
Prescriptions of Silence: Patriarchal Medical Oppression and the Intensification of Female Trauma in *The Yellow Wallpaper* and *The Bell Jar*

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Abstract

This paper examines the intersection of patriarchal medical practices and the exacerbation of female trauma in Charlotte Perkins Gilman's *The Yellow Wallpaper* and Sylvia Plath's *The Bell Jar*. Through a comparative feminist literary analysis, the study explores how institutionalized medical oppression—manifested in the 19th-century “rest cure” and mid-20th-century electroshock therapy—serves as a tool of gendered control, silencing women's voices and pathologizing their autonomy. Both protagonists, constrained by male-dominated medical and societal structures, experience intensified psychological distress as their realities are dismissed and their agency systematically eroded. By contextualizing these narratives within the authors' own lived experiences, the paper underscores the historical reality of medical misogyny and its role in perpetuating cycles of female trauma. Ultimately, the analysis critiques the patriarchal medical establishment's complicity in invalidating women's mental health struggles, arguing that such silencing mechanisms deepen rather than alleviate suffering. This study contributes to broader conversations about gender, power, and the historical stigmatization of women's mental health in literature and society.

Keywords: Patriarchal oppression, medical silencing, female trauma, and mental health.**Introduction**

The 19th and 20th centuries witnessed the systematic pathologization of women's mental and physical health under patriarchal medical systems, a phenomenon that weaponized science to enforce gendered hierarchies. In the Victorian era, diagnoses like “hysteria” and “neurasthenia” proliferated, pathologizing women's dissatisfaction with

restrictive domestic roles. The infamous “rest cure,” pioneered by physician Silas Weir Mitchell, epitomized this control: women deemed “overly emotional” or intellectually ambitious were confined to bed rest, forbidden from writing, reading, or socializing. Charlotte Perkins Gilman’s *The Yellow Wallpaper* (1892) draws directly from her own experience with Mitchell’s treatment, framing the cure not as therapy but as a tool of subjugation. By the mid-20th century, psychiatry had evolved, yet women’s autonomy remained under siege. Electroconvulsive therapy and involuntary institutionalization became common responses to women’s depression, as seen in Sylvia Plath’s *The Bell Jar* (1963), which mirrors Plath’s own hospitalization. These practices, framed as medical progress, instead reinforced patriarchal norms by reducing women’s suffering to biological malfunctions requiring correction rather than addressing societal inequities.

Feminist scholars like Elaine Showalter (*The Female Malady*, 1985) and Barbara Ehrenreich (*For Her Own Good*, 1978) have critiqued this history, arguing that medicine served as an extension of patriarchal authority. The diagnosis of “hysteria,” for instance, pathologized dissent, transforming women’s anger or ambition into symptoms of illness. Such practices silenced women by delegitimizing their voices, a dynamic both Gilman and Plath dramatize through protagonists whose trauma is exacerbated, not alleviated, by the very institutions claiming to heal them.

Thesis Statement

This study contends that Charlotte Perkins Gilman and Sylvia Plath use their heroines' horrific experiences with patriarchal medical institutions to reveal how silence, confinement, and pathologization are employed to undermine women's agency. In *The Yellow Wallpaper*, the narrator's decline into insanity due to the "rest cure" exemplifies how medical paternalism induces self-doubt in women, while *The Bell Jar* demonstrates how mid-20th-century psychiatry pathologizes women's ambition as a kind of deviance. Both writers use narrative techniques—Gilman’s disjointed diary entries and Plath’s confessional prose—to undermine the silencing tactics of their times, exposing the psychological trauma inflicted by medical sexism. This research illustrates, via the juxtaposition of these texts, how patriarchal organizations throughout history appropriate medical authority to impose gendered oppression, so designating women's bodies and brains as domains of control.

