

The Architecture of Healing: A Screenplay Depicting the Three Stages of Healing After Trauma

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ABSTRACT

The screenplay *The Architecture of Healing* explores trauma and recovery through a psychological grounded narrative of Sarah's life after rape. Inspired by the writer's true story, the screenplay draws from Judith Herman's concept of C-PTSD and her three-stage model of healing. Using drama as the genre of the story, the creative work focuses on Sarah's journey towards healing as a gradual process and life after rape, accompanied by symptoms from C-PTSD and Rape Trauma Syndrome (RTS), developed by Ann Wolbert Burgess and Lynda Lytle Holmstrom. In the end, Sarah learns to take a leap by sharing bits of her story to someone trusted as part of her healing, though it risks re-traumatization. Ultimately, her reconnection stage begins at the end of the story. In other words, the ending of the story is the beginning of her life.

Keywords: C-PTSD, psychological drama, rape trauma syndrome, recovery theory, sexual assault

INTRODUCTION

Psychological trauma is increasingly acknowledged by people of all ages as a significant issue correlating with mental health, yet its processes of recovery remain widely misunderstood or not clearly known. For Judith Herman, a research professor of clinical psychiatry at Harvard University Medical School and the founding member of Women's Mental Health Collective, psychological trauma is an overwhelming event that breaks human's normal adaptations (Dell'Omo, n.d.). She emphasizes the importance of recovery after trauma, a reason behind her book of trauma that is inseparable with recovery. Herman (1992) is known best for her research of complex post-traumatic disorder or C-PTSD and her three-stage recovery model: safety, remembrance and mourning, and reconnection.

According to Salamena (2025), as trauma can interfere with social relationships, lack of social support can risk an individual from recovering and returning to their initial productive lives. Additionally, some people are not even able to talk about traumatic situations because of stigma. Especially in Asian countries where speaking about trauma may be regarded as a taboo, uninformed environment inhibits an individual's healing process. As healing is non-linear, as stated by Herman (1992), if an environment does not understand the trauma and its aftermath, they might expect a quick fix from a victim that ignores the reality of recovery which is long-term. This explains the importance of the moral message of creative work. Ultimately, it serves as an advocacy for survivors of trauma.

The writer's lived experience as a survivor of sexual assault enhances the authenticity of the theme of survival and emotional foundation of the creative work, healing. Dismissive responses such as 'move on' or 'get over it' are widely recognized as harmful as they can further increase the complexity and severity of the traumatic experience (What To Say (and Not To Say) To Someone Who Has PTSD, 2025). Moreover, Callender and Dartnall (2011) highlights that being believed is a crucial component of recovery as it affirms the survivor's experience and helps restore the sense of control. Effective healing, therefore, also does depend on an environment characterized by respect, empathy, and psychological safety. In this context, creative work is driven by the intention to challenge reductive societal responses towards trauma and post-trauma, healing.

The creative work in the form of live-action film is employed as the primary medium due to its unique capacity to render internal psychological states through sound designs, visual cues, foreshadowing, and temporal elements such as flashbacks, allowing trauma to be fully conveyed not as merely a narrative content, but as a lived experience that audience can tag along. The choice of drama as a genre is deliberate, as it prioritizes character-driven storytelling and emotional realism, foregrounding the processes of survival and healing rather than the violent act itself. This is essential in representing sexual assault trauma ethically, as drama conventions such as flashback, is needed to enhance the storytelling.

This creative work centers around Sarah, a 19-year-old young lady who travelled to New York alone seeking a new beginning and distance from her childhood difficulties. However, the expected happiness is disrupted when she experiences sexual assault perpetrated by a trusted family friend, marking the critical turning point in the narrative. The story follows Sarah's survival and complex aftermath of trauma, emphasizing psychological symptoms, emotional and interpersonal challenges that shape her recovery in the end. The narrative also follows how an individual who has experienced a traumatic incident reconfigures her sense of self and relationships. In doing so, the work does not focus resilience as an inherited trait, but as a process that emerged through gradual recovery and lived experience shaped by internal struggle and external conditions.

