

Talking Bodies: Sexual Abuse, Language, Illness and Dissociation in Camilla Gibb's *Mouthing the Words*

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Camilla Gibb's *Mouthing the Words* (2002) is a coming-of-age story about bodily trauma and the attempts of the main character to escape corporeality. Written as a self-narration, the novel explores the protagonist's (dis)embodied experience of multiple personality disorder and anorexia, establishing a causal relationship between sexual abuse and illness. On the one hand, illness becomes a sort of bodily language to break the silence imposed in early sexualisation and, on the other, a defence mechanism to overcome trauma by dissociating mind from body. This Cartesian approach to existence gives the protagonist only two options: to become fully disembodied, or to try to recover her agency by transforming herself into a fully embodied subject.

Keywords: trauma; sexual abuse; anorexia; language; embodiment; multiple personality disorder

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Cuerpos que hablan: abuso sexual, lenguaje, enfermedad y disociación en *Mouthing the Words*, de Camilla Gibb

Mouthing the Words, de Camilla Gibb (2002), es un *Bildungsroman* acerca de un trauma físico y los intentos de la protagonista por escapar de su propio cuerpo. Escrita en un estilo autobiográfico, la novela explora la experiencia de (des)encarnación del personaje principal mediante un trastorno disociativo de identidad y mediante la anorexia, estableciendo una relación causal entre abuso sexual y enfermedad. Por un lado, la enfermedad se concibe como una especie de lenguaje corporal que rompe con el silencio impuesto por la sexualización precoz, y por otro, como un mecanismo de defensa para superar el trauma, disociando mente de cuerpo. Este enfoque cartesiano sobre la existencia proporciona a la protagonista solo dos opciones: completar su disociación o tratar de recuperar su poder como sujeto.

Palabras clave: trauma; abuso sexual; anorexia; lenguaje; encarnación; trastorno disociativo de identidad

1. INTRODUCTION

Camilla Gibb's *Mouthing the Words* (2002), a work that has received little critical attention, is a coming-of-age self-narration that fictionalises the experiential dimension of the mind-body problem. Born in England to a dysfunctional family, the narrator, Thelma Barley, is a girl with a fertile imagination darkened by trauma. This novel is a tale about the agonising embodied experiences of the protagonist, a victim of incestuous molestation by her father. Being neglected by her mother, who prefers to believe in her husband's innocence, Thelma decides to remain silent about her experiences, even though the abuses continued after the family moved out to Canada to start a new life. Child sexual abuse and the physical transformations caused by puberty are the two principal bodily conflicts that prompt the protagonist to start on a tortuous battle to deny her corporeality and claim control of her traumatised consciousness. Because trauma has been inscribed in her body, Thelma adopts a clearly Cartesian approach in the face of her early sexualisation, an attitude that is materialised in the form of illness, a tangible mechanism to try to achieve disembodiment. At the level of the protagonist's embodied experience, phenomenological philosophy allows for the explanation of the causal relationship between sexual trauma and illness and, at the level of her storytelling, literary theories on narrativity are useful to analyse how Thelma's chaotic bodily experiences are transformed into a coherent account. Experience, perception, memory and language are the cornerstones of the configuration of the embodied subjectivity of Gibb's protagonist, and the use of the first person the mechanism through which readers have direct access to her subjective world.

2. REMEMBERING AND NARRATING THE EMBODIED SELF

Gibb's *Mouthing the Words* should not be studied simply as the story of a girl who is undergoing the transition from childhood to adolescence and adulthood. Although the personal experiences of the protagonist originate in the body, since the central event in this story is sexual abuse, this novel is not a story *about* her body. Instead, bearing Arthur W. Frank's conception of the "wounded storyteller" in mind (1997, 2), this story is in fact narrated *through* Thelma's sexually abused body. Narratives, therefore, are not the result of the workings of the mind, but rather a way to perform embodiment, since, phenomenologically speaking, the self (understood as the embodied self) cannot be separated from narrative (Ochs and Capps 1996, 20). The clearest representation of this interdependence between the embodied self and narrativity is the fact that, in Gibb's book, the protagonist is the first-person narrator of her own experiences, presenting her own vision of the world inhabited by her body. Self-narrations can be considered the imbrication of an embodied self that is undergoing a series of experiences—the "experiencing self"—and the self that is narrating those experiences—the "narrating self" (Cohn 2000, 107), which are "yoked by the first-person pronoun" (Cohn 1978, 144).

