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**“WORSE THINGS THAN DYING”: THE
BUILDING BLOCKS OF PTSD IN *THE
PUNISHER***

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ABSTRACT

Minttu Naukkarinen: "Worse Things than Dying": The Building Blocks of PTSD in *The Punisher*
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The purpose of this thesis is to examine how post-traumatic stress disorder (PTSD) is depicted in the tv series *The Punisher*, which follows former Marine Frank Castle on a journey of vengeance after he tragically loses his wife and two children. He exhibits the classic symptoms of PTSD, outlined in the DSM-V, the handbook of mental disorders, as re-experiencing the trauma, avoiding the trauma, having negative feelings or thoughts after the trauma, and having trauma-related arousal or reactivity. Each of these broad clusters entail specific symptoms, which will be discussed from the perspective of the series. In addition, the thesis addresses the question of how trauma is generally portrayed in literature, and what representational techniques *The Punisher* uses in its depiction.

In this thesis, psychological evidence of the symptoms is compared with scenes in the series, as well as secondary sources that discuss trauma in fiction. Examples from the series are analyzed through the lense of trauma theory, which is mentioned in the sources. I firstly define PTSD, followed by discussion on the four groups of symptoms and how they are portrayed, and how that fits a typical depiction of trauma.

The thesis concludes that Frank Castle is an accurate representation of the symptoms required for a PTSD diagnosis. The tv series portrays these symptoms via literary and narrative devices such as focalization, symbols, nonlinear plots, descriptions of the places of the trauma, and finally, changes in a character's identity and personality. *The Punisher* is, then, a piece of trauma fiction that takes advantage of literary devices in creating a traumatized character with PTSD, and using such a label gives other traumatized people a way to be heard, as well as anyone else an opportunity to better understand the people around them.

Keywords: *The Punisher*, PTSD, post-traumatic stress disorder, trauma, trauma fiction, trauma and literature

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Tämän tutkielman tarkoituksena on tutkia, miten traumaperäinen stressihäiriö (PTSD) kuvataan tv-sarjassa *The Punisher*, joka seuraa entisen merijalkaväen sotilaan Frank Castlen kosta hänen menetettyään vaimonsa ja kaksi lastaan väkivallalle. Hänestä ilmenee traumaperäisen stressihäiriön klassiset oireet, jotka ovat kiteytetty mielenterveydenhäiriöiden käsikirjassa (DSM-V) trauman uudelleenkokemisena, trauman välttämisenä, traumanjälkeisinä kielteisinä ajatuksina tai tunteina sekä traumaan liittyvänä reaktiivisuutena. Nämä laajat oireryhmät sisältävät yksityiskohtaisempia oireita, joita käsitellään tv-sarjan näkökulmasta. Lisäksi tutkielman tavoitteena on vastata kysymyksiin, miten traumaa yleensä esitetään kirjallisuudessa ja mitä tekniikoita *The Punisher* käyttää kuvauksessaan.

Tutkielmassa verrataan psykologista näyttöä oireista tv-sarjan kohtauksiin sekä lähteisiin, jotka käsittelevät traumaa fiktiossa. Esimerkkejä sarjasta analysoidaan lähteiden käsittelemän traumateorian avulla. Määrittelen ensimmäiseksi, mikä traumaperäinen stressihäiriö on, jonka jälkeen käsittelen neljää oireryhmää ja niiden esittämistä sekä miten esitys noudattaa tyyppillistä kuvausta traumasta.

Tutkielmassa todetaan, että Frank Castle on paikkansapitävä kuvaus traumaperäisen stressihäiriön diagnoosin vaatimista oireista. Tv-sarja kuvaa näitä oireita kirjallisuuden tehokeinojen kuten fokalisaation, symbolien, epälineaaristen juonien, trauman paikkojen kuvausten sekä hahmon identiteetin ja luonteen muutosten avulla. *The Punisher* on siis esimerkki traumafiktiosta, joka hyödyntää kirjallisuuden tehokeinoja luodakseen traumatisoituneen hahmon, jolla on traumaperäinen stressihäiriö, ja tämän nimityksen käyttäminen antaa muille traumatisoituneille ihmisille tavan tulla kuulluksi sekä kaikille muille mahdollisuuden paremmin ymmärtää heidän ympärillään olevia ihmisiä.