The Architecture of Healing depicts Sarah experiencing rape trauma syndrome as part of C-PTSD symptoms and several other psychological PTSD symptoms which brings back childhood traumas through flashbacks of past nightmares and the incident itself. At the same time, Sarah overcame her fears and journeyed through her healing from being a sexual assault victim to survivor in specifically three stages of healing: safety, remembrance and mourning, and reconnection.

PTSD VS C-PTSD: TRAUMA IN LIFE

According to Salamena (2025), PTSD is a mental disorder that is not new. Today, PTSD and its extension are considered a serious mental health issue with long-term effects and needs help of intervention. People with PTSD or C-PTSD experience symptoms activated by environmental triggers. While PTSD provides a foundational framework for the understanding of trauma-related symptoms that Sarah has, Herman (1992) expands this understanding through her concept of C-PTSD.

PTSD usually arises from a single traumatic event, the rape itself. The difference with C-PTSD arises from repeated or sustained exposure to trauma, especially in a case where the individual feels trapped or helpless, often starting in childhood. In addition to that, one of the challenges is often found in their symptoms as they are not easily recognized, either by the bearers themselves or by those around them. Many people regard that they are just 'sad' or 'stressed out', when in fact, they are in a state of needing more serious intervention. Some of the main symptoms that often appear in people with PTSD compared with C-PTSD:

Traumatic stress disorders	
"Gate" criterion: traumatic stressor Select either PTSD or complex PTSD	
PTSD	Complex PTSD
Re-experiencing	Re-experiencing
Avoidance	Avoidance
Sense of threat	Sense of threat
	Affect dysregulation
	Negative self-concept
	Interpersonal disturbances

(Cloitre, Garvert, & Brewin, 2013)

The table above sums up the difference between PTSD and C-PTSD symptoms. C-PTSD is PTSD basically, added with more complicated symptoms that affect emotion, self-identity, and social responses, all of the symptoms Sarah possesses because of not only the incident, but also her past.

In *The Architecture of Healing*, Sarah is depicted as a girl who endured childhood neglect and emotional abuse. In adulthood, she endured rape trauma. Because of these, precise symptoms in the aftermath of trauma must be based on scientific support rather than intuition. These theoretical frameworks are used to accompany Sarah's daily behavior and responses towards her environment and herself. As Sarah experienced repeated exposure to trauma in childhood, C-PTSD symptoms cater to explain how it has impacted Sarah as an adult. The way she responds to unwanted situations allows the audience to see that she struggles to process emotional things, allowing her to even feel nothing at all (numbness). Additionally, Sarah's childhood trauma has never been cured or intervened. While the trauma still exists in Sarah's life, she experienced rape, a trauma that caused her to face interpersonal struggles, negative self-concept, re-traumatization, and a sense of threat from everywhere.

While C-PTSD framework by Herman (1992) provides a broad knowledge on symptoms and understanding general trauma, when we created Sarah, Sarah experienced rape assault, a specific sexual assault, according to Adoch (2022) as an act of crime done in the absence of consent. For this reason, a more specific rape trauma symptoms need to be explored. Rape trauma syndrome (RTS) offers a more focused discussion on the immediate and long-term reactions experienced by specifically the trauma caused by rape.

RAPE TRAUMA SYNDROME (RTS)

Chivers-Wilson (2006) identified that sexual assault is the most frequent cause of PTSD among women. Originally developed by Ann Wolbert Burgess and Lynda Lytle Holmstrom in 1974, where they asked ninety-two victims and identified stages of RTS including acute stage, underground stage, reorganization stage and developmental stage. Those stages reflect the evolving nature of trauma responses.

1. Acute stage → The stage happens immediately after rape. Typically, the victim experiences bodily sore around the intimate area. Emotionally, the victim feels shame, fear, anxiety, and often self-blame. This disrupts daily routine instantly.
2. Underground stage → In the underground stage, the victim tries to hide it for the sake of moving on. However, beneath the strong mask, there lies a wound that stays unresolved. This stage might look like a recovery, but it is far from it.

3. Reorganization stage → This stage is marked by the return of emotional turmoil, the revisitation and re-traumatization. Past or unresolved trauma can also come back at this stage.
4. Development stage → Victims learn to understand the meaning of being a victim and start to develop a style of expressing repressed feelings.

