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Power play in *The Bell Jar* and "The Yellow Wallpaper"

- How power play is manifested towards the protagonists in *The Bell Jar* and "The Yellow Wallpaper"

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Abstract

This paper will attempt to analyze how similar forms of power play are manifested towards the protagonists in both *The Bell Jar* and "The Yellow Wallpaper". The aim of the essay is to investigate how power play affects the protagonists' relations with their caregivers and how it affects their treatments. Thus, the hypothesis is that it is the power play that prevents the protagonists in "The Yellow Wallpaper" and *The Bell Jar* from recovering from their mental illness, which is confirmed by my analysis. Therefore, the concept of power play will be used in the essay as an instrument of analysis. The hypothesis will be discussed from five main points: obstacles to recovery, caregivers' role in recovery, patients' response to treatment, the role of power play, and the negative impact which power play has on recovery.

Keywords: Power play, mental illness, treatment, recovery, patient-caregiver relationship, Charlotte Perkins Gilman, Sylvia Plath, Reet Sjögren.

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Introduction

Both Charlotte Perkins Gilman's short story "The Yellow Wallpaper" from 1892 and Sylvia Plath's novel *The Bell Jar* from 1963 are by American women authors and, as Goodman points out in her study *Literature and Gender,* they are also semi-autobiographical. "The Yellow Wallpaper" is about a nameless woman who suffers from postpartum psychosis after giving birth. She and her husband, who is a physician, move into a mansion, where he tries to treat her illness. In the same way, the protagonist, Esther, in *The Bell Jar,* is treated for a nervous breakdown by doctors and caregivers. The aspects in both of the stories that are going to be analyzed are how power and power play are manifested in these stories. The reason why the short story and the novel have been chosen is because they have power aspects and treatment aspects in common. This paper will attempt to analyze how similar forms of power play are manifested towards the protagonists in both *The Bell Jar* and "The Yellow Wallpaper".

In *Maktens former*, Hirdman attempts to explain what the term power means and states that power derives from people's own free will, since we are free to express it in various ways. According to Hirdman, power and relationships are connected, and the connection is observed through people's interaction. Hence, power exists and is manifested within a social context between individuals and between and within groups of people. For example, a person or a group of people who has been given power by others has thus received a position of power, but power positions can also be gained, given or taken (Hirdman, 57). Power relations between people are consequently a continuous struggle, since power relations are diversified and complex (Hirdman 57).

In *Vårdkommunikation I teori och praktik,* Stål states that some people are more vulnerable than others and for this reason need to be taken care of. This applies both to people

with somatic illnesses and to those who suffer from mental issues, since they are more vulnerable towards people's actions. This is where power relations become an important factor because, as I stated earlier, human relations are closely connected to power. Power can furthermore be manifested through dependence, since people in their deepest core are dependent on each other. Furthermore, some people could sometimes be more dependent on others which could result in one person having more power than the other. This kind of relation is an asymmetrical power relation. According to Stål, people who are psychologically vulnerable are very dependent on personnel within medical care in order to get well and are therefore caught up within an asymmetrical power relation (68).

Aim, hypothesis and outline

The main aim of this essay is to investigate how power play affects the protagonists' relations with their physicians and how it affects their treatments. Being forced to do something against one's will, by a person with a position of power, is according to my interpretation a manifestation of power play.

Both Budick, the literary scholar of the article "The Feminist Discourse of Sylvia Plath's the Bell Jar", and Goodman would interpret "The Yellow Wallpaper" and *The Bell Jar* by claiming that it is about women going mad because of patriarchy's pressure (873; 123). However, I do not agree with them. My hypothesis is that it is the power play that prevents the protagonists in "The Yellow Wallpaper" and *The Bell Jar* from recovering from their mental illness.

In *Rättspsykiatriskt vårdande : vårdande av lagöverträdare med psykisk ohälsa*, Sjögren explains that power play is a form of interaction between patients, physicians and

caregivers within psychiatry. In treatment, the power play is based on a system of reward and punishment. If patients wish to be released from the treatment center, they have to play along in the rules of power play (Sjögren 179-195).

