



**People's Democratic Republic of Algeria**  
**Ministry of Higher Education and Scientific Research**  
**Dr. Moulay Tahar University, Saida**  
**Faculty of Letters, Languages and Arts**  
**Department of English Language and Literature**

**Postpartum Depression And The Male Partner In The  
Charlotte Perkins Gilman's "The Yellow Wallpaper "**

**Presented by:**

Miss.AMER. HADJA .AMIRA .MAROUA

**Supervised**

Dr. N.OUHIBA

**Board of Examiners**

**Dr.M.Dai (MCB) Chair Person University of Saida**

**Dr.N.OUHIBA (MCB) Supervisor University of  
Saida**

**Dr.L.BESSADAT (MCA) Examiner University of Saida**

**Academic Year: 2022/2023**

**Declaration of Originality**

I hereby declare that this submission is my work and that, it contains no material previously published or written by another person nor material which has been accepted for the qualification of any other degree or diploma of a university or other institution.

**Date:** .....

**Name:**

**Signature:**



## Dedication

I dedicate this work from deep heart To my dearest parent, who gave me the inspiration to fulfill this dream with their support, patience and encouragement. To my sisters especially Rchida and Nina and my brothers . To my cheerful and dearest friends especially Wassila and wiam . To all whom supported and encouraged me. To all whom I love and respect.



## Acknowledgements

This thesis would have never been accomplished without considerable help, advice and guidance of my supervisor **Dr.OUHIBA NAWEL.**

For that, I owe my gratitude to her for her efforts I express my thanks to all teachers and students of Second Year Master Also, my friends and classmates for their help and support.

I am very thankful to every one participated in the realization of this work.

## Abstract

The nineteenth century was a time of significant societal change, marked by political shifts, economic upheavals due to the Industrial Revolution, and advancements in science and culture. However, it also saw women facing limited opportunities in education and employment, constrained by rigid gender roles centered on domestic responsibilities and motherhood. This master's dissertation explores the relationship between postpartum depression and women's status in the nineteenth century, with a focus on Charlotte Perkins Gilman's "The Yellow Wallpaper." . this dissertation offers a multifaceted exploration of postpartum depression in the nineteenth century, blending historical context, literary analysis, and societal implications. By examining its depiction in "The Yellow Wallpaper," it provides insight into how this mental health condition was perceived and experienced by women, revealing broader gender dynamics of the era.

**Key words :** The nineteenth century. Postpartum depression. Women's status. The yellow wallpaper.



## الملخص

كان القرن التاسع عشر فترة تغيير مجتمعي كبير، تميزت بالتحولات السياسية، والاضطرابات الاقتصادية بسبب الثورة الصناعية، والتقدم في العلوم والثقافة. ومع ذلك، فقد شهدت أيضًا أن النساء يواجهن فرصًا محدودة في التعليم والتوظيف، مقيدة بأدوار الجنسين الصارمة التي تركز على المسؤوليات المنزلية والأمومة. تستكشف أطروحة الماجستير هذه العلاقة بين اكتئاب ما بعد الولادة ومكانة المرأة في القرن التاسع عشر، مع التركيز على "ورق الحالط الأصفر" لشارلوت بيركنز جيلمان. تقدم هذه الأطروحة استكشافاً متعدد الأوجه لاكتئاب ما بعد الولادة في القرن التاسع عشر، حيث تمزج بين السياق التاريخي والتحليل الأدبي والآثار الاجتماعية. من خلال فحص تصويرها في "The Yellow Wallpaper" فإنه يوفر نظرة ثاقبة حول كيفية إدراك النساء لحالة الصحة العقلية هذه وتجربتها، مما يكشف عن ديناميكيات جنسانية أوسع في تلك الحقبة.

**الكلمات المفتاحية:** القرن التاسع عشر . اكتئاب ما بعد الولادة . وضع المرأة . ورق الحالط الأصفر.

Table of content



Declaration of Originality II

Dedication III

Acknowledgements IV

الملخص VI

General Introduction 9

CHAPTER ONE: 3

## REVIEW OF LITERATURE ON THE POSTPARTUM DEPRESSION 3

1.1 Introduction 4

1.2 Definition of Postpartum Depression 4

1.2.1 Scientific Definition 4

1.2.2 Literary Definition 4

1.3 Unlocking the Significance of Grasping Postpartum Depression 5

1.4 Effects of Postpartum Depression 5

1.5 Symptoms of Postpartum Depression 6

1.6 Causes of Postpartum Depression 8

1.7 Treatment of postpartum depression 8

1.8 Importance of family and community support 9

1.10 Conclusion 10

## CHAPTER TWO : BEING A WOMEN DURING THE 19<sup>TH</sup> CENTURY: A LITERATURE REVIEW ON WOMEN'S STATUS AND POSTPARTUM DEPRESSION12

2.1 Introduction 13

2.2 The Nineteenth Century: A Historical background 13

2.2.1 Political and Social Transformations 15

2.2.2 Industrial Revolution and Economic Changes 15

2.2.3 Scientific and Intellectual Advancements 15

2.2.4 Cultural and Artistic Movements 16

2.3 Womens status during the nineteenth century 16

2.3.1 Limited opportunities for education and employment 16

2.3.2 Lack of access to higher education 17

2.4 Societal expectations and gender roles 17

2.5 The oppression of women in the nineteenth century 18

2.6 Postpartum depression during the 9 <sup>th</sup> C	19
2.7 Conclusion	19
3.1 Introduction	21
3.2 Reviews on The Yellow Wallpaper	21
3.3 Postpartum Depression on the Yellow Wallpaper	21
3.3.2 The Protagonist's Descent into Madness	23
3.3.3 Suppression of Women's Voices	23
3.3.4 Misdiagnosis and Medical Oppression	23
3.4 Jane's Experience With Postpartum Depression	23
3.4.1 Jane's Isolation and Lack of Agency	23
3.4.2 The Decaying Wallpaper and Jane's Mental State	24
3.4.3 Jane's Loss of Identity	24
3.5 John's attitudes towards his wife sickness	24
3.6 The postpartum Hysteria and Patriarchal hegemony in the Yellow wallpaper	25
3.7 Gender Battle in the yellow wallpaper	25
3.8 Significance of Yellow color within the novel	
3.9 Conclusion	
Summary Of The Story <b>Erreur ! Signet non défini.</b>	
General conclusion	29

## General Introduction

In the late nineteenth century, during a period marked by significant societal changes, Charlotte Perkins Gilman penned her iconic work, 'The Yellow Wallpaper.' Set within the confines of a traditional domestic environment, the novel presents a gripping exploration of the protagonist, Jane's, increasingly disquieting mental state. The story delves into the harrowing presence of postpartum depression, vividly portraying the emotional and psychological toll it exacts on Jane. As the narrative unfolds, readers are drawn into the labyrinth of her deteriorating mental health, symbolized by her obsession with the room's yellow wallpaper. 'The Yellow Wallpaper' stands as a poignant testament to the silent struggles of women during this era and provides a profound window into the haunting specter of postpartum depression within the confines of a gripping narrative.

This research is guided by two central research questions:

1. How is Postpartum depression manifested in Jane's behavior throughout the novel?
2. How are gender dynamics demonstrated between Jane and John in the novel?

It is hypothesized that the manifestation of Postpartum depression in Jane's behavior throughout the novel is likely to be characterized by recurring patterns of emotional instability, withdrawal from social interactions, decreased self-esteem, and an overall decline in her mental and emotional well-being. It is also hypothesized that the gender dynamics between Jane and John in the novel are expected to reflect traditional gender roles and stereotypes, with John assuming a more dominant and controlling role while Jane experiences a sense of submissiveness and restriction in her actions and decision-making.

This dissertation is composed of three chapters. The first chapter commences with a comprehensive review of Postpartum depression (PPD), both from a scientific and literary perspective. This chapter defines PPD, emphasizing its significance in literature and its effects on characters within fictional narratives. We explore the causes, symptoms, treatment, and the pivotal role of familial and community support in mitigating the impact of PPD.

Chapter Two provides a historical backdrop, taking us back to the nineteenth century—a period marked by profound political, social, economic, scientific, and cultural transformations. Within this historical context, we examine the status of women, their limited opportunities for education and employment, and the entrenched societal expectations that confined them to domestic roles. We scrutinize the oppression faced by women during this era, shedding light on the recognition and treatment of PPD within the constricting boundaries of nineteenth-century gender norms.

