

## PSYCHOANALYSIS OF POSTPARTUM IN *THE YELLOW WALLPAPER* AND *BREAKING POINT*

By

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### Abstract

*Postpartum is one of the psychological behaviours of women that occurs soon after giving birth. It is also known as "baby blues". It is a rare but serious mental health illness and bipolar disorder that can affect a woman soon after she has a baby. The symptoms of postpartum are high mood and racing thoughts, depression, severe confusion, loss of inhibition, paranoia, hallucination and delusions, lacking energy, having a loss of appetite, anxiety or trouble sleeping, loss of inhibitions, feeling suspicious or fearful, restlessness, confused, behaving in a way that is out of character which should be treated as a medical emergency. This psychological issue occurs as a result of societal and patriarchal condition towards the women. This kind of behaviour is mentioned in literature by Charlotte Perkins Gilman in her work, "The Yellow Wallpaper" and a real case is written by Suzy Spencer in her work, "Breaking Point".*

**Keywords:** *psychoanalysis, postpartum, maternity blue, baby blues, postnatal psychosis, yellow wallpaper, andrea yates, breaking point.*

### Introduction

Postpartum is a serious depression that affects many women. This is a complex and challenging disorder in cultural aspects that have been described in literature. The impact of cultural factors upon this depression has been less investigated. The cultures have different rituals and beliefs that may affect this kind of depression. Mother's depression can be contributed to emotional, behavioral, cognitive, and interpersonal problems later in life. Researchers have concluded that postpartum depression can occur due to multiple hormonal, biological, psychological, familial, social and cultural factors. Emotions such as anticipation, excitement, happiness, fulfillment, as well as anxiety, frustration, confusion, or sadness/guilt are undergone

by women during pregnancy and postpartum period is experienced by females largely. This period makes them highly vulnerable to various psychiatric disorders. Spectrum of postpartum phenomenology is wide.

The purpose of this paper is to identify, summarize, analyze critically, study and investigate the effects of cultural factors on the depression and a step further on the ways of life, rituals, norms, beliefs, patriarchy and religion.

### History

Friedrich Benjamin Osiander the German obstetrician described Puerperal mania in 1797 and over 2,000 literary works have been accumulated. Postpartum phenomenology is characterized by the

range of emotions from transient mood lability, irritability, weepiness, agitation, delusions, confusion, and delirium. Prenatal mental illness is largely under-diagnosed and undertreated. Untreated postpartum psychiatric disorders can cause complexed consequence in a family. These disorders can adversely affect mother-infant interaction and attachment. Hence, early diagnosis and management of the postpartum psychiatric disorder is extremely crucial. Some of the notable works about the case are written by Charlotte Perkins Gilman, Harriet Sarah, Lady Mordaunt, Stacey Slater and Andrea Yates.

### Charlotte Perkins Gilman

Charlotte Perkins Gilman was married to Charles Stetson in 1884, and a year later she gave birth to their daughter. She was affected by depression and her symptoms became worse by marriage and motherhood. A good proportion of her diary entries from the time she gave birth to her daughter until several years later describe the oncoming depression that she was to face (Knight 323-385).

Gilman write, "For many years I suffered from severe and continuous nervous breakdown tending to melancholia and beyond" (Gilman 7).

She argued that male aggressiveness and maternal roles for women were artificial and no longer necessary for survival in post-prehistoric times. She wrote,

"There is no female mind. The brain is not an organ of sex, might as well speak of a female liver". (Lewis).

### The Yellow Wallpaper

Charlotte Perkins Gilman's, "*The Yellow Wallpaper*," is based on a feminist literary study published in 1892. The narrator first begins to write as she suffers from postpartum depression, severe psychological symptoms and hallucination. She writes in the form of secret journal entries about the violent and constraining nature of the wallpaper in her bedroom. She is advised "rest cure" by her husband, a physician who states that she has a nervous breakdown. The stay in the ancestral house makes her undergo psychological changes and she creates haunting a horror story out of her madness and paranormal chronicles. The work which was earlier criticized as a gothic work was later changed into a feminist and a psychological work.

