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RESEARCH ARTICLE

HAUNTED HANDS: TRAUMA, ETHICS AND THE MORAL LABYRINTH OF THE WAR DOCTOR IN DANIEL MASON'S THE WINTER SOLDIER

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Abstract

The paper examines the psychological impact of war on combat doctors through the lens of Daniel Mason's *The Winter Soldier*. Stepping outside typical trauma stories featuring soldiers or refugees, the research is centered around the special role of medical doctors working in war zones. Using Glenn E. Richardson's Metatheory of Resilience and Resiliency and theories of trauma by Cathy Caruth, Charles Figley, Judith Herman, Dori Laub, Bessel van der Kolk, and Dominick Lacapra, the paper examines how trauma interferes with homeostasis and how people cope with reintegration. By examining the figure of Lucius Krzelewski, a young student of medicine and the other major characters in the novel who are forced into the reality of World War I, the study explores the deep ethical, psychological, and affective demands of caregiving in war. The research demonstrates that resilience is not linear or predetermined. It is profoundly influenced by interpersonal relationships, institutional limitations, and the persistent shadow of trauma. Finally, the paper aims to widen the horizon of trauma literature by situating medical caregivers as healers and sufferers alike as depicted in the chosen novel of Mason.

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Introduction:-

Trauma and the Battlefield of Care:-

Trauma studies have become the center of present-day studies of war and psychological suffering. Conventionally, trauma emphasizes the woes of soldiers, civilians, or refugees, highlighting the tangible war casualties. Trauma, a prominent psychological reaction to deeply painful events, may grow further as post-traumatic stress disorder (PTSD), depression, dissociation, or somatic complaints. A crucial yet overlooked population within the discourse of trauma is that of combat doctors and health workers. Despite the meticulous training, they are most often immersed in situations that significantly impact their psychological well-being.

For these medical professionals, the battlefield becomes not only a field of medical crisis but evolves into a complex ethical and emotional crucible. Studies in trauma and resilience have provided rich frameworks for comprehending the psychological and ethical disputes encountered by caregiving professionals. This research uses Glenn E. Richardson's resilience theory that contemplates resilience as a shifting, ongoing reintegration of shattered identity and meaning. This focus is supported by Caruth's belated trauma theory and Herman's three stage recovery model depicting how trauma destructs time and identity, while also prioritizing the long process of healing.

Concepts like moral injury and compassion fatigue have further reflected the emotional toll on medical professionals at the time of war and crisis. Dori Laub's work on observing trauma, Bessel van der Kolk's work on somatic prints of trauma, and Dominick laCapra's distinction between acting out and working through trauma further enrich the study. Through discussion of significant events and figures from Daniel Mason's *The Winter Soldier*, the research paper throws light into how trauma shatters identity and reworks morality. Further, it also challenges the very foundations of the healing profession.

Methodology:-

This research paper uses mixed-method qualitative approach, with close reading of the book and thematic analysis of it that brings out the portrayal of trauma and resilience. Analysis centers on finding the repeated patterns, narrative approaches, and symbols that inform on the psychological as well as ethical choices of protagonist, Lucius Krzelewski, amidst World War I. The research also takes aid from major theoretical models, such as Glenn E. Richardson's *Metatheory of Resilience and Resiliency*, and observations from well-established trauma theorists like Cathy Caruth, Judith Herman, Dori Laub, etc. This approach allows for an accurate analysis of the complex relationship between social context, personal encounters, and the lasting impacts of trauma on frontline helpers in war zones as depicted through the characters from the novel.

Results:-

Analysis of *The Winter Soldier* by Daniel Mason revealed that there are three main observations and supporting narrative devices that are pivotal to studying combat trauma. At the outset, the physical location was brought in to display the fall of medical ethics practice at several instances. In particular, the systemic malfunction is symbolised by the field hospital situated in the vacated church in Lemnowice, something that drives the protagonist, Lucius, to a utilitarian moral push. Second, the neurological process of the trauma is displayed by the character of Horvath who deals with neuro-shock or nerven-shock, a condition caused by war with a complex of dramatic symptoms, such as catatonia and physical dissociation. Third, the narrative structure is non-linear and disjointed in a way of temporal ordering. This structure reflects the broken mental condition of the narrator, the protagonist. The implementation of medical imagery and repetitive use of winter as a symbol supports these findings and lays out the textual foundation of the further theoretical discussion of the moral injury, fragmentation of the self and resilience.