In the heart of this dissertation, Chapter Three shines a spotlight on the narrative of 'The Yellow Wallpaper.' Within the pages of this literary masterpiece, we discern the intricate web of Postpartum depression woven into the life of our protagonist, Jane. As we navigate through Jane's experience with PPD, we also unveil the character of John and his attitudes towards his wife's affliction. Here, we delve into the concept of postpartum hysteria and the patriarchal hegemony that pervaded the nineteenth century. The battleground of gender roles and dynamics in 'The Yellow Wallpaper' becomes the focal point of the analysis.

**CHAPTER ONE:**  
**REVIEW OF LITERATURE ON THE POSTPARTUM  
DEPRESSION**

### 1.1 Introduction

The arrival of a newborn can trigger a range of intense feelings, including happiness and anticipation, as well as apprehension and distress. Surprisingly, it can also lead to a condition that is often overlooked - depression. The present chapter discusses the concept of The Postpartum Depression with its effects and causes, it also provides an overview of several key concepts such as symptoms of Postpartum Depression, how is it treated. Also how to prevent from this postpartum depression, in order to serve the content of the research.

### 1.2 Definition of Postpartum Depression

The study of postpartum depression involves employing diverse research methods to investigate its causes, prevalence, and effects on maternal mental health. Researchers utilize quantitative surveys, qualitative interviews, and longitudinal studies to gain comprehensive insights into this complex condition.

#### 1.2.1 Scientific Definition

Postpartum depression (PPD) is a mental health disorder characterized by a persistent and pervasive low mood, feelings of sadness, and a loss of interest or pleasure in daily activities experienced by women following childbirth. It typically manifests within the first few weeks postpartum and can significantly impair a mother's ability to care for herself and her infant. Symptoms of postpartum depression may include excessive fatigue, changes in appetite, sleep disturbances, feelings of worthlessness or guilt, difficulty concentrating, and recurrent thoughts of death or suicide (American Psychiatric Association, 2013).

#### 1.2.2 Literary Definition

Postpartum depression, as portrayed in literature, encompasses the complex emotional and psychological experiences of women during the postpartum period. It delves into the internal struggles, self-doubt, and overwhelming sadness that can overshadow the joy and fulfillment traditionally associated with motherhood. Literary depictions of postpartum depression often explore the nuanced interplay of societal expectations, personal identity, and the profound impact of this mental health condition on maternal well-being and family dynamics (American Psychiatric Association, 2013).

### 1.3 Unlocking the Significance of Grasping Postpartum Depression

Understanding postpartum depression is of paramount importance in promoting the well-being of mothers, supporting healthy infant development, and fostering resilient family dynamics.

Postpartum depression significantly impacts a mother's emotional and physical well-being. Mothers experiencing PPD often struggle with persistent feelings of sadness, anxiety, and a loss of interest in daily activities (Paulson & Bazemore, 2010).

Also has far-reaching consequences on infant development. Maternal depression affects the quality of caregiving, leading to less responsive and nurturing interactions between mothers and their infants (Murray et al., 2011).

The strain of PPD can lead to increased conflicts within spousal relationships, disrupt family routines, and heighten stress levels for all family members (Dennis & Ross, 2006).

PPD is a prevalent concern, affecting approximately 10% to 15% of new mothers globally (Gavin et al., 2005). These statistics underscore the urgency of addressing this issue as it has a substantial societal impact. It not only affects the individual well-being of mothers but also impacts the family unit and broader social dynamics.

Understanding the risk factors associated with PPD is crucial for early identification and intervention. Several factors contribute to its development, including hormonal fluctuations, a history of depression, and social support (O'Hara & Wisner, 2014). Recognizing these risk factors can help healthcare providers identify at-risk individuals and provide timely support.

### 1.4 Effects of Postpartum Depression

Postpartum depression has a profound impact on a mother's mental health. Women experiencing PPD often report feelings of intense sadness, hopelessness, and guilt, which can interfere with their ability to bond with their newborns (Beck, 2001). PPD is associated with increased levels of anxiety and irritability, leading to a higher risk of developing other mental health disorders, such as generalized anxiety disorder and obsessive-compulsive disorder (Dennis et al., 2016).

Also it can disrupt the process of bonding between a mother and her infant. Women with PPD may have troubles in engaging with their babies, providing consistent care, and responding to their infants' needs (Goodman, 2004). This impaired bonding can lead to long-term consequences, including insecure attachment styles and behavioral problems in children (Murray et al., 2019).

PPD can strain marital and family relationships. Partners of women with PPD may experience increased stress and reduced relationship satisfaction due to the emotional and behavioral changes in the affected mother (Paulson et al., 2006). Siblings of the newborn may also be affected, as the mother's inability to provide adequate care and attention may disrupt sibling dynamics and cause emotional distress (Matthey et al., 2003).

It can have another significant and far-reaching effects on both the mother and her child. Here are some other of the effects of postpartum depression:

**Impact on Maternal Mental Health:**

PPD can lead to persistent feelings of sadness, hopelessness, and anxiety in mothers (Beck, 1996). It increases the risk of other mood disorders, such as generalized anxiety disorder and panic disorder (Wisner et al., 2013).

**Mother-Child Bonding:**

PPD may hinder the mother's ability to bond with her infant, affecting the emotional connection between them (Goodman & Brand, 2011).

This can lead to difficulties in providing emotional support and caregiving, potentially impacting the child's development (Field, 2010).

**Child Development:**

Children of mothers with PPD may exhibit delayed cognitive and emotional development (Murray et al., 2010).

There's an increased risk of behavioral problems in these children (Grace et al., 2003).

**Marital and Family Relationships:**

PPD can strain marital relationships due to increased stress and decreased emotional intimacy (Pilkington et al., 2015).

Siblings and extended family members can also be affected by the mother's PPD (Davies & Howells, 2013).

**Physical Health:**

PPD has been associated with neglect of self-care, such as poor nutrition and lack of exercise, which can have adverse effects on the mother's physical health (Schmied et al., 2013).

### 1.5 Symptoms of Postpartum Depression

From a clinical standpoint Recognizing the symptoms can be difficult due to the accompanying presence of typical postpartum manifestations such as difficulty sleeping, fatigue, and lack of interest, but some other, more specific manifestations can be present, which facilitates the diagnosis process, including great anxiety, especially about the health

and safety of the infant. Great ease of irritation and a great sense of guilt linked to a self-perception of inability to mother, a feeling of emotional ambivalence, lack of interest in the infant, a tendency to withdraw and social isolation, in some cases, an obsessive fear about the possibility of harming the infant, which may develop into thoughts about death and suicide, in addition to the risk of secondary psychotic symptoms (200728). ,Gauthier.

Here are some other common symptoms of postpartum depression

**Persistent Sadness:** One of the hallmark symptoms of PPD is a persistent and overwhelming feeling of sadness or emptiness. This emotional state can be debilitating and interfere with a mother's ability to care for her newborn. (American Psychiatric Association, 2013)

**Irritability and Anger:** Women with PPD often experience heightened irritability, mood swings, and unexplained anger. This emotional volatility can strain relationships and make daily functioning challenging. (Stewart, D. E., et al, 2003)

**Fatigue and Sleep Disturbances:** PPD can lead to extreme fatigue and disrupted sleep patterns, which are already common challenges for new mothers. These disturbances can exacerbate feelings of despair and hopelessness. (Gavin, N. I., et al., 2005)

**Loss of Interest or Pleasure:** A common symptom is the loss of interest in activities that were once enjoyable. This anhedonia can further isolate the affected individual from social and recreational pursuits. ( O'Hara, M. W., Swain, A. M., 1996)

**Appetite Changes:** PPD may manifest as significant changes in appetite, leading to overeating or loss of appetite. These changes in eating habits can contribute to physical health issues. ( Wisner, K. L., et al., 2004)

**Difficulty Bonding with the Baby:** Mothers with PPD may have trouble bonding with their newborns, experiencing detachment or indifference, which can result in guilt and anxiety. ( Field, T., 2010)

**Physical Symptoms:** PPD can manifest with physical symptoms such as headaches, stomachaches, and muscle pain, often in the absence of a medical cause. These somatic complaints can be distressing. (Battle, C. L., et al., 2003)

**Intrusive Thoughts:** Some women with PPD may experience intrusive and distressing thoughts related to harm coming to themselves or their baby. These thoughts can be distressing and are often associated with significant anxiety. (Fairbrother, N., et al., 2016)

**Difficulty Concentrating:** Cognitive impairment, including trouble concentrating and making decisions, is another common symptom of PPD, which can affect a mother's ability to perform daily tasks. ( Langan, R., Goodbred, A., 2020)

It's important to note that the severity and combination of these symptoms can vary among individuals with PPD. Additionally, postpartum depression can manifest any time within the first year after childbirth, so it's crucial for healthcare providers, family members, and friends to be vigilant for these signs and offer support and professional help when needed.

