

People's Democratic Republic of Algeria
Ministry of Higher Education and Scientific Research
University of Amar Thelidji, Laghouat
Faculty of Letters and Languages
Department of English



**Depression and Mental Disorder in Female Literary
Works: Sylvia Plath's *The Bell Jar* (1963)**

A Dissertation Submitted in Partial Fulfillment for the Requirements of a Master
Degree in Literature and Civilization

Submitted by:

Ms. Rahmani Salma

Ms. Chemesddine Manel

Supervised by:

Mrs. Boumous Moufida

2018-2019

Dedication

In the Name of God, the Most Gracious, the Most Merciful.

We dedicate this work to:

Our precious parents with great love and gratitude for their help and encouragement.

Our wonderful sisters and brothers.

Our beloved friends without exception for the joyful times, and their support in every hard moments.

Special gratitude to all those extraordinary people who have stood by us to fulfill this work.

Acknowledgments

We are grateful to our supervisor Mrs. Boumous for her ceaseless support and encouragement.

Our special recognition goes to the jury members. Special thanks to all our teachers.

Abstract

Depression and mental disorder as themes in female novels have gained ground as a number of women writers have shed light on the issue. This study delves in the reality of mental illness and depression in female experiences and lives. It tries to deliver both a theoretical background on mental health, mental illness and depression, and an analytical one which is considered as continuation to the Review of Literature. This study investigates, in three chapters, how mental illness and depression could be more prone to women than men; by mentioning the difference between them. The discussed literary works in this dissertation are Victorian-like works; since they depicted social conditions and circumstances of women who lived in the Victorian era through shedding light on the side effects of getting mentally ill for a woman at that time. Besides, it focuses on the social norms and patriarchal gender roles that could deeply affect women's health in both physical and mental.

Keywords: Victorian- like women, mental illness, depression, social norms, female writers

ملخص

اكتسب الاكتئاب و الاضطراب العقلي أرضية في كثير من الروايات النسائية، بحيث سلط عدد من الكاتبات الضوء على هذه المسألة. تتناول هذه الدراسة واقع المرض العقلي و الاكتئاب في تجارب النساء و حياتهن، من خلال تقديم كل من الخلفية النظرية للصحة العقلية، الامراض العقلية و الاكتئاب. بالإضافة الى الجانب التحليلي الذي يعتبر كمراجعة ادبية عن الاكتئاب والمرض العقلي بحث تكون النساء أكثر عرضة للإصابة بهذه الامراض من الرجال مع ذكر الفرق بينهما. الاعمال الادبية التي تمت مناقشتها في الفصلين الاخران من المذكرة هي أعمال شبه فكتورية لانها تصور الشروط و الظروف الاجتماعية للمرأة التي عاشت في العصر الفيكتوري، من خلال تسليط الضوء على الاثار الجانبية للإصابة بالأمراض العقلية بالنسبة للمرأة في ذلك الوقت. وايضا تركز على الأعراف الاجتماعية و الأدوار التي يلعبها الجنس البشري بحيث يمكنه ان يؤثر تأثيرا عميقا على صحة المرأة سواء الجسدية والعقلية.

الكلمات المفتوحة : الاكتئاب - الاضطراب العقلي - الروايات النسائية - المرأة شبه الفيكتورية - الاعراف الاجتماعية .

List of Abbreviations

WHO: World Health Organization

NAMI: National Alliance on Mental Illness

PMMD: Premenstrual Dysphoric Disorder

ADHD: Attention-Deficit/Hyperactivity Disorder

PTSD: Post-Traumatic Stress Disorder

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General Introduction

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Introduction

During the nineteenth century, psychiatry has bloomed in the domain of psychology as a paramount field of curing and research as well. Therefore, many major disorders such as bipolar disorder, hysteria, major depressive disorder, anxiety, eating disorder and schizophrenia have appeared. Mental health, in general is affecting women the most, especially, depression. Depression is a mental illness that affects seriously the physical and mental health; it is also a common mental disorder that touches negatively the moral state. Furthermore, it is a mood disorder that causes a persistent feeling of sadness and loss of interest in ordinary activities. So, women are prone to have depression and suffer from it than men because of their nature as emotional human being.

Mental illness by all its kinds was not known and even not common before the nineteenth century among people since they did not witness these abnormal illnesses. Thus, a large portion of women during that century in America and in Britain have suffered from depression that is caused by multiple reasons, biological, social and psychological ones. At that era also, several female writers have become famous writers. They used to write stories and novels about female characters, who were dealing with mental illnesses and depression. These female authors used literature to reflect the oppression, and the social expectations that have been imposed upon them, and how these external factors led them to fall in the circle of mental illness.

The Victorian-like society was not easy for women to live normally in a period where they are a subject of oppression, stereotypes, and prejudice like that. According to Raymond William women in that era were excluded from functioning. So, they expressed themselves through novels; they were even forbidden to express themselves as women. Hence, this exclusion from social and political occupations shaped their literary creativity as Rosalind miles stated. Further, this complicated life with these barriers caused women to be insane and affected their stability in fact. After searching through books and articles, we revealed a number of researchers who discussed depression and mental illness disorders. David Castle and his cooperators writers in the book entitled *Mood and Anxiety Disorders in Women* (2006), use the bio-psychosocial framework to add a new context of women's who lived with mood disorders. They examined an overview of how anxiety and mood disorders can affect the women, and dealing with factors that caused such mood disorders to women.

Lynn P.Rehm in his article "Cognitive and Behavioral Theories of Depression" (2015) is concerns with psychopathology and how applies learning models on depression in the past.

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Also during the recent years, the emergence of new theories which add new developments in the psychopathology of depression.

Christina Gregory in her paper “Depression in Women: Types, Causes, Symptoms, and Treatments”, she deals with women position in society, types, and causes of depression in women, with symptoms manifested on them, by the end she gives the treatments for depression states.

Elise M. Collman in her journal “The Discourse of Female Mental Illness in Kate Chopin’s *The Awakening*” (2016), accounts for this novel through analyzing the mental illness in the protagonist character ‘Edna Pontellier’. She tries to depict the social expectations which were proposed to women. Moreover, in her journal, she portrays the pressure of responsibilities on women to be wife and mother, and the effect that could be seen behind this pressure on women’s mental health.

Matošević Vanessa in her article ‘Women and Madness: A literary Perspective’ (2015), tends to deliver a portrait about three literary works *The Women on The Edge of Time* by Marge Piercy, “*The Yellow Wallpaper*” by Charlotte Perkins Gilman and *The Bell Jar* by Sylvia Plath. Matošević concentrates on the obstacles that the heroine characters confronted and faced whose caused to them depression and mental illness. She also gives a summary of *The Bell Jar* and “*The Yellow Wallpaper*” through mentioning the social norms at that time whose were demanded by the society and imposed upon women.

Stephanie Tsank in her article “*The Bell Jar: A Psychological Case study*” (2013) the gives detailed knowledge on the psychology of the protagonist of *The Bell Jar* ‘Esther Greenwood’ by concentrating on the inner crisis of her psyche, whose led to her mental breakdown. Furthermore, she delivers the bad effects of the events of her life on her psychology.

From these women appeared writers and novelists who had the same issues as any other woman in the society. Thus, depression and mental illness seem close to them since they were not able to bear and cope with those patriarchal societal stressed norms imposed upon women.

From the aforementioned, women seem to be more favorable to have depression and other mental illnesses than men. They had special factors that elevate the threat of being mentally sick. Further, the female writers in special are more threatened also to suffer from madness and be depressed and insane than the other women. Their insanity boomed their creativity in literature and writing. Furthermore, this research calls for showing that the ultimate severe depression made women escape to writing and feel in need to write. While vice versa would occur, when their writing is the one that caused them to have any sort of

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mental and moral sickness. Henceforth, a wave of novelists in the 19th and the 20th centuries appeared like Sylvia Plath, Virginia Woolf, Charlotte Bronte, Kate Chopin, and Charlotte Perkins Gilman.

This study aims at highlighting the oppression of the women. Furthermore, women were taught that tasks of males and females are naturally totally different. It shows also the great efforts of those female novelists that women not be put aside, and they have the right to be active in functioning in different occupations and pursue their careers.

Relying on what has been already said, all the novels that will be discussed in this study are valued as accounts and commentaries to the community which they lived in. The main concern of this paper is to shed light on the defense on women brought by these novelists like Bronte and Woolf. In fact, plots, set of characters, symbols, and themes which are portrayed in their writing are aiming to deliver a message. Moreover, the writing was as a therapy to get rid of daily pressures; it was a mean for self-expression, self-claim, and communication with society.

The females and the female writers' struggle with depression and mental disorders from ancient times to the present day show us and teach us, that those women are strong to fight any mental illness. By depicting real and truthful events, they made a rebellion in society. The present study tries to answer the following central question: to what extent women are exposed to mental disorders and depression and how do female novelists discuss this issue in their literary works? Besides the following sub-questions:

1. Why women are more prevalent to have depression than men?
2. To what extent these female writers and their characters in the novels below affected by depression and its bad effects?
3. In what way do the main characters in the discussed novels challenge the Victorian-like gender roles?

What is hypothesized; therefore, women are more eligible to get depressed and hence, suffer from mental disorders. Second, women's depression ignites women writing and feelings to write to escape their suffering. Third, the norms and harsh rules of society are the principal reasons and causes of women's mental disorders and depression.

The suggested study is a thematic analysis of the chosen novels. Thus, an analytical approach is proposed and followed throughout this work.

This dissertation is made up of three chapters. The first one provides a theoretical background as it deals with definitions to mental health, mental illness, and depression besides a historical overview of depression and mental illnesses. The second chapter deals

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with four literary works of female writers where females are facing oppression and difficulty in living normally, since the established social codes that are imposed on them sophisticated their lives. It investigates how these standards that are directed to women could be the big reason in provoking the women mental disorder and depression. The aim of this chapter is to give an account to know the extent of the sufferance of those females in a society like that. The last chapter examines the novel *The Bell Jar* by Sylvia Plath. It focuses on the similarities between the novelist and Esther the protagonist of the novel. It also explores the society's reaction and vision of treating those who were sick during the 20th century of depression through the novel.

Chapter One

Women and Mental Health: A Theoretical Background

Introduction

Due to the complexities of life and the many responsibilities that people have, stress and mood disorders become common. The disorder mood could develop and become mental illness; while the last could be depression. Thus, a large portion of women are threatened to fall in the circle of depression. This chapter sheds the light on the mental health, the mental illness and detailing depression in women.

