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WOMEN AND MADNESS: A LITERARY PERSPECTIVE

Submitted in partial fulfilment of the requirements for the B.A. in English Language and Literature and History of Art at the University of Rijeka

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September 2015.
Abstract

Charlotte Perkins Gilman's *The Yellow Wallpaper*, Sylvia Plath's *The Bell Jar* and Marge Piercy's *Woman on the Edge of Time* are important literary works that deal with mental illness in women. Gilman and Plath are two of the pioneering female authors who wrote about mental illness in their works reflecting their own experience, while Piercy is one of the most influential female authors who wrote about mentally ill women of colour. Society's negative reaction to the main characters' illness was similar in all three works due to the lack of knowledge and sensitivity for mental illnesses and the women themselves. The patients from these works had different symptoms and received different treatments, but all three works point to the same important problem – the representation of women's inner lives in literature.

Keywords: women, mental illness, literature, society, Charlotte Perkins Gilman, Sylvia Plath, Marge Piercy.
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1. Introduction

Until the 19th century, more often than not the female experience in literature was written by men who, unfortunately, did not fully understand it. Charlotte Perkins Gilman was one of the first women to write about mental illness in her work, reflecting on her personal experience. This essay is about women’s experience of mental illness and their critique of society by comparing the way these themes are treated in Charlotte Perkins Gilman's *The Yellow Wallpaper*, Sylvia Plath's *The Bell Jar* and Marge Piercy's *Woman on the Edge of Time*. Gilman and Plath are both pioneering female authors who wrote about their experience of mental illness, and since their works were written seventy years apart, it will be discussed how much their experiences differ and how society's view on mental illness changed during that period. Piercy is one of the most influential female authors who wrote about mentally ill women of colour, and as *Woman on the Edge of Time* was published ten years after *The Bell Jar*, I will compare the different experiences of women living at roughly the same time, one being white middle class, and the other being a lower class woman of colour. By drawing on their personal experience, Gilman and Plath pointed to inequality, while Piercy was also focused on social justice. Before discussing *The Yellow Wallpaper*, an overview should be given of how society viewed mental illness in women at the time the works were published.

2. „Madness“ in the 19th and 20th century

The development of psychiatry began in the 19th century and most of the knowledge doctors had about it at the time was not scientific, and unfortunately, they
usually relied on social ideas about mental illness. In Victorian society it was expected of women to be wives and mothers, they were thought to be naturally gentle, emotional and dependent, thus being more susceptible to illness. At the time women were completely dependent on their fathers and husbands and had no right to choose for themselves, which is why depression and anxiety were quite common among women. The middle of the century saw a rise of state asylums, mostly because doctors believed it was possible to cure patients by changing their environment. Furthermore, they believed this could also be achieved by making the patients stop their then unacceptable behaviour by removing a body part or a part of their brain. It was thought that mental illness was caused by gender, class, heredity and behaviour that was out of the norm (London Asylum, 2009).

Basically, any behaviour that was outside of the social norms was considered to be “madness”. Thanks to this belief, families of the patients had an excuse for their relative’s unacceptable behaviour. Asylums became the place where undesirable citizens were removed from respectable society, and in them female patients had to perform work that was appropriate for their gender, such as sewing and cooking (London Asylum, 2009). According to Hunter, Shannon and Sambrook, the sizes of asylums continually increased, taking in more and more patients, until some asylums became a custodial instead of a therapeutic institution, which proves that patients did not get the medical attention needed. Furthermore, overcrowded asylums were dirty, had barred windows, and the staff was underpaid so they treated the patients horribly (Hunter, 1986).

Following the growth of psychology in the beginning of the 20th century new ways of treating mental illness were employed. The first lobotomy was performed in Spain in 1936. Since then doctors have had different opinions on the surgery; generally it
was deemed as a successful type of surgery for the mentally ill, but there were many
side effects. One study showed that only 10% of the patients had greatly improved.
The problem was, it was still unknown exactly how much tissue had to be removed,
which is why some patients were able to continue their lives normally and others
were often unable to take care of themselves and suffered a great decline in their
intelligence. Furthermore, it was not unusual for a patient to have a completely
different personality, to become dull or have reduced social consciousness
(Lobotomy: Surgery for the Insane, 463-467).

