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The Sparrow's Fall: Self's Mergence with Identity in Louisa May Alcott's *Hospital Sketches*

Travis Martin
Eastern Kentucky University

In *This Republic of Suffering* Drew Faust describes Civil War hospitals as “especially dangerous places...nurses—Louisa May Alcott prominent among them—regularly fell victim to typhoid, smallpox, and even heart failure brought on by the conditions and demands of their employment” (140). In the environment Faust describes, Louisa May Alcott “would have given much to have possessed the art of sketching, for many...faces became wonderfully interesting” (33). Alcott’s desire to depict hospitalized soldiers comes to fruition in her 1863 collection of letters turned fiction, *Hospital Sketches*. Although Alcott’s account is presented as fiction, it contains many levels of truth, embodying the type of story central in most debates concerning truth and authority within autobiography.

Alice Fahrs refers to *Hospital Sketches* as “a fictionalized account of Alcott’s brief experiences as a nurse in Washington” (2) while acknowledging that the story is the product of Alcott’s very real experience written to her family in a series of letters (29). Scholars classify *Hospital Sketches* as fiction because it is signed by Nurse Periwinkle, Alcott’s narrator and alter ego (24). Elaine Showalter explains that the letters developed into a series of sketches and then into a book: “When she turned the sketches, originally written for the Boston antislavery paper *The Commonwealth*, into a book, Alcott added...Tribulation Periwinkle, a doughty spinster who goes to Washington because she wants something to do, and not because she understands very well where she is going” (xxvi). Alcott’s experience remains intact but the author does not. *Hospital Sketches* stands as an example of how truth and authority in autobiography become suspect, while simultaneously allowing for significance and meaning to emerge.

In *Fictions in Autobiography* Paul John Eakin seeks to isolate and define both the author and truth in life writing: “Autobiographical truth is not a fixed but an evolving content in an intricate process of self-discovery and self-creation, and...the self that is the center of all autobiographical narrative is necessarily a fictive structure” (3). Eakin’s vision of the shifting nature of personal and historical “truth” explains Alcott’s need for a fictional narrator. A distinction between Alcott

and Periwinkle is unnecessary. There are two separate and competing narrators at work in *Hospital Sketches*.

In the beginning of the story, as Alcott prepares to leave for the Hurly-Burly House, her voice slowly diminishes. However, *Hospital Sketches* is a collection of letters, written in real time during the author's experience. Therefore, it is possible to watch as Alcott systematically redesigns her personality to prepare for what she will re-experience through narration. Alcott uses Nurse Periwinkle to provide the emotional distance needed to translate her letters—the witnessing of death, dismembering of bodies and shattering lives—for a larger audience. At the same time, narration allows Alcott to recover repressed memories and integrate them into her psyche. *Hospital Sketches* is a continuum on which a fragmented part of Alcott's "self," embodied in Periwinkle, finds itself propelled forward by trauma, to meet and join with a greater "identity," that travels backward through the recollection of the same trauma. At the point in the story where Periwinkle fails to provide the emotional distance needed to endure the Civil War hospital experience, Alcott resurfaces as a fully developed identity.

Eakin claims that "self" becomes fiction in autobiography because of the shifting nature of truth. Truth and self are symbiotic and extreme situations like those described by Alcott reveal how trauma, perspective, and even the functioning of the brain alter an individual's perception of the past. In *Living Autobiographically* Eakin focuses "the version of ourselves that we display not only to others but also to ourselves whenever we have occasion to reflect on or otherwise engage in self-characterization" (xiv). Periwinkle is a perfect example of an author engaging in self-characterization and combining "selves" in an effort to work through trauma. The character that emerges at the end of *Hospital Sketches* is an amalgamation of life experiences—an "identity" comprised of both conceptual and real versions of Alcott.

The conceptual self comes from the narration of normal experience or the act of identity formation (Eakin xiv, *Living Autobiographically*). However, events can occur that transcend what is considered normal experience, affecting the circumstances that occur in the process of identity formation. Traumatic experiences create what Eakin calls "dysnarrativia" or breaks in normal identity formation (140). Dysnarrativia stems from Post-traumatic Stress Disorder (PTSD), the coping mechanisms of emotional distancing and numbing, and first-hand experience with traumatic events. In "Not Outside the Range: One Feminist Perspective on Psychic Trauma," Laura Brown lists the symptoms of PTSD: "nightmares, and flashbacks; avoidance

symptoms, the marks of psychic numbing; and the symptoms of heightened physiological arousal: hypervigilance...a distracted mind. But first and foremost, *an event outside the range of human experience*" (100, Brown's emphasis). Brown highlights a very important facet of the condition: it is not necessary to experience war up close to develop the condition.

