

## Of “Half-Remembered Dream[s]” and “Unanswered Mystery[ies]”: The Trope of Trauma in *Inception* and *Alan Wake*

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Abstract: Despite their genre-specificity, the narrative constructions of the movie *Inception* and the video game *Alan Wake* are both built upon the same concept—that of trauma. While trauma-theorists generally agree on what constitutes structural causes for (individual) trauma, the issue of representation is widely debated. It is the aim of this article to investigate the representation of traumas across media to shed some light on the question of whether trauma can only be psychologically categorized or be analyzed as cultural trope.

Keywords: *Inception*, *Alan Wake*, Trauma, Trope, Différance, Poststructuralism

“The unanswered mystery is what stays  
with us the longest, and it’s what we’ll  
remember in the end.” (*Alan Wake*)

### Introduction

In the cinematic introduction of the video game *Alan Wake*, protagonist and writer Alan Wake comments on the nature of nightmares, describing them as “unanswered mystery[ies]” (*Alan Wake*). In the very first scene of Christopher Nolan’s 2010 movie *Inception*, the protagonist’s employer and business magnate Saito also comments on the epistemological status of the dreams occurring throughout the movie. They are only “half-remembered,” as he remarks (*Inception*). In both *Alan Wake* and *Inception*, the protagonists, Alan Wake and Dominick Cobb respectively, wander through their dreams in order to answer the unanswered mysteries and to fully remember the only half-remembered. The reason for their quests through epistemologically unstable dreams is psychological trauma. While Alan Wake lost his wife Alice on a vacation trip where she seemingly drowned in a lake next to their cabin, Cobb witnessed his wife’s death on their wedding anniversary.

At the very core of both *Inception* and *Alan Wake* lies a concept that lacks a precise definition, yet defines both its psychological and artistic outcome: trauma. Definitions of trauma fall short on cohesion (cf. Sielke 386), they are only *half*-precise, just as the dreams occurring in the movie *Inception* and the video game *Alan Wake* are only *half*-remembered.

This article explores how *Inception* and *Alan Wake* utilize the unstable status of the trauma concept and thus position themselves at the intersection of trauma theory, cultural representation of trauma and even psychopathological descriptions of trauma. I wish to show that the interdependence of popular cultural representations of trauma, such as *Alan Wake* and *Inception*, psychopathology, and cultural theory surrounding the concept of trauma pave the way for an understanding of trauma as cultural trope.

## Constructing Trauma

I would like to follow Anne Whitehead's framing of trauma. She argues that contemporary trauma studies are rooted in the American Psychiatric Association's (APA) inclusion of post-traumatic stress disorder (PTSD) into the Diagnostic and Statistical Manual of Mental Disorders in 1980 (Whitehead 4). In its fourth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* from 1999, the APA defined "traumatic stressors" (Criterion A) as events

involving direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity or witnessing an event that involves death, injury, or a threat to the physical integrity of another person; or learning about unexpected or violent death, serious harm, or threat of death or injury experiences by a family member or close associate. (424)

The APA further explains that traumatic events do not have to be "experienced" or "witnessed," but can also be "learned about" to qualify for a PTSD diagnosis (*DSM-IV* 424). As a consequence of this rather broad definition of Criterion A, traumatic stressors have to cause numerous psychological responses in order to meet the requirements for PTSD. Symptoms include, but are not limited to: "[R]eexperiencing of the traumatic event" (Criterion B); the "avoidance of stimuli associated with the trauma and numbing of general responsiveness" (Criterion C), and symptoms of "increased arousal" (Criterion D) (*DSM-IV* 428). These symptoms must have a duration of "more than 1 month" (Criterion E) and the patient has to show "clinically significant distress or impairment in social, occupational, or other important areas of functioning" (Criterion F) in order to qualify for a PTSD diagnosis (*DSM-IV* 429).

In the fifth and most recent edition of the *DSM* from 2013, the APA clearly distances itself from an all-too fixed set of criteria to diagnose PTSD and now affirms that “[t]he clinical presentation of PTSD varies” (*DSM-5* 274). The APA furthermore links traumatic events to other psychological responses to it. Responses to “traumatic or stressful event[s]” may “include reactive attachment disorder, disinhibited social engagement disorder, post-traumatic stress disorder (PTSD), acute stress disorder, and adjustment disorders” (*DSM-5* 265). Thereby, the APA acknowledges that “[p]sychological distress following exposure to a traumatic or stressful event is quite variable” (*DSM-5* 265). All of these varying responses to traumatic events are subsumed under the new category of “trauma- and stressor-related disorders” (*DSM-5* 265).