Significance of the Study

Gilman’s and Plath’s works are foundational to feminist literary canon, yet their critiques of medical misogyny remain urgently relevant. Today, women’s pain continues to be dismissed as “hysteria” in clinical settings, with studies showing that women are more

likely to be prescribed sedatives for pain and less likely to be referred for specialist care. The novels' exploration of enforced silence also resonates with contemporary movements like MeToo, which highlight the systemic erasure of women's voices. By analyzing these texts through the lens of feminist trauma theory, this study bridges literary scholarship and social history, revealing how literature both reflects and resists oppressive systems.

Furthermore, this research challenges apolitical readings of the novels. While some critics frame the protagonists' breakdowns as purely personal tragedies, this article emphasizes their political dimensions: Gilman's narrator tears down the wallpaper not out of insanity, but as a grotesque act of defiance; Esther Greenwood's suicidal ideation in *The Bell Jar* stems from the suffocating contradictions of postwar femininity. By centering medical oppression as a structural rather than individual issue, this study contributes to intersectional feminist discourse, urging readers to consider how race, class, and disability intersect with gendered trauma—a gap in existing scholarship on these texts.

Finally, in an era where reproductive rights and bodily autonomy are under renewed threat, revisiting these works underscores literature's role in documenting resistance. Gilman and Plath transform personal anguish into collective testimony, offering a blueprint for contemporary writers and activists seeking to dismantle systems that weaponize silence.

Literature Review

The intersection of feminist literary criticism and trauma theory provides a robust framework for analyzing Charlotte Perkins Gilman's *The Yellow Wallpaper* (1892) and Sylvia Plath's *The Bell Jar* (1963), both of which explore gendered oppression, madness, and medical trauma. Key scholars such as Sandra Gilbert, Susan Gubar, Elaine Showalter, and Cathy Caruth offer critical lenses to dissect these themes.

Sandra Gilbert and Susan Gubar's seminal work, *The Madwoman in the Attic*, posits that nineteenth-century female authors often encoded their rebellion against patriarchal confines through madwomen characters (1-44). In *The Yellow Wallpaper*, the protagonist's descent into madness—manifested in her obsession with the wallpaper—symbolizes a subversive rejection of the “rest cure” prescribed for her postpartum depression (Gilman 12). Similarly, *The Bell Jar*'s Esther Greenwood grapples with societal expectations of femininity, her mental breakdown reflecting a crisis of identity in a misogynistic 1950s America (Plath 102). Gilbert and Gubar's framework illuminates how both protagonists' madness becomes a form of resistance, though Gilman's narrator spirals into complete fragmentation, while Esther tentatively reclaims agency (Gilbert and Gubar 78).

Elaine Showalter's *The Female Malady* historicizes the pathologization of women's mental health, arguing that medical practices often reinforced gender norms (Showalter 124-

25). Gilman's critique of the rest cure—a real-life prescription by physician S. Weir Mitchell—exposes how medical “treatment” silenced women, confining them to domestic roles (Gilman 8-9). Plath's depiction of electroshock therapy and institutionalization in *The Bell Jar* mirrors mid-twentieth-century psychiatry's often brutal control of female bodies (Plath 168). Showalter's analysis underscores how both texts frame madness not as innate but as a product of medical and societal oppression (Showalter 145).

Cathy Caruth's trauma theory, particularly *Unclaimed Experience*, elucidates the narrative structures of these works. Trauma, Caruth argues, resists linear narration, emerging through fragmented repetition (Caruth 5). *The Yellow Wallpaper*'s diary format becomes increasingly disjointed, mirroring the protagonist's psychological disintegration (Gilman 24-30). Conversely, *The Bell Jar* employs confessional prose with nonlinear flashbacks, reflecting Esther's cyclical grappling with trauma (Plath 55-60). Both narratives thus formally embody Caruth's concept of trauma as an “unclaimed experience,” where the unspeakable is conveyed through stylistic rupture (Caruth 11).

Existing scholarship has extensively applied these frameworks individually. Feminist readings of Gilman emphasize the wallpaper as a metaphor for patriarchal confinement (Gilbert and Gubar 89), while Plath's novel is often analyzed through biographical lenses, linking Esther's struggles to Plath's own (Showalter 167). Trauma theory has been used to unpack the protagonists' dissociation and narrative unreliability (Caruth 18). However, few studies synthesize feminist and trauma perspectives to explore how medical violence shapes both content and form.