THE THREE STAGES OF HEALING

Safety: Trauma often leaves the survivors feeling powerless over their own body and decisions. Because of this, the necessity of establishing a safe environment is important to give the sense of control back to the victim. In this stage, survivors often experience hypervigilance or hyperarousal, assessing every potential threat in each new setting they encounter, especially if the trauma occurs within a familiar or interpersonal context that diminishes trust.

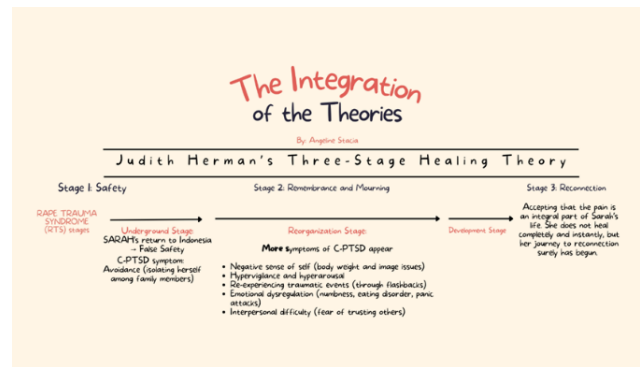
In the creative work, Sarah establishes safety by going home to Indonesia, her home country. This stage is parallel to RTS's underground stage. She thought going back meant peace and the start over of a new chapter in her life. However, unresolved trauma follows and again resurfaces. A depiction of her hypervigilance led Sarah to Herman's (1992) second stage.

Remembrance and Mourning: As outlined by Judith Herman (1992), this stage involves the active reconstruction of the traumatic experiences into a coherent narrative. These traumatic memories, however, are "series of still snapshots or silent movie" (Herman, 1992, p. 97). In this stage, the victim's narrative gets closer to the incident itself. This is where everything comes back. The victim not only feels guilt, but also ask the question, "why me?".

As Sarah gets closer to the incident itself, she shows symptoms of avoidance, even with family members. The second stage of healing is parallel with RTS's reorganization stage. As Sarah experiences numbness, she also has difficulty connecting with others. With her integrity and self-confidence taken away by the rape, her mind unconsciously tries to make sense of everything which is overwhelming. Sarah faced multiple environmental triggers, starting from her university classroom which brings her to a flashback of the rape and a family dinner setting which reminds Sarah of her childhood nightmares. Later, pressure keeps coming from Aunt Lia, a deliberate technique to add layers of the factors of repeated trauma which results in C-PTSD.

Reconnection: Having come to terms with a traumatic past, in this stage, the survivor ventures forth, building a future. Critically, reconnection is not a return to the pre-trauma state. The survivor mourned the old self that the trauma had destroyed. Now, the survivors acknowledge that they must develop their new self. The relationship that was tested and forever changed by trauma, now, the survivors must develop new relationships. Since their old beliefs that gave meaning to life have been challenged, the survivors must find a new faith.

In the third stage of recovery, it is all about reclaiming a new world. In the screenplay, Sarah's reconnection stage begins as she shared her story with Bintang, who encouraged her to tell Peter the truth of her past. Acknowledging that her trauma would not heal instantly, Sarah knew she did not have to face it all alone anymore. The story's ending is Sarah's new beginning.



(created by Angeline Beauty Stacia)

The above figure sums up the integration of the three theories used and how they are applied in creative work. PTSD and C-PTSD symptoms are used to cover the symptoms appearing alongside the stages of RTS. Act 1 opens from the false victory of safety for Sarah, skipping the incident itself, but opens the screenplay with RTS underground stage. This stage leaves Sarah with suppressed and unresolved trauma. The underground stage serves as timebomb technique that hints the audience of incoming problems when situations are too good to be true. Meanwhile, act 2 is the weight of the whole screenplay. In this stage, Sarah not only experience emotional turmoil, the primary theme of rape itself is revealed. The second stage of healing, remembrance and mourning, is also the reorganization stage of RTS. In C-PTSD, recurring nightmares are part of the symptom. In RTS, recurring childhood memories, which represent part of Sarah's life nightmares, resurfaced. This stage is central to the screenplay as it locates the conflict, the whole theme, climax, and the overall goal of conveying the message. In the climax, Sarah is given no choice but to tell her best friend, Bintang, because she is well-aware she truly needed someone to talk to. She cried and she evidently exposed herself in a moment of vulnerability. With no return and no choice left, Sarah is pushed forward into the next stage, reconnection, as she begins to share her story to Peter, boyfriend.