Another popular treatment was electroconvulsive therapy, also known as
electroshock therapy. Newspapers wrote a lot about it and some private clinics even
advertised that they perform electroshock therapy. Doctors admitted that only
experienced doctors could perform this kind of therapy, because it could go awry, just
like Plath described it in The Bell Jar. If the electroshock was not done right, patients
often suffered from amnesia or their mental state worsened (Shepley, 60-61). To
conclude, society viewed mental illness as something shameful and they were afraid
of mentally ill people because the public was not informed enough about it. Because
they did not understand it, they made it even harder for mentally ill people to cope
with their illness and recovery.

3. The Madwoman: Charlotte Perkins Gilman's The Yellow Wallpaper

Being a woman in the 1800s was, of course, not easy, but at that time there was
a rise in the consciousness of women; big changes were about to happen in the
progress of women’s liberation. One of the women who wanted their voice to be
heard and their experience to be as valuable as men's was Charlotte Perkins Gilman. She wrote her semiautobiographical short story *The Yellow Wallpaper* in 1892, following her postpartum depression. The story is about a woman who is seemingly happily married but she is not feeling well, so her husband who is a doctor rents a house in the countryside with the hope of it easing her nervousness. She is forced to spend her time in one room only and after three months of being confined to it, her health deteriorates and she develops an obsession with the old yellow wallpaper in the room.

Her problem stems from the fact that her husband, John, does not believe she is actually sick. Because of her oppressed position, no one is taking her seriously. Her family thinks that there is no reason not to listen to him, a doctor, instead of trying to understand her problem. She believes writing would do her good because she loves it, but John and her brother, who is also a doctor, forbid her to write. The writing itself does not exhaust her, but the hiding and the secrecy of doing it against their orders does. As women were not supposed to have a job outside of their home, this ban comes as no surprise. Furthermore, her opinions are easily dismissed, for example, when she thought the house was haunted her husband “...said what I felt was a draught, and shut the window.” (Gilman, 1892). Next, John is patronising her; he is disguising his lack of care by calling her “little girl” and “darling”, showing that even though she is a grown woman, a mother and a writer, her opinions are not as valid as his opinions are, merely because she is a woman. When she tries to make him understand that she is not feeling better and that her appetite is worse, he discards her opinion and again uses belittling language: “'Bless her little heart!' said he with a big hug, "she shall be as sick as she pleases!'” (Gilman, 1892). After disagreeing with him, John takes the position of an authoritative figure by scolding
her and saying she should believe him because he is a doctor, and as a doctor he
knows how she feels and what she should do about her health better than she does.
Another point is the fact that he deems her case not as serious as his other patients’
cases. John thought that there was no reason for her to suffer and that was enough
for him to deem her relatively healthy. Obviously, he was not educated enough about
mental illness to know that illness itself makes the person suffer, and that there does
not have to be a certain reason to suffer. It is possible that his attitude towards her
illness helped with its progress. Had he given her the attention he gave to his other
patients, her illness might not have aggravated.

Aside from worrying about her health, she feels ungrateful because she does
not appreciate the schedule John made for her prescriptions more, when in reality he
did not make much of an effort to help her treat her illness. She writes that nobody
would believe what an effort it is to do the little things she is still able to do, showing
that mental illness was not well understood at the time and therefore patients did not
geret the help they needed. The narrator admits that she cries at nothing and very
often, but right after that she says she cries only when she is alone, not even in front
of John. In my opinion, this points to another problem besides her illness; if she is not
able to let out her feelings in front of her husband who is also her doctor, how is she
going to overcome her illness? It may also be that she does not cry in front of John
because she is afraid that he will criticize her, which makes another point about how
bad the care of mental patients was in the 19th century.

At the beginning of the story the narrator felt depressed, but as she spent
more and more time in the room with the yellow wallpaper, her condition deteriorated
and she started hallucinating. From the moment she saw the wallpaper she hated it,
thinking how the previous owners hated it, too. When describing the lines on the
wallpaper, she uses equivocal language: “...pronounced enough to constantly irritate and provoke study, and when you follow the lame uncertain curves for a little distance they suddenly commit suicide--plunge off at outrageous angles, destroy themselves in unheard of contradictions.” (Gilman, 1892). It seems as though she predicted that the wallpaper would have a disastrous effect on her health. Even though she did not commit suicide, the wallpaper was a catalyst to her nervous breakdown. After staying at the house for two weeks, her health began declining; her husband did not understand why she would want to change the wallpaper and she felt as though the wallpaper had an intentional bad influence on her after she started seeing strange shapes in it. She kept seeing a figure of a woman behind the pattern, acting as if she wanted to get out. At night she would see bars on the pattern, much like the bars on the windows of the room, and the woman in the wallpaper shaking the bars can be compared to the narrator who wants to get out of the room she is confined to. The wallpaper haunted her, she could even smell it everywhere she went and “I thought seriously of burning the house--to reach the smell.” (Gilman, 1892).