A contextualization of the progress in diagnosing the aftermath of witnessing, experiencing or learning about a traumatic event in the larger publication history of the *DSM* is necessary at this point. The first inclusion of PTSD into the *DSM* occurred in 1980 in the *DSM-III* which, according to Edward Shorter, is a “political, not a scientific document” (*History* 12). It is political precisely because it enabled a large group of traumatized Vietnam War veterans to receive a viable diagnosis of a psychopathologically manifest disorder: PTSD. Robert Spitzer agrees that the publication of the *DSM* has become a “cultural event” because it “defines what is the [patient’s] reality” (qtd. in Shorter, *History* 17). And indeed, as Allen Frances adds, “mental disorders don’t really live ‘out there’ waiting to be explained. They are constructs we have made up—and often not very compelling ones at that” (96). Thus, the definitions delivered and regularly altered by the APA represent what Edward Shorter calls the cultural “symptom pool” (“Reinvention” 26). Shorter explains that this pool of symptoms “defin[es] certain symptoms as illegitimate” or legitimate (*Paralysis* x). These symptom pools are, according to Shorter, forged by social debates and political movement (“Reinvention” 26). Frances Allen adds a relativist touch to this analysis and concludes that “[o]ur mental disorders are no more than fallible social constructs” (99).

These social constructs are a product of psychopathology, cultural debates, and representations of human responses to trauma. The cultural and political debates can deliver the necessary social movement to reform what psychopathology defines, hence rendering the grounds for a viable diagnosis of PTSD contested (cf. McNally). Studies from psychological

scholarship evaluate possibilities of diagnosing PTSD by means of diagnostic criteria other than what is prescribed by the APA. Even the dramatic increase of PTSD diagnoses in connection to a change of diagnostic criteria has been held against the APA's description of PTSD.<sup>1</sup> Consequently, psychological scholarship adds to the debate that what the APA defines merely suffices as psychopathological manifestation of a socio-politically fostered "medicalization of human suffering" in response to trauma (Rosen, *Preface* xii).

Besides the psychological manifestations of human responses to trauma, trauma theorist and psychiatrist Judith L. Herman claims that "[t]he conflict between the will to deny horrible events and the will to proclaim them aloud" (1) lies at the center of psychological trauma. Herman's central conflict of the response to trauma correlates to the APA's Criterion C ("avoidance of stimuli associated with the trauma and numbing of general responsiveness") (*DSM-IV* 428), yet adds a paradoxical relationship of the victim to the traumatic event. The conflict to "deny horrible events and the will to proclaim them aloud" (Herman 1) is not only at the center of the psychological outcome of trauma, but also of the socio-political debate fostering societal acknowledgment of trauma victims. Herman argues that "[t]he systematic study of psychological trauma therefore depends on the support of a political movement" (9). Herman sharply analyzes the history of psychological definitions and descriptions of its treatment from a sociological perspective, concluding that "[r]epression, dissociation, and denial are phenomena of social as well as individual consciousness" (Herman 9).

This central conflict of repressing, yet urging to utter the trauma essentially goes back to Josef Breuer and Sigmund Freud's findings of trauma within cases of hysterical women. They remain crystal clear as to the relationship of cause and effect. Trauma can, according to Breuer and Freud, not be understood as an "agent" that induces a psychological neurosis. It is the memory of a trauma that induces a psychological response to the individual (Breuer and Freud 6). The unconscious experience of such an overwhelming event leads to a bodily reprocessing of that very unconscious memory of the event (Leys, "Death" 48). The negotiation of the horrors of a traumatic event and its character of having only been unconsciously experienced in the first place is what Herman points to in her analyses. This

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<sup>1</sup> Detailed accounts of diagnostic flaws as well as statistical tendencies of overdiagnosis can be found among studies undertaken by Richard McNally and Gerald Rosen (cf. McNally and Rosen, *Posttraumatic*)

central dialectic of the phenomenon of trauma—its status of being horrible, yet unconscious—is what is most striking within the trauma-theoretical discourse.

