

**Mental Illness in Literature:
Case Studies of Sylvia Plath and Charlotte Perkins Gillman**

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Bio:

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Abstract:

This study examines mental illness in literature, with a focus on Charlotte Perkins Gilman's "The Yellow Wallpaper" and Sylvia Plath's *The Bell Jar*, the primary texts of the research, and develops similarities and personal connections between the authors and their mentally unstable main characters. The study investigates the biographical aspects and mental health of the deceased women and thoroughly analyzes the time period of each author to demonstrate whether or not social status disparities could have been a reason for their deteriorating mental health. Both women committed suicide, though their literary accomplishments and societal effects allow them to live on.

Biographical Aspects

Gilman

Charlotte Anna Perkins was born on July 3rd, 1860, in Hartford, Connecticut (Bauer 29). She had a fairly normal childhood, and at the young age of twenty-one, she met Walter Stetson. In 1884, after two years of courtship, the couple married, and in the spring of 1885, Gilman gave birth to her first and only child. Rather quickly after “her daughter Katharine’s birth, Charlotte began to experience episodes of depression” (Bauer 31). It seemed her depression was triggered by “the narrow confines of married life and motherhood” (Bauer 31). It was difficult for Gilman to balance the needs of both her husband and child. Her own scholarly aspirations were put on hold because of the expected womanly tasks she was to complete, and “like many other women of the era, [Gilman] longed for greater intellectual and creative fulfillment” (Bauer 31). Her husband did not find this justifiable and “insisted on a more traditional marriage” (Bauer 31). As a result, Gilman became “increasingly despondent” (“Bed Rest” 4). Her writing and creative outlet soon became blocked by the confinement of her family life.

Unable to handle the burden of both her depression and a family, Gilman explained that “[f]inally, in the fall of ’87, in a moment of clear vision, we agreed to separate, to get a divorce” (“Undergoing” 871). Unlike most separations, Gilman goes on to clarify that:

[t]here was no quarrel, no blame for either one, never an unkind word between us, [...]—
but it seemed plain that if I went crazy, it would do my husband no good, and be a deadly
injury to my child. (“Undergoing” 871)

Although it was rather difficult for Gilman to leave her family, she states that “[i]t was not a choice between going and staying, but between going, sane, and staying, insane. [...] [B]etter for that dear child to have separated parents than a lunatic mother” (“Undergoing” 871).

It is quite obvious that Gilman made her final decision for the overall betterment of her family. She decided she would rather come off looking like a poor wife and mother by separating herself than actually acting out in madness from her built up feelings of entrapment.

In the years following the publication of her famous story and the separation from her husband, “Charlotte enjoyed great professional success and personal happiness” (“Bed Rest” 5). In 1900, she married her cousin, George Houghton Gilman, and her social status was also a reason for the happiness in her life. She was becoming a “well-known author and was invited to speak regularly on the subject of women’s rights and economic independence” (“Bed Rest” 5). Not only was she a noteworthy spokesperson, but she also composed a variety of “influential writings—several books, essays, poems, a novel, and *The Forerunner*, a magazine of her work published from 1909-16” (“Bed Rest” 5). Her intellectual accomplishments and successful marriage were almost a cure in themselves for her once dreadful depression.

Apart from Gilman’s well-known literary accomplishments, Gilman was also renowned for her unordinary perspective on the concept of death. Gilman’s views on dying were definitely ahead of her time and

[b]y observing the dying of loved ones, experimenting with chloroform as early as age seventeen, writing throughout her life [about] such controversial topics as assisted suicide and cremation, and showing little patience with those who feared death, Gilman was well prepared to die. (Knight 139)

She and others described her view of death as having “a considerable amount of detachment” (Knight 139). Gilman dealt with many deaths in her family as well as the passing of a few friends. She handled death less like a tragic occurrence and more so with the understanding that it is a normal course all are expected to take in their lives.

Gilman saw the painfulness of death as often unnecessary. Her mother died from cancer in 1893, and “as Gilman watched at her mother’s bedside, she whispered to her friend, [...] ‘If this should come to me in future years, I will not go through with it. It is needless’” (Knight 150). Gilman felt neither “ambivalence nor anxiety” towards the concept of death, and “in her estimation,” death was not an event worthy of any type of sentimental mentality. Gilman was quite sure in her belief

that there was no afterlife, and although she tolerated the views of those who thought that death would lead to eternal reconciliation with loved ones, she personally rejected that belief as a socially constructed myth designed to console those who were anxious about death and dying. (139)

She was rather comfortable with dying, understanding that it is a normal process in life—not one to fear. She only endured optimistic aspirations regarding the afterlife in order to prevent coming off as cold-hearted.

Because of her calm mind state towards death, her methods for planning her own came rather easily. Other than the premeditated

actions in ending her own life, the other true test of her convictions came upon the death of her second husband, Houghton Gilman, to whom she was married for thirty-four years, who died suddenly on May 4, 1934, at age sixty-six from a cerebral hemorrhage. (Knight 151)

Gilman was often seen as a “pragmatist, who despised needless suffering,” and so, she viewed her husband’s death as “a very good way to go” (Knight 151). She was upset about her husband passing, but Gilman strongly believed that “[t]here was no point [...] in either spilling tears or wallowing in self-pity. Instead, she began to prepare for her own death” (Knight 151). She was

definitely a realist in her era, for she fully comprehended that death was inevitable and did not allow its gradual approach to get in the way of her potential literary or social activities and success. She was able to move on rather quickly after the loss of loved ones because of her well-developed, realistic mind set.

