



Mapping the Silence in Michaelides's *The Silent Patient*: A Study of Bremond's Logic of Narrative Possibilities

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ARTICLE INFO	ABSTRACT
<p>Keywords: Narrative logic, Ally, Negotiation, Elimination of obstacle, Adversary, Amelioration</p> <p>Corresponding Author: Dr Saira Akhter, Assistant Professor, Department of English, Government College Women University, Faisalabad, Punjab, Pakistan</p>	<p>The present study examines psychological trauma, pain, fear and the process of awakening in <i>The Silent Patient</i> by Alex Michaelides through the lens of Claude Bremond's Logic of Narrative Possibilities. The paper reflects on the efforts made by the characters and scrutinises how events take place under the contexts of deterioration and recovery etc., as explained by Bremond. The narrative of the work under study is centered on the journey of Alicia Berenson in her silence, as it successfully tests her inner self and expectations placed on her by the society she lives in. The outcome of the analysis shows that the advanced changes in the narrative reveal the latent conflicts in personal and moral spheres. As a result, these findings support the notion that the manipulation of narrative forms reflects our imperative instincts and drives. By adopting Bremond's theoretical framework, the paper highlights how the plot sequences reveal innovative tactics of psychological defiance and healing. The narrative structure enables the exploration of inner worlds that upend traditional views on freedom and expression.</p>

1- Introduction:

The present study evaluates Alex Michaelides's *The Silent Patient* (2019) with Bremond's "Logic of Narrative Possibilities" (1985). With this perspective, it is possible to understand how parts of a novel present different emotions, moral problems and jarring events in a character's life. Bremond's theory introduces the psychology behind a character's actions when faced with making a decision or simply standing by that decision. The model helps to exemplify and interpret the key points of a text as well as explain how they connect. Stories

are thought to focus on a person's choices and how certain outcomes lead to either pleasant or troublesome experiences.

Alicia's story from *The Silent Patient* shows how knowledgeable the style of writing a novel can be. The absence of Alicia Berenson's voice harms her identity as well as evokes a mysterious atmosphere in the novel after Gabriel's demise. She does not try to avoid people hearing her story, yet she prefers to stay silent. The author poses a question in the reader's mind about who is responsible for what has happened. According to him, staying silent is not just avoiding contact with others, but represents her way of communicating with the world. She shows who she really is through her silence, but it is hard to decode the reasons behind it. Not speaking helps her avoid any questioning about who was responsible for Gabriel's death. Bremond mentions that all the decisions made by the characters about sharing their truth or keeping it to themselves might lead to either positive or negative consequences. She might realize that keeping quiet keeps her safe, makes things happen, allows others to come and go from her life as they choose, or helps mend her feelings and uncertainty. It sheds light on the complexities people encounter as they must weigh the gaps between right and wrong, reality and fiction and their very sanity.

The novel, *The Silent Patient*, brings to light the ways in which silence caused by trauma impacts a person's journey to self-discovery. It prompts a closer examination of the thoughts and emotions that shape the diverse individuals within the story. The novel employs parallel stories to highlight Bremond's belief that each new chapter in a book is the result of the decisions its characters make.

As a result, the novel explains that Bremond's method unveils the ways a persona processes pressure and moves on from trauma, as well as how silence influences the responses of characters to their situations within the story. It offers the reader insight into how psychology affects the actions of the characters in the narrative.

2- Literature Review

Many scholars have explored how trauma, suspense and several other factors affect the plot of Alex Michaelides' *The Silent Patient*. A reader's approach to the novel should take into account how the issues of silence, trauma and identity create tensions in depicting the way a character reacts to psychological and emotional distress. Consequently, Bremond's model helps explain that Alicia's actions determine the plot while establishing character development primarily through her alternately displaying behavior and silence.