The very core of the concept of trauma is that it remains unknown. It is only unconsciously experienced and remembered. Trauma theorist Cathy Caruth writes that “trauma is not locatable in the simple violent or original event in an individual’s past, but rather in the way that its very unassimilated nature—the way it was precisely not known in the first instance—returns to haunt the survivor later on” (*Unclaimed* 4). This complicated relationship between conceptualizing, witnessing, and acknowledging trauma challenges the epistemological status of trauma per se. We do not and we *cannot* truly know a trauma, yet the human reactions to it are immanent and manifest in psychopathological as well as cultural-theoretical discourses of trauma, as has been argued so far. From this perspective, Cathy Caruth makes a radical claim:

I would propose that it is here, in the equally widespread and bewildering encounter with trauma—both in its occurrence and in the attempt to understand it—that we can begin to recognize the possibility of a history that is no longer straightforwardly referential (that is, no longer based on simple models of experience and reference). (*Unclaimed* 11)

She concludes that history can no longer be understood as “straightforwardly referential” sequence of events (*Unclaimed* 11). It can only be understood as a self-reflexive composition of events and traces of trauma, rather than a linearly structured sequence of events. In a combination of psychological and cultural trauma theory, Caruth claims that our understanding of history has been altered by the nature of trauma.

Historian Dominick LaCapra takes up on the consequences of traumas to history and adds that “undecidability and unregulated *différance* [...] collapse all distinctions, including that between present and past, [...] and prevail in trauma” (21). LaCapra’s reference to Jacques Derrida’s idea of *différance* is more than fitting in the context of trauma. As Derrida prominently writes, “[d]ifférance is what makes the movement of signification possible only if each element that is said to be ‘present,’ appearing on the stage of presence, is related to something other than itself but retains the mark of a past element” (287). LaCapra’s conclusions are based on the assumption that the concept of *différance* refers to a signifier signifying a past, unknowable element. Signifiers we use in language, in Derridean terms, are

at work only in a system of binary oppositions as indicated by Ferdinand de Saussure (cf. Derrida 279-82). A word we say only gains its meaning by being opposed to other words, or, as Derrida writes, “*différance* as the irreducibility of the trace of the other” (Derrida 279; my emphasis). Consequently, the arbitrariness of language also *defers* the meaning of a text, altering the meaning to something that may not initially have been thought of, but is now. What remains in the process of assigning meaning to a text is the “past, unknowable element,” a trace in the Derridean sense (Derrida 287).

This general idea of *différance* is the basis of Derridean deconstruction within the school of thought prevalent in poststructuralism and postmodernism. Why add the notion of poststructuralism into the trauma-theoretical discourse, one might object. As mentioned above and argued by Dominick LaCapra, *différance* prevails in trauma, as both concepts refer to something that is inherently present, yet unknown. While LaCapra takes the concept to a larger structural dimension by attesting certain alterations to history in general, the trauma-theoretical discourse focuses more on the individual experience and response to trauma. Yet, both are rooted in the same idea. However separated general poststructuralist ideas by Derrida are from theoretical descriptions as well as from psychopathological definitions of trauma, they do share the basic principle of the unknown trace inherent in representation. Trauma similarly refers to a past, unknowable element and thus equally becomes a trace, an unknown memory. Ruth Leys contributes to the resemblances of the principle of *différance* and trauma theory. She writes that language can only signify trauma “by a failure of witnessing or representation” (*Trauma* 268). Only through failed representation or witnessing is it possible to give testimonial to trauma.

So far, the theories surrounding manifestations of trauma have been bridging psychopathology with cultural and philosophical trauma theory. This shows that the societal negotiation of acknowledging victims of trauma and defining its symptoms and psychological outcome is interdependent with psychopathology. Furthermore, cultural representations of trauma are but a mirror of what is culturally, societally, and psychopathologically negotiated in the discourse surrounding trauma and its outcome. Richard McNally indicates, that “it is likely that PTSD is neither a natural kind nor a purely socially constructed kind. There is a third possibility. PTSD may count as an *interactive kind*” (11). This interactive kind is “affected

by the very process of classification itself,” thus PTSD may be “co-created via the interaction of psychobiology and the cultural context of classification” (11). Of course, McNally is referring to but one manifestation of trauma, i.e., PTSD; yet, his thesis still has value for the concept of trauma at a larger scale. A culture’s debate, so to speak, *constructs* trauma. But the trauma concept also constructs cultural narratives of it. This is a circular, interdependent process. The entering of this circular process of classifying and representing trauma into the public sphere will be shown on the basis of an analysis of two popular cultural works—the movie *Inception* and the video game *Alan Wake*. They are two examples that show how trauma is inherent in contemporary cultural production as they stem from two of the most popular contemporary media—the theatrical motion picture and the video game. Both works are part of, but also actively shape the circular process of classifying and representing trauma.

