

Trauma and Psychological Reconstruction in Preeti Shenoy's *Life Is What You Make It*

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Abstract

The article analyses Preeti Shenoy's *Life Is What You Make It* by Preeti Shenoy through the framework of Trauma Theory, particularly drawing upon the model of recovery proposed by Judith Herman in *Trauma and Recovery*. The novel presents the psychological journey of Ankita Sharma, a young woman whose emotional losses and bipolar disorder destabilize her identity and sense of purpose. By examining the text through Herman's three-stage recovery model—establishing safety, remembrance and mourning, and reconnection, this article argues that the novel portrays trauma as both a destructive and transformative force. Ankita's internal collapse and eventual healing illustrate how trauma fractures identity yet also creates the possibility for reconstruction and resilience.

Key Words

Psychological journey, Reconstruction, Trauma, Recovery,

Introduction

Life Is What You Make It by Preeti Shenoy is a contemporary Indian English novel set against the socio-cultural landscape of late 1980s and early 1990s India, a period marked by shifting aspirations, urban mobility, and evolving attitudes toward mental health. At its center stands Ankita Sharma, an intelligent, ambitious, and emotionally intense young woman whose life appears to follow the trajectory of academic success and romantic fulfillment. However, beneath this conventional coming-of-age framework lies a far more complex psychological narrative. Ankita's romantic disillusionment, emotional volatility, and eventual diagnosis of bipolar disorder disrupt the illusion of linear progress, exposing the fragile boundary between ambition and vulnerability. Her psychological collapse is not merely a subplot about illness; rather, it signals a profound rupture in identity, continuity, and self-perception. Through Ankita's descent into mania and depression, the novel interrogates stigma, silence, and the cultural discomfort surrounding mental instability in middle-class Indian society.

This article approaches the novel through the lens of trauma theory, particularly the three-stage model of recovery proposed by Judith Herman in *Trauma and Recovery*. Herman argues that trauma shatters an individual's sense of safety and fragments personal identity, isolating the survivor within unassimilated experience. Recovery, therefore, unfolds gradually through three interrelated stages: the establishment of safety, the process of remembrance and mourning, and eventual reconnection with life and community. Ankita's journey mirrors this structure with striking precision. Her hospitalization and structured treatment represent the restoration of safety; her confrontation with guilt, shame, and loss embodies remembrance and mourning; and her renewed engagement with ambition and relationships signals reconnection. By situating Ankita's psychological journey within Herman's framework, this study argues that *Life Is What You Make It* should be read not solely as a narrative of mental illness but as a sustained exploration of trauma, narrative reconstruction, and the reclamation of agency.

Trauma as Psychological Fragmentation and Suicidal Despair

Trauma begins with rupture, a collapse of the internal world that once provided stability. For Ankita, emotional loss, guilt, and overwhelming psychological pressure culminate in a profound sense of worthlessness. At the depth of her depressive state, she reflects, *“My existence was completely pointless. There was only one way out of this mess and that was to end my own life.”* (LWYM 151). This statement encapsulates the annihilation of selfhood that trauma theorists describe. It is not merely sadness but a complete erosion of meaning and identity. According to Herman, trauma destroys the “assumptive world”, the belief that life is predictable and the self is valuable. Ankita’s earlier confidence as an academic achiever collapses under the weight of bipolar disorder and unresolved grief. Her manic episodes produce reckless energy, while depressive episodes imprison her in hopelessness. The oscillation between extremes deepens the fragmentation of her identity. She is no longer able to recognize the stable, ambitious young woman she once was.

Isolation intensifies the fragmentation. Her hospitalization in a psychiatric institution mark both physical separation and symbolic exile from normal life. The stigma surrounding mental illness reinforces her alienation. Trauma often silences its victims; similarly, Ankita feels misunderstood and disconnected from those around her. The institutional setting becomes a space where the depth of her suffering is fully confronted. Herman emphasizes that trauma survivors often experience dissociation and emotional numbness. Ankita’s oscillation between heightened mania and emotional emptiness reflects this disconnection. Her narrative voice conveys a fractured sense of self, mirroring the theoretical understanding that trauma disrupts narrative continuity. In this phase, she exists in survival mode rather than purposeful living.