Avainsanat: The Punisher, PTSD, traumaperäinen stressihäiriö, trauma, traumafiktio, trauma ja kirjallisuus

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1. Introduction

“There’s no peace up here.” Those are the words of Frank Castle, spoken while pointing a finger at his bruised head (Ep. 2.7, “One Bad Day” 6:50), reminding his allies that he is a man deeply wounded on the outside as well as the inside, left alone and suffering in the wake of his family’s brutal massacre. Frank Castle, portrayed by Jon Bernthal in the tv series *Daredevil* and *The Punisher*, is a former U.S. Marine turned vigilante, who has sworn to exact revenge on all the people who were in any way, shape or form involved in said massacre, and the tv series follow the gun-toting anti-hero’s journey in mourning the loss of his family. *The Punisher*, dedicated to his character specifically, is a story of a soldier rehomed and a family man left alone, and it is no exaggeration to refer to him as traumatized. However, I will be going a step further and examining Castle’s psychic trauma from the perspective of post-traumatic stress disorder in particular.

Trauma is not a new theme in literature, but there is a great shortage of analysis and research when it comes to post-traumatic stress disorder (PTSD) specifically. Labelling the cluster of symptoms as PTSD is where the line is often drawn. Steve Lightfoot, showrunner of *The Punisher*, even avoided using the term in the show, saying: “I think PTSD has become a label in society, and that’s a problem. It’s almost become degrading in a way, which is a shame” (Illing). I would argue that giving a name to the symptoms is actually beneficial rather than damaging. First of all, it offers traumatized people a place as well as a way to be heard and seen. Vickroy describes how other people hope to “avoid what survivors have suffered, and thus prevent survivors from sharing their experience with others” (10), making it awfully lonely for survivors. Literary works “allegorize the therapeutic process of putting traumatic experience into words” (Vickroy, 13), and for many, seeing a character who thinks and feels in the same ways as you do can be very healing and comforting.

At the same time, trauma fiction is valuable to those who cannot necessarily relate. According to Vickroy, “effective trauma texts engage readers in a critical process by immersing them in, while providing perspective on, the flawed thinking, feeling, and behavior of the traumatized” (14), and as much is certainly true in *The Punisher*’s case. Our main character is, after all, a murderer, so it is safe to say Frank’s thinking and behavior are *flawed*. Nevertheless, the series guides its viewers into understanding why he does what he does. As Oatley puts it, there is a “human need to understand other people”, which drives the writing and reading of characters (279), along with a “desire to understand emotions more deeply” (280).

The aim of this thesis is to examine how post-traumatic stress disorder is depicted in *The Punisher*, and what methods the writers have employed for the sake of creating a character with said disorder. The DSM-V separates the symptomology of PTSD into four different clusters: “re-experiencing the trauma, avoidance of the trauma, persistent negative thoughts or feelings, and trauma-related arousal or reactivity” (APA). Each of these groups consists of more specific symptoms and will be analyzed in closer detail. In doing so, I will compare the psychological evidence to my findings in the series and how such symptoms are manifest in Frank’s character, as well as discuss how trauma reactions might usually be written based on my secondary sources. First, I will define PTSD, before approaching the clusters of symptoms one by one.

2. What is PTSD?

In this section I will narrow down the definition of post-traumatic stress disorder, from its basics to its causes, as well as give a brief overview of the symptomology, followed by comorbid disorders, and treatments. Post-traumatic stress disorder is a relatively new diagnosis in the Diagnostic and Statistical Manual of Mental Disorders (DSM), and therefore less known, but understanding the disorder is essential to the rest of my thesis.

2.1. Definition

Post-traumatic stress disorder is an anxiety disorder characterized by “fear, anxiety, sadness, anger and guilt” (Frueh, et al, 7) and is the outcome of a trauma that surpasses an individual's capacity to process such an event. An important distinction is to be made within the different meanings of the word “trauma.” As Kacandes points out: “The psychological use of the term “trauma” confusingly refers to both the forces or mechanism that cause a psychic disorder and the resulting psychic state” (615). In this thesis, I will refer to the causes of PTSD as traumatic events.