Henry Krystal elaborates on the psychic numbing and distancing inherent with PTSD, differentiating between a freezing up, surrendering, or panicking more common in battle and a "psychic closing off" more often associated with prolonged traumatic experiences. Krystal claims that a psychic closing off "permits a certain automatonlike behavior, which is necessary for survival in situations of subjugation, such as prison and concentration camps" (81). In *Hospital Sketches* Alcott engages in a psychic closing off immediately after being placed in a hospital replete with death, sickness and suffering and not at all dissimilar to Krystal's aforementioned trigger to automatonlike behavior. Alcott manages the dysnarrativia, or experience outside the range of normal human experience, by repressing her own identity and taking the form of Nurse Periwinkle to relate her tale.

Alcott's journey begins with an unexpected disappointment: She receives an assignment to the Hurly-Burly House instead of the Armory Hospital where she wants to work. When her brother suggests that she should not go, Alcott says, "I was wavering in my secret soul, but that settled the matter, and I crushed him on the spot with martial brevity—'It is now one; I shall march at six'" (3). Fear, "wavering in [her] secret soul" settles the matter. This point in the story is the first instance of Alcott denying her own fearful character and latching onto the traits that later constitute Nurse Periwinkle. Eakin's view of the self shows how Alcott's statement holds meaning on two different levels. First, Alcott defines herself in the context of the linear story, performing the act of narrating self in the way that "we display not only to others but also to ourselves." Second, Alcott acts in the realm of retrospection, as the author creating the "extended self, the self in time" through the process of autobiographical memory retrieval (*Living Autobiographically*, 137). Alcott's identity becomes more whole as Nurse Periwinkle's story continues. As the author recollects and records her experience, she incorporates the aspects of Nurse Periwinkle that she gained while serving as a Civil War hospital nurse but lost through dissociation.

Alcott says in her journal that she "often longed to see war" (Fahrs 1). However, in *Hospital Sketches* she acknowledges the naiveté in this assertion. Premonitions of the traumatic

for Periwinkle reflect memories of the traumatic for Alcott as the story carries them both to the Hurly-Burly House. Alcott recounts (while Periwinkle records) the alteration of their identity into something more suitable for the task at hand: “I add some of the notes made by the way, hoping that they will amuse the reader, and convince the skeptical that such a being as Nurse Periwinkle does exist” (11). As a result, Alcott experiences the trauma of Hurly Burly twice, since she must relive her trauma, again, through the creating and directing of Nurse Periwinkle.

Diction is the catalyst for Periwinkle’s emergence. Alcott delivers her experience in short, choppy segments that are straight to the point, perfectly suited for the task at hand, and best described as militaristic: “Very sleepy. Nothing to be seen outside, but darkness made visible; nothing inside but every variety of bunch into which the human form can be twisted, rolled, or ‘massed’” (12). In this description Alcott provides both Periwinkle’s take on the situation as well as the first effect of the traumatic upon Alcott’s recollection. Truly, her description of the “human form” is not flattering, but more importantly, it is how Alcott will view the human body in the pages to come. Well before any traumatic experience in the story, Alcott exhibits signs of a traumatic past. But for Periwinkle, who is moving forward and not looking back, PTSD serves as an explanation of how the narrator will handle the trying events to come. In this instance, the “truth” is that Alcott suffers from PTSD. However, Alcott’s need to narrate causes “self” to shift form into Periwinkle around a common, traumatic center in the Hurly-Burly House.

As dysnarrativia takes over *Hospital Sketches* on the train, Alcott becomes too tired to continue. Alcott goes to sleep and Nurse Periwinkle assumes control as she/they step into the Hurly-Burly House. Nurse Periwinkle awakens to panic: “My heart beat rather faster than usual, and it suddenly struck me that I was very far from home” (18). And because Alcott is unprepared for what she is about to experience, so she escapes into another world: “A boy opened the door, and, as it closed behind me, I felt that I was fairly started, and Nurse Periwinkle’s Mission was begun” (18). Why does Periwinkle refer to herself in the third person? The answer goes back to the linear projection of self and the task of autobiographical memory retrieval that creates identity. In the context of the story, Periwinkle is now in charge. However, narrative control still belongs to Alcott, who is writing the story from a safe, somewhat-more-comfortable future. Alcott gets to pick and choose her battles, deciding which memories necessitate dissociation through a fictional narrator.

