

Mental Health Issues in Sylvia Plath's *The Bell Jar*

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ABSTRAKT

Tato práce se zaměřuje na vyobrazení duševního zdraví v románu *Pod skleněným zvonem* americké autorky Sylvie Plath, se zvláštním důrazem na psychické problémy hlavní hrdinky Esther Greenwoodové. Prostřednictvím literární analýzy podpořené psychologickými koncepty a definicemi tato práce zkoumá Estheriny zkušenosti v Americe v 50. letech 20. století, kdy bylo povědomí o duševním zdraví a problémech s ním nízké. Analýza identifikuje příznaky deprese a problémy s identitou v průběhu celého vyprávění a zkoumá, jak jsou tyto symptomy v románu reprezentovány a následně léčeny. Tato práce zdůrazňuje význam informovanosti o duševním zdraví a vybízí k destigmatizaci problémů s ním spojených.

Klíčová slova: deprese, elektrokonvulzivní terapie, sebevražda, duševní zdraví, identita, literární analýza, pokus o sebevraždu, duševní nemoc, Sylvia Plath, *Pod skleněným zvonem*

ABSTRACT

This thesis focuses on the portrayal of mental health in the novel *The Bell Jar* by American author Sylvia Plath, with a particular focus on the psychological struggles of the main character, Esther Greenwood. Through literary analysis supported by psychological concepts and definitions, this work explores Esther's experience in 1950s America when awareness of mental health and problems associated with it was low. The analysis identifies signs of depression and struggles with identity throughout the narrative and examines how these symptoms are represented and subsequently treated in the novel. This thesis emphasizes the significance of mental health awareness and encourages further destigmatization of mental health issues.

Keywords: depression, electroconvulsive therapy, suicide, mental health, identity, literary analysis, suicide attempt, mental illness, Sylvia Plath, *The Bell Jar*

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“The worst enemy to creativity is self-doubt.”¹ — Sylvia Plath

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And to Ash – thank you for sharing this journey with me. I value your opinions and support. Thank you for always being here for me and helping me lift a bell jar of my own.

¹ Sylvia Plath, *The Unabridged Journals of Sylvia Plath*, ed. Karen V. Kukil (New York: Vintage Books, 2000), 545.

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INTRODUCTION

Mental health is a significant aspect of the everyday life of every person, and it was not any different in the middle of the 20th century, a period when Sylvia Plath lived. However, mental health was not particularly understood back then, which caused great deal of stigmatization regarding mental health issues. Sylvia Plath published *The Bell Jar* (1963) shortly before she committed suicide, leaving behind a legacy in a form of a semi-autobiographical novel. Due the poet's own personal struggles, mental health is the main theme explored in her novel. This thesis focuses on how mental health and mental health issues are portrayed in *The Bell Jar* and how they were perceived by society at the time.

This thesis first introduces the historical context of 1950s America, followed by an overview of sociocultural and literary context. Furthermore, this thesis offers an insight into Sylvia Plath's life and her personal struggles with mental illness. The readers are introduced to key mental health concepts such as depression and electroconvulsive therapy which are crucial for understanding the analysis of *The Bell Jar*. The final chapter then offers a close literary analysis of the novel with a particular focus on the portrayal of mental health issues in the narrative.

The aim of this thesis is to analyse how Sylvia Plath depicts mental health issues and its symptoms in *The Bell Jar*, focusing solely on the main character, Esther Greenwood, who experiences emotional disturbances which later develop into serious problems. Apart from Esther's suicidal ideations, the analysis also includes the representation of psychiatric treatment that is depicted after Esther's transfer to a mental institution. The work frames Plath's novel within the sociocultural context when mental health was heavily stigmatized, and society lacked understanding of psychological disorders. It highlights the significance of confessionalism which gave Plath the opportunity to depict her experience in an authentic and sincere way.

The methodology employed in this thesis combines theoretical research on mental health concepts with a close literary analysis of *The Bell Jar*. The theoretical framework serves as a foundation for interpreting the novel's portrayal of mental health, whereas the close reading method is implemented to analyse the metaphors and symbols in the narrative. The analysis reveals the early signs of depression in Esther's character from the very beginning of the novel and helps readers understand the reason for her subsequent suicide attempts and hospitalization. Furthermore, the analysis reveals the main character's struggles

with her own identity which is influenced by the social expectations and pressure that she faces.

This thesis argues that in *The Bell Jar*, Sylvia Plath uses the character of Esther Greenwood to illustrate mental health issues and their impact in an era when the understanding of mental health was limited. Through the portrayal of Esther's psychiatric treatment, Plath highlights the importance of destigmatizing mental health issues.

1 AMERICA AFTER SECOND WORLD WAR

This chapter introduces the key aspects of the era in which Sylvia Plath lived and helps frame her work within its historical, sociocultural, and literary context.

1.1 Historical Context

Sylvia Plath lived during the events of the Second World War.² When the United States inflicted the atomic bomb on Hiroshima and Nagasaki, it left the civilians with fear of a beginning of a nuclear war, and they were anxious that an attack would be aimed at their country; this included the young poet as well.³ The influence of the Second World War is present in Plath's work. As Bassnett mentions, Sylvia expressed her helplessness about the situation concerning Hiroshima in her poem titled "Fever 103°", where she explicitly talks about radiation and the mutilation of human bodies.⁴ Legacy of the war is also reflected in Plath's collection of poems called *Ariel*, namely in her poems "Lady Lazarus" and "Daddy" which, according to Gill, are centred around "the lessons for modern civilisation of the Nazi Holocaust and other traumatic events".⁵ Moreover, in her collection of short stories called *Johnny Panic and the Bible of Dreams*, Plath depicts a story of a Jewish boy that is struggling with bullying.⁶

Another event that followed the Second World War was the Cold War. It was a period filled with great tension and uncertainty in society, as the threat of a nuclear attack, which was the core of the Cold War, was always around the corner. With the United States on one side and the communist Soviet Union on the other, both nations focused intently on gathering the necessary information and technology to develop atomic weapons.⁷ Sylvia was in her teenage years at that time, and the possibility of a nuclear war emerging was unsettling and endangering, especially since she was still a child back then. Moreover, she had been greatly invested in politics since an early age. At the age of 16, she published a short story that explored the theme of an atomic bomb.⁸ Another tie to Cold War that can be found in Plath's work is the mention of Ethel and Julius Rosenberg, a married couple living in the United

² Jo Gill, *The Cambridge Introduction to Sylvia Plath* (New York: Cambridge University Press, 2008), 21.

³ Gill, *Cambridge Introduction*, 24.

⁴ Susan Bassnett, *Sylvia Plath: An Introduction to the Poetry*, 2nd ed. (New York: Palgrave Macmillan, 2005), 22.

⁵ Gill, *Cambridge Introduction*, 61.

⁶ Gill, *Cambridge Introduction*, 22.

⁷ Gill, *Cambridge Introduction*, 24.

⁸ Peter K. Steinberg, *Sylvia Plath (Great Writers)* (New York: Chelsea House Publishers, 2004), 17.

States that was spying for the Soviet Union. The Rosenbergs then provided the Soviet Union with all gathered information about the United States' atomic weapons. When the United States learned about their act of betrayal, they ordered their execution.⁹ Plath mentions the execution of the Rosenbergs in the first chapter of *The Bell Jar* and contemplates what it feels like to be electrocuted as they had been.¹⁰

The mid-20th century era also marked the revolutionization in the field of psychiatry, as new approaches and treatments were introduced and implemented.¹¹ This was primarily influenced by the Second World War and the negative impact it had on soldiers' mental health. Following the war, there was an enormous increase in people struggling with mental health issues which spurred efforts to improve psychiatric treatment.¹² One of the inventions that caused a breakthrough in psychiatry was lobotomy surgery, which was performed in 1936 for the first time. This method involved accessing the patient's brain using a needle in order to sever connections in the frontal lobe which doctors believed to be the source of emotional disruptions. By severing these connections, they hoped to bring emotional relief to the patient. However, it was not after the Second World War that lobotomies became widely used due to the increase in psychiatric patients.¹³ The year 1938 then marked the development of electroconvulsive therapy treatment.¹⁴ During this procedure, the doctors placed the patient under anaesthesia and then applied jolts of electrical current to the patient's head in order to trigger a seizure. This was proven to be particularly beneficial in treatments of depression.¹⁵ Moreover, in 1954, antipsychotic drugs were invented, which largely replaced the use of lobotomy¹⁶ and electroconvulsive therapy¹⁷.

⁹ Gill, *Cambridge Introduction*, 24.

¹⁰ Sylvia Plath, *The Bell Jar* (London: Faber & Faber Limited, 2019), 1.

¹¹ Florence Thibaut, "Controversies in Psychiatry," *Dialogues in Clinical Neuroscience* 20, no. 3 (2018): 151, <https://doi.org/10.31887/DCNS.2018.20.3/fthibaut>.

¹² John A. Talbott, "1950: The Beginning of a New Era in Mental Health," *Psychiatric Services* 51, no. 1 (2000): 7, <https://doi.org/10.1176/ps.51.1.7>.

¹³ Joel T. Braslow, "History and Evidence-Based Medicine: Lessons from the History of Somatic Treatments from the 1900s to the 1950s," *Mental Health Services Research* 1 (1999): 236, <https://doi.org/10.1023/A:1022325508430>.

¹⁴ Kannapas Kittayarak and Pichai Ittasakul, "Electroconvulsive Therapy Practice in Thailand: A Nationwide Survey," *Neuropsychiatric Disease and Treatment* 18 (2022): 2477, <https://doi.org/10.2147/NDT.S385598>.

¹⁵ KaWai Leong et al., "Electroconvulsive Therapy Treatment in Patients with Somatic Symptom and Related Disorders," *Neuropsychiatric Disease and Treatment* 11 (2015): 2566, <https://doi.org/10.2147/NDT.S90969>.

¹⁶ Braslow, "History and Evidence-Based Medicine," 236.

¹⁷ Kittayarak and Ittasakul, "Electroconvulsive Therapy Practice," 2477.

1.2 Sociocultural Context

Social expectations were a major issue in the 20th century. It was a period of time when women were expected to marry a man and have children.¹⁸ It was almost an obligation. The idea of a woman chasing her dreams at the sacrifice of family was nearly unacceptable at the time.¹⁹ Society valued traditional family above all else.²⁰ Women were supposed to properly take care of their children, not pursue a career of their own.²¹ Instead, it was men who were in the role of careerists. Women were simply seen as housewives bound to stay at home with their children. This is how the gender roles were established in 1950s America.²² Furthermore, this is why Plath's work was so important and revolutionary – she challenged those values and aimed to excel at both fulfilling the social expectations and becoming a poet as well.

Another issue was the stigma revolving around mental health at the time. Society did not understand it properly and their assumptions about mental health issues deviated from reality.²³ People tended to generalize these problems and believed that symptoms of all disorders included psychotic tendencies.²⁴ Therefore, mentally indisposed people were perceived as mad and dangerous.²⁵ The stigma regarding mental health issues also affected the use of psychiatric treatment. People that were struggling found it difficult to seek professional help due to the fear of being shamed by others and perceived as lunatics. The poor understanding of mental disorders caused people in society to avoid any individuals that deviated from what they considered a norm. People with mental health issues were different, which interfered with the sense of safety in unaffected individuals.²⁶

1.3 Literary Context

According to Bassnett, Sylvia Plath was often associated with a form of writing called confessionalism. This literary movement was first officially introduced by a critic named M. L. Rosenthal who described this form of writing as one based on personal experiences

¹⁸ Gill, *Cambridge Introduction*, 107.

¹⁹ Bassnett, *Sylvia Plath*, 78.