Similar to that of her mother, Gilman was diagnosed with incurable breast cancer in 1932. Instead of wallowing in sorrow over her diagnosis, she utilized “the time she had remaining [and] planned to be as productive as possible” (Knight 152-153). Not to kill any time, shortly after Houghton’s death, “Gilman relocated to Pasadena to spend her remaining time near her daughter and grandchildren” (Knight 152-153). Knowing that her family did not necessarily share her feelings and opinions towards death, “[s]he waited several months...to break the news of her terminal illness to her daughter” (Knight 152-153). While waiting for the right moment to share her diagnosis, “she simultaneously prepared for her death and continued to live as normal a life as her disease would allow” (Knight 152-153). She enjoyed the remainder of her life with her family, who all eventually felt her plans to end her own life were permissible.

Plath

Sylvia Plath, a truly gifted poet, had a moderately ordinary childhood. Plath “was born [in Massachusetts] by normal delivery in 1932.” When Plath was eight, Otto (her father) “developed gangrene in one foot after minor trauma and was found to have late stage untreated diabetes mellitus” (Cooper 4). Because his diabetes had gone so long without being treated, his “leg was amputated but three weeks later” (Cooper 4). Somewhat unexpectedly, “while still in the hospital, he suffered a pulmonary embolism and died” (Cooper 4). This was rather traumatic for Plath and her mother. No signs of mental illness were developed in young Plath at that age or her mother at the loss of her husband. Apart from Plath’s mental illness later developed in her

life, “neither he [Otto] nor his wife [Aurelia] had any record of psychiatric history” (Cooper 3). Perhaps Otto’s tragic and unexpected death at such a young age for Plath had some sort of a belated effect on her mental health.

Though quite charming, Plath was a rather peculiar adolescent. Her personality was often seen as “premorbid,” for it demonstrated a

constant dissonance between bright, buoyant, high achievement persona whose ideals of success, social status and domesticity are conveyed in the letters to her mother, and the dark sense of isolation and inner emptiness that finds expression in her journals and poems. (Cooper 5)

She often revealed extreme pessimism in her personal writings. Plath dealt with severe “emotional instability which Sylvia herself called ‘ricochets’ and others thought of as her mood swings” (Cooper 6). One insignificant occurrence would likely trigger an extreme alteration in her mood, often coming as a surprise to those around her. It was hard for those close to Plath to truly understand her reasoning, but Plath was one to

impulsively expose herself to physical harm, gashing her legs [, Plath once said,] see if I had the guts [and ...] in the words of an old college friend, [Plath was] ...driven periodically to stage a symbolic salvation... almost as though only by being snatched from the brink of death could she confirm her worth. (Cooper 6)

It seemed that Plath could only feel alive when she brought herself so close to death. The concept of death gradually developed a curiosity within her which she wished to further explore.

Even though Plath had challenging psychological problems, they did not get in her way of becoming an excellent scholar. In her academic career, Plath was “a consistently high achiever, conformist, joiner and prizewinner” (Cooper 4). She was quite an intellectual, for she

“began publishing poems and stories at a young age” (Kukil, Introduction 1). Plath graduated from high school with all As, “won a scholarship to college, where she graduated *summa cum laude*, and at the age of 23 was awarded a Fulbright scholarship to Cambridge, England” (Cooper 4-5). Her academics meant much to her and any scholarly failure she experienced was truly devastating for Plath.

Once at Cambridge, Plath met the mysterious dark Ted Hughes at a party in 1956. He was twenty-five, and she was twenty-three. She was strikingly “bright, pretty and vivacious,” catching his eye rather swiftly. Both Plath and Hughes were “aspiring poets,” which built a strong connection between them from the start. Though they formed a true romantic bond, “Plath’s gleaming American smile hid dark, ravenous appetites—for food, for fame, for love, for sex” (Grossman 2). Plath kept this hidden darkness from her lover as well as other close friends. She “also hid gulfs of despair; [for] three years earlier, she had attempted suicide” (Grossman 2). But Hughes intrigued Plath, and their adoration for one another was unstoppable. Plath was able to look away from her troubling psychological past and developed high hopes for her future plans with the aspirant poet, Hughes. They got married only four months after meeting.

The couple lived in London during the beginning of their marriage, but after Plath received a job offer to teach at Smith College, the young couple moved to the states (Kukil, Introduction 1). Not too long after Plath and Hughes said their vows, their relationship began to “burn fast and hot” (Grossman 2). They had much in common literarily, for they were “two obsessive, competitive writers who read and critiqued each other’s work fresh from the typewriter” (Grossman 2). This was slightly intimidating for Plath because Hughes had much success as a writer prior to meeting her. He often put a great deal of pressure on her to write

something epic and powerful, yet once she had their two children, it became a challenge to continue writing.

Later on in their marriage, they moved back to England. Plath was able to write a few poems and composed her striking novel, *The Bell Jar* (Kukil, Introduction 1). Sadly, yet not surprisingly, “the intensity [of their relationship] turned claustrophobic for Hughes. He began an affair with another woman, and the couple separated” (Grossman 2). This was quite traumatic for Plath, for she was left to take care of herself and her two young ones all alone. Hughes rarely came around because he had begun a fairly serious relationship with his mistress.

