The Talking Cure

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Charlotte Perkins Gilman and "The Yellow Wallpaper"

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IF Charlotte Perkins Gilman's name does not command the instant recognition of an Elizabeth Cady Stanton, Jane Ad-dams, or Susan B. Anthony, it is not because her achievement was less. Social historians agree on the brilliance of her ideas and the extent to which her influential books helped to transform the condition of women in early twentieth-century America. The following judgments are representative. "The only systematic theory linking the demand for suffrage with the long sweep of history was that of Charlotte Perkins Gilman, the most influential woman thinker in the pre-World War I generation in the United States."¹ "Of all the great feminist writers, she made the finest analysis of the relation between domesticity and women's rights, perhaps the most troubling question for liberated women and sympathetic men today."² "Charlotte Gilman was the greatest writer that the feminists ever produced on sociology and economics, the Marx and the Veblen of the movement."^{$\frac{3}{2}$} "It is hardly an exaggeration to speak of her as the major intellectual leader of the struggle for women's rights, in the broadest sense, during the first two decades of the twentieth century." $\frac{4}{2}$ Two of her books. Women and Economics and The Home: Its Work and Influence, became immediate classics. The Nation called Women and Economics "the most significant utterance" on the women's question since John Stuart Mill.⁵ She has been called the "most original and challenging mind" produced by the

women's movement.⁶ Not long before her death, she was placed first on a list of 12 great American women by Carrie Chapman Catt.⁷

The major source of the details of her life is The Living of Charlotte Perkins Gilman: An Autobiography, an absorbing book that raises more questions than it answers. In its wealth of information about the author's troubled childhood experiences, especially her relationship to a mother who refused to show affection to her and to a father who abandoned his young family, the autobiography casts much light on "The Yellow Wallpaper." The book also eloquently describes her lifelong battle with acute depression exacerbated by what can only be euphemistically called "psychiatry." Born on July 3, i860, Charlotte Perkins was a great granddaughter of Lyman Beecher, the progenitor of the distinguished American family. Lithe else about her early life seemed auspicious. Although her parents appear to have been in love when they married in 1857, the marriage was short lived. In quick succession Mary Perkins gave birth to four children, two of whom died in early infancy. The first baby died "from some malpractice at birth" in 1858, a son was born in 1859, Charlotte in the next year, and a fourth child died in 1866. When the doctor forbade another child, the father deserted the family:

There now follows a long-drawn, triple tragedy, quadruple perhaps, for my father may have suffered too; but mother's life was one of the most painfully thwarted I have ever known. After her idolized youth, she was left neglected. After her flood of lovers, she became a deserted wife. The most passionately domestic of home-worshiping housewives, she was forced to move nineteen times in eighteen years, fourteen of them from one city to another. $\underline{^8}$

Charlotte's father never did return. Her mother delayed 13 years before divorcing him, and even after the divorce she continued to wait for him until the end of her life. The daughter's account captures the pathos of the mother's story. "Divorced or not she loved him till her death, at sixty-three. She was with me in Oakland, California, at the time, and father was then a librarian in San Francisco, just across the bay. She longed, she asked, to see him before she died. As long as she was able to be up, she sat always at the window watching for that beloved face. He never came." To which the daughter parenthetically adds, "That's where I get my implacable temper" (*The Living*, p. 9).

The theme of a child waiting for a man who will never return, and the attendant bewilderment and rage, characterizes Charlotte Perkins Gilman's feelings toward her father in particular and men in general. "The word Father, in the sense of love, care, one to go to in trouble, means nothing to me, save indeed in advice about books and the care of them—which seems more the librarian than the father" (*The Living*, pp. 5-6).

But it is not only the absent father who is responsible for the daughter's traumatized youth. Equally ominous is the impact of an embittered mother who denies her child the parental love and attention she herself had been

denied by her husband's desertion. Mother becomes both victim and victimizes Despite the fact that the mother is described as a "baby-worshiper" who devoted her entire life to the children, she also inflicted upon them the pain and lovelessness from which she herself suffered. The most poignant moment in Gilman's autobiography occurs when she writes about a recurring childhood experience which, like a bad dream or Dickensian scene, permanently haunted her imagination. What makes the passage more astonishing is the daughter's absence of criticism, even years later, of the rejecting mother:

There is a complicated pathos in it, totally unnecessary. Having suffered so deeply in her own list of early love affairs, and still suffering for lack of a husband's love, she heroically determined that her baby daughter should not so suffer if she could help it. Her method was to deny the child all expression of affection as far as possible, so that she should not be used to it or long for it. "I used to put away your little hand from my cheek when you were a nursing baby," she told me in later years; "I did not want you to suffer as I had suffered." She would not let me caress her, and would not caress me, unless I was asleep. This I discovered at last, and then did my best to keep awake till she came to bed, even using pins to prevent dropping off, and sometimes succeeding. Then how carefully I pretended to be sound asleep, and how rapturously I enjoyed being gathered into her arms, held close and kissed *(The Living,* pp. 10-11).

Deprived of paternal protection and maternal tenderness, forced to adopt both subterfuge and self-punishment to secure the little affection the mother reluctantly offered, and reared in an environment where the image of a baby must have symbolized the mother's entrapment, the child turned inward to fabricate a fairy-tale world that would supplant grim reality. In this inner world dwelled an all-loving mother and father who rescued rather than abandoned the children of the world. The element of wish fulfillment is unmistakable here as well as a rescue fantasy in which the dreamer becomes her own idealized parent, transmuting an anguished childhood into paradise. In this fantasy world lived a "Prince and Princess of magical powers, who went about the world collecting unhappy children and taking them to a guarded Paradise in the South Seas. I had a boundless sympathy for children, feeling them to be suppressed, misunderstood."

The comforting fantasy soon collapsed, however, destroyed by a Victorian mother who under the influence of a "pre-Freudian" friend forbade her child to indulge in the pleasures of the imagination. "My dream world was no secret. I was but too ready to share it, but there were no sympathetic listeners. It was my life, but lived entirely alone. Then, influenced by a friend with a pre-Freudian mind, alarmed at what she was led to suppose this inner life might become, mother called on me to give it up. This was a command. According to all the ethics I knew I must obey, and I did . . *(The Living,* p. 23). And so at the tender age of 13 she was forced to give up the "inner fortress" that had been her chief happiness for five years. "But obedience was Right, the thing had to be done, and I did it. Night after night to shut the door on happiness, and hold it shut. Never, when dear, bright, glittering dreams pushed hard, to let them in. Just thirteen . . . " *(The Living,* p. 24).

In later life, Charlotte Perkins Gilman held Freud responsible for the loss of her dream world. Of the many references to Freud in her autobiography and other writings, all are pejorative. She indicts Freud for offenses ranging from the violation of the human spirit to an unnatural emphasis upon sex. In a lecture called "The Falsity of Freud," she equates the psychoanalyst with evil and oppression. Her description of a friendship with another woman links Freud with psychopathology: "In our perfect concord there was no Freudian taint, but peace of mind, understanding, comfort, deep affection" (The Living, p. 80). In an essay called "Parasitism and Civilized Vice," she argues that a major obstacle to the advancement of women's rights is the "resurgence of phallic worship set before us in the solemn phraseology of psychoanalysis."⁹ Toward the end of her autobiography, she recalls in amazement how "apparently intelligent persons would permit these mind-meddlers, having no claims to fitness except that of having read certain utterly unproven books, to paddle among their thoughts and feelings, and extract the confessions of the last intimacy." One of these "mind-meddlers" gratuitously attempted to psychoanalyze her in an effort to render her into the psychiatric case study she had fictionalized in "The Yellow Wallpaper":

One of these men, becoming displeased with my views and their advancement, since I would not come to be "psyched," as they call it, had the impudence to write a long psychoanalysis of my case, and send it to me. My husband and I, going out in the morning, found this long, fat envelop with our mail. I looked at it, saw who it was from, and gave it to Houghton. "I don't want to read his stuff," I said. "You look it over and tell

me what it is about." This he did, to my utter disgust. "Burn it up, do," I urged. "I haven't the least curiosity' to know what this person thinks is the matter with me" (*The Living*, p. 314).