Next, she started seeing the woman from the wallpaper crawling in the yard, so she started crawling around the room when she was alone in it, while her husband knew nothing about it and thought she was getting healthier because of her appetite. All of this proves how ineffective the care for mental patients was in the 19th century, when patients suffering from postpartum depression developed something even more serious because of the lack of help they got. It is possible that John and the rest of the family were ashamed of her problems, making them decide against looking for proper help for her.

There are many interpretations of the meaning of the wallpaper in the story. Paula Treichler thinks it is “...women's writing or women's discourse, and the woman
in the wallpaper to be the representation of women that becomes possible only after women obtain their right to speak. In this reading the wallpaper stands for a new vision of women...“ (Treichler, 64). Karen Ford disagrees because the wallpaper cannot be a new vision of women, if the narrator tears it down. Ford states that the wallpaper could represent women's discourse because a new vision of women and women's discourse are both impossible to define (Ford, 310). In my opinion, the wallpaper is a cage. The concept of a room as a cage was first suggested by Virginia Woolf in her essay *A Room of One's Own* in 1929. It is a literal cage for the woman trapped in it, and a metaphorical one for all women, including the narrator. At the time the short story was written women did not have the right to vote, or pretty much do anything else. In that sense, the wallpaper represents a cage in which all women were trapped, not being able to vote, express themselves or have the freedom of choice. By tearing the wallpaper down, the writer implies that the cage must be removed, that women should fight for their rights. Both the narrator and the woman in the wallpaper worked together to tear the wallpaper down; a possible interpretation of this is that women have to work together and support each other in order to reach the goal of having equal rights for all women. Another point that supports this idea is the fact that neither the narrator nor the woman in the wallpaper have a name, thus emphasizing that oppression is not a problem of an individual woman, but a problem with which women in general are faced.

Next, it is not only the wallpaper and the literal bars on the windows of her room that are symbols of oppression, there is also the wallpaper's smell that she can smell everywhere she goes and the yellow marks the wallpaper leaves on everything that touches it. The oppression of women is so systematic that even if they manage to get out of their “cage”, society expects women to behave under strict rules. A
“cage” for women could have been their home, where traditional patriarchal values were most pronounced, or a social gathering where they had to be presentable and not express their true opinions. The narrator says the wallpaper’s smell is in her hair, meaning that oppression is so overarching that she is not free even when she is all by herself.

The problem is that even after the narrator tears the wallpaper down, she is still not free. As Ford put it, „..she is tied up, locked in a room, creeping on all fours.“ (Ford, 313). Furthermore, when the woman in the wallpaper creeps around the garden, she hides when someone comes; she might be free, but society’s traditional view of women is still very restrictive. It might be a pessimistic view on feminist struggles; even if women get rights, they will still have to face people who might not agree with women’s freedom, much like the narrator’s husband who cares about her, but does not really listen to her. He ignores her wishes, which results with her having a nervous breakdown at the end of the story. It does not necessarily mean that her husband is a bad person, but his behaviour is a product of patriarchal society.

4. An intimate portrait: Sylvia Plath’s *The Bell Jar*

Sylvia Plath wrote her only novel, *The Bell Jar*, in the early 1960-ies, and because of its semi-autobiographical nature, she published it in the United Kingdom under the pseudonym Victoria Lucas. She committed suicide shortly after it was published. It was only years after her death, in 1971, that the novel was published in the USA under her real name. 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. The novel is groundbreaking because of the open way Plath described women’s experience of young adulthood and mental illness.