Hughes’ influence on Plath, hurting her emotionally the way he did, perhaps “exacerbated or merely failed to stem the self-destructive urges that finished her. [...] Plath was finally consumed by the dark star she orbited [but in her] death she eclipsed him” (Grossman 2). She “eclipsed” him in her ability to live on through her writing. He may have held control over her in her life, but she is freed in her death and literary accomplishments that continue to flourish even today. After Plath’s suicide,

the public subsequently appropriated the gravestone in Heptonstall cemetery, [in] Hebdenbridge, West Yorkshire, obliterating “Hughes” from the estate-inscribed name of “Sylvia Plath Hughes” several times. In this way, control over the remains of Plath was in some way taken from Ted Hughes. (Boyer 221-222)

Many believe the removal to have been done by *Bell Jar* fans, for they truly knew the negative effects Ted Hughes had on Sylvia Plath. The fans knew that Plath would rest in peace more calmly with her own name on the tombstone, rather than that of the selfish and egotistical man who likely drew her to her suicide.

Gilman

During the summer of 1882, Gilman suffered her first bout with depression (Bauer 31). Gilman's developing depression, "exacerbated by both a severe case of post-partum syndrome and the subjugation of her desire to work" also led to suicidal impulses (Knight 144). Gilman described her depression as "a worse horror than before, for now I saw the stark fact—that I was well while away and sick while at home—a heartening prospect! Soon ensued the same utter prostration, the unbearable inner misery, the ceaseless tears" (Undergoing 871). In the fall of 1885, she recuperated from "hysteria" and depression. Although beginning to recover, further treatment was given in 1886 when she was treated for neurasthenia. In 1887, she was considered cured by the hyped rest cure treatment and began to write and publish (Bauer 31-32).

Gilman had agreed to undergo the hypothetically advanced and effective rest cure treatment to cure her of her agonizing depression. Unfortunately, her well-documented treatment for neurasthenia at Dr. Silas Weir Mitchell's Philadelphia sanitarium in the spring of 1887 did little to ease her suffering; on the contrary, the "rest cure," which required prolonged bed rest, a high fat-diet, and a prohibition against most forms of intellectual activity, triggered a nervous breakdown soon after her release. (Knight 144)

The supposed cure was far from successful for Gilman. Her breakdown led to several suicidal tendencies and thoughts.

The threats of suicide that Gilman made were awfully worrisome to her husband at the time, Walter Stetson. His journal entry on June 30, 1887, was written shortly after Gilman completed the rest cure treatment, describing her suicidal tendencies and threats: "When I got home Charlotte was in the depths of melancholia again, with talk of pistols and chloroform"

(Stetson qtd. in Knight 144). Oddly enough, Gilman's "contemplation of suicide drew on the familiar: [...] chloroform was a compound with which Gilman had already experimented and the one she would use some fifty years later to end her own life" (144). It was almost as if she was giving the chemical a few test runs through various experiments, in order to determine its true effectiveness.

Lamentably, it was Gilman's time to go, for the seventy-five-year-old...had suffered from breast cancer for three years, was growing increasingly weak, and had recently lost her husband of thirty-four years. On the evening of August 17, 1935, [as somewhat premeditated for years,] she calmly inhaled a lethal dose of chloroform and died peacefully in her Pasadena, California, bungalow. (Knight 138)

Though this description of Gilman's suicide is "factually accurate, this account fails to place Gilman's death in any type of context, other than as the inevitable end to a rather remarkable life" (Knight 138). As to no surprise,

when Gilman took her own life..., she cited the inability to continue work as partial justification for her suicide. "When all usefulness is over," she wrote in her suicidal note, "it is the simplest of human rights to choose a quick and easy death in place of a slow and horrible one." (Gilman qtd. in Knight 142)

She knew she was going to die but wanted to die in a painless way and knew that she had the courage within herself to follow through with such measures.

Many of those that were close to Gilman understood her reasoning to end her own life and gave their blessings in a sense. She received letters from her cousin, Lyman Beecher Stowe, "in which he responded to her announcement that she would soon end her suffering" (Knight 137). The letters between her and her cousin are rather "remarkable," for "[t]hey both eulogize

Gilman before her death and provide a loving and heartfelt goodbye” (Knight 137). Stowe understood and supported Gilman’s suicide plan: “I agree that you should not stay beyond your possibility of giving or receiving pleasure” (Stowe qtd. in Knight 137). This understanding undeniably “afforded reassurance if there was any doubt that her actions might be condemned or misconstrued” (Knight 137). The letters demonstrate true significance in that they “offer anecdotal evidence that Gilman’s legacy would likely continue after her death—a matter that weighed heavily on her mind in her final months” (Knight 137). It was a notable relief, though, for her to be given an adequate assurance of the marking she would leave on the world once she was gone.

Even Gilman’s physician, Dr. Edward Shelby, commiserated with her anguish and wrote to her speaking of her premeditated suicide saying, “I do not think it wrong[,] and I do not blame you for making such a decision or for carrying it out.” He also stated that he “‘regretted the law would not permit [him] to lend a hand’ when his patients requested help in ending their agony and reminded her that ‘only a brave heart can carry out such a plan’” (Shelby qtd. in Knight 155). Both her cousin’s and physician’s acceptance of her plan demonstrate its quite possibly true justification.