From a formal point of view, this novel is divided into two parts, differentiated by a change in Thelma's perception of the world through her body. The first part of the book does not begin with the account of the life of the protagonist, but instead with a description of the world that existed before she was born. The novel starts with Thelma's narration of her parents' story in order to set out precedents about her sexual aggressor, her father. The second part of the book contains Thelma's introspective accounts of her embodied experiences in different stages of her life. By recounting her childhood retrospectively, Thelma introduces two different selves: her past childhood self and her present adult narrating self. This sequential transition from past to present tense occurs when the protagonist narrates her adolescence, a crucial period when she begins to experience her first bodily changes towards maturity. The retrospective narration ends with the chapter entitled "Dog Days and Ice" (Gibb 2002, 83-90), chronicled by the fourteen-year-old Thelma. There are two central topics in this chapter: her resistance to menstruating and becoming a woman, and her resistance to the persistent sexual abuses on the part of her father. The insertion of analeptic as well as proleptic episodes in the second part of the narrative, however, confirms that, even though Thelma's adolescent and adult life is told in the present tense, it is a retrospective account as well, since not only does the narrating self know her past and present self but also her future self. This is reflected in the following excerpt, where the narrator introduces information about future experiences: "She [Vellaine, her neighbour] put her arm around my neck and drew me to her until our foreheads rested together [...] for a time in order to let the healing begin. [...] But that comes later. About twelve years and a whole lot of therapy later, in fact. For now, Vellaine and Charles [her boyfriend] are in the first blissful throes of their material union" (109). It seems that this episode is narrated by no-longer-troubled adult Thelma, who is recounting her past experiences. In this respect, Cohn—who envisions male subjectivity as universal—notes in his theorisations about the narrative modes of presenting consciousness in fiction that "[t]he experiencing self in first-person narration [...] is always viewed by a narrator who knows what happened to him next, and who is free to slide up and down the time axis that connects his two selves" (1978, 145). Experience and narration, therefore, do not take place simultaneously in the second part of Thelma's storytelling.

The whole novel can be interpreted as a retrospective narration and the reason why Thelma recounts past events as if they were present experiences "may indicate a continuing preoccupation; the events are not contained in the past but rather continue to invade a narrator's current consciousness" (Ochs and Capps 1996, 25). Evidently, the central concern of the main character is her corporeality, as she chronicles in the chapter entitled "The Colour Purple" (Gibbs 2002, 97-117), in which the narrator adopts the perspective of the eighteen-year-old Thelma. Her mother's breast augmentation at that moment triggers adolescent Thelma's reflection on her

own body and prompts her to recall her first, involuntary, admission to hospital to receive treatment for anorexia, where she met her friend Molly, a crucial character in Thelma's adult life. It is important to note that, if the whole novel is considered a retrospection, adolescent Thelma cannot be the narrator. The narrator—adult Thelma—chronicles how her younger self perceived both her past anorexic body and her eighteen-year-old body, which differed by ten pounds in weight, and how her adolescent consciousness was transformed so far: “I can live at home rather than in a hospital, and I can think more clearly now. I'm not going that hospital route” (99). Teenage Thelma restores her anorexic embodied self in order to reveal that, in spite of the medical intervention, her body was not “cured,” and it continues to be one of her major preoccupations: “I still lie awake every night kneading my fat in disgust resolving to stop eating, but as long as I don't get my period I think I'll be all right” (106). In fact, despite the several medical and psychological treatments she receives during her adult life, she does not begin to heal until twelve years later, as the narrator claims in the excerpt quoted in the previous paragraph.

Narrating and remembering are modes of identity formation, since Thelma-as-narrator's construction of her past selves allows her to define herself as a subject. As Craig R. Barclay (1994) states, “[t]he remembered self, relative to the present self, is a later development; it is distinct from (but related to) the global vitality of living human organisms, and it is formed through the use of semiotic systems like language, which eventually mediate thought and social activities” (62). In this respect, it is important to distinguish between “traumatic” and “narrative” memory, two terms developed by Pierre Janet (Leys 2000, 105). While the traumatic memory “merely and unconsciously *repeats* the past,” the narrative memory “*narrates the past as past*” (105; emphasis in the original). Traumatic memory is nonverbal and inflexible, and it consists of an array of “constellation of feelings and bodily reactions” (Brewin 2005, 139) that might be re-experienced when “one element of the traumatic experience is evoked” (van der Kolk and van der Hart 1995, 163). As such, Gibb's novel is the result of Thelma's narrative memory, while the protagonist's traumatic memory is the cause of her problems with language and the trigger of her dissociative strategies during her childhood, adolescence and adulthood.

Until the moment when Thelma starts to articulate her past experiences in the form of a narration, her identity is half-formed because, due to her conflicts with verbalisation and the secrecy of sexual abuse, she is unable to use verbal language to express her trauma; as she says, “silence has seemed like the only option” (Gibb 2002, 7). Once, however, Thelma comes to terms with her traumatic past and becomes the narrator of her own life, she is able to know her multiple selves (real and imaginary) and identify herself as Thelma Barley, as she explains in her description of her past experiences: “I wasn't well then. Maybe I wasn't even Thelma Barley then” (194). Language, and its absence, therefore, will be a crucial factor in Thelma's story.