4.1. Comparing The Bell Jar with The Yellow Wallpaper

This section of the essay will be focused on the comparison of the theme of mental illness in The Yellow Wallpaper and The Bell Jar. There are many similarities: for instance, they are both white, middle class women (even though Esther says she is too poor to buy a magazine, her family is probably lower middle class) and have a family that at least partially wants to help them get over their illness; Esther’s mother took her to a doctor and came to visit her in the asylum, and the narrator’s husband rented a house for her to rest in. Furthermore, John is similar to Buddy Willard because they both do not want their partner to write; John did not allow his wife to write because he thought it was bad for her health, while Buddy thought Esther naturally would not want to write anymore when she had children. There is a big difference here because John does it out of concern and ignorance, while Buddy is just perpetuating prejudice against women. Another similarity is the fact that both women are writers and thus their experiences of mental illness are even more alike. In the onset of their illness they both wanted to write, but when the illness took over, neither of them could find the strength to write; “We have been here two weeks, and I haven't felt like writing before, since that first day.” (Gilman, 1892), and Esther said she “...couldn’t read or write or swallow very well...” (Plath, 142) the first time she met Doctor Gordon. Even though they did not suffer from the exact same illness (one suffers from postpartum depression and the other is possibly clinically depressed), the reaction they got from their loved ones was rather similar – they were afraid and
did not know what to do because they did not understand the nature of their illness. Furthermore, their lack of knowledge possibly contributed to the progression of their illness into something even more serious. This is symptomatic of the society these works emerged from and it implies how difficult it was for mentally ill people to recover because the general public knew almost nothing about the nature of their illness.

There are many differences between these works due to the fact that they were written about 60 years apart, which is probably why Plath was more open and thorough when discussing the way Esther felt because of her illness (although this may be attributed to the fact that *The Bell Jar* is a novel, as opposed to *The Yellow Wallpaper* being a short story). Furthermore, the treatment the protagonists received was different; one was treated at home through a rest cure, while the other spent some time in an asylum, was treated by psychologists and received electroshock therapy. This makes an important difference in their experience with illness, thus making it difficult to compare. Besides the new treatments for mental illness, not much had changed in the perception of mental illness from the late 1800s to the middle of the 20th century.

To conclude, both works are immensely important for women’s discourse; indeed if it were not for *The Yellow Wallpaper*, *The Bell Jar* might not have been written (or it would at least be written much later) and both works were particularly significant for the era in which they were written. Furthermore, both works inspired many other female writers and provoked them to write about diverse themes from the female perspective. Nonetheless, Plath’s account of the events preceding her hospitalisation and her time in the asylum has proven to be more accessible to young women in the
second half of the 20th century and today, making it perhaps even more influential than *The Yellow Wallpaper* which influenced Plath.

4.2. Social expectations and women

The biggest and most obvious obstacles Esther has in achieving her goals (besides mental illness), are society's expectations of what a woman should do with her life. Even though she is a young, intelligent woman with a seemingly bright future, she is torn between conforming to women's traditional role in society, and living the way she wants to. As any other young adult, she is confused about what she wants to do and what she is supposed to do. It seems like she had a rather good idea about what she would like to do in life, but was not confident enough to go through with it because she was crushed under the weight of society's demands and expectations of her. She was disillusioned by the society that surrounded her, mostly because she mainly knew women who were housewives, and surprisingly, she didn't seem to be very inspired by the few career – oriented women she knew. For example, there was the magazine's editor, Jay Cee, a woman who was very successful at a job similar to what Esther wanted to do. Jay Cee recognized Esther's potential and wanted to help her accomplish her goals, but Esther seemed reluctant and too confused to accept her help. Another example is Philomena Guinea, a famous writer who paid for Esther's stay at the private psychiatric clinic. Instead of trying to learn as much as she can from her, Esther seems not to care about it. Of course, this should be attributed to her illness, because she herself says: „I knew I should be grateful to Mrs. Guinea, only I couldn't feel a thing. If Mrs. Guinea had given me a ticket to Europe, or a round-the-world cruise, it wouldn't have made one scrap of difference to
me, because wherever I sat [...] I would be sitting under the same glass bell jar, stewing in my own sour air." (Plath, 195). The glass bell jar symbol is quite fitting because it implies that it is see-through; the person in it can see the outside world, it almost seems like they are free, but the minute they try to do something outside the bounds of the bell jar, they are met with resistance. It is a perfect symbol of gender oppression because it sometimes seems as if women are free, equal to men (the bell jar is made out of glass), but the oppression is still there, keeping women in their assigned place.