²⁰ Gill, *Cambridge Introduction*, 26.

²¹ Bassnett, *Sylvia Plath*, 4.

²² Bassnett, *Sylvia Plath*, 78.

²³ Jo C. Phelan et al., "Public Conceptions of Mental Illness in 1950 and 1996: What Is Mental Illness and Is It to Be Feared?" *Journal of Health and Social Behavior* 41 (2000): 188, <https://doi.org/10.2307/2676305>.

²⁴ Phelan et al., "Public Conceptions of Mental Illness," 189.

²⁵ Phelan et al., "Public Conceptions of Mental Illness," 188.

²⁶ Phelan et al., "Public Conceptions of Mental Illness," 189.

and authenticity. He claimed that in confessional poetry, authors open their souls and allow the readers to see a glimpse of their true selves.²⁷ The meaning lies in the name itself: confessional poetry – a type of poetry in which writers confess what they have been wanting to say for a long time.

Some of Plath's literary influences included Anne Sexton and Robert Lowell, who were both confessional poets themselves.²⁸ In 1958, Sylvia Plath and her husband Ted Hughes visited a poetry reading event where Robert Lowell was performing.²⁹ In her journals, Plath expressed her excitement about meeting Lowell prior to the occasion, as she had already read his works before.³⁰ A year after the event, Sylvia began her poetry writing course under Robert Lowell's supervision at Boston University.³¹ Lowell's writing course was also where Plath met Anne Sexton who attended the classes with her.³² During one seminar, Robert Lowell compared the two poets to one another in a literary sense, which Sylvia considered "an honour" though her reaction conveyed an underlying tone of competitiveness and pride. However, she expressed admiration towards Anne Sexton's work in her journal entry, indicating that Plath was aware of Sexton's writing skills.³³ When one of Plath's poems was rejected for publication, she fell into a stage of self-criticism and began to contemplate whether adopting elements of Sexton's writing style could perhaps improve her own. In her journals, she claimed that Sexton "has none of [her] clenches and an ease of phrase, and an honesty".³⁴

²⁷ Gill, *Cambridge Introduction*, 20.

²⁸ Bassnett, *Sylvia Plath*, 37.

²⁹ Plath, *The Unabridged Journals*, 694.

³⁰ Plath, *The Unabridged Journals*, 379.

³¹ Plath, *The Unabridged Journals*, 427.

³² Plath, *The Unabridged Journals*, 697.

³³ Plath, *The Unabridged Journals*, 475.

³⁴ Plath, *The Unabridged Journals*, 477.

2 WHO WAS SYLVIA PLATH?

I can never read all the books I want; I can never be all the people I want and live all the lives I want. I can never train myself in all the skills I want. And why do I want? I want to live and feel all the shades, tones and variations of mental and physical experience possible in my life. And I am horribly limited.³⁵

This quote from Sylvia Plath's journal shows her passionate and poetic disposition; the eagerness to learn and uncover the beauty of life in all its forms, just as the realization of the transience of life. It can be assumed that she was one of those people who dwelled on daydreams and had a profound way of seeing the world. Perhaps that was why she became an author in the first place.

2.1 Early Life

Born in 1932 to Aurelia and Otto Plath³⁶, Sylvia grew up in Massachusetts along with her younger brother Warren³⁷. Her father suffered from diabetes³⁸ and required an amputation of his leg, which only deteriorated his illness and shortly after the operation he died of pulmonary embolism³⁹. Sylvia was only eight years old at the time.⁴⁰ The ghost of Otto's presence seemed to have haunted her for the rest of her life and later influenced her writing, which can be seen especially in her poem "Daddy"⁴¹ and her personal journals⁴². After the death of her father, she and her family moved from their hometown in Winthrop to Wellesley, Massachusetts.⁴³

Her parents both worked as teachers and Sylvia herself had always been an exceptional student with good grades. Her passion for writing developed when she was only a child. She started writing poetry when she was in school, and one of her poems even managed to make it into publishing. It was titled "Poem" and got published when Sylvia was only nine years old, which was a year after Otto Plath died.⁴⁴ In Wellesley, Sylvia then attended the Bradford High School. She earned a scholarship to Smith College, therefore

³⁵ Plath, *The Unabridged Journals*, 43.

³⁶ Andrew Wilson, *Mad Girl's Love Song: Sylvia Plath and Life Before Ted* (New York: Scribner, 2013), 14.

³⁷ Gill, *Cambridge Introduction*, 2–3.

³⁸ Wilson, *Mad Girl's Love Song*, 29.

³⁹ Wilson, *Mad Girl's Love Song*, 30.

⁴⁰ Gill, *Cambridge Introduction*, 3.

⁴¹ Gill, *Cambridge Introduction*, 3.

⁴² Plath, *The Unabridged Journals*.

⁴³ Gill, *Cambridge Introduction*, 3.

⁴⁴ Steinberg, *Great Writers*, 12.

after graduation, she moved to Northampton to start her first year.⁴⁵ In 1951, she attended a writing contest for *Mademoiselle*, a New York magazine. For submitting her short story, she received the prize of five hundred dollars and won an internship. Therefore, in 1953, she moved to New York to work as *Mademoiselle*'s guest editor.⁴⁶ This experience is reflected both in her personal journals and in *The Bell Jar* where Esther Greenwood, the main character of the novel, also gets an internship at a New York magazine.⁴⁷ Given the sociocultural context of 1950s when job opportunities for women were limited, becoming a guest editor was a great success for Plath and gave her an opportunity to exercise her writing skills.

2.2 Marriage

On the 25th of February 1956, Sylvia Plath attended a party where she met a man who would soon become her husband. She depicts the first encounter with the fellow poet in her journal a day after it occurred. She noticed Ted Hughes the moment he entered the room but none of her friends would share the name of the mystery man despite Sylvia's demands. Only when he came up to her did he properly introduce himself to her. She had known about Ted's poems and instantly engaged in conversation with him about his writing.⁴⁸

On the 16th of June 1956, Sylvia married Ted Hughes.⁴⁹ The nuptials were held in secret.⁵⁰ Four years after their wedding, Sylvia became pregnant with their first child, Frieda Hughes. A year later, they tried for a second child, but the attempt ended in miscarriage. After that, Sylvia had to stay in the hospital due to health complications resulting from the loss of her baby. Years later, their attempt succeeded, and they welcomed their son Nicholas Hughes into the family.⁵¹

However, their once happy relationship soon faced unpleasant obstacles. This was primarily due to Ted's infidelity, which Sylvia found hard to come to terms with. According to Aurelia Plath, even the people around them could sense the change in the dynamic of their relationship. Subsequently, Sylvia decided to separate from Ted and moved out of their shared home along with both of their children. Sylvia, Frieda, and Nicholas then moved to a

⁴⁵ Bassnett, *Sylvia Plath*, 7.

⁴⁶ Gill, *Cambridge Introduction*, 5.

⁴⁷ Plath, *The Bell Jar*, 3.

⁴⁸ Plath, *The Unabridged Journals*, 211.

⁴⁹ Jacqueline Rose, *The Haunting of Sylvia Plath* (Cambridge, MA: Harvard University Press, 1992), 89.

⁵⁰ Gill, *Cambridge Introduction*, 5.

⁵¹ Gill, *Cambridge Introduction*, 10.

house in London.⁵² Meanwhile, Ted Hughes maintained his affair with the woman named Assia Wevill. However, in 1959, Assia committed suicide. She filled her house with gas, which subsequently killed both her and her daughter.⁵³ Four years later, when Sylvia would die from suicide, it would be under the same circumstances as Ted Hughes' lover. Only in the case of Sylvia did her children outlive the gassing of the house, unlike the child of Assia Wevill.

After Sylvia's death, Ted Hughes contributed to the publishing of Sylvia's personal journals. However, he later admitted that he destroyed some of the journals, particularly the ones Sylvia wrote shortly before she committed suicide. Ted explained his behaviour as defensive. His main reason for the act was the protection of their children, Frieda and Nicholas, as he assumed the knowledge of what was written in the journals may hurt them, especially since the journals were going into publishing.⁵⁴ Due to Ted's decision to destroy the most significant journals, people might never know what truly led Sylvia Plath to end her life.

2.3 Battle with Mental Illness

The Unabridged Journals of Sylvia Plath provide insight into the poet's state of mind. The journals are considered the most crucial resource of data, as they provide unfiltered descriptions of events. The 700-pages long book includes entries that are scattered through the years, as Sylvia had been keeping up with writing them since an early age. They give readers the opportunity to see her complex thought process and offer evidence of her struggles with mental health.⁵⁵

"Dear Doctor: I am feeling very sick. I have a heart in my stomach which throbs and mocks. Suddenly the simple rituals of the day balk like a stubborn horse. It gets impossible to look people in the eye: corruption may break out again? Who knows. Small talk becomes desperate,"⁵⁶ she writes in one of the entries from February 1956. This excerpt demonstrates her mental distress and indicates depressive tendencies that required psychiatric care. Her mentioning that "simple rituals of the day balk like a stubborn horse"⁵⁷ illustrates her

⁵² Bassnett, *Sylvia Plath*, 16–17.

⁵³ Bassnett, *Sylvia Plath*, 142.

⁵⁴ Bassnett, *Sylvia Plath*, 2.

⁵⁵ Plath, *The Unabridged Journals*.

⁵⁶ Plath, *The Unabridged Journals*, 202.

⁵⁷ Plath, *The Unabridged Journals*, 202.

inability to perform even ordinary tasks. Based on this knowledge, it can be argued that the weight of her illness was so heavy that she felt too mentally exhausted to do anything.

Her depression symptoms were continuously deteriorating, and so in August 1953, Sylvia Plath attempted suicide. She swallowed a handful of pills, which led to her overdose and subsequent hospitalization. The doctors confirmed that Plath was near death at the time.⁵⁸ Sylvia depicts this event in *The Bell Jar* as well, where the main character, Esther, suffers from mental illness and later performs the same act as Plath herself did.⁵⁹ After her suicide attempt, Sylvia was taken to McLean hospital where she received psychiatric help for her depression.⁶⁰ During her stay at the McLean hospital in Boston, Plath was forced to undergo electroshock treatment due to her non-improving condition. Because of this inconvenience, she missed one semester in college and therefore her graduation had to be postponed.⁶¹

However, Plath was not the only one in her family who suffered from depression. Her grandmother Ernestine was also struggling with this condition, and she was even admitted to a mental health hospital. There were also other women from Sylvia's father's side of family that were having mental health issues and even experienced electroconvulsive therapy, though Plath never learned this information.⁶² As Clark states in her biography on Plath, Sylvia's mother Aurelia never shared this piece of information with her daughter.⁶³

2.3.1 Ruth Beuscher

During her stay at McLean hospital in Massachusetts, Sylvia Plath met a doctor that would become a very important person in her life. Ruth Beuscher was a psychiatrist at McLean hospital who supervised Plath's treatment. Under her supervision, Plath showed significant improvement, and her mental state began to improve. It was Beuscher who suggested Plath would undergo electroconvulsive therapy and helped her prepare for the procedure. The shock treatment had significant impact and doctors said that Sylvia was way better than when she was first admitted to McLean. Therefore, she was discharged from the hospital and

⁵⁸ Gill, *Cambridge Introduction*, 6.

⁵⁹ Plath, *The Bell Jar*, 163.

⁶⁰ Bassnett, *Sylvia Plath*, 8.

⁶¹ Gill, *Cambridge Introduction*, 6.

⁶² Heather Clark, *Red Comet: The Short Life and Blazing Art of Sylvia Plath* (New York: Knopf Doubleday Publishing Group, 2020), 8.