In Frank Castle’s case, the traumatic event was the murder of his family on a day just like any other. Frank, as well, was supposed to be killed by the hired men, but survived. The event took place at the carousel in Central Park in New York, and Frank returns to the scene of the crime more than once (*Daredevil* Ep 2.4, “Penny and Dime”, *The Punisher* Ep 1.13, “Memento Mori”), as will be examined in 3.2.

A distinction must also be made between PTSD and other disorders. The DSM-V requires symptoms to last for more than one month, and that they are not explained by medication, substance

use or another illness (American Psychiatric Association). Most obviously, PTSD is related to acute stress disorder (ASD), which resembles post-traumatic stress disorder in symptomology, however the key word is “acute.” Frueh, et al. mentions that ASD “may not last more than 4 weeks past exposure to the traumatic stressor” (5). Frank’s symptoms span over the course of months, possibly even years, and he is never seen taking any medication, drugs, or unreasonable amount of alcohol.

2.2. Causes

A misconception that occurs far too often is that post-traumatic stress disorder can only develop in people with a military background. In fact, PTSD was associated heavily with soldiers back in the 1900s: “Terms such as ‘shell shock’ and ‘war neurosis’ were common after World War I to describe combat-related psychological disturbances” (Pandi-Perumal and Kramer, 326). These names stuck for PTSD for a long time, with the official diagnosis coming to light only with the release of the DSM-III in 1980 (Frueh, et al., 1).

However, PTSD is a disorder that anyone who has gone through something traumatic can have. The first criterion set for PTSD in the DSM-V goes as follows:

The person was exposed to: death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, in the following way(s): direct exposure, witnessing the trauma, learning that a relative or close friend was exposed to a trauma, or indirect exposure to aversive details of the trauma (usually in the course of professional duties).
(APA)

The aforementioned traumatic events can occur to any person, not only soldiers, and therefore assuming that PTSD is merely a soldiers’ disease is a lapse of knowledge. Frank Castle is an optimal example of this, as he is a former Marine, but his suffering of post-traumatic stress disorder is not primarily tied to his time in the military, but rather, the loss of his family after his service. It is implied that the deaths he was responsible for during his service may have been traumatic for him (Ep 2.10, “The Dark Hearts of Men”, 8:00), but it is important to remember that not all traumatic events lead to PTSD.

In *Daredevil’s* “Semper Fidelis” (Ep 2.7), when Frank is placed on trial for the murders that he has committed in an attempt to avenge his family, his defense hopes to argue that he has PTSD and needs help instead of punishment. Castle denies this vehemently and insists that his time as a Marine did not traumatize him, and later on, his defense decides that they cannot endorse

PTSD, as “he’s not having war flashbacks” (16:15). This is a concrete example of how the disorder can be misunderstood and misrepresented as a condition limited only to people who have experienced war.

While *The Punisher* borrows plenty from its predecessor *Daredevil* in characterizing Frank, the series has its own take on his PTSD. It is never outright said in the series that it is indeed what he is suffering from, but the variety of symptoms and patterns of acting, thinking, and feeling he conveys to the audience speak for themselves.

2.3. Symptoms

Yet another criterion set in the DSM-V is that “symptoms create distress or functional impairment” (APA), and as I will discuss in more detail in the following sections, Frank’s symptoms cause him to isolate from friends and peers and make him unable to work and take care of himself. This “distress and functional impairment” is also mentioned by Frueh, et al, as it is described that most people who go through a traumatic event do not develop post-traumatic stress disorder, but rather, it is only seen in a minority of people (6).

PTSD has four clusters of symptoms that I will outline and discuss more specifically in section 3. However, it should be mentioned that the symptoms range from internal to external, such as feelings of guilt, anger and fear but also changes in behavior, such as hypervigilance.

2.4. Comorbidity

PTSD has a high comorbidity with other disorders, most notably major depressive disorder, which shares symptoms with post-traumatic stress disorder, such as problems with sleep and concentration and the struggle to feel pleasure from activities (Frueh, et al., 93). Major depressive disorder consists of depressive episodes, which along with the above-stated symptoms include feelings of worthlessness or guilt, suicide ideation, fatigue and psychomotor agitation or retardation (Eaton and Krueger, 68). These symptoms are displayed in Frank’s character, particularly in “3 AM” where he is withdrawn and simply sits home alone when he is not working. He is also portrayed as having psychomotor-related quirks such as the twitching of his finger in *Daredevil* (Ep. 2.12, “The Dark at the End of the Tunnel”, 49:25).

