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“The cracked pots of humanity”: Post-World War II American Literary Perspectives on
Psychiatric Treatment/Containment of Mental Disorders

Jennifer Chichester

A Thesis Submitted to the Graduate Faculty of

GRAND VALLEY STATE UNIVERSITY

in

Partial Fulfillment of the Requirements for the Degree of

Master of Arts in English

English Department

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2017

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Much Madness is divinest Sense -
To a discerning Eye -
Much Sense - the starkest Madness -
'Tis the Majority
In this, as all, prevail -
Assent - and you are sane -
Demur - you're straightway dangerous -
And handled with a Chain -

Emily Dickinson

Sometimes the appropriate response to reality is to go insane.

Philip K. Dick

Abstract

This thesis examines the ways in which characters in Shirley Jackson's *The Haunting of Hill House* and *The Bird's Nest*, Ken Kesey's *One Flew Over the Cuckoo's Nest*, and John Kennedy Toole's *A Confederacy of Dunces* grapple with the concept of "madness" on individual and societal levels. Each of these Post-World War II novels question whether "madness" is a social construct. Is the person mad, or is society? These three novels, written in an era when in-patient psychiatric care was losing its prominence as a method for treating those deemed insane, reflect the growing trend of deinstitutionalization in the 1950s and 60s, which was most fully realized as a movement in the 1980s and 90s. Infused within the works of Jackson, Kesey, and Toole are also sub-layers of perceptions of "madness." Relational disconnections – especially those between parents and their children and among significant others – create seeming disruptions in the characters' perceptions of reality and sanity (and the inverses of each). Also, differences in perceptions of gender and sexuality are prevalent throughout each novel, illustrating the power that hegemonic order has in defining and confining those who do not conform. Thirdly, socioeconomic status and race play vital roles in determining who gets trapped by what Kesey terms "the Combine" and who controls it, or at least thinks they control it. Finally, the uniting element of humor in each work demonstrates the importance of laughter in overcoming the repressive ideologies which seek to entrap the "mad." Despite the humor contained in these works, serious elements pervade as each novel ends with an "escape" – or, at least an attempt at such. However, for the real-life men and women who were either institutionalized or communally ostracized for their differences, there could never truly be an escape from the repressive confines of the society that labeled them as "mad" and, therefore, "other."

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Introduction

Henry David Thoreau writes in the concluding chapter of *Walden* that “[i]f a man does not keep pace with his companions, perhaps it is because he hears a different drummer” (290). This can certainly be said for writers and their characters, who sometimes seem inextricably intertwined, blurring the line between reality and fiction. In the aftermath of World War II, writers faced the idea of living in a reality where macrocosmic and microcosmic atrocities were difficult to understand and sanity was continuously being called into question on individual and social levels. Definitions of “madness” were in flux, and methods for treating it were evolving. Psychological theories were shifting between paradigms. While Freudian and Neo-Freudian psychoanalysis held their ground, behaviorism was being challenged by ideas grounded in social and cognitive learning. Psychology’s evolving language played a crucial role in the discourse on psychiatric treatment, often coming into conflict with behavioral modification, which had previously been a favored treatment method for individuals diagnosed with various disorders. As the following examination of fictional works by Shirley Jackson, Ken Kesey, and John Kennedy Toole demonstrates, “mad” individuals are confined to institutions and/or excluded from society.

Each of these authors exhibit, both in their stories and personal lives, questioning attitudes that reflect perceptions of psychiatry and treatment in the aftermath of World War II. Many American writers were struggling with deeply psychological issues also inextricably rooted in society; suicide and suicidal ideation were not unfamiliar to the literary landscape in the aftermath of World War II. Ernest Hemingway (whose father, brother, and sister also committed suicide) shot himself in 1961. Sylvia Plath attempted suicide several times before she put her head in an oven and turned the gas on in 1963 at the age of 30. Plath was previously prescribed electroshock therapy and insulin shock treatment; she had been institutionalized for

her depression and suicidal ideation. These are just a few of the many literary voices enmeshed in the quagmire of psychological theories and psychiatric treatments for “madness.” The three following authors and their novels stand as representations of the impact psychology and psychiatry had on popular culture and especially on creative individuals who faced their share of hurts, hang-ups, and hurdles throughout their lives. Their narratives and characters tend to mirror the simultaneously introspective and external observations on what “madness” means, what causes it, and whether it can or should be cured.