Whoever this anonymous "psychoanalyst" was, he only confirmed her hatred of Freud and her belief that the Viennese doctor and his unholy disciples were antithetical to the women's cause and to the imagination itself. Who can blame her anger over this violation of privacy, a violation that may have reminded her, as we shall see, of her experience with S. Weir Mitchell? Yet Gilman also condemned Freud for other, less valid, reasons. She insisted that Freud was responsible for the widespread promiscuity of the age and the lowering of standards in sexual relations. She was, of course, Victorian in her horror of sex and glorification of chastity. The de-emphasis of chastity, she was convinced, had debased human nature. She accused the Freudians of a "sexuopathic philosophy" that advocated as " 'natural' a degree of indulgence utterly without parallel in nature" (The Living, p. 323). Elsewhere in her writings she attacks the "present degree of sex impulse" as pathological, arguing instead for the suppression or redirection of the sexual instinct. In her female utopia, *Herland*, women conceive through parthenogenesis, virginbirth. Men are no longer necessary and procreation is independent of the sex act. Like her exact contemporary Bertha Pappenheim, Gilman could see only the horror of sexuality.

Given these feelings, it is no wonder that the two subjects she was to

spend most of her life writing about and trying to reform-marriage and motherhood—figured conspicuously in her mental breakdown. Her autobiography reveals the confusion and misgivings surrounding her decision to marry' Charles Walter Stetson, whom she had met in 1882. Although she considered him "quite the greatest man, near my own age, that I had ever known." she knew intuitively that she should not marry the good-looking painter. Her experience with deprivation and denial prepared her for a life of continued abstinence. Unwilling to hurt his feelings, she postponed a decision for as long as she could. She defined her marital dilemma as a choice between love and work, the classic conflict of a woman. Only after Stetson had met with a keen personal disappointment did she consent to marry him. Her gloom deepened. A diary written during this time reflects depression and selfcontempt. There is also a thinly veiled death wish. "Let me recognize fully that I do not look forward to happiness, that I have no decided hope of success. So long must I live. One does not die young who so desires it" (*The Living*, p. 84). The thought of a future filled with failure and guilt compels her to break off her narration: "Children sick and unhappy. Husband miserable because of my distress, and I-" Against this fearful backdrop Charlotte Perkins Gilman married Stetson in May 1884-A daughter Katherine was born in March 1885. Her breakdown followed immediately.

What seems so perplexing—and yet so characteristic—about the swift series of events leading to Gilman's collapse is the praise she bestows on her

husband and child and her refusal to utter a word of reproach toward either of them. She insists that she and her husband were happy together both before and after the arrival of their child. From her descriptions, Walter Stetson seemed a woman's dream. "A lover more tender, a husband more devoted, woman could not ask. He helped in the housework more and more as my strength began to fail, for something was going wrong from the first" (The Living, pp. 87-88). The idealized description contrasts the bleakness of her diary. She uses a metaphor similar to Sylvia Plath's bell jar. "A sort of gray fog drifted across my mind, a cloud that grew and darkened." At first she attributes her growing nervousness to pregnancy, but when the baby is born the mother's health worsens. She tries repeatedly to convince us that her sickness was not due to the baby she mythologizes. "Of all angelic babies that darling was the best, a heavenly baby." The nurse's departure deepens the mother's grief, and neither the arrival of her own mother nor the move to a better house improves the situation. The chapter on "Love and Marriage" in the autobiography closes with these chilling words. "Here was a charming home; a loving and devoted husband; an exquisite baby, healthy, intelligent and good; a highly competent mother to run things; a wholly satisfactory servant—and I lay all day on the lounge and cried" (*The Living*, p. 89).

What caused the breakdown? The meaning of die illness mystified her even 50 years later. Although she could not define what it was, she knew what it was not. Angered by the accusation that her "nervous prostration" was

merely a fanciful term for laziness, she insisted that it was not caused by a deficiency of will. Nor could she force happiness into her life, as one sympathizer urged. She was unable to read or write, get out of bed, or stop crying. The doctors ruled out a physical cause, for which she would have been grateful. An accusing voice within her kept shouting: "You did it yourself! You did it yourself! You had health and strength and hope and glorious work before you—and you threw it all away. You were called to serve humanity, and you cannot serve yourself. No good as a wife, no good as a mother, no good at anything. And you did it yourself!" ... (*The Living*, p. 91).

She knew that marriage and motherhood were the problem although she did not know why. The evidence could not be more striking. From the moment she left her baby and husband to travel across the continent for a rest and change, she felt immediately better. "I recovered so fast, to outward appearance at least, that I was taken for a vigorous young girl. Hope came back, love came back, I was eager to get home to husband and child, life was bright again." But, within a month of returning home, she was depressed as before. The truth was inescapable. To preserve her sanity she had to leave her family and to repudiate society's most cherished values. It was at this time that she sought psychiatric help from S. Weir Mitchell. After a one-month rest cure she returned home, following his orders to "live as domestic a life as possible." She came perilously close to losing her mind. She made a rag doll at home, hung it on a doorknob, and played with it. "I would crawl into remote closets and under beds—to hide from the grinding pressure of that profound distress . . ." (*The Living*, p. 96). Again one is reminded of Sylvia Plath and her efforts to bury herself beneath the subbasement of her mother's house. In a moment of clear vision, Charlotte and her husband finally agreed on a divorce. "There was no quarrel, no blame for either one, never an unkind word between us, unbroken mutual affection—but it seemed plain that if I went crazy it would do my husband no good, and be a deadly injury to my child" (*The Living*, p. 96).

The fear of committing a deadly injury to her child would seem to be in light of psychoanalytic theory an unconscious repetition of the traumatic wound inflicted upon Charlotte Perkins Gilman when she was a child herself. The irony is stunning. The little girl's identification with the absent father, along with the aspiration for the glorious work that was a male privilege in a sexist society, was so intense as to compel her against her will to become her own father and, like him, to abandon spouse and baby. She could not express rage toward her husband because, as her biographer records, she had never been honest and open with him about her feelings.¹⁰ The silent aggression she felt toward the father who abandoned her was now directed against herself. She fell desperately ill, overcome with confusion and guilt. Only by rejecting her own family, as her father had rejected his family 20 years earlier, could she free herself from the weakness and passivity that symbolized to her the condition of motherhood.

In her imagination babies came to be associated with death, bereavement, and abandonment. The deaths in infancy of two of Mary Perkins' four children indicated that, not only were the odds poor to have a healthy child, but the mother's life was also imperiled. Sex must have seemed irresponsible, procreation deadly. The act of childbirth probably evoked the fear of mutilation. The emotions Charlotte felt when she gave birth were appropriate for a funeral. Instead of rejoicing, she went into a period of mourning. The child drained her and threw her into a "black helplessness" with its "deadness of heart, its aching emptiness of mind." In becoming pregnant she was repeating her mother's dreadful mistake. Pregnancy implied maternal sacrifice bordering on suicide. "The surrender of the mother to the child is often flatly injurious, if carried to excess," she acknowledges in *Concerning Children*, and indicts motherhood as the ultimate human sacrifice:

To put it in the last extreme, suppose the mother so utterly sacrifices herself to the child as to break down and die. She then robs the child of its mother, which is an injury. Suppose she so sacrifices herself to the child as to cut off her own proper rest, recreation, and development. She thus gives the child an exhausted and inferior mother, which is an injury to him. There are cases, perhaps, where it might be a mother's duty to die for her child; but, in general, it is more advantageous to live for him. The "unselfish devotion" of the mother we laud to the skies, without stopping to consider its effect on the child. This error is connected with our primitive religious belief in die doctrine of sacrifice,—one of those early misconceptions of a great truth.

In contrast to mother's world, which symbolized death and martyrdom,

father's world promised work, achievement, power. Charlotte's mother had placed two prohibitions upon her: She was to read no novels and to have no close friends. The first prohibition must have seemed incongruous in that Charlotte's father was a distinguished librarian, rising to be head of the San Francisco and Boston Public Library. Frederick Perkins, who "took to books as a duck to water," founded several influential newspapers and journals, introduced the decimal system of classification, and wrote a reference book called *The Best Reading* that became a standard work. Not only did his daughter carry on the father's achievements, she far exceeded them. She was an enormously prolific and successful writer, authoring the equivalent of 25 volumes of stories, plays, and verse. Her greatest single achievement was the writing, editing, and publishing of the *Forerunner*, a monthly magazine that lasted for seven years. Women and Economics, published in 1898, was translated into seven languages and went through seven English language editions. She wrote the first draft in 17 days, the second draft in 58 days. "To write was always as easy to me as to talk," she remarks, and her astonishing productivity would seem to indicate that she wrote and read effortlessly.