1. Introducing Mental Health

Enjoying a good mental health for sure facilitates one's life and provides a satisfactory life. Yet, some people cannot have this privilege since they experience some mental and psychological disorders.

1.1 Definitions of Mental Health

Famous organizations and associations have given different definitions to the concept of mental health; here are some of them:

The mental health is the level of psychological well-being or an absence of mental illness. It is the state when acting in a correct and satisfactory way. Furthermore, it is to live a full and creative life and to be emotionally well. Moreover, mental wellness is the flexibility to deal with life's challenges.

According to the World Health Organization: the mental health includes "Subjective well-being, perceived self-efficiency, autonomy, competence, intergenerational dependency, and self-actualization of one's intellectual and emotional potential among others". Thus, the mental health is the positive psychology and the ability of the individual to enjoy his/ her life; it is to create a balance in life's daily activities and effort in order to reach a psychological relief. The (WHO) further stated that the well-being of any individual is the knowing of one's ability to cope with normal stressful events and incidents that are facing frequently in the life.

According to the U.K. Surgeon General (1999) mental health is the successful audition of mental activity, consequence in efficient functioning and good relationships with others; it is the unbelievable capacity to adapt and cope with social adversity.

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1.2 Relating Mental Hygiene to Mental Health

In the mid of the ninetieth century, William Sweetser coined the term ‘mental hygiene’, which can be seen as a procedure to work on improving the mental health and promoting it to be positive.

1.2.1 Famous Management in the Mental Hygiene

At the beginning of the twentieth century, Clifford Beers has established (Mental Health America- National Committee for Mental Hygiene) after his announcement of his experience in a psychiatric asylum. After that, he opened the first mental health clinic in the United States. The mental hygiene movement, related to the social hygiene movement; it has associated with sterilizing those who are considered mentally deficient and ill. Moreover, it helps them to live and enjoy their lives again. Henceforth, the term ‘mental hygiene’ actually replaced the term ‘mental illness’; this was used in the years after the Second World War. The mental hygiene made evaluated positive aspects from treatment, to prevention to the promotion of healthcare.

Isaac Ray, one of the founders of the American Psychiatric Association, defines the mental hygiene as “The art of preserving the mind against all incidents and influences calculated to deteriorate its qualities, impair its energies, or derange its movements”¹.

Dorothea Dix 1802 1887 was an important figure in the development of the ‘mental hygiene movement’. Dix was a school teacher who devoted her life to helping people with mental disorders, and to bring them out from their trauma. Before this movement, it is known and very common that people with mental illnesses were totally neglected and abandoned from society. In fact, they were left alone in the understaffed psychiatric hospitals and asylums, with very bad conditions, and receiving less attention and care. Dix made a great deed in improving the situation of these patients inside these institutions by bringing facilities to the mentally patients.

¹ https://in.m.wikipedia.org/wiki/Mental_health

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Emil Kraepelin in 1896 developed the taxonomy of mental disorder, which has lasted for eighty years. Hence, this proposed model was helping indeed, for transforming the term from abnormality to normality inside the American culture.

Unlike the idea of the mental hygiene movement, Marie Jahoda came up with a new idea based on dividing the mentally healthy patients into six major categories. These categories have a positive impression to promote positive psychology in those patients. These categories are: a positive attitude towards the self, personal growth, integration, autonomy, a true perception of reality, and environmental mastery; all of these categories include adaptability and healthy interpersonal relationships.

1.3 Results of Studies about Mental Health

Good mental health may enhance one's life, while poor mental health can prevent people from living and enjoying their lives. A recent study found that people who are showing emotional expressions are considered as pro-social ones, and know how to manage stress. Whereas those who lack emotional expressions are anti-social characters². There are many books which offer philosophies and manners for finding. A model of the mental health generally includes three concepts based upon: an anthropological perspective, educational perspective and religious perspective.

1.4 Mental Health and Mental Illness

When certain individuals get any physical sickness such as: headache, backache, toothache, muscle pain, throat problem and so on, their physical health in this situation is not good and they should go to a doctor and get medical treatment. The same condition happens when anybody could have some moral disorder like depression or anxiety; it is obvious that his/ her mental health will be not great and his/ her psychological state totally ill. The mental health is more sophisticated than the physical one; since it is partially hard to signify the disease, and take a long-term treatment. It is famous that women are more prone to be risked to experience several mental illnesses. Depression occurs to a woman due to its biological nature as a woman, and other social factors.

² Dael, N., Mortillaro, M., & Scherer, K. R. (2012). Emotion expression in body action and posture. *Emotion*, 12(5), 1085.

2. Mental illness and Depression Dichotomy

Mental illness and depression are interrelated and inseparable since if one is affected by the former he/she shows symptoms of depression as well. Depression is one kind of mental illnesses.

2.1 A Historical Overview of Mental Illness and Depression

Since the early history of the Greeks and the Romans, the diseases had treated through the humor theory. The mental illness was named ‘melancholia’ in which Hippocrates described in his Aphorisms “fears and despondencies if they last a long time” as being symptomatic of the ailment³. Means all fears and despondencies that lasted for a long refer to Melancholia. During the Golden age, the Persians and the Muslims made a contribution between melancholia and phrenitis (inflammation of the brain). The physician Avicenna in his book *The Canon of Medicine* argued that the melancholia was a type of such mood disorders and the patient may develop this type of depression to type of phobia. Hence, his book became a reference of medical thinking in Europe; additionally to the previous researches. By Medieval age, the Christian surrounding witnessed the spread of moral, spiritual perspectives and the manifestation of a new disease called Acedia that had symptoms like sleeping a lot, and feeling of fatigue. In the seventeenth century Robert Burton, an English scholar who wrote a book in which he gathered theories and experiences under the title *The Anatomy of Melancholy*. He stated that the Melancholy could be treated by a healthy diet, well sleep, relaxed music and meaningful activities.

The term depression has brought from the Latin verb ‘deprimere’ which means ‘press down’. By the fourteenth changed ‘to depress’; it was used to refer to something related to the spirits by many authors such as Richard Baker 1665, Samuel Johnson 1753, and in 1858 by Louis Delasiauve.

During the 1860’s the term depression was used in the medical dictionary and referred to the reduction of emotions and functions. Aristotle associates depression with men and by the nineteenth century, it becomes associated also with women.

The term melancholia was used until the coming of Kraepelin and Mandsley. Kraepelin added a system in which he organized all types of disorder of mind into manic depressive

³ https://en.wikipedia.org/wiki/History_of_depression

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insanity. He set out from the possibility of brain pathology with regarding for endogenous (internal caused) and exogenous (external caused) types.

In 1920, the German psychiatrist Kurt Scheider coined the term endogenous depression and reactive depression. He believed that depression involved the reactive of mood not the reaction of events. Yet it, criticized in 1926 by Edward Mapother who was claiming that there are no differences between the types of depression.

With Sigmund Freud depression or melancholia starts to result from loss of important issues in life; he had a theory about the loss of objectives and the beloved persons.

2.2 Definitions of Mental Illness

Very famous organizations and associations have delivered to us different definitions of mental illness. For instance, according to the World Health Organizations, mental illness refers collectively to all the diagnosable mental disorders like depression, anxiety, schizophrenia, bipolar disorder, hysteria, post-traumatic disorder, and eating disorders. The mental disorders are varying in degrees, and may result from multiple of factors like lowliness, stress, death of beloved one, grief, and many other psychosocial factors; it has heavy bad consequences on moral and physical health. They state that “A mental illness is a condition that affects a person's thinking, feeling or mood. Such conditions may affect someone's ability to relate to others and function each day. Each person will have different experiences, even people with the same diagnosis” (qtd in NAMI).

Another definition is: Mental illness is a psychiatric disease that affects the mind and leads to abnormal conducts from these people towards their lifestyle, way of thinking, behaving, and functioning. it touches people from different genders and ages.

2.3 Definition of Psychiatric Disorder

Psychiatric disorder is considered as mental illness that causes unstable thinking, mood, and behavior, resulting in several symptoms like disability, pain, and even death. (Salters)

2.4 Kinds of Psychiatric Disorders

Psychiatric disorder is relatively similar to mental illness, but they are different in terms of kinds. Here are some kinds of psychiatric disorders as below⁴:

⁴ Felton Earls , “Sex Differences in Psychiatric Disorders: Origins and Developmental Influences”(.*Psychiatric Developments*)5(1),1-23, 1987.

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Neurodevelopmental Disorders are disorders happened mainly during infancy and sometimes affected a child before school time. It includes Attention-Deficit/Hyperactivity Disorders (ADHD), Autism Spectrum Disorder and Learning Disorder. Other kind, Anxiety Disorders are overkill and extreme worrying about the bad episodes that could happen in life. It includes three different disorders: Generalization Anxiety Disorder, Panic Disorder, and Phobias. Also, Trauma- and Stressor- Related Disorders, this kind of psychiatric disorder happened after a stressful or traumatic period. There are two kinds of Posttraumatic Stress Disorder and Acute Stress Disorder. In addition, Dissociative Disorders, these disorders are associated with the self-sense of the person that became inactivate, and concerns the person's feelings of loss and unknown. These include Dissociative Identity Disorder, and Dissociative Amnesia. Furthermore, Somatic Symptoms and Related Disorders a person with these kinds of psychiatric disorders is a one who has experienced stress and incapacitating physical without discovering the right medical causes, it may appear as an Illness Anxiety Disorder, Somatic Symptoms Disorder (Hypochondriasis), and Factitious Disorder. Feeding and Eating Disorders, these disorders are related to eating issues such as Anorexia nervosa, bulimia nervosa, and binge eating disorder. Eliminating Disorders, these psychiatric disorders happened with people who cannot eliminate their urine or stool, as Enuresis. Sleep-wake Disorders, these are serious disorders where people have problems in sleeping including Insomnia Disorder, Nightmare Disorder, Sleep Apnea, and restless legs syndrome. Gender Dysphoria: These psychiatric disorders coined with people who have the desire to be different in gender. Hence this desire is causing the person stress, sad and suffers from such disorder, manifesting among children, adolescents, and adults. Disruptive Impulse- Control and Conduct Disorder: people with these kinds of the psychiatric disorder have difficulty to control themselves, emotions, and behavior. They include Kleptomania and Intermittent Explosive Disorder. Substance- Related and Addictive Disorders, these psychiatric disorders are associated with people who cannot control themselves drinking alcohol, opioids, recreational drugs, hallucinogens, and gambling disorder. Neurocognitive Disorders, these psychiatric disorders affected the ability of people to think and reason in the right way. These disorders happened because of delirium, suffering from such conditions or diseases like traumatic brain injury or Alzheimer's diseases. Personality Disorders, people who suffer from a persistent feeling of instability and unhealthy behavior. Thus, borderline, antisocial, and narcissistic personality disorders affected daily life and relationships of the patient. At the end Depressive Disorders, are disorders that characterized by extreme feelings of sadness and hopelessness; they consist of bipolar disorder, major depression. (Salters 3-4)

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2.5 Dictionary Definition of Depression

In psychiatry, it is a condition of general emotional dejection, withdrawal and great sadness. A mental illness marked especially by grief, sadness and changes in one's emotional and physical health.