3. THE SILENT TRAUMA AND THE TALKING BODY: SEXUAL ABUSE AND ILLNESS AS ALTERNATIVE LANGUAGE

Thelma suggests in her account that her father had been abusing her before she was three years old, the age at which she starts her retrospective narration about her childhood. This is relevant in the analysis of trauma because, during this stage of development, children begin the process of acquisition of language, constructing what Daniel N. Stern calls the “verbal self,” and which is essential in the process of construction of a self-narrative (1985, 162). Experiencing trauma during this critical period had important consequences in Thelma’s (inter)subjective development. It is clear that Thelma has acquired language and that she is able to use it to express meanings in her self-narration, but in her story it plays a symbolic role. There is a clear confrontation between her verbal self, who is the narrator, and her non-verbal self, who is the abused experiencing self. Thelma-as-narrator uses language to recount her experiences, while Thelma-as-experiencer is a non-verbal subject that uses more “primitive” imagery to express the trauma of sexual abuse. Susan Billingham, in her analysis of this novel, notes that those experiences that cannot be spoken are converted into symbols in Thelma’s dreams, nightmares and imaginary friends (2010, 101).

The stigmatisation that sexual aggressions inscribe in the bodies of victims is the source of self-blame. In Thelma’s case, such feelings were infused since she was a child through the role of “naughty secretary” assigned to her by her father when they “played office”: “sometimes he says, Miss so-and-so, I think you’ve made an error in typing this correspondence. I think you’ll have to lie down while I discipline you” (Gibb 2002, 21). Although stigma of sexual abuse is invisible, Thelma felt shame and guilt for the abuses she was subjected to because of the secrecy imposed by her aggressor. Even when she confided in her aunt and explained to her the office role-play with her father, she continued to feel guilt: “I felt very nervous after telling Auntie Esme. I knew I’d done a bad thing because the secretaries [...] were supposed to be a secret” (22). After this episode and her mother’s decision to believe that her husband was not an abuser, the family moved out to Canada to start a new life. From that moment, Thelma did no longer talk openly about sexual abuse. It is only when she is an adult that her self-blame is transformed into blaming her father.

For the protagonist, her traumatic powerlessness was reflected in her incapability to break the silence that involves intra-familial sexual abuse. Her determination of keeping the secrecy of the abuses reflects the relationship between stigma, memory and trauma: “By not speaking. No raising of voice, no anger, no defensiveness, just submission. It proves itself to be much simpler than engaging in fruitless debate. In choosing to remain silent I can sometimes manage to forget that anything at all has happened” (91). As the protagonist claims at the beginning of her narration, “worlds don’t exist without words” (7), and by remaining silent, she does not acknowledge, either privately or publicly, that she has been sexually abused, since once something is spoken, it is in some sense materialised and becomes part of reality. In fact, Thelma-as-narrator does not talk overtly

about the sexual attacks she suffered; instead, she narrates from a naive perspective the “games” her father forced her to play. And it is in this way that she was able to substitute the unarticulated real world by the world of her imagination.

Sexual abuse and the social taboo it represents are language-destroying. Thelma’s powerlessness to use her mouth to speak is also related to the nature of the sexual violence perpetrated by her father, as it involved mainly oral sex. As such the protagonist’s mouth became the liminal space between the inside and the outside of her body. During a long period of her life, the only function her mouth served was sexual, which together with the familial and social pressure to remain silent dissuaded her from using it to articulate speech, and more specifically, to articulate her experience. It is Thelma’s narrating self that is able to recount her past experiences coherently and transform trauma into language, a fact that confirms that her experiencing self is not the narrator. Her experiencing self does not have strong and individual speech, since the physical abuses from her father have deprived her of any kind of agency. Her story, therefore, is a story about recovering her power by means of crucial decisions, like becoming anorexic, travelling back to her homeland or becoming an outstanding student at college in England.

The sexual abuses suffered by the protagonist had distorted her sense of being-in-the-world since the traumatic experiences narrowed her world to a microcosm within her home, preventing her from apprehending the real world in its full form and dimensions, and assigning her a passive role. Differently from her childhood neighbour in Canada, Vellaine, who discovered a different world outside her hippie parents’ house, Thelma actually thought that the world beyond the walls of her house contained the same cruelty and trauma she suffered indoors: “Well, my house was not the world,’ she [Vellaine] said mournfully. [...] ‘That’s funny, I thought *my* house was the world,’ I said” (109; emphasis in the original). Thelma developed a feeling of unhomelikeness in her physical houses in England and Canada that mirrors her feeling of unhomelikeness in her sexually abused body. Thus, in the same way as she tried to escape her home and find her own place in the world on several occasions, she attempted to escape her stigmatised body. This exercise of “discarnation” can only be accomplished if there exists a dissociation between mind and body. In this sense, in Thelma’s story illness has a double purpose, being both a defence mechanism to destroy the body and the trauma it carries, and an alternative non-verbal bodily language to break the silence imposed in sexual abuse. Thelma’s sick body therefore becomes a talking body, since, as Drew Leder claims in *The Absent Body*, unlike health, which is “a mode of silence,” illness is “a manner of speech” (1990, 91).