Dr. Ayesha Ashraf, Shafqat Naseem and Ghania Khan (2022) in "Traumatic Childhood and Adult Personality in Michaelides' *The Silent Patient*" explore the novel *The Silent Patient* psychologically to show especially how childhood abuse influences adulthood. The researchers rely on the theory of trauma formulated by Sandor Ferenczi and Freud's personality model to demonstrate that the traumatic past of Alicia Berenson is core to her mental condition and her ensuing silence following the murder of her spouse. The textual study shows that Alicia is mostly characterized by the negative encounters that she went through during her early life and that she is unable to develop positive self-growth and to enforce that the impact of that trauma within her is profoundly ingrained in both the silence and behavior of the story.

Manahil Rana and Rana Abdul Munim Khan (2023) in "Words as Medicine: The Therapeutic Art of Storytelling in Michaelides' *The Silent Patient*" use the narrative medicine theory to explain the connection that exists between storytelling and healing in *The Silent Patient*. The study sheds light on the efforts of clinicians (such as Theo Faber) to comprehend patients by using narrative attention, affiliation and representation, revealing that narrative practices can reveal psychological trauma and emotional disturbance. According to them, the silence of Alicia and the traumatic experiences in her past can be better understood when she engages in narrative activities. They also inform the readers that storytelling is a therapeutic

instrument, not just a plot device.

Amelia Pratiwi and Tri Pramesti (2022) in “*Alicia Berenson’s Complex Post-Traumatic Stress Disorder in Alex Michaelides’ The Silent Patient*” dwell on the mental aspect of Alicia’s character based on the Complex Post-Traumatic Stress Disorder (PTSD) models elucidating her actions and her silence. The qualitative psychological perspective that they adopt acknowledges the existence of the following symptoms: emotional isolation, negative self-perception and impulsive behavior, which ultimately shows that the silence in Alicia is not a mere narrative device but rather a result of a profound psychological trauma. This paper demonstrates that the trauma theory can be directly implemented to character development in modern psychological fiction.

Ariffa K (2025) in “Silence, Trauma, and Identity in *The Silent Patient*” uses the narrative identity theory developed by Dan P. McAdams to examine the role of trauma and silence as identity formation in *The Silent Patient*. This study reveals that both Alicia and Theo are creating and recreating their stories in life as a way of coping with their situations. Alicia’s silence is a protective measure against external judgment, whereas Theo’s narration exposes his psychological traumas. This paper brings forth the interrelation between narrative design, identity, and trauma and how silence is a coping mechanism and a theme.

Rashad Al Areqih (2025) in “Female Silence and Psychotherapy through Feminist Approach in Alex Michaelides’s *The Silent Patient*” applies feminist criticism to the silence of Alicia as a symbolic form of resistance to the patriarchal expectations of female roles. Through the analysis of the influence of misogyny and societal pressure on the behaviour of Alicia, the present research claims that her silence is a protest against gender conventions. Her inability to speak is indicative of the profound psychological effects of a patriarchal upbringing on the female identity and narrative agency.

Saadia Noor, Ali Inan and Muhammad Tanner Ahmad (2025) in “Narrative Depths of Metafiction: Genre Subversion in Alex Michaelides’ *The Silent Patient*” use the metafiction theory. The paper examines the unreliable narration and the narrative structure in *The Silent Patient*. Their discussion focuses on the ways the novel employs the postmodern strategies of disrupted chronology and self-referential narration to upset the reader’s expectations and subvert the established thriller tropes. This paper uncovers ways in which narrative form is used as a thematic instrument, and how the problem of truth, identity and made realities are questioned more deeply in the text.

Tourki Abdenour and Mehaya Hind (2024) in “*Silence as Coping Mechanism: Understanding Psychological Trauma in Alex Michaelides’ The Silent Patient*” use the Freudian theory of psychoanalysis to interpret the case of Alicia who remains muted following her repressed trauma. Their work understands the meaning of silence as a form of inner psychological instability and symbolic protection against unhealed emotional distress. Their results are in line with the general psychoanalytic studies, which have associated trauma, repression and narrative silence to provide a strong psychological understanding to explain the behaviour of Alicia.