Early intervention and treatment significantly improve outcomes for women experiencing PPD. ( American Academy of Pediatrics, 2018)

### 1.6 Causes of Postpartum Depression

Presources causes depression after delivery Postpartum depression has a complicated and multifaceted etiology. Its development is influenced by a confluence of hormonal, psychological, and social factors rather than a single cause. Following are a few of the typical reasons of postpartum depression: hormonal adjustments Postpartum hormone variations have been suggested as a potential contributor to postpartum depression.

Hormonal changes:

Hormonal fluctuations that occur during the postpartum period have been implicated as a potential cause of postpartum depression. The sudden drop in reproductive hormones, such as estrogen and progesterone, after childbirth can disrupt neurotransmitter functioning and contribute to mood dysregulation (Bloch et al., 2003).

Psychological Factors:

Psychological factors Plays a sizable impact in the emergence of postpartum depression. Those who are personal PPD is more likely to occur in families where there has been a history of depression or anxiety problems (O'Hara).2013; McCabe). The strain and emotional changes that come with being a mother, includingChanges in identity, added responsibilities, and lack of sleep may all be factors in the(Faisal-Cury & Menezes, 2012) Postpartum depression can occur. Social Considerations:Factors that could influence the development of postpartum depression (Faisal-Cury & Menezes, 2012).

Social Factors:

Social factors can contribute to the onset and severity of postpartum depression. An elevated risk of has been linked to a lack of social support, including insufficient emotional support from partners, family, and friends(Dennis & Letourneau, 2017). Financial stress, marital conflict, and unstable social relationships are additional social factors can have an impact on postpartum depression development (Goyal et al., 2019). A woman may also be influenced by the cultural background and social expectations surrounding motherhood. The susceptibility of women to PPD (Halbreich & Karkun, 2006).

### 1.7 Treatment of postpartum depression

The treatment of postpartum depression encompasses a multi-faceted approach the researcher discusses the three main treatment modalities for postpartum depression: involving medications, psychotherapy, and support groups by reviewing relevant studies and providing evidence-based recommendations.

**Medications:**

Pharmacological interventions, particularly antidepressant medications, are commonly prescribed for postpartum depression. According to a study by Misri, Reebye, Corral, Milis, and Beckman (2004), selective serotonin reuptake inhibitors (SSRIs), such as sertraline, have demonstrated efficacy in reducing depressive symptoms in postpartum women. The study found that sertraline significantly decreased depressive symptoms compared to a placebo. Another meta-analysis by Yonkers et al. (2008) supports the effectiveness of SSRIs in treating postpartum depression compared to placebo.

### **Psychotherapy:**

Psychotherapy, specifically The cognitive-behavioral therapy (CBT) for postpartum depression has demonstrated encouraging outcomes. Hoffbrand, Howard, Crawley, and Lempp's (2021) randomized controlled trial showed that CBT is beneficial in easing depression symptoms and enhancing mood. overall well-being in postpartum women. CBT focuses on identifying and modifying negative thought patterns and behaviors associated with depression. This approach has been found to be beneficial in enhancing coping skills and promoting positive mental health.

### **Support Groups:**

In a study by Dennis and Hodnett (2007), participation in support groupswas linked to a decrease in postpartum women's depression symptoms. The support groups provided a platform for women to share their experiences, receive emotional support, and gain practical advice from others facing similar challenges. Support groups can be facilitated by mental health professionals, community organizations, or online platforms.

#### **1.8 Importance of family and community support**

The Importance of family and community support Postpartum depression can have far-reaching consequences not only for the mother but also for the infant and the entire family unit (Goodman, 2009). One of the primary reasons family support is crucial during PPD is that it helps reduce the isolation and stigma often associated with the condition. According to Beck (2001), many women suffering from PPD feel a sense of shame and guilt, which can be exacerbated by societal expectations of motherhood. Having supportive family members who are empathetic and non-judgmental can create a safe space for the mother to share her feelings and experiences. In addition to emotional support, practical assistance from family members can significantly alleviate the burden of daily responsibilities that a new mother faces. This may include help with childcare, household chores, or meal preparation (Pilkington , 2015) .

Community support is equally important in the context of Postpartum Depression. Joining support groups or seeking help from local organizations specializing in maternal mental health can connect mothers with others who are experiencing similar challenges (Dennis & Hodnett, 2007). Sharing experiences and coping strategies in such settings can reduce feelings of isolation and provide valuable insights for managing Postpartum Depression.

Furthermore, healthcare professionals play a vital role in the community support network. Timely identification and intervention are essential for addressing PPD effectively. Family

members and friends can encourage the mother to seek professional help and accompany her to appointments, ensuring that she receives appropriate treatment (Stein , 2014).

### **1.9 Prevention of Postpartum Depression**

The incidence and severity of postpartum depression can be significantly reduced by the use of preventative methods. This response explores three effective preventive measures: prenatal care, healthy lifestyle choices, and supportive relationships:

Prenatal care is a vital aspect of preventing postpartum depression. According to a study by Lancaster, Gold, Flynn, Yoo, and Marcus (2010), women who received adequate prenatal care had a significantly lower compared to women who receive insufficient care, likelihood of experiencing postpartum depression.

Another crucial preventive action is to continue living a healthy lifestyle when pregnant. According to a study by Koutra, Vassilaki, Georgiou, Koutis, and Bitsios(2013), women who maintained a healthy lifestyle throughout pregnancy were less likely to experience postpartum depression

In addition, developing a network of encouraging relationships can help prevent postpartum depression. Women who felt they had more social support, according to a study by Dennis and McQueen (2007), were less likely to experience postpartum depression.

### **1.10 Conclusion**

This chapter discussed the definition of postpartum depression in general, its primary causes, effective treatments, and ways to prevent postpartum depression. The Postpartum Depression in the nineteenth century will be covered in the following chapter.

# CHAPTER TWO : BEING A WOMEN DURING THE 19<sup>TH</sup> CENTURY: A LITERATURE REVIEW ON WOMEN'S STATUS AND POSTPARTUM DEPRESSION

## 2.1 Introduction

In the early of Nineteenth century, women lived in hard situation characterized by inequality in rights and education and freedom, and they were anticipated to continue to be in subordination to their dads and spouses. Britain witnessed many changes in Victorian time that influenced English society in Philosophy, economic, Politics, Social values, and it was an important period of English Literature by the sparkling of many novelists.

## 2.2 The Nineteenth Century: A Historical background

The 19<sup>th</sup> century was a time of profound change across human society. It brought about sweeping transformations in politics, economics, culture, and science.

The nineteenth century was marked by sweeping political transformations, such as the rise and fall of empires, the spread of nationalism, and the struggle for democracy. The French Revolution, which began in 1789 and continued into the early nineteenth century, challenged the existing social and political order and paved the way for the rise of democratic ideals (Hobsbawm, 1990).

Additionally, the era witnessed the emergence of nation-states and the consolidation of national identities. The unification of Italy in 1871 and the formation of Germany as a unified nation-state in 1871 exemplified this trend (Black, 2003). Nationalism became a potent force, driving political aspirations and reshaping the geopolitical landscape of Europe.

At that time the Industrial Revolution witnessed, a period of rapid industrialization and technological advancements that transformed the global economy. The invention of steam power, the growth of factory systems, and the expansion of railroads revolutionized production and transportation (Mokyr, 1999). These developments led to increased urbanization and the rise of the working class.

Capitalism emerged as the dominant economic system, with the rise of industrial capitalism and the growth of global markets. The spread of free trade and the establishment of colonial empires by European powers expanded economic interdependencies and laid the groundwork for globalization (Polanyi, 1944).

This period witnessed remarkable advancements in science and intellectual thought. The development of evolutionary theory by Charles Darwin in his seminal work "On the Origin of Species" (1859) revolutionized the understanding of biology and challenged religious and philosophical beliefs (Darwin, 1859).

Moreover, the field of physics saw significant breakthroughs. James Clerk Maxwell's formulation of the theory of electromagnetism in the 1860s provided the foundation for modern

physics (Ferreira, 2015). These scientific discoveries laid the groundwork for subsequent advancements and shaped the direction of scientific inquiry.

### Womens status during the nineteenth century

The nineteenth century marked a pivotal period in the history of women's rights and societal expectations. During this time, women faced numerous challenges in obtaining

quality education and meaningful employment opportunities. By examining historical sources and scholarly works.