4. NOURISHING MINDS, STARVING THE BODY: THELMA’S DISEMBODIMENT THROUGH MULTIPLE PERSONALITY DISORDER AND ANOREXIA NERVOSA

Dissociation or disembodiment is the subjective manifestation of the Cartesian dualism, expressed in the separation of mind and body as independent entities, since individuals affected by trauma claim that they do not feel embodied, i.e.,

they feel that they *are not* their bodies. Instead, they feel they *have* a body, of which, paradoxically, they claim disownership. In this regard, Peggy O'Connor considers sexual violence to be an experience that triggers dissociation between the mind and the abused body as a survival mechanism, and that in such cases "a Cartesian dualism may be attractive, and perhaps even life-saving [...] Like Descartes, there is a strong identification with *being a mind*, and understanding themselves to be *not-body*" (2013, 73; my emphasis). O'Connor notes that the most common responses of victims of sexual abuse in their mind claiming control over their body in the context of physical violence include: (a) transforming the body into a weapon to prevent future aggressions; (b) depriving the body of any kind of attractiveness to repel sexual aggressors; or (c) adopting radical or violent stances towards the body, in order to prove that "they are not bodies, but minds" (74-75). In each case, the mind tries to impose its demands on the body in order to annul the loss of control and powerlessness of their corporeality. In Gibb's novel, Thelma adopts a Cartesian approach in two different modalities: both a long-term and a short-term dissociation. She develops different dissociative strategies that involve either finding shelter in the world of her imagination or attacking her body.

Her short-term dissociation is performed *during* the episodes of sexual abuse and it consists in Thelma's mental abstractions from immediate experience as she leaves her body. Immediate dissociation is a common defence mechanism in certain cases of trauma, as victims tend to evade the traumatic scene and "look at it from a distance or disappear altogether, leaving other parts of their personality to suffer and store the overwhelming experience" (van der Kolk and van der Hart 1995, 168). The novel's most severe event of episodic dissociation occurs during the last sexual abuse she suffered, which was during her adolescence. The fact that Thelma was aware of the implications of the incestuous relationship with her father triggered her most desperate attempt at disembodiment, which consisted in her progressive transformation into an icicle. Even though Thelma claims to have achieved mastery of bodily metamorphosis after practicing daydreaming since she was a child, she can only become disembodied intermittently. From a formal perspective, this experience is captured in the alternation of the mental voice of the protagonist-as-icicle (in italics in the quotations below) and the speech of her father:

I am otherworldly. I am where you cannot reach me. I am hanging from a roof forty feet above the world.

*

[...] "You're lucky your Daddy gives you this kind of attention. No one else will. Even if you are a begging slut. Come on, Thelma, be good. Do this for me. Stop being self-absorbed."

*

[...] *Clear, this sky is blue and I am shining, crystal, watching. Children reach up and out to me. Too high. I am dripping on their foreheads, they are stretching their tongues to catch me but they are missing.*

*

“Come on, please your Daddy. No one else is going to love you.”

*

I am rigid crystal glowing, giving rain, liquid silver. Water running over eager faces.

(Gibb 2002, 88-90; emphasis in the original)

Gibb’s representation of dissociation during sexual abuse reflects the confrontation between Thelma’s real world, where her father is like a dog on top of her, panting, and the world of her imagination. This fluctuation reveals her internal struggle to desert a body that is anchored to a cruel reality. Instead of having a body that *feels* sexual abuse, she imagines she has an inert body, cold and rigid, without sensations. She is an icicle, one that is melting and that will eventually disappear, a symbol that can be understood as a prolepsis of her vanishing anorexic body, as she aspires to bodily nothingness and emptiness, being with “[n]o blood, no eggs, no stomach, no breasts, no claws, no sighing, no dogs panting on top of me” (87). However, although the icicle is disappearing (just as her abused body, anchored in the real world, is disappearing from her imagination), she acknowledges that it will become a new element: water. The fluidity of this new symbol reflects the versatility of Thelma’s embodiment since, while she can become a new substance, the world and all the material bodies that live in it, including hers, are condemned to die. Before being able to transform her body into a melting icicle that gradually becomes water, she had metamorphosed into other objects and animals, like dragonflies that clung to the wall to quietly observe the world in which the sexual abuse was taking place and stones and a twigs that lay “hard, cold, without knowing, without feeling” (82).