2.5. Treatment

While post-traumatic stress disorder is a long-lasting condition, there are numerous options for treatment (Frueh, et al., 249). Frank seems quite unwilling to seek help, as he almost needs his pain to complete his mission of killing anyone involved in his family's murder, but in a rare moment in "Memento Mori" we see him sit in a veterans' group session and open up about his feelings (51:00). It is unclear whether or not he joins the group again, as there is a time jump between "Memento Mori", which is the final episode of the first season, and "Roadhouse Blues", which is the first episode of the second season. Nevertheless, he begins the second season with a willingness to socialize and enjoy the little things in life, such as music, although it is difficult to tell if this is because of therapy or the satisfaction of having completed his self-appointed mission. Despite this, he does not hesitate to leap back into the dangerous lifestyle when the opportunity is presented, suggesting that he feels dissatisfied without battles to fight. As Vickroy puts it, in trauma fiction, "even if pain is ameliorated, and the individual is in a stronger, more self-aware position, some tensions remain" (4).

The variety of symptoms, comorbid conditions, as well as the need for a continued treatment all indicate that PTSD is a severe disorder that affects all aspects of life for a long time. Pandi-Perumal and Kramer even describe the symptoms of PTSD as "disabling" (326), and as I will discuss in the following section, it is a particularly fitting description in Frank's case, as well.

3. Analysis of PTSD in Frank Castle

In the following subsections, I will examine the four groups of symptoms outlined in the DSM-V and how they are portrayed in Frank's character.

3.1. Re-experiencing the trauma

The first cluster of symptoms that is described in the DSM-V as a criterion for a PTSD diagnosis is referred to as "re-experiencing the trauma", which includes "unwanted upsetting memories, nightmares, flashbacks, emotional distress after exposure to traumatic reminders, and physical reactivity after exposure to traumatic reminders" (APA). Of these symptoms, one is required for an official diagnosis.

The above-mentioned symptoms are likely the best-known ones when it comes to the disorder, and they are also the ones that Frank exhibits the most clearly. Pandi-Perumal and Kramer

explain that “dreams of high emotional intensity and replay of traumatic events give way over time to anxious, trauma-themed, threatening, and aggressive dreams” (331), and this is certainly accurate in Frank’s case. In episode 1.1, fittingly named “3 AM” after the late hours that Castle spends fighting insomnia, we see the man struggling with nightmares of his family (30:20, 40:50). He experiences vivid imagery of his wife and children, reliving their death in ways that did not actually happen. As discussed in 3.3, these nightmares are strongly tied to his feelings of guilt, as he dreams of being the one to shoot his wife, when in reality he was not directly responsible for her death. Accurately, Vickroy describes how dream sequences allow authors to “use symbolic imagery reflecting the traumatic circumstances” and give entry to “a character’s innermost thoughts” (25). We see this in “The Judas Goat” (Ep. 1.6), as well, where Frank has a nightmare of Thanksgiving dinner, not only with his own family but the family he has grown close to during his vigilante mission (1:00). The dinner is interrupted by soldiers who come to gun down the unsuspecting family, while Frank sits tied to a chair, unable to do anything. This follows his feelings of helplessness and goes to show how quickly his nightmares adapt to his changing situation.

Frank’s nightmares very much bleed into the hours he spends awake, as well. In “3 AM”, he has a job at a construction site, and works himself to the point of damaging his hands, his aggression fueled by the intrusive memories and flashbacks he experiences (8:05). These flashbacks are easy to convey through a tv series, as all that is needed is a blend of two scenes – that is exactly what “3 AM” does, showing us an emotionally charged Frank with a sledgehammer with glimpses of his lost family members mixed in.

