#)).

Discussion and Finding

In *Death of a Hero*, written in 1929, around ten years after WWI, Richard Aldington epitomized the sufferings of the soldiers in the persona of the hero. He himself witnessed the war and suffered sharply from its aftermaths. He viewed other soldiers' sufferings as well. Furthermore, the novel digs into the background of the soldier and uncovers the double standard and broken society of England in George's family that leads to his tragic end. The writer who witnessed the atrocities of war could skilfully depict them. The psychological problems caused to the soldiers were duly presented in George's persona as it is schemed according to reality. In a letter written in the preface of the novel, the writer expresses the griefs of the people as they become the fuel of the war: "A great number of the men of our generation died prematurely. We are unlucky or lucky enough to remain". [Aldington \(2013\)](#), Yet, the realistic atmosphere of the novel, being written by a British veteran participated in WWI, makes it appealing to readers, and touching. It is the tragedy of everyman falling a victim to a broken family, greedy people and war. The sample of the study is a real human being, a real soldier,

with whom the writer identifies himself and his frustrated peers. The writer clarifies that in the preface of the novel:

I began this book almost immediately after the Armistice, in a little Belgian cottage – my billet. I remember the landscape was buried deep in snow, and that we had very little fuel. Then came demobilization, and the effort of readjustment cost my manuscript its life... But, as you see, this book is really a threnody, a memorial in its ineffective way to a generation which hoped much, strove honestly, and suffered deeply.

The novel is narrated by an anonymous friend of the protagonist, George Winterbourne. It is a flashback memory starting from the tragic end of the hero introduced by the first narrator, who narrates the story of the hero, his friend. Upon his death, the reactions of George's odd parents, as well as his wife and lover are introduced to make the reader familiar with the causes of his troubles and give him/ her a chance to assess the causes of his death stated by the narrator as: "I think that George committed suicide in the last battle of the war. I don't mean shot himself, but it was very easy for a company commander to stand up when an enemy machine-gun was traversing". (Aldington, 2013).

We know that George Winterbourne has suffered from an unhappy childhood and dissolute family. His mother and father were not on good terms with each other. He had a naïve father and a dominating amoral mother with twenty-two lovers. This point brings us back to what has been clarified earlier that some people are more liable to "war neurosis" due to the old conflict and fixation of a stage in their childhood. If we come to the father, he is described in the novel as:

Winterbourne's father, whom I knew slightly, was an inadequate sentimentalist. Mild, with an affectation of gentility, incompetent, selfishly unselfish (i.e., always patting himself on the back for "renouncing" something he was afraid to do or be or take), he had a genius for messing up other people's lives. The mess he got his life into would have baffled an army of psychologists to unravel.

His mother, who represents the first life giving object in the infantile life, is an irresponsible whore, caring only about her desires:

Although a lady of "mature charms," Mrs. Winterbourne loved to fancy herself as a delicious young thing of seventeen, passionately beloved by a sheikh-like but nevertheless "clean" not to say "straight" Englishman. Like all her class, she toadied to her betters and bullied her inferiors. But, with her conventionality, she was, of course, a hypocrite.

Hence, we conclude that as a child, George, has never been raised up in a balanced environment, nor he developed healthy relationships with either of his parents. Consequently, he has been banished from the family house later on and lives alone before knowing Elizabeth and being entrapped in that unequal marriage. In *Psychoanalytic Understanding of Violence and Suicide*, there is a great focus on the patients' relationship with their parents, and the relationship between the parents, themselves, as all those who are living in shattered families would develop signs of violence that lead them to commit murder or suicide:

In all the patients presented here there was little internal representation either of the subject's relationship with the father or of the different, generative quality of the parents' relationship to each other. Recognition of both these realities—the subject's

relation with the father and mother and the qualitatively different relationship of the parental couple— is needed to help the individual recognise the differentiation between the sexes and generations ([Perelberg & Cordess, 1999](#)).

George, the adult, suffered from bullying and mockery in school by his colleagues and the surroundings that led to his sense of inferiority and made him hate home and school alike: “He didn’t mind going to hell, and disgracing himself and his parents and his House and the School, if only he could go to hell in his own way.” (Aldington). So, he retreated to his world of writing, painting and sex. He found consolation in art; yet, but he was not well estimated in that arena. George’s dilemma is the dilemma of the man who tries to overcome frustration by art then by love. His relationships with Elizabeth and Fanny have been another resort to assert his manhood and overcome his sense of inferiority. Love has been his life force. He clings to life by the two ladies he loves, his wife Elizabeth and her friend Fanny.