Synopses

1. *The Bird's Nest* by Shirley Jackson (1954)

The Bird's Nest is Shirley Jackson's foray into multiple personalities (now known as Dissociative Identity Disorder) and the controversial treatment method of hypnotherapy. Jackson flexes her psychological muscles by guiding the reader through one young woman's descent into mental illness. Elizabeth Richmond is a 24-year-old museum employee with an outwardly bland personality. Elizabeth works at a mundane job where she types correspondence for the museum then goes home to her domineering and patronizing Aunt Morgen. Aunt Morgen is a middle-aged "old maid" who harbors bitter resentment toward Elizabeth's deceased mother, who married a man Aunt Morgen was romantically interested in.

Elizabeth is, at first, extremely hesitant to undergo any sort of therapy with Dr. Wright. She is exceedingly shy and reluctant to express herself to anyone under any circumstances, yet her life is spiraling out-of-control. Elizabeth finds a series of threatening notes scrawled in handwriting she does not recognize. Elizabeth experiences severe headaches. Dr. Wright learns the cause for these headaches when he puts Elizabeth under hypnosis. A second personality, sweet and polite Beth, emerges and strikes up a friendship with Dr. Wright. However, a third personality soon breaks through, and she is anything but sweet and polite. Betsy is taunting and calculating, albeit childish. After Betsy runs away from home, a fourth personality, Bess, also surfaces.

All four personalities (Elizabeth, Beth, Betsy, and Bess) are caught in a push-and-pull struggle between the overbearing Aunt Morgen and Dr. Wright, who, as Ben Larned writes, "fancies himself a hero in charge of salvaging [Elizabeth's] honor" (Larned par. 3). When Betsy runs away to New York to look for her mother, the other personalities are forced to tag along.

Betsy craves privacy and freedom. She perceives herself to be 16 years old but carries herself with a careful awareness of her surroundings. However, Betsy often drifts inside her mind, telling herself stories about her memories, especially those involving her long-dead mother (whom Betsy believes to be alive). The fourth personality, Bess, is “suspended in time, believing her mother’s death to have taken place just three weeks ago” (Coates par. 3). Bess is cruel and malicious, emerging when Betsy is by herself in the city. While Betsy tries to be as stealthy in her escape as possible, she is “quickly found and returned, exposed to suspicion by the conflicts of her warring personalities” (Ruthnum par. 5). Arguably, the war between the personalities can be seen as the result of Dr. Wright’s use of hypnotherapy on Elizabeth and his preference for Beth over the other personalities.

One of the most startling aspects of the novel is that, when Elizabeth and her personalities return from New York, she is once again under the control of Aunt Morgen and Doctor Wright. Neither Aunt Morgen nor Doctor Wright help Elizabeth (or her other personalities) get better. Aunt Morgen and Dr. Wright try to eliminate the unpleasant personalities of Bess and Betsy – and possibly even Elizabeth – and turn Elizabeth into Beth, the charming, sweet, and kind girl Dr. Wright privileges over the others. The result of this attempted expulsion is yet another split, a deeply and perhaps irreversibly traumatized aspect of Elizabeth that is only partially present. A young woman in need of positive, helpful psychiatric care instead ends up under the control of two domineering people. Aunt Morgen and Dr. Wright exert power over Elizabeth and, like some psychiatric practitioners in real life, only seek to create their ideal version of Elizabeth, who is never truly able to just be herself.

2. *The Haunting of Hill House* by Shirley Jackson (1959)

Shirley Jackson's *The Haunting of Hill House* has, since its inception, been regarded as "one of the greatest horror novels of all time" (Oppenheimer 227). It is more than a mere tale of a haunted house; it is a tale of haunted people. Written toward the end of Jackson's career (and, ultimately, shortened life), *The Haunting of Hill House* is Jackson's major foray into the psychological aspect of living within the confines of a haunted house. As Judith Oppenheimer writes, Jackson cracks wide open the question of whether "the ghostly effects [witnessed by characters in the novel and by its readers] are caused by the house itself or by the unconscious workings of Eleanor's [the main character] mind or by some strange combination of the two" (227). Is reality as we experience it? If not, does that make one insane, or is it reality that is not sane?

