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“*The Yellow Wallpaper*”: Mental Health in the 19th Century

Charlotte Perkins Gilman’s famous work, “*The Yellow Wallpaper,*” is a renowned piece of literature in which the Jane Doe main character slowly descends into madness while trying to heal her fragile temperament under the medical instruction of both her husband and his colleague. As a response to the analysis from readers and critics of her piece that were concerned solely with the main character’s condition instead of the primary points she was trying to get across, Gilman herself explained, “It was not intended to drive people crazy, but to save people from being crazy, and it worked” (“Why I Wrote The Yellow Wallpaper”). That said, the main character in Gilman’s “*The Yellow Wallpaper*” is effectively utilized to make a comment upon both mental illness and the treatment of it in late nineteenth century America through the characteristics of her continuously declining mental health throughout the story, the methods of the time that the physicians in her life use to treat her, and the ways that her family both respond to and affect her. The continual degradation of the main character’s mental state despite her husband’s and his colleague’s best efforts as certified medical professionals to help her highlights the lack of understanding regarding both the general treatment and understanding of the mentally ill in the 19th century; and, in turn, the way that her loved ones show their compassion for their suffering family member shows the true lack of understanding and struggle to do so – particularly regarding nervous women – during this time period.

Through the educated perspectives of scholarly writers and analysts such as Jane F. Thrailkill, Regina Markell Morantz, and Charles E. Rosenberg, the understanding and treatment of mental health in both nervous women and nervous men in the nineteenth century is actually discussed within its *misunderstanding*. Because of the lack of absolute and accurate medical practices during the time
period, there was a drastic disconnect between how nervous men and nervous women were regarded and treated. Through the writings of Morantz, it is easier to comprehend the expectations of the standard nineteenth-century woman and all of the responsibilities she was in charge of that, should she become unfit to perform, had detrimental consequences both socially and in the home; Rosenberg, Charlotte Perkins Gilman, and the U.S. National Library of Medicine, conversely, provide explanations and insight into the actual practices of the time when dealing with nervous patients, including elaborations upon Dr. Silas Weir Mitchell’s famous “Rest Cures” and the use of institutionalizations. Gilman herself also comments upon her own personal experiences with neurasthenia as well as how her renowned piece of historical literature ties into the overall regards toward mental health at the time.

In order to understand fully the general response to mental issues in the nineteenth century, it is important to understand the actual mind of the main character in Gilman’s “The Yellow Wallpaper,” as well as Gilman’s inspiration for her traits and temperament. Throughout the story, the main character both describes and indicates various signs of mental illness throughout the story, describing herself as someone diagnosed with a “temporary nervous depression – a slight hysterical tendency” that is “not serious” before detailing the specific remedies her physician husband forces upon her, including scheduled prescriptions, ample in an airy space, and little to no social, mental, or physical stimulus. Critics and readers alike have speculated throughout the years that the specific mental disease afflicting the nameless protagonist is neurasthenia; however, in response to the aforementioned commentators, Gilman herself published an article in her own magazine, The Forerunner, in October of 1913 explaining both the inspiration for the short story and its relevance to Gilman personally:

For many years I suffered from a severe and continuous nervous breakdown tending to melancholia – and beyond. During about the third year of this trouble I went, in devout faith and some faint stir of hope, to a noted specialist in nervous diseases, the best known in the country. This wise
man put me to bed and applied the rest cure, to which a still-good physique responded so promptly that he concluded there was nothing much the matter with me, and sent me home with solemn advice to ‘live as domestic a life as far as possible,’ to ‘have but two hours' intellectual life a day,’ and ‘never to touch pen, brush, or pencil again’ as long as I lived. This was in 1887. I went home and obeyed those directions for some three months, and came so near the borderline of utter mental ruin that I could see over. (“Why I Wrote The Yellow Wallpaper”)

Gilman proceeded to write “The Yellow Wallpaper” in only two days’ time, three years after recuperating from the ill-advised treatments that had affected her so significantly, and modeled her main character after herself, while the physicians in the story were dually reminiscent of the doctor and his instructions that Gilman had personally been under the care of in 1887 (U.S. National Library of Medicine). However, the mentality and condition of the Jane Doe protagonist in “The Yellow Wallpaper” is not due only to Gilman’s personal experience, but also because of the treatment of women in nineteenth century America overall. Gilman believed “...that the nineteenth-century home produced artificial gender distinctions between men’s and women’s bodies and minds” (Thrailkill), and she wanted to create both a character and a story that highlighted the substantial problems found within the medical practices and treatments that physicians used for nervous women at the time by manifesting a protagonist with traits reminiscent of herself.