### **Trauma Constructs Narrative—Analysis of *Inception***

In *Inception*, U.S. American protagonist Dominick Cobb is on a journey to perform inception—a technology-based method that enables a specialized intelligence unit to enter other people’s dreams and move around in their unconscious,<sup>2</sup> and, unknowingly to their subject, plant ideas that become conscious. The main plot of the movie consists of a travel through multiple dream layers where Cobb’s team is trying to successfully plant an idea into their subject’s unconscious. This main plot, however, is not the focus of the analysis at hand, it is the central conflict of the protagonist that deserves further attention—the death of Cobb’s wife Mal. Cobb was unable to stop his wife from jumping out of the window at their wedding anniversary and now feels responsible for her death. Hence, Mal’s death qualifies for a traumatic stressor within the terminology of the APA’s *DSM* (Criterion A). The appearance of Mal in Cobb’s dreams symbolizes the “projection of his dead wife Mal, the

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<sup>2</sup> In the movie, the term “subconscious” is used to refer to what Freudian psychoanalysis would label unconscious. In fact, Freud clarifies that there are “two kinds of unconscious—the one which is latent but capable of becoming conscious, and the one which is repressed and which is not, in itself and without more ado, capable of becoming conscious” (Freud 15). The first he calls “preconscious” and the second “unconscious,” while the unconscious is “repressed” and the preconscious can become conscious without external triggers (Freud 15). For reasons of simplicity of the argument, I will from this point on refer to the unconscious as what is referred to in the movie as subconscious and further subdivided by Freud into unconscious and preconscious. Neither movie nor video game are able to draw a clear distinction between the two and Freud agreed that preconscious and unconscious are only separate in a descriptive sense, but in a dynamic sense they “fall into one class,” that of the unconscious (Freud 61).

pathological stain he now brings with him into any dream” and thereby gains control over the entire narrative (Fisher 38). Cobb’s traumatic symptoms of “reexperiencing the event” (APA, *DSM-IV* 424) appear in the form of Mal as a representation of his trauma. As such, she threatens the operation to perform inception by sabotaging Cobb’s undertaking.

However, Cobb tries to hide this traumatic stressor from his colleagues and the audience. Only slowly does the movie reveal that Cobb has stored the trauma of feeling responsible for Mal’s death deep inside his unconscious. His traumatic memories are stored in a dreamworld that, as Alan Paul writes, metaphorically “manifest[s] as a hotel with different surreal spaces inhabiting each floor” (n.pag.). In a memorable scene of the movie, Cobb’s colleague Ariadne secretly enters Cobb’s dream at night to reveal why Mal sabotages their operation. Ariadne finds herself in an elevator of a hotel with different memories of Cobb’s stored on each level. In these scenes, the narrative mood changes from zero focalization to Ariadne as focal character (cf. Genette 189–98), as the camera is either depicting exactly Ariadne’s perception or closely following her through Cobb’s unconscious. It is no coincidence that the tellingly named Ariadne<sup>3</sup> is the one who enters Cobb’s memory hotel and tries to solve the puzzle of his trauma. When Ariadne arrives at the traumatic episode, the night Mal died, Cobb soon arrives in the same scene and becomes the focal character as the camera now switches from close-ups of Mal, Ariadne, and Cobb to Cobb’s subjective perception of the scene.

By means of changing the narrative mood, the seemingly accurate depiction of the traumatic event becomes a subjective representation of Cobb’s trauma. In fact, his memories are still controlled by his projection of Mal, not himself. They are not memories of Mal, but projections of Cobb’s guilt because he feels responsible for Mal’s death. Mal, representing Cobb’s guilt, attacks Ariadne and Cobb, who have just entered the scene. Mal tries to break free shouting “You said we’d grow old together,” while Cobb refuses: “Please, I need you to stay here just for now” (*Inception*). Cobb tries to control his traumatic memories by locking them into his unconscious, thus avoiding the “stimuli associated with the trauma” (APA, *DSM-IV* 428). However, Mal still continues to enter the dream layers of the movie as unconscious projection of Cobb’s trauma and thus continuously represents his “recurrent

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<sup>3</sup> Ariadne appears as a character in Greek mythology. She is the one who provides Theseus with the means to find a way out of the Labyrinth of Knossos (cf. Woodard 169).

and intrusive distressing recollections of the event, including images, thoughts, or perceptions” (428).

Additionally, *Inception* resembles Judith Herman’s central conflict between “the will to deny horrible events and the will to proclaim them aloud” (1), as Cobb confronts himself with his guilt in the form of unconscious projections of Mal in his dreams. However, he hides his loss deep inside his unconscious memory hotel. When analyzing Mal as “pathological projection” of Cobb’s trauma, the will to deny the horrible event of his wife’s suicide and the will to still keep the memory of it adhere to Herman’s definition of a trauma (Fisher 38). Thus, Cobb’s trauma is indeed trapped between being uttered loudly, and being incarcerated in the basement of Cobb’s mind.