The narrator begins to develop hallucination about the violent and constraining wallpaper in her bedroom. These symptoms develop as she internalizes the rhetoric of her husband about her illness as well as her prescribed place in the society as a wife and as a mother. Her "rebellious" thoughts, including her anger towards her husband, are repressed though they become displaced in the process onto the discussion of the wallpaper. She was able to remove herself from the domestic sphere and the constraints of her family life in order to pursue her own happiness and work as a writer. The development of her psychological symptoms can be studied and the story itself can be seen as a way for her to express herself.

However, she does not directly address her role as a mother. She does not even mention her child immediately upon writing or make the connection that her depression may be

caused by the recent birth of her child and her new demanding role as a mother. When she does finally mention her child, she refers to another woman and her ability to mother the child,

"It is fortunate Mary is so good with the baby. Such a dear baby! And yet I cannot be with him, it makes me so nervous" (Gilman 14).

The narrator as a mother praises her child. She also admires and appreciates the ability of her female servant's caring for her child on behalf of her. She does not dwell upon her relationship with her child and quickly moves off to the subject. She chooses to talk about this to her husband of dismissal of her thoughts rather than mentioning any details about her baby.

As the narrator writes about her depression, she seems to gain some benefits through her writing. She repeatedly describes writing as a "relief" for her. She is referring to a sort of mental relief, although she struggles with the effort writing requires, she confesses,

"I don't know why I should write this. I don't want to. I don't feel able. And I know John would think it absurd. But I must say what I feel and think in some way - it is such a relief!" (Gilman 19).

The narrator is seriously struggling with herself. She is trying to protest against her husband's imposed "rest cure", which requires that, she should stay home and rest all day and avoiding any kind of work or stimulation because she feels unable to directly challenge her husband's authority, she can only rebel against this treatment in her writing. She resists her own feelings to

some extent but she does recognize their existence. She also recognizes the necessity of valuing her own thoughts and feelings and the need to express herself. She says,

"I think sometimes that if I were only well enough to write a little it would relieve the press of ideas and rest me" (Gilman 15).

The protagonist's husband, John neither takes her illness seriously nor about her seriously. He prescribes "rest cure" in which she is confined to their summer home an ancestral estate hall. The woman is discouraged from doing anything intellectual. She writes the entries in her diary and maintains it as a secret. She is allowed to have very little company - certainly not from the stimulating people she most wishes to see. In short, John treats her like a child, calling her diminutive names like "blessed little goose" and "little girl" (Gilman 20).

John makes all decisions for her and isolates her from all the things she cares about.

"He is very careful and loving and hardly lets me stir without special direction". (Gilman 13).

she writes everything in her secret journal during her stay in the house. Her words also sound as if she is merely parroting what she's been told, and seems to complaint. Even her bedroom is not to her desire, it is a room that appears to have once been a nursery, thus emphasizing her return to infancy. Its "windows are barred for little children," (Gilman 15) showing that she is being treated both as a child and a prisoner.

The narrator slowly gets disturbed by the wallpaper which is coloured in yellow. When

she informs her husband about her discomfort regarding the wallpaper, he is letting the wallpaper "get the better of her" and thus refuses to remove it. The readers slowly learn that if he does not want to accept something, he declares that it is irrational. When the narrator tries to have a talk with him about her situation, she is distraught that she is reduced to tears but instead he does not interpret her tears as evidence of her suffering rather he takes them as evidence that she is irrational and she cannot be trusted to make decisions for herself. He speaks to her as if she is a whimsical child, imagining her own illness,

"Bless her little heart!, She shall be as sick as she pleases!"(Gilman 21).

He does not want to acknowledge her problems and he silences her. The only way the narrator could appear rational to John would be to become satisfied with her situation; therefore, there is no way for her to express concerns or ask for changes. The narrator writes in her diary,

"John does not know how much I really suffer. He knows there is no reason to suffer, and that satisfies him" (Gilman 14).

She begins to accept and adapt to the situation.

"I can't do it at night, for I know John would suspect something at once"(Gilman 27).