The inspiration for *The Haunting of Hill House* came in part from Jackson's own familial history as well as from a decrepit, abandoned home she saw while on vacation in New York City that rattled Jackson's nerves. It was "so disagreeable that [she] could not stop looking at it; it was tall and black, and as [she] looked at it when the train began to move again it faded away and disappeared" (Oates 822). In an unpublished talk dating from about 1959 that has often served as a preface to the novel, Jackson states that "fiction comes from experience" (823). Jackson wrote to a friend who worked at Columbia University, who confirmed that it was a reputedly haunted home that had burned down seven months prior, killing nine occupants in the process. Jackson, who, despite her belief in them, never wished to actually see ghosts, began sifting through images of old homes to gain inspiration for what would become Hill House. After looking through "newspapers, magazines, and books for pictures of suitably haunted-looking houses," Jackson found one image that particularly struck her fancy (Friedman 121). Jackson contacted her mother, and Geraldine Jackson confirmed that this was the same house built by Shirley

Jackson's great-grandfather, John Stephenson Bugbee; it then stood derelict and unwanted until it, too, burned down (although this one was reportedly burned down by the townspeople). These superstitious elements tie in with Jackson's profound interest in the possibility of the paranormal and how skeptics and believers alike have tried to document it. As a practice, paranormal investigation is considered a pseudo-science positioned below that of mainstream psychology, yet, as we see in the novel, the potential existence of the supernatural or of extra-sensory abilities in humans is something that breaks down borders between reality and fantasy, sanity and insanity. Even Jackson herself reports in her discussion that, one morning, not long after she learned about the home built by Bugbee, she awoke to find a sheet of paper with "DEAD DEAD" written on it in her own handwriting (Oates 824). This is the moment in which *The Haunting of Hill House* and its ghosts truly came to life.

The novel introduces us to Dr. John Montague, an anthropologist with a penchant for researching the paranormal – something which, to this day, is heavily frowned upon and is not considered a scientific endeavor by the academic community. Montague's objective in this case is to determine if Hill House is haunted. Montague's technique for gathering evidence is "derived from the methods of the intrepid nineteenth-century ghost hunters" who spent extensive amounts of time in reportedly-haunted locations with psychics and research assistants (1). Montague seeks out his assistants by sifting through data on individuals who have experienced some sort of psychic phenomena. Montague ends up recruiting only two: Eleanor Vance and Theodora. His other addition to the group is Luke Sanderson, the young and somewhat reluctant heir to Hill House, which is currently owned by his aunt and cared for by the Dudleys, an elderly couple who live in town and will not stay in Hill House after dark. Later in the novel, the group is joined by Mrs. Montague – who claims to have a connection with the spiritual world – and her

manly-man companion, Arthur, who both function as foils to Dr. Montague as well as caricatures of traditionally gendered parental roles.

From the beginning, the book's leading lady, Eleanor Vance, operates along the borders separating reality from fantasy and sanity from insanity. She is besieged by conflicting feelings of guilt and relief over the death of her demanding mother and wishes to strike out on her own despite never having truly been independent. At the invitation of Dr. Montague, Eleanor arrives at Hill House thinking about the possibility of finally experiencing autonomy. On her way to the house, Eleanor conjures up fantasies of living her own solitary but peaceful version of the American dream. As events escalate within Hill House, Eleanor finds herself ensnared within its physical and mental confines, putting her back into a situation like the one she had been so desperate to leave at home with her unsympathetic and uncaring family. On one hand, Eleanor can freely develop relationships with the co-inhabitants of Hill House, especially with bohemian artist (and potential lesbian, though this is never explicitly stated) Theodora. On the other hand, however, Eleanor develops a relationship with the house. In this relationship, Hill House possesses Eleanor, something which she is unwilling and/or unable to fight against.