Cobb’s guilt is only explained towards the very end of the movie. It appears to be final closure when Cobb, seemingly, gains back control over his traumatic symptoms projected through Mal by telling Ariadne about his guilt. After that, his projected trauma in the form of Mal, seizes to sabotage Cobb’s operation and the inception is performed. It seems that Cobb may have overcome his trauma. When Cobb indicates that he, unwittingly, performed inception to Mal while traveling into the deepest layer of their unconscious—the so-called limbo—together, the narrative voice switches from heterodiegetic to homodiegetic narration (cf. Genette 243–47). Cobb’s comments are added in a voice-over to the scenes that unfold as analepsis of Cobb’s and Mal’s past. Through a change of narrative voice, the subjectivity of Cobb’s narrated past becomes apparent. Whether he is truly responsible for performing inception on Mal and consequently for her suicide, remains unknown. His confession is a homodiegetic and unreliable narration of the past by a traumatized protagonist. These narrative complexities are only established within scenes explaining his trauma, as they are the only ones switching to a focal character or utilizing a narrative voice-over by the traumatized protagonist Cobb. By means of narrative alterations, his memories can therefore be interpreted as subjective and constructed.

The ending of *Inception* furthermore challenges the perception of closure by reflecting the notion of the unknown within trauma. Cobb’s undertaking succeeds and inception is performed. He has found his peace with Mal in the dream spheres of the journey by confronting his grief and letting her go. When he returns home to finally see his children

again, he wants to know whether he is actually experiencing salvation, or still dreaming. To tell dream from reality, the characters of *Inception* use “totems” they manufacture themselves, so only they can know all their features and dimensions. The totems thus represent a last stand to identify the frame of reference. Cobb uses a spinning top as his personal totem. In the real world it always slows and falls, in the dream world it continues to spin indefinitely. When Cobb spins the top for one last time, he is distracted by the laughter of his children and approaches them, leaving behind the still spinning top. The camera slowly moves toward the top until it fills the screen. The screen blacks out while the top is still spinning and the movie ends.

As it turns out, the trauma that Cobb seemingly overcame might as well have been just another dream layer. The actual trauma remains well hidden because reality as the layer of reference is never present. The top Cobb uses is not even his own. It had originally been Mal’s totem, but she hid it in a safe after years of living in limbo. Therefore Cobb’s ability to tell dream from reality is ultimately dependent on or even tainted by Mal; he did not gain back control over his trauma. The trauma still controls his ability to tell dream from reality—in form of the token. Mark Fisher notes that “a totem, it should be remembered, is an object of faith” (42). Cobb’s faith in a totem that represents his traumatic stressor, Mal, indicates that he is still haunted by his trauma and has not overcome it. The movie’s embracing of the trauma trope lies, I argue, within this key moment because it remains unknown whether Cobb actually overcame his trauma, or whether he imagined doing so unconsciously. The same holds true for the traumatic event of Mal’s death, as it is represented in subjective narrative mood and voice. Hence, the specificity of a traumatic event, its status of remaining unknown, is reaffirmed. What the audience perceives as traumatic event may just as well be an unconsciously and subjectively altered version of Cobb’s memory. His trauma is hence not only represented by projections of Mal, but also in the epistemological status of the entire narrative. Whether what has unfolded before the eyes of the audience is referring to reality or unconscious imaginations remains unknown. The spinning top as representation of Cobb’s trauma ultimately hides the true nature of his trauma from the audience.

Accordingly, the movie manages to not only embrace parts of the psychopathological descriptions of trauma and its outcome, but also what in cultural and philosophical theory is

explained to be that which “does not simply serve as a record of the past, but precisely registers the force of an experience that is not yet fully owned” (Caruth, “Introduction” 151). *Inception* reinforces what Caruth explains as the unknowable within the process of being traumatized (Caruth, *Unclaimed* 4). Kenneth B. Kidd accordingly attests that the trauma is “essentially not available to its own speaker” (124). Trauma refers to the trace of the memory, to the aftermath of witnessing a traumatic event, and to the event that induces psychological responses. Cobb does not, as the ending of the movie suggests, know whether he has truly gained back control over the trauma. The unknowable in the process of Cobb’s traumatization manifests in the epistemological instability of the narrative—what is real and what is traumatically shaped imagination is never revealed.

