

A Psychoanalytical Reading of the Silent Patient by Alex Michaelides: The Many Layers of Silence

قراءة تحليلية نفسية لرواية "المریضة الصامتة" لأليكس ميكايليدس: الطبقات الصمت المتعددة

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Abstract:

In Alex Michaelides' psychological thriller *The Silent Patient*, silence emerges as a powerful and enigmatic force shaping the narrative and inviting psychoanalytical inquiry. Beyond mere absence of speech, silence becomes a complex phenomenon, reflecting intricate human interactions, conveying deep trauma, and asserting personal agency. The novel challenges readers to examine the boundaries between expression and repression, art and speech, truth and deception. This article investigates the narrative through a psychoanalytical framework, employing Freudian and Lacanian theories to explore unconscious motivations, trauma, and identity. Alicia's silence is analyzed as a manifestation of trauma and resistance, revealing the defense mechanisms and desires embedded in the characters. Ultimately, the study highlights how the interplay of silence and psychological complexity deepens the novel's thematic richness and narrative intrigue.

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الملخص:

في رواية الإثارة النفسية المريضة الصامته لأليكس ميكايليدس، يظهر الصمت كقوة قوية وغامضة تشكل مسار السرد وتدعو إلى استكشاف نفسي عميق. يتجاوز الصمت مجرد غياب للكلام ليصبح ظاهرة معقدة تعكس التفاعلات البشرية الدقيقة، وتنقل الصدمات العميقة، وتؤكد على الإرادة الذاتية. تتحدى الرواية القراء لفحص الحدود بين التعبير والكبت، الفن والكلام، الحقيقة والخداع. تستند هذه الدراسة إلى إطار تحليلي نفسي يعتمد على نظريات فرويد ولاكام لتحليل الدوافع اللاواعية، والصدمات النفسية، والهوية. يتم تحليل صمت أليسيا باعتباره تجسيداً للصدمات والمقاومة، كاشفاً عن آليات الدفاع والرغبات المتجذرة في الشخصيات. في النهاية، تسلط الدراسة الضوء على كيفية تعميق التفاعل بين الصمت والتعقيد النفسي للثراء الموضوعي والإثارة السردية في الرواية. الكلمات المفتاحية: نظريات فرويد ولاكام، الهوية والإرادة الذاتية، منظور تحليلي نفسي، الصمت، الصدمات النفسية.

Introduction

Alex Michaelides' *The Silent Patient* offers a compelling narrative that delves into the psychological depths of silence, making it a rich text for psychoanalytical exploration. At its core, the novel uses Alicia Berenson's muteness, following the murder of her husband Gabriel, as both a narrative mystery and a symbol of deeper psychological phenomena. Through Alicia's silence, Michaelides raises critical questions about trauma, repression, and agency, drawing readers into a story that intertwines the suspense of a psychological thriller with the complexity of unconscious human behaviour.

This article approaches *The Silent Patient* through a psychoanalytic lens, employing Freudian concepts such as repression, the death drive, and defence mechanisms alongside Lacanian theories of the Symbolic and the Real. These frameworks uncover the layers of Alicia's silence, not only as a response to her trauma but also as a means of asserting agency in a world where language fails her. Additionally, the novel's exploration of Theo Faber's dual

role as Alicia's therapist and a man grappling with his personal unresolved conflicts reflects the intricate interplay between patient and healer. By focusing on the multifaceted role of silence, this analysis seeks to illuminate how *The Silent Patient* transcends the boundaries of genre, offering a profound meditation on the human psyche.

1. **Psychoanalysis: A Theoretical Framework**

Freudian psychoanalysis posits that the human psyche is structured into three distinct components: the id, ego, and superego. The id operates on the pleasure principle, encompassing innate biological drives and desires that seek immediate gratification. The ego, governed by the reality principle, mediates between the unrealistic id and external reality, employing defence mechanisms such as repression, sublimation, and displacement to manage internal conflicts and reduce anxiety. The superego represents internalized societal norms and morals, striving for perfection and often inducing feelings of guilt when its standards are not met (Freud 13-15).

Jacques Lacan expanded upon Freud's theories by introducing the concepts of the Imaginary, the Symbolic, and the Real. The Imaginary pertains to the formation of the ego and the realm of images, closely associated with the mirror stage, wherein an infant first identifies with its reflection, leading to the establishment of the ego. The Symbolic encompasses language and the structures of society, representing the domain of laws and norms that shape human interaction and identity. The Real signifies that which is outside language and symbolization, often associated with trauma and the inexpressible aspects of experience (Lacan 23-27).