In the very same episode, a co-worker of his asks about his family, sending Frank into a spiral of dissociation from his surroundings. The emotional distress is shown through a distorted, fading audio and flashes of his family, once more (“3 AM”, 14:30). In this case, the flashbacks he experiences are those of a happy memory, showing the viewer what he is missing, rather than what he is dreading and blaming himself and others for. As Herman puts it: “Splitting off from one’s body or awareness can reduce the victim’s immediate sense of violation and help the person endure and survive the situation” (43, 101-2, quoted in Vickroy, 8).

It is also important to note that a traumatic memory is not always an “exact recalling of events”, but rather, each recollection might include new aspects or perspectives (Balaev, 164). The event that triggered Frank’s PTSD, the murders in Central Park, are a complex story that are constantly developed further: at first, it is made to seem like a gang fight with unfortunate timing, but eventually, it comes to light that Frank’s superiors arranged each of the gangs to be in the park

to assassinate him. Frank also reveals in “Two Dead Men” (Ep. 1.2) that his family life was not as flawless as he liked to remember it, but rather, his time in the military had begun to affect him to a point of his wife and children noticing (11:45). Slowly but surely, the story of a perfect family ending up as collateral damage in a gang fight becomes one of a struggling household killed by the father’s supervisors.

Balaev also explains that to “emphasize mental confusion, chaos, or contemplation”, nonlinear plots or disruptive sequences may be used in writing (159). In *The Punisher*, this is evident in Frank’s flashbacks across multiple episodes, as noted above. However, the entirety of “Virtue of the Vicious” (Ep. 1.10) is shown through converging storylines in a non-chronological order. The “mental confusion” and “chaos” that Balaev mentions (159) are at the forefront in the episode, where Frank finds out that his best friend is actually the one working against him and had full knowledge of what was going to happen to his family. The episode, then, cleverly shows how disarrayed and confused Frank is by also confusing the viewer with its nonlinear approach.

A key term in depicting a traumatized character is focalization, which “highlights characters’ ability or willingness to love or be intimate, their trains of thought, and their relationships to their bodies” (Vickroy, 3). Each of these three features can be seen in Frank’s character. As I discuss in 3.3, he becomes isolated and withdrawn from society, particularly in “3 AM”, where we spend the majority of the episode following his new life without the Punisher’s title. He is very much grieving his wife’s death throughout the series, but at the beginning of the second season, “Roadhouse Blues”, he makes a connection with a woman for the first time after losing his wife. It is worth noting that this only happens *after* he has killed the people responsible for his family’s demise, and even then, his time with his new love interest is disrupted by flashes of his lost family members (23:05).

Because *The Punisher* follows Frank and his perspective, the viewer is shown Frank’s family in a loving, longing light, whereas the villains of the show are portrayed as beyond redemption. Frank has a very clear “train of thought”, which consists of people as either good or evil, and as we see the immense pain caused by the loss he has endured, we are coaxed into sympathizing for him and perhaps even rooting for him. Nevertheless, Frank is a murderer, and Vickroy does also mention that stories of trauma might “inflict pain or discomfort”, and trauma writers are concerned with “how narratives create empathy” (31).

As mentioned above, Frank detaches from his body when his co-worker asks him about his family. This is not the only time he does so: in “The Dark Hearts of Men”, he is framed for

murdering innocent women, but he firmly believes he was the one to kill them, which hurls him into a state of complete panic (42:40). His vision blurs, which is an effect added to the screen, as well as slow motion to mimic the way his fast-paced murder spree halts to the one moment that throws him off. It is not just the blame that scares him, but the reminder of his innocent wife and daughter, as well. In addition, in “One Bad Day”, when he is physically pulled off of the man he has been beating, he stares at his bloodied hands and experiences flashbacks (29:55), implying that he is struggling to stay tethered to the present, once again. Such an unbalanced division between the past and the present is described by Vickroy as “another typical signal of traumatic experience”, which comes in many shapes and forms, such as “repression, splitting of the self between past and present, silence about the past, feelings of alienation and not belonging, and being haunted by the past” (24), the last of which is certainly a fitting description for Frank.

3.2. Avoidance of trauma

The third criterion in the DSM-V in order to receive a PTSD diagnosis is “avoidance of trauma-related stimuli after the trauma, in the following way(s): trauma-related thoughts or feelings, trauma-related reminders” (APA). Of these, one is required.