Literary Analysis and Discussion:-

Combat Medicine and Fracture of Self:-

Combat trauma leaves strong, leading impacts on members of caregiving professions, often magnifying the moral and psychological break between their role in healing and the violence that surrounds them. Lucius Krzelewski is a young medical student who is suddenly sent into a distant field hospital during World War I. His lack of experience is immediately evident as he faces catastrophic conditions such as shortage of equipment and manpower as well as excess casualties. The empty church in Lemnowice, the Carpathian Mountains, which is also one of the battlefields, symbolizes the chaos of a war-worn medical system collapsing under the strain of conflict. The hospital, devoid of any X-ray machine and having only one nurse, represents Lucius's desperation and abandonment. Lucius's initial response to his environment is the embodiment of the disruption stage of Richardson's resilience model. His everyday life, based on organized academic study, is disrupted. Confronted with the possibility of amputation, death, and mental breakdown of his patients, Lucius experiences a deep destabilization of his identity. One particularly harrowing scene features Margarete, the head nurse, instructing Lucius not to waste time on mortally wounded patients: "I know it's hard, but you'll get used to it" (Mason 76). This utilitarian logic conflicts with Lucius's idealism, initiating a moral crisis that reflects the broader dissonance of wartime medicine. As Shay integrates, moral injury highlights the emotional consequences of betrayal in risky settings by authority, and the concept magnifies Lucius's situation. The experience creates a deep ethical dilemma for Lucius.

The contrast between Lucius's medical oath and the need to triage patients according to available resources highlights the ethical dilemma that faces combat physicians. As a student, Lucius had felt medicine was an art of precision and compassion. He had a "dream of being able to see another person's thinking" (Mason, 18). The battlefield soon dispels this ideal, reducing surgeries to survivalist procedures without the component of empathy. His first amputation rewires his psychology. It takes a shift from being a healer to becoming a traumatized actor in the violence of war. The transgression of his fundamental ethical principles is a deep moral wound, the term that Jonathan Shay describes as the long-term psychological harm resulting when an individual in power commits what is felt to be a betrayal of that which is morally correct. The betrayal in the case of Lucius is not that of a superior but

systemic, involving the logistical realities of war that compel him to deviate from his medical principles. These instances reflect on the ethical and moral dilemma of Lucius, depicting the transition from being a highly motivated, academically driven student to an unwilling bearer of death. This is both a professional transformation and a symbolic demise of his moral self.

Richardson's Metatheory of Resilience:-

Glenn E. Richardson's resilience theory divides into three stages: homeostasis, disruption, and reintegration. The first stage is where the individuals operate within a stable psychosocial system. The second stage, disruption, results when the system is destabilized by occurrence of any serious trauma, pushing the need for reintegration in either healthy growth or pathological dysfunction. Lucius's present life in the church becomes a perfect example for this model. His shift from secure and well-balanced academic life to war's horrific confusion and then to his strained efforts to reintegrate to his old self. While Richardson highlights the potential for resilient reintegration, he also concedes that some remain wired in fragmentation. This can be studied with the help of Judith Herman's trauma recovery model. According to Herman, healing is only possible through safety, remembrance, and reconnection. Unfortunately, Lucius lacks everything he needs to heal. His surroundings continue to change consistently which breaks the relationship he built with the people he loved. His employment at a rehabilitation center provides a fleeting experience of structure, but he finds no emotional closure. Estrangement from family, friends, and his mind reflects the vulnerability of reintegration. This resilient reintegration in *The Winter Soldier* is not depicted as a transition to a trauma-preceding state, but instead as a learning process for living with the long-term effects of trauma.

Following this, Dominick Lacapra's differentiation of acting out and working through trauma sheds light on Lucius's psychological condition. Acting out consists of repetitive compulsions to reproduce trauma with no outcome, while working through enables integration of the trauma into the self. Lucius's repetitive nightmares and absence of emotional intelligence indicate his times of falling out, while his ultimate quest for Margarete indicates an effort at working through trauma and proceeding to reintegration. This course of action emphasizes the non-linear progression of recovery, in which forward evolution is frequently disrupted by regressions, noting the constant battle to reconcile traumatic experience.