As a psychologically-deep tale of the paranormal, *The Haunting of Hill House* is, as Laura Miller writes in the "Introduction" to the Penguin Classics edition, "as much about the puzzle of identity as it is about madness" (x). Miller asserts that Eleanor "doesn't start out mad" but, as time continues within Hill House, Eleanor becomes horrified by the reality that she cannot escape. This drives her to commit suicide by driving her car – her sole chance and representation of freedom – into a tree. Miller writes that Eleanor's crash is also a collision with "absolute reality" (xvii). The other characters in the novel – namely, Dr. Montague, Theodora, and Luke (who reluctantly stands to inherit Hill House) – bid solemn good-byes to Eleanor, who

has become a liability to the group. Eleanor thinks to herself that she does not want to leave Hill House. Eleanor feels that the rest of the group is trying to push her out and that “Hill House belongs to [her]” (Jackson 181). In her final moments, Eleanor feels a sense of autonomy as she speeds up in her car, yet her final thoughts are regarding the group: “*Why am I doing this? Why am I doing this? Why don’t they stop me?*” (182). Even in her last few seconds of life, Eleanor cannot escape reality and gain true autonomy. It is not she who possesses Hill House, as the reader finds out in the concluding paragraph; it is Hill House that now fully possesses Eleanor.

3. *One Flew Over the Cuckoo’s Nest* by Ken Kesey (1963)

Ken Kesey’s *One Flew Over the Cuckoo’s Nest* is a novel that emphasizes how society is insane and that it drives individuals into what society sees as acts of madness. There is no doubt that Kesey’s own experiences play a significant role in the inspiration to pen the novel. As a graduate student at Stanford University, Kesey met psychology student Vik Lovell, who “told him about experiments with ‘psychomimetic’ drugs at the Veteran’s Hospital in Menlo Park” (Tepa Lupack 64). Kesey began working there as a night aide and volunteered to take part in the CIA-funded Project MK-ULTRA, which tested the impact of psychoactive drugs on humans. As Tepa Lupack quotes, Kesey states in his essay “Who Flew Over What?” that he agreed to the experiments “[l]ong as it’s for the U S of A” (65). Kesey biographer Rick Dodgson describes how the testing rooms that overlooked the hospital’s psychiatric ward were “[t]ypically white and sanitized,” with perpetually locked doors that kept test subjects from “mingling with the people on the ward” (114). The test subjects were often looking for a type of spiritual enlightenment, which directly countered the scientific data-gathering methodology of the hospital’s administration. As a volunteer, Kesey was given numerous types of drugs, ranging from LSD-25 to MP-14, also known as Thioridazine hydrochloride, a drug used to treat

schizophrenia. As a part of the experiment, volunteers were given tape recorders to record their reactions to the drugs. At one point, Kesey reported that “the tape recorder [was] a great toad and the microphone [was] an electric shaver” (117). In Kesey’s words, this vision was a “most insane thing” that led him to “question things that you ordinarily don’t question.” Reactions such as this experienced by volunteers are the foundation for the psychedelics used in the late 1960s. The concreteness and sterility of reality were being challenged in a new and unanticipated way.

Since he worked as a night aide, Kesey communicated with patients, some of whom were under the influence of the same drugs which MK-ULTRA had used to experiment on him. In speaking with these people, Kesey, as Randal P. McMurphy does in the novel, came to view these individuals as not, in fact, being insane; instead, he saw that they were repressed by the society that deemed them “mad.” Told through the narrative voice of the long-institutionalized Chief Bromden, the novel begins when McMurphy, a Korean War veteran, enters the hospital after being found guilty of statutory rape, battery, and illegal gambling. Instead of serving a prison stint, McMurphy has himself declared insane, thereby gaining admittance to the mental institution. Instead of finding a more comfortable place to live than a prison cell, he enters into what Chief calls “the Combine.” This Combine is headed by Nurse Ratched, a domineering woman whose male patients tend to submit to her will due to their profound fear of her. Chief Bromden states that Nurse Ratched “walks stiff” even though she “swells till her back’s splitting out the white uniform” she wears (10-11). Her uniform reflects the pristine surface of the ward; the rooms are even shadow-free at six-thirty in the morning. This immaculate façade represses the men confined to the ward. Chief has chosen to remain silent because he fears the repercussions (e.g., electroshock therapy) for speaking out against those who run the Combine, citing that he has “been silent so long now it’s gonna roar out of [him] like floodwater” (13). The

medications Chief is forced to take every day keep him in a mental fog and, ultimately, disempowered state of existence – that is, until Randal P. McMurphy arrives. McMurphy questions the ways of the Combine and challenges Nurse Ratched, establishing himself as a beacon of power at the onset. It is only when fellow patient Charles Cheswick deliberately drowns himself that McMurphy starts to sense the hopelessness and repression the other men feel. Still, McMurphy struggles against Nurse Ratched’s rigid regime by trying to get her to let the men on the ward watch the World Series on television and by escaping for a day of fishing.