Even though there are inspiring, independent women in her life, Esther is still disillusioned and disappointed about what she can do in life. There might be a few reasons for that. First, the people who are the closest to her do not support her dreams of becoming a writer. Her mother tried to convince her multiple times to learn shorthand, although this could be interpreted as a motherly wish for her daughter to have a practical skill in order to get a job more easily. Esther doesn't seem to think so; it appears to her that her mother wants her to work a menial job, typical for women at the time, which is certainly not something Esther wants to do. Another person who is opposed to Esther's career as a writer is her boyfriend Buddy Willard, who doesn't understand poetry and, typically of a male person in the fifties, doesn't take her wishes seriously. Even though she wants "something more" out of her life other than marriage and children, the fifties' mentality that women cannot have careers is so deeply embedded in her mind, that she was surprised to meet Doctor Nolan when she entered the psychiatric clinic; "I was surprised to have a woman. I didn't think they had woman psychiatrists." (Plath, 196). In my opinion, Doctor Nolan is one of the rare characters that actually give Esther hope that things could get
better, concerning either mental illness or career options, which will be further discussed in the next section of this essay.

Next, the choice between marriage and a career is an important theme Plath discusses in the novel. This choice is represented through the motif of the fig tree: the figs represent different options between which she cannot choose, because if she chooses one, she cannot have any of the others, "...and, as I sat there, unable to decide, the figs began to wrinkle and go black, and, one by one, they plopped to the ground at my feet." (Plath, 81). Unable to pick the fig she wants, all options are out of her reach, which leads to even more problems, namely, mental illness.

Esther constantly mentions marriage and society's pressure about the importance of marriage for a girl. There are numerous instances where she criticizes marriage and she imagines it as cleaning and cooking all day long. At the time women had to choose only one option, it was impossible for them to have both a family and a career. Moreover, it was expected from women to be quiet and obedient to their husbands, and Plath expressed it brilliantly in the following: "...what he secretly wanted when the wedding service ended was for her to flatten out underneath his feet like Mrs. Willard's kitchen mat." (Plath, 89). It is easy to understand how hard it was for an intelligent and talented young woman as Esther to fully live up to her potential in a patriarchal society. Esther aspires to lead a life full of opportunities, she wants to be able to make all the choices men are presented with, not only marriage and children; "The last thing I wanted was infinite security and to be the place an arrow shoots off from. I wanted change and excitement and to shoot off in all directions myself, like the coloured arrows from a Fourth of July rocket." (Plath, 88). Patriarchy's expectations of young women were indubitably oppressive to her, because there seemed to be no other options. She was exposed only to
examples of motherhood and virginity, be it among the people she knew or in the media, for example from the article about chastity. Plath here expressed the feelings of many young women and pinpointed society's poisonous effect on them.

4.3. Esther's illness

Esther's mental health problems began while she was an intern in New York City, but her health drastically deteriorated during the summer she spent at home after her internship. After not being accepted to a summer school programme, she started thinking about her future intensly and realised she had few options. The grim truth that, as a woman in the 1950ies, she had a limited array of choices, led to her downfall. When her mother realised Esther suddenly had poor personal hygiene, a clear sign of a mental illness, she took her to Doctor Gordon, a psychiatrist. Esther and her doctor did not establish a trusting relationship, so her health steadily deteriorated after meeting him. She was growing more and more suicidal and was obsessed with examples of suicide in the media. First, there was an article about a person who attempted suicide but was saved. Esther read it and peered at the photograph of the man: "I felt he had something important to tell me, and whatever it was might just be written on his face." (Plath, 144), thinking about how many storeys would be high enough to die if she jumped off them. Second, a Japanese tree reminds her about hara-kiri, a form of Japanese ritual suicide, and concludes that they must be very brave to die like that because she could not stand the sight of blood. Third, she sees a newspaper article about a famous woman who died and compares the picture in the article with a photo of her. What she sees are two women who look exactly alike, implying that she was at such a low point as to identify herself
with a dead person. In my opinion, these examples show how honest and brave Plath was when she wrote the novel. Even though the passage about her comparing the pictures may not seem as important as other ones, here the reader learns that passive and apathetic Esther deems herself already dead.

Next, her obsession with news about death can be compared with Joan's obsession with her. As soon as Joan came into the hospital Esther was in, she told her about her obsession with Esther and showed her the articles about her disappearance. Joan religiously collected news about her, partially because she had met Esther before, but also because she was suicidal herself. When Esther saw those articles, she read them and looked at the pictures with the same distance she looked at the pictures in the other articles, as if she was distanced from herself and her body. This distance from her body also appears after her third suicide attempt, „Then I saw that my body had all sorts of little tricks, such as making my hands go limp at the crucial second, which would save it, time and again, whereas if I had the whole say, I would be dead in a flash. I would simply have to ambush it...“ (Plath, 167). She is talking about her body as if it was not hers, as if it was separated from her identity and something that was fighting against her.