Shell-Shock and the Neurology of War:-

The novel's most powerful description of trauma is in its depiction of the concept, shell-shock, through the figure of Horvath. Displaying paralysis, catatonia, and affective dissociation in Horvath, the condition is afflicted with what was first referred to as nervous shock/ "nerven-shock, a new disease, born out of war," (Mason, 116), as described in the novel. The condition is now technically diagnosed as PTSD, representing the mystery of trauma-related neurological breakdown due to war. Historically, shell-shock was seen as both a medical and moral abnormality. As Crocq and Crocq argue, shell-shock blurred the line between psychological injury and cowardice, complicating medical treatment and societal perception. In the novel, Lucius's inability to treat Horvath and his guilt over Horvath's deterioration mirrors the helplessness experienced by early trauma physicians. Horvath's eventual and imposed return to the combat field, a cruel act of an institution, becomes the final transgression of ethical medicine. This event highlights a deep dilemma for medical practitioners when faced with situations they are not well-placed to handle, and when institutional pressures take precedence over ethical judgment.

The forced return of Horvath into combat contravenes the principle of medical neutrality, which, as Gross elaborates, requires that medical professionals refrain from participating in hostilities and must treat all injured persons with no regard to affiliation. This phenomenon is also compatible with Cathy Caruth's theory of trauma where it is not comprehended in the moment but seen as events that come back through haunting recollections. Horvath's lack of knowledge about his shell-shock condition, despite being a soldier, portrays the limits of medicine during the early 20th century. The representation of shell-shock in the novel acts as a reminder of the bitterness of war, its psychological damage on people as well as the lack of medical knowledge. Bessel Van Kolk's *The Body Keeps the Score* highlights the anatomic trace of trauma, depicting the phenomenon that the memories saved from any traumatic event are not stored only in mind but also in the body, inexpressible in verbal account. Horvath's disassociation and paralysis portrays how trauma intervenes in physical health, making it difficult for medical help and self recovery. Also, Lucius's dream of Horvath is not just a flashback but a portrayal of dissociated experience. This reveals the complex dynamics of the interplay between physical and psychological struggles and difficulty of treating conditions that are resistant to easy classifications.

Power, Gender, and Institutional Violence:-

Mason's depiction of the military institution as hierarchical and abusive explains the novel's trauma narrative. The power employed by characters like Horst embodies the dehumanizing role of violence in war. The physical abuse and sexual aggression imposed by Horst, upon the civilians, portrays a culture of supremacy and impunity. The medical corps are forced to be obedient to military purposes rather than being independent, breaking the principles and immunity of medical neutrality. "Lieutenant, you are going to break his wind pipe" (Mason, 140) shows the amount of violent strength Horst used on Horvath to make him obey his commands, which was for Horvath to return to the military base, despite being sick. The novel demonstrates how violation of medical neutrality by the military represents a chain reaction of breaches in ethics. These flow of patterns reflect how institutions and systems inflict personal trauma and how the fall of ethical norms have extended effects on vulnerable people. Mason drafts Margarete as a character who challenges the conventional gender roles. She exhibits a strong feminine presence while also representing the vulnerabilities of being a woman amidst the severity of war. Her relationship with Lucius goes beyond romance, becoming their survival mechanism and a source of psychological reliability. However, her absence from Lucius's life in the second half of the narrative plays a crucial role in shaping his personality. She becomes the reason for his emotional breakdown, portraying that even love during war comes with loss.

Dori Laub's *Testimony: Crisis of Witnessing in Literature, Psychoanalysis, and History* (1991) underlines that witnessing trauma, either as victim or caregiver, represents an ethical and psychological act of co-presence that requires a response to the realities of trauma. The relationship between Lucius and Margarete highlights the need for emotional stability and interpersonal connection amidst the surfacing violence of war. The degradation of compassion, in cases of relationship and career, compels Lucius to evolve in order to survive. Lucius, a young student who once had a prominent admiration for medicine, has now come to see it as a violent, merciless act of butchery. He became the "Carver of flesh, sawyer of bone" (Mason, 204). He is not only a doctor in the field but also a witness to violence, an actor striving to survive, and a traumatised victim who bears the imprints. Therefore, the trauma that he undergoes is multi-dimensional. Through these instances, the novel firmly represents how power abuse and institutional violence can inflict long-term, deep injuries which often amplify the trauma of war itself.

Intimacy as Resilience: Love, Nature, and Moral Anchors:-

Nature acts as an escapism to all the characters in the novel during the high time of war. Lucius and Margarete's walks in the woods, under the stars or times by the river, collecting herbs and vegetables in the forest give the reader a feel of relief and peace. These scenes represent Richardson's concept of reintegration aids through spiritual and social processes. Margarete's belief in divine protection is evidence of how religion becomes a good coping skill. "I see not death before me, Doctor, I see the glimmer of my heavenly crown" (Mason, 56). These natural scenery and religious events comfort the characters as well as the readers, making it as the counterpoint to violence during war. Despite the strength that love gives, it also indicates the vulnerability of relying on intimacy for emotional stability. When Margarete goes missing, Lucius falls into despair. His unending efforts to locate her depicts the confusion and pain the person feels when they lose their loved ones.

