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The Intersection of Feminism and Disability Theory in Sylvia Plath's *The Bell Jar*

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One effect of the increasing interest in disability as an identity category over the past few decades has been the examination of representations of disability in literature. Although Sylvia Plath's 1963 novel *The Bell Jar* is not typically read from the perspective of disability theory, Esther's identity is shaped not just by her experiences as a woman, but as a *disabled* woman. For this reason, Esther's experiences cannot be fully explained by either feminism or disability theory independently; some combination of the two is needed. While scholars have long advocated the lens of feminism in reading *The Bell Jar*, the implications of disability theory for the novel have not been explored.

Although mental illness is not always included in discussions of disability, many scholars, including Rosemarie Garland Thomson and Susan Wendell, adopt a broader definition of the disability category, including conditions such as chronic and mental illnesses. According to Wendell, the initial exclusion of such illnesses from the disability category "may have come from an understandable desire to avoid the additional stigma of illness," including that associated with "psychological or developmental disorders" (21). However, as Wendell points out, no disabled person is completely impaired; someone with a physical impairment may be completely healthy, and a person with a chronic and/or life-threatening illness may have no physical

impairment. Even physical impairment itself encompasses a wide range of conditions—including paraplegia, amputation, and congenital differences. The similarities in experiences of mental illness, like those of Esther Greenwood in *The Bell Jar*, and experiences of physical impairment further complicate an absolute distinction between the two kinds of conditions. Like people with physical impairments, people with mental illnesses are stigmatized and cast as “other,” and they face similar difficulties in accepting the exaggerated contingency of their lives. In addition, feelings of alienation from others, as well as dissociation from one’s body, are common in literature of both physical impairment and mental illness. Throughout *The Bell Jar*, Esther experiences many of the same reactions to her disability as are common in narratives of illness and physical impairment, and she also faces many of the same challenges. In *The Wounded Storyteller: Body, Illness, and Ethics*, Arthur W. Frank identifies four problems bodies encounter in illness: control, the ability to control one’s body; body-relatedness, the relationship of one’s body to one’s sense of self; other-relatedness, the relationship of one’s body to other bodies; and desire, both the act of wanting and the ways in which that desire is expressed for, with, and through one’s body. Esther encounters each of these body problems in her experience of mental illness, and while her encounter with each of these problems is also related to her existence as a woman, feminism cannot account for Esther’s experiences without also considering the implications of disability theory.

Of the four body problems identified by Frank, the one that most clearly demonstrates the intersection of feminism and disability theory in *The Bell Jar* is the problem of control. According to Frank, “People define themselves in terms of their body’s capacity for control” (30), and when this capacity is not predictable, control becomes an active body problem, requiring conscious attention and negotiation. As the bodies of wounded storytellers are

embodiments of contingency, control is an obvious problem for ill and physically impaired bodies. Even before her breakdown, Esther's lack of control is emphasized outwardly in such events as her rejection from the writing course and Marco's near-rape of her in New York City, but the contingency she experiences extends beyond these outside forces. As she returns home from her guest editorship in New York City and edges closer to the nervous breakdown, she begins to lose control of her own body and mind in multiple ways. For instance, when she tries to read, her "eyes sank through an alphabet soup of letters" (147), and when she attempts to write a letter, her "hand made big, jerky letters like those of a child" (154). Furthermore, she cannot sleep, even after her family doctor prescribes sleeping medication. Then, when she tries to articulate her condition to this doctor, Esther finds herself unable to do so: "the zombie voice rose up in my throat and choked me off" (149). In her depression, Esther continually loses control of her body, but this loss of control cannot be solely attributed to her illness, for as her encounter with Marco demonstrates, this body problem is also intertwined with her identity as a woman.

From almost the first moment Esther meets Marco, his intentions are clear; in handing her his diamond stick pin, he says, "Perhaps...I shall perform some small service...worthy of a diamond" (125). By giving Esther this gift (which he later takes back), Marco assumes he will be reimbursed, and his use of physical force suggests he will receive payment, one way or another; he even threatens, "You see, I am quite serious" as he squeezes her arm so tightly his fingerprints "purpled into view" (125). After pouring daiquiris into her, Marco forces Esther to the dance floor against her will where she is completely in his control, "without any will or knowledge of [her] own" and feeling herself "blow and bend like a tree in the wind" (126). She continues to succumb to his will until he leads her outside and almost immediately pushes her to

the ground, rips her clothes, and throws himself on top of her “as if he would grind his body through [her] and into the mud” (128). Esther’s problem with control in this situation is related not to her mental illness, but to her existence as woman. However, the two are inseparable, for the oppression she faces as a woman contributes to, even arguably causes, her mental state.