Frank defies this in “Penny and Dime” by returning to the carousel where his family spent their final moments (22:00). However, he is clearly distraught just by being there, and in “Memento Mori”, when his enemy taunts him by leading him to the very same location, Frank experiences flashbacks and loses his sense of reality (23:15). This is shown through overlapping scenes of the present and the past. Balaev explains how the place of trauma is often described carefully “because the physical environment offers the opportunity to examine both the personal and cultural histories imbedded in landscapes that define the character’s identity and the meaning of the traumatic experience” (150). By having Frank’s trauma’s roots in a setting usually associated with families having fun, his identity as a father and a husband is highlighted. At the same time, however, having his trauma happen in a place as well-known and loved as Central Park can be seen as a way for the writers to emphasize how trauma can happen to anyone and anywhere. According to Balaev, “the traumatized protagonist in fiction brings into awareness the specificity of individual trauma that is often connected to larger social factors and cultural values or ideologies” (155). *The Punisher* deals not only with Frank’s loss, but corruption in the military and, on a more general note, plain old greed: Frank was targeted by his superiors after he stood up against illegal operations.

In an attempt to gain control, Frank takes advantage of different symbols, as discussed by Rostek: "...the literary symbol helps the traumatized individual to represent the catastrophe in terms of something else, thus protecting him or her from an unbearable direct re-experiencing of the painful past and allowing foregrounding of particular aspects while leaving others unmentioned" (135). Of these, the most obvious one is, of course, the skull he wears on his chest. He turns his tragedy into a mission, another war to fight in, and chooses to focus on exacting his revenge rather than sitting with his feelings. In "3 AM", when he believes he has killed everyone involved in his family's demise, he burns the skull-adorned vest, getting rid of it in quite the dramatic way. He attempts to burn away the awful memories and what the skull represents, where it came from, and supposedly starts a new chapter in his life. Of course, as I have already demonstrated and will continue to in the following subsections, this hardly worked.

In addition, in "Roadhouse Blues", we can see that Frank carries his wedding ring around his neck. This is his way of keeping his wife with him and remembering her as his other half, rather than someone who was cruelly taken from him. It allows him to leave the cold-blooded ending of her life "unmentioned", while keeping their marriage as the most prominent aspect. Finally, in *Daredevil's* "A Cold Day in Hell's Kitchen" (Ep. 2.13), Frank burns down the house he lived in with his family, unable to bear being there anymore now that he is alone. He is, then, getting rid of the one symbol of his family as a unit, leaving behind only the ashes of the house all the while donning his skull-printed vest and heading out to a new future (53:30).

However, avoidance is not communicated only through by physically evading certain places. Frank is also shown to be hesitant in discussing his family with others, as it is painful to bring up. In "Nakazat" (Ep. 2.6), when he is asked what kind of a future he would have wanted for his daughter, he becomes emotional and says he "doesn't really think about it" (12:25). When the topic is pressed, nonetheless, he starts to stammer and struggles to answer. This accords with Balaev's observation that "extreme emotional states" can be conveyed through "temporal fissures, silence, or narrative omission" (159). She also explains that "the talking cure does not always provide a remedy for the traumatized protagonist" (164), and indeed, it seems that for Frank, discussing topics related to his trauma is associated with negative feelings. He also talks about his family in "The Abyss" (Ep. 2.11, 18:30), as well as *Daredevil's* "Penny and Dime" (45:00), and in both cases he can be seen crying. Incidentally, both situations also happen after a near-death experience, further confirming that death and pain remind him of his family.

3.3. Negative thoughts or feelings

The DSM-V requires two of the following for a PTSD diagnosis: “inability to recall key features of the trauma, overly negative thoughts and assumptions about oneself or the world, exaggerated blame of self or others for causing the trauma, negative affect, decreased interest in activities, feeling isolated, difficulty experiencing positive affect” (APA).

The entire basis of Frank Castle’s character is largely built on these symptoms. He goes from a loving family man to a calloused vigilante, completely isolating himself from other people and beginning to actually resent everyone. He sees people in black and white, good and evil, and picks off his targets based on their crimes, not their potentially redeeming attributes. Social support is described as “one of the most important buffering roles against psychiatric illness in the aftermath of trauma and stress” (Frueh, et al., 8), which conflicts with the PTSD sufferer’s tendency to withdraw and isolate, as seen in Frank’s case, as well. In “The Judas Goat”, Frank even says: “I’m alone. I’ve been alone so long, I like it. You know, I hide in it” (50:10).