This paper consists of an analysis which is divided into five subchapters. In the first subchapter, I will examine the popular beliefs that deal with the obstacles to the patients' recovery process. Throughout the paper, I will examine factors that point to other issues than those given by the scholars as to what I believe is the main issue facing the protagonists, namely the power play. In the second part of the analysis, I will discuss the roles that the caregivers have in the patients' recovery. Later in the analysis, the caregivers' roles will give a deeper understanding of how power play emerges. In the third part of the analysis, I will focus on the patients' response to treatment, in order to better understand the interaction between the patients and the caregivers. Now that I have objectively examined the caregivers' roles and the patients' response, the manifestation of power play becomes apparent. Therefore, the fourth part of the analysis will describe the role of power play and how it is manifested in "The Yellow Wallpaper" and *The Bell Jar*. In the final section, I will respond to the original opinions stated by the scholars at the beginning of the analysis. Moreover, I will discuss the negative impact of power play. Finally, in the conclusion I will sum up the essay and discuss my findings.

Analysis

Obstacles to recovery

Let me start off my analysis by explaining the different aspects of the obstacles the protagonists face on their road to recovery. The popular beliefs by certain scholars in regards to these obstacles need to be recognized. Bonds states in her article "The separative self in Sylvia Plath's the Bell Jar" that Esther is trapped in her own body, because she feels alienated from herself. The conflict within Esther is a result of the contemporary culture she lives in as well as society's marital demands (Bonds 61). Esther undergoes a rebirth, thus rebuilding a new identity. Esther, hence, creates her new identity by rejecting other characters from her culture in order to build up a new one (Bonds 55). Budick, however, claims that Esther was reborn through her second electric shock treatment. In contrast to Bonds's interpretation of Esther's mental illness, Budick argues that it was the doctor's medical treatment that saves Esther and helps her stabilize her personality (879-880).

In her survey of how women have been diagnosed and treated at various points in medical history, *Den mörka kontinenten*, Karin Johannisson has interpreted the novel, "The Yellow Wallpaper". One of Johannisson's theories is that the nameless protagonist chooses to play sick, because of her physician husband who strives to strengthen her sickness and thus to reinforce her role as a subordinate patient to him. Therefore, she is made sicker than she already is which enhances the asymmetrical power relation, where her husband has the superior position. Another theory that Johannisson has is that the protagonist's husband throws suspicion on her as a patient, and he does not believe that she is really sick; instead he believes that she is faking it and is exaggerating, in order to get sympathy and attention. Either way, she chooses to be sick and gets punished for it. Thus, she is subordinated to her

husband due to the passive treatment, whereas he gains authority and power over her (Johannisson 242-249).

Goodman also interprets the “Yellow Wallpaper”, but from a critical feminist point of view. She writes that the narrator is supposed to behave in a feminine way according to the gender norms. She is forbidden to write and carry out any intellectual activity. Therefore, Goodman argues that the narrator becomes mad. In other words, the thesis is that the narrator is driven into madness because of the rules of patriarchy (Goodman 123). Moreover, Goodman claims that the woman behind the wallpaper represents the narrator’s dual personality. By letting the double escape from imprisonment, the narrator also manages to break free from the pressure of patriarchy. In the article “The writer as doctor: New models of medical discourse in Charlotte Perkins Gilman’s later fiction”, Cutter writes that the purpose of “The Yellow Wallpaper” was to criticize the nineteenth-century model of medical discourse. Medical treatment in “The Yellow Wallpaper” was used in order to silence women. However, the narrator of the story objected on several occasions to the physician’s medical treatment, but he refused to listen to her (Cutter 156). The lack of interaction between patient and caregiver is an obstacle to the patient’s road to recovery (Cutter 156).

In her article “Escaping the sentence: Diagnosis and Discourse in ´The Yellow Wallpaper´”, Treichler analyzes women’s language and diagnosis in the story. Treichler’s own definition of diagnosis is put in the following way: “I use ´diagnosis´ then, as a metaphor for the voice of medicine or science that speaks to define women’s condition. . . . It is a male voice that privileges the rational, practical, and the observable” (65). Language is said to be a phenomenon which is used in the process of creating a diagnosis (Treichler 61). Treichler has also found that the tone in the narrator’s language shifts. In the beginning of the story, the narrator’s language is according to society’s norms. But as her hallucinations progress, she has defiance in her language. In other words, it becomes more impertinent (Treichler 74).