In art, George’s sketches have never been appreciated. He couldn’t sell any till he joins the army as people show respect and sympathy to the soldier. This is a reason of joining the army. His humanitarian part and wish to get social acceptance and self-assertion in addition to his sympathy with the other people participating in the war have driven him to fight in WWI. Yet, this would cause him PTSD, and it has been clearly revealed by the author as “shell-shock” as it has been commonly known at that time. In the beginning, George denies the trauma in his unconscious streams, but it becomes clear that he surrenders to the fact at the end. We know about the hero’s sufferings before and after joining the army through stream of consciousness technique. The war trauma that affects George, known as “shell-shock”, has been identified in the novel and stated clearly as its symptoms have been clearly known to the novelist and the protagonist, being in the army, too. The narrator expresses his wish that George would come back to life “like one of those shell-shocked heroes of fiction who recover their wits seven years after the Armistice”. ([Aldington, 2012](#)). In fact, the writer appears as the one who has not only read about “shell-shock” but suffered from it, watched its terrible consequences on his friends as well, and developed some of its symptoms ([Naumovska et al., 2021](#); [Aitalieva et al., 2021](#)).

The hero, George Winterbourne, stands as the mouthpiece of the writer, who calls to annihilate war. His disaster makes him realize the futility of war after suffering from its aftermaths, physically and psychologically speaking. The novelist has been totally depressed like the hero himself. Nobody can better narrate the catastrophes than the person who witnesses them. People are not only killed by bullets, but sometimes their sufferings and psychological disturbances drive them to end their lives intendedly as happens with George. His “death instinct”, which Freud elaborated on after WWI, starts deconstruct his life overcoming the “life instinct” in his psyche as this quotation from the novel shows him:

He experienced rapid fall of spirits to a depth of depression he had never before experienced. Hitherto, mere young vitality had buoyed him up, the élan of his former life had carried him along through the days. In spite of his worrying and the complications and boredoms, he had really remained hopeful. He had wanted to go on living, because he always unconsciously believed that life was good. Now something

within him was just beginning to give way, now for the first time the last faint hues of the lovely iris of youth faded, and in horror he faced grey realities.

George suffers physically and psychologically. He is not only a human being, but also sensitive artist. He is presented in the novel in the most touching way. How can a man suffer more than feeling ashamed of his fences that he cannot control due to illness and sufferings? Fever and diarrhoea weaken him (p.257). He becomes terribly ill, shattered, and desperate. He is the tragic hero in the modern sense of the term. He represents the human weaknesses and disappointments as he is driven to his fate. The novel poses a question of how many Georges do we have in our lives that. That is to say how many victims we have in our lives. The novel echoes the everyday sufferings of the innocent indulged in war.

Winterbourne “was obviously a man who would develop the neurosis rapidly”. But he still has the love of the two women, Elisabeth and Fanny attaching him to life. Afterwards, the signs of shell-shock increase: “The mere physical shock, the slap in the chest, of the great shells exploding close at hand, forbade that. They became a torment, an obsession, an exasperation, a nervous nightmare.” (p.268) As a result of the horrible scenes, the pressures he suffers from, the psychological disturbance, and the sense of abandonment, his status gets worsened, it has to be treated, but who cares? The narrator expresses this horrible status saying:

For Winterbourne the battle was a timeless confusion, a chaos of noise, fatigue, anxiety, and horror. We talked of shell-shock, but who wasn't shell-shocked, more or less? The change in him was psychological, and showed itself in two ways. He was left with an anxiety complex, a sense of fear he had never experienced, the necessity to use great and greater efforts to force himself to face artillery, anything explosive. Curiously enough, he scarcely minded machine gun fire, which was really more deadly, and completely disregarded rifle-fire. And he was also left with a profound and cynical discouragement, a shrinking horror of the human race.

Alcohol is another resort for the broken man to run away from reality. Thus, it has been George's last resort. He turns into a drunkard to forget the horrors of war and his own sufferings. He tries to find ties to life through home and love. Astonishingly, he finds himself unwelcomed; firstly, as Elisabeth has got another love affair with an old friend, and Fanny has her private life and job; and secondly, because he fails to accommodate with the society due to his war neurosis, “shell-shock”. When he goes to dine with his friends, he feels disturbed by the crowds and this is a common sign of “shell-shock” for a soldier coming back from war:

Winterbourne sat very silent through the meal, nervously rolling bread pills. He was amazed to find how remote he felt, how completely he had nothing to say. They talked about various topics he didn't quite follow, and titteringly gossip about people he didn't know. Elizabeth got on wonderfully, chattered with every one, laughed, and was a great success. He felt very uncomfortable, like death's-head at feast.