Charles Figley's Compassion Fatigue Model explains the emotional exhaustion one gets while feeling too deeply can lead to psychological shutdown. Lucius's experience reflects the vulnerability of being dependent on bonds for resilience and the risks that people face due to the interpersonal dependency which leads to additional trauma. In the climax of the novel, Lucius finds Margarete married to Horvath, with a child. Despite the shock, this discovery acts as a symbolic closure needed for him to give up on her and move on in his life. He finds her true self and fragments of his shattered self in her. This resonates with Caruth's (1996) suggestion that the return of trauma aids in understanding and healing past wounds. Only after confronting Margarete's reality, Lucius decides to rebuild his life. The lines "Thank you" and "He watched her as she walked down the street....He took a step. The world received him" (Mason, 336) hints at the agonizing task of accepting loss and betrayal and his resilience to live a new life.

Narrative Structure and Symbolism: Fragmented Time and Medical Imagery:-

The non-linear structure of *The Winter Soldier* depicts the fragmentation of trauma. Through memory, latency and temporal reverse, Mason depicts the shattered mind of the protagonist, Lucius. The narrative starts in the middle of the story and then, returns to the flashback of Lucius's evolution from his college as a medical student to a traumatized frontline doctor. The structure that Mason uses captures the "belatedness" of trauma, termed by Caruth in *Unclaimed Experience*. According to Caruth, "traumatic experience isn't fully comprehended at first but comes back to interrupt temporal continuity". Iconic moments of trauma, such as Margarete's disappearance and Horvath's

condition, are recalled through Lucius's fractured memory, resisting simple linear narration. These transitions between events mimic the psychological dissociation of trauma victims. It also creates a narrative empathy and puts the readers in the state of co-living along with the unresolved trauma throughout the plot.

Symbolism also affirms this fragmentation. The repeated symbol of winter narrates the psychological stasis and ethical hierarchy. Further, the title can be seen as a symbol of not heroism, but emotional dormancy and underlying anguish. The cold, blunt landscape portrays Lucius's inner character. Medical imagery displays the darkness of reality. The body is symbolised to the battleground, and the surgical language insists on the conflict between cure and damage. Wounds, sutures, and scars reflect the psychological condition of Lucius, tracing the bodily imprints of trauma. The field hospital is a liminal space where the boundaries like doctor/patient, humanity/inhumanity, sanity/madness are blurred. Apart from civilian and military presence, the space exists in the moral grey area where Lucius operates. The slow destruction of the hospital symbolises loss of Lucius's idealism and morality. Margarete is depicted as a symbolic muse and mirror. As a nurse, healer and flight risk, she resists gender normalcy and symbolises the quality of hope and comfort during war. Hence, her disappearance becomes a traumatic rupture for Lucius, causing him to lose his ethical clarity. Through the lens of these events, it is evident that the entire novel becomes a bittersweet emblem of delight, confusion and suffering.

Aftermath: Haunted Healing and the Long Shadow of War:-

Despite returning to home, Lucius suffers from endless memories of war. The quote "Horvath screaming. Horvath holding up his amputated feet." (Mason, 228) represents these images which are repetitive and intrusive. They are not flashbacks but reminders of unresolved trauma that represent the power it holds over the mind. The medical detachment Lucius had previously encountered as an adaptation or a survival mechanism in the field hospital, now becomes an obstacle to his reintegration into civilian life on an emotional level. That detachment that had made him operate amidst such agony now serves as a barrier to relating and working through his emotional anguish. Irrespective of his professional advancement and the illusion of a structured life, Lucius's personal life remains stagnant with no ability to move forward. An arranged marriage, devoid of emotional connection, ends in disappointment, further highlighting his struggle to find love and normalcy in the aftermath of war. His new role at a rehabilitation center allows him only to function, not to heal or grow. He is stuck in an inactive level, living neither in his past nor in the future.

The significant event of searching for Margarete becomes a turning point in the process of his reintegration. Through his encounter with the past and the woman who was once his source of love and loss, he affirms narrative authority over his life. This difficult act of closure is an evident step to flourish in a new identity and include his traumatic experiences. It is not a matter of forgetting or erasing the past but recognising the influence it has and developing a way to continue further with a fuller sense of himself. Richardson's theory of resilient reintegration is not shown through the elimination of trauma, but in its integration into another greater self-concept. Lucius's life choices strengthen the reality that resilience does not mean going back to the pre-traumatic character. It requires an acceptance of the trauma, comprehending it, and finding a way to live a worthy life despite the loss and suffering.