Frank seems to remember the traumatic event in agonizing detail, and in *Daredevil* it is mentioned how he describes the amount of bullets and the damage they did very closely (“Semper Fidelis”, 16:50). However, in “The Abyss”, he explains how he would remember his children’s laughter from right before they died, only to now be unable to recall that very same sound, which brings him extreme distress and shame (18:45). He even goes as far as to call himself a monster, which we can see is an overly negative thought about himself.

Balaev points out that “a traumatic event disrupts attachments between self and others by challenging fundamental assumptions about moral laws and social relationships” (150), which is certainly true in Frank’s case. He does not believe he is in the wrong for murdering people, because to him, those people are evil and need to be taken down. In addition, he becomes suspicious and untrusting of people, often choosing to fight rather than talk things through. According to Pandi-Perumal and Kramer, “helplessness, a sense of loss of control, and catastrophic thinking” are all post-traumatic responses (327), and each of these three can be seen in the way Frank self-appoints himself the mission of murdering people he deems bad and irredeemable. He could not stop his family from being killed, but he seeks the control of being able to stop their murderers from hurting anyone else.

In Vickroy’s words, “the wounded adopt defended, sometimes provisional identities and survival strategies that disguise shame or assert control” (3), and certainly, we can see this in Frank. While the title of the Punisher is one that Frank does not come up with, but rather, it is what he is

dubbed by the media, he seems to embrace the name, eventually. In *Daredevil*'s "Guilty As Sin" (Ep. 2.8), he lashes out in the courtroom, insisting that if the people of New York want to call him the Punisher, then "here he is" (38:25). Undeniably, the Frank Castle that came out on the other side of being shot in the head and witnessing his family's deaths, is not the same Frank Castle as before the traumatic event, as he shifts from a family man to a vigilante. He even admits to a group of veterans that when he has no war to fight, he is scared ("Memento Mori" 52:45). He has begun to find comfort in being the Punisher, which gives him cause and someone to be, instead of a widower and a grieving father, as seen in *Daredevil*'s "New York's Finest": "We don't get to pick the things that fix us, Red. Make us whole. Make us feel purpose" (Ep. 2.3, 16:45). He also mentions in "Flustercluck" (Ep. 2.9) that whenever he tries to be someone different, the wrong people get hurt (55:00), implying that he does not think it is safe or helpful for anyone if he gives up the role of the Punisher.

Vickroy also mentions that a character's "suppressed emotions can emerge under stress or in their imaginative or dream lives" (3). In "3 AM", Frank has nightmares of shooting his own wife, fully implying that he feels immense guilt. He even consults one of the very few friends he has left, asking him if he was responsible for the deaths around him, after all ("Two Dead Men", 11:50). Blaming himself for the traumatic event is more than on-brand for a PTSD sufferer. However, over the course of his appearance in *Daredevil* as well as the first season of *The Punisher*, he hunts down people specifically involved in the murders of his family to kill them in vengeance, shifting the blame from himself to them.

3.4. Trauma-related arousal or reactivity

The fourth and final cluster of symptoms described in the DSM-V, of which two are required for a PTSD diagnosis, goes as follows:

Trauma-related arousal and reactivity that began or worsened after the trauma, in the following way(s): irritability or aggression, risky or destructive behavior, hypervigilance, heightened startle reaction, difficulty concentrating, difficulty sleeping. (APA)

In "Roadhouse Blues", Frank's hypervigilance is an important plot point. The character of Amy Bendix arrives in the bar Frank is frequenting, and she is followed by mercenaries that no one else but Frank notices. He keeps an eye on Amy, who at this point is still a complete stranger to him, and when the mercenaries follow her to the bathroom, Frank makes rescuing her his own

responsibility – a concrete example of risky or destructive behavior that, in Castle’s usual style, ends in bloodshed. In the process he also makes saving Amy his duty, even though she is a complete stranger to him, and the girl ends up becoming something of a surrogate daughter to him, which reminds him of what it is like to be a father, again.