He drinks too much that night; even when Elisabeth warns him against that, he shows no response and still drinks. Drinking brings him to the world of fantasy as it is stated: “He drank off another glass of wine, and felt the singing dazzle of intoxication, its comforting oblivion, stealing into him. Blast them.” (p.312). He fails even to return as an old lover to Fanny. His impotence is another aftermath of war trauma. It is a mere psychological effect of war. Dr. Karl Abraham

elaborates on people's inability to have ordinary sexual lives as: "[t]wo neurotic types with the same symptoms—although these do not appear so prominently as in the war—would be the impotent man and the frigid woman" (Ferenczi, 1921). In the last meeting with his lovers and friends, George's life becomes worthless as he has the feeling of being unwanted and unwelcomed; the mockery and bullying of people in the dinner worsen the traumatic injury inside him. Thus, he re-joins the army totally depressed and the "death instinct" starts to lead him to put an end to his hellish life: "The days passed into weeks, the weeks into months. He moved through impressions like a man hallucinated. And every incident seemed to beat on his brain Death, Death, Death." (p.334) Therefore, he throws himself into the German bullets in an act of suicide as he has no enough courage to commit that due to his sensitiveness:

He had not even the courage to shoot himself with his revolver; and added that last grain of self-contempt to his despair. The officers and men were lying down, the men firing rifles, and the Lewis guns ripping off drums of bullets. Winterbourne's second runner was hit, and lay groaning: 'Oh, for God's sake, kill me. I can't stand it. The agony. Kill me'. The lines of bullets smashed across his chest like a savage steel whip. The universe exploded darkly into oblivion.

The novel is concluded by an epilogue about the War of Troy which encapsulates the sufferings of soldiers in every war, their forgetful heroic acts, and the bitterness of war and its uselessness. The old veteran Aldington portrays his harsh experience skilfully in the persona of George Winterbourne, as it can be applied to every soldier. He says in the last couplet: "And I too walked away/ In an agony of helpless grief and pity", The epilogue is allegorical in the sense that all the wars are alike regardless of their goals. They grind the innocent; be they soldiers or civilians in their continuing mills. Some are killed, others are injured physically and many more get affected psychologically and these effects last for so long and might lead to death (Hovers & Vynkovicz-Mytel, 2020; Widana et al., 2021).

Conclusion

In short, *Death of a Hero* is partly an autobiography of the veteran's life who was a soldier in WWI. It unveils the symptoms and reasons of the PTSD as shown in the soldier, George Winterbourne. The embedded message of the novel is to re-think about the futility of war. It stirs every human being to dig deeply into the psychological wounds of the people suffered from war or indulged in it and sympathize with them, even if they are soldiers. The narrator reveals the sufferings of human beings that exceed the physical injuries to the unapparent psychological ones (Singh, 2016; Srivastava, 2016). Psychoanalysis theories help to uncover psychoanalytical disorders in human beings. Moreover, it goes back to dig into the infantile experience which makes people vary in their ability to develop symptoms of "neurosis" or post-traumatic stress disorder. The theories of psychoanalysis expose the mysterious parts of the mind that cause PTSD. Although the novel has not received enough critical studies, this does not lessen its value and importance. The author depicts successfully the shattered self of the soldier as a representative of every soldier and every man suffering from the rejection of the dissolute society, carelessness of parents, denial of lovers, and then post-traumatic stress disorder caused by war. So, the novel tackles more

than one serious issue. However, this study traces only the psychological effects of war in the personality of the main protagonist who stands as the sample of the soldier. This novel can be perceived as a humanitarian call for peace and respect of human lives and feelings. That is to say, in depicting the ugly picture of war, the writer calls to stop it. Hence, the novel deserves to be considered for future studies.