⁶³ Clark, *Red Comet*, 8–9.

allowed to return to college.⁶⁴ Plath also includes Beuscher in *The Bell Jar*, giving her the name Doctor Nolan.⁶⁵

In 1958, her mental state began to worsen again, so she sought the help of Ruth Beuscher and started therapy. The primal focus of the sessions were Otto and Aurelia Plath. Beuscher discussed the relationship with her parents with her and Sylvia confided in her about the hatred she held for her mother.⁶⁶ Plath kept track of what was discussed at the sessions in her journals⁶⁷ and in her entries, she described Ruth Beuscher as a smart and admirable woman whom she sees as a mother figure.⁶⁸ The reason why Sylvia hated her own mother so much was particularly because of Otto Plath. She blamed Aurelia for the loss of her father, declaring that she was the one who killed him.⁶⁹ Plath accused her of not loving him and marrying him when he was already too old and therefore sick, leaving Sylvia fatherless. In her journals, Plath proclaimed that Otto Plath got even sicker the moment he married her mother, Aurelia.⁷⁰

2.3.2 Suicide

On the 11th of February 1963, Sylvia Plath tragically attempted suicide again. This time, her attempt was successful, and she lost her long-going battle with mental illness.⁷¹ She was found dead in her home that day with the house gassed and her head stuck in the oven. Her two children who had been there at the time were safely tucked and sealed in the other room to prevent the gas from reaching them.⁷² Her mental health affected her greatly and she felt lost in life. There is no doubt that she loved her children, as she protected them from getting hurt during her last act on Earth. Even before getting married and having Frieda and Nicholas, she had attempted to end her life. The doctors tried to help her then, but it was clear that depression had inflicted her mind and made her fall into agony. Moreover, she learned about Ted's infidelity, and everything worsened. She felt helpless, her marriage fell

⁶⁴ Steinberg, *Great Writers*, 42–43.

⁶⁵ Gill, *Cambridge Introduction*, 6.

⁶⁶ Steinberg, *Great Writers*, 75–76.

⁶⁷ Plath, *The Unabridged Journals*.

⁶⁸ Plath, *The Unabridged Journals*, 429.

⁶⁹ Plath, *The Unabridged Journals*, 431.

⁷⁰ Plath, *The Unabridged Journals*, 429.

⁷¹ Gill, *Cambridge Introduction*, 12.

⁷² Bassnett, *Sylvia Plath*, 19.

apart, and her mental state was slowly killing her until it subsequently drove her to end her suffering all together.⁷³

In his book, Peter Steinberg claims that Sylvia's suicide note had been her journals all along.⁷⁴ Only then, they were meant for Sylvia's eyes only, like quiet admission over the course of her short life. It was not until the journals were published that people could make sense of her inner thoughts. Given the journals, readers are granted an insight into her state of mind, if only a glimpse of it.

⁷³ William Wootten, *The Alvarez Generation: Thom Gunn, Geoffrey Hill, Ted Hughes, Sylvia Plath, and Peter Porter* (Liverpool: Liverpool University Press, 2015), 66.

⁷⁴ Steinberg, *Great Writers*, 3.

3 THE SYLVIA PLATH EFFECT

In 2001, James C. Kaufman conducted a study regarding creative writers and mental illness. He aimed to find out whether poets were more prone to mental suffering than other types of prominent artists.⁷⁵ The initial motive for his study was prompted by historical records of numerous writers who were known to have experienced mental illness or committed suicide.⁷⁶ In his study, he analysed 1 629 writers where 1 210 represented males and 419 females. He then divided the subjects into four groups – fiction writers, non-fiction writers, playwrights and poets. With the help of biographical books and data, he used variables to measure the intensity of each group's mental illness, determining whether it was mild or severe.⁷⁷ Suicide attempts, accomplished suicides, and hospitalizations were also considered. The findings showed that female poets are indeed more tend to suffer from mental illness rather than other types of authors, with the group of female playwrights and male non-fiction writers being least likely to experience this. The result of the odds ratio for female poets was 2.19, whereas male fiction writers scored 1.91 and female playwrights 1.15. In this case, numbers above 1 represent likelihood of mental illness and numbers above 2 represent very high probability.⁷⁸

In relation to these results, Kaufman decided to follow up with a second study where he focused solely on groups of female figures.⁷⁹ He intended to compare female poets with not only female fiction and non-fiction writers, but also with public female figures such as politicians, actresses, and artists. He performed the same process as he did in his previous study using variables and measurement of intensity, analysing 520 subjects.⁸⁰ The findings were aligned with the first study, with female poets scoring the highest probability.⁸¹ The odds ratio for female poets was 1.71 whereas the results of the remaining groups ranged from 1.10 to 0.24.⁸² Kaufman interprets the results as:

[...] many people in the arts, because of the very “mystical” nature of how a person creates, may even unconsciously credit “divine inspiration” for their work. Poetry, especially, is seen an art linked to having some sort of a “muse”. Even if such a misattribution results from superstition or modesty,

⁷⁵ James C. Kaufman, “The Sylvia Plath Effect: Mental Illness in Eminent Creative Writers,” *The Journal of Creative Behavior* 35, no. 1 (2001): 37, <https://doi.org/10.1002/j.2162-6057.2001.tb01220.x>.

⁷⁶ Kaufman, “The Sylvia Plath Effect,” 40.

⁷⁷ Kaufman, “The Sylvia Plath Effect,” 41.

⁷⁸ Kaufman, “The Sylvia Plath Effect,” 43.

⁷⁹ Kaufman, “The Sylvia Plath Effect,” 43.

⁸⁰ Kaufman, “The Sylvia Plath Effect,” 44.

⁸¹ Kaufman, “The Sylvia Plath Effect,” 44–45.

⁸² Kaufman, “The Sylvia Plath Effect,” 45.

it may produce a perceived external locus of control. Poets may mentally assign credit – and, indirectly, their locus of control – to such a muse, inadvertently placing themselves at a higher risk for depression and other emotional disorders.⁸³

This argument suggests that poets, being very perceptive and contemplative, tend to focus solely on their muse to help them develop creativity. It indicates that poets often struggle with believing in their own writing skills and rather assign their success to something beyond, making them only a mere vessel for passing the transmission of ideas. This phenomenon of “locus of control”⁸⁴ implies their feelings of helplessness and demotivation. They feel like the situation is out of their hands, as it depends on the said muse. This gradually increases their proneness to depressive tendencies.

One of the poets analysed in both Kaufman’s studies was Sylvia Plath, as she was known for her record of severe mental health struggles and several suicide attempts. In her memory, Kaufman decided to call this phenomenon of female poets being more likely to suffer from mental illness “The Sylvia Plath Effect”.⁸⁵ This study proves that Sylvia Plath had a major influence not only on her readers, but also on academics and researchers. Her case is very well known, and her mental health issues made her famous in a way. They ensured the authenticity of her writing, as her inner struggles became the main inspiration for her stories. In the context of this study, Plath is what one might call a perfect example of a tortured poet.

⁸³ Kaufman, “The Sylvia Plath Effect,” 47.

⁸⁴ Kaufman, “The Sylvia Plath Effect,” 47.

⁸⁵ Kaufman, “The Sylvia Plath Effect,” 46.

4 MENTAL HEALTH: KEY CONCEPTS

This chapter introduces key terms from the field of mental health that are essential to understanding the analysis of *The Bell Jar*.

4.1 Depression

Depression is a mental disorder, which should not be confused with a depressed mood and mere sadness.⁸⁶ Depressed mood can be experienced occasionally, but depression is a long-lasting problem causing the affected person great issues and inability to enjoy their life properly. A depressed person experiences great loss of energy and motivation to perform even the simplest tasks. Their mind is overshadowed by negative thoughts, ones that make them feel unworthy of life and love, and their general perception of themselves is shattered and conflicted. The things and activities that once brought them joy now seem useless and unimportant. Hence depressed people often tend to abandon their hobbies and curricular activities. Their state is often accompanied by lack of appetite and weight loss. The burden of this illness is so great that people not only lose interest in participating in events and activities but also find it harder to get out of bed at all. People with severe state of depression also experience suicidal thoughts. However, not all depressed people try to attempt suicide or accomplish it. Some people only idealize that idea and plan on how they would do it, but they do not necessarily have to go through with it.⁸⁷

As Franzen and Buysse state, depression is often accompanied by troubles with sleeping. This occurrence is true for up to 90% of patients⁸⁸, Plath suffering from insomnia being among them. People who struggle with insomnia report having reoccurring problems falling asleep, or when they do fall asleep, waking up repeatedly during the night.⁸⁹ It has been proved that patients who received proper treatment for their depressive disorder showed signs of improvement in sleep as well⁹⁰. The treatment for this illness may vary depending on the intensity of symptoms and each patient, but most common is a combination of pharmacotherapy and psychotherapy.⁹¹

⁸⁶ Franco Benazzi, "Various Forms of Depression," *Dialogues in Clinical Neuroscience* 8, no. 2 (2006): 151, <https://doi.org/10.31887/DCNS.2006.8.2/fbenazzi>.

⁸⁷ Benazzi, "Various Forms of Depression," 152.

⁸⁸ Peter L. Franzen and Daniel J. Buysse, "Sleep Disturbances and Depression: Risk Relationships for Subsequent Depression and Therapeutic Implications," *Dialogues in Clinical Neuroscience* 10, no. 4 (2008): 473, <https://doi.org/10.31887/DCNS.2008.10.4/plfranzen>.

⁸⁹ Franzen and Buysse, "Sleep Disturbances," 473.

⁹⁰ Franzen and Buysse, "Sleep Disturbances," 476.

⁹¹ Franzen and Buysse, "Sleep Disturbances," 479.

4.2 Self-harm

Self-harm is defined as a behaviour during which a person purposely injures themselves.⁹² This can be manifested in forms such as cutting themselves with sharp objects, burning their skin, or using body strength to break their bones.

The reasons for engaging in this act may vary from person to person. According to Nielsen and Townsend, individuals that struggle with self-harm often use it as a form of coping mechanism that serves as a distraction from greater problems.⁹³ Therefore, self-inflicted injury is not a stand-alone issue; rather, it is interlinked with other mental health conditions that the affected person may be experiencing.⁹⁴ This suggests that they engage in physical pain to relieve their emotional pain, if only for a moment. Hurting themselves gives them something to have control over, as they are the ones to decide how far to go in their physical pain tolerance.⁹⁵ Some individuals also engage in this behaviour to show others that they are struggling. They are scared or ashamed to seek professional help, so they use their self-inflicted injuries to communicate their needs to the outside world. But not always do other people understand the person's struggles. The visibility of self-harm marks leads to the assumption that the affected individual is trying to become a centre of attention. Therefore, other people belittle their real issues.⁹⁶ However, individuals that engage in self-harm do not use their suffering as a means of exhibition. It is merely a call for help – they are unable to ask for it, so they let their wounds speak for them.⁹⁷

4.3 Depersonalization and Derealization

Depersonalization and derealization are described as series of symptoms during which an individual experiences detachment from both reality and self. These two symptoms often go hand in hand and occur simultaneously.⁹⁸ People affected by derealization report feeling as if they were in a dream from which they cannot seem to wake up. Their perception is

⁹² Britt-Marie Lindgren et al., "A Necessary Pain: A Literature Review of Young People's Experiences of Self-Harm," *Issues in Mental Health Nursing* 43, no. 2 (2021): 154, <https://doi.org/10.1080/01612840.2021.1948640>.

⁹³ Emma Nielsen and Ellen Townsend, "Public Perceptions of Self-Harm: Perceived Motivations of (and Willingness to Help in Response to) Adolescent Self-Harm," *Archives of Suicide Research* 22, no. 3 (2017): 480, <https://doi.org/10.1080/13811118.2017.1358223>.