Nothing could be further from the truth. There were long periods of time when the act of writing or reading would throw her into black despair. To the end of her life she suffered from what she could diagnose only as a "weak mind." Often she could not read the easiest book or write the simplest letter. "When I am forced to refuse invitations, to back out of work that seems easy, to own that I cannot read a heavy book, apologetically alleging this weakness of mind, friends gibber amiably, 'I wish I had your mind!' I wish they had, for a while, as a punishment for doubting my word" *(The Living,* p. 98). No one could believe her mental distress nor the inexplicable nervous exhaustion that would cripple her mind and paralyze her will. "The natural faculties are there, as my books and lectures show. But there remains this humiliating weakness, and if I try to drive, to compel effort, the resulting exhaustion is pitiful" *(The Living,* p. 100). Nor did the self-torture long abate. She describes the landscape of her mind as a depleted library, bereft of the books so vital to its wellbeing:

To step so suddenly from proud strength to contemptible feebleness, from cheerful stoicism to a whimpering avoidance of any strain or irritation for fear of the collapse ensuing, is not pleasant, at twenty-four. To spend forty years and more in the patient effort of learning how to carry such infirmity so as to accomplish something in spite of it is a wearing process, full of mortification and deprivation. To lose books out of one's life, certainly more than ninety per cent of one's normal reading capacity, is no light misfortune (*The Living*, p. 100).

"What is the psychology of it?" she asks mournfully. The answer, we suspect, lies in the library.

It is significant that twice in the autobiography she refers to the library as a symbol or symptom of the crippling psychological illness to which she was prone. "I say my mind is weak. It is precisely that, weak. It cannot hold attention, cannot study, cannot listen long to anything, is always backing out of things because it is tired. A library, which was once to me as a confectioner's shop to a child, became an appalling weariness just to look at" (The Living, p. 100). One page later she elaborates on the peculiar symptomatology of her illness. "For nearly all these broken years I could not look down an index. To do this one must form the matrix of a thought or word and look down the list until it fits. I could not hold that matrix at all. could not remember what I was looking for. To this day I'd rather turn the pages than look at the index." The autobiography reads like a Gothic horror story here; for the library, which had once enticed her as a confectioner's shop lures a hungry child, came to represent the feelings of betrayal and abandonment associated with her father's flight from the family into the world of the library and publishing. The price she paid for imitating her father's glorious male achievements was a lifetime of neurotic suffering, part of her paternal legacy. The father's distinguished professional career had included the introduction of the decimal system of classification. Years later his brilliant daughter found herself unable to read the index of a book.

Another symptom of her lifelong struggle against mental illness appears to be related to a childhood incident—the pain of correspondence. As a child she had pleaded with her absent father to write her letters. In the only letter from which she quotes in the autobiography, Charlotte implores him to write. First there is a request for money, then for personal news. "Please write a real long letter to me," the 12-year-old asks, repeating the request two sentences later. "I wish you would write to me often" *(The Living,* p. 22). In the same letter she complains that, whereas other people write to her brother, no one writes to her. She encloses two pictures in the hope that her father will reciprocate. Years later she found herself in the opposite position, dreading the letters sent to her by friends and admirers. She could not answer them. "Perhaps the difficulty of answering letters will serve as an illustration of the weakness of mind so jocosely denied by would-be complimenters":

Here are a handful of letters—I dread to read them, especially if they are long—I pass them over to my husband—ask him to give me only those I must answer personally. These pile up and accumulate while I wait for a day when I feel able to attack them. A secretary does not help in the least, it is not the manual labor of writing which exhausts me, it is the effort to understand the letter, and make intelligent reply. I answer one, two, the next is harder, three—increasingly foggy, four—it's no use, I read it in vain, *I don't know what it says.* Literally, I can no longer understand what I read, and have to stop, with my mind like a piece of boiled spinach (*The Living*, p. 99).

The humiliating inability to answer her correspondence reflects a deep ambivalence toward a father who rejected his family to live quite literally in the library. The pattern of Charlotte's life consisted of escape from the woman's sanctuary of home and hearth into the father's exciting world of letters; but, no sooner did she achieve the success she had envisioned through dedication and hard work, than her neurotic suffering would return, driving her back to the mother's sickroom. She could not achieve success without imagining failure; to emulate father she had to abandon mother. The world of

books and ideas remained antithetical to the world of people and emotions, and she could never integrate her paternal and maternal identifications. Her father remained impossibly aloof and uncaring. To recover from her breakdown, she left her husband and daughter to travel across the country to California, where she visited her father. He engaged a room for her and solemnly called upon her as if she were a distant acquaintance. She stayed for a few days and upon leaving politely extended an invitation to him. "If you ever come to Providence again I hope you will come to see me"; he replied: "Thank you, I will bear your invitation in mind" (The Living, p. 93). The offenses to which she confesses during her periods of mental illness were the identical crimes of which her father was guilty. "My forgetfulness of people, so cruel a return for kindness; an absentmindedness often working harm; many a broken engagement; unanswered letters and neglected invitations; much, very much of repeated failure of many kinds is due wholly to that continuing weakness of mind" (The Living, p. 102). Her father achieved success, fame, and independence but at the expense of love, responsibility, and loyalty. In fathering herself, she was tortured by the fear that she had to make the same sacrifice, with her husband and daughter as victims.

And her feelings toward mother? Filial loyalty prevented her from criticism, except when she describes the mother's rejection of the child's caresses. But even during this moment, when any other writer would have expressed righteous indignation and anger, she holds back, content to

mythologize the mother's "heroic" determination to spare her child from future suffering. She could never admit that her mother was responsible for her own depression. As Patricia Meyer Spacks observes in The Female *Imagination,* "The force destroying beauty, hope, and love for her is in fact her mother, whose energy, as her daughter describes her, directs itself entirely toward rejection, suppression, denial."¹² Although she could not criticize her own mother, she could attack other mothers, as an amusing passage in the autobiography makes clear. Once, when she was feeling so ill that she should have been placed in a sanitarium, a brisk young woman greeted her with the words: "You don't remember me, do you?" Looking at her emptily, Charlotte "groped slowly about in that flaccid vacant brain of mine for some association." A memory arose. Speaking like a four-year-old child, she answers: "Why yes, I remember you. I don't like your mother." To the reader she adds: "It was true enough, but never in the world would I have said such a thing if I had been 'all there' " (*The Living*, pp. 101-102). She characterizes her behavior as "feeble-mindedness" bordering on "an almost infantile responsibility." Nevertheless, her rage toward mothers could not be totally repressed.

In fact, Charlotte Perkins Gilman spent a lifetime in critiquing motherhood. The attack was relentless. She condemned the cult of home and domesticity with a power that none of her contemporaries could rival. Many of the ideas that seemed so radical at the turn of the century are now taken

for granted. She exposed the perniciousness of sex roles which confined women to housecleaning and babysitting, and she spoke out against the disastrous social and political consequences of the suppression of women's rights. At the heart of her attack was the worship of motherhood, "Matriolatry," as she bitterly called it. "Of all the myths which befog the popular mind," she writes in *The Home*, "of all false worship which prevents us from recognizing the truth, this matriolatry is one most dangerous. Blindly we bow to the word 'mother'—worshipping the recreative processes of nature as did forgotten nations of old time in their great phallic religions."¹³ Implicit in the last sentence is the aversion to sexuality that inevitably accompanies her attack. A more ferocious indictment of motherhood appears in *Women and Economics.* The shrillness of her language alerts us to the painful autobiographical elements she could not quite exorcise from the otherwise carefully reasoned argument:

Human motherhood is more pathological than any other, more morbid, defective, irregular, diseased. Human childhood is similarly pathological. We, as animals, are very inferior animals in this particular. When we take credit to ourselves for the sublime devotion with which we face 'the perils of maternity,' and boast of 'going down to the gates of death' for our children, we should rather take shame to ourselves for bringing these perils upon both mother and child.¹⁴