2.5.1 Other Definitions of Depression

Depression is a mood disorder that causes a persistent feeling of sadness and loss of interest. It is also called major depressive disorder or clinical disorder; it affects one's feeling, thinking, and behavior. Depression leads to a variety of moral and physical troubles.

Depression is a common and serious medical illness that negatively impacts one's behaviors and attitudes. Moreover, depression is more than just a low mood; it is a serious condition that affects one's physical and mental health and causes an intensive sadness.

Depression is a clinical illness appears on the people who have experienced such hard and sad conditions that influence the person's normal life.

According to World Health Organization, "Depression is a common mental disorder, characterized by persistent sadness and a loss of interest in activities that you normally enjoy, accompanied by an inability to carry out daily activities, for at least two weeks".

2.6 General Symptoms of Depression

Despite the fact that depression occurs ones in a lifetime along with several episodes, it has various symptoms that can be deferred from one to another. The symptoms of depression can vary from mild to severe, and they may include: feeling of sadness, hopelessness, helplessness, worthlessness, and emptiness- Lack of joy and pleasure loss of interest in things that used to bring person happiness such as: sports, food, hobbies- sleeping troubles such as: insomnia or hypersomnia (sleeping too much)- continuous feeling of fatigue, restlessness and exhaustion- loss of energy; decreased ability to function at home or at work- changes in appetite: weight loss or weight gain- slowed thinking, speaking and body movement- difficulty in concentrating, making decisions and remembering- excessive sensation of guilt, self-blame and failure- Pessimism and thoughts of death and suicide, and physical pains like: headache, cramps, and digestive problems.

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2.6.1 Depression Symptoms in Children and Teens

It seemed that symptoms of depression in children and teenagers are similar to those of adults, yet there can be some differences in fact. Therefore symptoms in children may include: sadness, worry, refusing and hating to go to school, being underweight, and physical aches. Hence in teens symptoms may include sadness irritability, anger, poor performance in study, being sensitive, being isolated, self-harm, eating and sleeping too much, using drugs and alcohol.

2.6.2 Depression Symptoms in Older Adults

Depression in older adults goes undiagnosed and untreated, unfortunately. They seem to be more reluctant to get treatment. Thus the symptoms of older adults are different and include personality changes and Memory difficulty- isolation from the outer society- loss of appetite and sleeping problems- fatigue and physique troubles- suicidal thoughts especially in men.

3. Depression in Women

Women are prone to have depression and suffer from it than men according to their nature as an emotional human being.

3.1 The Causes and Effects of Depression in women

Although they are not fully clear and understood, and still under study, researchers thought that they are likely seemed to be a combination biological and psychosocial factors. Thus these factors and causes play role in causing disorder mind and depression on people in general, and in women specifically. Biological factors: includes also three main factors: Neurotransmitters or Chemical Factor: some differences happened in certain chemicals in the brain that can lead to physical changes in the brain. These changes in brain's chemicals increased from the intense of distribution, and eventually lead to depression. So the regular functioning of the human brain is disturbed like: the impacts of drugs on the brain. Hormonal Factors: the alterations in changes in the body hormones could cause and trigger a depression. Hormones affect the mood positively or negatively, in what happens to women during the pregnancy, menstrual, infertility and menopause period. At these times the women's hormones are in change such as estrogens, progesterone. The changes that happened may cause the women full depressed. Genetic

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Factor: depression can run in families and could be inherited; hence the psychiatric history of family is influencing the mind disorder, because of genes. Women in prenatal and postpartum period are more exposed to be depressed. The inherited aspects from family are attributing and facilitating the risk of disorder mood and increasing the likelihood of an obsessive compulsive disorder. Psychosocial Factors: there are many aspects contributed in psychosocial factors that cause the depression in women particularly. Hence the marital relationship is affecting women's mind by leading it to distribution and eventually they became depressed. Also, the education matter influences the women's mind; the high or low educational level of women was helping to increase the possibility of depression. Other psychosocial factor, the planning to pregnancy gives the women the ability to accept and deal with the new situation. Whereas the unwanted pregnancy sometimes makes women feel stressed and enters to depression. Furthermore Personality, the kind of personality effects on the mood "Neurotic personality style has been linked to depressive symptoms in the post-partum period". (Castle 141-142). Other Psychosocial Factors: they are a combination of psychological and social factors; they are too much, and include: life events: loss or missing a beloved one, bereavement-financial problems, loss of job, lower payment- social problems as: divorce, family and friend relationships troubles, loss of parents- poverty, violence, physical and sexual abuse, discrimination at work, addiction on drugs or alcohol and lack of social support, psychological problems: stress in study and at work, loss of social and family support, personal complexity and low- self-esteem.

3.3 Types of Female Depression

Depression is a wide illness which can be divided into several types. There are seven types of it that are summarized below: Major Depression: is a classic or unipolar depression, it happened for people without any serious causes. They may have everything, but getting depressed and suffered from symptoms which are lasting for weeks and months . Persistent Depression: is a chronic, dysthymia depression; it is lasting for two years and sometimes more. People with this kind of depression are cohabiting with very severe symptoms. Manic Depression or Bipolar Disorder: is a period when people are suffering from mania and depressions at the same time are feeling happy, that's why called bipolar depression. It is having the same symptoms to the major depression; additionally, to the sings of mania which are high energy and unusual behaviors even it was danger. Depressive Psychosis (schizophrenia): people with this kind of depression losing touch with reality, they are experiencing both hallucinations and delusions. Hallucination means when the depressed

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person sees, hears, smells, and feels about something which is not real. Delusions mean an imagination of something not real and existing, but for those who are suffering from such kind of depression is absolutely real and true. This psychosis depression causes physical symptoms as reducing person's movements and activities. Seasonal Depression: also called seasonal affective disorder, it is a major depression with seasonal affections; it happens just in specific moments related to the season. The seasonal depression happens almost in the winter. Situational Depression: generally it is like major depression but it is related to the situation that people witness and how they react against it. This situational depression attaches with specific events particularly; the death of an important person, serious illness, or hard conditions (divorce, abusive relationships...). Atypical Depression: is temporarily depression, people may recover from it by living happiest moments; it is difficult to appear to others and even for the patient.

3.4 The Theories of Depression

In the scope of the depression, there are several theories that are coined by famous scholars. These theories were very helping in the understanding of depression. The Cognitive Behavioral Theory: This is divided on: behavioral Modal: considering as the first learning approaches were applying to depression. It was depending on the psychological laboratory were borrowing traditional models and using them on human depression. Later, the learning models had developed and had created new perspective known as Cognitive Theory. These cognitive models take from clinical psychology in general and from psychopathology in particular. The old theories were developed in cognitive direction, while the new theories have evolved from it. The psychologists have developed four theoretical modals of depression from the cognitive-behavioral perspectives. Reinforcement Theory: the famous psychologists and psychiatrists was Charles Ferster 1973 viewed "depression as a generalized reduction of rate of response to external stimuli." (qtd in Rehm 10). The reinforcement theory depends on the source of reinforce, because it seems as motivational aspects for the depressed people. Eg, the woman ended her loved story, getting depressed and do not enjoyed with the activities that previously made her happy, because the reinforcement condition which is the man was not available. In addition, the depressed person may lose the important skills to require reinforcement in the environment, poor interpersonal skills effect on the person's social relationships, on the other side, the reinforcement conditions are available but the depressed person can't enjoyed from them. Other research Lewinsohn 1974 claimed that depression is considering as reaction to the removal of motivational reinforcement from the person's life

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events as he said “depression is a response to a loss or lack of response-contingent positive reinforcement” (qtd in Rehm 11). The Lewinsohn theory of reinforcement involved three ways in reducing the reinforcement similarly to Ferster’s perspectives. The findings of Lewinsohn and his coworkers stated that the loss of reinforcement presenting depression as an increased feeling of sadness. Learned Helplessness Theory: Martin E. Seligman 1974/1975 applied learned helplessness theory with an animal. He used an animal where he puts it on box and from time to time infects it with shock, the animal had no escape and by the time it has no reaction because it requires the feeling of hopelessness. Thus, he applied the learning helplessness theory. Sligman stated that the inescapable shock led to the traumatic loss and this causing the depression.

According to (Abraham and Sackheim) in 1977, represent depression as a paradox. Depression reflects an expectable combination between the person’s behavior and the consequences. So, that’s why we can’t improve the reaction of people who blame themselves for the harmful rest.

In 1978, Abraham, Seligman and Teasdale added new revision which touched the attribution causes of responsibility were either internal or external and this causal factors also being stable or unstable, all these concepts work on parallel means tow by two (internal stable, internal unstable/ external stable, external unstable).

Later in 1978 put new causes which are global and specific. The global causes were applying to the general and broad situation, while specific causes were using on specific fields. Self-control Theory: the self-control models appear in the early history of psychopathology. The self-control means the ability of people to control and manage their behaviors until they reach their goals for long term. For the depressed people the idea of obtaining goals doesn’t exist, because it is replaced by feeling of hopelessness and helplessness. A person with depression has no ability to underline the goals of his life.

According to Rehm 1977 the behavior of depressed people would be characterized as bellow. First, the depressed people witness sadness more than happy events. Second, people with depression have no ability to see the consequences of their behaviors. Third, the patients of depression have their standards to evaluate themselves which are strict and harsh. Fourth, depressed persons convince themselves with failure and hopelessness (internal factors), and reflect the feeling of being well and can reach their goals (external factors). Fifth, people who suffer from depression make for themselves insufficient contingency in order to save their behavior. Finally, the depressed exaggerate in punishing themselves and being callous, this affects their behaviors. Cognitive Theory: Aaron T. Beck developed three mechanisms in

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cognitive theory known as ‘cognitive triad’, he detailed as “ [a] negative view of self, [b] negative view of the world, [c] negative view of the future” (qtd in Rehm 35). The depressed persons see themselves, the world and the future with negative view. The negative self-schema illustrates that people are causing negative events in their life, and have feeling of pessimistic which are leading them to think negatively and commit illogical things, because they considered it as normal issues.

