

Disability and Madness in “The Yellow Wallpaper”

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Abstract

Charlotte Perkins Gilman’s “The Yellow Wallpaper” has been subject to diverse interpretations from several theoretical positions. Disability studies conceptualise disability as the body/mind that does not conform to the codes of normalcy in dominant social formulations. Hence, the diagnosis of disability itself can be a reflection of dominant codes. The diagnosis of hysteria in particular, was used to denote a wide cluster of symptoms, particularly in female patients, and impose curative measures like the rest cure to restore the ‘deviant’ or ‘immoral woman’ back into normative gender roles. “The Yellow Wallpaper” depicts not only this hierarchical relationship between the domineering male doctor-husband and the female patient but also illustrates the debilitating impacts of a cure that focuses more on restoring normalcy than the specific psycho-social needs of the individual. The woman trapped in the yellow wallpaper can then be seen as the reviled ‘other’: the disabled body that breaks all codes of normalcy, aesthetics and gender. Initially, the narrator detests her and resists identification with the ‘other’, but as the realisation of her own oppression increases, she embraces the non-normative other as a part of herself. While this subversion does not necessarily ensure her independence in a normative world, it manifests the narrator embracing the only path of resistance available to her: madness. This paper hence seeks to explore the unequal relationship between doctor and patient, the imposition of curative measures against the will of the disabled woman and its relationship to female insanity in the context of “The Yellow Wallpaper”.

Keywords:

Disability; hysteria; madness; agency; rest-cure

Charlotte Perkins Gilman's "The Yellow Wallpaper" has invited manifold contested readings since its publication in 1892. Initially read as a gothic horror tale, the emergence of feminist disability studies has shed new light on the implications of the narrator's presumed hysteria, her forceful subjection to rest cure and eventual insanity. "The Yellow Wallpaper" depicts not only this hierarchical relationship between the domineering male doctor-husband and the female patient but also illustrates the debilitating impacts of a cure that focuses more on restoring a woman to dominant conceptions of femininity, resulting in the infantilization and loss of agency of the disabled woman. The story, however, is not a mere reportage of the victimhood of a disabled woman, but rather it partially subverts the patriarchal ability/disability system through the imagined/actual figure of the non-normal 'other' woman, presumably trapped behind the wallpaper, whom the narrator not only liberates from its prison, but with whom she arguably merges her consciousness at the end of the last journal entry. This paper hence seeks to explore the unequal relationship between doctor and patient, the imposition of curative measures against the will of the disabled woman and its relationship to female insanity in the context of "The Yellow Wallpaper".

Following Rosemarie Garland-Thomson, critics have increasingly identified feminist and disability studies as "comparative and concurrent academic enterprises" (Garland-Thomson, 2) . Just as femininity is conventionally defined as the physically and intellectually inferior 'other' of masculinity, the idea of disability too is a construct, "a culturally fabricated narrative of the body" (5). While physical and mental impairments might be associated with disability, the disabled body/mind is conceptualised as the 'other' of dominant normativity. As Garland-Thomson forcefully argues, "the cultural function of the disabled figure is to act as a synecdoche for all forms that culture deems non-normative." (4) The ability/disability system attributes ideological categories of "deformed, crazy, ugly [or] abnormal" to the disabled person, and in doing so, it provides cultural capital to those who possess normative bodies/minds. (5)

A glance at the history of hysteria shows that the cause of the illness/disability was often assigned to a failure to conform to normative femininity. Thrailkill argues that its symptoms

consisted of "local paralysis or anesthesia, fainting, tunnel vision, and trance-like spells-that mimicked the features of other diseases while possessing no discernible organic basis." (Thraillkill 537) While patients experienced significant physical and psychosocial impediments on account of it, the curative techniques were largely involved in restoring the patient back to codes of normalcy. As Bassuk observes, Weir Mitchell, a pioneer physician specialising in hysteria at the time, firmly held on to the belief that women were inferior to men because of their reproductive cycle, itself conceptualised as something akin to disability (Bassuk 251). He further implied that it was unfeminine activities, like intellectual pursuits, that led to hysteria¹. His treatment, popularly called the rest cure, imposed a paternalistic regimen on the patient that deprived her of any intellectual, social or physical stimulation (252). Gilman, who was herself a patient of Mitchell, suffered extensively because of his rest cure. She notes her "mental torment, and so heavy in its nightmare gloom that it seemed real enough to dodge." Eventually she came to disagree with Mitchell's prescription, committing herself to intellectual labour that the paternalistic doctor had forbidden her, and which she identified as "joy and growth and service" (qtd. in Berman 32).