In addition to the examples I listed above, suicide is also prominent in the novel in Esther's attempted suicides. After her first electroshock treatment she was in the worst state thus far, so she wanted to kill herself by slitting her veins, but gathering up her courage took too long and she was afraid her mother would find her before she died. Here she states that what she wants to kill is not in her body but something she is unable to pinpoint: „It was as if what I wanted to kill wasn't in that skin or the thin blue pulse that jumped under my thumb, but somewhere else, deeper, more secret, a whole lot harder to get at.“ (Plath, 156). Next, she wanted to drown herself but the
water was too cold, so she gave up. After trying to hang herself, she went to the beach with some acquaintances and asked a boy how he would kill himself, which is another example of how obsessed she was with death, at that point she did not even hide it. While she was swimming, she tried drowning herself but her body kept floating up so she gave up. Soon after that, she visited her father's grave and made a plan to take all of her sleeping pills. Her mother could not find her for days after she took the pills, but when she finally did, Esther was hospitalized.

4.4. Esther's relationship with doctors

From the moment Esther met Doctor Gordon, she did not like him. She did not think he could help her because he had a nice family and his life seemed perfect on the outside. After this first impression that may seem groundless, she realized his way of treating her was not helpful, because he acted as though she invented her problems; "What did I think was wrong? That made it sound as if nothing was really wrong, I only thought it was wrong." (Plath, 137). This quote is an example of how poorly mentally ill people were treated in the middle of the 20th century; they were not given the proper care they needed to get better. Moreover, this kind of language probably stopped people from opening up to their psychiatrists, because they, like Esther, did not think their problem was taken seriously. Even after she told him her problems with reading and writing, it seemed to her that he was unimpressed, as if he was not actually listening to her nor valuating her feelings. Another possible theory is that he did not take her seriously because she was a young woman and as such, he deemed her fickle and moody. Without giving Esther proper help first, Doctor Gordon arranged an electroshock treatment for her. The asylum seemed like any other building and Esther was surprised that there were no bars on the windows.
that she saw, but then she realized that none of the patients in it were moving. That was the first disquieting scene from the asylum and she could not even ask Doctor Gordon about the shock treatment because she went dumb. Unfortunately, Doctor Gordon did not think it was necessary to inform her about the treatment. The shock treatment was not performed properly and she was left feeling subdued, dumb and unable to concentrate. Obviously, Doctor Gordon was a bad doctor and his character can be compared with the other bad men in Esther's life; like Buddy Willard, who did not take her seriously and who let her down because he was being dishonest with her (Doctor Gordon's sessions), or Marco, the violent man who assaulted her (the electroshock treatment).

As Doctor Gordon's antithesis stands Doctor Nolan, Esther's second psychiatrist. Doctor Nolan was a young woman, thus she was less threatening than Doctor Gordon, but that is not the only reason why Esther liked her, mainly it was because she actually listened to her with understanding. Doctor Nolan was kind, knowledgable and proficient, like a psychiatrist should be. Just like the doctors' characters are each other's opposites, so are the electroshocks they performed. Doctor Gordon's electroshock was not done correctly and it left Esther feeling numb and scared, while Doctor Nolan performed the electroshock correctly and, after Esther's fear subsided, she felt at peace. Plath pointed out that the procedure had a bad reputation as a result of not properly done shock treatments, and that there is a way of helping mental patients, but it can never be done quickly and without patience. Doctors need to have a lot of understanding and they need to dedicate their care to their patients like Doctor Nolan did, which is why Esther's mental health improved so much by the end of the novel.
Unfortunately, society's view of mental illness was not as open as Doctor Nolan's. Even Esther's mother thought Esther could decide not to be ill anymore, and she deemed mental patients as “awful people”. (Plath, 154) Surely, her mother wanted the best for her daughter, but this opinion proves how badly people were informed about mental illness, because even the doctors could not explain their patients that people could not simply choose to get well. After Esther’s suicide attempt, the nurses in the hospital judged her; „At you-know-where they'll take care of her!“ (Plath, 184), which shows how even medical professionals were not capable of having any compassion. Furthermore, many patients had a lack of consideration for other patients, for example the woman in the bed next to Esther's who ignored her and pulled the curtain between them after she said she tried to kill herself. It is possible that those people were so ashamed of themselves and their illness that they projected their self-hatred onto others because they were taught that their illness was disgraceful. Despite many bad people, there were some nurses who were reasonable, for example the one who joked with Esther before she gave her a shot, or the nurse who talked to Esther and Joan and told them how bad the state of other wards was because they had „Not enough em-ploy-ees.“ (Plath, 220). Plath touched upon the subject of understaffed asylums with thusly diminished quality of service, which was a problem for many asylums throughout the century.