When the depressed experience the situation of self-negative schema, the cognitive aspects of the person become uncontrolled, which named by Beck ‘Automatic thoughts’. People in this situation can’t control their behaviors and unconsciously do the wrong things without regarding for the consequences.

3.5 Statistics about Depression

Each year, statistics and studies about depression around the world change rapidly, either by increasing numbers or decreasing ones.

According to the Center for Disease Control and Prevention (CDCP), 7, 6 %of people over the age of 12 have depression in any two week -period. Depression affects 1 in 15 adults each year, and 1 in 6 people may experience definitely depression in life at some time.

According to the World Health Organization, depression is the most common illness worldwide; and nearly 350 million people are having this disorder.

Depression often begins in the 20s or 30s, but it could occur at early ages.

Women are more likely than men to experience depression. Some studies show that one- third of women will experience a major depressive disorder in their life.

Depression can touch anybody even who appears to live a perfect life.

3.6 The First Steps before Treatment

The first step when realized you are having depression is the ability to see a doctor. The doctor asks some questions than he gives you the suitable prescription for your case of depression. The depressed woman should tell her doctor everything when he asks her and tells him if she is pregnant, because there is some antidepressants effect on the health of the baby.

Usually, people tell the depressed person to just ‘snap out’ from depression. In fact, depression is not a passing or easy illness; it requires a serious treatment including an

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interview and physical examination. Depression is considered from the most treatable mental disorders; between 80 %to 90 %of people with depression respond to the treatment.

3.7 Treatment of Depression in Women

Being sad is a normal reaction to difficult times in life. But usually sadness does not last longer. Whereas depression is different and lasts for longer time, but fortunately it is treatable. Treatment of depression may encompass therapies, medical prescription and some other methods. Medication: this therapy is using antidepressant medications ‘drugs’ as: the lithium. They are prescribed by the doctor; these drugs are used to help and recover the brain's chemistry. The medical treatments can have negative impacts and may increase the depressive mood; it is important always to do the medical control from time to time is necessary to follow the development of the depressed state situation. Psychotherapy: is called the ‘talk therapy’; It includes three stages: The Cognitive Behavioral Therapy: changes thinking and behavior; is an effective method in treating depression using cognitive behavioral therapy (CBT). It's dealing with cognition of the brain to assimilate the depressed state and give new ways of thinking, and how to deal with the depression. This therapy method helping the depressed women adapt with this situation. Interpersonal Therapy: is an approach to treat mood disorder. The basic target of this approach is to work on personality and improving the relationships between the depressed person and the society. It helps him to reduce the stress, control the disorder mood. Psychodynamic Therapy: this is related to the internal world of the depressed person; it is using with patients who are suffering from mental disorders and having symptoms of losing hope, to identify emotional troubles and the meaning of life. Electroconvulsive Therapy: is a magnetic stimulation that sends magnetic pulses to the brain. The electroconvulsive therapy is used to those who are severe cases, and did not respond neither to medication nor the psychotherapy.

3.7.1 Other Modern Sorts of Methods and Therapies of Treatment

There are a lot of modern types of therapies and methods that exist now in our current time. They are helping for getting over depression and mental illnesses. Physical Activity: is about doing any kind of physical exercise and playing sport. These physical activities may include: walking; jogging, and cycling. These physical exercises make a great help in improving mental and physical health. Activity Therapy: is called the occupational therapy; it is about creating activities such as: coloring and making crafts, and occupy time by these activities. Expressive Therapies: are the most beneficial therapies for mental illnesses.

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Expressive therapies are art- making therapies and include: music therapy, dance therapy, drama therapy and poetry therapy. In fact these therapies help in elevating the mood and promoting the healing. Meditation: is called the mindfulness meditation; it is a program that shows the work of the brain and how to improve it. The meditation helps in the reduction of depression, stress and anxiety. Spiritual Counseling: is a healing therapy that is used by spiritual counselors, who meet patients, and offer them comfort and support. The counselors seek to solve problems to these mental illness issues with methods related to spirituality.

3.7.2 Older Methods of Treatment

There were therapies and methods that were existed in ancient times in order to treat depression and mental illnesses. Trepanation: was common in the Stone age; was a procedure to treat insanities such as: headaches. It was a surgical process; by sharpening stones and scrape it in the head of the patient in order to make the evil spirits escape from the head. Trepanation was a killing treating- process indeed. Lobotomy: was utilized in the twentieth century, as treatment for mental illnesses like: schizophrenia. Lobotomy was applied by cutting certain nerves in the brain. Exorcism: was used in ancient times. Exorcism is a religious practice for expelling and evicting demons and evil spirits from a person or an area who was thought to be possessed. Many people with mental disorders were subjected to exorcism.

Conclusion

Depression is psychiatric diseases and one sort of mental illness. It influenced people from different gender and ages; those who have weak personality and low confidence about themselves and those who experience sad moments. The mental illness and depression are more spread among women than man due to various factors. Therefore everyone can get depressed and has a mental illness. Depression differs from person to another because of the surrounding environment that the patient lived in. The surroundings are helping a lot in the recovery from depression and could reduce even the time of recovery.

Chapter Two

Mental Disorder as the Main Theme in Female Novels

Introduction

The mental illness by all its kinds was not known and even not common in ancient times among people. Thus a large portion of women during the nineteenth in America, have suffered from depression that is caused by multiple reasons. At that era also, a several female writers have been appeared to become perfect female writers. They used to write stories and novels about female characters, who were dealing with mental illnesses and depression. Therefore these female novels were exclusively dedicated to showing how deeply the social norms, whose are imposed on women, can sharply shape the destiny of women, and how they can affect their sanity and stability.

1. Kate Chopin and *The Awakening* (1899)

Kate Chopin is best known for her works-focused on the lives of sensitive, intelligent women, who are holding mental illness. Her novel *The Awakening* (1899) is considered as one of the groundbreaking novels in the history of literature.

1.1 A Short Biography of Kate Chopin

Catherine (Kate) O’Flaherty was born in ST, Louis, Missouri, USA, on February 8, 1850. She was the second child of Thomas O’Flaherty and Eliza Faris. Kate has French origins on her mother’s side; in fact, she was speaking both languages French and English. Hence she was bilingual and bicultural. Furthermore, her influence by the French culture was clear through her thinking of fiction in her novels.

Kate attended the ST. Louis Academy of the Sacred Heart; she was taught and mentored by the women; her mother, her grandmother and her great grandmother in addition to the nuns and sisters. She built with them a good relationship, and that actually has influenced her so deeply in her personality and her writing.

Kate has witnessed very harsh events during her early life; her father died when she five years old, her great grandmother whom she considered her as her angel died too, and her brother died also of typhoid fever. After her marriage and her births to her children, her husband encouraged her to write, in which she wrote her only novel *The Awakening*. In fact, she used to write diaries when she was young, but she developed her writing skills after the marriage.

1.2 *The Awakening*: Psychological Case Study

The Awakening novel was published in 1899, Chopin wrote it at the Fin De Siècle of the nineteenth century. She discussed and questioned at the same time the roles of women based on historical, social and gender-based perspectives. The novel is classified as a feminist critic account to shed the light on the pressure made by these gender roles. Chopin made a huge effort to deliver that the women were oppressed and these roles caused them a dilemma of mental illness. Hence, *The Awakening* has depicted themes like: awakening, marriage, motherhood and motherlessness, careers, male hand, mental illness and depression, suicide, mistreatment and misinterpretation of mental illnesses. (DeWaard 19)

1.2.1 From Identity Crisis to Mental Illness in *The Awakening*

The Awakening novel is equal to identity novel, because the identity is the main, basic and typical theme in the novel. Thus identity is the original reason for the sickness of Edna. Hence Edna Pontellier was searching for her identity all the time in the novel, in her marriage, and in her motherhood. She was upset by this confusion about herself.(DeWaard 19)

Edna Pontellier the protagonist character is a married woman; she was neither happy nor sad in her marriage. She was struggling with clinical depression; she worked on hiding her depression from her husband and her family. Edna Pontellier was waiting for the awakening, but it lasted to come she states:

One of these days I am going to pull myself together for a while and think, try to determine what character of a woman I am; for candidly, I don't know. By all the codes which I am acquainted with, I am a devilishly wicked specimen of the sex. But some way I can't convince myself that I am. (Chopin 91)

Edna Pontellier is a controversial character. One of the most shocking actions in the novel is the denial of Edna to being a wife and mother; she rejected these societal and cultural structures of motherhood and marriage. Edna's maternal capabilities were limited. She searched for a new identity. Edna search for identity outside the marriage and motherhood. Hence, she fought against these structures she comments:

That I would never sacrifice myself for my children or for anyone.... I would give up the unessential; I would give my money, I would give my life for my children, but I would not give myself. I can't make it clear; it's only something which I am beginning to comprehend which is revealing itself to me. (53)

Edna Pontellier rejected the male authority; she looked for individuality and independence. Edna hated to rely on men while she could have her own independence; she believed that "If

she was being borne away from some anchorage which had held her fast , whose chains had been loosening had snapped the light beforeleaving her free to drift whithersoever she chose to set her sails” (39) (qtd in DeWaard 19).

Edna was trying to get rid of responsibilities at her house; she was hoping to take care of herself at first. She liked to be independent and liberated from the pressure made by these roles and tasks she said “I know I shall like it, like the feeling of freedom and independence.....resolving never again to belong to another than myself” (88).

She felt very depressed and sad while she was running away from her role as mother and wife. Also, her mental illness has worsened a lot when she has hidden her depression from people around her. She thought that she would be healed and recovered by announcing her awakening and rebelling against the societal structures. Edna states that “Despondency had come upon her in the wakeful night, and had never lifted. There was one thing in the world that she desired” (120). Furthermore, she comments “There were days when she was unhappy; she did not know why- when it did not seem worthwhile to be glad or sorry, to be alive or dead” (120).