A prime concern of disability activists, particularly with regard to mental disabilities, is the question of agency in the interaction between the disabled patient and the psychiatrist, and this theme is predominant in "The Yellow Wallpaper" as well. Margaret Price notes that the Mad Movement, which started in the 1970s, includes psychiatric system survivors "who have personally experienced human rights violations in the mental health system" (qtd. in Price 298-99). These survivors, Morrison observes, often "talk back" to the mental healthcare system in an attempt to challenge prevailing treatment modalities imposed on patients against their will (qtd. in Price 299-300). The c/s/x movement (consumer/survivor/ex-patient movement) similarly demands more holistic patient care, one that incorporates the perspectives of those labelled mentally ill in directing the course of treatment (Price). After Gilman's own destructive encounter with Mitchell's rest cure, "The Yellow Wallpaper" can also be seen as a precursor to this movement, an instance of the hysteric patient talking back to the system, by crafting a fictional narrative that accentuates and portrays the psychological damage involved in the complete denial of agency to the disabled woman.

¹Mitchell argues that "there are in the physiological life of women disqualifications for continuous labor of the mind" (Mitchell 1885a: 15). As Bassuk has noted, the implication behind Mitchell's statement is that "women developed illnesses precisely because of their unfeminine strivings (Wood 1974). He recommended shortening a woman's school hours and modifying her course of instruction" (Bassuk 252)

In this regard, one of the most striking and disturbing features of “The Yellow Wallpaper” remains the amount of control that the narrator’s doctor-husband John has over the course of her ‘treatment’, culminating in the complete loss of her agency. The linguistic authority of medical diagnosis grants John the power and legitimacy to usurp her freedom. As Treichler notes, “diagnosis is powerful and public; representing institutional authority” (Treichler 65). It describes the narrator’s physical reality (as hysteria) and prescribes a curative measure (as rest cure) to alter that physical reality (Treichler). The narrator has no agency to challenge the authoritative force of this diagnosis:

If a physician of high standing, and one’s own husband, assures friends and relatives that there is really nothing the matter with one but temporary nervous depression— a slight hysterical tendency—what is one to do? (Gilman 224)

John, as the narrator reports, “hardly lets me stir without special direction” and that she has “a schedule prescription for each hour in the day” (225). She is forbidden to write and he reads to her, thereby controlling the information and knowledge that she has access to receive or to create (224, 231). Even her social interactions are limited to company that John deems fit: he refuses to invite “Cousin Henry and Julia” for a visit as the narrator requests (227). This form of physical, social, intellectual and emotional control thus becomes an intrinsic part of the rest cure imposed on her, which not only infringes on her agency but also leads to her infantilization vis-a-vis her physician-husband.

The narrator’s lack of authority over her own life and body also manifests itself in the room with the yellow wallpaper assigned to her against her will. She assumes the room to be a nursery, but it curiously resembles a prison-chamber with its heavy unmoveable bedstead, the barred windows and the gate at staircase, all of which become physical manifestations of her immurement in the domestic space (225) . Whether the room was actually used as a nursery before remains ambiguous, but the narrator’s own conclusion about the room’s original purpose might suggest a faint yet initially sub-conscious awareness of her own infantilization by John. While the narrator tries to mask her resentment with John even in her own journal, his patronising manner of speaking is apparent in his direct speech that she quotes. He repeatedly refers to her as if she were a child, calling her “blessed little goose” or “little girl” (227, 232). The implications of John’s infantilization becomes even more clear when he casually

dismisses her concerns about the efficacy of rest-cure by saying "Bless her little heart! ...she shall be as sick as she pleases!" (232)