In *Living Autobiographically* Eakin contends that this sort of narrative control is what comprises the very need for autobiography, likening “the autobiographical imperative,” or the compulsion to record life events, to the facet of developmental psychology known as “memory talk” (152). Memory talk is the act of learning what it means to refer to ourselves in the first-person: “We learn to tell stories about ourselves, and this training proves to be crucial to the success of our lives as adults, for our recognition by others as normal individuals depends on our ability to perform the work of self-narration” (152). When Alcott refers to herself as Nurse Periwinkle, however, it becomes clear that memory talk is an act that takes place in the adult world as well. In many ways, Nurse Periwinkle is the child creating self and Alcott is the adult incorporating that self to create identity through narration. Nurse Periwinkle’s narrative is that of a damaged identity and Alcott must face the psychic numbing and trauma that constitute Periwinkle in order to incorporate the experiences of her past into her greater identity.

Alcott and Periwinkle exist as two points at the ends of a continuous line. Both points are propelled towards the center by trauma. The first point represents Tribulation Periwinkle and self-characterization. As the linear progression of *Hospital Sketches* unfolds, Nurse Periwinkle’s character becomes more developed. Periwinkle is both the creation of Alcott and the creation of the trauma that she experiences. As she moves forward, conquering traumatic experiences, Periwinkle’s self becomes more clearly defined. However, Periwinkle lacks the quality of hindsight. In many ways she is a forward progression that cannot be pinned down in time or fully characterized. Therefore, Nurse Periwinkle can never achieve identity. On the other end of the spectrum, Alcott works her way backwards, through the trauma that she experienced, towards the center. Alcott engages in autobiographical memory retrieval, integrating the self hidden within Periwinkle. Alcott is capable of achieving identity because she exists in reality—she is not a temporary construct necessitated by the traumatic. Periwinkle’s life, on the other hand, ends at the end of Alcott’s fiction. However, Periwinkle holds a portion of Alcott’s past embodied in the self she constitutes. For Alcott to emerge with a complete identity, the two have to merge. For the same reason a child must narrate their experiences, *Hospital Sketches* represents Alcott’s need to narrate: to define herself.

Alcott must incorporate Periwinkle’s PTSD during identity formation—she must accept Periwinkle as a part of her greater identity. A portion of the disorder, psychic closing off, begins early in the story when she refers to Hurly-Burly as the “Elysian Fields” and bids farewell to her

family: “I mounted the ambulance, baggage-wagon, or anything you please but hack, and drove away, too tired to feel excited, sorry, or glad” (10). Here Alcott shows the first signs of allowing her alter ego to take control. Then, on the train Periwinkle starts to surface through the aforementioned militaristic diction. Eventually, Periwinkle takes over completely. However, it does not take long for the traumatic experience to become too much for the changeling narrator to handle. After Periwinkle works at the hospital for a while, she is promoted to the night shift, where she makes her next evolution:

My ward was now divided into three rooms; and, under favor of the matron, I had managed to sort out the patients in such a way that I had what I called, “my duty room,” my “pleasure room,” and my “pathetic room,” and worked for each in a different way. One, I visited, armed with a dressing tray, full of rollers, plasters, and pins; another, with books, flowers, games, and gossip; a third, with teapots, lullabies, consolation, and, sometimes, a shroud. (32)

Alcott finds that Periwinkle wears many masks in order to fulfill her duties. In the description given above, three separate identities for each of the three rooms emerge as vehicles of psychic numbing. Periwinkle represents a necessary remove from Alcott and the three masks shown above represent subsequent removals from Periwinkle. As Alcott engages her experience through autobiographical memory retrieval she integrates each of these selves into her identity.