5. Social justice: Marge Piercy's Woman on the Edge of Time

Marge Piercy is a prolific writer whose works range from poetry to plays. One of her most popular novels is Woman on the Edge of Time, published in 1976, in which she gives a critique of modern society and its issues through the main character
Connie Ramos and the city Mattapoisett set in the future. The removal from present time allowed her to express her concerns with modern society more subtly but still very precisely.

One of the main themes of this novel is society, a comparison between the real world in the 1970s and a utopia-like city 200 years in the future. The novel is set in New York City where Connie Ramos lives and where she is a patient in an asylum, but the setting interchanges when she travels to the future to the city of Mattapoisett. Connie is a middle aged woman of Mexican heritage who is on welfare, and she ended up in an asylum for the second time when she tried to defend her niece, Dolly, from her niece’s pimp Geraldo. He takes Connie to a hospital and tells the doctors that Connie attacked both him and Dolly, thus she is forced to spend an unknown number of days tied to a bed. Right at the beginning of the novel the reader learns how difficult Connie’s life is; she is unemployed, her child was taken away from her, her lover who pick-pocketed died and her niece is a pregnant prostitute and there is nothing she can do about it. The oppressive American society is mirrored in the asylum, where doctors and nurses decide what happens to the patients without listening to their needs, especially when renowned doctors conducting an experiment are involved. When Geraldo took her to the asylum, the doctor only talked to Geraldo, not even giving Connie a chance to speak for herself. Furthermore, she is severely hurt and no one examined her; “So far no one had heard a word she said, which of course was not unusual.” (Piercy, 9). There are many examples of how badly the patients were treated by the staff: the nurses took complaining as a sign of illness, a nurse refused to give aspirin to a patient with a headache, the patients were not allowed to have occupational therapy, et cetera. No matter how bad society was, Connie says that even the most miserable people are
happier than the luckiest people in an asylum are, that is how bad it was to be a patient in a mental institution.

On the other hand, the future utopian society in the novel is completely different from present society. When Connie first travels to Mattapoissett with Luciente, she finds “...an idealised vision that clearly grows out of a number of political movements in Ramos’s (and Piercy’s) own time, including feminism, socialism and environmentalism.” (Booker, 340). At first, Connie does not think of this society as a utopia, what is more, she deems this society to be immoral. There are a number of reasons why she thinks this.

First, there are no “men” and “women”, those roles are not strictly separated. When she first saw Luciente, she thought she was a man and was very surprised to find out that she is, in fact, a woman. Piercy created a society in which it is not important whether you are male or female, because gender roles do not exist anymore. Sexes as such exist, but they are not gender restricted. In this society, everybody can be a mother and breastfeed; it is no longer only a female “privilege”, and Connie finds this appalling. She thinks that in this society women are stripped of the one thing which is truly only theirs. Luciente does not agree, she finds this amazing and thinks it promotes equality. In addition, women can also be warriors and do physical work in Mattapoissett; it is a society which promotes equality and equal opportunities for everyone and everybody can choose what they want to be.

Furthermore, Robin Silbergleid argues that “…the insignificance of the sex-gender system in Piercy’s utopia is also manifested in Mattapoissett’s gender-neutral language, which uses "per" in place of both "him" and "her."” (Silbergleid, 166). This is another way of pointing out the equality in Mattapoissett, and perhaps the author
wanted to point out how our language is gender-restricted, and how free the society in Mattapoisett is if they have no need for gender-restricted language. This could also be interpreted as a critique of transphobia, because people in Mattapoisett are androgynous and have both male and female characteristics and do things that are generally considered “male” and “female”. It suggests that gender is essentially unimportant, and people should not be judged upon their gender, or have restricted choices because of it. In Mattapoisett, women are no longer responsible for giving birth, babies are made in test tubes and have more than two parents and that is what Connie finds awful and unnatural.