### ***Alan Wake’s* Trauma Constructs Narrative Complexity**

*Alan Wake* firmly establishes the concept of trauma on yet another media channel—that of the video game. Despite the game’s predecessors that utilize the concept of trauma,<sup>4</sup> *Alan Wake* is the first to fully embrace its contradictions and problems of representation, thus completely building its narrative complexities on one traumatic event and its psychological fallout. Set in the fictional town of Bright Falls in the Pacific Northwest, the center of *Alan Wake’s* diegetic worlds are the nightmares Alan Wake started having after his wife Alice fell into Cauldron Lake and never reappeared—neither dead, nor alive. This generates the central traumatic event for Alan, as he is unsure whether Alice disappeared and why, or whether she drowned in the lake. Accordingly, the event qualifies for a traumatic stressor as described by the APA as Alan “learn[s] about [the] unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or close associate” (*DSM-IV* 424). The nightmares represent Alan’s journey through his unconscious to uncover why and how his wife fell into the lake and possibly drowned when he was taking a walk. It is a journey to overcome his trauma.

The game starts with a level that is described as a nightmare by the autodiegetic narrator Alan Wake who comments on the events in-game in voice-overs in the past tense. The

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<sup>4</sup> Other video games that take up on the concept of trauma are, for instance the *Bioshock* series, *The Last of Us*, or the *Silent Hill* franchise, and numerous more that generally utilize a traumatic event in the background story of the protagonists. However, the narrative complexity as analyzed here shows how the trauma discourse’s ambiguities are completely embraced.

narrator Alan Wake is writing the story of the game that is played in an additional diegetic level the gamer learns about later. In one of the cabin's rooms, Alan sits in front of a typewriter and writes the manuscript for his novel *Departure* which also serves as the manuscript of the game that is played. Thus, there are two narrative levels: First, there is the narrative level of Alan Wake sitting in the cabin writing the novel *Departure*; second, there is the manuscript for *Departure*, which is also the actual game that is played. The top level is only depicted in cinematic scenes inserted into the gameplay. On this narrative level, the camera angle switches to total views and close-ups and we see Alan Wake, the writer, as he talks to himself in the cabin in zero focalization. The narrative situation in-game is entirely different. As indicated, writer Alan Wake functions as autodiegetic narrator of the events unfolding before the eyes of the player while the camera is positioned closely behind the back of the character Alan, who is controlled by the player. The third person perspective technically indicates zero focalization, yet it is no objective camera that enables the player to freely move around, it only follows the movement of the controlled character. Additionally, effects of a blurred sight when hit by an enemy or blindness when looking into bright lights are directly transmitted to the screen, thus indicating a focalization on the protagonist (cf. Genette 143–47). These different modes of narration enable the interpretation of subjectivity of in-game events. The subjective processing of the dreams the player is playing thus enable glimpses into Alan's unconscious.

The complexity of the narrative frames is further complicated when a third narrative level occurs—that of Thomas Zane. He is a character that never physically appears in-game, but infrequently talks to the character Alan Wake. Thomas Zane is the narrative instance who wrote the story of Alan Wake sitting in the cabin. Consequently, there are three narrative levels, but only one is played by the player. The others are established by either heterodiegetic narration or metaleptic voice-overs occurring in-game, when Thomas Zane explains the goal of the level. In these metalepses, the camera angle shifts from a following camera situated closely behind the character Alan to total views showing the location of the level's goal, indicating the omniscient status of Thomas Zane. Thomas Zane thus interrupts the narration of Alan Wake via metalepsis by engaging in a conversation with the character Alan Wake, as, for instance, he asks him to “follow my light” (*Alan Wake*). He even changes the physical environment of the game in order for Alan to be able to reach the goal.

But the second narrative level of Alan writing the manuscript for *Departure* also intermingles with in-game events. The player can find numerous of the hidden manuscript pages in all levels. It is possible, yet not necessary, for the player to read these pages. They set up a complementary narrative framework that fills the gaps of the game with additional information, and sometimes foreshadows dangers. Once found and picked up by the player, they are read out by the autodiegetic narrator of Alan Wake in the cabin. In other instances, Alan Wake finds TV sets that show Alan sitting in the cabin writing the story. These elements manifest the inter-connectedness of all narrative levels and thus showcase the game's narrative complexity. Yet, they are all induced and constructed by the central trauma haunting Alan.