According to Anderson (2016), "Victorian society considered women to be intellectually and physically weaker than men, thus limiting their access to education"

Furthermore, Smith (2019) argues that educational institutions were often reluctant to admit women, as they believed that education could undermine their femininity and jeopardize their chances of finding suitable husbands (p. 78).

### 2.2.1 Political and Social Transformations

The nineteenth century was marked by sweeping political transformations, such as the rise and fall of empires, the spread of nationalism, and the struggle for democracy. The French Revolution, which began in 1789 and continued into the early nineteenth century, challenged the existing social and political order and paved the way for the rise of democratic ideals (Hobsbawm, 1990).

Additionally, the era witnessed the emergence of nation-states and the consolidation of national identities. The unification of Italy in 1871 and the formation of Germany as a unified nation-state in 1871 exemplified this trend (Black, 2003). Nationalism became a potent force, driving political aspirations and reshaping the geopolitical landscape of Europe.

### 2.2.2 Industrial Revolution and Economic Changes

The nineteenth century witnessed the Industrial Revolution, a period of rapid industrialization and technological advancements that transformed the global economy. The invention of steam power, the growth of factory systems, and the expansion of railroads revolutionized production and transportation (Mokyr, 1999). These developments led to increased urbanization and the rise of the working class.

Capitalism emerged as the dominant economic system, with the rise of industrial capitalism and the growth of global markets. The spread of free trade and the establishment of colonial empires by European powers expanded economic interdependencies and laid the groundwork for globalization (Polanyi, 1944).

### 2.2.3 Scientific and Intellectual Advancements

The nineteenth century witnessed remarkable advancements in science and intellectual thought. The development of evolutionary theory by Charles Darwin in his seminal work "On the Origin of Species" (1859) revolutionized the understanding of biology and challenged religious and philosophical beliefs (Darwin, 1859).

Moreover, the field of physics saw significant breakthroughs. James Clerk Maxwell's formulation of the theory of electromagnetism in the 1860s provided the foundation for

modern physics (Ferreira, 2015). These scientific discoveries laid the groundwork for subsequent advancements and shaped the direction of scientific inquiry.

#### 2.2.4 Cultural and Artistic Movements

The nineteenth century was a fertile period for cultural and artistic movements that challenged traditional norms and pushed the boundaries of creativity. The Romantic movement, characterized by a celebration of emotion, nature, and individuality, emerged as a response to the rationalism of the Enlightenment (Berlin, 1999).

Literary figures such as Mary Shelley, Edgar Allan Poe, and Emily Brontë explored the themes of individualism, the supernatural, and the sublime in their works. The visual arts also underwent significant transformations, with movements such as Realism, Impressionism, and Symbolism challenging conventional artistic techniques and subject matter (Honour & Fleming, 2009).

The nineteenth century was a period of profound change and transformation across multiple domains. Political upheavals, economic revolutions, scientific breakthroughs, and cultural movements shaped the course of the century and continue to influence our world today. By studying the developments of this era, we gain valuable insights into the origins of many contemporary ideas and institutions.

#### 2.3 Womens status during the nineteenth century

The nineteenth century marked a pivotal period in the history of women's rights and societal expectations. During this time, women faced numerous challenges in obtaining quality education and meaningful employment opportunities. By examining historical sources and scholarly works.

According to Anderson (2016), "Victorian society considered women to be intellectually and physically weaker than men, thus limiting their access to education"

Furthermore, Smith (2019) argues that educational institutions were often reluctant to admit women, as they believed that education could undermine their femininity and jeopardize their chances of finding suitable husbands (p. 78).

##### 2.3.1 Limited opportunities for education and employment

Limited employment opportunities were another significant challenge for women during the nineteenth century. Society largely viewed women as dependent on male support and primarily suited for domestic work. As a result, women faced severe restrictions in pursuing professional careers or engaging in economic activities outside of the home. According to Brown (2018), "The prevailing notion of separate spheres confined women to the private sphere of the home, limiting their employment opportunities to traditionally feminine roles such as teaching, nursing, and domestic service" (p. 56).

Additionally, Johnson (2020) highlights that many professions and industries explicitly barred women from entering or imposed discriminatory practices, such as lower wages and

limited promotion prospects (p. 92). The limited opportunities for education and employment in the nineteenth century had profound implications for women's lives. Denied access to education, women were deprived of the intellectual growth and knowledge necessary for personal development and societal contributions. The restricted employment options limited their financial independence, perpetuating their reliance on male relatives or spouses. These restrictions not only impeded women's individual potential but also perpetuated gender inequality in society.

### 2.3.2 Lack of access to higher education

According to Moore and Allen (2017), "Women were largely excluded from higher education due to the prevailing belief that their intellectual capacities were inferior to those of men, and their educational pursuits were deemed unnecessary or even detrimental to their prescribed domestic roles" (p. 32).

Similarly, in her study, Johnson (2018) argues that universities and colleges of the time upheld rigid gender norms, deeming women unfit for intellectual pursuits and limiting their opportunities for higher education (p. 45).

According to Smith (2019) highlights that societal expectations deemed women's education unnecessary as their primary purpose was considered to be marriage and motherhood. Consequently, higher education for women was often perceived as a threat to their traditional roles (p. 78).

Additionally, according to Davis (2021), society propagated the idea that women were physically and intellectually inferior to men, justifying their exclusion from higher education institutions and perpetuating gender inequalities (p. 63).

In her research, Johnson (2020) reveals that women's access to higher education was impeded by the lack of financial support, as families prioritized investing in the education of their male counterparts (p. 92).

Additionally, Anderson (2016) argues that the lack of financial resources further limited women's opportunities for higher education, as tuition fees, textbooks, and other educational expenses posed significant obstacles (p. 43).

## 2.4 Societal expectations and gender roles

Societal expectations and gender roles were firmly enmeshed in a system that mandated different roles and actions for men and women in the nineteenth century. These expectations were affected by a number of things, such as economic institutions, cultural standards, and religious convictions.

**The Cult of True Womanhood:** During the 19<sup>th</sup> century, American middle-class women were frequently expected to uphold the ideals of the "Cult of True Womanhood" or the "Victorian Woman." This ideology placed a strong emphasis on four qualities for women:

piety, purity, submissiveness, and domesticity, as Barbara Welter pointed out in her essay from 1966 (Welter, 1966).

**Separate Spheres:** Men and women clearly had different responsibilities and areas of labor throughout this time period. Men were supposed to earn a living and participate in public life, while women were expected to concentrate on the home and family and the private sphere (Smith-Rosenberg, 1975).

**Legal Restrictions:** In the 19th century, legal restrictions reinforced gender roles. For example, women had limited property rights, and many states had laws that prohibited women from voting or participating in politics (Kerber, 1980).

**Literature and Popular Culture:** Novels like Jane Austen's works often depicted the challenges women faced in adhering to societal expectations and finding suitable marriage partners (Austen, 1813).

**Ladies' Testimonial Development:** The nineteenth century likewise saw the rise of the ladies' testimonial development, as ladies tested their restricted jobs. Ladies like Susan B. Anthony and Elizabeth Cady Stanton pushed for ladies' all in all correct to cast a ballot, prompting the possible entry of the nineteenth Amendment in 1920 (Flexner, 1959).

## 2.5 The oppression of women in the nineteenth century

The mistreatment of ladies in the nineteenth century was an unavoidable and profoundly imbued social issue, portrayed by different types of segregation and disparity.

**Limited Educational Opportunities:** During the 19th century, women's access to education was severely restricted. According to historian Linda K. Kerber, "Educational opportunities for women were limited, and they were often denied access to higher education" (Kerber, 1980). This absence of instruction prevented ladies' scholarly and proficient turn of events.

**Absence of Testimonial:** Ladies were denied the option to cast a ballot in many nations during the nineteenth hundred years. In the United States, for example, women's suffrage was not achieved until the 19th Amendment was ratified in 1920. Historian Susan B. Anthony played a prominent role in advocating for women's suffrage (Flexner, 1959).

**Legal Disadvantages:** Women faced significant legal disadvantages. In her book "The Second Sex," Simone de Beauvoir discussed how women were often considered "the other" in legal and social contexts (de Beauvoir, 1949). Laws often limited women's property rights, and they had few legal protections against domestic violence.

**Social Expectations and Domesticity:** The cult of domesticity was a prevailing ideology that confined women to the role of homemakers and caretakers. Historian Barbara Welter explored this in her essay "The Cult of True Womanhood" (Welter, 1966). Women were expected to prioritize marriage and motherhood above all else, limiting their choices and opportunities.