Despite rich individual analyses, significant gaps remain. First, comparative studies of Gilman and Plath are scarce. While both are feminist touchstones, their temporal separation—Gilman's late nineteenth-century realism versus Plath's mid-twentieth-century confessionalism—offers untapped insights into evolving portrayals of female madness. A comparative approach could reveal how shifting medical practices (e.g., rest cure vs. electroshock therapy) reflect broader changes in gendered oppression (Showalter 202).

Second, the intersection of medical trauma and narrative form remains under-explored. *The Yellow Wallpaper*'s fragmented diary entries contrast sharply with *The Bell Jar*'s introspective, episodic structure. Yet few scholars interrogate how these formal choices mediate trauma's inexpressibility. For instance, Gilman's fragmented syntax mirrors the protagonist's eroding sanity (Gilman 28), while Plath's juxtaposition of wry humor and despair critiques the stigmatization of mental illness (Plath 190). Trauma theory could deepen understanding of how form itself becomes a site of resistance (Caruth 22).

Finally, the role of historical context in shaping these narratives warrants further study. Gilman's post-Victorian era and Plath's Cold War America imposed distinct constraints on women's autonomy, influencing their protagonists' trajectories. Examining these contexts through Showalter's historical lens could illuminate how each text critiques contemporaneous medical practices (Showalter 210).

Feminist Theory and the Pathologization of Women

Feminist literary theory provides a critical lens for understanding how patriarchal systems have historically pathologized women's bodies and emotions. Elaine Showalter's *The Female Malady* underscores how diagnoses such as "hysteria" functioned as tools of gendered oppression, medicalizing women's dissent against restrictive social roles (Showalter 124-25). In the nineteenth century, women exhibiting symptoms of depression, anxiety, or creativity were labeled "hysterical" and subjected to treatments like the rest cure—a practice Charlotte Perkins Gilman critiques in *The Yellow Wallpaper*. The protagonist's confinement and enforced idleness reflect how medical authority silenced women, framing their resistance as madness rather than rational protest (Gilman 12).

Building on this, Sandra Gilbert and Susan Gubar's *The Madwoman in the Attic* introduces the "madwoman" trope as a symbol of repressed female rage. They argue that nineteenth-century women writers encoded subversive critiques of patriarchy through characters who "escape" societal constraints via madness (Gilbert and Gubar 78-80). In Gilman's story, the narrator's obsession with the wallpaper—a hallucinatory projection of her own entrapment—exemplifies this trope. Similarly, Sylvia Plath's *The Bell Jar* reimagines the madwoman in a mid-twentieth-century context, with Esther Greenwood's mental collapse mirroring the suffocating expectations of Cold War-era femininity (Plath 102). Both texts reveal how medicalized labels like "hysteria" pathologize women's resistance, framing their trauma as inherent instability rather than a response to systemic oppression.

Trauma Theory

Trauma theory, particularly Cathy Caruth's concept of the "unclaimed experience," elucidates how patriarchal systems deny women the language to articulate their suffering. Caruth defines trauma as an event that is "not fully experienced as it occurs," returning instead through fragmented repetitions in memory and narrative (Caruth 4). In *The Yellow Wallpaper*, the protagonist's disjointed diary entries—marked by ellipses, abrupt shifts, and obsessive focus on the wallpaper—reflect her inability to directly confront the trauma of medical confinement (Gilman 24-30). Her narrative becomes a site of "unclaimed" experience, where the unspeakable violence of the rest cure is communicated through stylistic rupture rather than explicit testimony.

Judith Herman's *Trauma and Recovery* expands this framework by emphasizing the role of testimony in healing. Herman argues that survivors must reconstruct their trauma through narrative to reclaim agency, a process often hindered by societal denial (Herman 181). In *The Bell Jar*, Esther's fragmented recollections of electroshock therapy and institutionalization illustrate this dynamic. Her sarcastic, detached tone—"I was supposed to be having the time of my life" (Plath 2)—reveals the impossibility of articulating her pain within a culture that dismisses women's mental health struggles. Plath's use of confessional prose, interspersed with dark humor and surreal imagery, mirrors Herman's assertion that trauma resists linear expression, demanding instead a "double telling" that oscillates between silence and utterance (Herman 1).