To suggest that Charlotte Perkins Gilman's assault on home and motherhood originated from her own unhappy childhood, and that in attacking all mothers she was condemning her own mother, does not

invalidate the prophetic truth of her ideas or the extent to which she reflected and shaped the growing women's movement. Nevertheless, we may question whether she was consciously aware of the early childhood events that influenced her writings. Carl Degler has noted the two central theses of *The* Home-that the "home crushed women" and that it was "dirty, inefficient, uninteresting and retrogressive." Yet, when he praises Gilman's book as a "model of the completely rationalistic analysis of an ancient human institution," he is underestimating the decisive role played by unconscious forces in shaping the tone and imagery of her attack.¹⁵ Her opposition to the traditional family structure cannot be appreciated fully without an awareness of her own family matrix of maternal martyrdom and paternal abandonment. Nor can her account of madness in "The Yellow Wallpaper" be adequately understood without a recognition of her own struggle against mental illness and the obstacles she had to confront both in her personal and professional life. In exposing the "pathological" nature of human childhood, she was confessing both to her mother's failure and her own. $\frac{16}{16}$ Poor mothering opened the gates of death to her, first as the innocent victim of her parents' union, then as the involuntary victimizer of her own daughter's childhood. Her final estimate of motherhood may be gleaned from the end of her book Women and Economics. Under the heading "Mother" and "Motherhood" appear her various indictments, with the appropriate page numbers: "criminal failure of." "a bad baby-educator." "result of servitude of." "not an exchangeable commodity," "disadvantages of," "deficiencies of," "the pathology of human," "unpreparedness for," "professions unsuitable to," "old methods of," "open to improvement," and "false perspective taught by primitive." These accusations are neatly arranged in a list appearing in—where else?—the Index. She was, finally, her father's daughter.

* * *

We are now almost ready to explore the details of Charlotte Perkins Gilman's breakdown, her experience with S. Weir Mitchell's "rest cure," and her fictional treatment of madness in "The Yellow Wallpaper." Her encounter with Mitchell takes on additional interest in light of the psychiatrist's fame as a novelist. Indeed, Mitchell's reputation as a psychiatrist and novelist was unsurpassed in his lifetime. Had he realized the implications of the therapeutic advice he gave to his then unknown patient—"... never Touch pen, brush or pencil as long as you live"—he might have understood the personal and national calamity his psychiatry nearly wrought.

"Silas Weir Mitchell was almost a genius," E. Earnest begins in the Foreword to his book, "His contemporaries believed that he was one, an opinion Mitchell came to share."¹⁷ Medical historians agree that he was the foremost American neurologist of his time. In 1874 he was unanimously elected as the first president of the American Neurological Association. For

decades his medical treatises remained the standard textbooks on the subject: *Gunshot Wounds and Other Injuries of the Nerves* (1864), *Wear and Tear* (1871), *Injuries of Nerves and Their Consequences* (1872), *Tat and Blood* (1877), and *Doctor and Patient* (1888). His discovery of the nature of rattlesnake venom laid the foundation for important toxicological and immunological research. He was less a psychiatrist in the modern sense of the word than a neurologist, a "nerve doctor" to whom patients were referred suffering from mysterious motor and sensory disorders. "It was the neurologists rather than the psychiatrists who reintroduced 'physical' methods of treatment of psychiatric disorders; whereas the psychiatrists became more and more the explorers of personality' reactions and the neurologists threw in the sponge."¹⁸

Mitchell's main contribution to neurology' was the introduction into the United States of the "rest cure," also called the "Weir Mitchell Treatment." The rest cure consisted of prolonged rest in bed and isolation, overfeeding, and daily body massage. *Fat and Blood* contains a graphic description of the rest cure. "As a rule," notes Mitchell, "no harm is done by rest, even in such people as give us doubts about whether it is or is not well for them to exert themselves." His notion of rest contains little that a hypochondriacal patient would find attractive:

To lie abed half the day, and sew a little and read a little, and be interesting as invalids and excite sympathy, is all very well, but when they are bidden to stay in bed a month, and neither to read, write, nor sew, and to have one nurse,—who is not a relative,—then repose becomes for some women a rather bitter medicine, and they are glad enough to accept the order to rise and go about when the doctor issues a mandate which has become pleasantly welcome and eagerly looked for.¹⁹

Normally the psychiatrist required the patient to remain in bed for six to eight weeks. During the first month, Mitchell did not allow her (he generally uses the female pronoun) to sit up, sew, write, or read. She cannot even use her hands except to brush her teeth. Although Mitchell does not use the word, the regimen is designed to "baby" the patient, to facilitate a total physical and emotional regression to the condition of infancy. "... the sense of comfort which is apt to come about the fifth or sixth day,—the feeling of ease, and the ready capacity to digest food, and the growing hope of final cure, fed as it is by present relief,-all conspire to make patients contented and tractable."²⁰ The rest cure obviously worked on the symptoms of mental illness, not on the sources. At best, it could lead to a patient's temporary improvement. It was not psychotherapy: No effort was made to probe the dynamics of mental illness. Though Mitchell's rest cure coincided exactly with Anna O.'s talking cure, Freud's major discoveries were still several years away.²¹ What seems most offensive about Mitchell's rest cure was its aim to make patients tractable. Most of the people he treated were women; those who did not passively submit to him provoked his ire. To his colleagues his

treatment of women appeared protective and kind; to us his methods seem paternalistic and degrading. "Wise women choose their doctors and trust them," he writes in *Doctor and Patient.* 'The wisest ask the fewest questions. The terrible patients are nervous women with long memories, who question much where answers are difficult, and who put together one's answers from time to time and torment themselves and the physician with the apparent inconsistencies they detect."²² A nervous woman, he adds, "should be made to comprehend at the onset that the physician means to have his way unhampered by the subtle distinctions with which bedridden women are apt to trouble those who most desire to help them."²³ His portrait of the neurasthenic woman evokes an image of bitchy evil:

I do not want to do more than is needed of this ungracious talk: suffice it to say that multitudes of our young girls are merely pretty to look at, or not that; that their destiny is the shawl and the sofa, neuralgia, weak backs, and the varied forms of hysteria,—that domestic demon which has produced untold discomfort in many a household, and, I am almost ready to say, as much unhappiness as the husband's dram. My phrase may seem outrageously strong, but only the doctor knows what one of these selfmade invalids can do to make a household wretched. Mrs. Gradgrind is, in fiction, the only successful portrait of this type of misery, of the woman who wears out and destroys generations of nursing relatives, and who, as Wendell Holmes has said, is like a vampire, sucking slowly the blood of every healthy, helpful creature within reach of her demands.²⁴

Ironically, both Mitchell and Charlotte Perkins Gilman agreed on the horror of this type of woman, and they even used similar metaphors of the "vampire" and "parasite" to describe her. But their agreement ended here. Mitchell aligned himself with the most conservative political and social positions in the country. He believed that women should not compete with men, intellectually or economically, and he maintained that women could not equal men in persistent energy or capacity for "unbroken brain-work." It would be better, he said, not to educate girls at all between the ages of 14 and 18 unless they were in unusually good health. ". . . our growing girls are endowed with organizations so highly sensitive and impressionable that we expose them to needless dangers when we attempt to overtax them mentally."²⁵ He did not worry about the dangers of under-taxing women.

Mitchell's other career was as a novelist. Although his fiction is almost entirely forgotten today, he was one of the most popular American novelists between 1885 and 1905. His Renaissance versatility prompted his contemporaries to view him as a Benjamin Franklin. A biographer notes that Mitchell's *Hugh Wynne* was compared to Thackeray's *Henry Esmond*, while his *Ode on a Lycian Tomb* was ranked with Milton's *Lycidas*. He translated the fourteenth-century poem *The Pearl* into modem verse, wrote a lively and controversial biography of George Washington, and created a children's story that went through 12 editions. Only after he established his medical reputation in the mid-1880s did he begin to write and publish fiction. He was 55 years old when his first novel, *In War Time*, was published in 1884. Other novels soon followed: *Roland Blake* (1886), *Characteristics* (1891), *Hugh Wynne* (1896), the immensely popular *Dr. North and His Friends* (1900), and *Westways* (1913), published one year before his death at the age of 85. In all there were 19 novels, several volumes of short stories, and three volumes of poetry. The bulk of Mitchell's art covers 6500 pages in the *Definitive Edition*.

