

Fractured

DAWN BARKER

READING GROUP NOTES

A READER'S INTRODUCTION TO THE BOOK

Fractured is the intensely powerful story of a family torn apart by a tragedy that pivots on the events of one day, all the pieces of the jigsaw gradually fitting together as the story builds to its devastating and inevitable conclusion.



ABOUT THE AUTHOR

Dr Dawn Barker (*pictured left*) is a child psychiatrist. She grew up in Scotland, and studied Medicine at Aberdeen University. In 2001 she moved to Australia, completed her psychiatric training and began writing.

Fractured is her first novel, although she has written many non-fiction articles on parenting and psychiatry for websites and magazines. She has also published academic articles on mental health and writing.

Dawn lives in Perth, Western Australia, with her husband and three young children.

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THE BACKGROUND TO *FRACTURED*

I had thought about writing *Fractured* for a long time – years in fact. I started it dozens of times, but never got further than a page or two before I declared that I couldn't write and was wasting my time. While working full time as a doctor, I didn't really have the time or emotional space to tackle such a big project. However, when I had my first baby, I found myself at home on maternity leave with only a newborn for company, and I knew that if I was ever going to write a novel, then that was the time. I signed up for an online novel-writing course through Queensland Writers Centre and I wrote 500 words each day while my baby napped until it was finished. After a couple of redrafts, I entered the manuscript into the 2010 Hachette/Queensland Writers Centre Manuscript Development Program and was lucky enough to be chosen to participate. The program gave me invaluable insights into the world of publishing, but more importantly, confidence in myself and the book.

QUESTIONS AND ANSWERS WITH DAWN BARKER

What inspired you to write this novel? Did you have any particular influences?

In my study and work as a psychiatrist, I had seen many women affected by mental illness in the perinatal period. While I must stress that this book is fiction, and in no way based on any real cases, I had always wondered how a family could ever cope with a tragedy like that dealt with in *Fractured*. I thought that a novel would be the ideal medium in which to explore this, but I worried that it was too confronting a subject, and so never pursued it until I read *We Need To Talk About Kevin* by Lionel Shriver. That was the turning point for me: I realised that you could write about horrific situations sensitively, and that many people do want to read about uncomfortable issues.

Most readers will find the plot of *Fractured* disturbing. Did such a confronting theme make it difficult to write at times?

The idea of this happening to a family had always distressed me, and in some ways writing this novel was a cathartic experience for me. That's not to say it wasn't difficult to write at times, particularly by the end of the book when I felt quite engaged with the characters. I certainly shed a few tears while writing some of the final scenes.

What kind of response do you hope readers will have to *Fractured*?

I hope that readers are engaged with the story and the characters, even if it's difficult to read at times. Most of all, I hope that it makes people think and that it promotes awareness of postnatal mental health issues. While this is a novel, we all know that the central tragedy in *Fractured* does actually happen to some families, and perhaps by encouraging discussion it will help a woman to ask for help.

What research did you do for the book? Does the story draw from your experience as a clinical psychiatrist?

Fractured is complete fiction and is not in any way based on any real clinical cases. However, I have spent many years studying mental illness and working in psychiatric clinics, so inevitably my experiences as a doctor have influenced my writing. I also don't think I could have written this if I hadn't had my own children, as my experiences as a mother of a newborn also shaped the story. I was lucky enough never to experience mental health problems myself, but I think that many emotional difficulties in the early weeks after having a baby are universal.

Because of my own experiences, I didn't have to do much formal research for the book. I read media stories of real cases, court transcripts, and I picked the brains of a police officer and a lawyer to clarify some facts.

The way in which you move back and forth between narrators and in time, bringing us ever closer to the events of that fateful day and then beyond, is a brilliant way of gripping your readers from the very first page. Was this structure important to you in telling the story?

The structure of the book was something that I struggled with initially. In my first draft, I wrote Anna's point of view, then Tony's, then tried to weave them together. It was still a linear story though, and it didn't quite work. Over subsequent drafts I started to flit around in time, adding in other characters' points of view, and it was then that I knew it would work. I think the structure reflects the nature of memory after a trauma, where things in the past only

take on relevance in retrospect. As a psychiatrist, I often have to piece together patients' stories to make sense of a situation, and I wanted the reader to be part of this process too. It also mirrored most closely the fragmented mental state of the characters.

Each of your protagonists feels partly culpable for the tragedy at the heart of the story. Did you deliberately try to ensure readers could relate to aspects of each of their personalities?