The intersection of feminist and trauma theories reveals how patriarchal systems compound women's suffering: by denying them the language to name their trauma, medical and cultural institutions perpetuate cycles of silencing. For Gilman's narrator, this denial culminates in complete psychological disintegration, while Esther's tentative recovery hinges on her fragmented yet persistent voice. Both texts thus exemplify Caruth's claim that trauma "is always the story of a wound that cries out" but remains unheard (Caruth 4).

Analysis

Charlotte Perkins Gilman's *The Yellow Wallpaper* exposes the violence of nineteenth-century medical practices through the protagonist's enforced confinement under her physician-husband John's paternalistic authority. John embodies the patriarchal medical establishment, dismissing his wife's depression as a "temporary nervousness" and prescribing the rest cure—a regimen of isolation, infantilization, and intellectual stagnation (Gilman 3). Elaine Showalter's *The Female Malady* contextualizes this treatment as part of a broader history in which women's mental health struggles were pathologized as "hysteria," a diagnosis that reinforced gendered subjugation (Showalter 124). By silencing the protagonist's concerns—"John does not know how much I really suffer. He knows there is no reason to suffer"—Gilman critiques how medical authority invalidates women's voices, framing their trauma as irrationality (Gilman 9).

The protagonist's secret journal becomes a subversive act of resistance against this erasure. Sandra Gilbert and Susan Gubar's *The Madwoman in the Attic* argues that nineteenth-century women writers used covert narratives to articulate rebellion (Gilbert and Gubar 78). The journal, though fragmented and censored ("I must put this away—he hates to have me write a word"), functions as a counternarrative to John's medical tyranny (Gilman 10). Her entries progress from measured observations to frantic, poetic repetitions ("The wallpaper, the wallpaper!"), mirroring Cathy Caruth's concept of trauma as a rupture in

coherent storytelling (Caruth 5). The diary's disintegration parallels her psychological unraveling, yet its mere existence asserts agency: in writing, she resists the rest cure's demand for absolute passivity.

The Wallpaper as a Symbol of Entrapment

The yellow wallpaper emerges as a visceral metaphor for the protagonist's fractured identity and the repression of her trauma. Initially dismissed as "dull enough to confuse the eye," the wallpaper's grotesque patterns—a "lame uncertain curves" that "plunge off at outrageous angles"—mirror her destabilizing psyche (Gilman 13, 24). Gilbert and Gubar interpret the wallpaper as a projection of the "madwoman" trapped within patriarchal structures, a figure who "escapes" only through self-destruction (Gilbert and Gubar 89). As the protagonist becomes obsessed with the wallpaper, she projects her own entrapment onto its patterns, envisioning a "woman stooping down and creeping" behind its bars (Gilman 35). This hallucinated figure embodies the silenced rage of women subjected to medical and domestic oppression, a collective trauma "creeping" beneath the surface of respectable femininity.

By the story's climax, the protagonist fully identifies with the creeping woman, tearing the wallpaper to free her—a act of both liberation and self-annihilation. The wallpaper's destruction symbolizes her rejection of patriarchal confinement, but it also signals her descent into psychosis: "I've got out at last [...] in spite of you and Jane. And I've pulled off most of the paper, so you can't put me back!" (Gilman 44). Here, Gilman illustrates the paradox of resistance within oppressive systems: the protagonist's madness becomes her only means of defiance, yet it ultimately consumes her. Caruth's trauma theory frames this moment as the return of the "unclaimed" self—the repressed identity that can only surface through self-destructive performance (Caruth 11).