Lacan's notion of the mirror stage is pivotal in understanding the development of the ego. During this stage, typically occurring between six and eighteen months, the infant's identification with its mirror image fosters a sense of a coherent self, despite the preceding

experience of bodily fragmentation. This identification is both empowering and alienating, as the child misrecognizes the image as a true representation of the self, leading to an ongoing tension between one's perceived and actual self (Lacan 47) .

In the context of Alex Michaelides' *The Silent Patient*, Alicia Berenson's muteness can be interpreted through these psychoanalytic lenses. Her silence may function as a defence mechanism, specifically repression, where traumatic experiences are pushed into the unconscious to alleviate anxiety. From a Lacanian perspective, Alicia's refusal to speak can be seen as a rejection of the Symbolic order, the realm of language and societal norms; indicating a profound disturbance in her ability to integrate her traumatic experiences into a communicable narrative (Michaelides 89-92).

This muteness reflects a retreat into the Imaginary, where she is ensnared by internal images and experiences that resist articulation within the Symbolic framework. Furthermore, Alicia's silence could be viewed as an encounter with the Real, representing aspects of her trauma that are indescribable and cannot be adequately captured or represented through linguistic expression. Her muteness embodies the inaccessibility of certain traumatic truths, which remain beyond the reach of language and conscious understanding. Thus, Alicia's condition serves as a manifestation of the complex interplay between the unconscious forces described by Freud and the linguistic structures emphasized by Lacan, highlighting the intricate dynamics between speech, silence, and the processing of trauma (Michaelides 123; Lacan 35).

2. Silence as Repression and Resistance

Alicia Berenson's silence in *The Silent Patient* operates on multiple levels: as a symptom of repression and as a form of resistance. Freud posited that traumatic experiences often result in repression, wherein painful memories are relegated to the unconscious (Freud 18). Alicia's silence after Gabriel's murder signifies a retreat into the unconscious, where the act of

speaking might force her to confront unbearable truths. This aligns with Freud's theory of the death drive, where self-destructive behaviour is seen as a manifestation of repressed conflict (Freud 25-26).

Moreover, her refusal to speak can be interpreted through Lacan's Symbolic order. Language, as a medium of the Symbolic, enforces societal norms and structures. By rejecting speech, Alicia resists the imposition of these structures, choosing instead to communicate through her painting, *Alceste*, which offers a glimpse into her inner world (Lacan 34-36).

Lacan's concept of the death drive situates it within the Symbolic order, viewing it as a fundamental tendency of the symbolic to return to an inanimate state, thus linking it to repetition compulsion and the pursuit of an unattainable object (Lacan 48). In Lacanian theory, resistance is encountered in speech itself, as the process of discourse approaches the repressed nucleus of the unconscious. This resistance stems from the very process of discourse, manifesting as tension at the junction of the Imaginary and the Symbolic registers (Lacan 53-55).

Lacan's triad of the Imaginary, the Symbolic, and the Real provides a framework for understanding the human psyche. The Imaginary relates to images and illusions, the Symbolic to language and societal structures, and the Real to that which is beyond symbolization and language (Lacan 72-74). Alicia's silence can be seen as a rejection of the Symbolic, refusing to integrate her trauma into a societal framework that demands articulation.

Alicia's silence can be interpreted as a manifestation of repressed trauma and a form of resistance against the Symbolic order, aligning with both Freudian and Lacanian psychoanalytic theories. This dual function of her silence underscores the tension between the internal realm of the unconscious and the external demands of structured communication.

3. *Theo Faber: The Analyst and the Analysed*

In Alex Michaelides' *The Silent Patient*, Theo Faber's role as Alicia Berenson's therapist positions him as an interpreter of her silence; however, his own psyche becomes a critical focal point of analysis. Freud's concept of transference—wherein patients project feelings about significant figures onto their therapists—is evident in Theo's interactions with Alicia. His obsession with uncovering her truth reflects his unresolved psychological issues, particularly his troubled childhood and dysfunctional relationship with his wife, Kathy (Freud, qtd. in "A Psychoanalytic Analysis of Theo Faber"). This dynamic illustrates how transference can manifest in therapeutic settings, influencing both the therapist's and the patient's experiences.