Nirwan Hayqal and Delvi Wahyuni (2024) in “The Return of Repressed Past Trauma in *The Silent*” employ psychoanalytic theory in the study to concentrate on repressed trauma in *The Silent Patient*, which the author claims is manifested in the actions of the characters, as well as the plot and the evolution of the story. They argue that the silence of the protagonist is directly related to former trauma, which is manifested in the entire novel and affects plot development and interpretation by readers.

Different dimensions of knowledge are employed to interpret the work under study in the reviewed literature such as psychoanalysis, structuralism, feminism and trauma theory. Bremond’s theory allows for an insightful analysis of how plot events affect readers’ enthusiasm and fascination with a work of fiction. His propositions make it simpler to see the

internal workings and themes within the novel by assessing the actions characters take as well as what they deliberately conceal. Hence, the novel focuses on the tension between different types of responses and how they play out throughout the story.

3- Theoretical Framework

The approach adopted in the narrative relies on Claude Bremond's structuralist ideas regarding the way narratives are structured and the various potential outcomes they may unfold. Bremond claims that stories revolve around the choices and actions of their characters and not a sequence of events that are not in motion. Bremond argues that characters have major choices to make, which determine the direction of events in their lives, resulting in, in one instance or several, events that will either improve or deteriorate them.

The narrative theory that was formulated by Claude Bremond is quite relevant in *The Silent Patient* by Alex Michaelides, as the novel is founded on the psychological choices of the main characters, Alicia Berenson and Theo Faber. The fact that Alicia does not speak after her husband dies was a way of retaining some aspect of control, and was at the same time, a way of isolating herself, therefore, creating the potential of not only vindicating herself, but also becoming more isolated. Simultaneously, Theo's motivation to find out why Alicia was no longer speaking blurs his professional boundaries and draws him to the discovery and downfall.

The analysis attempts to find the psychological and moral basis of the story as well as reveal how each decision changes the course of the narrative. This framework reveals how forces within and without the characters influence the choices they make and how that leads to specific outcomes in the story. The framework has the following components:

Semiology of Narrative: It looks into how various elements shape the creation and understanding of a story. It focuses on the social conditions that influence the people, events and decisions in a story. According to Bremond, a narrative is made up of the sequence of events that may occur. This means that a narrative is best seen as something that follows an ordered pattern rather than happening by chance.

The Narrative Cycle: Narrative cycle can change for better or for worse throughout many different stages. One can notice this occurrence in all types of manifestations.

i- Amelioration: Amelioration happens during a quest towards a particular goal, when a character deals with setbacks and lastly, when s/he accomplishes it.

ii- Degradation: The process starts with a danger of weakening and continues through a gradual decline until there is a complete ruin.

These cycles are often found either one after the other or overlapping each other. He believes that a story should consistently move the character in one direction or another.

The Enhancement Step: It focuses on how characters overcome challenges that stand in the path towards achieving their goals. It typically involves three steps:

i- Identifying the Obstacle: A solution is hard to find as the obstacle stands in the way;

ii- The Elimination Process: Devising plans to overcome or solve this problem;

iii- Achieving the Elimination: Solving the problem so that the outcome is improved.

Bremond explains that development is the outcome of changes in our environment or something that was previously absent. The novel focuses on the central issue that most stories frequently encounter.

Completion of the Task: In this stage, the main character might overcome the difficulties and accomplish the goal alone or with the help of others. This is where the most intense scene occurs in the story. Bremond mentions that no matter what happens, the main tension of the story will be resolved in a positive outcome.

Intervention of the Ally: The characters, along with the protagonist, play a significant part by helping the hero overcome obstacles on his or her way. The friendship between characters can result in someone helping out in whatever way they can, offering advice or otherwise

supporting each other for reasons close to their hearts. Allies and their collaboration often play a major role in achieving the goals set in a tale.