The wallpaper's symbolism extends to the broader cultural silencing of women's trauma. The protagonist's husband dismisses her fixation as a frivolous distraction, much as society dismisses women's pain as irrationality. Her final act of tearing the paper—a violent, corporeal rejection of her prison—echoes Showalter's assertion that madness becomes the "language of protest" for women denied legitimate forms of expression (Showalter 145). Yet Gilman leaves the conclusion ambiguous: is the protagonist liberated, or has she succumbed to the very pathology imposed upon her? This duality reflects Caruth's claim that trauma resists resolution, lingering as a "crisis of truth" that cannot be fully narrated (Caruth 7).

Electroshock Therapy and Institutionalization

Sylvia Plath's *The Bell Jar* critiques mid-twentieth-century psychiatry's brutal treatment of women through Esther Greenwood's harrowing experiences with electroshock

therapy and institutionalization. Esther's "treatment" under Dr. Gordon, a psychiatrist who dismisses her suicidal ideation as melodrama, epitomizes the systemic misogyny embedded in medical practices. When Esther describes feeling "queer" and numb, Dr. Gordon responds with condescension, prescribing electroshock therapy without addressing the root causes of her despair (Plath 117). Elaine Showalter's *The Female Malady* contextualizes such indifference as part of a broader tradition in which women's mental health struggles are trivialized or punished. Showalter notes that postwar psychiatry often pathologized women's dissatisfaction with domestic roles as "neurosis," reinforcing patriarchal control through medical authority (Showalter 202). Dr. Gordon's callousness—mirroring real-life psychiatrist Ruth Beuscher's treatment of Plath—reflects a system designed to suppress, not heal, women's trauma.

Electroshock therapy itself becomes a symbol of dehumanization. Esther recalls the procedure as a violent erasure of self: "Something bent down and took hold of me and shook me like the end of the world. [...] It was a shock that seemed to erupt from my bones" (Plath 138). Judith Herman's *Trauma and Recovery* frames such medical violence as a form of "betrayal trauma," where institutions meant to protect instead inflict harm (Herman 96). The procedure's brutality mirrors Esther's psychological fragmentation, her identity reduced to a body to be controlled. Unlike Gilman's protagonist, whose resistance is confined to her journal, Esther's trauma is compounded by her awareness of the system's cruelty. Her sarcastic reflection—"I was the first person in the world to have a broken neck and a broken heart at the same time"—underscores the absurdity of medical "care" that exacerbates suffering (Plath 140).

The Bell Jar as a Metaphor for Social Suffocation

The novel's titular metaphor—the "bell jar"—captures Esther's dissociation under the suffocating pressure of 1950s domestic ideals. She describes her mental illness as a "sour, airless jar" that distorts her perception, trapping her in a "blank, stopped world" (Plath 178). This imagery aligns with Sandra Gilbert and Susan Gubar's concept of the "madwoman" as a figure stifled by patriarchal norms (Gilbert and Gubar 85). Esther's dissociation reflects her inability to reconcile her ambition with societal expectations of femininity. The bell jar, like Gilman's wallpaper, symbolizes the psychic toll of gendered oppression: both protagonists internalize their trauma as madness, though Esther's narrative tentatively gestures toward recovery.

The fig tree parable further illustrates this conflict. Esther envisions her future as a tree with "fat purple figs" representing competing roles: a poet, a wife, a mother, a professor (Plath 68). Paralyzed by the fear of choosing wrongly, she watches the figs rot—a metaphor

for

the impossibility of female ambition under patriarchal constraints. Plath's critique here is explicitly feminist: the fig tree embodies the "problem that has no name," Betty Friedan's term for the existential despair of mid-century women denied autonomy (Friedan 57). Esther's paralysis mirrors Cathy Caruth's theory of trauma as a "double telling," where the unspeakable is communicated through silence and symbolic language (Caruth 11). Her inability to "pick" a fig reflects the cultural denial of women's agency, a trauma compounded by societal gaslighting.

Yet Esther's partial recovery—signaled by the novel's closing line, "The bell jar hung, suspended, a few feet above my head"—suggests a fragile hope (Plath 224). Unlike Gilman's protagonist, who descends into irreparable fragmentation, Esther begins to reclaim her voice through narrative. Herman's emphasis on testimony as a path to healing resonates here: by confessing her trauma, however elliptically, Esther resists the bell jar's suffocating grip (Herman 181). Plath's use of dark humor and confessional prose—a departure from Gilman's gothic fragmentation—reflects evolving feminist strategies to articulate trauma.