Plath

Plath began to develop mental illness at a younger age. At the age of twenty, “Plath experienced mild depressions while studying at Smith” (Beam 98). Being the intelligent girl she was, Plath made attempts to explore and come to understand her mental illness and the possible ways to cope with it. She was very familiar with Freud, and believed that she had penis envy and was suffering from schizophrenia. After becoming the winner of a “prestigious national contest” and while “working at *Mademoiselle [M]agazine* in New York, during June of 1953, she

suffered a rare career setback: she was denied admission to a Harvard summer writing seminar” (Beam 98). She returned home, overwhelmed by her failure. And as a result, she “inflict[ed] gashes on her legs and talk[ed] of suicide” (Cooper 4). She simply could not tolerate the academic failure and felt the need to punish herself.

After her talk of suicide and acts of self-harm, Plath was then:

referred to a psychiatrist and was started on electroconvulsive therapy (ECT), which seemingly convinced her that she was fated to become insane. [In an attempt at suicide, she hid] herself in a small space under the house porch [and] swallowed all of her sleeping pills, [laying] in a coma for two days until the family heard her groans. (Beam 98)

Had they not heard the sounds Plath was unconsciously making underneath the house, she would have surely died. This was quite difficult for them all to endure. After this tragic endeavor, “[h]er family and doctors concluded that her attempt went beyond the classic suicide ‘gesture’ and packed her off to McLean” (Beam 98). They all hoped her stay at McLean would rid her of her disturbing suicidal thoughts and tendencies.

After very little progress with Plath, Barnhouse, her psychiatric doctor at McLean, came up with a method to heal the mentally ill young woman. He “decided to gamble, and proposed electroshock therapy.” The suggestion of the treatment was terrifying—especially so to Plath, because she had “suffered through several painful and impersonally administered shock treatments before coming to McLean.” They were poorly administered, for she “received no anesthesia before the treatments, and, afterward, she was wheeled into an empty recovery room to cope alone with her trauma” (Beam 98). The “botched” treatments were performed so inadequately that Plath attempted suicide after the traumatic experience. Being aware of this,

“Barnhouse promised to stay with Plath during the therapy, and convinced her that this time the results would be different” (Beam 98). She tried to stay positive, having hope in her doctor as well as her own ability to bear the treatment.

Indeed the therapy results were different from the others she had experienced. Plath was given the “first of three shock treatments” in December, and they were quite successful. Plath “regained her personality and composure so rapidly that she was able to spend Christmas at home” (Beam 99). The treatments actually worked. She was “officially discharged [from McLean] in late January, and by February she was back at Smith” (Beam 99). In 1959, Plath recorded her thoughts about the treatments in her journal: “Why, after the ‘amazingly short’ three or so shock treatments did I rocket uphill? Why did I feel I needed to be punished, to punish myself[?]” (Plath qtd. in Beam 99). Oddly enough, “[n]either she nor Barnhouse could explain the miraculous turnabout” (Beam 99). The effects of the shock treatments in this case seemed to be a surprise to all involved.

In January of 1963, Plath spoke with her general practitioner, complaining to him about the depression she had begun to develop once again, and “for the first time told him of a serious suicidal attempt she had made ten years earlier.” Perhaps she wanted him to know of the severity of her condition. The current episode of depression, lack of self-worth and suicidal thoughts she came in for were

triggered by a marital crisis, combined with some lesser life events, and had developed over six or seven months, during which time her emotional state had been one first of rage and bitterness, then of a prolonged alternation between hopefulness and despondency. (Cooper 3)

For the majority of this dreadfully difficult time, Plath kept an active professional lifestyle, “writing daily, correcting proofs and recording poetry for the BBC” (Cooper 3). Though, once she consulted her physician, “her mood had deepened into a severe depression marked by constant agitation, suicidal thoughts and inability to cope with everyday life” (Cooper 3). In an attempt to cure her instability, “Dr. Horder prescribed an antidepressant (monoamine oxidase inhibitor), arranged to keep in daily contact and found a nurse to visit her daily at home” (Cooper 3). Her doctor tried to arrange for Plath to stay at the hospital, but instead organized a “psychiatric outpatient appointment” program for her (Cooper 3). Dr. Horder knew the process to improve Plath’s mental health would be a rather challenging one. And so, he began several measures to get her on the road to recovery.

To those around her, it appeared that she had not given up. However, on the morning of February 11, 1963, she ended her life. Plath set some bread and milk out in her children’s room. She then cracked their window and sealed their door off with tape. She went downstairs and, after sealing herself in the kitchen, knelt in front of the open oven and turned the gas on. Her body was discovered that morning by a nurse scheduled to visit and the construction worker who helped the nurse get into the house (Ames 264). She was only thirty years of age yet overwhelmed by the negative intensities of her life and mental illness.

Author-Character Mental Health Connections

Gilman

In order to let out some steam from the extreme frustration Gilman developed from the flawed rest cure treatments, she “dramatized her experience with Dr. Mitchell in ‘The Yellow Wallpaper’ (1892), a journalistic/clinical account of a woman’s gradual descent into madness at the hands of her husband[,] John, a doctor who subscribes to the Mitchell treatment” (Bak 39).