Lacan's notion of the analyst as a mirror is relevant here. In Lacanian psychoanalysis, the analyst functions as a reflective surface, allowing patients to project their unconscious desires and conflicts, thereby facilitating self-recognition and insight (Lacan, qtd. in "A Psychoanalytic Analysis of Theo Faber"). Theo projects his unconscious desires and conflicts onto Alicia, blurring the boundary between healer and patient. His fixation on Alicia serves as a defense mechanism, distracting him from confronting his vulnerabilities. This interplay underscores the complex dynamics of transference and countertransference in therapeutic relationships, highlighting the importance of therapist self-awareness to maintain professional boundaries and effectiveness.

A psychoanalytic analysis of Theo's character reveals that his actions are driven by unconscious impulses, aligning with Freud's structural model of the psyche, which comprises the id, ego, and superego. Theo's id-driven desires, such as his compulsion to uncover Alicia's secrets, often override his ego's rationality and his superego's moral considerations. This internal conflict manifests in his professional conduct, leading to ethical breaches and personal turmoil (Freud, qtd. in "A Psychoanalytic Analysis of Theo Faber").

Furthermore, Theo's interactions with Alicia can be seen as a form of countertransference, where the therapist projects his unresolved issues onto the patient. Theo's inability to maintain professional detachment suggests that his therapeutic approach is compromised by his personal history and psychological struggles. This dynamic not only affects the therapeutic process but also exacerbates Theo's internal conflicts, ultimately leading to his psychological unravelling (Lacan, qtd. in "A Psychoanalytic Analysis of Theo Faber").

Theo Faber's role as both analyst and analysed in *The Silent Patient* exemplifies the intricate interplay of transference, countertransference, and the structural components of the psyche. His journey underscores the necessity for therapists to engage in self-reflection and address their personal psychological issues to provide effective and ethical care to their patients.

4. *The Symbolism of Alcestis*

Alicia Berenson's painting, *Alcestis*, serves as a profound symbol of her psychological state, intertwining themes of love, betrayal, and death. Inspired by Euripides' tragedy, the myth of *Alcestis* tells the story of a queen who sacrifices her life for her husband, Admetus, ultimately being resurrected and remaining silent thereafter. This narrative mirrors Alicia's perception of herself as a sacrificial figure, betrayed by her husband Gabriel's infidelity. Her choice to depict this myth reflects her internalization of betrayal and the ensuing emotional turmoil. The painting becomes a medium through which she articulates her trauma, bypassing the limitations of verbal expression. As noted in *The Silent Patient*, "*Alcestis*, Alicia Berenson's self-portrait based on Euripides's play of the same name, symbolizes the great pain that can result from betrayal—and the impossibility of putting that pain into words" (Michaelides 120).

From a psychoanalytic perspective, Sigmund Freud's theory of sublimation offers insight into Alicia's creative process. Sublimation involves channelling repressed desires and unacceptable impulses into socially acceptable forms, such as artistic expression. Freud posited that sublimation allows individuals to transform instinctual drives into higher cultural activities, thereby providing an outlet for repressed emotions. In Alicia's case, her art becomes a cathartic outlet, revealing her unconscious conflicts while preserving her silence. By painting *Alcestis*, she sublimates her profound feelings of betrayal and loss into a tangible form, enabling her to process her trauma without verbal communication. This aligns with Freud's view that "art is thus a means of giving expression to, and dealing with, various psychic pressures" (Freud, qtd. in Jones 5).

Furthermore, Alicia's reliance on painting as a mode of expression can be seen as a defence mechanism, allowing her to navigate her psychological distress. By directing her repressed emotions into her artwork, she engages in a process that not only mitigates her internal conflicts but also communicates her experiences to others in a socially acceptable manner. This process exemplifies the therapeutic potential of art, serving as a bridge between the unconscious and conscious mind. As Freud noted, sublimation enables individuals to "work his fantasy by means of sublimation, into a socially acceptable form, art, that the others can enjoy" (Freud, qtd. in Jones 7).

Alicia's painting of *Alcestis* functions as a symbolic representation of her inner turmoil and a manifestation of sublimation. Through her art, she navigates her repressed desires and traumas, transforming them into a form that communicates her experiences beyond the constraints of language. This interplay between myth, personal experience, and artistic expression underscores the intricate relationship between the unconscious mind and creative processes.