Elimination of the Adversary: The hero must clear all obstacles if he wants to reach the resolution of the story. Bremond thinks that conquering the main antagonist is the only way for the story to culminate successfully.

Negotiation: Instead of fighting, the protagonists in these stories tend to rely on tactics like convincing or reaching an agreement during disputes. Caleb believes that not every situation requires the use of obvious means to solve it. The conflict can be resolved when someone shows their gentle demeanor or makes an effective mental effort.

Aggression: In it, hostile individuals met with forceful action such as physical confrontation or through deception. Aggression usually pushes people into making crucial decisions at the height of tense situations like those found in thrillers.

Retribution: The main idea of justice involves giving a fitting consequence to a character's deeds. It shares a fundamental aspect with the stories of justice that surround us. He notices that such an injustice only occurs when the consequences that befall the characters do not match up with their actions.

The Consequences: The consequences begin when the writer brings the story to a conclusion by having the villains be punished for their deeds. Justice is accomplished, so Bremond says, by ensuring that an offender is held accountable for his actions and bringing closure to pivotal events.

4- Analysis

Claude Bremond builds upon the efforts of the Russian Formalists and French Structuralists, especially Vladimir Propp by suggesting a dynamic model of narrative possibilities as opposed to a linear series of events. He supports this argument in *The Logic of Narrative Possibilities* (1973), where a narrator contends that narratives emerge as a result of a sequence of choices that characters and narrators have during various stages in the story. Such a structure helps see the manner in which various narrative trajectories are open, put on hold, or closed down. The model of Bremond can be used to understand why the storyline of *The Silent Patient* (2019) unfolds because of the consecutive decisions of Alicia Berenson and Theo Faber, silence, confession, investigation, concealment, and revelation; each decision leads to different results of the narrative. Using these points of decision to follow through the levels of narrative, the paper identifies how Michaelides structures suspense and psychological depth using the narrative possibilities that are under his control instead of chronological flow.

4.1: Narrative Technique

To create a complex depiction of silence, trauma, and fragmented identity in *The Silent Patient*, Michaelides merges the traditional elements of the psychological thriller with the symbolic and reflective narrative plotlines. The story is written in a dual-voiced format with alternating first-person narration of Theo Faber and Alicia Berenson in terms of their diaries. This establishes a dialogic narrative here where truths are presented in conflicting positions, in keeping with the opinion by Bremond that narratives develop by crossing motivation and reversible action lines. The diary's form brings about a confession-like closeness, as witnessed when Alicia writes, "*This diary is a mirror, and I don't like what I see*" (Michaelides, 2019, p. 37), symbolizing her ongoing struggle and the unreliability of self-perception. In contrast, Theo's voice works as an illustrative and clinical frame, yet it remains reckless, particularly when he admits, "*I wanted to save her... perhaps because I couldn't save myself*" (p. 105), disclosing the mental prejudice that guides his narration. Silence is a resistant and semiotic discourse but not an oppositional lack of speech; the silence of refusing to talk in Alicia is an act of agency against institutional and emotional authority. The time changes, reflective quality, and disjointed memory in the story reflect the disordered psychological conditions of both characters and presuppose power,

trauma, and manipulation as thematic concerns. In this overlaid narrative structure, Michaelides stresses how truth is formed, hidden, and renegotiated along narrative voices which fits into the schema of Bremond, where seemingly leading to revelation, a new layer of doubt and moral ambiguity is at the same time opened up.