This is a “striking story of female confinement and escape, a paradigmatic tale which seems to tell *the* story that all literary women would tell if they could speak their ‘speechless woe’” (Gilbert and Gubar 868). The story demonstrates clear personal connections, for Gilman explains it herself as “a description of a case of nervous breakdown”—her own, only embellished (Gilbert and Gubar 868). She tells her own story through that of the narrator in her frightening tale.

Gilman’s fear-provoking story “recounts in the first person the experiences of a woman who is evidently suffering from a severe postpartum psychosis” (Gilbert and Gubar 868). This adequately parallels Gilman’s diagnosis. The narrator’s “husband, a censorious and paternalistic physician, is treating her according to methods by which S. Weir Mitchell, a famous ‘nerve specialist,’ treated Gilman herself for a similar problem” (Gilbert and Gubar 868). The lady in the story is driven mad, because she is not allowed to do anything intellectually stimulating. She is only allowed to rest. This is exactly what Gilman dealt with in her troubling situation with the rest cure. Gilman’s story thoroughly expresses the perception of submission through the narrator’s struggles.

Gilman was a literarily skilled woman and developed her character to have the same interests. The narrator speaks of hiding her writing from her husband, because he “hates to have [her] write a word” (“Yellow Wallpaper” 44). Any self-expression or talents are looked down upon. The story that Gilman so skillfully composes represents not only her personal encounter with the mistreatment of her depression but also the controlling characteristics present in her first marriage. Her first husband was very traditional and found Gilman’s intellectual endeavors to be a distraction from her true purpose in life—to be a wife and mother only. When she began to develop depression and hysteria, her husband quickly came to the unsupported conclusion that any creatively stimulating activities would only worsen her condition and kept her from doing

anything but resting. To escape the confinement she once endured, Gilman comes alive through the narrator in her famous story.

There have been many speculations established by various readers and literary critics regarding the connections made between Gilman and her narrator in “The Yellow Wallpaper.” The madness Gilman’s narrator encounters develops “through her struggle to authorize her own life’s text in light of her society’s attempt to ghostwrite it for her,” which “paradoxically frees as it destroys” (Bak 45). Though on the exterior “she is clinically insane, unable to ascertain why her husband should be floored by her aberrant behavior, internally she is, for the first time, devoid of that identity that her husband (and his patriarchal society) had inscribed upon her” (Bak 45). She can no longer perform the understood and expected tasks of a woman, for she has gone mad; therefore, a sense of freedom is established within her. The narrator’s primary goal for each day is to free the lady trapped inside of the wallpaper, which ideally means freeing herself from her husband’s dominance and control. The case was relatively the same with Gilman. She wanted to have the freedom to write and express herself creatively, not being limited by her passions, for the limitations are what caused the madness to worsen for both Gilman and the narrator of her notable short story.

Plath

The central themes of Sylvia Plath’s early life are the basis for *The Bell Jar*. The entire novel is, in a sense, a memoir. Plath is living her life over again through her main character, Esther Greenwood. Like Plath, Esther is also a writer. This particular scene in *The Bell Jar* develops a parallel between its author and main character. It is “[w]hen Esther finally baptizes herself in a hot bath, [that] she is revitalized, no longer ‘a dirty-scrawled-over letter.’ ... The cure of water is Esther’s bringing her writing back to life through her body” (Boyer 202). Throughout Plath’s

literary career, she also used various measures to revitalize her own writing. She often used her personal life experiences for ideas on which to write and would sometimes even live through her character(s), as she does here with Esther. Another example includes “Plath’s stay at McLean,” which “entered the literary canon...by way of *The Bell Jar*” (Beam 97). Plath describes her experience at the mental institution, McLean, through that of Esther’s in the novel. Plath is able to express her feelings about the place and the effects it had on her and her mental condition through her character, as she is in similar situations to that of Plath.

Another important author-character connection between Plath and her main character is established in the article, “The Disabled Female Body,” as Boyer discusses that they both began their lives with a “fragmented, disabled conception” of who they were (Boyer 201). Both Plath and the narrator, Esther, bravely break through the “bell jar of the confining 1950s culture” (Boyer 201). In Plath’s *The Bell Jar*, the narrator is a young girl with an overwhelmingly negative outlook on just about everything. She should be enjoying herself in captivating New York, after having won a fashion magazine contest, but instead she obsesses over the death of the Rosenbergs. They were electrocuted, and their executions were constantly being discussed on the radio. Esther cannot seem to get them off of her mind (Plath 1). She also continually dwells on achieving academic perfection. If she does not do exceptionally well at each educational endeavor she attempts, she wallows in sorrow over her failure. Like Plath, who constantly obsessed over her husband’s infidelities as well as her quite limited academic failures (she was rather intelligent), Esther seems to regularly harp on the negativities in life, allowing them to bring her down quite brutally.

The concept of submission is notably present in *The Bell Jar* and also becomes a significant issue in Plath’s life. Esther, the main character, constantly feels inferior like “a small

black dot,” perhaps because she is a woman (Boyer 202). Although she breaks out of the cultural bell jar, she still suffers from an inferiority complex, because women during her time were meant to be housewives and mothers. This second-rate position in society she is expected to endure is one of many things that gradually lead to her depression. Plath encountered entrapping submission in society as well as in her marriage, and one can clearly see she conceptualizes it in her writing. She was a daring woman, choosing to write and become something rather than adhere to what was expected of her—to be a wife and mother only. Although she succeeded with her feminist aspirations, the lack of acceptance along with other elements during her time might have caused her to see no justifiable reason to continue to live.