⁹⁴ Lidgren et al., "A Necessary Pain," 154.

⁹⁵ Nielsen, and Townsend, "Public Perceptions of Self-Harm," 480.

⁹⁶ Nielsen, and Townsend, "Public Perceptions of Self-Harm," 481.

⁹⁷ Lidgren et al., "A Necessary Pain," 161.

⁹⁸ Elaine C. M. Hunter et al., "Cognitive Behaviour Therapy (CBT) for Depersonalization Derealization Disorder (DDD): A Self-Controlled Cross-Over Study of Waiting List vs. Active Treatment," *Cognitive Behaviour Therapy* 52, no. 6 (2023): 672, <https://doi.org/10.1080/16506073.2023.2255744>.

distorted and warped, which makes them feel out of touch with the real world.⁹⁹ On the other hand, depersonalization causes one's disconnection from their own identity. Suddenly, all their memories start to feel like they are not their own, and the person living their life is someone else. Everything that was once a part of their identity begins to feel strange and alien, including their own reflection.¹⁰⁰

A person can experience depersonalization and derealization in two forms: ephemeral or persistent. It may be a transient state where the symptoms only last for a short period of time and then subside. However, these symptoms can also develop into a depersonalization-derealization disorder over time. This occurs primarily when the person affected is already suffering from another mental illness.¹⁰¹

4.4 Electroconvulsive Therapy

Electroconvulsive therapy (ECT) is one of the approaches used in psychiatry.¹⁰² This method was first officially introduced in 1938.¹⁰³ Before anti-depressant drugs were developed, approximately 20 years after electroconvulsive therapy, ECT was the most common way to treat people with severe depression symptoms in the 20th century.¹⁰⁴

This procedure required the patient to be put under anaesthesia, as the doctors applied electrical shocks to the head, triggering a seizure. Doctors placed two electrodes on the patient's skull – either each on both hemispheres or both on one hemisphere – and used this to inject current into the patient's head. As mentioned earlier, the patients were given anaesthetics to put them into ease, along with muscle relaxants to prevent them from hurting themselves during the process. The patient was then given a block on which they could bite.¹⁰⁵ Even though this method had been proved to be effective, there were some side effects that could occur after the session. Patients might have experienced memory loss, fatigue and nausea along with vomiting. And if the treatment was not handled properly,

⁹⁹ Hunter et al., "Depersonalization Derealization Disorder," 672–673.

¹⁰⁰ Giovanni B. Caputo, "Strange-Face-in-the-Mirror Illusions: Specific Effects on Derealization, Depersonalization, and Dissociative Identity," *Journal of Trauma & Dissociation* 24, no. 5 (2023): 581, <https://doi.org/10.1080/15299732.2023.2195394>.

¹⁰¹ Hunter et al., "Depersonalization Derealization Disorder," 673.

¹⁰² Renana Eitan and Bernard Lerer, "Nonpharmacological, Somatic Treatments of Depression: Electroconvulsive Therapy and Novel Brain Stimulation Modalities," *Dialogues in Clinical Neuroscience* 8, no. 2 (2006): 242, <https://doi.org/10.31887/DCNS.2006.8.2/reitan>.

¹⁰³ Kittayarak and Ittasakul, "Electroconvulsive Therapy Practice," 2477.

¹⁰⁴ Eitan and Lerer, "Treatments of Depression," 242.

¹⁰⁵ Eitan and Lerer, "Treatments of Depression," 242.

patients were also at risk of hurting themselves physically during the procedure, especially in the area around their mouth where the bite block should be inserted.¹⁰⁶

Over the years, electroconvulsive therapy has undergone series of changes in terms of procedure. As Kalisova et al. state, “[s]evere side effects of ECT were minimized due to the modernization of the method (muscle relaxation, modern short-time anesthesia, technical parameters of the method, and so on).¹⁰⁷ The modernization of ECT is also reflected in the doctor’s use of bifrontal and unilateral pulse wave stimulation¹⁰⁸, replacing the earlier method of using electrode plate shock waves¹⁰⁹. These improvements now make the procedure safer for patients and reduce the potential side effects.

¹⁰⁶ Eitan and Lerer, “Treatments of Depression,” 245.

¹⁰⁷ Lucie Kalisova et al., “Cognitive Functioning in Patients Treated with Electroconvulsive Therapy,” *Neuropsychiatric Disease and Treatment* 14 (November 2018): 3025–3026, <https://doi.org/10.2147/NDT.S182423>.

¹⁰⁸ Thomas C. Baghai and Hans-Jürgen Möller, “Electroconvulsive Therapy and Its Different Indications,” *Dialogues in Clinical Neuroscience* 10, no. 1 (2008): 113, <https://doi.org/10.31887/DCNS.2008.10.1/tcbaghai>.

¹⁰⁹ Eitan and Lerer, “Treatments of Depression,” 242.

5 REPRESENTATION OF MENTAL HEALTH IN *THE BELL JAR*

In her journals, Sylvia mentions several things from everyday life that would later appear in *The Bell Jar* and therefore confirm the semi-autobiographic nature of the novel. This is particularly seen in her journal excerpts from the times of her hospitalization, where she admits her desire to put her experience into words and turning her life's events into a book.¹¹⁰ This would inspire the main character of the novel who suffers from mental illness herself and requires to be hospitalized due to her repeated suicide attempts.¹¹¹

Due to Plath's personal experience with depression and suicide attempts, mental health is the central theme in *The Bell Jar*. It follows a main character named Esther Greenwood, a nineteen-year-old college student who has just won an internship to a New York fashion magazine where she is given the opportunity to work for a month.¹¹² This is a big change for her, as it is a new unexplored territory. She is diving into the unknown in the form of busy New York streets, unfamiliar faces and a hectic schedule that has been prepared for the interns.¹¹³ While Esther tries to navigate herself through life, she begins to experience mental distress which sets off a series of suicide attempts and an ultimate transfer to a mental institution.¹¹⁴

5.1 Depression

Although Esther's diagnosis is never explicitly stated by the doctors, she displays major signs of depression throughout the book. This is manifested in the smallest of shifts in her demeanour at the beginning of the narrative that gradually leads to more serious issues.

During her internship in New York, Esther Greenwood finds herself in a difficult position as she begins to experience feelings of emptiness. Instead of feeling cheerful about winning the contest, she feels dull and emotionless ever since her arrival in New York.¹¹⁵ Not even the welcome gifts and free passes to events that all the interns receive seem to bring her any joy whatsoever.¹¹⁶

¹¹⁰ Plath, *The Unabridged Journals*.

¹¹¹ Plath, *The Bell Jar*.

¹¹² Plath, *The Bell Jar*, 3.

¹¹³ Plath, *The Bell Jar*, 28.

¹¹⁴ Plath, *The Bell Jar*.

¹¹⁵ Plath, *The Bell Jar*, 2.

¹¹⁶ Plath, *The Bell Jar*, 3.

One day during her stay in New York, Esther decides to explore the city with her friend Doreen, another internship girl, and visit a local bar. There they meet a man named Lenny Shepard who engages in conversation with them and orders them drinks. Esther tries to have fun, the way one is supposed to when they are with friends, but it seems to be of no use. Plath describes Esther's feelings during the occasion: "The two of them didn't even stop jitterbugging during the intervals. I felt myself shrinking to a small black dot against all those red and white rugs and pine-panelling. I felt like a hole in the ground."¹¹⁷ Based on this description, it can be observed that Esther feels very out of place in the bar. Doreen and Lenny appear to be enjoying themselves, whereas she is sitting there and watching the scene before her unfold. She is merely an observer instead of an active participant in the conversation. It indicates her feeling of hollowness, considering she describes herself as "a hole in the ground". Her inner turmoil seems to prevent her from enjoying the evening. She feels herself blending with the background which makes her seem like she is not present in the moment at all. It suggests that she experiences little to no sense of belonging, which creates an imaginary barrier between her and her friends.

This feeling persists within her. The next time there is an event happening in the city, a fur show that all the interns are invited to, Esther refuses to go. She even declines her friend Doreen's offer to go someplace else with her and Lenny. While everyone else is going out to socialize, Esther stays at the hotel.¹¹⁸ While she lies in her bed, Esther considers her situation:

After Doreen left, I wondered why I couldn't go the whole way doing what I should any more. This made me sad and tired. Then I wondered why I couldn't go the whole way doing what I shouldn't, the way Doreen did, and this made me even sadder and more tired.¹¹⁹

From this description, a feeling of helplessness can be sensed. It is safe to assume that Esther feels conflicted about her feelings. She wonders why she is not able to bring herself to do the things she is supposed to do, namely attending the events that have been offered to her. The author points out that Doreen, on the other hand, has the ability to go out and do whatever she pleases. This brings attention to the question of what is stopping Esther from agreeing to her friend's offer and joining her and Lenny on the trip or attending the fur show with the other girls. It appears that Esther's main obstacle is herself and her state of mind.

¹¹⁷ Plath, *The Bell Jar*, 15.

¹¹⁸ Plath, *The Bell Jar*, 27.

¹¹⁹ Plath, *The Bell Jar*, 27–28.

Something inside of her head is preventing her from doing the things she wishes to do. Therefore, the decision to stay in bed instead appears to her as the safest option. However, this decision does not seem to please her whatsoever, as she expresses feelings of sadness and tiredness. This indicates that Esther wishes to engage in said activities but is physically and mentally unable to. This vicious cycle saddens her, as she cannot seem to break it anyhow.

Over time, her abnormal demeanour becomes more visible to the outside world and is noted by Jay Cee, who confronts her with it.¹²⁰ Jay Cee is an editor of the magazine who oversees the internship girls, including Esther.¹²¹ She notes Esther's apparent lack of interest in the job as she does not seem as enthusiastic as the other girls. In response, Esther tries to convince her otherwise, even though deep down she acknowledges the veracity of her superior's words. This interaction makes her reflect on her past achievements and her dedication to succeeding in school. Esther finishes her contemplation with assessing her latest accomplishment: "I was apprenticed to the best editor on any intellectual fashion magazine, and what did I do but balk and balk like a dull cart horse?"¹²² From this sentence, Esther's conflicted feelings about the matter can be observed. She appears to recognize the significance of her success in obtaining the internship but struggles to fully engage with it.

Her depiction of herself as "a dull cart horse" indicates that she struggles to find balance in her life. She may have achieved great success, but her numb state of mind seems to outweigh it. It prevents her from feeling genuine joy and fully engaging in her work like the rest of the interns, which is something that Jay Cee was able to detect. Later that day, Esther reflects on their conversation:

I felt very low. I had been unmasked only that morning by Jay Cee herself, and I felt now that all the uncomfortable suspicions I had about myself were coming true, and I couldn't hide the truth much longer.¹²³

Based on this excerpt, it can be argued that Esther feels embarrassed that it was her superior out of all people who spotted she wasn't acting like herself. It suggests that Esther becomes aware of how unusual her demeanour must be for even her employer to notice. However, the confrontation sparks profound realization within her. It is due to Jay Cee's observation that

¹²⁰ Plath, *The Bell Jar*, 29.

¹²¹ Plath, *The Bell Jar*, 5.

¹²² Plath, *The Bell Jar*, 29.

¹²³ Plath, *The Bell Jar*, 26–27.

Esther begins to fully comprehend the gravity of the situation. Therefore, she is forced to face the truth about her deteriorating state of mind. It is apparent that she was trying to suppress this within her, but now she understands that there is nothing left to do but accept this reality.