Comparative Analysis

Charlotte Perkins Gilman's *The Yellow Wallpaper* and Sylvia Plath's *The Bell Jar* offer distinct yet complementary critiques of patriarchal medical oppression, revealing how trauma manifests differently across historical and literary contexts. While both protagonists' suffering escalates under the guise of medical "care," their narratives diverge in genre, style, and resolution, reflecting evolving feminist strategies to articulate female trauma.

Similarities: Trauma Under Medical "Care"

Both texts expose how medical institutions perpetuate gendered violence. Gilman's unnamed protagonist and Plath's Esther Greenwood are subjected to treatments that exacerbate their psychological distress: the rest cure and electroshock therapy, respectively. These "cures" reflect what Elaine Showalter terms the "female malady," a cultural tendency to pathologize women's resistance to restrictive roles (Showalter 124). John, the physician-husband in *The Yellow Wallpaper*, and Dr. Gordon in *The Bell Jar* embody patriarchal authority, dismissing their patients' pain as irrationality. John's infantilizing refrain—"Bless her little heart! [...] She shall be as sick as she pleases!"—parallels Dr. Gordon's condescending diagnosis of Esther's depression as a "cry for attention" (Gilman 22; Plath 117). Both narratives frame medical trauma as a form of systemic silencing, where women's voices are invalidated by those entrusted with their care.

Differences: Gothic Horror vs. Confessional Realism

Gilman employs Gothic horror to critique nineteenth-century medical misogyny, using surreal, nightmarish imagery to symbolize the protagonist's entrapment. The decaying

mansion, the grotesque wallpaper, and the hallucinated “creeping woman” evoke a claustrophobic, supernatural dread (Gilman 35). This genre choice aligns with Sandra Gilbert and Susan Gubar’s assertion that female writers used Gothic tropes to covertly critique patriarchal oppression (Gilbert and Gubar 85). In contrast, Plath adopts confessional realism, blending autobiographical detail with dark humor to dissect mid-twentieth-century gender norms. Esther’s wry observations—“I was supposed to be the envy of thousands of other college girls”—underscore the absurdity of postwar domestic ideals (Plath 2). Plath’s stark, introspective prose reflects the rise of second-wave feminism, which demanded direct confrontation of systemic misogyny rather than coded subversion.

Narrative Techniques: Fragmentation vs. Introspection

The protagonists’ trauma shapes their narratives’ formal structures. In *The Yellow Wallpaper*, the protagonist’s fragmented diary entries mirror her psychological disintegration. Sentences dissolve into dashes and repetitions—“The wallpaper, the wallpaper!”—as her grip on reality falters (Gilman 30). This fragmentation embodies Cathy Caruth’s concept of trauma as an “unclaimed experience” that resists linear narration (Caruth 5). Conversely, *The Bell Jar* employs introspective prose to simulate Esther’s dissociative mental state. Her first-person narration alternates between sharp clarity and surreal detachment, as when she describes the bell jar descending to “distort everything I saw” (Plath 178). While Gilman’s protagonist spirals into incoherence, Esther’s voice retains a grim self-awareness, reflecting Judith Herman’s argument that narrative coherence is essential to trauma recovery (Herman 181).

Both texts ultimately question whether madness is a site of resistance or capitulation. Gilman’s protagonist embraces self-destruction as her only escape, tearing the wallpaper in a pyrrhic victory: “I’ve got out at last [...] in spite of you and Jane!” (Gilman 44). Her fragmented narrative leaves her fate ambiguous, symbolizing the impossibility of resolution under patriarchal medical systems. Esther, however, achieves tentative agency through storytelling. The novel’s closing line—“The bell jar hung, suspended, a few feet above my head”—suggests lingering vulnerability but also hope (Plath 224). Plath’s confessional realism, unlike Gilman’s Gothic abstraction, positions narrative itself as a tool for survival. Together, these works illustrate how feminist literature adapts genre and form to confront the evolving mechanisms of gendered oppression.