A psychological interpretation can be found in the article “Doctoring the Yellow Wallpaper” by Thrailkill. From the psychological perspective, the narrator is an observer of the wallpaper who starts diagnosing the women inside the wallpaper. Thus, she metaphorically becomes a doctor, but in the end she transforms into the patient (Thrailkill 548). In the article “Beyond the Yellow Wallpaper”, Oakley focuses on the protagonist’s passivity which is another obstacle to recovery. Oakley writes that the message of “The Yellow Wallpaper” is that it is bad for one’s mental health to be passive, in the same way as the patient undergoing the rest cure. Instead women suffering from postnatal depression should be encouraged to engage in different activities in order to recover (Oakley 31).

In *The Necessary Blankness: Women in Major American Fiction of the sixties*, Allen has analyzed the defiance of the protagonist in the novel *The Bell Jar*. Esther hates the idea of marriage, since marriage in her opinion is a symbol of entrapment. Therefore, she decides never to marry. Sexual purity is also very important at the time, but she also defies the contemporary rules of society by having premarital intercourse (Allen 68).

Caregivers’ role in recovery

To get a deeper understanding of how power play emerges within the recovery process in both texts, I must first examine the caregivers’ roles in both cases. In “The Yellow Wallpaper” ,the caregiver is the physician as well as the husband. It is he who diagnoses the narrator and he comes to the conclusion that her diagnosis is a temporary nervous depression. Therefore, he determines her treatment, which in this case is the rest cure. Stål mentions that the professional caregiver is the expert, because he has medical knowledge. Therefore, the patient is supposed to have trust in the caregiver (Stål 69-70). Regardless of the patient’s complaints and preferences, the physician does not adapt the treatment according to the developments of

her disease; rather he persists in his course of treatment. One such example of patient's request being ignored is the following quote:

> Dear John! He loves me very dearly, and hates to have me sick. I tried to have a real and earnest reasonable talk with him the other day, and tell him how I wish he would let me go and make a visit to Cousin Henry and Julia. But he said I wasn't able to go, nor able to stand it after I got there. (Perkins Gilman 7)

Despite the patient's clearly saying to the caregiver that she feels that the treatment is not working and the status quo maintains, the physician does not take her seriously, because he believes that she is underqualified to make such assumptions. For instance, when the patient says that she wants to leave the mansion, the physician says: "Can you trust me as a physician when I tell you so?" (Perkins Gilman 9). Another role he has is to supervise her treatment, by making sure that she is taking her medicine and that she is not breaking the rules of the rest cure. He expects her to tell him about her progress and well-being. Even the only confidant she is allowed any contact with, reports to the physician: "And I heard him ask Jennie a lot of professional questions about me. She had a very good report to give" (Perkins Gilman 13).

In *The Bell Jar*, there are three caregivers who take care of Esther's treatment: Esther's mother, Doctor Gordon and Doctor Nolan. When Esther starts becoming apathetic, her mother sends her to therapy in the hands of Doctor Gordon. After one traumatic electric shock session, Esther wants to stop therapy and her mother agrees. But after Esther's suicide attempt, her mother signs her into a mental institution against her will. In treatment, Esther's mother's role is to take care of her daughter and to make her continue treatment with her best interest in mind. The doctors and her mother are the ones who are in charge of her life, and they also make decisions for her. In the mental institution, Belsize, Esther is treated by Dr. Nolan. In order to win Esther's trust, Dr. Nolan uses his charisma. Stål writes that charisma is

one popular power technique and charisma is used by the caregiver to get the patient's trust (72). Esther's caregivers have similar responsibilities as the physician in "The Yellow Wallpaper" in regards to medication and supervision of the patient's progress. The main difference between the caregivers in these two stories is in Esther's case lack of family relations to her main caregivers: Dr. Gordon and Dr. Nolan. Because Esther's doctors have no family relations with her, they also have no personal agenda and can remain more objective towards Esther's progress. Thus, they are more inclined to reward her progress by giving her benefits.