4.2: Narrative Cycle (Improvement and Deterioration)

Michaelides in *The Silent Patient* uses storytelling methods to create the impression of a cycle of mental decline and temporary enhancement, which, though, depicts the notion that Bremond presented in the article, that seemingly positive developments in a narrative can be a sign of deeper weaknesses or failure. The first step towards decay is Alicia becoming silent after the killing of her husband Gabriel; she falls out of verbal communication and secludes herself in her own head. Silence turns into a protective and trapping mechanism for her as she writes about it in her diary: "I don't want to speak. Words feel like weapons that could betray me" (Michaelides, 2019, p. 42), emphasizing the depth of Alicia's emotional turmoil and the psychological barriers preventing retrieval. Theo enters her life as a potential figure of amelioration, offering therapy and emotional support, yet his interventions are complicated by his personal motives and psychological prejudices. He confesses, "I felt a dangerous thrill at the thought of saving her... perhaps because it made me feel alive" (p. 88), exposing the fact that his wish to help Alicia is connected with his personal needs, which complicates the process of her healing eventually. This duality highlights the principle of Bremond that the development of narrative frequently introduces new layers of complexity: the more one tries to get better, the more one reveals his/her own shortcomings that were hidden. In the story, every attempt to involve, comprehend, or psychologically heal results in a new struggle and conflict, which is an expression of the twin cycle of cure and destruction. The fact that Alicia is partially improving, as evidenced by the way she engages in painting and diary writing, is always tinted by her internal decay, a fact that illustrates the tenuous and shaky nature of mental healing. This cycle, as portrayed by Michaelides, illustrates the dynamically related nature of human behavior and narrative development, of which any effort to repair or enhance cannot be done without the possible additional deterioration, and hence this cycle fits perfectly into Bremond's paradigm of progress, reversal, and compounded consequence in narratives.

4.3: Amelioration Process

Michaelides, in *The Silent Patient*, portrays the amelioration process when Alicia starts slowly regaining her voice and agency through different means of expression, which is mainly painting. Her art is a transitional place between silence and communication, where she is able to process the trauma and recreate a sense of self. The Alcestis is not only a symbolic but also a practical tool that she can use to take over the reign of her inner world and this is her fight to recover the psychological harm that was caused by the death of her husband and her subsequent institutionalization. Alicia admits the significance of this artistic act when she writes, "I painted the truth. I had to. I couldn't keep it in any longer" (Michaelides, 2019, p. 75), highlighting how her art converts her silence into a noticeable and expressive medium. Through this act, the narrative reveals Bremond's notion of amelioration, where a person engages in efforts that shortly restore order or agency, even as underlying clashes remain unsettled. Michaelides portrays amelioration as both an emotional and symbolic strategy, highlighting the dynamic tension between expression, healing, and the persistence of turmoil within the story's thematic and structural design.

4.4: Completion of the Task

In *The Silent Patient*, the completion of the task is noticed when Alicia Berenson confronts and reveals the truth about her experiences and the actions, marking a significant narrative milestone. This stage shows Bremond's idea that completing a task allows the character to gain understanding, closure, and a shift in agency, even if results remain. Alicia's diary becomes the significant instrument through which she claims her voice, as when she writes, "I killed him... I

had to, though I didn't want to" (Michaelides, 2019, p. 182), revealing not only her guilt but also the motives of her actions that were so complicated psychologically. With this confession, she can put her broken memory and emotional trauma together, and at the same time regain power over her story and reveal the secrets that were once concealed in silence. The truth-telling is thus a personal solution as well as a story climax, and this fits the Bremond model of task fulfilment as a central plot device. It is also an occasion where the transformative effect of self-awareness in reinstating agency in a psychologically suppressing context is highlighted.

4.5: Intervention of the Ally

Theo functions as an ally in Alicia's journey, even his role is layered with ambivalence, showing Bremond's notion that allies often have multiple intentions. Initially, Theo appears to offer genuine and real support, emphasizing direction and trust in therapy, as he says, "*Do not think of me as an adversary. I am here to help you*" (Michaelides, 2019, p. 61). However, his hidden agendas of curiosity, professional success, and personal interest make the therapeutic alliance more complicated, which shows how interventions are seldom out of altruistic intentions in psychologically multidimensional stories. The tension in the story is amplified by Theo being a helper and an observer at the same time because the reader has to work through the grey area between helping, manipulation, and ethical ambiguity, which confirms the concept of Bremond that allies can trigger both the development and the antagonism in the story structure. This kind of activities also brings out his narrative theme which points out that no matter how good the intervention is, the psychological effect may not be intended.