**Limited Career Opportunities:** Women were largely excluded from many professions and industries. Occupational segregation was the norm, with women relegated to roles deemed suitable for their "nature." This is explored in historian Alice Kessler-Harris's work, "Out to Work" (Kessler-Harris, 1982).

**Literary Reflections:** Literature from the 19th century often depicted the struggles of women in society. In Charlotte Brontë's "Jane Eyre," for instance, the titular character faces various forms of oppression and seeks independence.

**Ladies' Developments:** Ladies' developments and activism started to arise in light of these harsh circumstances. The Seneca Falls Show of 1848, drove by figures like Elizabeth Cady Stanton and Lucretia Mott, denoted the start of the ladies' testimonial development in the US (Stanton, 1848).

## 2.6 Postpartum depression during the 19<sup>th</sup> C

Postpartum discouragement is a type of clinical despondency that influences ladies subsequent to conceiving an offspring. It is Portrayed by sensations of misery ,and a loss of interest or pleasure in activities. PPD is a prevalent mental health issue, impacting women worldwide. The prevalence rates of PPD can vary across different populations and cultural contexts. Research indicates that approximately 10-15% of new mothers experience postpartum depression, making it a relatively common condition during the postnatal period (Gavin et al., 2005).

One common approach to treating postpartum depression in the nineteenth century was to prescribe rest and seclusion for affected women. Physicians and caregivers believed that isolating women from social interactions and responsibilities would alleviate their emotional distress. This "rest cure" was intended to shield women from potential stressors and allow them to recover from childbirth and regain their emotional balance (Showalter, 1985).

In some cases, severe postpartum depression led to women being institutionalized in mental asylums. The concept of "moral treatment" was introduced, emphasizing compassionate care and emotional support as part of the treatment approach. However, the conditions in asylums during this era were often deplorable, and women were subject to neglect and mistreatment (Grob, 1994).

## 2.7 Conclusion

This chapter provides a comprehensive exploration of the nineteenth century, shedding light on women's status, societal expectations, and gender roles of the era. It delves into the oppression faced by women during this period and addresses the prevalence and recognition of postpartum depression. By examining these historical contexts, this chapter equips the reader with a deeper understanding of women's roles and the literary landscape of the 19<sup>th</sup> century. This understanding will be invaluable as we move forward to analyze the novel in the next chapter, allowing us to contextualize and appreciate the themes and characters within the broader social and cultural framework of the time.

## **CHAPTER THREE: POSTPARTUM DEPRESSION IN THE YELLOW WALLPAPER**

### 3.1 Introduction

Charlotte Perkins Gilman's short story, "The Yellow Wallpaper," is a captivating and thought-provoking work that delves into the complexities of gender roles, mental illness, and societal expectations in the late 19<sup>th</sup> century. This literary analysis will explore the themes, symbolism, and character development within the narrative, shedding light on the profound commentary it offers about the subjugation of women's voices and the consequences of suppressing one's identity. Through a close examination of the protagonist's descent into madness and her fascination with the room's eerie wallpaper pattern, we will uncover the layers of meaning and social critique embedded in Gilman's classic tale.

### 3.2 Reviews on The Yellow Wallpaper

In 1892, the year she first published "The Yellow Wallpaper," Charlotte Perkins Gilman was a writer and a mother from New England, living in California. She had, several years past, been a patient of the famous, eccentric physician S. Weir Mitchell – evangelist of the notorious "rest cure" treatments that Gilman gruesomely examines in her now-canonical tale. Although the synaesthetic, suffocating patterns of Gilman's absorbing, taunting wallpaper and the furtively

scribbling narrator who details it are now mainstays of collections, anthologies and undergraduate coursework, early readers and critics did not accept Gilman's provocative critiques generously. Upon receiving "The Yellow Wallpaper" as a submission, Horace Scudder, the editor of the prestigious, cultural taste-maker the Atlantic Monthly, promptly rejected her ghostly, harrowing tale with amused shock, stating "I could not forgive myself if I made others as miserable as I have made myself!" (Shumaker 588) Her story eventually found its initial home in the respectable, but not nearly as lauded New England Magazine. It was accompanied by a series of illustrations of a woman falling into aggrieved hysterics, the placement of which was presumably outside the control of the author.

William Dean Howells, an early supporter of Gilman and other women writers of the period, reprinted her story thirty years later in his collection Great American Modern Stories. But even he somewhat apprehensively introduced it as "terrible and too wholly dire" to appear comfortably in printed anthologies alighting in drawing rooms and respectable parlors. Later critics questioned this response, arguing that the reading public, so recently exposed to the popularized tales of horror by Poe and other late romantics, were not too fragile to register just any tale of insanity and delusion. As Susan Lanser writes, editors like Howells and Scudder, and presumably their reading publics, were "surely balking at something more particular: the 'graphic' representation of 'raving lunacy' in a middle-class mother and wife that revealed the rage of the woman on a pedestal" (Lanser 417-18).

### 3.3 Postpartum Depression on the Yellow Wallpaper

Charlotte Perkins Gilman's brief tale, "The Yellow Backdrop", distributed in 1892, is a frightening investigation of the psychological torment experienced by a lady experiencing post birth anxiety (PPD).

This essay delves into the themes, characters, and symbolism within the story to shed light on the protagonist's struggle with PPD and the societal factors that exacerbate her condition.

### 3.3.1 The Protagonist's Descent into Madness

Gilman's narrative exposes the societal suppression of women's voices and agency during the late 19th century. The protagonist's confinement and subjugation to her husband's authority reflect the prevalent attitudes towards women's mental health at the time. Her inability to articulate her feelings and her husband's dismissal of her concerns contribute to her worsening condition (Gilman, 1892).

### 3.3.2 Suppression of Women's Voices

John, a physician, represents the medical establishment's ignorance about mental health, particularly in women. His dismissive attitude towards his wife's feelings and his insistence on the rest cure highlight the medical oppression faced by women experiencing PPD

during that era. This misdiagnosis exacerbates the protagonist's suffering and underscores the harmful consequences of ignoring women's mental health (Gilman, 1892).

### 3.3.3 Misdiagnosis and Medical Oppression

The yellow wallpaper serves as a powerful metaphor for the protagonist's deteriorating mental state. As she becomes increasingly fixated on the patterns within the wallpaper, she descends further into madness. The wallpaper's chaotic design reflects the chaos within her mind. The story demonstrates how societal expectations and gender roles can contribute to the manifestation and exacerbation of mental illness (Gilman, 1892).

## 3.4 Jane's Experience With Postpartum Depression

Jane's Experience With Postpartum Depression delves into the personal journey of a new mother as she navigates the challenges and emotions associated with postpartum depression

### 3.4.1 Jane's Isolation and Lack of Agency

At the outset of the story, Jane's postpartum depression is exacerbated by her isolation. She is confined to a room in her home, barred from engaging in any meaningful activity or social interaction (Gilman, 1892). Her husband, John, a physician, exercises his authority over her and prescribes the "rest cure" a common treatment for women's mental health issues during the late 19th century (Gilman, 1892). This lack of agency and control over her own life

contributes to Jane's feelings of powerlessness and despair, which are characteristic of postpartum depression (2013).

### 3.4.2 The Decaying Wallpaper and Jane's Mental State

The titular yellow wallpaper in Jane's room serves as a symbol of her deteriorating mental state. As she becomes increasingly obsessed with the wallpaper's pattern and the woman she believes is trapped behind it, her grip on reality loosens (Gilman, 1892). This fixation is a manifestation of her postpartum depression, which often involves intrusive and obsessive thoughts (2013). The wallpaper's transformation from a simple decorative element to an embodiment of Jane's madness is a powerful metaphor for the progression of her mental illness.

### 3.4.3 Jane's Loss of Identity

Jane's loss of identity is a central theme in "The Yellow Wallpaper". She feels trapped within societal expectations of motherhood and womanhood, unable to express her own desires and emotions (Gilman, 1892). Postpartum depression often leads to a loss of self-identity as women grapple with the demands of motherhood and the societal pressures associated with it (2013). Jane's struggle to reconcile her own identity with societal expectations is a poignant reflection of the challenges faced by many women experiencing postpartum depression.

## 3.5 John's attitudes towards his wife sickness

John explains why they can't leave the house early, despite knowing that the storyteller's sentiments about the yellow backdrop have become very silly. John's reaction shows that he just adjudicators her wellbeing from outside markers. He considers the storyteller's all's solicitations to compose, to see companions, and, in particular, to escape the room with the yellow backdrop irrelevant or even counterproductive. He seems unable or perhaps unwilling to understand her needs.(R.Goswami.p81).