Although Mitchell was obviously interested in psychiatric themes, he was not, oddly enough, a psychological novelist. Whether it was due to aristocratic restraint, neurological training, or simple incuriosity, he did not search very deeply for the psychological origins of his protagonist's conflicts and breakdowns. David Rein observes in S. Weir Mitchell as a Psychiatric Novelist that "in pursuing a psychological cause he was inclined to take a physiological direction." $\frac{26}{2}$ Rein also remarks that, if one reads Mitchell's fiction in light of his psychiatric case studies, he is bound to be surprised and disappointed by what the novelist fails to include. "He created no characters exhibiting the more spectacular forms of hysterical illness such as he described in his medical writing."²⁷ Curiously, Mitchell makes a statement in Doctor and Patient that any psychoanalyst would endorse. "The cause of breakdowns and nervous disaster, and consequent emotional disturbances and their bitter fruit, are often to be sought in the remote past. He may dislike the quest, but he cannot avoid it." $\frac{28}{28}$ This statement is untypical, however, of Mitchell's approach to character. Contrary to his own advice, he disliked the investigation into his patients' remote past and therefore avoided it. He remains silent on what we would consider today the root causes of mental illness—unempathic parents, identity problems, sexual conflicts, unconscious aggression.

Mitchell's aesthetic theory may be seen from this passage in *Doctor and Patient:* "The man who desires to write in a popular way of nervous women and of her who is to be taught how not to become that sorrowful thing, a nervous woman, must acknowledge, like the Anglo-Saxon novelist, certain reputable limitations. The best readers are, however, in a measure cooperative authors, and may be left to interpolate the unsaid."²⁹ Discretion and respectful vagueness should be the novelist's guiding principle. The psychiatrist had no desire to evoke medical realism in his fiction. "In older times the sickness of a novel was merely a feint to gain time in the story or account for a non-appearance, and the doctor made very brief show upon the stage. Since, however, the growth of realism in literary art, the temptation to delineate exactly the absolute facts of disease has led authors to dwell freely on the details of sickness." $\frac{30}{10}$ Mitchell disapproved of those novelists interested in depicting illness and symptomatology. "Depend upon it," he exclaims, the modern novelist "had best fight shy of these chronic illnesses: they make queer reading to a doctor who knows what sick people are; and above all does this advice apply to death-beds." $\frac{31}{5}$ Fortunately, not all novelists followed the doctor's orders here.

The basic facts of Charlotte Perkins Gilman's treatment with Mitchell come from two sources: a one-page article called "Why I Wrote the Yellow

Wallpaper" published in a 1913 issue of *The Forerunner* and the chapter in her autobiography entitled "The Breakdown." Mitchell apparently never wrote about her in his psychiatric or fictional works. After suffering for about three years from a "severe and continuous nervous breakdown tending to melancholia-and beyond," she decided to visit Mitchell, "at that time the greatest nerve specialist in the country." She took the rest cure with the utmost confidence, prefacing the visit with a long letter in which she gave the history of the case in a way that a "modern psychologist would have appreciated." Mitchell thought the letter proved only self-conceit, perhaps because of what she called his prejudice against the Beechers. " 'I've had two women of your blood here already,' he told me scornfully." The psychiatrist seemed familiar with only two types of nervous prostration-that of the businessman exhausted from too much work and the society woman exhausted from too much play. He had difficulty in diagnosing her case although he did assure her there was no "dementia," only "hysteria." He ordered her to bed where she was fed, bathed, and rubbed. After about a month of the treatment he judged her cured and sent her home. She records his prescription along with her feelings at that time:

"Live as domestic a life as possible. Have your child with you all the time." (Be it remarked that if I did but dress the baby it left me shaking and crying—certainly far from a healthy companionship for her, to say nothing of the effect on me.) "Lie down an hour after each meal. Have but two hours' intellectual life a day. And never Touch pen, brush or pencil as long as you live" (*The Living*, p. 96).

She went home, followed his directions faithfully for three months, and nearly lost her mind. The mental agony was so unbearable that she would sit blankly, moving her head from side to side, to escape the pain. No physical pain was involved, not even a headache, "just mental torment, and so heavy in its nightmare gloom that it seemed real enough to dodge." Rejecting the psychiatrist's advice, she finally committed herself to work, work which is "joy and growth and service, without which one is a pauper and a parasite," thereby recovering a degree of her former health.³²

Why did Mitchell's rest cure fail so miserably? The psychiatrist deified the worship of matriolatry which Charlotte Perkins Gilman feared and grew to despise. She was attempting to flee from the domestic prison of the mother's world—the parasitic world of abject dependency upon men, the depressing routine of endless drudgery, screaming babies, intellectual impoverishment, and helpless resignation. Mitchell's paternalistic therapy locked her into the mother's role, first by breaking her spirit and making her a baby again through the rest cure, then by imprisoning her with her own helpless baby. The rest cure could only deepen her psychic unrest; instead of helping her to accept the responsibilities of an adult or at least to understand her morbid fear of babies, Mitchell infantilized her further. His therapy deprived her of the opportunity to pursue her father's achievements and thus blocked her life-saving identification with the man who had fled from the home in quest of the magical world of ideas and books. Charlotte's health required neither childlike submission nor maternal self-sacrifice but the heroic challenge of Mitchell's own manly world. Two of the books she later wrote symbolize the direction of the therapy she needed: an escape from *The Home* in pursuit of *The Man-Made World*.

In contrast to Mitchell's dictum to return to her husband and presumably expand her family, Gilman chose the only form of pregnancy she could imagine—literary creation. From her agonizing labor with psychiatry was born "The Yellow Wallpaper." "It is a description of a case of nervous breakdown beginning something as mine did, and treated as Dr. S. Weir Mitchell treated me with what I considered the inevitable result, progressive insanity" (The Living, pp. 118-119). Midway through "The Yellow Wallpaper" the unnamed narrator refers to die psychiatrist to whom her physicianhusband is threatening to send her. "John says if I don't pick up faster he shall send me to Weir Mitchell in the fall."³³ Clearly it is a threat. "But I don't want to go there at all. I had a friend who was in his hands once, and she says he is just like John and my brother, only more so!" ("The Yellow Wallpaper," p. 19). Gilman does not actually describe in detail her own encounters with her therapist, as later writers were to do-Doris Lessing, Joanne Greenberg, Philip Roth. There is little attempt to characterize the psychiatrist apart from naming him (though implicitly he is linked to the sinister husband). "The Yellow Wallpaper" represents an early and shadowy attempt to describe a psychiatrist in a work of fiction. As the therapist's role in the patient's healing

process is expanded in later works, so, too, will be the depth of his or her characterization. Moreover, a therapy that involves no talking, as was the case with Mitchell's rest cure, can produce little characterization and dialogue.

Why, then, does Gilman name her psychiatrist at all? Probably for several reasons: the effort to establish medical authenticity, the willingness to acknowledge the autobiographical roots of the story, and the desire to recompense the doctor for his costly therapy. Far from suggesting the writer's flight from reality, or what Freud might call the neurotic's escape into fantasy, "The Yellow Wallpaper" prophesied the frightening outcome of Mitchell's psychiatry had the patient dutifully followed his advice. Gilman boldly reversed art and life: The eerie realism of "The Yellow Wallpaper" exposed the psychiatrist's rest cure as an evil fiction having nothing to do with reality.

It is interesting to compare the two accounts of mental illness in the autobiographical *The Living of Charlotte Perkins Gilman* and the fictional "The Yellow Wallpaper." There is no doubt about the greater truthfulness of art. The achievement of "The Yellow Wallpaper" lies in its ruthless honesty, accuracy, and power. Free from the constraints of hurting people in real life, the artist is free to imagine the unnerving details of her protagonist's story. In the autobiography, Gilman describes her husband as a patient and long-suffering man, the ideal spouse. She refers to his "unbroken devotion, his manifold cares and labors in tending a sick wife, his adoring pride in the best

of babies . . ." *(The Living,* p. 97). Stetson becomes a husband less human than saintly, a heroic portrait like the one of Charlotte's mother. The following sentence is typical of her characterization of him. "He has worked for me and for us both, waited on me in every tenderest way, played to me, read to me, done all for me as he always does. God be thanked for my husband" *(The Living,* p. 88).