However, it is hard for her to maintain her composure in front of her colleagues. She lacks the ability to pretend that all is well, and she fails to regulate her emotions. This results in an emotional outburst during a photoshoot with the magazine photographer.¹²⁴

I didn't want my picture taken because I was going to cry. I didn't know why I was going to cry, but I knew that if anybody spoke to me or looked at me too closely the tears would fly out of my eyes and the sobs would fly out of my throat and I'd cry for a week. I could feel the tears brimming and sloshing in me like water in a glass that is unsteady and too full.¹²⁵

Her mental exhaustion reflects itself in her emotional overload which leads to this reaction. It suggests that her mental distress has become too much to bear and made it difficult for her to even pose for a photograph. Based on this knowledge, it is arguable that she does not feel comfortable with being the centre of attention. It implies that she believes that people could unmask her mental state just by observation. Her stance on this matter is demonstrated by the metaphor she uses to describe the situation. Here, the glass symbolizes her body, and the water that reaches the brim of the glass represents her feelings. This illustrates how Esther has been suppressing her emotions instead of processing them, allowing them to compound until they reach their limit. Therefore, this results in their overflow, like water spilling from an overfilled glass.

Her mental distress also manifests itself in forms of uncertainty about the future which accompanies Esther throughout the whole story.

I saw the years of my life spaced along a road in the form of telephone poles, threaded together by wires. I counted one, two, three... nineteen telephone poles, and then the wires dangled into space, and try as I would, I couldn't see a single pole beyond the nineteenth.¹²⁶

In this excerpt, Esther visualizes her life in form of telephone poles. The last pole, the nineteenth, symbolizes her age. This metaphor shows that the character cannot picture anything past the age of nineteen and struggles with envisioning her future. Her mind is

¹²⁴ Plath, *The Bell Jar*, 98.

¹²⁵ Plath, *The Bell Jar*, 96.

¹²⁶ Plath, *The Bell Jar*, 118.

preoccupied with focusing on surviving rather than making plans for her career. As Esther has experienced suicidal thoughts throughout the book, it suggests that she did not even intend to make plans for future, as she believed she would be dead by the time she could reach the twentieth birthday. For her, there was no point in even thinking about it. That explains why she imagines the wires stretching out and dissolving into vacancy. It indicates her messy state of mind and uncertainty of the years to come.

However, the fact that the wires are still there at all despite the telephone poles disappearing completely, it suggests that there may still be hope for her. The nineteenth telephone pole is the last one that she envisions, but the wires still stretch out somewhere towards the sky instead of being cut off completely at the last pole. Her future may be uncertain, but hope is there, nevertheless. All it takes for her is to reach for those wires and find a way to attach them to the twentieth pole, and all the other poles to come after that.

The feelings of uncertainty about her future are also expressed when Esther is asked about her plans after college. After giving it a moment of thought, she realizes that she does not in fact know what she would like to do, and who she would wish to become. This inner revelation comes as a surprise to her there and then.¹²⁷ It appears that thinking seriously about her potential profession is not her main priority, and that she focuses more on living in the moment rather than contemplating the future.

However, these feelings of despair and emptiness that Esther is experiencing are not something that developed during her stay in New York. She has felt like this since she was only a child, and by the time she was nine years old, all the joy evaporated from her life completely. Not even extracurricular activities or summer camps could help her regain her sense of enthusiasm.¹²⁸ Based on this knowledge, it can be argued that Esther's emotional distress has been rooted deep inside of her since early childhood. It was not an ephemeral phase but a long-developing illness that accompanied her into adulthood and caused her difficulties in everyday life.

These difficulties also manifest themselves in the form of troubles with sleeping that Esther starts experiencing to an extreme extent after her return home from New York.¹²⁹ She is forced to visit a family doctor to get prescriptions for stronger sleeping pills, as the ones she had before don't seem to help her whatsoever. The doctor appears to be concerned upon

¹²⁷ Plath, *The Bell Jar*, 30.

¹²⁸ Plath, *The Bell Jar*, 71.

¹²⁹ Plath, *The Bell Jar*, 119.

Esther's request as she realizes the severity of Esther's condition. Therefore, instead of prescribing the medication, the doctor refers her to a psychiatrist; her familiar, Doctor Gordon.¹³⁰ This decision indicates that Esther's struggles are so severe that they cannot be managed by a regular doctor and require a specialist's treatment. Plath describes Esther's inner thoughts as she sits in Doctor Gordon's waiting room:

I was still wearing Betsy's white blouse and dirndl skirt. They dropped a bit now, as I hadn't washed them in my three weeks at home. The sweaty cotton gave off a sour but friendly smell. I hadn't washed my hair for three weeks, either. I hadn't slept for seven nights.¹³¹

This thought process demonstrates Esther's struggles with managing simple hygiene routine and chores. Her mental health has reached the point where she is incapable of fulfilling basic human needs such as sleeping. The knowledge of her increasing insomnia indicates her mental instability. Despite her apparent fatigue, her body refuses to allow her to rest. It can be argued that this leads to a state of general exhaustion, where even pursuing simple tasks like washing her hair or doing laundry becomes challenging.

In her second therapy session with Doctor Gordon, Esther informs him about her ongoing issues. There appears to be no improvement whatsoever regarding her mental state. In fact, her condition seems to be deteriorating even more, and her insomnia persists.¹³²

So I told him again, in the same dull, flat voice, only it was angrier this time, because he seemed so slow to understand, how I hadn't slept for fourteen nights and how I couldn't read or write or swallow very well. Doctor Gordon seemed unimpressed.¹³³

It can be observed that Esther is quite frustrated with Doctor Gordon. Her mental health is declining further, and she fails to find support in him. His stance suggests he is unable to display any signs of empathy, which is crucial for Esther. It is arguable that she feels misunderstood and helpless in this situation. Her opinion about Doctor Gordon has been mostly negative since their first encounter, as she expressed, she "hated him the moment [she] walked in through the door."¹³⁴ Therefore, his lack of understanding did not seem to change her opinion about him whatsoever.

¹³⁰ Plath, *The Bell Jar*, 121.

¹³¹ Plath, *The Bell Jar*, 122.

¹³² Plath, *The Bell Jar*, 129.

¹³³ Plath, *The Bell Jar*, 129.

¹³⁴ Plath, *The Bell Jar*, 123.

Esther's negative feelings towards Doctor Gordon strengthen even more as he proposes a treatment regarding her persisting symptoms. He schedules her for electroconvulsive therapy at the hospital as he believes it would be beneficial for her well-being.¹³⁵ However, Esther's mental state worsens even further after receiving the shock treatment¹³⁶ and she refuses to continue her therapy sessions with Doctor Gordon any longer¹³⁷. The treatment affects her so profoundly that she begins to experience suicidal thoughts.¹³⁸

5.2 Self-inflicted Injury

Esther displays signs of reckless behaviour that can be interpreted as self-harm or purposeful self-destruction. One example is her skiing trip with Buddy Willard who tries to teach Esther how to ski.¹³⁹ Esther then races down the slope on her skis at full speed, which results in her having broken her leg.¹⁴⁰ As Esther reflects on the past event, she admits to herself that the injury was not Buddy's fault. In fact, she did it on purpose to punish herself for her behaviour, as she believes she is a bad person.¹⁴¹ This is also supported by the fact that as she reaches the end of the slope, her leg already injured, she proclaims she wants to go up again and repeat the action. However, she is immediately stopped by Buddy Willard.¹⁴² The urge to ski down the slope again despite the broken leg confirms her self-destructive behaviour. If she were to proceed with the intended act, her injury would worsen even further. However, it appears that Esther dismisses the protentional risks, which indicates her desire for physical pain and self-punishment.

5.3 Suicidal Ideations and Suicide

In *The Bell Jar*, Esther experiences a series of suicide attempts. After undergoing electroconvulsive therapy for the first time with Doctor Gordon, her negative emotions intensify and spark her decision to end her life.¹⁴³ The treatment triggers a chain reaction of suicidal thoughts and suicide attempts, where Esther takes every opportunity presented to her to end her life.

¹³⁵ Plath, *The Bell Jar*, 130.

¹³⁶ Plath, *The Bell Jar*, 139.

¹³⁷ Plath, *The Bell Jar*, 140.

¹³⁸ Plath, *The Bell Jar*, 149.

¹³⁹ Plath, *The Bell Jar*, 91.

¹⁴⁰ Plath, *The Bell Jar*, 93.

¹⁴¹ Plath, *The Bell Jar*, 82.

¹⁴² Plath, *The Bell Jar*, 94.

¹⁴³ Plath, *The Bell Jar*, 141.

5.3.1 “The box of razors in my pocket-book.”¹⁴⁴

The first time Esther tries to commit suicide occurs after her first shock therapy with Doctor Gordon. The aim of the treatment was to help her and eventually cure her. However, Esther perceives it as ineffective and considers it a mistake. She refuses to return to Doctor Gordon's office and cancels any other future treatments. Thus, it can be argued that the therapy session was unsuccessful. However, this information pleases Esther's mother, who claims: “I knew my baby wasn't like that. [...] Like those awful people. Those awful dead people at that hospital. [...] I knew you'd decide to be alright again.”¹⁴⁵

The reaction of her mother only highlights the situation regarding mental health at the time that is reflected in the book. People who struggled with mental health were perceived as mad; someone lowly. Thus, her mother tries to overlook the problem and pretends that her daughter is perfectly healthy, when in truth she is struggling and in need of guidance. Her mother's misunderstanding of the matter is evidenced in her reaction, as she believes that Esther can get well again simply by deciding so. Esther's response to these events is to find a loophole in her unfortunate situation. Since Doctor Gordon and her mother did not seem to be of help, she is forced to take matters into her own hands. It spurs her suicidal thoughts and subsequent suicide attempts.

I felt in my pocket-book among the paper scraps and the compact and the peanut shells and the dimes and nickels and the blue jiffy box containing nineteen Gillette blades, till I unearthed the snapshot I'd taken that afternoon in the orange-and-white striped booth.¹⁴⁶

The presence of the Gillette blades in her handbag reveals her intent. It also indicates her dedication to the matter, considering the amount of the razors that she carries with her. However, the number of the blades is not accidental. As well as the nineteen telephone poles she envisioned as her life, the nineteen Gillette blades symbolize her age. One blade for each year of her life that can also be an instrument that helps her end it. Her plan is to cut off the blood circulation by slitting her wrists while lying in a bath filled with water. This idea was inspired by an interview with a philosopher that Esther read, and she decides to proceed with the same act the philosopher described.¹⁴⁷

¹⁴⁴ Plath, *The Bell Jar*, 146.

¹⁴⁵ Plath, *The Bell Jar*, 140.

¹⁴⁶ Plath, *The Bell Jar*, 140.

¹⁴⁷ Plath, *The Bell Jar*, 142.

I thought it would be easy, lying in the tub and seeing the redness flower from my wrists, flush after flush through the clear water, till I sank to sleep under a surface gaudy as poppies. But when it came right down to it, the skin of my wrist looked so white and defenseless that I couldn't do it. It was as if what I wanted to kill wasn't in that skin or the thin blue pulse that jumped under my thumb, but somewhere else, deeper, more secret, and a whole lot harder to get at.¹⁴⁸

In this situation, Esther's hesitation can be observed. At first, she idealizes the act and attempts to rationalize it. She compares it to falling asleep to make it seem more natural and effortless. It is evident that she experiences conflicted feelings regarding the matter at hand. Her hesitation deepens even more as she prepares herself to proceed with the act. Upon further contemplation, she arrives at the conclusion that she is not capable of going through with it. The sight of her veins pounding beneath her bare flesh makes her aware of her mortality. It demonstrates her survival instinct which does not allow her to die by her own hand. Furthermore, she realizes that killing herself may not be the solution to her problems. It suggests that she, in fact, does not want to die altogether. She only wants to dispose of the part of her that corrupts her brain. Therefore, her plan ultimately fails.