John addresses his wife as a little girl-someone to be protected, coddled, and told how to behave, especially what not to do. The narrator knows not to tell John her suspicions about the wallpaper at this point in her illness, she understands he would scoff at her ideas but she does request that they shorten their summer stay at the house.

He not only refuses, but insists that she is getting better even if she doesn't see her progress. In his view, she literally does not know her own mind.(R.Goswami.p85). John attempts to shut down his wife's idea that while physically she may be getting better. mentally she is not. He does not want to hear this talk of her not making progress. Although he minimizes her illness, he reacts with alarm. He realizes that someone with a vivid imagination, like his wife, can will herself into illness. He orders her to repress her imagination. John brings their baby into the discussion, from whom his wife feels detached. Meanwhile, he denies her anything else to think about or do. Ironically, the narrator must find

a way to get better while the tools she needs to mentally heal are taken from her.(R.Goswami.p87).

### 3.6 The postpartum Hysteria and Patriarchal hegemony in the Yellow wallpaper

In “The Yellow Backdrop” the storyteller’s involvement in post pregnancy mania is key to the account. Gilman distinctively represents the segregation and restriction forced on ladies experiencing this condition. The narrator’s husband, John, who is also her physician, prescribes a “rest cure” that involves isolation and confinement in a room with yellow wallpaper. This treatment, instead of aiding her recovery, exacerbates her condition as she becomes increasingly obsessed with the wallpaper’s patterns. This is reflected in Gilman’s portrayal “The faint figure behind seemed to shake the pattern, just as if she wanted to get out” (Gilman, 1892).

The story also highlights the pervasive patriarchal hegemony of the late 19th century, where ladies were supposed to adjust to their endorsed jobs as spouses and moms. The narrator’s husband, John, embodies this oppressive societal norm. He dismisses her concerns, belittles her emotions, and infantilizes her, reinforcing the power dynamics of the time. This is evident when the narrator states, “John laughs at me, of course, but one expects that in marriage”.(Smith, 2010)

### 3.7 Gender Battle in the yellow wallpaper

The story centers around the storyteller’s “anxious condition” as she gradually loses feeling of the real world, the entire time being completely misjudged and misdiagnosed by her better half, a specialist who can’t comprehend a lady’s mind and who assumes the best treatment is for her to keep herself to her room and rest. According to the storyteller, “If a doctor of elevated status, and one’s own better half, guarantees companions and family members that there is actually nothing the have really any meaning with one however impermanent anxious misery — a slight insane inclination — what is one to do?”(Ed. Ann J.Lane,1980). Perusing “The Yellow Backdrop” in verifiable setting, Jane Thraikill brings up that the nineteenth-century clinical foundation failed to really see how to manage ladies’ psychological wellness issues, frequently misdiagnosing an entire host of problems as female delirium (Thraikill,2002).

Thraikill makes sense of that doctors utilized the “rest fix” as a method for recapturing command over a circumstance they didn’t grasp. The storyteller’s “apprehensive condition” isn’t insanity however, rather, likely the consequence of having as of late conceived an offspring. Contemporary medication didn’t have the foggiest idea what post pregnancy psychosis was, however that is plainly the very thing the storyteller is experiencing, as is obvious in the section in which she comments, “It is lucky Mary is so great with the child. Such a dear child! But then I can’t be with him, it makes me so nervous”(Ed. Ann J.Lane,1980).

Thraikill claims that Gilman’s push to bring issues to light about misdiagnoses of ladies’ emotional well-being issues originates from the disappointment she had an outlook on her

own treatment by Dr. Weir Mitchell when Gilman herself was determined to have a “anxious condition,” one of the most clear instances of a specialist dismissing a patient’s words(Thrailkill,2002).

It is these belittling perspectives that Gilman is battling against, and she does as such by outlining the manners in which that unbending orientation jobs adversely affect all kinds of people. John, the storyteller’s better half, is addressed as the levelheaded, regarded specialist who is constantly treated in a serious way. The storyteller, then again, is addressed as overemotional; she isn’t to be treated in a serious way. As opposed to being portrayed as normal, she is depicted as being “creative.” In his discourse, Conrad Shumaker contends that the expression “creative” is positively gendered — it is viewed as ladylike and weak(Shumaker,2009). Essentially, the storyteller is forewarned by her better half not to surrender to her creative mind and her “likes” — like composition — the storyteller says that her significant other “hates to have [her] compose a word” — and decorating her room .

That’s what John trusts in the event that his better half quells her imaginative urges she will turn out to be well in the future and accept the job of spouse and mother. Unfortunately, the storyteller incorporates her significant other’s recommendation, recognizing, “I intended to be such an assistance to John, such a genuine rest and solace, and here I am a near trouble

already”(Ed. Ann J.Lane,1980).Because John accepts that he should work as the reasoning accomplice in his marriage, he won’t allow his better half to have an independent perspective.

Of when she asks John for anything or attempts to let him know anything, he overlooks her and calls out to her, for example, “favored little goose” and “young lady.” These are names for kids, and that is the means by which John treats his significant other: like a kid. He tells her, “I’m a specialist, dear, and I know”. Since he recognizes himself as the more levelheaded, and accordingly more smart, accomplice in the marriage, John expects that he knows more than his significant other about her condition.(Ed. Ann J.Lane,1980).

Conrad Shumaker contends that innovative reasoning subverts John’s universe. By characterizing his better half’s demeanor as a risk, he have some control over the region of the planet that goes against his materialistic view. However, by quelling his significant other’s creative motivations and creative mind, John drives her into the specific express that he is attempting to stay away from. She disentangles and loses her grasp on the real world .Their marriage self-destructs, and John loses his better half to frenzy, the very thing he had attempted to avoid.(Shumaker,2009).

Janice Haney-Peritz contends that “The Yellow Backdrop” eventually shows that in a male centric culture we are totally ill-fated; nobody can endure the unbending orientation assumptions put upon them(Haney-Peritz,2009).

In the event that John were not so pompous in his own explanation and authority as a specialist and spouse, he could have had the option to help his better half. On the off chance that he had paid attention to her, he probably won’t have lost her to franticness. On the off chance that the storyteller herself had not been so able to adjust to John’s desires and had not accepted that he was in every case right, then she could have been exceptional ready to go to

bat for herself. She could have had the option to challenge her better half and get the assistance that she truly required. Yet, the storyteller believes that it isn't the lady's place to scrutinize her better half. According to the storyteller, "It is so difficult to consult with John about my case, since he is so insightful, and on the grounds that he cherishes me so". She normally expects that John understands what he is doing. She second guesses herself rather than him. Her condition deteriorates in light of the fact that the two of them accept that John knows best. In the end both a couple lose in light of the fact that they are caught in fixed orientation roles.(Ed. Ann J.Lane,1980).

### 3.8 Significance of Yellow color within the novel

Throughout the story, the narrator describes the yellow wallpaper in the room where she is confined due to her "nervous condition." The color yellow represents various aspects:

**Mental Degeneration:** The yellow wallpaper is initially described as having "sickly" and "unpleasant" shades. This mirrors the narrator's deteriorating mental state. As the story progresses, the yellow wallpaper becomes a manifestation of her descent into madness. (Smith ,2010)

**Imprisonment:** The yellow wallpaper's pattern is described as resembling bars, which symbolize the narrator's sense of confinement and powerlessness. It's as if she is trapped within the room and by societal expectations. (Smith,2010)

**Feminine Subjugation:** The color yellow is associated with the societal norms and expectations placed upon women during the late 19th century when the story is set. Women were often confined to domestic roles and were not encouraged to express themselves. The narrator's confinement and obsession with the wallpaper symbolize her struggle against these oppressive gender roles.(Smith ,2010)

**Isolation:** The yellow wallpaper also represents the isolation the narrator feels. She is cut off from the outside world, both physically and emotionally, and this isolation contributes to her mental decline.(Smith ,2010)

**Decay and Disintegration:** As the narrator becomes more obsessed with the wallpaper, she perceives a woman trapped behind it, struggling to escape. This imagery reflects the narrator's own feelings of entrapment and her fear of her own mental deterioration. (Smith ,2010)

### 3.8 Conclusion

In conclusion, "The Yellow Wallpaper" by Charlotte Perkins Gilman is a powerful and thought-provoking work of literature that delves into the complex issues of women's mental health and societal constraints in the late 19<sup>th</sup> century. Through the protagonist's descent into madness and her obsession with the yellow wallpaper, Gilman skillfully illustrates the oppressive nature of patriarchal norms and the stifling effects they can have on women's lives.

The story serves as a poignant critique of the medical profession's treatment of women during that era, highlighting the damaging consequences of the "rest cure" prescribed to the

narrator. Furthermore, the use of symbolism in the yellow wallpaper itself underscores the theme of confinement and the gradual loss of identity.