Gilman projects these qualities onto the narrator's husband in "The Yellow Wallpaper" but with a different emphasis. The husband displays solicitude but also incomprehension and insensitivity. Baffled by his wife's mysterious illness, he seems to aggravate the situation—indeed, she hints that he is responsible for her illness. "John is a physician, and perhaps-(I would not say it to a living soul, of course, but this is dead paper, and a great relief to my mind)—perhaps that is one reason I do not get well faster" ("The Yellow Wallpaper," pp. 9-10). The narrator's unconscious resentment of the husband momentarily surfaces here, allowing us to glimpse the truth. Nowhere in the autobiography is Gilman emboldened to voice a similar criticism, although that is the only inference a reader can draw. John's disbelief in the narrator's illness intensifies her suffering. "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?" ("The Yellow Wallpaper," p. 10). He can urge only the platitudes of increased willpower and selfrestraint. Whereas in her autobiography Gilman feels obligated to remain silent over her husband's role in her illness, in her art she can admit through the narrator to becoming "unreasonably angry" with him.

"The Yellow Wallpaper" also dramatizes the husband's prohibition against writing. "He says that with my imaginative power and habit of storymaking, a nervous weakness like mine is sure to lead to all manner of excited fantasies, and that I ought to use my will and good sense to check the tendency. So I try" (pp. 15-16). Mitchell, we recall, had similarly prohibited his patient from writing. It is thus ironic that both the narrator's husband and Gilman's psychiatrist forbid their patients from the one life-saving activity, artistic creation. What proves therapeutic in Gilman's world is neither marriage nor psychiatry but art, and, when the narrator's husband deprives her of this activity in "The Yellow Wallpaper," her fate is sealed.

Opposed to the liberating world of art is the enslaving domesticity of the home. The woman remains isolated in the nursery of an old ancestral house, a "hereditary estate," that is part of an obscure national heritage. "The Yellow Wallpaper" foreshadows Gilman's more extensive assault on domesticity culminating several years later in *The Home.* Filled with "hedges and walls and gates that lock," the house reflects the alienation of nineteenth-century America, with its cult of domesticity and worship of children. The husband and wife live in the nursery at the top of the house, with barred windows for little children. The narrator's perception of the nursery slowly changes. In the beginning it seems like a big airy room to her, but after two weeks it becomes claustrophobic in its heavy bedstead, barred windows, and gate at the head of the stairs. The imagery identifies the home as a prison without escape. The woman rarely leaves the nursery, not even to look at her baby who is housed on a lower floor.

The most horrifying feature of the house, and the source of the story's great power, is the yellow wallpaper in the nursery. "It is dull enough to confuse the eye in following, 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" (p. 13). The wallpaper becomes a projection screen or Rorschach test of the narrator's growing fright. The chaotic pattern symbolizes her own unheard emotional contradictions: her need for security yet fear of dependency and entrapment; her acceptance of the American Dream (marriage, family, house) amidst the nightmare of reality; her passive acceptance of duty but rising protest. The narrator's perception of the wallpaper's suicide foreshadows her own selfdestructive behavior. Indeed, the wallpaper functions as a Poesque black cat or telltale heart, the object upon which her madness is focused. There is a difference, however, between Poe's stories and Gilman's. The reader of "The Black Cat" or "The Tell-Tale Heart" soon learns that the first person narrator

is crazy and can thus distance himself from the homicidal character. The reader of "The Yellow Wallpaper," by contrast, is far more sympathetic to the heroine and is almost seduced into sharing her increasingly psychotic point of view. The old ancestral house and its vision of America are enough to drive almost anyone mad. Yet, what we see in "The Yellow Wallpaper" is not simply an oppressive environment or a deranged woman but an organic connection between setting and character. Madness does not spring from nowhere. The story's richness lies in its ability to yield multiple meanings and points of view —psychological, sociological, historical. The house has rich symbolic meaning in "The Yellow Wallpaper": the domestic imprisonment of nurel America, the repression of the body. ("The human body as a whole is pictured by the dream-imagination as a house and the separate organs of the body by portions of a house," Freud tells us in *The Interpretation of Dreams*.³⁴

Although critics have admired the complex symbolism of the yellow wallpaper, they have not sufficiently explored the relationship between the inanimate pattern and the narrator's mind, in particular, her fear of children. The violence of her imagery is striking. "There is a recurrent spot where the pattern lolls like a broken neck and two bulbous eyes stare at you upside down" (p. 16). Many of the images she uses to describe the wallpaper appear to be related to the "dear baby" whom she cannot bear to be with. Her only reference to the baby implies relief that "it" does not occupy the upstairs nursery where she and her husband live. "If we had not used it, the blessed child would have! What a fortunate escape! Why, I wouldn't have a child of mine, an impressionable little thing, live in such a room for worlds" (p. 22). True, she expresses love and concern for the baby, yet she is also solicitous toward her husband, and we know that behind this surface calm lies unconscious aggression. Is she similarly hostile toward her baby?

If so, we suspect this was not part of the author's conscious intentions. There is too much evidence, however, to ignore. The new mother's description of the wallpaper evokes an image of an insatiable child who seems to be crawling everywhere, even into the nursery which remains her only sanctuary. The unblinking eyes stare at her as if the baby demands to be nursed or held. "I get positively angry with the impertinence of it and the everlastingness. Up and down and sideways they crawl, and those absurd, unblinking eyes are everywhere" (p. 16). Her next free association is revealing. "I never saw so much expression in an inanimate thing before, and we all know how much expression they have! I used to lie awake as a child and get more entertainment and terror out of blank walls and plain furniture than most children could find in a toy-store" (pp. 16-17). Even as she renders the child into an inanimate object and consequently distances herself from its needs, the lifeless wallpaper assumes the characteristics of an angry child who grows increasingly demonic. She literally cannot escape from the baby because her imagination has projected it onto the landscape of her bedroom.

Inanimate one moment and human the next, the baby evokes contradictory emotions within her—both tenderness and resentment. The baby also reminds the anxious mother of her own infancy. She tells us significantly that, when she was a child, the love and attention she craved were met with blank walls—just as her virtually motherless child meets with blank walls downstairs. The implication is that her present illness originates from an early childhood abandonment similar to the one her own child is encountering.

Tight-lipped about her own child, she speaks harshly about other children. The furniture in her bedroom had been scarred by the children of the previous owners: "I never saw such ravages as the children have made here" (p. 17). The room itself has been the victim of the children's vicious attack. The floor is "scratched and gouged and splintered," the plaster "is dug out here and there," and the great heavy bed "looks as if it had been through the wars" (p. 17). Later she returns to the oral imagery: "How those children did tear about here! This bedstead is fairly gnawed!" (P-34).

The narrator's dilemma, then, is to escape from the voracious children who threaten to devour her body, just as they have gnawed upon the room. And indeed the other sub-pattern in the wallpaper reveals the figure of a strange woman skulking about the room. There is no doubt about her identity. "And it is like a woman stooping down and creeping about behind that pattern" (p. 22). By daylight the figure appears subdued, but at night she begins to crawl around. In the narrator's words, "You think you have mastered it, but just as you get well underway in following, it turns a backsomersault and there you are. It slaps you in the face, knocks you down, and tramples upon you. It is like a bad dream" (p. 25).

Interpreted according to dream logic, the wallpaper recreates the mother's inescapable horror of children and her regression to infancy. The pattern and sub-pattern mirror her terrified identification with the abandoned child and abandoning mother. The roles of victim and victimizer become hopelessly blurred. Who is escaping from whom? In fleeing from the image of the baby, the mother confronts its presence in the wallpaper located, appropriately enough, in the nursery of the old ancestral home.

Here, the mysteries of birth, marriage, procreation, and death are played out in her imagination. The decision to isolate herself from her baby betrays the contradictory wish to protect and harm it. The child's identity remains ambiguous, both innocent and evil. The wallpaper imagery evokes an appalling eruption of subhuman life, uncontrolled reproduction. It is not just one organism but an endless stream of growth. "If you can imagine a toadstool in joints, an interminable string of toadstools, budding and sprouting in endless convolutions—why, that is something like it" (p. 25). From the psychoanalytic point of view of object relations, the narrator cannot

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separate her identity from the baby's: She is both the hysterical mother searching for freedom and the insatiable child demanding attention. The angry child within the adult seems responsible for the mother's illness. Nor is escape possible from the sickening yellow substance that oozes from the wall. Its mysteriousness contributes to the indefinable sexual menace lurking throughout the house and penetrating the woman's body. The movement of "The Yellow Wallpaper" is suggestive of the wife's efforts to avoid sexual defilement, beginning with her abortive attempt to sleep in the room downstairs, with its single bed, and ending with the outraged husband's cry for an ax to break into the room where she has barricaded herself.