CONCEPT OF THE CREATIVE WORK

The creative work in the form of a screenplay has an approximate maximum duration of thirty minutes. Throughout the limited runtime, the story frames healing from trauma as a gradual process and part of an essential cycle after trauma that not many truly comprehends as much as audience comprehends mental health. The creative work is a psychological drama as it explains the complexities of human mind and behavior, grounded in trauma, specifically C-PTSD, and recovery theory. Solomon Idyo (2025) state that the drama genre focuses on realism, character-centric, and conflict-driven. Furthermore, Moreno and Moreno (1973) defines psychological drama or psychodrama as a science which explores psychologic truth by dramatic methods.

The eight-sequence structure of screenwriting guided by Gulino (2024) is employed in this creative work. The purpose of using the technique is to impose continuous dramatic questions and tension so that audiences are encouraged to guess the possible outcomes before the actual resolution. The film targets audiences of psychological drama and contemplative narratives, particularly those interested in life after trauma and seek healing of their own. The film is also well suited for distribution either via theoretical release or digital platforms such as Netflix or other Over-The-Top (OTT) streaming services.

Premise

The premise of the short screenplay *The Architecture of Healing* centers around Sarah, a 19-year-old girl who went back to Indonesia from New York to seek for healing, only to face judgement and financial pressures from her own family, causing her trauma to resurface. Through the journey, she wants to feel okay. To do that, she must confront her fears of trusting others or remain trapped within her emotional wounds that nobody knows about.

Theme

The central theme of *The Architecture of Healing* revolves around life after trauma, particularly rape and broken childhood. The journey through healing is followed by traumatic symptoms that eventually teaches a lesson and moral message: healing is not easy and will eventually kill an individual from the inside if no support exists. By allowing a trusted presence to help oneself get out of the loophole of trauma, through openness and honesty of the trauma and the admission of needing help, an individual can begin to heal and truly recover.

Plot

The eight-sequence structure of screenwriting guided by Gulino (2024) is employed in this creative work. Act 1 consists of sequences 1 to 2: the status quo, inciting incident, predicament and lock in. This stage mostly portrays the journey to the safety stage. Later, in act 2, which consists of the first obstacle, raising the stakes, midpoint, rising action, and main culmination, includes a scene where safety stage is forced to move forward to the remembrance and mourning stage through a depiction of Sarah's hypervigilance. While act 2 consistently explores C-PTSD symptoms guided by the RTS narrative arc, which includes flashbacks of childhood memories, the revelation and resolution of the whole theme of rape is positioned in act 3. In Act 3, new tension, twist, and resolution explains the trauma Sarah endured in New York. It further reveals an explanation of her fears of trusting others, as well as not sharing her pain with boyfriend Peter in the very first place.

While the whole narratives focus on healing, the flashback in the screenplay is a key addition that serves as the underlying cause of Sarah's fear of trusting others and the pain that has caused her PTSD. The flashbacks appear two times, and it disclosed essential traumatic events. First, Sarah was triggered environmentally when she took a university exam, and it takes her back to the day after the rape. In that flashback, the C-PTSD symptom of recurring nightmares acts as a deliberate to bring Sarah further to the incident itself in one beat. In other words, a flashback in a flashback. In the second flashback, the scene depicted some of Sarah's childhood trauma which is triggered environmentally one more time.

Synopsis

Sarah, a 19-year-old woman, returns from New York to home country, Indonesia, believing that going home will provide her with safety and another fresh start. Upon her return, she conceals her true reason for return, a traumatic experience she is yet to confront. Her decision to suppress her emotion towards her past initially allows her to appear stable. However, it also prevents genuine healing.