Patients' response to therapy

Before I can further discuss the aspects of power play, I must analyze the second party in the recovery process namely the patients and their response to the treatments given. The patient in "The Yellow Wallpaper" resists the caregiver's rest cure therapy, but she agrees that she needs some kind of treatment and reluctantly agrees to his therapy because she feels he is superior in his expert knowledge. Further into treatment, she still feels that she would benefit more with activity rather than the passive rest cure her husband has put her on: "Personally, I believe that congenial work, with excitement and change, would do me good. But what is one to do?" (Perkins Gilman 2). Her physician husband's conditions are the following: "So I take phosphates or phosphites—whichever it is, and tonics, and air, and exercise, and am absolutely forbidden to ´work´ until I am well again" (Perkins Gilman 1). In other words, she is put on a rest cure, where she is forbidden to carry out any intellectual activity, and she also must take medication. The word, work, is put in inverted commas, because it means that she is not allowed to write. Stål mentions that when the caregiver uses physical isolation, he uses force. When he uses this power, the patient might object to treatment (Stål 71). The rest cure

is a huge issue for her, and it makes her question the conditions, and it also makes her to disagree with her husband. Although she is forbidden to write, she continues to do so in secret: “I did write for a while in spite of them; but it DOES exhaust me a good deal — having to be so sly about it, or else meet with heavy oppositions” (Perkins Gilman 2). The patient is irritated by the color of the wallpaper, so she complains to her caregiver and asks him to renovate the room, but he refuses by saying: “ nothing is worse for a nervous patient than to give way to such fancies” (Perkins Gilman 4). Another reaction to the treatment is that she manipulates her husband into believing that she follows the rules. She is aware that she is good at manipulating them. This she puts in the following words: “Of course I never mention it to them anymore — I am too wise” (Perkins Gilman 8).

From the beginning, Esther’s response to therapy is reluctant. During Esther’s electric shock therapy with Dr. Gordon, she becomes scared. Therefore, she tells her mother that she wants to quit Gordon’s electric shock therapy. By telling her mother that she wants to quit, she directly objects to therapy. After Esther quits therapy, she tries to commit suicide, because of the trauma of electric shock therapy. On one occasion in the novel, Esther speaks to Dr. Nolan about her electric shock experience: “If anyone does that to me again I’ll kill myself” (Plath 200). After Esther’s suicide attempt, her mother puts her into compulsory care. In the beginning of her treatment, she reacts to her treatment by not being co-operative, because she clearly does not want to stay there and because she does not feel that she can trust the caregivers here. As Stål writes, trust is important in the caregiver and patient relationship. If the trust is small, a conflict might emerge (49). But when she is treated by Doctor Nolan, who has a more positive influence on Esther, she reacts to treatment in a positive way. She is more receptive to treatment, and she is also co-operative. Even though Esther is responding in a more positive way, she still has fears about her condition that she does not reveal.

The role of power play

Now, I will further examine how the power play manifests in both of the stories. According to Börjesson and Rehn in *Makt*, it is every person's nature to try to maintain control when he or she feels that he or she is losing control of everything, even his or her own mental health (14-17). Thus, both of the patients in the stories try to maintain self-control. In order to maintain control, the patient in "The Yellow Wallpaper" tricks the physician into believing that she is improving. She hides many things about her condition from him, for instance the fact that she has hallucinations about the wallpaper. My point can be illustrated in the following quote: "Of course I never mention it to them any more - I am too wise, but I keep watch of it all the same. There are things in that paper that nobody knows but me, or ever will" (Perkins Gilman 8). As noted by the quote above, she has no intention of revealing the truth about her condition to the physician. When she tricks her husband into believing that she is improving, she uses power play. As mentioned earlier in this paper, Sjögren defines power play as the occasion where the patient pretends to accept the terms of the treatment, while in fact not being fully committed to treatment (95).

Esther's situation differs from the patient in "The Yellow Wallpaper". Further into treatment, Esther stops objecting to therapy and instead becomes more co-operative and receivable to electric shock therapy. Also, the medical treatment differs for the two patients, in the regard that Esther's therapy does not fully isolate her as she is allowed to maintain contact with her family and friends, as well as with the other patients. There also exists a reward system for patients who are improving. They are allowed to go to the cinema and to town without their caregivers. Sjögren claims that when patients adjust to the rules of the caregivers in order to gain benefits, they gain some power (189).

As mentioned above, the patient in “The Yellow Wallpaper” maintains control by hiding things. In comparison, Esther maintains control in her way through the benefits she gains by good behavior. As Esther wants to gain benefits and wishes to leave the mental institution to start collage in the fall, she chooses to retain information about her illness. From the beginning of “The Yellow Wallpaper”, the reader learns that she does not obey the physician’s orders. For instance, the conditions for her well-being are that she should not carry out any intellectual or physical activity, but she tricks her husband into believing that she follows the rules.