Next, socialism is visible in the fact that everybody participates and works for the community. By working for the community, everybody is equal and has equal opportunities, which is the basic idea of socialism. They all take care of the children and do many jobs, genders are not an issue anymore and there are no poor or rich people, so a balance is achieved.

Then, this new society is very aware of the environment and our impact on it, so they take care of it. They recycle absolutely everything, material possessions are not important to them, thus they recycle even their clothes. Another point is that industry dictates the world in Connie’s time, but in Mattapoisett it is different. Keith Booker says: “Acknowledging that technology has been a central tool through which the white male power structure has perpetuated its power, ...would suggest that those opposed to this power structure should reject technology altogether and attempt to escape its clutches by moving back to nature.” (Booker, 343). But Mattapoisett does not reject technology, in fact, they still use it a lot, but now they know how to properly use it, that is, without oppressing their workers, creating a gap between the rich and the poor and without poisoning the environment.
Similar to the difference between the two worlds is the difference between the way people in New York and people in Mattapoisett treated Connie. While Dolly loves her aunt, she seems to mainly think about herself and her romantic interest. It could be argued that Dolly behaves this way because of her drug abuse and because of her own problems, but still she is partially at fault for consigning Connie to an asylum. Next, Geraldo is the “villain” of the novel, he has no positive side to him and all he does is manipulate and abuse women, so it comes as no surprise that he blames his bad deeds on Connie, thus putting her in a mental institution. People around Connie do not care about her, they treat her as a lost cause or they think she is mentally unstable and belongs in an asylum. Contrarily, Luciente treats her as a human being and a valuable friend; she wants to help her and sees her true self, beyond what society sees. On the other hand, Connie mentions that she hallucinates a couple of times throughout the novel, making it probable that Luciente and Mattapoisett are a figment of her imagination, a loud cry for help from her devastating reality.

Connie is different from The Yellow Wallpaper’s narrator and Esther because she is not white and she is lower class, which is why she is faced with even more prejudice. Next, Connie suffers from schizophrenia, while the other two protagonists suffer from different kinds of depression. Connie has no loved ones who care about her and want her to get better like Esther and the narrator have; Connie’s family wants to leave her in the asylum so that they would not have to take care of her. Because of the lack of support Connie received, it was even harder for her to cope with her illness. Despite their outward differences, doctors more or less treated them the same. When a doctor examines Connie, he says: “Where do you believe you feel pain?” (Piercy, 20), just like Doctor Gordon asks Esther what she believes is the problem, which further emphasizes the problem of the poor quality of help mental
patients received, or maybe even receive today. In both novels there are bad and at least one good nurse; Connie gets along with a nurse who talks to her like an actual person and gives her extra cigarettes if Connie helps her out by sweeping the floor, and there is one nurse who jokes with Esther. These characters, along with their friends in the asylum like Sybil (Connie) and Joan (Esther), are the only positive people they meet in the asylum. It seems like both novels imply that it is important to make friends in the asylum, because it is probably the only comfort patients can get (except for Doctor Nolan who was extremely helpful in Esther’s case). In *The Yellow Wallpaper*, the narrator’s only friend is her husband, who is also her “enemy” because he is her doctor and he does not take her illness seriously. *The Yellow Wallpaper*’s narrator and Connie are similar in at least one thing, and that is hallucination. The narrator sees a woman who is trapped and who she has to free, while Connie envisions a new world and people who will “save” her. The difference in these hallucinations is that one is determined to save herself and all women, while the other has been beaten down so many times that she just wants to be saved. Although, it can be argued that Connie still has strength to fight for herself because she runs away from the asylum and at the end kills four doctors. This urge to free herself and kill those who stand in her way is quite similar to Esther’s wish to end her life (also because neither of their plans was completely successful) and, even though their goals were different, they are all a result of illness.
6. Conclusion

Charlotte Perkins Gilman lived at the time when women became more aware of inequality and started making some changes. She was among the women who introduced change in literature, speaking out about their unenviable position. For her, it was more important to speak out about inequality, while for Plath, sixty years later, it was also important to write about mental illness. They were both white, middle class women, but society’s pressure basically made them ill. The characters in their works were badly treated both by society and doctors. On the other hand, Marge Piercy introduced a character that was a Latina, lower class and mentally ill. Connie Ramos had an even more difficult time going through life in New York City, but also in the asylum. Regardless of their differences, all three works achieved their goals of satisfactorily describing women’s experience of life both outside and inside the asylum.
Bibliography