5. *Trauma And Identity*

In Alex Michaelides' *The Silent Patient*, both Alicia Berenson and Theo Faber grapple with profound psychological traumas that significantly shape their identities and behaviours. Alicia's muteness serves as a poignant manifestation of her fragmented self, aligning with Jacques Lacan's concept of the Real—the dimension of experience that resists symbolization and remains beyond linguistic articulation. This perspective suggests that Alicia's silence is not merely a symptom but embodies the intrusion of the unspeakable into her reality, representing a direct encounter with the Real that eludes representation (Therapeia).

Similarly, Theo's identity is profoundly influenced by his unresolved childhood traumas. His compulsion to "rescue" Alicia mirrors his own sense of powerlessness experienced during his formative years, highlighting the cyclical nature of trauma and its impact on identity formation. Research indicates that early traumatic experiences can lead to identity diffusion, where individuals struggle to develop a coherent sense of self, often resulting in maladaptive coping mechanisms and relational difficulties in adulthood (Frontiers in Psychology). Theo's relentless pursuit to uncover Alicia's truth can be interpreted as a defence mechanism, diverting attention from his own vulnerabilities and unresolved psychological conflicts. This dynamic underscores the intricate interplay between therapist and patient, where the boundaries between healer and the one in need of healing become blurred, reflecting the complex ways in which personal histories and traumas can influence professional roles and relationships.

The Silent Patient delves into the profound effects of trauma on individual identity, illustrating how unaddressed psychological wounds can manifest in behaviours and relational patterns that perpetuate cycles of suffering and hinder authentic self-understanding and connection.

7. The Unconscious and Narrative Structure

In *The Silent Patient*, Alex Michaelides employs a fragmented narrative structure that mirrors the workings of the unconscious mind. The novel alternates between Theo Faber's first-person perspective and Alicia Berenson's diary entries, creating a dual narrative that reflects the layered and often contradictory nature of the psyche. This approach aligns with Sigmund Freud's assertion that the unconscious reveals itself through slips, gaps, and omissions, elements that pervade the novel's storytelling. Freud emphasized that the unconscious mind operates through processes that are not immediately accessible to conscious awareness, often manifesting indirectly through fragmented narratives and symbolic representations. By structuring the novel in this way, Michaelides effectively captures the disorienting experience of navigating unconscious material, allowing readers to engage with the characters' inner worlds and the hidden motivations driving their actions. This narrative technique not only enhances the psychological depth of the story but also invites readers to explore the complexities of memory, trauma, and identity as they unfold within the characters' minds.

The fragmented narrative structure also serves to immerse readers in the characters' psychological landscapes, particularly highlighting the impact of trauma on perception and memory. Alicia's diary entries provide intimate glimpses into her thoughts and emotions leading up to the pivotal event, while Theo's perspective offers insights into his motivations and psychological state. This duality creates a sense of disorientation and uncertainty, mirroring the characters' internal experiences and the elusive nature of truth within the narrative. By employing this structure, Michaelides not only reflects the fragmented nature of the unconscious but also engages readers in a process of piecing together the narrative, akin to uncovering repressed memories or hidden aspects of the psyche. This method effectively underscores the themes of silence, repression, and the search for understanding that are central to the novel.

6. CONCLUSION

In *The Silent Patient*, Alex Michaelides intricately weaves psychoanalytic concepts into the narrative, offering a profound exploration of the human psyche. Alicia Berenson's muteness serves as a manifestation of repressed trauma, aligning with Sigmund Freud's theories on repression and the unconscious. Her silence symbolizes the intrusion of the Real, as conceptualized by Jacques Lacan, representing experiences that resist linguistic articulation. Through her painting, *Alceste*, Alicia engages in sublimation, channelling her repressed emotions into artistic expression, thereby communicating her inner turmoil without words.

Theo Faber's role as both analyst and analysed further underscores the novel's psychoanalytic depth. His interactions with Alicia reveal dynamics of transference and countertransference, where unresolved personal traumas influence the therapeutic relationship. The fragmented narrative structure mirrors the workings of the unconscious, with slips, gaps, and omissions reflecting the characters' internal conflicts. By intertwining these elements, Michaelides creates a narrative that not only captivates readers with its suspense but also invites them to delve into the complexities of trauma, identity, and the unconscious mind.

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