Conclusion:-

The Ethics of Endurance:-

Daniel Mason's *The Winter Soldier* inspects resilience and trauma through the frequently overlooked lens of combat doctors, focusing on Lucius Krzelewski, whose moral and psychological journey reveals the burdens of devastation and healing. Unlike traditional trauma scripts centered on soldiers or civilians, Mason lays the derived trauma and moral loss. Implementing Glenn E. Richardson's Metatheory of resilience with insights from Caruth, Herman, Lacapra, Laub, and van der Kolk, the novel depicts how trauma disrupts psychological stability, ethics and identity. Lucius's struggle to rebind medical idealism with wartime brutality exposes deep ethical deviations still prevalent in current discussions on military and humanitarian medicine. Resilience depicted by Mason is not linear or heroic but a feeble, slow, ongoing process labelled by fragmentation, acting out and making sense of it. The novel suggests healing isn't forgetting the trauma completely but learning to live with it. Witnessing, both giving and receiving, is crucially impacting in case of any trauma. Borrowing from Laub, Mason shows how shared vulnerability and recognition become central anchors in trauma recovery. Ultimately, this paper portrays the novel *The Winter Soldier* as a part of trauma literature by depicting the complicated ideas of victimhood and survival skills, pulling ethical attention to the caregivers who endure the pain of violence and loss in shadow.

Works cited:-

1. Barcelo, Joan. "The Long-Term Effects of War Exposure on Civic Engagement." Proceedings of
2. The National Academy of Sciences, vol. 118, no. 5, 2021, www.pnas.org/doi/10.1073/pnas.2015539118.
3. Caruth, Cathy. *Unclaimed Experience: Trauma, Narrative, and History*. Johns Hopkins UP,
4. 1996.
5. Charles, Ron. "Review: A Med Student Gets a Crash Course in Battle Wounds and PTSD in The
6. Winter Soldier." *Washington Post*, 4 Sept. 2018.
7. Chorba, Terence. "Trench Conflict with Combatants and Infectious Disease." *Emerging*
8. *Infectious Diseases*, Nov. 2018.
9. Crocq, Marc Antoine, and Louis Crocq. "From Shell Shock and War Neurosis to Posttraumatic
10. Stress Disorder: A History of Psychotraumatology." *Dialogues in Clinical Neuroscience*, vol. 2, no. 1, 2000, pp. 47-55.
11. Figley, Charles R. *Compassion Fatigue: Coping with Secondary Stress Disorder in Those Who*
12. *Treat the Traumatized*. Routledge, 1995.
13. Gross, Michael L. "From Medical Neutrality to Medical Immunity." *AMA Journal of Ethics*, vol.
14. 9, no. 10, 2007, pp. 728-732.
15. Herman, Judith. *Trauma and Recovery: The Aftermath of Violence-from Domestic Abuse to*
16. *Political Terror*. Basic Books, 1992.
17. Lacapra, Dominick. *Writing History, Writing Trauma*. Johns Hopkins UP, 2001.
18. Laub, Dori. "Truth and Testimony: The Process and the Struggle." In *Testimony: Crises of*
19. *Witnessing in Literature, Psychoanalysis, and History*, edited by Shoshana Felman and Dori Laub, Routledge, 1992, pp. 61-75.
20. Mason, Daniel. *The Winter Soldier*. Picador, 2019.
21. Newhouse, Eric. "Betrayal of Trust Can Result in Moral Injury." *Psychology Today*, Sussex
22. Publishers, 9 Dec. 2015, www.psychologytoday.com/us/blog/invisible-wounds/201512/betrayal-of-trust-can-result-in-moral-injury.
23. Richardson, Glenn E. "The Metatheory of Resilience and Resiliency." *Journal of Clinical*
24. *Psychology*, vol. 58, no. 3, 2002, pp. 307-321.
25. Shay, Jonathan. *Achilles in Vietnam: Combat Trauma and the Undoing of Character*. Scribner,
26. 1994.
27. Van der Kolk, Bessel A. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of*
28. *Trauma*. Viking, 2014.
29. Van Way, Charles. "War and Trauma: A History of Military Medicine - Part II." *Missouri*
30. *Medicine*, vol. 113, no. 3, 2016, pp. 202-206.