The negative impact power play has on recovery

As I in the beginning of the analysis examined popular theories on the stories presented by literary scholars, I found that they interpreted the challenges facing the protagonists in many different ways. Although the beliefs of some scholars seem to vary between psychological, feministic and identity, I have through my analysis interpreted that the protagonists never recover from their illness and the main reason for this is the power struggle between caregiver and patient.

In “The Yellow Wallpaper”, the protagonist does not appear to conduct in the way of a recovered patient, since the story ends with her franticly destroying the wallpaper, crawling over her husband’s body and the apparent hallucinations that the author depicts. While some readers may not agree with my claim that *The Bell Jar* ends with Esther still not fully recovered, closer examination of some instances in the story will support the argument that she in fact never did recover. Budick’s claim that Esther was reborn is unfounded. On

one occasion, after the second session of electric shock therapy, it might seem that she is on her way to recovery when Esther describes how the bell jar now flows freely above her head. However, my interpretation of the end of the story is that she still has the bell jar around her head, and therefore is never rid of her disease. In the last pages of the novel, where the doctors decide whether Esther will be released from the asylum, Plath writes:

> To the person in the bell jar, blank and stopped as a dead baby, the world itself is the bad dream . . . I remember everything . . . Maybe forgetfulness, like a kind snow, should numb and cover them. But they were a part of me. They were my landscape." (250)

As noted by the quote above, the bell jar seems to be a symbol of her imprisonment and she is still within the bell jar. If it was due to the bell jar she needed professional help and at the end of the book she still places herself back to status quo, one cannot make the argument that she is recovered.

While examining these literary works, I have found several arguments for my thesis that power play prevents the patients from recovery. In "The Yellow Wallpaper" the caregiver's role is an important factor that contributes to the patient's use of power play. As Cutter has stated in the beginning of her analysis, if there is a lack of communication between the caregiver and the patient, it might cause obstacles to the patient's recovery process. In order for the patient to recover, a give and take relationship is advisable. A great deal of the patient's condition depends on the caregiver's role, since he holds the expert knowledge. By using power play, negative consequences are created for her. Hypothetically, if she would have shared information about her condition with the caregivers, instead of keeping it a secret, he would have had an insight into her condition, and thus been able to cure her. Because of the power play, the reader cannot know if not getting an insight into her disease could have

had an influence on her treatment. As I stated earlier in the analysis, the rest cure made her revolt against her situation. If the caregiver would have changed the wallpaper for her, this change might have prevented her from hallucinating. Thus, the power play prevents them from exploring this possibility as a solution. There is one factor that the patients in both stories have in common and that is the usage of power play. As I have stated earlier in the analysis, Esther keeps important information which she might benefit from to herself, for instance, when she does not co-operate at her first stay in asylum. Also, she hides important information about both her condition and the bell jar. As a result, neither Dr. Nolan nor the other caregivers can get an insight into her illness.

Conclusion

In the essay, I have argued that it is the power play that prevents the patients from recovery. In both *The Bell Jar* and "The Yellow Wallpaper", the protagonists must undergo treatment, in order to recover. They have objections to some parts of their treatment, for instance the patient in "The Yellow Wallpaper" disobeys her rest cure, because she wants to participate in the decision of the methods of her treatment. Both Ester's caregivers and the nameless protagonist's caregiver are convinced that the protagonists are improving, while in fact their condition is getting worse. The patients are placed in vulnerable positions where they are forced to use their survival instincts. In this case, they learn how to play by the rules of the game that is set before them. The protagonists learn the rules of the power play, in order to have it their way. When the protagonists pretend to improve, the caregivers lose control and power over them. Therefore, the caregivers are not able to cure them. Power play is subtle, thus, the physicians never discover that the protagonists pretend to improve.

In my analysis, I have found that power play in "The Yellow Wallpaper" is caused by her caregiver's unwillingness to listen to her wishes and needs. He assesses that a passive treatment is beneficial for her health, but she believes that she should engage in social interactions and carry out intellectual activity. Whereas the power play in *The Bell Jar* is caused by the compulsory care and the lack of trust in her caregivers. The foremost reason why the protagonist uses power play is because she feels that she has lost control over her life, thus she uses power play to regain control. The second reason why she uses power play is to gain benefits from the power play. The last reason is because of the protagonist's survival instincts. Finally, if the protagonists were honest to their caregivers, the caregivers would have gained insight into the protagonists' mental problems, and thereby they would have been able to help them.

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