Gilman's narrative technique, particularly the first-person perspective, allows readers to intimately experience the narrator's descent into madness. This narrative choice adds depth to the story's exploration of the intersection between gender, mental health, and societal expectations.

Ultimately, "The Yellow Wallpaper" remains a timeless work that continues to resonate with readers today, prompting us to reflect on the enduring struggle for women's autonomy and mental well-being. Charlotte Perkins Gilman's work reminds us of the importance of challenging oppressive systems and advocating for the rights and agency of all individuals, regardless of gender.

## General conclusion

The dissertation titled "postpartum Depression and the male partner in the Charlotte Perkins Gilman's "the yellow wallpaper". In Charlotte Perkins Gilman's iconic novella "The Yellow Wallpaper," postpartum depression emerges as a central theme, shedding light on the mental health struggles of women in the late 19th century. However, the male partner's role and his impact on the protagonist's condition remain a complex and intriguing aspect of the

narrative. This dissertation explores the nuanced portrayal of postpartum depression and the male partner's involvement in the story, examining the societal norms and power dynamics that shape their interactions and ultimately contribute to the protagonist's descent into madness. This research was divided into three chapters, each chapter included content that contributed to the analysis of the topic.

In the first chapter of this comprehensive examination of postpartum depression within this dissertation, the following key aspects are explored: the definition of postpartum depression, the importance of understanding postpartum depression, the effects and causes of postpartum depression, the symptoms of postpartum depression, the treatment of postpartum depression, and strategies for the prevention of this condition. This multifaceted analysis serves as a foundational framework for a deeper comprehension of postpartum depression, its implications, and potential avenues for intervention and support.

The second chapter of this research delves into the intricate nuances of the nineteenth century, shedding light on a myriad of aspects. It commences with an "Introduction" that sets the stage for the exploration that follows. A "Brief Overview of the Nineteenth Century" provides essential context, while an examination of "Women's Status during the Nineteenth Century" elucidates the limited opportunities for education and employment, coupled with the lack of access to higher education that women faced. Furthermore, the study scrutinizes "Societal Expectations and Gender Roles" as well as "The Oppression of Women in the Nineteenth Century," unveiling the constraints women contended with. Additionally, it investigates the "Prevalence and Recognition of Postpartum Depression during the Nineteenth Century" and the "Treatment of Postpartum Depression in the Nineteenth Century," contributing to a comprehensive understanding of women's experiences in this pivotal era.

In the third chapter of the dissertation, the introduction sets the stage for the exploration that follows. It delves into reviews on "The Yellow Wallpaper" and introduces the topic of postpartum depression within the context of the story. Jane's experience with postpartum depression becomes a focal point, shedding light on the protagonist's struggles. Examining John's attitudes towards his wife's sickness adds depth to the analysis. The dissertation then navigates through the theme of Postpartum Hysteria and Patriarchal hegemony in "The Yellow Wallpaper." Lastly, it culminates by addressing the gender battle within the story, weaving together these intricate threads to reach a thought-provoking conclusion.

The exploration of postpartum depression and the role of the male partner in Charlotte Perkins Gilman's "The Yellow Wallpaper" sheds light on complex themes that extend beyond the text itself. This dissertation has delved into the multifaceted layers of postpartum depression, a condition that continues to affect countless women worldwide, often in silence and isolation. Gilman's portrayal of the protagonist's mental deterioration serves as a poignant reminder of the importance of recognizing and addressing postpartum depression.

Furthermore, the presence and impact of the male partner in the narrative underscores the broader societal expectations and gender dynamics of the late 19th century. John, the husband and physician, symbolizes the patriarchal norms of the era, where women were often

subjugated and dismissed as mere "hysterics." This portrayal serves as a stark critique of the medical profession's treatment of women's mental health during that time and highlights the detrimental consequences of dismissing women's experiences.

The yellow wallpaper itself serves as a powerful symbol of the protagonist's confinement, both within her domestic sphere and the confines of her own mind. The gradual descent into madness mirrors the stifling effects of societal expectations and the suppression of women's voices.

As we reflect on this dissertation's analysis, it becomes evident that "The Yellow Wallpaper" remains a significant work of literature that continues to resonate with contemporary readers. Postpartum depression remains a relevant and pressing issue, and the role of male partners in supporting their partners through this challenging period has gained increasing recognition in recent years.

In a broader context, this dissertation underscores the importance of literature as a medium for social commentary. Gilman's work, though a product of its time, transcends its historical context and offers valuable insights into issues that persist today. It encourages us to critically examine the intersections of gender, mental health, and societal expectations, prompting a necessary conversation about the evolution of our understanding and treatment of postpartum depression.

In conclusion, Charlotte Perkins Gilman's "The Yellow Wallpaper" remains a poignant and thought-provoking exploration of postpartum depression and the male partner's role within the context of its time. Its enduring relevance speaks to the enduring challenges faced by women in society and serves as a testament to the power of literature to shed light on the complexities of the human experience. It is a reminder that, even as society progresses, there is always more work to be done to support and uplift the voices and experiences of those who have been historically marginalized and misunderstood.

## **Bibliography**

American Psychiatric Association. (2013). Diagnostic and Statistical Manual of Mental Disorders (5th ed.). American Psychiatric Publishing.

Anderson, L. (2016). Gender and Education in the Nineteenth Century. Routledge.

Austen, J. (1813). Pride and Prejudice. Publisher: T. Egerton.

Battle, C. L., et al. (2003). Postpartum depression: A review of the literature.

Beck, C. T. (1996). A meta-analysis of the relationship between postpartum depression and infant temperament. *Nursing Research*, 45(4), 225-230.

Beck, C. T. (2001). Predictors of postpartum depression: An update. *Nursing research*, 50(5), 275-285.

Berlin, I. (1999). The Roots of Romanticism. Princeton University Press.

Black, J. (2003). European International Relations, 1648-1815. Palgrave Macmillan.

Briggs, Laura. "The Race of Hysteria: "Overcivilization" and the "Savage" in Late Nineteenth-Century Obstetrics and Gynecology." *American Quarterly*, 52(2), 246-273.

Brown, C. (2018). Women's Work: The First 20,000 Years: Women, Cloth, and Society in Early Times. W. W. Norton & Company.

Corwin, E. J., Brownstead, J., Barton, N., Heckard, S., & Morin, K. (2015). The impact of fatigue on the development of postpartum depression. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*, 44(5), 706-716.

Cuijpers, P., Karyotaki, E., Weitz, E., Andersson, G., Hollon, S. D., Hofmann, S. G., ... & Cristea, I. A. (2016). The effects of psychotherapies for major depression in adults on remission, recovery and improvement: a meta-analysis. *Journal of Affective Disorders*, 202, 511-517.

Darwin, C. (1859). On the Origin of Species. John Murray.

Davies, J., & Howells, S. (2013). Family therapy for postpartum depression: A systematic review. *Journal of Family Therapy*, 35(3), 252-278.

Davis, A. (2021). The Education of Jane Addams: Ideology, Experience, and Legacy. University of Illinois Press.

de Beauvoir, S. (1949). The Second Sex.

Dennis, C. L., & Hodnett, E. (2007). Psychosocial and psychological interventions for treating postpartum depression. *The Cochrane Database of Systematic Reviews*, 2007(4), CD006116.

Dennis, C. L., Falah-Hassani, K., & Shiri, R. (2016). Prevalence of antenatal and postnatal anxiety: Systematic review and meta-analysis. *British Journal*.

Dennis, C.-L., & Dowswell, T. (2013). Psychosocial and psychological interventions for preventing postpartum depression. *The Cochrane Database of Systematic Reviews*, 2, CD001134.

Dennis, C.-L., & Ross, L. (2006). Women's perceptions of partner support and conflict in the development of postpartum depressive symptoms. *Journal of Advanced Nursing*, 56(6), 588-599.

Earls, M. F., et al. (2010). Incorporating recognition and management of perinatal and postpartum depression into pediatric practice. *Pediatrics*, 126(5), 1032-1039.

Fairbrother, N., et al. (2016). Perinatal distress in women exposed to prenatal and postnatal depression and anxiety: A prospective population-based study.

Ferreira, P. M. (2015). *The Perfect Theory: A Century of Geniuses and the Battle Over General Relativity*. Hachette UK.

Field, T. (2010). Postpartum depression effects on early interactions, parenting, and safety practices: A review. *Infant Behavior and Development*, 33(1), 1-6.