Initially I tried to think in terms of a protagonist and antagonist in the story, but it quickly became apparent to me that it wasn't realistic and life isn't that black and white. Ultimately I wanted to write about a family – and characters – that we could all relate to, and people are complex with many conflicting emotions. So it wasn't a deliberate decision; the development of each character became almost unconscious.

The feelings of guilt and bewilderment experienced by each member of the Patton family (and Wendy) are inextricably linked to their individual secrets, and forgiveness and understanding necessarily don't come easily for any of them. Was the complex nature of mother–child and sibling relationships something that you consciously chose to explore?

Not consciously, no. But I work with families in crisis and know that a family is a complex system where the actions of one member affect everyone. So, for me, it felt natural to explore the nature of these relationships.

Who are some of your favourite authors?

This is a hard one! I read widely, and make time to read every day. Some of my favourite 'big name' authors– those whose books I would rush out to buy – include Tim Winton, Kate Grenville, Isabel Allende, J.M. Coetzee and Margaret Atwood. But there are so many other wonderful writers whose books I have recently read and loved: David Vann, Chris Womersley, Jon Bauer, Tony Birch . . . It's hard to pick a few!

SUGGESTED POINTS FOR DISCUSSION

1. The structure of the novel – with its flipping back and forth in time and perspective – is key to its success as a gripping tale. What role did the shifting point of view play in your reading experience? To what extent do you feel the narrators' authority as storyteller, and ultimate source of truth for the novel, is undermined by this role being shared by four characters, the reliability of whom is sometimes difficult to establish? How did any such undermining affect your reading of the novel?
2. The complex nature of husband-wife, mother-son, sibling and in-law relationships is explored in some depth alongside the conflicting emotions inspired by immeasurable grief. Discuss the ways in which different characters deal with their emotions.
3. Anna and Wendy share not only their mother-daughter bond, but also experiences with clinical depression. To what extent do you think Anna's denial about her postnatal depression can be attributed to her mother's shame about her own depression during Anna's childhood?
4. It is through the individual stories of the main characters and the complex tangle of emotions inspired in them as they react to the unfolding events in very different ways that we appreciate

postnatal depression's sometimes devastating consequences. In what ways do you think the tragedy impacts differently upon Wendy and Emily from members of Tony's family? Whose life do you think is most affected by it (after Anna and Tony) and how is this shown?

5. Having witnessed first-hand the ease with which Anna's emotional well-being so rapidly descends into crippling hatred and self-doubt, do you feel this book is a sympathetic portrayal of a woman suffering from a debilitating and often misunderstood psychiatric illness and what can happen when it is left untreated? And, if so, to what extent do you think she could be held responsible for the events of that fateful day?
6. Discuss the linked themes of grief, blame and forgiveness, and the parallels that can be drawn between the main characters in their handling of each.
7. There is an almost palpable tension throughout the novel – how do you think the author achieves this and builds upon it?
8. Discuss Ursula's reaction to the central incident. Do you think her response and almost immediate cooling towards her daughter-in-law are justified? How do you think you would react in her situation?
9. Anna's despair and subsequent suicide attempt following the realisation she may be released from the psychiatry ward before the court hearing is utterly shattering. Which other aspects of the novel made you feel uncomfortable and why? Did they lead to a new understanding or awareness of some aspect of your life that you'd not previously considered?
10. Do you think Dr Fraser, Anna's GP, should have been more insistent about contacting Tony herself when she diagnosed

Anna with postnatal depression? Do you think Tony being aware of this diagnosis would have made a difference to Anna's subsequent actions?

- a. What is your experience of, and views about, the postnatal care provided by hospitals and child-health clinics?
- b. Postnatal depression is far more common than we realise. Do you think it is acknowledged as much as it should be? Is there an unhelpful stigma attached that inhibits women from sharing their experiences?

11. Do you think Tony should bear any of the responsibility for what happens in the novel?
12. A mother's feelings of inadequacy lie at the core of this novel but such feelings are also experienced by Tony, Wendy and Ursula. To what degree do you think they each feel partly responsible for the tragic outcome? What impact do you feel their individual feelings of guilt have on the story?
13. Discuss the self-destructive and almost catastrophic way in which Anna deals with her emotional turmoil and the reasons why she felt so unable to carry on.
14. To what degree do you feel the prospect of freedom following the Supreme Court ruling liberates Anna and enables her to finally address the events of that day? What do you think the future might hold for her?

SUGGESTED FURTHER READING

Still Waters – Camilla Noli

I Came to Say Goodbye – Caroline Overington

We Need to Talk About Kevin – Lionel Shriver



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