She knew very well that her awakening would be such danger to her. The society would never accept an awakened woman she realized that her dreams, actions and desires to be an awakened woman in that 19th society was totally unwelcomed of. Edna knew that would be no future for her; eventually she gave up and committed suicide at the end. She commented on her awakening “Her journey towards the awakening is unaccomplished it. Edna never fully understands herself; she wanted to swim far out, where no woman had swum before” (31). Moreover, she states “She nursed a mood it was not despairing; but it seemed to her as if life passing by, leaving its promise was broken and unfilled” (81).

1.3 *The Awakening*'s Criticism

The Awakening by Kate Chopin has received a large critical attention after its publication. The novel was widely condemned by many authors and scholars. They labeled it as: sordid, vulgar, morbid, unfortunate and disagreeable. Moreover, the novel was banned from several libraries in America. Kate Chopin was criticized because she left much of the unexplained and many gaps in her novels. Many scholars and writers hesitated about the ending of her story, when she went to grand isle she committed suicide, or just swum and had drowned. The other point was in the contradiction of the romance she portrayed in the novel.

On the other hand, *The Awakening* was recommended a lot as it was considered as one of the inspiring novels. Thus, *The Awakening* has seen a remarkable literary revival during the

20th century. Per Seyersted's a Scandinavian sympathetic writer has collected her work and translated it to multiple languages. For that this novel became a review of fiction to many students and authors.

2. An Overlooked Analysis of “The Yellow Wallpaper” (1892) by Charlotte Perkins Gilman

Charlotte Gilman is an American author; known for her semi-autobiographical short story “The Yellow Wallpaper” (1892). Gilman and Chopin lived in the same period, and both of them were writing fiction in their novels. “The Yellow Wallpaper” was an adverse to many effects on the body, mind, and spirit on the women.

2.1 A Short Biography of Charlotte Perkins Gillman

Charlotte Perkins Gilman was born on July 3, 1860, in Hartford, Connecticut. She was writer and activist during the late 1800s. Charlotte Perkins's father had left them when she was a child. Perkins had a tough childhood which impacted her learning and education in school. After her marriage from Charles Stetson and her birth to her daughter, she experienced severe depression and went with treatment. Hence her struggle with depression inspired her to write her only novel “The Yellow Wallpaper”. She is famous for her fiction in her work. Gilman was an intellectual, and worked as an activist who's calling and defending for the rights of women as: gaining economic independence.

She used writing to express her ideas on women's issues. Charlotte Perkins Gilman has committed suicide on August 17, 1935, after she discovered that her breast cancer. Charlotte Perkins Gilman wrote her semi-autobiographical short story. She wrote it in 1892, following her post-partum depression. “The yellow wallpaper” was an inspiring short story since it was objected to the progress of liberation of the women, and of becoming valuable as men in terms of equality.

2.2 Madness As Depicted in “The Yellow Wallpaper”

“The Yellow Wallpaper” is not a simple account of mental illness but rather an explanation to a big problem. It is a short story that examines mental illness in women, since it was very common from the middle of the 19th century to the middle of the 20th century. Furthermore, this short story portrayed that mental illness came to women as a reflection to

the traditional gender roles and imposed an expectation on women that were existing at that time.

2.3 Jane: Analytical Perspective of Her Mental Illness

Jane the protagonist of the short story is struggling to fit in their roles as devoted wives and mothers. "The Yellow Wallpaper" is perfectly described a woman battle and psychological conflict inside her to play her role and apply well the feminine ideals like submissiveness to men, passivity and fragility. The tough cultural and social norms were as a burden to be put on the heads of the women. She hesitated and claims "But what is one to do" (Gilman 20).

Jane who seemed very happy in her marriage; she loved her husband indeed. Her mental illness actually rooted from her husband John. John didn't understand her mental illness although he was a brilliant doctor he did not diagnose her mental illness exactly. He thought that she had only a nervous depression. When she told him that she was more than depressed she records "she shall be as sick as she blessed" (Gilman 22). John has caged his wife in a room and cut her from people. He believed in rest cure treatment than any other treatment. Jane hated the room a lot, and was haunted by the yellow wallpaper, in which she views that "It is a big airy room, the whole floor nearly, with windows that look all ways and air and sunshine galore" (30). Hence she adds "There are things in that paper that nobody knows but me, or ever will" (32). Jane was struggling with hysteria in fact; her health deteriorates after her husband imprisoned and caged her in the strange room. Her husband hasn't taken care of her because he didn't understand her illness. She writes "I even said so to John one moonlight evening, but he said what I felt was a draught and shut the window" (40). Further, she states "Hardly let me stir without complete direction" (44).

The protagonist of the novel became more emotional and sensitive during her residence in that room. Therefore she felt so depressed, sad, invaluable and very mad at her husband. She imagined many strange scenes inside that room. Jane comments "I feel basely ungrateful not to value more" (55). Also, she argues "I'm sure I never used to be so sensitive. I think it's due to this nervous condition" (70). Hence, Jane even sometimes thought that she would burn this room and the house as she states "I thought seriously of burning the house to reach the smell" (80).

Her husband banned her wife Jane from writing, he thought that writing would elevate her mental illness and became an obstacle to her cure. Yet Jane was in need to write because it was as remedy and relief to her mind and her health; she believed in writing as she states that

“We have been here two weeks, and I haven’t felt like that writing before, since that first day” (100). Moreover she confirms “But I must say what I feel and think in some way it is such a relief” (110).

2.4 “The Yellow Wallpaper” Criticism

Charlotte Gilman was writing beyond reality. She aimed to write far from the truth on women; her fiction was clear in her novel. “The Yellow Wallpaper” was a tool to condemn medical treatment. There were gaps in the short story like: the unequal relationship between the narrator and John, an uncompleted story with women mentioned in the novel and mysterious narration about the wallpaper.

Many scholars and writers saw this short story was perfect, while others saw it a very fictional, absurdist, sordid and empty from events. They blame the author and did not like it.

3. Virginia Woolf and Bipolar Disorder As Depicted in Her *Mrs. Dalloway* (1925)

Virginia Woolf is a British author who was well known an the beginning of the 20th century. She wrote her novel *Mrs. Dalloway* as a reflection to her life.

3.1 A Short Biography of Virginia Woolf

Virginia Stephen was born on January 25, 1882 in London, England; she is an English novelist, critic, and essayist; she is considered as the famous female writers of the middle of the twentieth century. Woolf She was educated with her sister at her father’s library in their home. Woolf liked literature and was passionate and ambitious about writing novels; in fact she was talented. Virginia has met famous literalists in her life such as: E.M forster. After she completed her education, she entered the literary world from the widest door and became well-known authors.

Woolf is known of her special style in writing, by which her novels can be described as impressionistic. Hence she used to follow the impressionist style instead of recreating reality. The style of Virginia Woolf’s novels is characterized by the rejection of traditional European narration forms (metabolism). Virginia Woolf is distinguished by her famous novel *Mrs. Dalloway* that talks about a fictional female character who lived in post-English high society. Woolf was mentally ill, and this has influenced her writings. She has struggled with bipolar disorder. Even though her husband was standing by her side, yet she could no longer continue her life with such a disorder. Eventually and unfortunately, she decided to end her life by

committing suicide on March 28, 1941. She left a letter to her husband, where she expressed in her feeling of guilty and her suicide.

3.2 Summary of *Mrs. Dalloway* 1925

Mrs. Dalloway by Virginia Woolf was published in 1925. It was set in one day London, when Mrs. Clarissa the protagonist of the novel wanted to make a host party at her home. Thus it was a beautiful day and specific for Clarissa, because she returned with her memory to the past when she lived in Bourton, and made her about her husband 'Richard Dalloway'. The party was big and Clarissa invited all the characters whom she knew in the past such as: Peter Walsh her earlier lover who has proposed to her to marry him.

Septimus Warren Smith a character suffered from Post-traumatic stress disorder; he was a mentally disturbing veteran. His mental illness was caused because of the aftermath of the First World War, when he lost his dearest friend. While the invited people were celebrating the party, suddenly some news has interrupted the party, which was declared by the doctor William Bradshaw and his wife about the suicide of Septimus. When Clarissa heard about this she entirely respected his choice to end his life, she felt that any person should be courageous to live his life the way he wanted, and he should be brave enough to choose the way for ending it.

3.3 Mental Illness and Depression in *Mrs. Dalloway*

Virginia Woolf has a historical psychiatric background in her family. Her mental illness was caused by three main factors: psychological, genetic, and social. For a psychological factor, Virginia was suffering from a mental illness known as a bipolar depressive illness; this appears throughout her style of writing. Hence she wrote *Mrs. Dalloway* in bipolar structure, when she uses sanity and insanity inside the content, and when she depicted two different worlds within the characters' life. Second, it is from the genetic side, Woolf's family has suffered from mental illnesses; she mentioned this in her diaries. The old family's doctor George Savage argued that "Virginia illness has rooted in a family background" (qtd Baradaran 484). Thirdly from the social side, it is because of the Victorian-like society who has strict treatment for women and especially working women. Therefore Virginia found herself in a great challenge against the rules of society. Virginia Woolf suffered from mental illness which was clearly manifested in her diaries as she records:

I was walking down the path with Lydia. If this doesn't stop, I said, referring to the bitter taste in my mouth and the pressure like a wire cage of sound over my head, then

I am ill: yes, very likely I am destroyed, diseased, dead. Dumn it! Here I fell down.(qtd, in Caramango, 53)

Thomas. C. Caramango was one of the literary scholars who studied the mental illness in Virginia Woolf's novel *Mrs. Dalloway*. He wanted to show the relationship between the arts of Woolf that she used in the novel, and her mental illness. According to Caramango, he believes that manic depression illness "is mood disorder that can profoundly modify cognition, personality, judgment, sleep patterns, and metabolism" (33). The theories and perspectives of Caramango who are directed towards Woolf's mental illness may appear through the characters' life such as the protagonist *Mrs. Dalloway* and the veteran shell shock Septimus Warren Smith. Starting from Clarissa, Woolf described her as vital, the happy character she records "as seemingly, yet in deep she was very conflicted and had a mental illness"(2), and she states that "particular hush, or solemnity; an indescribable pause, a suspense" (3). Thus, means that Clarissa has a feeling of silence in her interior thoughts, but in the other side there was a great noise rises from Clarissa's heart, this reflected the bipolar structure in the character's construction of what Woolf had experienced in her life.

The other character who embodies the mental disorder in the novel is Septimius; the veteran who returned from the war with mental diseases known later as post-traumatic stress disorder (PTSD). He was mentally ill and had several symptoms such as hearing voices talking to others which seem they calling him, laughing alone as Woolf notes:

He waited, he listened. A sparrow perched on the railing opposite chirpy Septimus, Septimus, four or five times over and went on, drawing its notes out, to sing freshly and piercingly in Greek word (woolf 18).