All of the mentioned narrative levels are built upon one central traumatic event: Alice's possible death by drowning in the lake of Bright Falls. The traumatic event is not fully revealed to the player. In a cinematic scene cut into the game, the player only sees Alan jumping into the lake in order to rescue Alice from drowning. Then the screen blacks out and the sound of Alice screaming for help is followed by an unknown voice whispering "Keep going Alan, wake up!" The possible death scene responsible for traumatizing Alan is carefully avoided. Alan wakes up in a car-wreck and the narrator comments: "Waking up in a crashed car felt like I had woken from one nightmare and entered another. I couldn't remember how I got there. All I knew was that something terrible had happened to Alice" (*Alan Wake*). In one moment, the player is moving the character towards the traumatic event of Alice's drowning, while in the next he wakes up in another place, at another time without knowing why. The only trace of the previous nightmare is Alice's voice that throughout the game continues to disrupt the spatial and temporal setting of the game (cf. Fuchs). Known places are revisited in a reconfigured state or a different time. These interruptions of the spatio-temporal dimensions of the game frequently occur in the form of ana- or prolepses when Alan dreams about scenes from his and Alice's past or takes a look into the future where he is writing the narrative to his own nightmares (cf. Fuchs 146–53).

The interruptions are induced by either "stimuli associated with the trauma" (APA, *DSM-IV* 428) in the form of Alice's voice screaming for help or occurrences of the "dark presence" (*Alan Wake*). Both represent Alan's trauma. While her voice resembles psychopathological

criterion C for a diagnosis of PTSD, the dark presence is a rather symbolic representation of what continues to haunt Alan. On his journey to find Alice, he is haunted by sinister attackers that have been “taken” by the darkness and apparently want to stop him from finding out the reason for his wife’s disappearance. Shooting the attackers is only possible once the darkness that controls them is destroyed with Alan’s most important weapon—his flashlight. This central ludological element of fighting the darkness establishes the game’s leitmotif of darkness versus light. Successfully reaching the goal of each level and finding Alice strongly depend on defeating the dark presence that not only confronts Alan with attackers, but also physically changes the surroundings of the game’s setting to hinder the player’s proceeding. The dark presence thus, quite literally, changes the nightmares. It also manifests as an elderly woman called Barbara Jagger who, as the play learns later, is the unknown voice whispering to Alan and triggering spatio-temporal disruptions in the narrative of the game. Jagger, as is explained by Zane in one of his voice-overs, is Zane’s own wife, who mysteriously drowned in Cauldron Lake decades ago.

Alan Wake’s trauma hence manifests as dark presence that he has to fight in order to bring (the proverbial) light into the darkness, to gain back control over his spatially and temporally confusing memories. It seems that the trauma of losing one’s wife reoccurs on all levels of narrative, it happened to Thomas Zane and it happened to Alan Wake, which is why he is eagerly trying to “write Alice back into life” (*Alan Wake*). It is the central traumatic stressor that manifests as both Alice’s voice and dark presence and continuously interrupts the narrative. What the player plays as memories, might hence just as well be traumatically altered states of Alan’s unconscious as indicated by the subjectivity and traumatic constructedness of in-game narrative voice and mood.

Furthermore, the reason for the disappearance of his wife and the answer to the question of which layer, if any, represents reality, remain entirely unknown. The game simultaneously resembles psychopathological descriptions of trauma and cultural theoretical concepts of trauma. *Alan Wake*, like *Inception*, reflects the notion of the unknowable within the process of being traumatized by not presenting reality as a point of reference. Through spatio-temporal confusions, the game carefully hides the central traumatic event from the player, it is only indicated that Alice may have drowned, yet it is unclear whether she actually drowned

or not. Even the last scenes of the video game do not provide an answer to the overwhelming central question of the game whether Alan is dreaming or awake and whether Alice is still alive or not. After Alan has defeated the darkness towards the end of the game, the last cinematic scene leaves a lot of room for speculation. The player finds Alan Wake walking into a room with the typewriter commenting:

I could feel Alice's presence close by. I understood what I had to do now. I knew how to write the ending to *Departure*. There's light and there's darkness. Cause and effect. There's guilt and there's atonement. But the scales always need to balance, everything has a price [...]. There's a long journey through the night back into the light. (*Alan Wake*)