Dawes believes that Alcott must distance herself from the pain and death that she witnesses: “Immediately, as both an administrative technique and an emotional distancing mechanism, she begins to distinguish them according to categories ... She transforms individuals into countable types—and the counting, importantly, gives her organizational and emotional control over events that shatter both like steel shatters bone” (43). In *Odysseus in America: Combat Trauma and the Trials of Homecoming*, Jonathan Shay gives a recent example of this phenomenon in the lives of survivors of modern combat:

Selective suppression of emotion is an essential adaptation to survive lethal settings such as battle, where numbing grief and suppressing fear and physical pain are lifesaving. Whatever the psychological and physiological machinery that produces this emotional shutdown, it appears to get jammed in the ‘on’ position for some veterans. Do not imagine that this is a comfortable or pleasant state of being... They are never *in* life. (39, Shay’s emphasis)

Suppressing emotion allows an individual to see past immediate threats in order to accomplish tasks vital to the safety of both oneself and others. Alcott, as Periwinkle, develops PTSD out of necessity to perform her duties as a nurse and gets “jammed in the ‘on’ position” (Brown 100, emphasis removed).

Alcott’s self exists in descriptions given of characters other than the narrator. For instance, Alcott accomplishes the task of defining PTSD through the injured soldiers she depicts more so than with herself. *Sketches* describes one soldier suffering from flashbacks, illuminating Alcott’s special insight into the condition: “His mind had suffered more than his body; some string of that delicate machine was over strained, and, for days, he had been reliving, in imagination, the scenes he could not forget, til his distress broke out in incoherent ravings, pitiful to hear” (35). An example of survivor’s guilt is also presented in the text: “Oh! If I’d only been as thin when Kit carried me as I am now, maybe he wouldn’t have died; but I was heavy, he was hurt worsen than we knew, and so it killed him; and I didn’t see him, to say good bye” (37). Alcott takes on the pain of her patients by including them in her narrative. Similarly, Shay relates that survivors of combat situations tend to blame themselves for not giving the ultimate sacrifice: “Placing one’s self in a ‘hierarchy of suffering’ to one’s own disadvantage is widespread among trauma survivors” (79). Alcott sees herself on the bottom of this hierarchy; next comes Periwinkle, followed by the soldiers in the hospital. Alcott cannot permit self-pity because trauma prevents her from claiming her own experience.

Despite the trauma, Periwinkle proves able to define herself in ways that Alcott, the self-described “spinster” (Alcott 4) cannot. Periwinkle encounters a man from Virginia named John, who in other circumstances could have been a suitor. Both Periwinkle and John are close to thirty, not single by any fault of their own, and utilize the same technique of disguising their pain for the sake of others. John is mortally wounded but he endeavors not to reveal his pain. Periwinkle’s affection is apparent through her description of the man: “A most attractive face he had, framed in brown hair and beard, comely featured and full of vigor, as yet unsubdued by pain; thoughtful and often beautifully mild while watching the afflictions of others, as if entirely forgetful of his own” (38). The other characters in *Hospital Sketches* utilize dialectal speech patterns. However, John’s words appear free of the same constructs despite origins that would suggest necessitation of similar patterns. This fact, coupled with her physical description proves

that Periwinkle feels affection for John; but it also reveals cracks in Alcott's wall of emotional distancing.

Periwinkle tries to find something meaningful, other than hurt and suffering, in her wartime experience. But Alcott's infatuation is also an attempt to control John's inevitable death: "It is through the narrative imagination of the finite, the small, and the enclosed that Alcott remedies war's disturbing hiatus in meaning" (Dawes 45). Dawes believes Alcott treats John like a "little boy" who dies of a "little wound" and thus, she simplifies John's story so that it is "rounded and complete" (45). Dawes does not speculate on a sexual attraction between the two. Instead, he claims that Alcott uses John as a testing ground for lessening the wounds that she treats by summing them up into individual, treatable fragments that her mind can handle. Dissociation is a coping mechanism needed for Periwinkle to handle trauma. And Periwinkle is a coping mechanism for Alcott to revisit the same trauma.

As the narrator and author share trauma, Death becomes a character in the text: Death is described, along with his brother Sleep, as having the power of "filling that great house of pain" with "healing powers" (30). Personifying death makes it an approachable subject. Commenting on Alcott's place among other war writers, Tracy Strauss reiterates this need for comprehension: "As they straddle romanticism and realism, fragmentary episodes of the human desire to grapple with the incomprehensible, to survive the uncontrollable, to create meaning out of the unfathomable chaos, all work to communicate the actual experience of trauma" (221). It is hard for Alcott to accommodate Periwinkle's survival in her story because so many others die, and Death in human terms bridges the gap between the fathomable and the unfathomable. Alcott, who lacks the circumstantial understanding of Periwinkle, makes sense of her recollection through further fictionalizing the account. However, fiction and the reality of Alcott's experience do not necessarily mesh. As Periwinkle fails to provide the distance needed for Alcott to tell her story Alcott inches closer and closer to facing the trauma that she represses.