Despite the pre-Freudian world of "The Yellow Wallpaper" and Charlotte Perkins Gilman's subsequent condemnation of psychoanalysis, the story is startlingly modern in its vision of mental illness.³⁵ Anticipating Freudian discoveries, the story suggests that psychological illness worsens when it is not acknowledged as real and that the rest cure is antithetical both to the talking cure and to the therapeutic value of artistic creation. Moreover, "The Yellow Wallpaper" portrays mental illness as originating from childhood experiences. Unlike Breuer's "Fräulein Anna O.," "The Yellow Wallpaper" shows the social and political as well as psychological implications of madness. Gilman rejects not psychotherapy, which Freud was introducing, but pseudo-therapy, which has always been with us. Gilman's narrator is one of the first in a long line of benumbed and bedeviled patients in American literature who search desperately for understanding but who, following die accepted medical advice of the time, lose their mind.

Gilman's achievement is that she is able to transform her narrator's bad dream into superb art. And here is where the literary brilliance of "The Yellow Wallpaper" comes into play. Although the narrator in the fictional story recalls the author's self-portrait in the autobiographical *The*

Living of Charlotte Perkins Gilman, 'The Yellow Wallpaper" contains a shape and unity consistent with the demands of art. The difference between fiction and life lies in the greater narrative distance and formal control of art. In her autobiography, Gilman remains mystified by the origin and meaning of her breakdown; she eloquently describes the pain and confusion of a lifetime of neurotic suffering, but she is finally baffled by its significance. She depicts her illness as a digression to a life of struggle and work, rather than as a continuing conflict that compelled her to invent constructive solutions to the problems of her age.

Fiction empowered her to rework sickness into art. Dr. Mitchell had diagnosed her illness as hysteria not dementia; "I never had hallucinations or objections to my mural decorations," Gilman parenthetically adds in "Why I Wrote The Yellow Wallpaper."³⁶ But, for artistic reasons, she decided to confer deadly psychosis on her narrator. Although the woman begins with

what her husband calls "temporary nervous depression—a slight hysterical tendency" (p. 10), she grows steadily insane until her situation is hopeless. In the beginning of the story, the narrator and the author are indistinguishable, but as the former becomes terminally insane, the latter remains firmly in control of the narrative, allowing the symbolic power of the wallpaper rather than authorial intrusions to expose the full horror. At the end, the narrator and author are worlds apart. Indeed, the technique of narrative distance and point of view is handled more confidently in "The Yellow Wallpaper" than in The Bell Jar, where Plath seems unable to imagine a character who is neither menacing nor locked into the bell-jar vision. We may continue to search for a full explanation of the bizarre events in "The Yellow Wallpaper," but this is secondary to witnessing a mind in the process of self-extinction. Moreover, there is no specific moment in the story when we can say that the narrator has suddenly become mad. It happens mysteriously, imperceptibly. The crackup is frighteningly appealing because it allows her to defy and mock a husband who has taken on the role of a jailor. Gilman succeeds admirably in sketching a man whose dialogue sounds well-meaning but whose actions assume a diabolical quality. He prowls around the house in an effort to thwart his wife's escape. At the end he gains entry into his wife's bedroom, but then, in a cunning reversal of roles, he faints at her feet while she creeps over him.

The early readers of "The Yellow Wallpaper" keenly felt the story's horror, but not all of them were favorably impressed. William Dean Howells

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(who was a friend of both Gilman and Mitchell) admired the story. $\frac{37}{2}$ However, when he submitted it to *Atlantic Monthly* for publication, Gilman received a rejection from the editor with an indignant note: "I could not forgive myself if I made others as miserable as I have made myself!" (The *Living*, p. 119). When it was published, the story provoked anger and ill will. A physician sent a protest to the Boston Transcript complaining of the "morbid fascination" of "The Yellow Wallpaper" and questioning whether stories of such "deadly peril" should be published at all. On the positive side, another physician wrote to Gilman to praise "The Yellow Wallpaper" for its delicacy of Touch and correctness of portrayal. "From a doctor's standpoint, and I am a doctor, you have made a success. So far as I know, and I am fairly well up in literature, there has been no detailed account of incipient insanity." Thus began the claims and counterclaims for the story's psychiatric authenticity. In the same letter to Gilman, the physician wondered about her experience with mental illness. "Have you ever been-er-; but of course you haven't." Her reply was that she had gone as far as one could go and still return (*The Living*, pp. 120-121).

The real purpose of writing "The Yellow Wallpaper," she admits in her autobiography, was to reach S. Weir Mitchell and "to convince him of the error of his ways." Without denying the genuineness of her didactic aim, we can also speculate on the motive of revenge toward the psychiatrist who forbade her to Touch pen, brush or pencil again for as long as she livedwhich might not have been very long. 'The Yellow Wallpaper" thus came into existence against the orders of a psychiatrist who almost blocked the development of a major American thinker and writer. $\frac{38}{10}$ In writing "The Yellow Wallpaper" Gilman became a psychiatrist herself in the advice she offered to the nervous women who might be reading her story. She was not only shrinking her former psychiatrist to his proper size but also offering her readers the sympathy and understanding that the medical establishment could not give to women. There is justifiable pride in Gilman's voice when she speaks about the story's impact upon patients and doctors alike. "The little book is valued by alienists and as a good specimen of one kind of literature. It has to my knowledge saved one woman from a similar fate—so terrifying her family that they let her out into normal activity and she recovered."³⁹ Best of all was the story's effect on Mitchell. Although she had sent him a copy of "The Yellow Wallpaper" and received no acknowledgment, many years later she discovered that the famous specialist had indeed read the story and, as a result of it, altered his treatment of nervous illness. "If that is a fact," she boasts, "I have not lived in vain" (The Living, p. 121). As she concludes in "Why I Wrote the Yellow Wallpaper," "It was not intended to drive people crazy, but to save people from being crazy, and it worked."⁴⁰ No work of literature can accomplish more than this.

Notes

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- <u>1</u> Aileen S. Kraditor, *The Ideas of the Woman Suffrage Movement, 1890-1920* (New York: Columbia University Press, 1965), p. 97-
- 2 William L. O'Neill, "Introduction" to Charlotte Perkins Gilman, The Home: Its Work and Influence (1903; rpt. Urbana: University of Illinois Press, 1972), p. vii.
- <u>3</u> Andrew Sinclair, The Better Half: The Emancipation of the American Woman (New York: Harper & Row, 1965), p. 272.
- <u>4</u> Carl N. Degler, "Charlotte Perkins Gilman on the Theory and Practice of Feminism," *American Quarterly*, Vol. 8, No. 1 (Spring 1956), p. 22.
- 5 The Nation, June 8, 1899, P-443-Quoted by Degler, op. cit., p. 21.
- 6 Mary Gray Peck, Carrie Chapman Catt: A Biography (New York: H. W. Wilson, 1954), p. 454.

7 Ibid., p. 455.

- 2 Charlotte Perkins Gilman, *The Living of Charlotte Perkins Gilman: An Autobiography* (1935; rpt. New York: Harper and Row, 1975), p. 8. All references are to this edition. Born Charlotte Perkins in i860, she married Walter Stetson in 1884, gave birth to her daughter Katherine in 1885, and immediately suffered a breakdown. She divorced Stetson a few years later. In 1900 she married her cousin, Houghton Gilman. Curiously, in the 335-page autobiography she devotes only two sentences to her second husband. This is only one of many conspicuous omissions in her autobiography. The reader interested in learning more about Gilman's life should consult Mary A. Hill, *Charlotte Perkins Gilman: The Making of a Radical Feminist 1860-1896* (Philadelphia: Temple University Press, 1980). Although not psychoanalytic, the biography confirms Gilman's intense ambivalence toward her parents and also discusses her marital difficulties with Stetson and her tension toward her daughter Katherine.
- 9 Charlotte Perkins Gilman, "Parasitism and Civilized Vice," in Samuel D. Schmalhausen and V. F. Calverton, eds., *Woman's Coming of Age* (New York: Liveright, 1931), p. 123. Many of the feminists who have written on Gilman share her feelings toward Freud. Witness this judgment by her friend Zona Gale in the "Foreword" to *The Living:* "... after all her prophetic thinking, it comes about that to-day Mrs. Gilman is regarded by many of the new generation as reactionary, because of her impatience at the useful bunglings of

Freud, that husky bull in the Venetian-glass shop of certain still veiled equilibriums" (p. xxv).