By isolating consciousness from the immediate stressful reality during short-term dissociation, victims are constructing “fixed ideas”—a term coined by Pierre Janet in 1898—or “foreign bodies”—as developed by Sigmund Freud—subconscious traumatic memories which cannot be absorbed into consciousness, and which are like parasites (Rojo-Pantoja 2015, 148, 150). However, these alien memories do break into consciousness through the subconscious, either while the person is asleep (nightmares) or awake (hallucinations, flashbacks). In the novel, during her adulthood Thelma has recurrent nightmares and hallucinations involving sexual violence, like the paranoid episode when she imagines being sexually abused by her university classmates (Gibb 2002, 115-116), and when she daydreams recalling her father’s abuses, an introspective event represented in the form of stream-of-consciousness:

please don't. please don't pant. this is vomit. this is the inside of me thrown out. please don't punish. i cannot keep my mouth closed and swallow. please don't kiss me like you love now. please don't love me in the moment of killing. i am a hole into which evil comes. i can kill myself. just kiss me nicely on the forehead and i will spare you the trouble. just go away and i promise i will be good. (138-139; emphasis in the original)

The horrific visions that invade Thelma's mind trigger her panic about love, socialisation or being touched by other people, and provoke the activation of different strategies to achieve dissociation from traumatic memories. In this way, a victim's construction of "foreign bodies" may ultimately come to control their behaviour and become a pathological condition, such as Multiple Personality Disorder (MPD), where "fixed ideas develop into entirely separate identities" (van der Kolk and van der Hart 1995, 164).

MPD was Thelma's first dissociative attempt to find more stable and prolonged protection from the world inhabited by her body during her childhood. Camilla Gibb seems to be well-acquainted with scientific studies of MPD, since the protagonist's behaviour mirrors the symptomatology of real-life sexually abused patients described by Leslie Young, who defines multiple personalities as "separate and distinct persons, either conceived of as having separate bodies or sharing the same body but not the same body image or history of embodiment" (1992, 95). As contended earlier in the analysis of narrativity, Thelma-as-experiencer perceives her embodied identity in a fragmented and incoherent way. As a child devastated by trauma, Thelma sought shelter in her imagination with her three imaginary friends: Heroin, Ginniger and Janawee, a squad of co-conscious selves that had a life and a body of their own. By introducing her friends in the third person in her narration, Thelma detaches from them, presenting them as autonomous characters with clearly defined unidimensional personalities. In this sense, she describes Janawee as the most vulnerable. "Janawee's the baby so she doesn't talk yet. She doesn't have any teeth yet" (Gibb 2002, 19), Thelma explained to her aunt when she was a child. The narrator tells that Janawee was also "scared of almost everything and she was small and fragile as a baby bird and slept nestled in my underarm at night because she was afraid of the ghoulies that lived under the bed" (19-20). Heroin, on the other hand, represents the opposite temperament: "[she] was the biggest, the bravest, the most grown-up. She slept apart from us in the cupboard under the staircase [...] sometimes she lost patience with me and told me that I was too old to 'behave like such a baby,' but usually she nodded and shook her head *without words*" (19; my emphasis). Although these two imaginary friends embody antagonising behaviours, both have in common their reluctance to use language, a fact directly connected to Thelma's struggle to express her trauma verbally. As regards Ginniger, Thelma describes her as her double:

Ginniger was, well, just like me. Somewhere in the middle. Sometimes a mother to Teddy [the bear] and Blondie [the doll] and Janawee, sometimes Heroin's baby girl, sometimes Daddy's naughty secretary, sometimes his pet, sometimes Mummy's little inconvenience, sometimes Daddy's little helper, sometimes Willy's sister, Auntie Esme's petal, or Grannie Puff's big girl now, but always rather moody and timid and quiet. She said very little and she rarely, if ever, laughed. (20)

Each imaginary friend personifies a fragment of Thelma's half-formed embodied identity. Thus, while Janawee represents Thelma's fears and fragility, Heroin, as her

name suggests, embodies the authority and determination that Thelma lacks in her real life, as well as the protection she needs in her vulnerable situation. Ginniger, on the other hand, is the protagonist's *doppelgänger* and a sort of substitute embodied character when she wanted to escape reality, not only when she was her father's "naughty secretary." Thelma explains this duality between her self and Ginniger in the following way:

Although it was Heroin I talked to, it was Ginniger who just was. We never had to talk because we would only say exactly the same thing. There were either two mes—Thelma and Ginniger—or one me in two bodies, but either way we were inseparable and indistinguishable to others except by name. Only I seemed to know who was talking. (20)

To Thelma, her self and Ginniger are two embodied selves that are identical, but, at the same time, different. It is not a case of two selves in the same body, but of two identical selves in independent bodies. Thus, in the same way that Thelma created three different personalities, she also created three different bodies with a symbolic meaning: Janawee has an infantile, non-sexualised body—the body that Thelma wants to achieve through anorexia—Heroin has a strong body—a body that can be used as a weapon against her aggressor—and Ginniger has a copy of Thelma's body, in both shape and trauma. The fact that Thelma created not only a series of *alter egos* but also several *altera corpora* reflects her urgency to detach herself from her abused body. Therefore, when Thelma switched from one personality to another, she also substituted her own body for another.