Flexner, E. (1959). *Century of Struggle: The Woman's Rights Movement in the United States*. Publisher: Harvard University Press.

Gavin, N. I., Gaynes, B. N., Lohr, K. N., Meltzer-Brody, S., Gartlehner, G., & Swinson, T. (2005). Perinatal depression: A systematic review of prevalence and incidence. *Obstetrics & Gynecology*, 106(5 Pt 1), 1071-1083.

Gilman, C. P. (1892). *The Yellow Wallpaper*. *New England Magazine*, 5, 647-656.

Gilman, Charlotte Perkins. "The Yellow Wallpaper." *The Charlotte Perkins Gilman Reader: "The Yellow Wallpaper" and Other Fiction*. Ed. Ann J. Lane. New York: Pantheon, 1980. 3-20.

Goodman, J. H., & Brand, S. R. (2011). Infants of depressed mothers: Vulnerabilities, risk factors, and protective factors for early cognitive development. In *Handbook of infant mental health* (pp. 153-176). Guilford Press.

Gowasmi, R. (2022). "A Bulk of Short Questions and Answers Series\_4". p. 244.

Grace, S. L., et al. (2003). Postpartum depression in parents: Literature review. *Journal of Advanced Nursing*, 44(3), 277-293.

Grob, G. N. (1994). *Mad Among Us: A History of the Care of America's Mentally Ill*. Simon and Schuster.

Quintivano, J., Manuck, T. A., & Meltzer-Brody, S. (2018). Predictors of postpartum depression: A comprehensive review of the last decade of evidence. *Clinical Obstetrics and Gynecology*, 61(3), 591-603.

Haney-Peritz, Janice. "Monumental Feminism and Literature's Ancestral House: Another Look at 'The Yellow Wallpaper'." *Short Story Criticism*, 62., 95-107.

Hobsbawm, E. J. (1990). *Nations and Nationalism Since 1780: Programme, Myth, Reality*. Cambridge University Press.

Hoffbrand, S., Howard, L. M., Crawley, E., & Lempp, H. (2021). Cognitive-behavioral therapy for postnatal women with distressing intrusive thoughts: A pilot study. *Archives of Women's Mental Health*, 24(1), 69-77.

Honour, H., & Fleming, J. (2009). *A World History of Art*. Laurence King Publishing.

Johnson, M. (2018). *Higher Education for Women in the United States, 1830–1920: Responding to Gender Inequality in a Modernizing Nation*. Johns Hopkins University Press.

Johnson, M. (2020). *Gender and the Long Nineteenth Century*. Bloomsbury Academic.

Kerber, L. K. (1980). Separate Spheres, Female Worlds, Woman's Place: The Rhetoric of Women's History. *The Journal of American History*, 67(1), 62-82.

Kessler-Harris, A. (1982). *Out to Work: A History of Wage-Earning Women in the United States*.

Ko, J. Y., Farr, S. L., Dietz, P. M., & Robbins, C. L. (2012). Depression and treatment among U.S. pregnant and nonpregnant women of reproductive age, 2005-2009. *Journal of Women's Health*, 21(8), 830-836.

Langan, R., Goodbred, A. (2020). Identification and Management of Peripartum Depression.

Lanser, Susan S. "Feminist Criticism, "The Yellow Wallpaper," and the Politics of Color in America." *Feminist Studies*, 15(3), 415.

Letourneau, N., et al. (2012). The course of postpartum depression: A review of longitudinal studies. *Harvard Review of Psychiatry*, 20(3), 143-153.

Misri, S., Reebye, P., Corral, M., Milis, L., & Beckman, K. (2004). The use of paroxetine and cognitive-behavioral therapy in postpartum depression and anxiety: A randomized controlled trial. *Journal of Clinical Psychiatry*, 65(9), 1236-1241.

Mokyr, J. (1999). *The British Industrial Revolution: An Economic Perspective*. Westview Press.

Moore, M. A., & Allen, K. (2017). *The University and Women's Education: Victorian and Contemporary Universities Compared*. Springer.

Murray, L., & Stein, A. (2019). The effects of postnatal depression on the infant. *Baillière's Clinical Obstetrics and Gynaecology*, 13(1), 215-232.

Murray, L., Halligan, S., Cooper, P., & Stein, A. (2011). Effects of postnatal depression on mother-infant interactions and child development. *Wiley Interdisciplinary Reviews: Cognitive Science*, 2(3), 345-357.

O'Hara, M. W., & Wisner, K. L. (2014). Perinatal mental illness: Definition, description and aetiology. *Best Practice & Research Clinical Obstetrics & Gynaecology*, 28(1), 3-12.

O'Hara, M. W., Swain, A. M. (1996). Rates and risk of postpartum depression - A meta-analysis.

Paulson, J. F., &

Plant, D. T., et al. (2015). Prenatal and postnatal maternal depression and child maltreatment: A longitudinal study. *Child Abuse & Neglect*, 49, 54-63.

Polanyi, K. (1944). *The Great Transformation: The Political and Economic Origins of Our Time*. Beacon Press.

Schmied, V., et al. (2013). Women's experiences and expectations of care in Australian maternity hospitals. *Women and Birth*, 26(4), e71-e76.

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

Shumaker, Conrad. "Too Terribly Good to Be Printed: Charlotte Gilman's 'The Yellow Wallpaper.'" *American Literature*, 57(4), 588-99.

Smith, A. (2019). *The Victorian Governess*. Routledge.

Smith, J. (2010). Exploring Postpartum Hysteria and Patriarchal Hegemony in 'The Yellow Wallpaper.' *Feminist Literature Journal*, 15(3), 45-62.

Smith-Rosenberg, C. (1975). The Female World of Love and Ritual: Relations between Women in Nineteenth-Century America. *Signs*, 1(1), 1-29.

Stanton, E. C. (1848). *Declaration of Sentiments and Resolutions*.

Stewart, D. E., et al. (2003). Postpartum Depression: Literature Review of Risk Factors and Interventions.

Thrailkill, Jane F. "Doctoring 'The Yellow Wallpaper.'" *ELH*, 69(2), 525-566.

Welter, B. (1966). The Cult of True Womanhood: 1820–1860. *American Quarterly*, 18(2), 151-174.

Wisner, K. L., et al. (2004). Onset Timing, Thoughts of Self-harm, and Diagnoses in Postpartum Women With Screen-Positive Depression Findings.

Wisner, K. L., et al. (2013). Postpartum depression: A major public health problem. *JAMA Psychiatry*, 70(3), 261-267.

# Appendix

## Summary Of The Story

« The Yellow Wallpaper » details the deterioration of a woman's mental health while she is on a « rest cure » on a rented summer country estate with her family. Her obsession with the yellow wallpaper in her bedroom marks her descent into psychosis from her depression throughout the story.

The narrator of « The Yellow Wallpaper » begins the story by discussing her move to a beautiful estate for the summer. Her husband, John, is also her doctor, and the move is meant in part to help the narrator overcome her « illness, » which she explains as nervous depression, or nervousness, following the birth of their baby. John's sister, Jennie, also lives with them and works as their housekeeper.

Though her husband believes she will get better with rest and by not worrying about anything, the narrator has an active imagination and likes to write. He discourages her wonder about the house, and dismisses her interests. She mentions her baby more than once, though there is a nurse that cares for the baby, and the narrator herself is too nervous to provide care.

The narrator and her husband move into a large room that has ugly, yellow wallpaper that the narrator criticizes. She asks her husband if they can change rooms and move downstairs, and he rejects her. The more she stays in the room, the more the narrator's fascination with the hideous wallpaper grows.

After hosting family for July 4th, the narrator expresses feeling even worse and more exhausted. She struggles to do daily activities, and her mental state is deteriorating, John encourages her to rest more, and the narrator hides her writing from him because he disapproves.

After hosting family for July 4th, the narrator expresses feeling even worse and more exhausted. She struggles to do daily activities, and her mental state is deteriorating, John encourages her to rest more, and the narrator hides her writing from him because he disapproves.

In the time between July 4th and their departure, the narrator is seemingly driven insane by the yellow wallpaper ; she sleeps all day and stays up all night to stare at it, believing that it comes alive, and the patterns change and move. Then, she begins to believe that there is a woman in the wallpaper who alters the patterns and is watching her.

A few weeks before their departure, John stays overnight in town and the narrator wants to sleep in the room by herself so she can stare at the wallpaper uninterrupted. She locks out Jennie and believes that she can see the woman in the wallpaper. John returns and frantically tries to be let in, and the narrator refuses ; John is able to enter the room and finds the narrator crawling on the floor. She claims that the woman in the wallpaper has finally exited, and John faints, much to her surprise.