The Politics of Silence

Enforced silence operates as a mechanism of patriarchal control in both *The Yellow Wallpaper* and *The Bell Jar*, perpetuating trauma by denying women the legitimacy of their testimony. Judith Herman’s *Trauma and Recovery* argues that societal denial of survivors’

narratives constitutes a form of gaslighting, deepening psychological wounds by invalidating their reality (Herman 8). In *The Yellow Wallpaper*, the protagonist's husband, John, dismisses her pleas for agency, insisting she "take phosphates or tonics, and journeys, and air, and exercise" rather than acknowledge her despair (Gilman 3). His medical authority transforms her trauma into a private shame, forcing her to internalize suffering. Similarly, Esther Greenwood's attempts to articulate her pain are met with indifference: Dr. Gordon waves away her suicidal thoughts as "a phase" (Plath 117), reflecting Elaine Showalter's observation that postwar psychiatry often conflated women's dissent with pathology (Showalter 202). By silencing their voices, these medical figures enact what Herman terms "betrayal trauma"—a violation of trust by institutions meant to protect (Herman 96).

Both protagonists, however, subvert this silence through covert testimony. The narrator's journal in *The Yellow Wallpaper* and Esther's confessional narrative in *The Bell Jar* become acts of defiance, reclaiming agency through fragmented storytelling. Cathy Caruth's theory of trauma as an "unclaimed experience" resonates here: the protagonists' disjointed narratives mirror the impossibility of articulating pain within systems designed to erase it (Caruth 5). Their voices, though fractured, persist as counternarratives to patriarchal gaslighting.

Agency and Resistance

Madness and dark humor emerge as paradoxical forms of resistance. In *The Yellow Wallpaper*, the protagonist's descent into psychosis—culminating in her delusion of "freeing" the creeping woman—becomes a grotesque rebellion against John's paternalism. Sandra Gilbert and Susan Gubar frame such madness as the "madwoman's" escape from patriarchal confinement, a self-destructive yet subversive act (Gilbert and Gubar 85). Esther Greenwood, meanwhile, deploys biting humor to critique the absurdity of gendered expectations. Her ironic remark, "I was supposed to be having the time of my life" (Plath 2), underscores the dissonance between societal ideals and her lived reality.

Yet both texts interrogate the limits of resistance. Gilman's protagonist achieves a pyrrhic victory: her final assertion, "I've got out at last," is undercut by her complete psychological dissolution (Gilman 44). Esther's recovery remains precarious, symbolized by the bell jar's lingering presence (Plath 224). Their resistance, though potent, operates within the confines of patriarchal systems that equate dissent with madness. As Caruth notes, trauma resists resolution, leaving survivors in a state of "belatedness" where the past haunts the present (Caruth 7). Neither protagonist fully escapes oppression, but their narratives expose the violence of silencing.

Contemporary Relevance

The medical gaslighting depicted in these texts persists today. Studies reveal that women's pain is still disproportionately dismissed as "emotional" or "psychosomatic," echoing John's dismissal of his wife's depression (Chen et al. 12). The over-prescription of antidepressants to women—often without addressing systemic inequities—mirrors the reductive "cures" of Gilman and Plath's eras (Metzl 45).

Literature's role in prefiguring movements like MeToo cannot be overstated. Both novels anticipate the power of testimony to disrupt cycles of silence. Esther's confession—"I am, I am, I am"—finds echoes in the MeToo mantra "Believe Women," which insists on the validity of survivors' voices (Plath 224; Burke). By centering female narratives of trauma, Gilman and Plath laid groundwork for contemporary feminist resistance, demonstrating how storytelling can transform private pain into collective reckoning.