The intercorporeality of the protagonist and her imaginary friends, however, is problematic, since, from Thelma's perspective, it seems that each friend has their own body, but from an external perspective, they spoke and lived *through* Thelma's body, as her father explains to her teacher, Mrs Kelly: "She has an extremely fertile imagination. She has these imaginary friends, in fact sometimes she speaks to us in their voices and we think she might be schizophrenic" (48). In this respect, in spite of the autonomous corporeality of Heroin, Ginniger and Janawee, Thelma does not establish the boundaries between her own embodied self and the selves of her three friends. As her mother states: "She's always got herself confused with other people. Whenever we used to address her as Thelma, she'd say, no that was Janawee, or Ginniger or..." (67). Since she was a child, Thelma has never been fully embodied, as her body did not really "belong" to her, but to her father. As such Thelma's activation of MPD is thus "an ingenious albeit extreme solution to the difficulties of embodiment created by extreme and sadistic sexual abuse" (Young 1992, 95). However, because she "shared" her body with her imaginary friends, her MPD also triggered a severe crisis of identity in the protagonist, who was hardly able to define herself in adulthood: "I am sometimes not sure if I am me, or Heroin, or the Thelma who has been undergoing a concurrent evolution on this side of the Atlantic, or even, sometimes, my mother. I am not sure if this was her life at age twenty-five and I keep meaning to write to her and ask her" (Gibb 2002, 131).

Yet, the intervention of Thelma's imaginary friends in her story is sporadic. As she grew up, Thelma became emotionally unresponsive to the abuses of her father, because she found hope in the naive idea of being adopted by her teacher, Mrs Kelly: "I let him do his disgusting things and I dreamed of Mrs Kelly and thought, Soon you won't ever be able to do that to me again" (45). When she planned to leave home and ask her "real mummy," Mrs Kelly, to take her to her "real home," she packed the indispensable things and took with her only the imaginary friends that she could not live without: "I had decided to leave Janawee and only take Heroin with me. Ginniger had virtually melted into harmonious existence with me, so there was no question of a decision to be made where she was concerned" (45). Although Thelma didn't in fact leave home at that point, Janawee vanished temporarily and Ginniger was no longer an external embodied self, but became part of Thelma's self and body. Heroin, on the other hand, remained in her original form and became a crucial character in the protagonist's adult life. Thelma recovered her three friends later in her story, and she narrates their re-encounter after they decided to go back to their homeland, England. Although the narrator does not specify the reason or exact moment when her imaginary friends left Canada, there is an apparent change in her approach to disembodiment that is probably a consequence of their migration. Because she is no longer able to interchange her body with those of her three friends, Thelma is left alone with a corrupted body that she cannot escape. From that moment, her story becomes a brutal battle between mind and body in order for her to prove the domination of the former over the latter and thus demonstrate that she is not merely a body that can be assaulted.

During her transition from childhood to adolescence, Thelma abandons the world of her imagination and starts to focus on the potential bodily changes triggered by puberty, a fact that activates a new long-term dissociative mechanism: anorexia. As Thelma approaches biological maturity, she makes a crucial decision that determines how she will construct her embodied identity during most of her adult life: "I have decided never to be a woman" (86). Thelma is able to transform anorexia into a weapon to control her body in order to postpone her progressive transformation from a child's body into an adult female body and to delay menstruation. In this sense, the protagonist of Gibb's work defines her sex as being the cause of the abuses of her father. Thus, erasing sexual abuse from her corporeality implies erasing its femaleness. However, Thelma adopts a more radical attitude towards her body. As O'Connor explains, anorexia is a mechanism by means of which sexual abuse survivors can make their corporeality literally disappear in order to prove they are not simply a body but a mind (2003, 74). Adolescent Thelma, in this sense, decides to become invisible and that involves starving her body until it becomes transparent, in the literal and phenomenological sense. She wants to "be thin and little and rigid as a twig and hide in places out of sight from the world" (Gibb 2002, 86). Thelma's anorexia is not only a weapon to destroy her own abused body but a weapon of resistance, as it is an instrument to deter her sexual aggressor by exhibiting a sexually undesirable body: "He's telling me I'm dirty and he thinks I might be contagious. 'Your hair's starting to fall out,' he sneers. 'You're disgusting'" (90).

The victim's distortion of her body image is related to the nature of the sexual abuse suffered "[s]ince sexual assault involves intimate bodily intrusion, real or implied physical threat, and often severe humiliation" (Schechter, Schwartz and Greenfeld 1987, 316). By deciding not to be a woman, Thelma is also rejecting the Western cultural standards of female beauty, which are represented by her mother. In fact, Thelma resorts to anorexia as a way to avoid being like her mother, i.e., the woman who married her father: "I don't want to have a stomach and cook dinner and lie back and say, 'Oh, Douglas' with my father clambering on top of me and panting like a dog" (86). As in Fredrik Svenaeus' phenomenological analysis of anorexia, the protagonist is "refusing to be a woman by living out cultural ideals of femininity (slenderness) to a point which the body ceases to be female (cessation of menstruation and disappearance of female forms)" (2013, 83). All these factors led Thelma to instrumentalise anorexia to avoid the development of "secondary sexual characteristics, and menstruation," and achieve "a shutdown of sexual impulses and other physiological reminders of a painful and shame-bound sexual past" (Kearney-Cooke and Striegel-Moore 1994, 306), as Gibb's protagonist explains in the following digression:

As for my breasts, I am successfully suppressing all evidence of them and doing everything in my power to prevent a period from ever staining my life. I weigh one hundred and five pounds and I am five foot nine. My mother has taken me to the doctor, who has said, "She simply doesn't have the body fat to sustain the production of..." What? Blood? I know I've got plenty of that because sometimes I see how much I can squeeze out of the ends of my fingers. I haven't got the courage yet to take a slice into anything bigger, but I will, I'm sure of it. (Gibb 2002, 98-99)

The main character tries to substitute the absence of menstruation with the blood squeezed from her fingers as a way to prove that her body still works "normally." In addition, at this point of her life, she considers another extremist option to leave her body behind once and for all: suicide. In a certain way, however, anorexia might be considered a form of suicide, performed in a more progressive way, for the complete starvation of her body would ultimately result in death.

Thelma's MPD and anorexia, at first sight, seem opposing conditions. The first focuses on her imaginative capacity to *create* interchangeable selves and corporealities, while the second represents the power of the mind to *destroy* the body. However, the mutability and fluidity that characterises Thelma's MPD, as well as her capacity for abstraction, were also an essential element in the development of her anorexia. Originally an *illness*—understood as the subjective experience of unhealth—controlled by the protagonist, her anorexia was transformed into a *sickness* when she entered the medical context and was diagnosed, thus becoming part of the social paradigm. In this sense, Bryan Turner's definition of anorexia as "the talking disease" is relevant in the analysis of Thelma's condition since, according to him, "becoming sick is like

becoming member of a social (and therefore linguistic) community” (1990, 159). Whereas Thelma’s MPD prevented her from developing coherently in terms of her socialisation and transmitting meanings with a single voice, her anorexia, apart from being visually accessible to others, is, as Turner describes it, a vehicle through which to claim that the “[l]oss of appetite is phenomenologically parallel to the loss of speech, and both conditions point to the absence of social voice” (167). Therefore, her weight loss, together with the other physiological consequences of anorexia, are the elements necessary to configure an alternative mode of speech for Thelma. Although anorexia proved to be effective for Thelma’s purposes, it cannot be conceived as a sustainable mode of dissociation, since, far from transforming her material body into a transparent entity through starvation, she comes to perceive it as a continuous obstacle, due to the excessive attention she had to pay to it in order to control her weight and menstruation. In fact, the protagonist, in a reflection about her past anorexic self, realises that she was not able to escape embodiment:

While everybody was so preoccupied with their bodies their breasts, their exotic dancing, their “bonking” I would devote myself to logical arguments and Faustian bargains. Of course it didn’t occur to me then that as anorexic I was probably the one most preoccupied with the body. I thought I had transcended my body by refusing to yield to its basal demands. I wasn’t really going to make much of a lawyer until I could come to terms with the fact that I inhabited both a mind and a body. At least if I focused my mind I’d inhabit something. (Gibb 2002, 113)

Once Thelma had to discard anorexia as a practical mechanism through which to “escape” her body, she had to look for other options to prove that she was a mind. She tried to give purpose to her life in order to stay focused on her intellect, and so decided to study Law. During her student life, in her efforts to cultivate her mind, Thelma did not take care of her body: the privation of food was substituted by the privation of sleep and healthy habits, leading to the chaotic disobedience of her mind. Hence, in the same way as Thelma felt betrayed by her shameful abused body, she would soon experience the betrayal of her mind due to her “fixed ideas” and her incapacity to distinguish reality from imagination. Her chaotic lifestyle reached its apex in the chapter entitled “Thelma of Distinction” (118-124), when the protagonist injures her own face by scratching her eyes in an episode of derangement, which she claims not to remember. Disciplining the mind with study was not enough to control a consciousness corrupted by trauma, as the protagonist argues: “It is worse here, in my head. You don’t need eyes and ears to be here” (117).

All her efforts to overcome sexual abuse failed. Her powerlessness to control the uncontrollable resulted in a severe episode of depression, which took place while she moved into a vicarage where other five tormented women lived. Martin Seligman’s “learned helplessness” model of depression (2002, 315) explains Thelma’s realisation

that responding to or trying to gain power over her body is useless. During sexual abuse, Thelma lost her opportunity to act and, from that moment, all her actions became futile attempts to regain agency. The powerlessness she could not overcome through MPD and anorexia intensified and it was transformed into hiddenness in a gloomy, dusty and grim house described as “the world of women and ghosts” (Gibb 2002, 139), that is, the world of women who have lost their agency and carry the burden of trauma. Her insomnia became more serious due to her recurrent daydream of a giant mouth trying to swallow her: “I am not sleeping, I am dreaming again of the wide, open mouth that sounds like thunder, trying to inhale the world. I am hovering here, the room long and narrow below me, my body shrunk to the size of a twig, a stiff insect clinging to the wall above my pillow” (139). The appalling mouth is here a symbolic reminder that she was still voiceless due to her traumatic past. At that point, Thelma wanted to escape both her body and her mind and she did so through drug use in order to reach a state of semi-consciousness, which in its turn prompted several episodes of derealisation and depersonalisation.