4. Significance of Imagery in Marge Piercy's *The Woman on the Edge of Time* (1976)

She was a politic writer who worked on elevating the right of women by functioning them in political occupation. Her novel *Woman on The Edge of Time* was a masterpiece.

4.1 A Short Biography of Marge Piercy

Marge Piercy was born on March 31, 1936 in Detroit into a family struggled with depression. Her mother was the reason that she grew a poet she used to tell her about the observation skill. Piercy was interested in poetry writing was the second choice for her. Although her family had a history of depression sufferance; Marge Piercy had a happy childhood and a good family's relationship. Piercy was very talented and bright in her study,

especially in the college. Piercy wrote her best novel *Woman on the Edge of Time* which was one of her rare novels.

4.2 *The Woman on the Edge of Time's* Plot (1976)

Woman on the Edge of Time is considered one of the most fictional novels that can be adapted nowadays. Thus this novel was a comparison between the world in the seventies and in a utopian-like society after 200 years. It was set in the future and tackled many themes in fact. Piercy wrote this novel in order to escape from the real world.

4.3 Madness in *The Woman on the Edge of Time*

Connie the protagonist of the novel was a normal mother in a time where women had to behave well towards their husbands. Connie was poor; she was a woman on the edge. She was obliged to be best with her entourage.

Piercy has tackled many themes in her novel such as degradation, oppression, segregation and madness normal and daily issues in the society as she requires "I went mad with fear. In the madhouse, I met Bolivar and he was good for me in learning to say the initial 'I want. I want' " (6.131). All these factors made her write a fictional novel in order to run away from reality. Hence Connie was on the edge of society; this edge makes her very mental illness and depressed and lost in her identity. Connie was a woman who fought for her freedom and liberation. She did not want her society to look at her with pity view. She tries to contact people from the future where she finds most of them lived in a mental hospital, especially females as she claims "Most we've reached are females and many of those in mental hospitals and prisons. We find people whose minds open for an instant, but at the first real contact, they shrink in terror" (10.45).

Conclusion

Charlotte Perkins Gilman and Kate Chopin are classified as ones of the rare intellectual female writers in the world. They are famous for her fictional style in the Fin De Siècle of the 19th century. Furthermore, they were calling for the individuality and independence of the women around the world. Moreover, Gilman, Chopin, Woolf and Piercy were defiant for men. They have been wonderful writers who saw the future before it comes. All of them didn't remain longer to write more novels, but their novels were symbols for strength and authority to the women. Therefore their writings were numerous but influential to the world.

Chapter Three

**Depression and Mental Disorder in *The Bell Jar*
(1963)**

Chapter Three: Depression and Mental Disorder in *The Bell Jar*

Introduction

The Bell Jar by Sylvia Plath is the perfect novel for depicting the story of a young woman who struggles from depression during her youth. Henceforth, this novel is considered as semi-autobiographical novel. In fact, the writer herself told her real story, by mentioning personal events that have happened to her. *The Bell Jar* was exclusively dedicated to show how deeply the social norms, whose are imposed on women, can sharply shape the destiny of women, and how they can affect their sanity and stability⁵.

1. Mental illness, Women and Literature

From ancient times, the mental illness and literature appeared to be interrelated to each other and go hand in hand. (Bullis, 5). The female element was present in literature too. Eventually, the mental illness was not that far from female writers also.

1.1 Mental Illness and Creativity in Literature

It is well known that all the writers, in general, are instable psychologically, and especially those who have written about dramatic realistic stories and novels. Obviously, a large chunk of them is female authors. Thus these female authors were in fact mentally ill or having some sort of psychological sickness. They were seemed more similar to be labeled as 'crazy' or 'mad'. (Bullis, 5)

Inspite the fact that they used to be intellectual in their writing and their creativity of literature was absolutely stunning; they were, unfortunately, holding mental breakdown. Henceforth, popular culture has long stereotyped poets and writers as depressed and creative scientists as mad. Most of them have suffered harshly in their lives from multiple perspectives: social, cultural and psychological ones. As they were part of their society and were normal citizens; they were obliged to submit to the social conservative norms that were determined by society. These norms have made them destructed ultimately, fell in a real internal psychological crisis, and finally put them in a myth that they could not get out from it. They have spent their time thinking about how to solve this problem by themselves.

Therefore, they used literature as a mean to express their feeling and emotions. They also have used it to depict and describe real social phenomena; to criticize the social environment they living in, and even sometimes portraying their whole life with spotlighting on the social

⁵ <https://www.bl.uk/20th-century-literature/articles/an-introduction-to-the-bell-jar>

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dark sides, by shading the light on their mental sickness as: depression. In fact, that what we exactly have manifested it in the novel of *The Bell jar*. Literature was their healing solution, and their asylum to live in. It is a common fact also that the women are too sensational. So their wide imagination applied it in the literature to write and defend themselves. They wanted to reach their voices to the world through their writing, and show the world the oppressiveness and the execution that was utilized against women in America, and England during that period of time (Bullis,12).

1.2 Women and Madness in the 20th Century

The madness was a big hitting subject during the 20th century. It was touchable for women the most, and that very confusing in fact. The majority of the western people were astonished by this new thing.

1.2.1 The Historical Context

The twentieth century in the western centuries was an era of great changes in many fields; one of them was the medicine field. The medical advances were great and the psychiatry has improved. In fact, the psychiatry helped the society to understand well several issues of mental health. Though it was all male dominated up till the 1930, when they have permitted the female contribution in this field.). In addition to that, unlike to the other historical periods, this period also witnessed the rise of feminism, and the feminist movement in the western society. Moreover the society was opened to the studying of women; to whom we could see several female scientists and inventors at that era. Furthermore, women were allowed to be active in literature, mainly in the writing stories and novels. The women used the writing process in order to express themselves, to give a look into the minds, and the lives of women. (Sigurðardóttir and ensku 12).

1.2.2 The Effect of Oppression on Woman Health

Women have been a silent part for the majority of time in the human history. They were expected to play roles in major events. All along, they had no importance among the society; they were oppressed indeed, by both the male hand, and the society. Eventually, the women were expected to follow, and apply some firm standards that are expected, and imposed by the social entourage. These standards or norms made the women imprisoned in a cage. During the twentieth century in America, society was embracing the ‘Victorians Values’ in terms of

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morality. The women in a society like that would definitely apply the rules to be a good wife and a good mother. Actually, these harsh rules made her obliged to be submissive, docile, and subservient to men. The oppression of the women was at that time a hitting subject. All this made the women to be victims of abuse, and made them risked to have mental illnesses such as: depression, bipolar disorder and many others. In addition to that, the oppression caused to women more stress, confusion and hesitation about their future and life in whole. Moreover, that oppression has led them to be sick, mad and insane easily, by which they would behave unconsciously. In fact, this led some scientists to think that these women are intending to be sick just to avoid their social duties and house holding. Obviously, that was wrong since the women were not pretending the illnesses, they were really sick.

2. Sylvia Plath and Depression

Sylvia Plath is famous of her tragic novel *The Bell Jar*. She was a depressed author; depression was always present in her poems and writings.

2.1 A Short Biography of Sylvia Plath

Sylvia Plath is an American novelist that is best known for her tumultuous life, and her eventual suicide. She was born on 27 October 1932 in Jamaica Plain, Boston; she is an American poet and writer. She is best known for her only published novel *The Bell Jar*. Plath was a daughter of an immigrant German father 'Otto Plath' and a mother of an Austrian origins 'Aurelia'. She has lost her father when she was eight years and completed her life with her mother and younger brother⁶.

1- The Beginning of Depression in Plath Life

The loss of her father caused her a deep sadness and depression, by which she said that she, has never talked to God after the death of her father. Sylvia Plath suffered from bipolar disorder during the beginning of her adulthood. Some symptoms started to appear, showing her mental illness; she was unhappy, depressive, suffering from breakdowns, having multiple aches over her body, and confused all the time. Plath was worried and hesitated about her future as writer. In fact, she intended to write a novel that would represent her feeling, ideas, thoughts, and events whose she has witnessed along her adulthood. Plath has finished writing

⁶ https://en.m.wikipedia.org/wiki/Sylvia__Plath

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her novel *The Bell Jar* in 1963. After that, she tried to commit suicide but she failed. Eventually, after this incident, she has entered a psychiatric institution in order to be healed.

2- The Qualities of Sylvia Plath and Her Study Career

Plath was a talented girl, additionally to that she was a brilliant student, she excelled in school and developed a strong interest in writing and drawing. The brilliant girl was ambitious about poetry; she wanted to be a writer; she published her first poem when she was only eight. As she was a brilliant student during her study career, Plath has won a scholarship in 1950 to be integrated into one of the biggest prestigious American universities at that time, it is called 'Smith College', and it is situated near to Boston. Plath majored in English in her university career. In 1955 Plath has obtained her degree successfully. In 1956 she has won a prestigious Fulbright scholarship to go to continue her study in England at Cambridge University.

3-The Personal Life of Sylvia Plath

While her studying in Cambridge University, she has met Ted Hughes, a young poet. They have got married after several months in the United States. Ted and Sylvia established in London. Plath did not feel comfortable at that period because she has felt that the responsibilities of marriage took over her time. She could not provide time for her career as a writer. So they decided to leave England and flew to America for living two years there from 1957 to 1959 in order to achieve their goals. During their lifetime in America, both of them made a lot of successful literary works, especially Plath who dedicated her time for writing poems and stories. Plath and her husband came back to England. They had two children together, Frieda and Nicholas. Plath has psychiatric troubles during her marriage, because she was profoundly sick and instable. Her husband could not bear her sickness anymore, this along with his affair with another woman. Consequently their marriage came to an end.

4- The Death of Sylvia Plath

Plath thought that her divorce from Ted would bring her the happiness that she has lost and has missed for a while in her marriage; yet she was totally wrong. Sylvia Plath could not pursue her dreams in writing and building her career that she has dreamt of in her life. Unfortunately she got confused all the time and could not resist her failure. In 11 February 1963, Sylvia Plath has committed a suicide in her house in London, by putting her head in the oven and gassing herself, and ending her life at the age of thirty one.