Alcott never relieves the ambiguity of her relationship with any of the soldiers that she treats: She simply says, "I was the poor substitute for mother, wife, or sister" (40). Alcott would never describe herself in these terms: "I am more than half-persuaded that I am a man's soul, put by some freak of nature into a woman's body" (Cited in Young 449). The distance between the two is such: Periwinkle is a "feminized soldier" whereas Alcott, a totality of the two, is a "masculinized nurse" (Young 455). Periwinkle's infancy begins on the opening pages of

Hospital Sketches and she is free to develop autonomously as the narrative unfolds. But as Alcott resurfaces, Periwinkle becomes a “masculinized nurse” caught between “spinster” and attraction to John. When she finds out from the doctor that John is fated to die, Periwinkle says, “I could have sat down on the spot and cried heartily, if I had not learned the wisdom of bottling up one’s tears for leisure moments” (39). Despite Periwinkle’s psychic closing off, the burden is simply too much to bear. Periwinkle allowed her affection for John to crack the foundations of her emotional wall. As a result, the narrator must exit the scene by merging into Alcott’s identity.

Periwinkle’s death is the vehicle for Alcott’s reemergence and it involves both physical and mental disturbances: “[I] developed several surprising internal and external phenomena, which impressed upon me the fact that if I didn’t make a masterly retreat very soon, I should tumble down somewhere, and have to be borne ignominiously from the field... I mournfully ascended to my apartment, and Nurse P. was reported off duty” (46-47). As Alcott merges with Periwinkle, residual symptoms PTSD become more and more apparent. Her unwavering allegiance to the Hurly-Burly House is one of the first things to go:

I recalled my own tribulations, and contrasted the two hospitals in a way that would have caused my summary dismissal, could it have been reported at headquarters. Here, order, method, common sense and liberality reigned and ruled, in a style that did one’s heart good to see; at the Hurly-burly Hotel, disorder, discomfort, bad management, and no visible head, reduced things to a condition which I despair of describing. (50)

Periwinkle’s self-sacrificing attitude diminishes, exposing bitterness, anger and confusion.

Awakening from her existence as Periwinkle, Alcott is confused and frightened about how emotional distancing inadvertently created a threatening lack of control. As a result, Alcott rejects many of the aspects of Periwinkle’s self, including the emotional distancing mechanism and her infatuation with John. Alcott says, “Shut up in my room, with no voice, spirits, or books, that week was not a holiday, by any means. Finding meals a humbug, I stopped away altogether, trusting that if this sparrow was of any worth, the Lord would not let it fall to the ground” (54). The sparrow falls and Periwinkle accepts the blame for all that happens and dies; Alcott resurfaces and tries to make sense of it all through the creation of *Hospital Sketches*.

Ironically, when Alcott re-emerges she assumes the habit of a spinster, sewing when unable to tend to the sick: “Being forbidden to meddle with fleshly arms and legs, I solaced

myself by mending cotton ones” (54). The dark sense of humor she espoused in the sequence with the amputee soldier, and that afterwards caused her to question her morality, disappears and a simpler sense of humor emerges: “Strings of sorry looking horses passed, saying as plainly as dumb creatures could, ‘Why, in a city full of them, is there no *horsepital* for us?’”(55). What’s more, Periwinkle’s unquestioning respect for soldiers vanishes: “Some of these gentlemen affected painfully tight uniforms, and little caps, kept on by some new law of gravitation...the men looked like stuffed fowls” (55). Self merges with identity and Alcott gains control of both the narration and her own progression.

Alcott’s mergence with Tribulation Periwinkle creates an identity that encompasses the traits and attitudes of both characters. Specifically, Alcott shows alterity in understanding both herself and the soldiers she cared for:

I was learning that one of the best methods of fitting oneself to be a nurse in a hospital, is to be a patient there; for then only can one wholly realize what the men suffer and sigh for; how acts of kindness touch and win; how much or little we are to those about us; and for the first time really see that in coming there we have taken our lives in our hands, and may have to pay dearly for a brief experience. (59)

The naiveté that Alcott espoused when she longed to take part in the war vanishes as she incorporates Periwinkle’s experience into her own. As a psychically closed “automaton,” learning these lessons involved the risk of emotional attachment and weakening. After reemerging as a totality of subjective experience, Alcott is overcome with anxiety and doubt in her own humanity due to her nonchalance. Chris Hedges comments: “Many of those who set out to write their memoirs, or speak about the war, do so with shame. They know war’s perversion... how they too became tainted” (115). Alcott’s shame is reflected in the survivor’s guilt that she inherits from Periwinkle. As Alcott comes to terms with Periwinkle’s experience, shame accompanies sadness, angst, and most of all, confusion.