The approach to mental illness in the nineteenth century was one of mostly vagueness that gradually progressed into various attempted medical treatments. Dr. Silas Weir Mitchell was one of the most notable and nationally renowned physicians of the time, who was notorious for his “Rest Cure” approaches toward neurasthenia; that said, Dr. Mitchell was also the “noted specialist” Gilman referred to in her aforementioned article in The Forerunner, and indirectly referenced his methods by putting her nameless main character through similar treatments that Gilman herself had experienced under his care (U.S. National Library of Medicine). Dr. Mitchell’s famous
“Rest Cure” treatments were described as and consisted of the following:

The key elements of the treatment were isolation, complete physical rest, a rich diet of creamy foods, massage, and...complete submission to the authority of the attending physician. All physical and intellectual activity was prohibited. A patient was lifted out of her own social and familial milieu and transported to a neutral environment tended only by a nurse and her doctor. (Thrailkill)

The methods of Dr. Mitchell’s almost directly mirror the treatments utilized by the husband and colleague of Gilman’s nameless protagonist towards her in their attempts to heal her temperament. In much the same style as Dr. Mitchell himself, Gilman’s main character describes her treatment regimen by saying, “...I take phosphates or phosphites--whichever it is, and tonics...and air, and...am absolutely forbidden to ‘work’ until I am well again”, in addition to being put up in a spacious--yet isolated--room and being “hardly” allowed “to stir without special direction” (202). Despite her desires to write, read, and/or have a little more general stimulus in her life while she tries to get better, she simply does what is expected of a nineteenth century woman and obeys her husband’s every command, convincing herself that he knows what is best even though she repeatedly mentions that she does not necessarily agree with his methods. During this time period, the distinction between physical and mental health had not yet been clearly discovered; because of that misunderstanding, physicians at the time believed that if the body was able to rest and heal, the mind would, consequently, do exactly the same. One of the most popularized methods of treatment during the nineteenth century also happened to be the more common usage of institutions and, consequently, institutionalizing patients. And while the methods that the main character’s husband and his colleague use--such as isolation, extremely limited mental and physical activity, and scheduled intakes of medicine -- in Gilman’s “The Yellow Wallpaper” were not strictly defined as “institutionalizing,” they were common practices that were actively used inside institutions at the time. Charles E. Rosenberg describes the applicability of institutions during
the nineteenth century as thus: “Institutions traditionally seen as expressions of reform and benevolence have increasingly come to be seen as modes of enforcing social control.” During this time period, women were expected to keep up a certain appearance and behavior in order to maintain what had become the “social norm” of the nineteenth century--the wife knew her place and carried out the duties of the family without hesitation, while the men went out and did the “real work” pertinent to providing for their families. So, when a woman became any form of a “nervous” woman at the time, it was more common to belittle the issues and demean their relevance than to create a large social fuss and get her the help she may have needed. In “The Yellow Wallpaper,” it is extremely convenient for the story’s main character to be married to a practicing physician of the time; yet, that also explains why he took her far away from their typical surroundings, including family and friends who would gossip about her failures as a woman, under the guise of worsening her condition rather than risking their reputation worsening. Although modern medicine is now well aware that the treatment of mental health – and physical health, for that matter – is not necessarily as black and white as physicians like Dr. Silas Weir Mitchell and the nineteenth century institution used to believe, that same simplistic ideology that they both encompassed, along with some of its underlying social implications, is what ultimately led the Jane Doe in “The Yellow Wallpaper” to her ultimate demise and impacted Gilman herself so substantially in her own life and wellbeing. After going through Mitchell’s treatments and discovering their negative and stifling effects for herself, Gilman actively decided to make a recovery from her own personal suffering by blending both “the literary into the medical, within the nascent discourse of psychotherapeutics” (Thrailkill) in order to emphasize the blatant issues regarding the perception and treatment of mental illness in women as opposed to men. Ironically enough, Dr. Silas Weir Mitchell did not actually have any training or background in women’s diseases (Thrailkill), further emphasizing the lack of understanding regarding nervous women and their mental health.
Many legitimate mental problems at the time were taken more seriously in nervous men than nervous women due to a false understanding that the standard nineteenth-century man led a much more strenuous and virile lifestyle than the “daily fret and wearisomeness of lives which, passing out of maidenhood, lack those distinct purposes and aims which, in the lives of men, are like the steadying influence of the fly-wheel in an engine” (Thrailkill). The main character’s own husband even seems to fall victim to the same mentality, as the nameless narrator is quoted as saying, “John does not know how much I really suffer. He knows there is no reason to suffer, and that satisfies him.” Since women were perceived as leading more delicate, less troublesome lives than men, any issues they dealt with were handled in a much lighter, somewhat careless way; and, because men were perceived as being able to handle more in their lives, the curative methods prescribed to nervous men that were physically and intellectually active were prohibited for nervous women to utilize due to a misunderstood fear of giving them even more stress than they already had. What was vastly misunderstood, however, was that women at the time had equal—if not more—responsibilities as their male counterparts during the nineteenth century; while the men went out and did the “difficult” and “manly” tasks that had to be done in order to provide for their families, women were both expected to and responsible for taking care of everything related to the home without any room for questioning or faltering in order to maintain said families. When she is first brought to the new estate she is supposed to rest in, instead of being concerned for her own well-being, the protagonist can only think, “It does weigh on me so not to do my duty in any way! I mean to be such a help to John, such a real rest and comfort, and here I am a comparative burden already!” (204) as well as fret over not being able to take proper care of her child or even be in the same room as he. Regina Markell Morantz explains the expectations of the nineteenth-century woman as such:

Health reformers...promoted the active assumption by men and women of the responsibility for the own health, the health of their families, the health of society at large. ...Since
colonial times traditional verities had suggested that woman’s place was in the home. But women had experienced family, home and work as an integrated, stable whole. The heavy burden of household production and the immediate concern with economic subsistence left them with little time and less inclination to question their duties. ...Good health became a prerequisite to woman’s new place in the world.

With all of the responsibilities placed upon the standard woman of the nineteenth century, it was important for her to maintain her health overall in order to be able to successfully carry out all of her tasks on a daily basis. That said, however, whenever a nineteenth century woman was not in a healthy enough mentality to adequately maintain the home and herself in the way she was expected to, there weren’t many legitimate opportunities available that could assist her due to that aforementioned lack of seriousness regarding nervous women at the time; and, with the consideration that the main character’s husband was one of the previously mentioned health reformers of the nineteenth century, he tended to regard her primarily as his patient, and secondarily as his wife.

The nervous woman in the nineteenth century was a creature regarded with misunderstanding, irrelevance, and insignificance. Mental health during this time period was, overall, poorly understood and vague in its own degree; however, there was a distinct separation between what was perceived as a nervous condition in a man as opposed to a woman that led to inaccurate treatments and overwhelming social pressures, which caused demises similar to the one that the nameless narrator in “The Yellow Wallpaper” faced. Charlotte Perkins Gilman herself nearly experienced a demise of her own health, but instead chose to recognize the fault in the treatments she was receiving under heralded nineteenth century physician Dr. Silas Weir Mitchell and wrote a short story meant to highlight the problems with remedial mental health practices during the time that would later become one of the greatest and most profound pieces of literary history. Gilman was able to overcome her personal battle neurasthenia enough for her to be able to openly emphasize through literature the need for better treatments regarding
mental illness in general by making “an appeal for a sex-neutral medical model, engaging the reader...at the somatic level” (Thrailkill).
Works Cited