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2.2 Sylvia Plath's vision of Women and Mental Illness

Over the years Sylvia Plath has become a famous female figure representing women's intellectual oppression, as her work holds witness to the impact of mental illnesses and attached social stigmas on women of her generation. From her experience of disease that helps us to deconstruct the myths of feminine madness, Sylvia Plath's writing was never solely about the mental illness of itself, but rather the relationship between herself and society.

Plath has taught us the silence; she made her characters unable to speak. She demonstrated on the scandals of the asylums since they used a method of silencing; she criticized this medical silencing method indeed. Moreover, Plath made us acknowledge the historical context and the important changes that have been made in the medical institutions that research women and mental illnesses (Matošević, 16).

The Bell Jar is a semi-autobiographical novel that conforms closely to the events of the author's life, and detailing Plath's descent into madness when she was a young woman. The main character is Esther Greenwood who personifies the actual emotions and events that transpired in her short life. It tells a story of journey of a young woman who was suffering from depression. Plath in fact described detailed stages of her sufferance from depression in her early adulthood in this novel, and applied it on the character of the young woman.

2.3 Plath's Aspiration behind *The Bell Jar*

Sylvia Plath wrote her only novel *The Bell Jar* to achieve many goals. Plath wanted to defend the women and stand by the side of the women; to show that the women along years, decades and centuries were witnessing very bad life, and how the society was pressing on them very hard rules to follow, making them also to bear a huge burden. In fact, they were silent all the time, never were demanding at least for their own rights. They were the weakest, and the most afraid ones. She wanted to blow off her silence, and speak out for the oppressive women. Plath has used this novel as an account for dispelling the misconception of thinking towards the mentally ill. She aimed also to criticize the society's manner of treating those who are sick of depression; she wanted to erase those labels of 'madness' or 'craziness' that are misspelled by the society (Matošević, 15).

3. *The Bell Jar* under The Scope

The Bell Jar has been analyzed by a lot of scholars many times and interpreted from different perspectives.

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3.1 Summary of *The Bell Jar*

Sylvia Plath's only published novel *The Bell Jar* was written in the early of the 1960s. It was initially published in England until 1963 under the pseudonym Victoria Lucas, and in America until 1971 under her real name. Sylvia Plath has published the work under pseudonym Victoria in order to protect the people that she portrayed in the novel, and because she was uncertain of the novel's literary merit (Matošević, 13).

The novel deals with a young woman's descent into mental illness, through exploring themes such as identity, women's role in society, mental illness and suicide. (Matošević,5). *The Bell Jar* was a groundbreaking because of the open way Plath described woman's experience of young adulthood, and mental illness. It portrayed a story of woman's descent into depression. The unique novel concerns also with a young woman's eventual breakdown and suicide attempt. It told also a story of recovery, redemption, rebirth and starting over. It examined the pressure of social expectation on women and the toxic culture of the 1950s In America, where the American society was shaped by conservative values and psychiatric structures. It was a society that placed particular restraints on women, as it expected them to embody traditional ideals of purity; to aspire to the life of a suburban mother, and homemaker rather than pursuing their own careers. The fifties culture made finding a positive identity so difficult, besides to the impossibility of living with the contradictory ideals of womanhood. All these stressed factors pushing them to feel unsecure about themselves and about the community around them. In fact the same factors led them to self- destruction. Self-destruction is exactly identical to the title *The Bell Jar*. The title refers to the oppressiveness and isolation that provoked depression and toxic ideas of suicide to many women (Matošević, 14).

The protagonist is Esther Greenwood a young woman who wins a contest to be a guest editor at 'Ladies Day Magazine' in New York City. While she was living in the city running behind her job, she met different women in her job. Each one had her own special personality; none of them is alike to her, as she replies "girls like that make me sick" (Plath 1). The novel describes her experience in the city; her journey with depression, and bipolar disorder. Thus she used to feel depressed, sad, hesitated, confused about her future and sick of society. The society was a disgusting thing to her; she determined to enclose herself in her own world, alienated and detached herself from people around her. Esther was wondering all the time about the contradiction inside the community. She tried to understand well the concept of femininity, to find a solution to her inner struggle, and to save her future.

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On her return to home, Esther discovered that she has not been accepted in The Harvard Course Program to which she had applied this along with the pressure of her mother to marry a man who does not value her for nothing. Obviously, this has made from Esther to be a truly sick person. In fact, that was a turning point for Esther, since her mental health has worsened a lot, and her doctor recommended the electroconvulsive treatment to her. Therefore this has a side effect on Esther and was damaging for her, because she hated the treatment a lot, and considered it as an obstacle for her achievement in recovery. For that she has tried to commit a suicide many times, while she was treating in the hospital. Esther did not go very well with the doctors there except one: 'Doctor Nolan' who was sympathetic to Esther. So she was sent to the asylum where she has been isolated from her mother and people.

To conclude, Sylvia Plath's novel *The Bell Jar* is a novel that assembles many themes such as: motherhood, marriage, family, education, individualism, independence, identity, dreams, gender roles, mental health, inequality and many other social problems as divorce, violence against women and abuse, pressure and judgment of the society. Actually the novel has criticized harshly these social obstacles, because they were very common at the fifties period in America. It portrayed them accurately in order to show their side effects on the people especially the women. The novel in fact has depicted seriously mental illnesses like: depression and mental disorder that affected the heroine Esther Greenwood.

3.1.1 Beyond the Title?

The bell jar is an apt title; it represents mental illness itself, a heavy and confining jar that descends over one's mind and impedes the ability to freely live. The symbol of the bell jar is quite fitting because it implies that it sees through the person is able to see the outside world; it seems that they are free but the moment. For Esther, the problem is not where the world she is; hence the problem is the stifling oppressive bell jar that has fallen down upon her. Esther states "whenever I sat on the deck of a ship or at a street café in Paris or Bangkok, I would be sitting under the same glass bell jar." (plath, 12)⁷.

3.2 An Intimate Portrait: Sylvia Plath *The Bell Jar*

The Bell Jar by Sylvia Plath is really a masterpiece. It is representative of Plath herself. As we know Plath struggled with mental illness, and tragically took her own life in 1963. *The*

⁷ [https://www.tanyajpeterson.com/2014/01/under-the-bell-jar-its-hard-to-fight-insanity-when-you're-depressed](https://www.tanyajpeterson.com/2014/01/under-the-bell-jar-its-hard-to-fight-insanity-when-you-re-depressed)

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Bell Jar is a powerful novel for many reasons; it took us inside the mind and heart of someone experiencing insanity or depression.

a- Social Expectation and Women

The biggest and most obvious obstacles that Esther has, in achieving her goals are society's expectation of what a woman should do with their life. Although she was a young, intelligent woman with a bright future; she was torn between conforming to women's traditional role in society, and living the way she wanted. Like any other young adult woman, Esther had a good clear idea about what she would do in her life, but she used to be not confident enough to go through it because she was crushed under the weight of expectation and demands of her society. Esther was disillusioned by the society surrounded her, mostly because she knew women who were housewives, and that did not surprise her that much. (Matošević, 15).

In spite the fact that Esther has met inspiring independent women in her life, Esther remained disappointed. There might be a few reasons for that. First, the people who were the closest to her did not support her dreams of becoming a writer. Second, her mother was intervening a lot about her future, she tried to convince her multiple times to work in a suitable job that can be typical for her, and for the fifties society. Third her boyfriend Buddy Willard also was opposed to her career, and did not understand her poetry. These two characters had the mentality of the fifties.

Next, the choice between marriage and career is an important theme Plath discussed in the novel. Esther was totally sure if she had chosen one option she would not have any of the other options. Therefore she has understood lately the desire of her mother to marry Buddy Willard; since she was caring about the future of her daughter. The marriage was important for the girls at that time; it was impossible for women to have both family and career. Esther hated marriage a lot and has criticized it also; she considered it as cooking and cleaning all the time. Actually, it was very hard for a talented and intelligent young woman like Esther, to give up her career, while she had many opportunities.

b- Esther's Illness

Esther's mental health began while she was in her intern in New York City, but her health drastically deteriorated during the summer she spent at home after her internship. After not

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being accepted to a summer school program, she started to feel that she had few options were left for future. The fact that she had a limited array of choices, this led to her downfall absolutely.

When her mother realized that her Esther had clear signs showing her mental illness she had taken her to Doctor Gordon. Esther did not establish a trusting relationship with her doctor, so her health steadily deteriorated after meeting him. The first electroshock treatment she had was very bad; she comments “what a terrible thing it was that I had done.” (12). In addition to her obsession with suicidal ideas on the media; and eventually, her health has worsened even more.

c- Esther’s Relationship with Doctors

Esther Greenwood has met many doctors, but none of them have inspired Esther. She did not go well with those doctors, because she faced some problems. For instance, Esther considered Doctor Gordon as irresponsible, since he did not care that much about her illness. He was not helpful to her during her treatment; he did not trust her when she told him her symptoms, as if she invented her sickness.

Esther did not improve while she was treating at his psychiatry she featured him as neither carrying nor caring. The only doctor that Esther has liked is Doctor Nolan. Doctor Nolan was a young woman who cared a lot about the mentally ill, especially, the female ones. She has known how the society reacted towards the females who were depressed and instable. Nolan wanted to help Esther, and Esther has improved a lot after the treatment of her nice Doctor Nolan.

3.3. *The Bell Jar*: A Psychological Case Study

The Bell Jar tells a story of a woman who struggles to fit in the society’s gender role and how struggling with these roles leads her to have a mental illness. In the novel, Plath has described a widespread of constraints that women have faced during the fifties era; whose lead them to be insane. Therefore severe gender roles caused to them effects on the mind, spirit and body; it impacts negatively their mental health (Tsank,166). Esther the protagonist personifies Sylvia Plath herself, and she is one woman of those who has witnessed that life.

Esther Greenwood is the heroine of the novel she has witnessed very harsh events along her life stages. In her childhood, she lost her father at age of eight. That loss indeed caused her an early deep depression and sadness inside her soul, she writes “I thought how strange it had

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never occurred to me before that I was only purely happy until I was nine years old.”(75), but she did not show it out. After the death of her father, her life has modified a lot.

As she moved with her mother to live in her maternal grandparents’ house; she has definitely destructed a bit with this partial change. In one hand, her mother ‘Aurelia’ did not stand by her side she abandoned her daughter all the time. She has not given her the love and mercy that Esther was expected; never asking about her circumstances. Her mother has let her solely all the time through growing by herself. The time was the only companion of Esther. On the other hand, her loneliness in her grandparent’s house, in addition to her missing to her father made her sad, so sick psychologically and provoked her emptiness in her life. Eventually, Esther used to keep her life exclusively to hers since the heroine has no friend to share with her feeling, secrets and events happened in her life. Henceforth the loss of her ‘daddy’ and the mistreatment or the neglecting of her mother created to her a strong shock which made her never trust in anybody. Even at the school, she did not make any friends she alienated herself from her classmates. She was too young to realize that she was mentally ill; she thought that she was totally sane.