The confusion dissipates in the postscript and Alcott is able to admit that she witnessed amputations. She relates that it is not customary for the nurse to witness such events; rather, Alcott says, “Our work begins afterward, when the poor soul comes to himself, sick, faint, and wandering” (69). Alcott says that she forced herself to witness these operations as a way to prepare herself for more “trying sights” (69). Alcott’s detachment from what must have been a

gruesome spectacle reflects Periwinkle lingering in her psyche. As Alcott uncovers repressed, disturbing events, she defines herself in the present. Eakin believes that this type of rediscovery is not uncommon:

Even though I have come to believe that autobiography's reconstructed story of the past always functions as a metaphor for the story of that story, the story of the autobiographical act unfolding in the present, I also still believe that autobiographers and their readers—and here I include myself—continue to take for granted this expectation that autobiography is devoted to the recovery of the past. (156)

Hospital Sketches is clearly Alcott's attempt to recover the past—the part of her “self” left behind at the Hurly Burly house and reconstructed through Periwinkle.

Despite *Hospital Sketches*' example of mergence of selves into a whole identity, G. Thomas Couser disagrees about the definition of self:

[T]he so-called individual is not individual. The self is not an essence, but a socially created construction—a cultural artifact fashioned collaboratively and publicly out of ready-made materials, like a quilt patched together at a quilting bee... The self may be an integrated whole, rather than a mere repertoire of roles, but its unity is to be found in continuity of consciousness, not in consistency of behavior. Personal history is not the product of prior selfhood. Rather, selfhood is the product of an internal autobiography; identity hangs by a narrative thread. (16-17)

Couser details the beliefs of social constructionists who say that self and identity are social projects that are never fragmented, appearing that way only because of the shortcomings of the autobiographical narrative. However, several aspects of this assertion are at odds with what Louisa May Alcott undertakes in her work.

Alcott and Periwinkle meet halfway on a continuum that is the product of a single effort to recover traumatic memories. Autobiography by definition is a work by the self for the self and not a larger narrative of society or its many influences. Couser's social “quilt” reflects the aspects of society that are grafted into the individual's psyche. Granted, Couser is correct that people are somewhat the products of their environment. But, this is only on the most basic level. Society cannot make sense of the trauma in *Hospital Sketches* because no collective answer fits

every instance of dysnarrativia. Personal history, as found in Alcott's testimony, is the combination of fragments that are not immediately tangible. The narrative thread of Couser's social quilt falls short of existing in reality. Artifacts comprise the self, but they are not cultural. The artifacts that comprise the self are inherently personal; and these personal artifacts weigh heavily on identity formation. The umbrella term "Post-Traumatic Stress Disorder" represents a host of personal artifacts that define Alcott and Periwinkle. It is only by traveling backwards on the continuum of recollection and narration that Alcott is able to incorporate these artifacts into her identity.

The mergence of Tribulation Periwinkle with Louisa May Alcott introduces a number of questions that are unresolved here. For instance, what propels the incorporation of a fragmented self into a larger identity in the absence of dysnarrativia and trauma? How is PTSD ascribed to Alcott when she controls her self-depiction? And, what is the nature of "truth" as provided in Alcott's "fiction"? Because *Hospital Sketches* is a one sided (two-sided if you count Periwinkle) story, a certain suspension of disbelief is required. However, the fact that Alcott and Periwinkle are two parts of the same whole is clear. Furthermore, Alcott's coming to terms with her traumatic past lends itself to the same efforts made by war survivors of every era. Alcott's journey is a painful one. When she says that her "heart turned traitor" and consoles herself for "the untimely demise of 'Nurse Periwinkle'" the raw, confused emotion associated with war is made clear (60). Many sufferers of war trauma spend their entire lives navigating the confused pain associated with war. Alcott provides a basis for understanding this journey.

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