4.6: Elimination of the Adversary

The elimination of the adversary in *The Silent Patient* occurs in both ways externally and internally, as Alicia tackles the trauma that has mannered her expression. While Gabriel's death (Alicia's husband) serves as the initial traumatic incident, her quietness, and the psychological manipulation by Theo shows the adversarial forces she must control. By confessing her truth via her diary and art, she symbolically controls these constraints: "*I gave him my diary. That was my voice*" (Michaelides, 2019, p. 179), taking back the power to write her history. At the same time, the fact that Theo later came to light and understand his obsessive intentions depicts the internalization of the narrative implications, as it is demonstrated by Bremond that the enemies may be nullified either by direct conflict or by the self-understanding of the character. By removing these antagonistic forces, the story is able to develop in a direction that leads to resolution and brings out the interaction between the psychological struggle and the ethical reckoning. This phase shows how self-expression and inner strength are used as a means of previously conquering external and internal misfortunes in the story.

4.7: Negotiation (Manipulation, Coercion)

In *The Silent Patient*, negotiation works through manipulation and coercion between Theo Faber and Alicia Berenson, demonstrating Bremond's principle that characters sometimes use indirect plans to influence each other. Theo establishes trust and authority in therapy sessions, as he says, "*I am here to guide you, but you must be honest with me*" (Michaelides, 2019, p. 64). That seems to be friendly on the outside, but is also coercing Alicia to open up. His style is deceptive as it plays on the silence of her to make it into a means of revelation, making him appear as an aider and a voyeur at the expense of his own curious and obsessive nature. The biased obedience and reserved reactions of Alicia show that she understands this manipulation, and the relationships between power in therapeutic relationships are very complicated. This discussion emphasizes the notion of Bremond that coercive or persuasive actions are part of the narrative tension because they compel characters to face their weak aspects and they modify relationships with each other, albeit indirectly. With the help of these dynamics, the story focuses on the power of psychological influence as a force of help and danger, multiplying the suspense and moral confusion.

4.8: Aggression (Avoidance, Deception, Dissimulation)

Aggression in the novel appears through avoidance, deception, and dissimulation, showing the antagonistic tensions that direct the narrative. The silence of Alicia itself is a protective mechanism, as she admits, "*I cannot speak... it would only make everything worse*" (Michaelides, 2019, p. 45), revealing her avoidance of resisting guilt. Similarly, Theo Faber masks his own interests under his professional duty, confessing privately, "*I told lies to everyone... even to myself*" (p. 101), demonstrating his appearance and intention of lying with others. The aggressive layers are also self-preservation and a literary device to set the suspense to a higher level, reflecting an idea formulated by Bremond that the hidden intentions of characters may bring moral and mental conflict. Michaelides presents aggression as both an external and internal struggle, making it clear that avoidance and dishonesty make the pathways to reality and solutions more difficult.

4.9: Retribution, Recompense, Vengeance

The major theme of retribution and vengeance appears strongly when Alicia Berenson recovers control of her narrative through her diary, turning the tables on Theo and confronting past inequalities. By writing, "*He chose himself, he chose to live. I couldn't forgive him*" (Michaelides, 2019, p. 184), Alicia claims righteousness against the people who cheated her, which proves the idea of Bremond that revenge gives the characters a chance to restore the balance or make criminality feel the power of the revenge. Her actions are quite symbolic and real and are a way of punishing some form of disloyalty and, at the same time, ensuring a personal closure. The second part of the story brings out the mix between justice and psychological release and how the victims can find strength in revelation or exposure.