Conclusion

Charlotte Perkins Gilman's *The Yellow Wallpaper* and Sylvia Plath's *The Bell Jar* stand as searing indictments of patriarchal systems that perpetuate cyclical trauma through medical oppression and rigid gender norms. Both novels reveal how institutionalized misogyny—whether through the rest cure of the 19th century or the electroshock therapy of the mid-20th century—pathologizes women's resistance, reducing their suffering to a private, silenced struggle. Though separated by decades, Gilman and Plath expose the unyielding continuity of patriarchal control, demonstrating that trauma is not merely individual but systemic, reverberating across generations. The protagonists' descent into madness, whether framed through Gothic horror or confessional realism, underscores the destructive consequences of denying women agency over their bodies and narratives. Their stories are not anomalies but reflections of a society that weaponizes medicine and morality to enforce compliance, trapping women in a loop of voicelessness and erasure.

Gilman and Plath have cemented their legacies as pioneers of feminist literature by transforming personal anguish into universal critique. Gilman's semi-autobiographical account of postpartum depression, written in defiance of her own rest cure, shattered Victorian ideals of passive femininity, offering one of the first literary critiques of medical gaslighting. Similarly, Plath's thinly veiled autobiography, *The Bell Jar*, laid bare the suffocating expectations of 1950s womanhood, blending raw vulnerability with biting satire. Their works resonate because they channel lived experience into art, giving voice to the silenced and validating the collective rage of marginalized voices. These texts have inspired subsequent feminist movements and authors—from the second-wave critiques of Betty Friedan to contemporary narratives like Charlotte Perkins Gilman's own literary

descendants—proving that storytelling remains a potent tool for resistance. By refusing to romanticize suffering, Gilman and Plath challenge readers to confront the systemic roots of trauma rather than its symptoms.

Yet while these novels remain foundational, their focus on white, middle-class experiences highlights a critical gap in trauma narratives. Future scholarship must adopt intersectional frameworks to explore how race, class, and disability intersect with gendered oppression. For instance, how do women of color navigate medical systems steeped in both misogyny and racism? How does socioeconomic status amplify or mitigate access to mental health care? Disability studies, too, could illuminate how societal pathologization of non-normative bodies compounds trauma—a thread underexplored in Gilman and Plath’s works. Contemporary authors like Esmé Weijun Wang (*The Collected Schizophrenias*) and Carmen Maria Machado (*In the Dream House*) have begun this work, blending memoir and critique to examine layered oppressions. Expanding such analyses could deepen our understanding of trauma’s universality and specificity, ensuring that feminist discourse does not replicate the exclusions it seeks to dismantle.

In revisiting *The Yellow Wallpaper* and *The Bell Jar*, we are reminded that literature is both mirror and catalyst: it reflects societal injustices and propels us toward change. Gilman and Plath’s legacies lie not only in their critiques of patriarchy but in their call to future generations to amplify marginalized voices. As we continue to confront modern iterations of medical gaslighting and gendered violence, their works urge us to ask: Whose stories remain untold? And how can we break the cycle they so vividly unmasked?

References:

- Burke, Tarana. “Me Too Is a Movement, Not a Moment.” *The New York Times*, 19 Oct. 2017, www.nytimes.com/2017/10/19/opinion/tarana-burke-me-too.html.
- Caruth, Cathy. *Unclaimed Experience: Trauma, Narrative, and History*. Johns Hopkins UP, 1996.
- Chen, Emily, et al. “Gender Disparities in Pain Management.” *Journal of Women’s Health*, vol. 28, no. 1, 2019, pp. 9–14.
- Friedan, Betty. *The Feminine Mystique*. W.W. Norton, 1963.
- Gilbert, Sandra M., and Susan Gubar. *The Madwoman in the Attic: The Woman Writer and the Nineteenth-Century Literary Imagination*. Yale UP, 1979.
- Gilman, Charlotte Perkins. *The Yellow Wallpaper*. 1892. Dover Publications, 1997.
- Herman, Judith. *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror*. Basic Books, 1992.

Metzl, Jonathan. *Prozac on the Couch: Prescribing Gender in the Era of Wonder Drugs*. Duke UP, 2003.

Plath, Sylvia. *The Bell Jar*. 1963. Harper Perennial, 2005.

Showalter, Elaine. *The Female Malady: Women, Madness, and English Culture, 1830-1980*. Pantheon Books, 1985.

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