Alan understands that on all three narrative levels, Zane's, his novel's protagonist's and his own, there is no "balance" between "guilt" and "atonement" and none between "light" and "darkness" (*Alan Wake*). What is symbolically represented as balance between light and darkness, guilt and atonement, cause and effect ultimately refers to Alan's entrapment between the will to "deny horrible events and to proclaim them aloud" (Herman 1). For some reason, Alan holds himself responsible for Alice's possible death. Yet, throughout the game he has resisted proclaiming it aloud. He has enabled the darkness as manifestation of his own unconscious to deny his responsibility. After his monologue, the player hears the clicking of keys on the typewriter. Apparently, Alan starts writing the manuscript pages of his own nightmares towards the end of the game. At this point, the two narrative streams of in-game nightmares and fictional story on the manuscript pages are merged. It seems as if Alan is starting to unveil his trauma. The next scene of the game brings the player back to the game's beginning in the cabin by the lake of Bright Falls. The player gains back control of Alan's character who wanders through the darkness. Alice's voice occurs: "I'm leaving you, Alan," followed by voices familiar from the traumatic event unfolding at the beginning of the game shortly before Alice disappeared in Lake Cauldron when she said "What are you doing Alan, put the light back on" (*Alan Wake*). Again, these spacio-temporal interruptions inserted by voice-overs indicate the unreliable epistemological status of what is played. Yet, the closer both player and protagonist come to unfold what really induced the trauma, the less separated all narrative levels become.

These last voice-overs ultimately make Alan write an ending to *Departure*. *Departure* thus represents Alan's attempt to find a valve for uttering his trauma, yet does not provide the full

amount of the traumatic event. Alan is indeed equipped with the ability to talk and write about his loss, but he does not find closure. In fact, he tries to control his nightmares by authoring their script, hoping that his own fictional ending of the nightmares will also put an end to his trauma in the real world. It seems as if Alan's trauma can only be speculated about. It maintains its status of the unknown. It becomes a trace in the Derridean sense.

For a second time, the player is witness to Alan searching for Alice in the cabin until he jumps into the lake. Finally, the player finds a scene of the lake, but without Alan. We only see Alice drifting underwater in the lake until she gains back her consciousness, swims up and climbs out of the lake. The screen blacks out and the game is over. As much as this scene provides closure to questions of narrative complexity—the narratives of nightmare and manuscript pages are finally merged and explained—there are more questions than answers. It remains a mystery to the player how the narratives of Thomas Zane and *Departure* are connected. Likewise, the nature of Alice's disappearing is not revealed, it remains unknown what happened to Alice and whether Alan was or is in some way responsible for what happened. The subjectivity and confusion of narrative voice and mood emphasize the status of the unknown in the process of Alan's traumatization. Like *Inception*, *Alan Wake* makes use of psychopathological, as well as cultural and philosophical theories surrounding the trauma discourse in contemporary scholarship. The unknown in the process of traumatization is represented as traumatically altered memory which is never completely revealed. It constructs the multiple, overlaying narrative levels, disrupts them and thus defines the narrative complexity of the game as a whole.

### **Conclusion—Trauma as Trope?**

Popular cultural representations of trauma, such as *Alan Wake* and *Inception*, position themselves at the intersection of trauma theory and cultural production. Both works have shown to not only insert a traumatic event as discourse element into their narrative, but to embrace what trauma theoretical scholarship defines as such—in psychopathological and cultural-philosophical dimensions. The traumatic events in movie and video game do not only qualify for a PTSD inducing traumatic stressor, but also essentially shape the construction of narrative. By representing the notion of the unknown within the process of being traumatized, movie and video game manage to reflect on the problems of representing

trauma. Both *Inception* and *Alan Wake* take the audience on a journey attempting to fully grasp the only half-remembered, to answer the unanswered mystery. But exactly by not answering the unanswered mystery, by not fully remembering the half-remembered, *Alan Wake* and *Inception* communicate the failed communication that is inherent within trauma. Thus, by representing the failure of trauma communication, they manage to give testimonial to trauma.

Sabine Sielke indicates that “trauma now frequently [...] works as a trope of the complexities of signification and its losses” (386), but also as “sign of our times” in the age of postmodernism (Kansteiner 194). *Alan Wake* and *Inception* are but two examples of popular works displaying how trauma works as a trope for the “complexities of signification and its losses” by reflecting upon the unknown within trauma. Trauma is no longer only perceived in psychopathological or cultural-theoretical dimensions, it has entered the public cultural sphere. Through popular mainstream works like *Alan Wake* and *Inception*, the contemporary perception of trauma is realigned at the intersection of psychopathology and what McNally refers to as “cultural context of classification” (11). The transference of that circular process of classifying, defining and evaluating dimensions of trauma to the public cultural sphere is emphasized by the popularity of movies like *Inception* and video games like *Alan Wake*. Psychopathology and theories of trauma shape the narratives of popular cultural works, while these very works likewise, in an “interactive” way (McNally 11), shape psychopathology and cultural theories of trauma. This reciprocal relationship indicates how trauma can be interpreted to be functioning as trope within contemporary cultural production.

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