He cannot imagine anything outside of his own judgment. So when he determines that the narrator's life is satisfactory, he imagines that the fault lies with her perception of her life. It never occurs to him that her situation

might really need improvement. Eventually, the narrator becomes a "creeping woman." The first indication is when she says, rather startlingly,

"I always lock the door when I creep by daylight" (Gilman 27).

The narrator and the creeping woman works together to pull off the wallpaper. So the narrator is the one of the many. The narrator explains this in her entry,

"[T]here are so many of those creeping women, and they creep so fast" (Gilman 29).

That her shoulder fits into the groove on the wall is interpreted as that she has been ripping the paper and creeping around the room all along. It is an assertion that her situation is not different from other women. The narrator observes as the creeping women from her window asks,

"I wonder if they all come out of that wallpaper as I did?" (Gilman 30).

In the final scene, the narrator locks the room and throws the key away and tears the wallpaper into pieces and begins to crawl as a mad creepy woman around the room. John faints there and the narrator continues to creep around the room, stepping over him every time, She describes,

"I have locked the door and thrown the key down into the front path" (Gilman 29).

Now John is the one who is weak and sickly and the narrator is the one who finally gets to determine the rules of her own existence. She is finally convinced that he only "pretended to be very loving and kind"

(Gilman 28). The end of the story is that she reaches the highest peak of insanity and she identifies herself with the woman imprisoned in the wallpaper. She talks and behaves as the creepy woman who was behind the patterns of the wallpaper saying, "I've got out at last, in spite of you and Jane. And I've pulled off most of the paper, so you can't put me back!" (Gilman 30).

At last, she stops John taking over her freedom and being an authority over her. Now he can't do it again as she has come out of it which will not happen again in the end.

### Breaking Point

Suzanne Spencer is the author of the book *Breaking Point*, which deals with the real case of Andrea Yates—the woman who drowned all five of her children in 2001, leading to an insanity plea that shocked and appalled Texas.

Andrea Pia Yates is a former resident of Houston, Texas, who confessed upon drowning her five children in their bathtub on 2001, as she has been suffering from severe postpartum depression and schizophrenia. She was a capital murderer and the jury refused her the death penalty option. She was declared with life sentence into prison. The verdict was overturned on appeal of false testimony by one of the expert psychiatric witnesses.

Yates was born in Texas, a German immigrant. Her parents were Irish immigrants. She suffered from bulimia during her teenage years. She suffered from depression and spoke to a friend about suicide at the age of 17.

Yates completed a two-year pre-nursing program. She worked as a registered nurse

at the University of Texas. In 1989 she met Russell "Rusty" Yates. They were married in 1993. They decided as they "would seek to have as many babies as nature allowed", and bought a four-bedroom house in Texas. Their first child Noah, was born in 1994. By the time of the birth of Paul, they moved back to Houston. Following the birth of her fourth child Luke, Yates became depressed and suffered for years. In 1999, Rusty found her shaking and chewing her fingers. She attempted to commit suicide by overdosing on pills that were prescribed for her on the next day. She visited the hospitals often, admitted and prescribed antidepressants. Soon after her release, she begged Rusty to let her die as she held a knife up to her neck. She was prescribed another anti-psychotic drug. Her condition improved immediately. The family moved into a small house for the sake of her health. She appeared to be temporarily stabilized and in 1999 she again suffered from nervous breakdown, which culminated in two suicide attempts and two psychiatric hospitalizations that summer. She was finally diagnosed with *postpartum psychosis*.

Yates's first psychiatrist Dr. Eileen Starbranch testified that she urged her and Rusty not to have any more children, as it would "guarantee future psychotic depression" (Spencer). They planned their fifth and final kid more or less seven weeks after her discharge. She gave birth to her daughter Mary on 2000. She seemed to be coping well until the death of her father in 2001 which made her depressed and cultivate more stress.

Yates then stopped taking medication, mutilated herself, and read *The Bible* feverishly. She stopped feeding Mary (Andrea Yates). She became thus



incapacitated that she needed immediate hospitalization. She came under the care of Dr. Mohammed Saeed. She was treated and was released, degenerated back into abnormal state and filled the bathtub in the middle of the day. She later confessed to police that she had planned to drown the kids that day, however she had set against doing it then. She was hospitalized the next day after a scheduled doctor's visit held her psychiatrist who determined that she was probably suicidal and had filled the tub to drown herself (Andrea Yates).