Yet, Esther is not the only character in the book who has attempted to end her life this way. In the hospital she unexpectedly meets her familiar Joan.¹⁴⁹ Joan Gilling is a girl from Esther's hometown who had briefly dated her former boyfriend, Buddy Willard.¹⁵⁰ Joan herself has experienced suicidal thoughts and was planning to execute her plan. However, she wanted to seek the help of a professional first and give it one last chance before she acted on her thoughts. Joan thought that perhaps he would save her, and there would be no need to kill herself after all.¹⁵¹ The psychiatrist suggested she signed up for group therapy, which seemed unimaginable to Joan.¹⁵² She felt misunderstood by the psychiatrist and felt like he was not capable enough to help her. The doctor had failed her in her eyes, and she decided to execute her initial plan. She packed her essentials and left for New York, where she had planned to end her life.¹⁵³

However, the attempt was unsuccessful, and Joan shows Esther the aftermath of her actions: "Joan grinned sheepishly and stretched out her hands, palm up. Like a miniature

¹⁴⁸ Plath, *The Bell Jar*, 142.

¹⁴⁹ Plath, *The Bell Jar*, 187.

¹⁵⁰ Plath, *The Bell Jar*, 55.

¹⁵¹ Plath, *The Bell Jar*, 189.

¹⁵² Plath, *The Bell Jar*, 190.

¹⁵³ Plath, *The Bell Jar*, 192.

mountain range, large, reddish weals upheaved across the white flesh of her wrists.”¹⁵⁴ Joan explains that she cut her wrists on glass of a window in her friend’s house. This act subsequently led to her transportation to the mental institution.¹⁵⁵ It appears that Joan is almost proud of what she has done as she shows off her scars like a trophy, accompanied by a smile. Her cheerful demeanour shows that Joan is unable to see the problem and may not be aware of the gravity of her actions.

5.3.2 “That morning I had tried to hand myself.”¹⁵⁶

In the second attempt to bring her suffering to an end, Esther resorts to a different method; specifically, death caused by hanging. The vision of her goal is clear. The only thing she needs to execute her plan is to wait until she is home by herself. After her mother’s ultimate departure, she puts her plan into action. The first step is to collect essentials needed for the act. Therefore, she finds her mother’s dressing gown and pulls out its cord to use it as a substitute for the rope. Then, she proceeds to the next step, which is to make a knot on the cord to create a loop. After a series of struggles with tying the knot, she manages to create a self-fashioned hanging device and slips the loop around her neck. Now, the last and final step follows.¹⁵⁷

However, an obstacle comes in her way as soon as Esther discovers that there is no suitable place to attach the rope. Due to their low-built ceilings, there is an unlikely probability of her plan succeeding as her legs would be able to reach the ground. There were no chandeliers or beams either in the house to which she could tie the end of the cord and then swing down.¹⁵⁸ So just like this, another one of her plans collapses.

After a discouraging time of walking about with the silk cord dangling from my neck like a yellow cat’s tail and finding no place to fasten it, I sat on the edge of my mother’s bed and tried pulling the cord tight. But each time I would get the cord so tight I could feel a rushing in my ears and a flush of blood in my face my hands would weaken and let go, and I would be alright again. Then I saw that my body had all sorts of little tricks, such as making my hands go limp at the crucial second, which would save it, time and again, whereas if I had the whole say, I would be dead in a flash. I

¹⁵⁴ Plath, *The Bell Jar*, 192.

¹⁵⁵ Plath, *The Bell Jar*, 192.

¹⁵⁶ Plath, *The Bell Jar*, 152.

¹⁵⁷ Plath, *The Bell Jar*, 152.

¹⁵⁸ Plath, *The Bell Jar*, 152.

would simply have to ambush it with whatever sense I had left, or it would trap me in its stupid cage for fifty years without any sense at all.¹⁵⁹

Based on this excerpt, it can be observed that despite not finding any place to attach the rope to, Esther still tries her best to finish what she started. Only, it is no use since the survival instinct in her awakens the moment she tries using her own hands to tighten the cord around her neck. Her muscles react instinctively, causing her body to weaken and release the rope. It makes Esther realize that without proper attachment of the cord to the ceiling, she cannot achieve her goal. She can proceed to try suffocating herself by tightening the cord, however her body will always stop her from finishing the act.

The last sentence of the excerpt points out Esther's exasperation and helplessness. She believes that suicide is the only escape from her misery, and that if she does not end things now, her suffering will only be exacerbated. Her choice of words also illustrates the depth of her inner turmoil, as she uses the term "stupid cage" to describe her entrapment. She worries that if she does not take control of the situation, her life will continue to drag on in the same tedious routine it has been for the past years. And at this moment, she believes that the only way out of her cage is suicide. It is evident that she feels trapped in her own head and starts to feel more and more desperate.

I wondered, after the hanging fiasco, if I shouldn't just give it up and turn myself over to the doctors, but then I remembered Doctor Gordon and his private shock machine. Once I was locked up they could use that on me all the time. And I thought of how my mother and brother and friends would visit me, day after day, hoping I would be better. Then their visits would slacken off, and they would give up hope. They would grow old. They would forget me. They would be poor, too. They would want me to have the best of care at first, so they would sink all their money into a private hospital like Doctor Gordon's. Finally, when the money was used up, I would be moved to a state hospital, with hundreds of people like me, in a big cage in the basement. The more hopeless you were, the further away they hid you.¹⁶⁰

Esther's anxiety about the situation is reflected in her train of thoughts. It is evident that her fear of enduring electroconvulsive therapy is still present. She wishes to get better, but at the same time does not want to return to Doctor Gordon's hospital after what happened at their last encounter. This implies that she sees suicide as the best solution and would rather kill

¹⁵⁹ Plath, *The Bell Jar*, 152–153.

¹⁶⁰ Plath, *The Bell Jar*, 153–154.

herself than experience Doctor Gordon's guidance again. This highlights the negative feelings his treatment has left in her.

The expectations of her family and friends also play a big part in her decision. It aims to show how self-aware Esther is about the situation. It can be argued that she is worried about being a burden for them and does not want them to see her in this state. It implies that she longs for support but is worried that she will find none in her family. She is concerned that once they notice her condition is not improving, they will abandon her in the mental hospital. However, that is the last thing she wants. Based on the knowledge gathered from the excerpt, it is safe to assume that she fears hospitalization. The main reason for this anxiety appears to be the bad experiences she has had with Doctor Gordon. Therefore, she assumes that all doctors in the hospital are the same and that her chances of recovery are low.

5.3.3 "Drowning must be the kindest way to die."¹⁶¹

Later that day, after her attempt to hang herself¹⁶², Esther's suicidal thoughts get better off her again when she is hanging out with her friends at the beach¹⁶³. At first, Esther is hesitant to go. She is still self-conscious about her declining mental state and her anxiety aims to convince her that everyone around her must sense what is happening to her. However, she ultimately agrees to her friend's offer to join them.¹⁶⁴

Unfortunately, the presence of her friends does not seem to distract her from her nagging thoughts. As she engages in discussion with them, the conversation swiftly gathers momentum and turns to the topic of death. They are discussing a scene from a play and the character's unfortunate fate, upon which Esther asks: "Do you suppose they have morphia powders in America?"¹⁶⁵ It implies that the discussion of the character's manner of death gave her the idea. It is evident that she is looking for resources that could help her end her life, since her previous attempts were unsuccessful. Esther takes advantage of the situation and continues the conversation in this spirit. She masks her true intentions behind an innocent contemplative question of how her friend would commit suicide if he could choose. He reveals that he would shoot himself, because his father owns a gun. Therefore, he would have easy access to it. This sparks curiosity in Esther, and she starts questioning him what

¹⁶¹ Plath, *The Bell Jar*, 151.

¹⁶² Plath, *The Bell Jar*, 152.

¹⁶³ Plath, *The Bell Jar*, 148.

¹⁶⁴ Plath, *The Bell Jar*, 149.

¹⁶⁵ Plath, *The Bell Jar*, 149.

kind of gun his father owns and if by any chance he lives nearby. Upon learning that he lives in another country, she feels disappointed. Another one of her ideas failed.¹⁶⁶

Things take a turn as Esther decides that she does not feel like lying around the beach anymore and wants to take a swim. As she walks over to the water, her imagination starts running wild and it sparks another idea in her head – drowning. When she climbs into the water, her eyes catch sight of a rock on the horizon. She is determined to swim over to it, although it is quite far from the shore.¹⁶⁷ As she continues swimming closer to the rock, she realizes that reaching the destination would only serve as an excuse to withdraw from her decision. Her body would be safe on the shore again, and it would be harder to proceed with her plan. Hence, she abandons the original idea.¹⁶⁸

The only thing to do was to drown myself then and there. So I stopped. I brought my hands to my breast, ducked my head, and dived, using my hands to push the water aside. The water pressed in on my eardrums and on my heart. I fanned myself down, but before I knew where I was, the water spat me up into the sun, and the world was sparkling all about me like blue and green and yellow semi-precious stones.¹⁶⁹

This excerpt demonstrates that Esther's decision to attempt suicide on the occasion was impulsive and lacked prior planning. It is evident that the act was spontaneous, as she did not consider the possibility of gravity that would push her above surface if she tried to dive. It can be argued that she is growing desperate as she is trying all the options available to her to push herself to death. But at the beach, she has come unprepared; therefore, her attempt does not achieve its desired outcome.

5.3.4 “The strongbox on the top shelf.”¹⁷⁰

The crucial moment in Esther's journey is her fourth and most far-fetched attempt. This time, her plan is well advocated. She starts by leaving a note for her mother, saying: “I am going for a long walk.”¹⁷¹ This ensures that her mother will not look for her in the house when she returns home. It gives Esther power over the situation.

¹⁶⁶ Plath, *The Bell Jar*, 150.

¹⁶⁷ Plath, *The Bell Jar*, 151.

¹⁶⁸ Plath, *The Bell Jar*, 154.

¹⁶⁹ Plath, *The Bell Jar*, 154.

¹⁷⁰ Plath, *The Bell Jar*, 161.

¹⁷¹ Plath, *The Bell Jar*, 161.

The entire process is slow-paced. It is evident that Esther does not want to rush anything and let her plan falter as during her previous attempts. She walks to her mother's room to fetch a small bottle of pills that she keeps hidden away in the strongbox atop her wardrobe.¹⁷²

Then I unlocked the strongbox and took out the bottle of new pills. There were more than I had hoped. There were at least fifty. If I had waited until my mother doled them out to me, night by night, it would have taken me fifty nights to save up enough. And in fifty nights, college would have opened, and my brother would have come back from Germany, and it would be too late.¹⁷³

This excerpt demonstrates how crucial time is for Esther. It highlights her despair and the need for action. She is acutely aware of the time pressure that comes with her brother's return from Germany and her obligation to return for the new semester in college. She feels like she is running out of time, and the longer she keeps waiting, the worse her state will gradually get. Therefore, she decides to act; and this time, she does everything in her power to succeed.

Wrapping my black coat round me like my own sweet shadow, I unscrewed the bottle of pills and started taking them swiftly, between gulps of water, one by one by one. At first, nothing happened, but as I approached the bottom of the bottle, red and blue lights began to flash before my eyes. The bottle slid from my fingers and I lay down. The silence drew off, baring the pebbles and shells and all the tatty wreckage of my life. Then, at the rim of vision, it gathered itself, and in one sweeping tide, rushed me to sleep.¹⁷⁴

Gradually, she swallows all fifty pills that were in the bottle. On this occasion, she does not display any signs of hesitation or last-minute withdrawal as she did during her previous attempts, namely the incident with the Gillette blades. However, she compares the act to falling asleep, just as she imagined it would be when she had contemplated slitting her wrists in the bathtub. This point illustrates that she has already made peace with her decision, and to her, it is merely an act of falling asleep; only this time, she does not intend to wake up.