This unequal and oppressive power-dynamic between the male doctor and female hysteric patient is evidenced by actual treatments of hysteria that were popular at the time. Barbara Johnson, for instance, considers "The Yellow Wallpaper" to be "an allegory of psychoanalysis" (qtd. in Showalter 30). The talking-cure that Freud used to treat hysteric patients involved the male doctor reconstructing the hysteric's repressed unconscious, and also disregarding the patient's resistance to the narrative. As Showalter notes, "in order for the therapy to work, the hysteric had to accept and believe the analyst's story", which many of Freud's female patients, including the famed "Dora", refused to do (26). Likewise, Weir Mitchell, under whose dictates Gilman herself suffered the debilitating impacts of "rest cure", believed that the hysteric patient must accept the authority of the (male) doctor (Bassuk 247). Rest cure not only comprised complete rest, isolation and excessive feeding, but also "moral re-education", which as Hartenberg notes, involved training the patient in "principles of philosophy, patience, resignation and consolation" (qtd. in Bassuk 248). Bassuk concludes therefore, that "under the paternalistic, authoritarian control of a male physician, the Victorian woman regressed physically and emotionally." (252) The effects of this are visible in the narrator: her supposed descent into insanity consists of a loss of linguistic faculties; moreover, chained to the bed, the narrator has no option but to crawl around the room like an infant. The text can then be read as a powerful indictment of the infantilising and patronising mode of treating hysteric patients, that were employed by masculinist physicians like John, Weir Mitchell and Freud.

The narrator, denied little to no agency to resist the process of infantilization, constitutes her final act of subversion by saving another woman, the 'other' woman. She eventually embarks on the gradual process of embracing the 'other' woman in the wallpaper as an extension of herself. Delamotte discusses the importance of the 'other' woman in the liberation of the female heroine in conventional Gothic novels, like those of Anne Radcliffe. In most Gothic novels, the 'other' is either the 'good', self-effacing woman whose self-sacrifice ensures the heroine's triumph, or she is the evil other woman, who needs to be purged and exorcised (Delamotte 252). In an ironic reversal, "The Yellow Wallpaper" shows a merging of the female heroine with its 'other'; and the conclusion implies a super-imposition of the 'other' woman on the narrator's subjectivity, in the same way that the narrator inscribes her story on the wallpaper. Seen in this context, the 'other' woman in the wallpaper, with "a broken neck and

two bulbous eyes [which] stare at you upside-down” can be the imagined disabled ‘other’ of the narrator, one who is trapped behind the wallpaper on account of dominant social codes (Gilman 227-28). The narrator, coached in following social normativity, is initially repulsed by the wallpaper that does not conform to any artistic standards and commits “every artistic sin” (225). But as she gradually identifies John’s desire to impose normative domesticity on her at the cost of her intellectual pursuits, as the real cause of her weakening mental state, she becomes intrigued by the wallpaper which is “not arranged on any laws of radiation, or alternation, or repetition, or symmetry”(230). As “a constant irritant to a normal mind”, in its very existence, the wallpaper becomes a subversion of masculinist rationalist standards of conformity and normativity (233). Freeing the non-normative ‘other’ woman and merging her consciousness with her, then functions as a radical undermining of dominant social standards.

In fact, the act of chaining herself to the bed and moving around in circles, allows her to crawl over, and establish at least temporary victory over her husband, by caricaturing normative feminine roles. As Delamotte notes, her actions as a madwoman “are an extreme and literal version of the role for which the narrator’s society has cast her as a woman” (Delamotte 265). Like the caricature of the ideal homemaker women are expected to be, she is passionately confined to the room and obsessed about a wallpaper, deriving all meaning from it. She becomes a mockery of her husband’s ideal “little girl”, since all she can do is crawl around the nursery, with hardly any ability for coherent speech (Gilman 232). Her language, replete with exclamations of “Hurrah!” and “the sly thing” defies accepted codes of masculine rationalist language and becomes a mockery of the expectation of ideal femininity which involves abstinence from academic pursuits (238). The apparent “insanity” that results from embracing the other woman, is therefore, “merely a literalized picture of the social norm, in her society, for sanity.” (Delamotte 265) In doing so, it blurs the distinction between sanity and insanity, normativity and non-normativity, and in consequence, between ability and disability.

Conclusions

It must be noted that despite the narrator’s subversion of normativity through her presumed madness, her independence from the patriarchal ability/disability system is by no

means assured. Nevertheless, the enduring significance of the narrative of "The Yellow Wallpaper" lies in the discourse it generates as a counterpoint to the dominant narratives around the "rest cure". The narrator marginally reasserts her agency at the conclusion of the story, but more importantly, her madness elucidates the destructive impacts of normative femininity that defines the female body as 'lack' and as the proverbial 'other' of masculinity. A powerful statement against the nexus of patriarchy and the ability/disability system, Gilman's story is furthermore a testament of the hysteric patient talking back to the system and resisting the seemingly inviolable authority of the male doctor.

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