Reasonability for Writing and Often with Personal Connections

Gilman

Gilman gives her explanation for the writing of “The Yellow Wallpaper” in a nonfiction literary work she composed entitled, *Why I Wrote “The Yellow Wallpaper.”* She explains her reasoning for the story: “the story of the story is this: For many years I suffered from a severe and continuous nervous breakdown tending to melancholia—and beyond” (872). She goes on to tell her readers that “[d]uring about the third year of this trouble [she] went, in devout faith and some faint stir of hope, to a noted specialist in nervous diseases, the best known in the country” (872). The specialist discovered that Gilman had simply overworked herself. He did not feel women were meant to be as active as Mrs. Gilman was—that the only cure for her condition would be that of rest. And so, the specialist sent her home to rest and gave her the following orders: to “live as domestic a life as far as possible,” that she was to “have but two hours’ intellectual life a day,” and to “never to touch pen, brush, or pencil again as long as [she] lived” (Gilman, *Why* 873) Gilman claims to have followed the directions for “some three months and

came so near the borderline of utter mental ruin that [she] could see over” (“Why” 873). She knew this rest cure would be the end of her if she did not attempt to strategize another option for recovery.

Gilman began to consider her choices, for she knew that she could not take any more forced rest without going insanely mad. In order to rediscover the sanity she once had, Gilman states that she “went to work again—work, the normal life of every human being; work, in which is joy and growth and service, without one is a pauper and a parasite” (“Why” 873). This change in her resulted in “ultimately recovering some measure of power” (“Why” 873). She regained her strength through the invigorating process of intellectual activity.

In the “narrow escape” to freedom through work—her creative outlet—that Gilman found “naturally moving,” she composed “The Yellow Wallpaper,” with its superfluities and flourishes, to “carry out the ideal [of entrapment through forced rest and sexist daily guidelines] and sent a copy to the physician who so nearly drove [her] mad” (“Why” 873). She wanted him to know what his treatments truly did to her and hoped he would stop treating his patients with such flawed methods. Supposedly, Gilman later found out that the physician “altered his treatment of neurasthenia since reading ‘The Yellow Wallpaper.’” Gilman expresses her feelings toward the meaning behind this inspirational piece of literature: “It was not intended to drive people crazy, but to save people from being driven crazy, and it worked” (“Why” 873). This was her attempt to save others from the traumatic encounter she agonizingly endured from the ineffective rest cure.

Not only did she wish to save others with her story, but Gilman reveals an ulterior motive “in her autobiography, *The Living of Charlotte Perkins Gilman*, that her intended reason for writing this Gothic tale was ‘to reach Dr. S. Weir Mitchell, and convince him of the error of his

ways” (Bak 45). She wished for him to know of his wrong-doings and hoped that he would alter his methods of psychological treatments. She found it rather unfair that she had to suffer such agony on account of his flawed methods and felt no one else should ever have to go through the overwhelming distress she underwent.

Gilman has been termed a “feminist” as well as a “medical iconoclast,” who clearly did not claim the “triumph of hers in narrowly therapeutic terms.” She very well knew that the “cure for female despair must be spiritual as well as physical, aesthetic as well as social.” Gilman wrote “The Yellow Wallpaper” in order to demonstrate

that even when a supposedly ‘mad’ woman has been sentenced to imprisonment in the ‘infected’ house of her own body, she may discover that, as Sylvia Plath was to put it seventy years later, she has “a self to recover, a queen. (Gilbert and Gubar 869)

In other words, a woman must retain a greater sense of self to better her once disabled mentality. Once she has accepted her flaws, loving oneself and not wishing to change for the pleasing factor of anyone but one’s own self, she can then discover ways in which she can recover from her self-harming issues.

Although Gilman is best known for “The Yellow Wallpaper,” she was rewarded for many other literary achievements. Like her chilling story she is most famous for, she had underlying meanings behind other works as well. As noted in the biographical section of this study, Gilman had firm beliefs about death, and she “used literary representations, both fictional and poetic, to proselytize her views” (Knight 148). She felt that “by writing frequently on the subject, and in different genres and forums, [...she would] convert at least some readers to her cause” (Knight 148). Euthanasia, or assisted suicide, was one concept she truly felt should be looked into

further. She aspired that if enough people read and came to understand her views on such a controversial topic, change could be a possibility.

Plath

Sylvia Plath had multiple reasons for her composition of *The Bell Jar*. Her novel “deals with Esther Greenwood’s life in the 1950s,” which is really Plath’s reflection on her own life during this era (Boyer 200). Demonstrated within her novel,

it is not too difficult to comprehend that before feminism’s heyday in the late sixties and seventies, Plath was assessing the plight of the young woman artist at mid-century who was attempting to overcome the values of domesticity in a uni-polar milieu . (Boyer 200)

If Esther and her friends in New York City are wronged, “it is partly due to the mindset prevalent in those times: women should stay at home, cook meals, clean house, and bear children” (Boyer 200). Instead, the main character and her friends are living modernly, not adhering to what is expected from them as women.