In the moments before losing consciousness, Esther mentions: "The silence drew off, baring the pebbles and shells and all the tatty wreckage of my life."¹⁷⁵ This depiction reveals that in the last moments, she sees flashes before eyes that reflect on her life. Esther describes it as a "wreckage"¹⁷⁶, which again proves how unhappy she feels. There is no evidence of regret regarding her decision, as even in her supposedly final moments, she still thinks of

¹⁷² Plath, *The Bell Jar*, 161–162.

¹⁷³ Plath, *The Bell Jar*, 162.

¹⁷⁴ Plath, *The Bell Jar*, 163.

¹⁷⁵ Plath, *The Bell Jar*, 163.

¹⁷⁶ Plath, *The Bell Jar*, 163.

her life as a ruin; something incapable of reconstruction. Thus, she comes to terms with her fate and willingly accepts her downfall.

Despite her efforts, the execution of her plan, however well thought through, results in failure again. After her overdose, she wakes up in a hospital. At first, she feels disoriented and confused, until she realizes where she is.¹⁷⁷ After her adjustment to the new surroundings, her mother and brother are allowed to visit her in her room. Her mother is distressed and worried, and at the sight of Esther, she gets emotional.¹⁷⁸ Her brother asks her how she feels, and at that moment, Esther's head turns to her mother, and she replies: "The same."¹⁷⁹ This is a significant moment between the family. It shows that Esther's brother is interested in her well-being, but her mother tries to overlook the problem. As Esther responds to his question, she looks at her mother instead of him. This implies that Esther blames her mother for what happened in the past. She was aware of Esther's struggles, but instead of trying to help her, she pretended that Esther was healthy. It demonstrates that her mother does not truly believe her nor understand her suffering.

During Esther's stay at the hospital, an incident with a mirror occurs. She requests a mirror from one of the nurses as she wants to take a look at herself, because the nurse said that her face does not look too pretty. Upon seeing her reflection, Esther gets startled and drops the mirror to the floor, which breaks into pieces. Another nurse runs into the room, visibly distressed and cross. Esther has a hard time understanding why the nurse is so angry with her; she dropped the mirror on accident, after all.¹⁸⁰

"They want you to be in a special ward," my mother said. "They don't have that sort of ward at our hospital."

"I liked it where I was."

My mother's mouth tightened. "You should have behaved better, then."

"What?"

"You shouldn't have broken that mirror. Then maybe they'd have let you stay."

But of course I knew the mirror had nothing to do with it.¹⁸¹

In this excerpt, Esther learns from her mother that she is being transferred to the mental hospital. Based on their conversation, it can be argued that the incident with the mirror was

¹⁷⁷ Plath, *The Bell Jar*, 165.

¹⁷⁸ Plath, *The Bell Jar*, 166.

¹⁷⁹ Plath, *The Bell Jar*, 166.

¹⁸⁰ Plath, *The Bell Jar*, 168.

¹⁸¹ Plath, *The Bell Jar*, 169.

what spurred the doctor's decision to move her to a different ward. It implies that the nurses were concerned that Esther would try to hurt herself again using the shards of the mirror as they knew the reason she was staying at the hospital was because had she tried to commit suicide. The act of her attempted suicide, however, is the primary reason for her transfer; the incident with the mirror only contributed to it, as Esther herself knows.

5.3.5 "The brief bridges that arched the Charles."¹⁸²

During her car journey to the mental hospital, Esther's suicidal thoughts reappear. Even in the moment she is being driven to a place where she is to get help, Esther focuses on her own death. It is an ironic contrast between two counterparts: recovery and suicide. It aims to show that healing is not linear, and one can easily fall back into the old unhealthy patterns at any minute.

As the car crosses the bridge above the river, Esther's thoughts drift to jumping off the bridge. She contemplates opening the door and jumping out of the moving car to run towards the railing of the bridge and throw herself down into the river.¹⁸³ This scene aims to show Esther's persistent thoughts regarding suicide, even after her fiasco with overdosing. It can be argued that she wants to try for one last time to escape her transfer to the mental hospital. It indicates how worried she is about undergoing electroconvulsive therapy again, especially after her negative experience with Doctor Gordon. She fears that all doctors are the same and that in the mental institution, she will be met with misunderstanding again. So as the car crosses the bridge, she mentally prepares herself for opening the car door. However, before she can even reach for the handle, she is stopped by her mother and brother who reach for it instead, already anticipating her intentions.¹⁸⁴

The journey over the bridge unnerved me. I had missed a perfectly good chance. The river water passed me by like an untouched drink. I suspected that even if my mother and brother had not been there I would have made no move to jump.¹⁸⁵

Esther's conflicted feelings can be observed in this situation. It is evident that she is still contemplating ending her life. However, the last sentence suggests that she is tired of fighting. She had resorted to a variety of methods to end her life, but to no avail. The excerpt aims to show that she has given up and accepted her fate. The fact that she would not proceed

¹⁸² Plath, *The Bell Jar*, 177.

¹⁸³ Plath, *The Bell Jar*, 177.

¹⁸⁴ Plath, *The Bell Jar*, 178.

¹⁸⁵ Plath, *The Bell Jar*, 179.

with the act indicates that she is willing to give the doctors at the mental hospital a chance to help her.

5.3.6 “Joan has been found.”¹⁸⁶

The character of Joan Gilling attempted suicide before she was admitted to the mental hospital. Based on the knowledge regarding the circumstances that have been mentioned in the previous chapters, it is safe to assume that her mental state is unstable. However, Joan’s case ultimately results in an unfortunate tragedy.

After Joan’s gradual improvement, she is discharged from the hospital.¹⁸⁷ She moves to Cambridge to live with a nurse that was looking for a new roommate.¹⁸⁸ At one point after Joan’s discharge, Esther comes to visit her. She is in crisis and in need of medical treatment. In hopes of discussing this with Nurse Kennedy, Esther visits their apartment. However, she only finds Joan who answers the door and informs her that Nurse Kennedy is not present. Despite this information, Esther comes inside, nevertheless.¹⁸⁹ Joan, confused at first, is terrified upon the discovery that Esther is heavily bleeding¹⁹⁰ due to her first instance of intercourse¹⁹¹. Together, they try to find a solution. Joan calls several hospitals, but given the fact that it is the weekend, there are no doctors willing to see to Esther’s injury. Subsequently, they call an emergency ward that eventually admits her.¹⁹²

Following these events, Joan comes back to the mental institution several days later. However, she is admitted to the least scrutinized department of the hospital which allows her to visit town and go for walks outside of the hospital.¹⁹³ Esther worries that she may be blamed for Joan’s return to the institution, which intensifies when a doctor comes to question her about Joan’s whereabouts. It appears that Joan has gone missing, and the staff is looking for her.¹⁹⁴ The morning after, the doctor visits Esther again. She informs her that Joan has been found in the woods nearby the hospital and hanged herself on one of the trees.¹⁹⁵ After Joan’s passing, Esther’s guilt starts to expand further. Eventually, she visits Doctor Nolan to discuss this matter with her. Doctor Nolan reassures her that this was not her fault. She

¹⁸⁶ Plath, *The Bell Jar*, 225.

¹⁸⁷ Plath, *The Bell Jar*, 214.

¹⁸⁸ Plath, *The Bell Jar*, 215.

¹⁸⁹ Plath, *The Bell Jar*, 220.

¹⁹⁰ Plath, *The Bell Jar*, 221.

¹⁹¹ Plath, *The Bell Jar*, 219.

¹⁹² Plath, *The Bell Jar*, 222.

¹⁹³ Plath, *The Bell Jar*, 223–224.

¹⁹⁴ Plath, *The Bell Jar*, 224.

¹⁹⁵ Plath, *The Bell Jar*, 225.

explains that it was Joan's decision to do this, and no one contributed to her death in any way.¹⁹⁶

In the story, Joan is represented as the character who ultimately fails, and the illness gets the better of her. It is a stark contrast to Esther's character, who attempts to commit suicide multiple times, but at the end is given a chance at a fresh start.

5.4 Esther's Struggle with Identity

Given her mental illness, Esther starts experiencing an identity crisis and losing touch with herself. This is reflected in her struggle to maintain hobbies which she once loved, namely writing. Esther's mother mentions that "[Esther] thinks she will never write again."¹⁹⁷ Esther also mentions this at Doctor Gordon's session where she tells him she is not able to write or read anymore.¹⁹⁸ Writing and reading has been a major part of her identity, but even that is ripped away from her due to her mental issues.

5.4.1 The fig tree analogy

The portrayal of Esther's loss of sense of herself is particularly illustrated in the fig tree analogy. It aims to show Esther's inner struggles with identity and her inability to decide upon her career.

I saw my life branching out before me like the green fig-tree in the story.

From the tip of every branch, like a fat purple fig, a wonderful future beckoned and winked. One fig was a husband and a happy home and children, and another fig was a famous poet and another fig was a brilliant professor, and another fig was Ee Gee, the amazing editor, and another fig was Europe and Africa and South America, and another fig was Constantin and Socrates and Attila and a pack of other lovers with queer names and off-beat professions, and another fig was an Olympic lady crew champion, and beyond and above these figs were many more figs I couldn't quite make out.

I saw myself sitting in the crotch of this fig tree, starving to death, just because I couldn't make up my mind which of the figs I would choose. I wanted each and every one of them, but choosing one meant losing all the rest, and, as I sat there, unable to decide, the figs began to wrinkle and go black, and, one by one, they plopped to the ground at my feet.¹⁹⁹

The comparison of the life options to figs aims to illustrate Esther's overwhelming sense of indecision when she is faced with the burden of choice. She is acutely aware of the

¹⁹⁶ Plath, *The Bell Jar*, 229.

¹⁹⁷ Plath, *The Bell Jar*, 178.

¹⁹⁸ Plath, *The Bell Jar*, 129.

¹⁹⁹ Plath, *The Bell Jar*, 73.

opportunity costs which follow if she chooses any option presented to her. She wants to have all, and try out every different career path, but she knows that she cannot have them all at once.

This leads to her state of paralysis. The withering of the figs implies that the longer she waits to choose, the faster the opportunities slip through her fingers. However, she is starstruck by the variety of opportunities presented to her, that she finds it difficult to choose just one. It signalizes her overthinking, where she assesses every option separately so she can choose the one that would be the most convenient in her eyes.

5.4.2 Under the bell jar

The bell jar is a significant symbol in the book as it represents Esther's loss of touch with reality. Throughout the book, Esther mentions it on several occasions as she is reflecting on her state of mind.

[...] because wherever I sat – on the deck of a ship or at a street café in Paris or Bangkok – I would be sitting under the same glass bell jar, stewing in my own sour air. [...] I sank back in the gray, plush seat and closed my eyes. The air of the bell jar wadded round me and I couldn't stir.²⁰⁰

The bell jar symbolizes a cage that entraps her and disconnects her from the outside world. It can be interpreted as a metaphor for her feelings of derealization. Esther feels that she is trapped behind a glass wall, which only allows her to observe and watch what is happening around her, but not truly participate. It suggests that she is watching the world before her unfold, however she cannot reach out and touch it, which prevents her from truly feeling things.

The description "my own sour air"²⁰¹ demonstrates how suffocated she feels. She is trapped in the bell jar and feels that there is no way out of it. The excerpt shows that no matter where she would be in the world, she would still feel disconnected from it; not even a change of environment would help. This reinforces the idea that she is experiencing feelings of derealization.