Risky behavior is, in fact, a cornerstone of Frank’s character. In “3 AM”, although he gave up the moniker of the Punisher, he ends up rescuing his co-worker by slaughtering the men threatening his life (44:15), and in “The Dark Hearts of Men”, he willingly goes up against a group of trained men by himself (38:00), which leaves him on the brink of death. He seems to have very little regard for his own safety and well-being, often driven by his mission and the grave need to complete it rather than look after himself. In “Fight or Flight” (Ep. 2.2), he insists “no hospitals” (47:15), blatantly refusing medical care for the sake of not being imprisoned for his crimes before he considers himself to be done. According to Panagioti et al.’s study, PTSD is associated with “heightened rates of suicidality” (12). Frank’s careless way of throwing himself in danger suggests he has low regard for his own life, and this is confirmed in “Home” (Ep. 1.12) when he says: “There are worse things than dying, Bill. I wake up most mornings and I want it, I hope for it” (18:45). His tendencies to work until he is bleeding from his hands (“3 AM”) could be seen as a form of self-harm, although he never partakes in the more typical methods, such as cutting. He also never actually attempts suicide, but rather simply puts himself in life-threatening situations.

The aforementioned “suppressed emotions” (Vickroy, 3) come up especially in “My Brother’s Keeper” (Ep. 2.8), when Frank’s attempt to catch his enemy goes wrong and he ends up taking out his frustration on Amy (20:50). This is an example of both irritability or aggression, as well as a heightened startle reaction, as she catches him by surprise and he reacts by violently tackling her to the floor. In the same episode, he attacks one of his enemy’s known associates and beats him (29:45), proving that when stress and pressure is applied, Frank’s suppressed emotions do break free in bursts of aggression. When it comes to the people that he finds responsible for his family’s death, though, he makes no effort to hide how angry he is, and quickly resorts to violence. This is seen in the series over and over again, although I would claim that two prime examples of this are in “Home” when he repeatedly stabs his former supervisor and blinds him with his bare hands (45:30), and in “Memento Mori” when he mutilates his final enemy’s face with broken glass (41:55).

As discussed in 3.1, Frank greatly struggles with insomnia, however, when he does manage to fall asleep, he finds himself dealing with nightmares and is often startled awake with a big,

unwarranted reaction (Ep. 2.4, “Scar Tissue” 15:45, Ep. 1.3, “Kandahar” 35:55). Therefore, difficulty sleeping and heightened startle reactions often go hand in hand. According to Pandi-Perumal and Kramer, issues with sleep are “a core feature of PTSD” (335).

When split into four groups, the symptomology of PTSD seems quite simple, but with a closer look at each of the clusters, it becomes obvious that PTSD is a complex condition with numerous symptoms, the majority of which I have demonstrated Frank to struggle with. As mentioned, these symptoms will often affect one another and be closely related, creating a vicious cycle of suffering. While flashbacks and nightmares are the most prevalent signs of post-traumatic stress disorder, as in Frank’s case, there are several others, ranging from external to internal. Together, all of these debilitating symptoms define PTSD and separate it from other disorders.

4. Conclusion

Frank Castle is a complex, undeniably traumatized character who exhibits a variety of symptoms that, in my opinion, come together to represent post-traumatic stress disorder. As I have presented, from his flashbacks to his nightmares as well as inner workings like feelings of guilt, Frank meets each of the criteria set by the DSM-V. By referring to him as a character with PTSD, we create a space for those with the disorder but also gain a deeper understanding of the character and his motives, thoughts, and beliefs.

As discussed, writers can make all this happen through concepts such as focalization, symbols, nonlinear plots, descriptions of the places of the trauma, and changes in a character’s identity and personality. By using these methods, a traumatized character can be created and used to drive the story forward. Each of these are found in *The Punisher*, which means that the show takes advantage of not only the psychological facts of trauma but the literary representations, as well.

To conclude, Frank Castle is an optimal example of post-traumatic stress disorder in fiction, and a relatively accurate, albeit dramatized depiction of the illness. In addition, I find that literary analysis as well as awareness regarding the world around us would greatly benefit from welcoming the specific label of PTSD into the discussion about trauma, particularly in literature.

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