In this sense, both anorexia and depersonalisation, the latter understood as “a detached and alienated attitude towards oneself, including one’s body,” which comes to be perceived as a corpse or phantom (Colombetti and Ratcliffe 2012, 145), can be defined as adaptive mechanisms for survival in trauma, although, in extreme cases, such mechanisms may endanger the person’s life. In the same way as anorexics can starve their bodies to death, depersonalised subjects who feel totally detached from their body can actually destroy it. However, the difference between depersonalisation and anorexia is that Thelma still aims at preserving her self and mental capacities. She is conscious that she can only limit the function of anorexia to controlling the demands of her body, rather than actually destroying it, since the destruction of the corporeality would imply the destruction of the self. The total fragmentation of the embodied subject, therefore, is not produced in the case of Thelma, her depression being only a transitory state of her embodied experience. In fact, the protagonist herself claims that her narration is not “a suicide note the length of a novel that will never be finished” (Gibb 2002, 237), proving that, in spite of all her attempts to achieve dissociation, living means acknowledging that she *is* her body.

5. HOPEFUL FUTURES: RE-EMBODIMENT AND THE RECOVERY OF LANGUAGE

Thelma’s experience of re-embodiment comes about as a result of her progressive rediscovery of the outside world. Suddenly, she realised that coming to terms with her body was the only way to become a subject that physically inhabits the real world: “I held [the] cup between my hands. I held it hard, grateful for the feel of it, for the tangible evidence of a world outside myself” (Gibb 2002, 161). Thus, she understood that being-out-of-the-body was not a viable model to survive, even though the options offered were limited to being normal or being abnormal. However, instead of

approaching her healing process as a transformation into a “normal person,” Thelma starts a process of restoring her internal and external familiarity with her own body: “That was the moment we got reacquainted—me and my face. Up until then I’d been too afraid to look into this thing they called a mirror because there’d be some woman there going ‘blah blah blah,’ and I didn’t know what the fuck she was on about” (159). However, Thelma did not take her first steps in the actual world alone. The protagonist re-experiences the world through Heroin, her strong, giant imaginary friend and her “unspoken one,” to whom she lends her body “as [a] vehicle to express herself” (183). The embodied Heroin’s hyper-efficiency at work and the fact that Thelma finally found her place in the world in a room of her own are the positive experiences that encourage her eagerness to act as an embodied subject. Heroin’s intervention in Thelma’s life helps the latter regain agency. Her empowerment through her establishing of personal relationships with others and progressing in therapy with psychiatrist Dr Ruth Novak is the result of her progressive assimilation of Heroin in her embodiment: “I swallow Heroin in order to gain strength” (191). Hence, the more powerful Thelma was, the smaller Heroin became.

One of the first signs of Thelma’s regained agency is related to language. Although she still had problems transmitting meaning, her newly re-acquainted body was the medium to express her ongoing process of healing through her wearing of extravagant and colourful clothes: “Dr N. says it shows real personality” (209). The end of the book is an epiphany of the protagonist, who finally rediscovers her relationship with her mouth. Heroin reminds her of the time she used her mouth to bite her father’s face, an event Thelma had erased from her memory, even though it was one of the few situations in which she showed agency and contestation to her aggressor’s demands upon her body. Thelma’s inability to speak due to the silence imposed by social taboos forced her to be voiceless and to *mouthe* words, instead of speaking overtly about her experiences. Thus, Thelma realises that she has a mouth, which she can use, not to provide sexual pleasure, nor to bite or to eat, but to speak: “My mouth! My God! This is me speaking. Not mouthing. Not typing and twitching” (237). She learns she can use her mouth as a weapon of dissidence against the norm, as she closes her narration with a celebration of difference told with her own *voice*: “No wonder I do not make people comfortable. I am a mirror. I have far too many things to say” (238). With the last words of the book, as Thelma is finally able to listen to her own voice, her life as an embodied subject begins.

6. CONCLUSIONS

The Cartesian approach of Thelma’s embodiment did not help her overcome a trauma that invaded both her de-gendered body and her exceptionally gifted mind. Although anorexia helped her externalise the experiences she was forced to keep secret, as well as to express her autonomy to decide about her own body, it transformed her corporeality into an overwhelming obstacle unable to sustain life and at the risk of disappearing

completely. Thelma's paradoxical logic in facing trauma is reflected in Young's study of eating disorders in that patients usually claim that "[t]o survive, I must destroy my body. But if I destroy my body I can't survive" (1992, 96). Survival is not possible, not only because there is not a body machine to sustain life but also because the mind can only exist if there is a body that perceives and experiences the outside world. In the end, it was her relapsing into MPD that offered Thelma an alternative form of life that will help her recover language, full embodiment and her identity.

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