Recovery, Narrative Reconstruction, and Reclaiming Agency

Preeti Shenoy crafts Ankita Sharma’s psychological journey in a manner that closely mirrors Judith Herman’s first stage of trauma recovery is establishing safety both physical and emotional. Ankita’s bipolar episodes dismantle her internal sense of coherence: manic expansiveness propels her into impulsive decisions and distorted perceptions of invulnerability, while depressive collapse engenders profound hopelessness and suicidal ideation. In Herman’s terms, Ankita’s nervous system oscillates between hyperarousal and psychic numbing, preventing reflective self-awareness. Her hospitalization, though initially perceived as coercive and stigmatizing, functions as the structural reconstitution of safety. The psychiatric institution provides environmental containment such as regulated routines, supervision, therapeutic sessions which counteracts the unpredictability that has come to dominate her life. Pharmacological intervention further stabilizes her neurochemical imbalances, enabling a shift from survival-driven reactivity to cognitive processing. Crucially, safety also emerges relationally: the presence of mental health professionals who interpret her condition clinically rather than morally begins to dismantle her internalized shame. Through gradual acceptance of treatment, Ankita differentiates her illness from her identity. This separation marks the first movement toward reclaiming agency, as she learns to observe and regulate her impulses rather than being wholly governed by them. Thus, the restoration of safety becomes the precondition for narrative and emotional reconstruction.

The second stage, remembrance and mourning, unfolds as Ankita confronts the psychic residues of her past that are failed relationships, Abhi’s death, social humiliation, and the stigma attached to mental illness. Trauma in her life is not confined to a single catastrophic event but is cumulative, layered with guilt and self-reproach. Consistent with Herman’s theory, Ankita’s memories initially appear as intrusive affect such as overwhelming shame, regret, and self-blame, rather than as coherent narrative. The therapeutic process compels her to articulate these experiences, transforming fragmented emotional intensities into structured reflection. In doing so, she begins to challenge distorted cognitions, particularly her exaggerated sense of responsibility for events beyond her control. Mourning becomes central: she grieves the loss of Abhi, but also the collapse of her idealized self-image as academically brilliant, emotionally invincible, and socially admired. This mourning signifies the death of a former identity and the painful acceptance of vulnerability. Importantly, narration within a supportive environment allows her suffering to be witnessed and validated, counteracting the isolation that once intensified her despair. Through remembrance and mourning, Ankita integrates her traumatic experiences into a continuous life story rather than experiencing them as disjointed ruptures. The trauma does not disappear; instead, it is repositioned within a broader narrative of growth. In this integration lies the reclamation of agency where, Ankita moves from being defined by her illness and past mistakes to consciously shaping a reconstituted, self-aware identity.

The final stage of Herman's model is reconnection, evident when Ankita slowly reclaims agency over her future. She resumes her ambitions, rebuilds relationships and reimagines her identity beyond illness. This transformation is captured poignantly when she declares, "I was celebrating being alive and there was a strong feeling in my heart that the celebrations would last a lifetime now." (LWYM, 203) This statement stands in stark contrast to her earlier suicidal despair. The shift from wishing for death to celebrating life symbolizes the restoration of hope and meaning. Importantly, recovery does not erase trauma. Ankita remains aware of her vulnerability and the need for ongoing management of her condition. However, trauma no longer defines her entirely. Instead, it becomes integrated into a stronger, more self-aware identity. Through this reconstruction, the novel affirms Herman's belief that healing involves reclaiming authorship over one's life.

Conclusion

Through the lens of Trauma Theory, *Life Is What You Make It* emerges as a profound exploration of psychological rupture and renewal. Ankita's declaration that her existence was "completely pointless" reflects the devastating fragmentation caused by trauma, while her later celebration of being alive illustrates the possibility of recovery and reconnection. By paralleling Judith Herman's three-stage model of healing, the novel demonstrates that trauma is not a permanent annihilation of identity but a crisis that can lead to transformation. Preeti Shenoy's narrative challenges stigma surrounding mental illness and emphasizes resilience. Ankita's journey from suicidal despair to hopeful self-reconstruction underscores the central message of the novel: life, even when shattered by trauma, can be rebuilt through courage, support and self-acceptance. The novel thus stands as both a literary depiction of mental health struggles and a testament to the enduring human capacity for renewal.

Works Cited

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