Plath was quite open-minded in her writing, for through the text, “Plath describes the battle that Esther Greenwood must wage in order to hear her own muse and create her own language” in the world. Esther is far from an ordinary girl of her time, and though “interminably abused and temporarily handicapped [from a societal perspective], she, like Plath herself at her peak, does emerge into her own ‘room,’ beyond the stifling enclosure of the bell jar” (Boyer 200-201). Being such daring women, both Plath and her narrator manage to escape the entrapping expectations of their time. Regardless of what their culture expects of them, they express themselves creatively as they wish and are not afraid to show dissatisfaction with the roles they are expected to uphold. They break through their cultural bell jar, becoming the stepping stones of societal progress soon to come in terms of the rights and treatment of women.

Plath did not necessarily come out openly to explain her reasoning for writing this powerfully striking novel, but ideally,

the accomplishment of the novel [*The Bell Jar*] is in part that its author was able to break through the bell jar of the confining 1950s culture, to find her voice and her spirit as she identified herself as a writer (Boyer 201).

She found them by expressing herself through her created character, Esther. She could finally tell the world how she felt, having the ability to literally let out all of her emotions and past troubles. Not only was the completion of the novel a relief for Plath, but also came with much literary fame, for her novel still sells quite successfully today. She wrote this novel to escape from her frustrations as a struggling poet, as well as to reveal her complex and troubling story to her readers and the world as a whole.

An example of such complexity was that of the agonizing aftermath of her marriage, for Plath then found a new and devastatingly influential voice, the voice of “Lady Lazarus,” “Daddy” and the other vastly terrifying poems that would become *Ariel*, the book on which her literary status finally rests. Plath “became, as if refined by the pain, the poet she had always dreamed she would be.” Plath, along with the many inconsistencies of her mental health, could “certainly be difficult, and unquestionably the presence of Hughes, a major poet in his own right, accelerated Plath’s development as a writer” (Grossman 2). Writing was her escape from her overwhelmingly racing mind. Telling her story through young Esther gave Plath the relief that her voice would finally be heard. She also came alive through her notable poems, establishing a true voice in her writing—one that launched her fame and success for years to come.

Societal Effects

Gilman

Gilman's "The Yellow Wallpaper" has dramatically affected society in the areas of feminism, medications, treatments, therapies, as well as various others. Curator Manon Parry of the National Library of Medicine's History of Medicine Division notes that "Gilman's classic tale of the treatment of depression is not only a shocking horror story, but a powerful critique of the medical profession and one of the founding texts of American feminism" ("Bed Rest" 4). On top of that, this famous tale has "served as an indictment of the medical profession and the social conventions restricting women's professional and creative opportunities" ("Bed Rest" 4). For her time especially, these are tremendous literary accomplishments.

Gilman has demonstrated a lasting effect on society and lives on through her skillfully written words and developing plans of action for change even today. Throughout her productively lived life, "Gilman advocated social change in her writings and through her public lectures" (Connell 20). She wanted to make a significant difference in society, especially in regards to the rights of women. Her ultimate "goal was to improve social conditions of society as a whole by improving conditions for women. When conditions became more humane and equitable for half of society's population, society as a whole would benefit" (Connell 20). She truly took a stance to make the world a better place, adequately representing equality of gender. She wanted to create a place where women had equal potential to thrive and be successful.

Gilman continues to receive numerous critiques from feminist critics all over the world, who express a variety of interpretations of "The Yellow Wallpaper." This particular "feminist critic[,] Elaine Hedges[,] wrote in 1973 that the '[wall]paper symbolizes her situation as seen by the men who control her and hence her situation as seen by herself'" (Bak 40). The critic is basically saying that Gilman is expressing her feelings towards her husband and her doctor, who believe her innate quality as a woman is to be submissive to their power. Yet, another

interpretation is formed behind the meaning of this famous tale. As the frightening story comes to its end,

the real natural world outside the room becomes the strange, misfitting one in which [the narrator] feels like an alien. [She becomes] comfortable creeping openly in her yellow world, [and once she has made her home in this] corrupted ecosystem, her loss of sanity is no longer a question. (Scott 202)

She has become accustomed to her new surroundings, feeling sanity from this new comfort. She finally feels accepted, because it becomes *her* yellow world.

“The Yellow Wallpaper” has been interpreted as a rather “feminist text” that prosecutes the “men who were responsible for the narrator’s physical confinement and subsequent mental demise” (Bak 40). The narrator, even with her doctor’s “ill-advice” and her husband’s “dehumanizing imprisonment,” is eventually “successful in freeing herself from her male-imposed shackles” they figuratively forced her to wear. She breaks through with her realization that she is in such an entrapment. This view thoroughly “supports the feminist label already attached to ‘The Yellow Wallpaper’ but counters the premise upon which other arguments are based: that she ‘never does get free’ and, in fact, ‘has been defeated’ in the end—in short, ‘destroyed’” (Bak 40). Different critics develop divergent viewpoints, but regardless of their critiques, Gilman does in fact escape from her confinement, and “The Yellow Wallpaper” seems to be Gilman’s personal reflection of her entrapment and eventual escape. From this understanding, one can conclude that the narrator successfully escapes as well.