4.10: Consequence

In *The Silent Patient*, the results of characters' actions open with irreversible impact, illustrating Bremond's concept that narrative outcomes mirror gradual decisions. Alicia's final act of revelation via her diary does not eradicate her confinement within the institution but allows Alicia to regain narrative authority: "*I gave him my diary. That was my voice*" (Michaelides, 2019, p. 179). Theo, on the other hand, confronts the psychological issues as well as social consequences of his deception, obsession, and recognizes, "*Everything I built came crashing down... it was my own doing*" (p. 189). These results reflect the intertwined destinies of both characters, showing how personal acts and hidden motives eventually shape their fates. Michaelides emphasizes that consequences are both virtuous and structural, demonstrating Bremond's idea that narrative intentions often depend on characters challenging the consequences of their own decisions.

5- Conclusion

Using the narrative theory described by Bremond in *The Silent Patient*, it is evident how the decisions of Alicia and Theo influence the character development of the two and the ethical direction of the story. Alicia's silence is not only a withdrawal mechanism, but it is a plotted means of disobedience that enables her to find the truth and identity in a world that insists on defining her apparently. By her art, namely Alcestis, she makes trauma expressive, demonstrating how creativity can work as a healing and self-affirmative power in the cycle of decay and partial recovery of Bremond. The obsession of Theo, on the contrary, demonstrates how the need to save someone may be disguised and cover the deeper psychological issues; trying to decipher Alicia, he gets involved in her story and, finally, realizes the result of his own actions. The alternating actions of 'Improvement' and 'decline' in both characters support the notion by Bremond that narrative meaning arises out of changing conditions of advancement, failure and moral struggle. The liquidity of the roles of an ally and an enemy, of trust and betrayal, of manipulation and revelation, stresses the moral vagueness that defines their relational dynamics. It is with the help of these tensions that the novel transcends a standard psychological thriller and enters into a complex examination of trauma, guilt, silence, coercion,

and loose human agency. The structure of the story that Bremand has finally revealed is the structure around not events but around choices, secrets, and turning points, which set the characters on the path of psychological exposure and inescapable outcome.

References

Ashraf, A., Naseem, S., & Khan, G. (2022). Traumatic Childhood and Adult Personality in Michaelides' *The Silent Patient*. *Pakistan Languages and Humanities Review*.

Abdenour, T., & Hind, M. (2024). Silence as Coping Mechanism: Understanding Psychological Trauma in Alex Michaelides' *The Silent Patient*.

Ariffa, K. (2025). Silence, Trauma, and Identity in *The Silent Patient*. *Journal of Academic Research and Jurisprudence*.

Al Areqih, R. (2025). Female Silence and Psychotherapy through Feminist Approach in Alex Michaelides's *The Silent Patient*. *Journal Universities' Advent Indonesia*.

Bremond, C. (1973). Logique du récit. Paris: Seuil.

Bremond, C. (1985). Logic of Narrative Possibilities. In *Narrative Structures*, ed.

Hayqal, N., & Wahyuni, D. (2024). The Return of Repressed Past Trauma in *The Silent Patient*. *Ivysci Journal*.

Michaelides, A. (2019). *The Silent Patient*. London: Orion Publishing.

Noor, S., Inan, A., & Ahmad, M. T. (2025). Narrative Depths of Metafiction: Genre Subversion in Alex Michaelides' *The Silent Patient*. *Wah Academia Journal*.

Pratiwi, A., & Pramesti, T. (2022). Alicia Berenson's Complex Post-Traumatic Stress Disorder in Alex Michaelides' *The Silent Patient*.

Rana, M., & Khan, R. A. M. (2023). Words as Medicine: The Therapeutic Art of Storytelling in Michaelides *The Silent Patient*. *Qlantic Journal of Social Sciences and Humanities*.