References

- Aitalieva, T. K., Kulalieva, K. O., & Sartbekova, N. K. (2021). Analysis of the concepts of Khizra, the forty chiltanas in the epic poem "Manas". *Linguistics and Culture Review*, 5(S4), 1-11. <https://doi.org/10.21744/lingcure.v5nS4.1533>
- Aldington, R. (2013). *Death of a Hero*. New York: Penguin Classics.
- Andrews, G., Stewart, G., Allen, R., & Henderson, A. S. (1990). The genetics of six neurotic disorders: a twin study. *Journal of affective disorders*, 19(1), 23-29. [https://doi.org/10.1016/0165-0327\(90\)90005-S](https://doi.org/10.1016/0165-0327(90)90005-S)
- Esmaeli, B., Elner, S. G., Schork, M. A., & Elner, V. M. (1995). Visual outcome and ocular survival after penetrating trauma: a clinicopathologic study. *Ophthalmology*, 102(3), 393-400. [https://doi.org/10.1016/S0161-6420\(95\)31009-3](https://doi.org/10.1016/S0161-6420(95)31009-3)
- Ferenczi, S. (1921). *Psycho-analysis and the war neuroses* (No. 2). International Psycho-Analytical Press.
- Fonagy, P., & Target, M. (1994). The efficacy of psychoanalysis for children with disruptive disorders. *Journal of the American Academy of Child & Adolescent Psychiatry*, 33(1), 45-55. <https://doi.org/10.1097/00004583-199401000-00007>
- Friedl, K. E. (2018). Military applications of soldier physiological monitoring. *Journal of science and medicine in sport*, 21(11), 1147-1153. <https://doi.org/10.1016/j.jsams.2018.06.004>
- Hanahan, D. (2014). Rethinking the war on cancer. *The Lancet*, 383(9916), 558-563. [https://doi.org/10.1016/S0140-6736\(13\)62226-6](https://doi.org/10.1016/S0140-6736(13)62226-6)
- Hovers, J. L., & Vynkovicz-Mytel, N. (2020). Morphemes and consonant vowels types in English. *Macrolinguistics and Microlinguistics*, 1(1), 37-51. Retrieved from <https://mami.nyc/index.php/journal/article/view/4>
- Jones, E. (2012). Shell shocked. *American Psychological Association*, 43(6), 18.
- Lester, P., Peterson, K., Reeves, J., Knauss, L., Glover, D., Mogil, C., ... & Beardslee, W. (2010). The long war and parental combat deployment: Effects on military children and at-home spouses. *Journal of the American Academy of Child & Adolescent Psychiatry*, 49(4), 310-320. <https://doi.org/10.1016/j.jaac.2010.01.003>
- Lewis, G., Bebbington, P., Brugha, T., Farrell, M., Gill, B., Jenkins, R., & Meltzer, H. (1998). Socioeconomic status, standard of living, and neurotic disorder. *The Lancet*, 352(9128), 605-609. [https://doi.org/10.1016/S0140-6736\(98\)04494-8](https://doi.org/10.1016/S0140-6736(98)04494-8)
- Naumovska, O. V., Rudakova, N. I., & Naumovska, N. I. (2021). The "life/death" binary opposition in folk prose narratives. *Linguistics and Culture Review*, 5(S4), 540-558. <https://doi.org/10.21744/lingcure.v5nS4.1589>
- Perelberg, R., & Cordess, C. (1999). Psychoanalytic Understanding of Violence and Suicide. *European journal of psychotherapy counselling and health*, 2(3), 411-413.

- Singh, S. (2016). I know not death. *International Journal of Linguistics, Literature and Culture*, 2(4), 3-4. Retrieved from <https://sloap.org/journals/index.php/ijllc/article/view/130>
- Srivastava, K. (2016). The death of a relationship. *International Journal of Linguistics, Literature and Culture*, 2(4), 129-130. Retrieved from <https://sloap.org/journals/index.php/ijllc/article/view/148>
- Viano, D. C., King, A. I., Melvin, J. W., & Weber, K. (1989). Injury biomechanics research: an essential element in the prevention of trauma. *Journal of biomechanics*, 22(5), 403-417. [https://doi.org/10.1016/0021-9290\(89\)90201-7](https://doi.org/10.1016/0021-9290(89)90201-7)
- Warden, D. L., French, L. M., Shupenko, L., Fargus, J., Riedy, G., Erickson, M. E., ... & Moore, D. F. (2009). Case report of a soldier with primary blast brain injury. *Neuroimage*, 47, T152-T153. <https://doi.org/10.1016/j.neuroimage.2009.01.060>
- Widana, I.K., Sumetri, N.W., Sutapa, I.K., Suryasa, W. (2021). Anthropometric measures for better cardiovascular and musculoskeletal health. *Computer Applications in Engineering Education*, 29(3), 550-561. <https://doi.org/10.1002/cae.22202>
- Yakeley, J. (2018). Psychoanalysis in modern mental health practice. *The Lancet Psychiatry*, 5(5), 443-450. [https://doi.org/10.1016/S2215-0366\(18\)30052-X](https://doi.org/10.1016/S2215-0366(18)30052-X)