She drowned all her five children starting with John, Paul, and Luke, and then laid them in her bed. She then drowned Mary, whom she left floating in the tub. Noah came in and asked what was wrong with Mary. He then ran but she caught and drowned him. She left him floating in the tub and laid Mary in John's arms in the bed. She then called the police repeatedly saying that she needed an officer but would not say why. Then she called Rusty, telling him to come home right away.

Rusty's friend, George Parnham was her attorney. The defense's professional testimony in agreement that Yates was psychotic. Texas law conveyed that in order to assert successfully the insanity defense, the defendant must prove that he or she could not discern right from wrong at the time of the crime. In 2002, the jury rejected the insanity defense and found her guilty. Although the prosecution had sought-after corporal punishment, the jury refused that option. The tribunal sentenced her to incarceration within the Texas Department of Criminal Justice with eligibility for parole in forty years.

Yates once more entered pleas of guiltless by reason of mental illness. In 2006, she was granted release on bail on the condition that she must be admitted to a mental health treatment facility. After three days of deliberations, she was found not guilty by reason of insanity as by the state of Texas. Her defense lawyers agreed that she was severely mentally ill with one of several psychotic diseases at the time she killed her children. The state of Texas asserted that she was aware enough to judge her actions as right or wrong despite her mental defect. The prosecution further implied spousal revenge as motive for the killings and the conclusion of defense experts reported that there was no evidence to support such a motive. Although the original jury believed that she was legally aware of her actions but disagreed that her motive was spousal-revenge.

While in prison, Yates stated that she had considered killing the children for two years, adding that they thought that she was not a good mother and claimed that her sons were developing in an improper manner. She confessed to her jail psychiatrist,

"It was the seventh deadly sin. My children weren't righteous. They stumbled because I was evil. The way I was raising them, they could never be saved. They were doomed to perish in the fires of hell" (spencer).

She told her jail psychiatrist that Satan influenced her children and made them more disobedient. Rusty filed for divorce stating that he and Yates had not lived together as a married couple since the day of the murders. The divorce was granted in 2005 after which he married Laura Arnold in

2006 and had one son. Later, Laura also filed for divorce in 2015.

### Conclusion

This paper brings out the importance of women's perception on literature and tradition during the postpartum period. While comparing both the works on the basis of psychoanalysis on postpartum, some common factors that one can find in both the texts are marriage, culture, surroundings, relatives and ignorance of the postpartum depression. Interpreted as an assertion that the situation is no different from that of many other women across the world.

*"The Yellow Wallpaper"* is a study on psychoanalysis and a feminist work on woman's madness and maddening circumstance. The narrator was isolated from everyone and not allowed to work. Her activities like ripping off the wallpaper, locking herself in her room, even biting the immovable bed, coming out of the wallpaper to gain her freedom coincide with a descent psychological issue. Her freedom comes when she finally reveals her beliefs and behavior to those around her and stops hiding. One of the main conflicts in the book is that the struggling relationship between the narrator and her husband, who is also her doctor over the nature and treatment of her illness which leads to various conflicts with the narrator's mind between her

understanding and powerlessness and her desire to repress this issue.

In *"BreakingPoint"* the readers come across isolation, less family support, lack of good relationship of the narrator with her husband, mother, father and the religious conflicts where she was influenced by Bible and Satan. Social factor as she says conveys that the children were disobedient where she started to care about, what will other people would think. The environment of loneliness and quitting the work and staying inside the home are still some of the major causes of stress and depression.

It is time to move toward scientific evaluation of different cultural traditions and beliefs and their influences upon this depression. Researches have come out with a finding that a common reason for distress is poor relationships with spouses, parents and in-laws to be crucial factors in the development of postpartum depression along with cultural practises. Women either black/white are ashamed of having this kind of depression.

The researchers concludes that cultural rituals or lack of cultural traditions have great impact upon postpartum depression. Some women who were immigrants make it difficult to differentiate between problems arising from immigration and challenges arising from postpartum depression.

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