Esther Greenwood was an excellent student in her class she was brilliant having a high level of intelligence; she used to get the ‘A’ grade in her study. She has possessed good qualities such as drawing and writing poems and stories. Since her infancy, she wrote things about her dead ‘dad’ because she used to express her buried feelings or thoughts in her writing. The straight ‘A’ student claims “nineteen years running after good marks and prizes and grants of one sort to another” (29). She has dreamt a lot about her future, as she expected a bright future and becoming a successful writer. Actually, that dreaming of a bright future has helped her a lot; and would save her from loneliness and depression that she was suffering from them. Esther Greenwood had perfectionist goals from her childhood as she was a hardworking student in her study career. The perfectionism that she built, has acquired her trust in herself that she would not ever face any kind of damage, any failure could cause to her big disappointment and psychological collapse. Henceforth this perfectionism made her keen big pride for herself a disgraced from people; Esther proclaims “I liked looking at people in crucial situations” (30)

As Esther Greenwood has grown up and completed her study in the college successfully; she has won a contest for one month, in the summer of 1953, to work as a guest editor with other eleven girls, at a major fashion magazine that is called ‘Ladies Day Magazine’ in New York City. Esther was in her twentieth years when she has got this opportunity. She was affected by the execution of the Rosenberg when she moved to New York, she tells “it was a

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queer, sultry summer, the summer they electrocuted the Rosenberg, and I didn't know what I was doing in New York (5). As she experienced life in the city of New York; Esther could not resist the vibration of the city, she was totally lost and depressed. Having come from a relatively conservative family could not help her very much in her new life. Thus this uproots her to a new environment where she felt isolated and stressed of how to cope with this situation; Esther remarks "I knew something was wrong with me that summer." (2). The brilliant girl has found a very different sort of living in the big city: parties, concerts, fashion shows, luncheons, dinners, and multiple rounds of fashion gifts; this triggering event sent her into a full-blown crisis.

In her work, Esther has met many girls; in fact no one seemed to be similar to her and no one represented her full character. She lived with them in the Amazon, a hotel's woman and attended a steady stream of events and parties hosted by the magazine. Though Esther knows she should be enjoying herself, she feels numb and remarks sadly "I felt low... I felt that all the uncomfortable suspicion about me was coming true, and I couldn't hide the truth much longer" (24).

She has been detached from her old ambitious self. The protagonist was worried about the rigid expectation of virginity, maternity, and wifeliness that society holds for young women. Therefore the heroine feels paralyzed by her contradictory desires for her own future from this point she has estranged and alienated herself from people around her, she began to feel progressively apathetic from the whole society.

Esther Greenwood a brilliant college student was indeed disgusted from the society. The female protagonist discovered hypocrite reality in that era of the fifties; it was an era of the conservative community, where the women had some severe standards to follow and apply in their lives. These rules were expected by the 'Victorian-like community; it has limited sharply the destiny of the fifties women. Esther was extremely mad at this contradictory life. Esther was clearly mentally ill, unstable and has truly deep depression. Her thinking about how to deal with her future led her to internal trauma inside. Her psyche was confused, irritated, and hesitated; she had dangerous suicidal thoughts have forbidden her from living simply like other people.

Thus, the sick woman had problems in making any decision especially in what concerns with her future, whether she would live oppositely to her society. Actually, she was torn between two kinds of lives either to get married have children devoted her life to her husband obeying him in every single detail, or live single running behind her career and be successful.

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Henceforth the pity depressed woman saw that as unfair action towards women; since the man could marry while at the same time he could do his sexual desires with other women and enjoying himself whereas the women are prevented from doing so. Plath as her heroine character both of them were sending a message which defending the femininity.

Obviously, Esther Greenwood was unhappy all the time she spent it in New York City. She was trying to imitate her two friends by acting two personalities; either like Betsy who was wholesome and have nice values, or like Doreen who had to break the rules and was over opened on modern life. Esther claims “pureness was the great issue when I was nineteen.” (11). Furthermore, she went on a string of bad dates one with Konstantin who made no romantic advances while the other with Marco who tried to rape her. Throughout her time in New York, Esther flashed back to her troubled relationship with Buddy Willard, a handsome medical student who Esther once admired but she later hated him since she realized that he was a big liar and hypocrite unlike his noble image by having a sexual affair. Esther decided to break with him after he would recover from his sickness and got better. Despite the fact that Esther was probably independent, cultivate, and a very wise young woman; she used to care about people a lot, which augmented her absurdity and sickness of mentality.

Additionally, she was a poet surrounded by people who did not value her poetry. She feared her mother, trying to ignore her talking that was stuck in her head of pressing her to marry Buddy Willard a medical student. Unfortunately, her behavior became more outside the norm, at the end of her internship the young lady found no way to get liberated from this crisis so she destructed herself and even let the world destruct her. So her response to her society was to withdraw inside her ‘bell jar’ where she was protected from those influencers Esther absolutely shifted from a decent girl into a mad and depressed one.

Back to her home near Boston; Esther discovered that she did not gain entry to a writing program course at Harvard University that she had counted on as an escape from her unbearable life. She thought she would spend the rest of the summer taking. This rejection crushed her as she responds “I slunk down on the middle of my spine, my nose level with the rim of the window, and watched the houses of outer Boston glide by; as the houses grew more familiar, I sunk still” (114).

This along with the conviction of her mother to convince her to marry a man whose she did not love. After this incident, Esther ultimately has become a destroyed woman and stuck at home in the suburbs. In fact, she has imprisoned herself in her home “I couldn’t see the point of getting up; I had nothing to look forward to” (117).

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Her condition has worsened a lot. She did not even any bathing or changing her clothes. Esther's mental illness, which was nascent in New York, transformed into suicidal depression. Esther tried to commit suicide several times but she failed; she comments "but the person in the mirror was paralyzed and too stupid to do a thing." (148). Furthermore, she was sent to the psychiatry for recovering; she tried the electroconvulsive treatment as she tells "to be myself again" (11).

She has met a multiple of doctors but none of them was nice to her except one Doctor Nolan who was very friendly to Esther. According to Perloff credited Dr. Nolan as a savior, "the only wholly admirable woman in the novel" and "the only woman whom Esther never longs to imitate or resemble" (521). Esther Greenwood has witnessed the treatment with other girls in the same psychiatric yard; she tells "What was about us in Belsize (hospital) so difficult from the girls playing bridge and gossiping and studying in the college to which I would return, those girls too sat under the bell jars of a sort" (20).

All in all, Esther Greenwood is one example of many women who were suffering from psychological illnesses that led them to lose their lives. Esther was neglected and abandoned by her mother, judged by society, and was hated by herself. Esther's basic causes of depression were varied from the loss of her father to the Rosenberg' execution to her anger from Buddy Willard to the hypocrite society and the bad relationship with her surroundings; all these assemble her breakdown.

Conclusion

In the early fifties, the field of psychiatry could gain from reading Plath's history, as yet another example of the difficulty of adolescence and the changes arising from it. In fact, it was a history of feminine psychology, female madness in Victorian-like literature, insanity in literature. Furthermore, the fifties was a period where women were victims of abuse, which led to their insanity and instability. Plath chooses one era that she really lived in. the era of the fifties was her concern since her novel was set at this time. Plath and her protagonist came of age in an era, where women explicitly told that happiness could only be achieved through the enactment of a biological imperative in society. The events of *The Bell Jar* mirror very closely those that began in the summer of 1953 in the American female entering womanhood.

The similarities between Plath and Esther is that it gives the reader insights into the experience of a young woman troubled who despite living in a life that would be envied by other girls in her age; suffers from crippling depression and recurrent thoughts of suicidal. She

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criticized them all but rather she blames mental illness as a mysterious and horrific disease. Many psychological scientists nowadays are confusing about Esther. They assume whether she was the woman who died by suicide due to her madness, or the woman who steeped by sadness and died by suicide.

General Conclusion

General Conclusion

This study has tried to answer the problematic questions. Hence, women are predominantly more exposed to suffer from violence and sexual abuse. In fact, these factors can cause psychological disorders to women which lead then to a mental illness.

All the female writers that are depicted in the thesis are inspiring writers who tried to transfer the real image to their readers of the social and cultural structures and the expectations that were demanded by the society whose women faced. Therefore they depicted the place of women at that time that were holding the Victorian ideals; they clarified how these ideas, expectations and structures can shape the destiny of women by leading them to instability and irritability. Further, they questioned the inequality between genders which is the big reason to slip into depression, mental disorder and madness. It shows the extent of difficulty and complexity of struggling and living with mental illness.

Thus, the present analysis of these female literary works exhibited the male oppression and stereotypes upon women and portrayed the placement of women according to society dominated by men. They were obliged to serve as domestic creatures. The female authors explored many themes in their novels and issues such as victimization, identity formation and identity crisis, writing and empowerment. The racial segregation, motherhood, marriage, passion for writing all these played a great role in affecting the identity of the protagonist.

This study has discussed the importance of writing. The writing for them is as a means of therapy of self-expression. The characters of these novels could not win in the battle of the depression and mental illness they attempted hardly to break the traditional rules as a way for expressing their feeling and ideas. They did not cure unless they achieve their goals. These novels represent their pains and hurt. Hence, writing comes as confession and communication. Moreover, writing reflects the unbearable patriarchal and social racial oppression and stereotypes inflicted on women; it traces the traumas faced by women. They tended to change the alter from oppressed women to powerful women who look and search for independence which leads them to be sane mentally good.

Analyzing the literary works helps to understand to a given extent Woolf, Gilman and Plath. Thus, their literary works received reactions from psychological scientists who viewed that these female writers were driven over the edge by her husband and the sacrifice of the 19th and 20th century in Britain and America. All of the protagonists were seemed as tragic heroines, who were unable to deal with pressures of society because of their bad mental health. Most of the mentioned female authors like: Woolf, Plath and Gilman were rebelling against the way women are treated in a particular society, by highlighting on the

General Conclusion

disadvantages resulted from these treatments. Therefore these female mental writers criticized the society, family and themselves, but rather they blame the mental illness as horrific disease.

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