Along with her successfully chilling tale, Gilman’s suicide has also been under discussion for its justification, considering the situation of her incurable illness. Gilman’s suicide embodies “far more than just the self-inflicted death by a terminally ill old woman. Rather, it was

the culminating act in a lifetime of contemplation about death and dying” (Knight 138). It was the end of something great, full of accomplishments and progressive acts for the betterment of society. Putting an end to “her own life represented Gilman’s final appeal to society to alter its opinion, not only on suicide, but of euthanasia, cremation, and of traditional funeral services, which Gilman viewed as a wasteful extravagance” (Knight 138). As a “life-long reformer” for change and progress, “Gilman hoped that her actions would ultimately speak louder than her words” (Knight 138). And they have; women have equal rights today. Gilman would have been proud to know that she was a part of this societal change. Though she may not have seen the changes made for herself, it was her dedicated actions that made a true difference and provided the stepping stones for the progression of society.

Plath

Sylvia Plath has become somewhat of a celebrity figure, famous for her morbidly fascinating sense of frightening literary expression. Her collection of powerful poems, along with her legendary novel, truly paved her way into society. The

posthumous volume of verse, *Ariel*, established Sylvia’s reputation, and slowly the recognition grew that this young woman, whilst engaged in a life-and-death struggle with depression, had in the last months of her life achieved a literary breakthrough, producing some forty remarkable poems in an intense burst of creative energy. (Cooper 5)

Though she had endless cases of writer’s block throughout her life, it was at the end of it that she clearly thrived as a writer. Critics have established various explanations for her remarkable success towards the end of her life. English and American reviews of *Ariel* show “a similar tendency to focus on the ‘sickness’ as well as on the brilliance of the poetry and its ‘striking vision’” (Jackson 126). Some felt that she was perhaps powered by her illness, for she

was the best writer when she was at her worst emotional state. Her literary success gave her confidence and self-worth, but unfortunately, her distasteful relationship with Ted Hughes caused her emotions to heighten negatively regardless of her professional accomplishments.

Plath definitely made a mark on society so intriguing that Focus Features made a movie about her life entitled *Sylvia*, which was released in 2003. The “reviews rehearsed the familiar characterization of Plath as a poet for ‘highly strung teenage girls,’ the ‘Kurt Cobain of modern poetry,’ distinguished by her ‘angry, hiccuppy voice’” (Jackson 117). She was surely ahead of her time, writing such dark and morbid poetry as she did, but her charming personality was warped by her mental illness, causing many to question her true talent. Gwyneth Paltrow played Plath and did a remarkable job of portraying her accurately.

Various myths have been developed about Plath. Her “nationality as an American, living in Britain during her marriage to Ted Hughes, has always seemed peripheral to the Plath myth.” In studying the myth, critics have discovered it to be one of “politics of gender” (Jackson 119). This “myth can be figured either as the feminist myth celebrating Plath’s breakthrough into autonomy, or as a romanticizing of Plath’s victimhood, with little distinction usually being made between these two quite different versions of the myth” (120). Each can be easily supported, for she had gotten into the university on her own, becoming established by her honorable academics. She was confident of her writing, rather disturbed when it was not rewarded for its excellence. But after being at Cambridge for only a short while, she became the victim of romance. Her whole life turned around, and her independence began to lessen. Her writing even took a fall.

Not only was a movie created about her adventurously tragic life, but Plath has also been the “subject of a steadily growing number of novels, plays and poems, as well as pop and rock songs, performance pieces, art works, operas, and an animation” (Hagström 34). These works

vary in regards to legitimate portrayal, for they “differ greatly in how they present Plath’s life and death” (Hagström 34). The one aspect that brings similarity to all of the genres of representation is that “most [if not all] of them share an emphasis on the latter” (Hagström 34). This remarkably stunning yet tragic “suicide repeatedly becomes a symbol made to represent aspects of contemporary culture” (Hagström 34). Her famous ending of such an interesting but self-harming life now demonstrates a variety of meanings and interpretations to society today. She consistently aspired to become a famous poet and to be well-known literarily. Her wish clearly came true; for her poems and other literary works have been published, anthologized, and taught, truly living on in the many hearts of her readers today.

Conclusion

This study has demonstrated many aspects of the lives and legacies of two successful women authors, Charlotte Perkins Gilman and Sylvia Plath, who were stricken by mental illness, and express it in their literature. In examining the family lives and marriages of these two women, in order to get an inside look at their developing mental health issues and outlooks on life and its purpose, I found that they were each victims of control and dominance in their marriages, and yet, they did their best to discover an escape through writing. Both women often questioned the importance of their lives but were rather intrigued by the concept of death, having no fear of its exploration.

Gilman’s and Plath’s academic and literary accomplishments are very similar: they each strove in life to have the ability to be more than just a wife and mother and to succeed through their creative endeavors. The connections the authors develop literarily with their characters are how the authors reached their audiences. They told their own personal stories through that of

their characters, hoping to find some sort of relief for themselves and/or to save others from going through the same troubling situations as themselves.

Although in the end, both women could not endure the pain of their distress, choosing to end their own lives, they each live on through the lasting effects they have had on their many dedicated readers and followers. I have come to learn that, though these women had separate emotional troubles, they each were able to come alive in their writing and truly make a significant difference in the world through their self-expression and aspiring goals to be influential individuals in society.

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