In her 2001 article “(Re)fusing the Amputated Body: An Interactionist Bridge for Feminism and Disability,” Alexa Schriempf argues that disabled women face different issues than able-bodied women, for they often encounter both a “sexist bias” and an “ableist bias” (54). This is also true for Esther; in addition to the stigmatization she faces in response to her mental illness, particularly following her admittance to the hospital, Marco is a reminder of the sexist bias she must face as well. Schriempf primarily discusses visible physical impairments, describing how a disabled woman often “must not only fight to be the author of her own sexuality but...must establish a sexuality in the first place” (57). Although Esther does not have to establish her sexuality in the same way as physically disabled women (who are often denied any sexuality at all), she does fight against the conventions and expectations of her society to be the author of it. For instance, after learning that Buddy Willard has already had sex, she decides she must have sex with someone as well, despite her mother’s insistence that she wait until marriage, but “Buddy wouldn’t count, though, because he would still be one person ahead of [her], it would have to be someone else” (92). First she fantasizes about being seduced by Constantin, the simultaneous interpreter she meets in New York City, and even when Marco throws himself on top of her, she thinks, “If I just lie here and do nothing it will happen” (129).

Yet Esther’s search for her own identity as a woman extends far beyond authoring her sexuality and is complicated by the time period in which she lives. Many scholars have discussed Esther’s struggle against the oppression young women faced in the 1950s. Linda W. Wagner, for

instance, identifies Esther's "battle against submission to the authority of both older people and, more pertinently, men" as one of the primary themes of the novel (57). Esther feels many of the people in her life encouraging her to inhabit an identity she is not comfortable with, one of domesticity and submission to men. Her mother tries to convince Esther to learn shorthand, so that she can find a job after graduation, "transcrib[ing] letter after thrilling letter" for employers (presumably men), but Esther "hated the idea of serving men in any way" (89). Buddy Willard also tries to shape her into a suitable wife, telling her that she "wouldn't want to write poems any more" after she got married and had children (100). However, to Esther, the example of domestic life she saw in her mother and Mrs. Willard "seemed a dreary and wasted life for a girl with fifteen years of straight A's" (99), and she decided that getting married and having children was "like being brainwashed, and afterward you went about numb as a slave" (100). Although she has many choices for both a female model—such her mother and Mrs. Willard—as well as for potential husbands, including her boyfriend Buddy who has already proposed, none offers a life free of patriarchal oppression. Her inability to construct a suitable, acceptable identity for herself within the context of societal expectations only heightens Esther's problem with control.

As the uncertainty of the novel's conclusion suggests, control will remain a problem for Esther even after she is deemed well and released from the hospital. As Esther is waiting nervously for her interview with the board of doctors, hoping to be released, she has replaced the drooping clothes and sour smell and now appears "polished" and "flamboyant," ready to re-enter society and restart her own life. However, she also expresses anxiety, despite her desire to "feel sure and knowledgeable about everything that lay ahead"; instead, she says, "all I could see were question marks" (290). Much of the apprehension Esther faces in leaving the hospital and returning to her life is related to the task of finding a role in society free of patriarchal

oppression, but she is not merely uncertain about the life she is returning to, with college and relationships; she is also worried about remaining well and staying out from under the bell jar. In considering her pending release, Esther wonders, “How did I know that someday—at college, in Europe, somewhere, anywhere—the bell jar, with its stifling distortions, wouldn’t descend again?” (286). But her concerns with staying well are also interconnected with her identity as a woman, for the oppressions she experiences as a woman inherently affect her mental state. These multiple, interconnected concerns demonstrate the need observed by Schriempf for an “interactionist bridge” for disability theory and feminism. Only with such an understanding of the interaction between the two theories can we recognize the ways sexism and ableism “feed and sustain each other” (72).

Scholars have long advocated the lens of feminism in reading *The Bell Jar*, as such a reading offers a new perspective on Esther and her experiences. The lens of disability theory offers another unique perspective, one with which we can gain a new understanding of Esther’s experiences, from her loss of control to her uncertainty about her life following her release from the hospital, which feminism alone cannot explain. However, as Schriempf argues, we must also recognize “that women with disabilities are not dually oppressed, doubly handicapped, or double whatever; instead they embody a complex of interwoven situations” (67). We must not simply read *The Bell Jar* through feminism and disability theory, but explore the ways in which the two interact in describing the experiences of disabled women.

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