The fragile stability begins to unravel when her environment, including family members, challenges her decision, framing her return as if it was a failure. Not only that, but she also continuously faces financial pressure because of her father's condition. External pressures trigger internal distress, gradually triggering the resurfacing of suppressed trauma. While Sarah continues to avoid disclosure, environmental remembrance brings her back to the incident. Her

psychological state continues deteriorating, marked by intrusive thoughts about her self-esteem, tendency of emotional withdrawal, and symptoms consistent with C-PTSD.

In the end, Sarah's encounter with Bintang prompts Sarah to reconsider silence and take the first step of healing by sharing with Bintang. Encouraged to open further, she confronts the fear of rejection and tells the truth to boyfriend, Peter. Contrary to her fear, her plea is met with acceptance rather than judgement. This moment is the mark of the beginning of reconnection and the end of the story.

Characters

The main character in the short film is Sarah. She looks like a normal 19-year-old girl, but beneath her charm and smile, she carries a burden that she keeps to herself, a depiction of isolation. Sarah is the protagonist who is characterized as someone who carries pain and keeps it all to herself. In the beginning, she just wants peace, even without understanding what true peace meant. She wants to break free from the pain she endured as a child and the anxiety she often experiences in life. Like any other 19-year-old, surely, they are still in need of guidance, especially in the case of Sarah who is traumatized by sexual assault. Not only did Sarah not receive any intervention, but she was also further pressured by familial dynamics. Aside from that, financial pressure is also put on her just because her estranged father was sick.

Her deeper need, however, is to accept what had happened to her and reconcile with her new self-identity. She also needs to stop letting herself drown in depression all alone by not letting other people mistreat her, even if they are family members. While Sarah is depicted as a girl who has difficulty in communicating and trusting others, her self-isolation further hinders her from healing. She feels that staying away from others is peace (safe zone) while it neglects her goal to true healing.

In order to heal, she must name her trauma, seek help, and start to trust others who love her genuinely, like boyfriend, Peter and best friend, Bintang. Therefore, Peter and Bintang act as important supporting characters in the story. Bintang functions as a model who represents what real safety should feel like. In their interaction, Sarah never feels pressured to tell Bintang anything if she does not feel comfortable to. Sarah is also never pressured to do anything she did not want to. Bintang never crosses the line by not passing any boundaries Sarah does not feel comfortable sharing. Bintang's encouragement led Sarah to eventually tell her boyfriend, Peter, whom she was scared to tell. The reason is fear of rejection. Sarah thinks that Peter will not accept her for who she is if he knows that Sarah is not a virgin anymore. Or worse, Peter might think it was Sarah's fault that the incident happened. On the contrary, in the ending, Sarah tells Peter, marking a positive arc for Sarah, and Peter does not judge her. Peter just needed more time to process everything. Finally, Peter is committed to staying with Sarah and learning how to be more present for her.

Conflict

The primary conflict of *The Architecture of Healing* centers around Sarah's internal conflict with her own thoughts. All her trauma comes back because she battles with her negative thoughts. Any external behavior can be considered as 'bad' by Sarah. However, she does want to break free from all those feelings. Through a confrontation with family members and the peak of her patience, she shares her story with a help who was already there from the beginning but just waiting for her to come near. This is the story of Bintang. Ultimately, for Sarah to completely heal, she must be honest and face one of her strongest fears of losing boyfriend, Peter.

CONCLUSION

The creative work aims to strengthen the academic insights presented in the story. First, recovery is not as easily done as experiencing the trauma. Second, trauma is often environmentally triggered. Third, no individual should carry the burden alone. They must learn to speak up not as a weakness, but it should be encouraged as strength. Fourth, once an individual can point out the trauma and accept it as part of their identity, they can coexist with their emotional wounds rather than be dominated by them.

In the case of rape, where immediate responses can be depicted through Rape Trauma Syndrome (RTS), each stage is accompanied by PTSD and C-PTSD symptoms conceptualized by Judith Herman. In every trauma, there is also a way to heal, though it can be challenging. Judith Herman's three-stage recovery model is parallel to RTS's stages where in healing, an individual must overcome trauma symptoms, or they cannot move forward. If an individual avoids emotional turmoil to reach for temporary peace, they also walk further away from true healing.

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