"We'll take up where we left off, Esther," [her mother] had said, with her sweet, martyr's smile.

"We'll act as if all this were a bad dream."

A bad dream.

²⁰⁰ Plath, *The Bell Jar*, 178.

²⁰¹ Plath, *The Bell Jar*, 178.

To the person in the bell jar, blank and stopped as a dead baby, the world itself is the bad dream.²⁰²

The mention of the word dream draws attention back to the argument regarding derealization. It implies that Esther feels that the life she is living is just a bad dream, where she is forced to be a mere observer instead of a participant. Moreover, her comparison to herself as “blank and stopped as a dead baby”²⁰³ implies her experiencing of depersonalization, during which she loses sense of her identity. She feels empty and numb even though she is still living, while she is trapped behind a glass bell jar that prevents her from experiencing feelings. On another occasion, she mentions: “How did I know that someday – at college, in Europe, somewhere, anywhere – the bell jar, with its stifling distortions, wouldn’t descend again?”²⁰⁴ This excerpt supports the claim that the bell jar symbolizes derealization. Esther’s depiction of it as “the bell jar, with its stifling distortions”²⁰⁵ illustrates how she sees the world around her. From her spot behind the imaginary glass wall, her perception is blurry and does not correspond to the way it looks like in reality.

5.5 Shock Treatments

In the story, Esther undergoes electroconvulsive therapy under the supervision of two doctors: Doctor Gordon and Doctor Nolan. This treatment is first introduced to her by Doctor Gordon, but after her negative experience with it, she refuses to undergo it again under his guidance.²⁰⁶

Doctor Gordon was fitting two metal plates on either side of my head. He buckled them into place with a strap that dented my forehead, and gave me a wire to bite. I shut my eyes. There was a brief silence, like an indrawn breath. Then something bent down and took hold of me and shook me like the end of the world. Whee-ee-ee-ee-ee, it shrilled, through an air crackling with blue light, and with each flash a great jolt drubbed me till I thought my bones would break and the sap fly out of me like a split plant. I wondered what terrible thing it was that I had done.²⁰⁷

This excerpt explicitly describes the feelings that Esther felt during the treatment. She was able to feel every volt going through her body, which implies that she has not been put under anaesthesia when they were jolting electrical shocks into her head. This confirms that the

²⁰² Plath, *The Bell Jar*, 227.

²⁰³ Plath, *The Bell Jar*, 227.

²⁰⁴ Plath, *The Bell Jar*, 230.

²⁰⁵ Plath, *The Bell Jar*, 230.

²⁰⁶ Plath, *The Bell Jar*, 140.

²⁰⁷ Plath, *The Bell Jar*, 138.

treatment was poorly and irresponsibly executed. Therefore, it made Esther feel even worse than before. Later on, Esther experiences electroconvulsive therapy again, however this time under the supervision of her doctor at the mental hospital, Doctor Nolan.

At their first encounter, Esther confides in Doctor Nolan about the shock treatment session she had with Doctor Gordon and describes how she could feel every volt passing through her body.²⁰⁸ Moreover, Esther expresses her dislike for Doctor Gordon given this experience.²⁰⁹ This depiction makes Doctor Nolan's tense as she realizes what a horrible thing Esther endured. She informs her that this is not how electroconvulsive therapy should be administered. It is evident that Doctor Nolan acknowledges the faulty execution of Doctor Gordon's treatment, as she informs Esther it should be "like going to sleep".²¹⁰ This implies Doctor Nolan's emphasis on the importance of anaesthesia, which Esther had not been given at her first electroconvulsive therapy session. Moreover, Doctor Nolan reassures her that if the doctors decide she should have electroconvulsive therapy again in the mental institution, she will inform her about it personally. Doctor Nolan promises her that it will be different from the negative experience that she went through with Doctor Gordon.²¹¹ Ultimately, Esther indeed faces her second shock treatment.²¹²

"Listen, Esther," Doctor Nolan said. "I'm going over with you. I'll be there the whole time, so everything will happen right, the way I promised. I'll be there when you wake up, and I'll bring you back again."

I looked at her. She seemed very upset.

I waited a minute. Then I said, "Promise you'll be there."

"I promise."

[...]

I hung on to Doctor Nolan's arm like death, and every so often she gave me an encouraging squeeze.²¹³

Doctor Nolan's words of reassurance are crucial for Esther in this situation. She still recalls her negative experience at her first electroconvulsive therapy session; therefore, she seeks moral support and words of affirmation, which Doctor Nolan fulfils. It indicates Doctor

²⁰⁸ Plath, *The Bell Jar*, 182.

²⁰⁹ Plath, *The Bell Jar*, 181.

²¹⁰ Plath, *The Bell Jar*, 182.

²¹¹ Plath, *The Bell Jar*, 182.

²¹² Plath, *The Bell Jar*, 204.

²¹³ Plath, *The Bell Jar*, 204.

Nolan's sense of compassion and sensitivity during this moment, as she is aware of Esther's anxiety. This ultimately helps her gain Esther's trust.

I woke out of a deep, drenched sleep, and the first thing I saw was Doctor Nolan's face swimming in front of me and saying, "Esther, Esther."

[...]

All the heat and fear purged itself. I felt surprisingly at peace. The bell jar hung, suspended, a few feet above my head. I was open to the circulating air.

"It was like I told you it would be, wasn't it?" said Doctor Nolan, as we walked back to Belsize together through the crunch of brown leaves.

"Yes."²¹⁴

This experience is visibly more positive for her than her treatment with Doctor Gordon, as Doctor Nolan guides her through every step. It highlights the importance of emotional support of patients by their doctors.

To compare the two shock therapy sessions that Esther attended, it can be argued that Doctor Nolan's treatment had a more positive outcome than Doctor Gordon's. This is due to the different methods each doctor used. Whereas Doctor Gordon did not give Esther anaesthesia, Doctor Nolan did. Moreover, Doctor Nolan offered her support and showed compassion in the moments when Esther needed it. This eventually contributed to Esther's sense of safety during the treatment.

5.6 Recovery

After Esther's series of shock therapy sessions with Doctor Nolan, her mental distress progressively starts to ease.

The sun, emerged from its gray shrouds of clouds, shone with a summer brilliance on the untouched slopes. Pausing in my work to overlook that pristine expanse, I felt the same profound thrill it gives me to see trees and grassland waist-high under flood water – as if the usual order of the world had shifted slightly, and entered a new phase.²¹⁵

This excerpt illustrates Esther's shift in perception. She starts noticing the outside world and admires the landscape before her. It demonstrates how she is able to focus on the little things around her and appreciate them, which she was not able to do before. The doctors eventually consider Esther's discharge from the hospital and invite her for an interview to discuss her

²¹⁴ Plath, *The Bell Jar*, 206.

²¹⁵ Plath, *The Bell Jar*, 228.

case.²¹⁶ Buddy Willard comes visit her that day, and the last thing he says to her is: “I wonder who you’ll marry now, Esther. Now you’ve been [...] here.”²¹⁷ His reaction reflects society’s perception about people who were admitted to a mental hospital. Mentally indisposed people were seen as individuals contaminated with poison that was mental illness. Others would often avoid them once they learned that they were different. Those who had experience with mental hospital were automatically seen as outcasts. From Buddy’s reaction, it can be observed that he sees her as such as well, given the fact that he believes no one will want to marry her now.

I had hoped, at my departure, I would feel sure and knowledgeable about everything that lay ahead – after all, I had been ‘analyzed’. Instead, all I could see were question marks.

[...]

There ought, I thought, to be a ritual for being born twice – patched, retreaded and approved for the road. I was trying to think of an appropriate one when Doctor Nolan appeared from nowhere and touched me on the shoulder.²¹⁸

In the final scene of the book, Esther readies herself for the interview with the doctors. During this moment, she reflects on her stay at the hospital. The “question marks”²¹⁹ she mentions serve as evidence of her persistent uncertainty about the future. Her stay at the hospital is coming to an end, and it is time for her to get back to her old life, which naturally scares her. It is a transformation; being reborn, as she mentions. It gives her a second chance in life. Her overcoming this experience is evidence that there is hope for Esther Greenwood.

²¹⁶ Plath, *The Bell Jar*, 230.

²¹⁷ Plath, *The Bell Jar*, 231.

²¹⁸ Plath, *The Bell Jar*, 233.

²¹⁹ Plath, *The Bell Jar*, 233.

CONCLUSION

This thesis aimed to explore the representation of mental health issues in Sylvia Plath's *The Bell Jar*. It focused solely on the character of Esther Greenwood who found herself struggling with her own identity and progressing mental health issues amid the 20th century America, when mental health was poorly understood and problems with it often stigmatized. The analysis showed that mental health issues were manifested in subtle changes in Esther's behaviour and her progressively worsening state of mind. She was overcome with struggles with her own identity and feelings of depersonalization and derealization, which trapped her in an imaginary glass bell jar. She lost touch with reality and instead became consumed by her personal mental struggles.

Her depression started manifesting through small changes in her mood stability. She would experience lack of enthusiasm and interest in her work and slowly stopped engaging in the activities she once loved, namely writing and reading. Her depression was further manifested through severe insomnia which prevented her from sleeping for several nights in a row. Upon her family doctor's recommendation, she visited a psychiatrist, Doctor Gordon, whose methods proved to be dangerous. He lacked empathy and demonstrated a considerable incompetence in case of Esther. This illustrates how even the psychiatrists themselves lacked proper understanding of mental health and used methods that caused more harm than good. This is especially true in Esther's case, as Doctor Gordon's electroconvulsive therapy worsened her condition even more due to being administered without anaesthesia. This experience affected Esther so profoundly that it deepened her depression and triggered a chain reaction of suicide attempts. The stigma with which society perceived these issues was also reflected in Esther's mother. Despite witnessing Esther's struggles, she believed there was never actually anything wrong with her daughter. Moreover, Plath showed the misconceptions of mental health issues in the character of Buddy Willard, who once took interest in Esther but after learning of her struggles, his demeanour changed. He believed that due to her stay in the mental hospital, no one would want to marry her anymore.

However, there was also a positive portrayal of mental health awareness present in the novel. This was manifested in the character of Doctor Nolan who became Esther's supervisor after her failed suicide attempt and admission to a mental institution. Unlike Doctor Gordon, she treated Esther with respect and empathy. Doctor Nolan showed her that if electroconvulsive therapy was administered correctly, it could be effective. She helped Esther on her journey of recovery and prepared her for the treatment. This illustrates how

important it is to actively listen to the patient and discuss things with them in detail. Doctor Gordon did not prepare Esther properly for her first shock treatment and never explained the process of the procedure, which intensified the negative impact it had on her. On the other hand, Doctor Nolan tried to guide her through it step by step.

To summarize these findings, it can be observed that Sylvia Plath managed to depict both the progress and lack of compassion in psychiatric treatment in 1950s America. She showed readers the contrast between the inhumane treatment with which some doctors treated their patients and the exceptional cases of doctors who truly cared about helping others. Her raw depictions were the result of confessional literary movement which allowed her to express her opinions freely and show readers the reality of mental health awareness in 1950s America. In her narrative, Plath criticizes the mistreatment of patients by the doctors and the misunderstanding they faced. *The Bell Jar* is evidence on how important it is to notice subtle changes in other people and provide support if we see them struggling. Sometimes, all they really need is someone to listen to them. As seen in Esther's character, her mental health deteriorated after the people that were supposed to help her failed her. She sought out help but was met with mistreatment instead. This thesis comes to the conclusion that perception of mental health issues plays a crucial role in an individual's life, influencing both their personal recovery and the way they are treated by society.

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