10 Hill, op. cit., p. 130.

- <u>11</u> Charlotte Perkins [Stetson] Gilman, Concerning Children (Boston: Small, Maynard and Company, 1901), pp. 193-194.
- 12 Patricia Meyer Spacks, *The Female Imagination* (New York: Avon, 1976), p. 270.
- 13 Gilman, The Home, op. cit., p. 60.
- 14 Charlotte Perkins Stetson, Women and Economics (Boston: Small, Maynard and Company, 1899), p. 181.
- 15 Degler, op. cit., p. 36.
- 16 Not surprisingly, Gilman's biographer provides abundant evidence of the daughter's severe criticisms of her feminist mother. In interviewing Katherine Beecher Stetson Chamberlin in 1975, when Charlotte's daughter was 90-years-old, Mary Hill concluded that "Katherine's recollections of Charlotte suggest a repetition of themes of mother-daughter history Charlotte described with Mary. So often, as mothers, both Mary and Charlotte had been exhausted by economic and emotional responsibilities, and both Katherine and Charlotte criticized their mothers for being churlish and mean." (Hill, op. cit., p. 232.)
- 17 Ernest Earnest, S. Weir Mitchell: Novelist and Physician (Philadelphia: University of Pennsylvania Press, 1950), p. v.
- 18 Walter Freeman, The Psychiatrist: Personalities and Patterns (New York: Grune and Stratton, 1968), p. 6.

1919 S. Weir Mitchell, Fat and Blood (Philadelphia: Lippincott, 1884), pp. 57-58.

20 Ibid., pp. 60-61.

21 Interestingly, Freud was well aware of Mitchell's work and surprisingly sympathetic toward it. He

wrote a review of *Fat and Blood* in 1887 in which he praised Mitchell as the "highly original nerve specialist in Philadelphia" and endorsed the rest cure as a means to overcome severe and long established states of nervous exhaustion. See Freud, "Review of Weir Mitchell's *The Treatment of Certain Forms of Neurasthenia and Hysteria [Fat and Blood]," Standard Edition* (London: The Hogarth Press, 1966), Vol. I, p. 36. In the short essay "Hysteria" (1888), Freud elaborates on his praise for Mitchell:

In recent years the so-called "rest-cure" of Weir Mitchell (also known as Plairfair's treatment) has gained a high reputation as a method of treating hysteria in institutions, and deservedly so. . . . This treatment is of extraordinary value for hysteria, as a happy combination of *"traitement moral"* with an improvement in the patient's general nutritional state. It is not to be regarded, however, as something systematically complete in itself; the isolation, rather, and the physician's influence remain the principal agents, and, along with massage and electricity, the other therapeutic methods are not to be neglected *(Standard Edition*, Vol. I, p. 55).

In *Studies on Hysteria* (1895), Freud again praises Mitchell and observes that the rest cure in combination with cathartic psychotherapy yields excellent results, better results indeed than either method alone. Curiously, Freud makes a statement that a few years later he would have repudiated—that a danger of the rest cure is that patients "not infrequently fall into the habit of harmful day-dreaming" *(Standard Edition* [London: The Hogarth Press, 1955] Vol. II, p. 267). Freud later constructed a psychology that would make accessible for the first time the inner world of daydreaming which, when deciphered, offers clues into the causes of mental illness.

Incidentally, Freud's praise of Mitchell was never reciprocated. Like most of his colleagues, Mitchell was shocked and horrified by Freud's emphasis on sex. (This is one of the few sources of agreement between Mitchell and Gilman.) David Rein points out that "There are few references to sex in his books and articles on nervous diseases in women, nor is there much appreciation of the role of sex in normal behavior." See David M. Rein, *S. Weir Mitchell as a Psychiatric Novelist* (New York: International Universities Press, 1952), p. 44. Earnest comments that late in life Mitchell "attacked the psychoanalytic theories on the basis that they held 'that neurasthenia is always a disease of the mind alone—a psychogenesis.' His own belief was that 'a goodly proportion of

neurasthenia...has no more psychic origin than has a colic.' " Mitchell's biographer adds that "Today, of course, even the source of a colic would be sought in the mind." See Earnest, op. cit., pp. 228-229. According to Earnest, Mitchell was so incensed with psychoanalytic theory that when he began to read a book on Freud that he had borrowed from the medical library, he sputtered: "Where did this filthy thing come from?" and threw the book in the fire.

22 S. Weir Mitchell, Doctor and Patient (New York: Arno Press, 1972 [Reprint of 1888 edition]), p. 48.

23 Ibid., p. 49.

24 S. Weir Mitchell, Wear and Tear (New York: Arno Press, 1973 [Reprint of 1887 edition]), p. 32.

25 Ibid., p. 57.

26 Rein, op. cit., p. 46.

27 Ibid., p. 50.

28 Mitchell, Doctor and Patient, op. cit., p. 10.

29 Ibid., p. 12.

<u>30</u> Ibid., p. 72.

31 Ibid., p. 73.

- 32 The preceding account comes from Gilman, *The Living*, op. cit., pp. 95-96, and Gilman, "Why I Wrote the Yellow Wallpaper," *The Foreunner*, Vol. 4 (1913), p. 271.
- 33 Charlotte Perkins Gilman, *The Yellow Wallpaper* (1899; rpt. New York: The Feminist Press, 1973), p.
 18. All references are to this edition.

34 Freud, Standard Edition, (London: The Hogarth Press, 1953), Vol. IV, p. 225.

35 William O'Neill has observed that "Mrs. Gilman's personal difficulties, and her distrust of sexual

relations, prevented her from seeing that while popular Freudianism and the new sex ethic were certainly masculine in character, their purpose was not to divert women from marriage and motherhood but to re-popularize these institutions, to make them intellectually respectable, as it were." See *Everyone Was Brave* (Chicago: Quadrangle Books, 1971), p. 319.

<u>36</u> "Why I Wrote The Yellow Wallpaper," p. 271.

- 37 For a discussion of Howells' relationship to Mitchell, see Edwin H. Cady, *The Realist at War* (New York: Syracuse University Press, 1958), pp. 97-98. When Winifred Howells suffered what appeared to be a nervous breakdown in 1888, Howells called in Mitchell, an old friend and correspondent, to care for his daughter. In the words of Howells' biographer, "Mitchell agreed that Winifred's case was psycho-neurotic; he proposed to disregard her delusions of pain and force-feed her from her shocking state of starvation back to the place where he could safely treat her for hysteria." After the daughter's unexpected death, an autopsy was performed and revealed that her terminal illness was organic, not psychological. Howells was flooded with guilt and remorse, though he did not blame Mitchell for the incorrect diagnosis.
- 38 Mitchell seems to have played a more positive therapeutic role with another woman of letters, Edith Wharton. Edmund Wilson reports that Mitchell was instrumental in encouraging Wharton to write fiction during her nervous breakdown. See Wilson, *The Wound and the Bow* (New York: Oxford University Press, 1965), p. 160. Cynthia Wolff confirms the story in her biography, *A Feast of Words: The Triumph of Edith Wharton* (New York: Oxford University Press, 1967), p. 89. Joseph Lovering remarks, however, in *S. Weir Mitchell* (New York: Twayne, 1971), p. 26, that he is unable to corroborate this idea in any of the sources he has seen. There is no mention of Mitchell's relationship to Edith Wharton in another biographical study, Richard Walter, *S. Weir Mitchell, M.D.—Neurologist: A Medical Biography* (Springfield, Illinois: Charles C. Thomas, 1970).

39 Gilman, "Why I Wrote The Yellow Wallpaper," op. cit., p. 271.

40 Ibid., p. 271.

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