The novel’s climax occurs when, after having experienced electroshock therapy for himself, McMurphy organizes a nighttime romp on the ward with two prostitutes. McMurphy’s main objective is to get one of the prostitutes to have sexual intercourse with the youngest and most socially-inhibited man on the ward, Billy Bibbit, whose mother is good friends with Nurse Ratched. The next morning, much to her horror, Nurse Ratched discovers what has happened. Chief describes how Nurse Ratched’s “enamel-and-plastic face was caving in” as she annihilates Billy’s last shred of pride by telling him that his mother will be devastated when Nurse Ratched informs her of what transpired (263). A distraught Billy commits suicide, prompting McMurphy to attack Nurse Ratched. McMurphy nearly strangles her to death and exposes her large breasts – which she constantly tries to hide out of shame – in the process. Ultimately, McMurphy is given a lobotomy, thereby putting him into a subdued (some might say “vegetative”) state. Chief’s final act of defiance is also an act of freedom. Chief suffocates McMurphy with a pillow then breaks a window and starts running – or, in Chief’s words, “flying” – away from the hospital and the Combine (272). Chief, now enabled through McMurphy’s life and death, takes hold of his personal agency and escapes the repressive bonds of “madness.”

4. *A Confederacy of Dunces* by John Kennedy Toole (1980)

John Kennedy Toole's *A Confederacy of Dunces* would never have been published had his mother, Thelma Toole, not been persistent in getting her deceased son's work into the hands of writer and instructor Walker Percy, who "found it a brilliant novel and facilitated its publication" by Louisiana State University Press in 1980 (MacLauchlin xi). In 1981, the novel won the Pulitzer Prize for Fiction – twelve years after the suicide of its author, who had experienced rejection from publishers prior to his death. The novel, which paints a vivid image of New Orleans in the early 1960's, is now regarded as an American cult classic. The story of its creation and creator provide a startling parallel to characters and themes developed throughout the novel.

Toole was born to John and Thelma Toole in 1937 "at a time when New Orleans was making great strides in its efforts to reinvent itself" (MacLauchlin 9). New Orleans was a patchwork city, rich with history and obvious repression, especially of African-Americans. As a child, Toole learned firsthand what it felt like to be labeled "other," as he was made fun of for his weight, something that he was "self-conscious about... his entire life" (16). What is known of Toole's early years comes from Thelma, who believed her son to be the posterchild for perfection; she took great pride in his accomplishments. Thelma Toole was a controlling mother, even choosing her young son's friends. Throughout his academic career, Toole was a high achiever. His military service was much of the same, although his time at Fort Buchanan in Puerto Rico was decisively marked by strong attention paid to human behavior. When Toole did not reproach homosexual soldiers for being rowdy, and, furthermore, when Toole did not call for help in a timely fashion for a gay instructor who had attempted suicide by medication overdose, he lost the respect of other soldiers. He withdrew into his work on *A Confederacy of Dunces*.

While writing the novel, Toole began to behave and speak like his main character, Ignatius J. Reilly, who continuously offers scathing commentary on other characters he encounters throughout the narrative. Toole seems to have felt that the novel would be a failure while he was still writing it even though, like Ignatius to an extent, Toole embodies the role of a “self-marginalized intellectual” (MacLauchlin 200). As a social misfit whose writings were not well understood in his time, Toole’s career and life were cut short on March 26, 1969 when the 31-year-old connected a garden hose to the exhaust pipe of his car and ran it through the window. Although there are many factors that could have contributed to Toole committing suicide, the treatment he might have received at the time was a “grim prospect” (205). As MacLauchlin notes, treatment was basically confinement, and other twentieth century American writers viewed suicide as an alternative to institutionalization. MacLauchlin writes that, “[h]ad Toole’s illness been delayed a few more years, he might have had the benefit of advances in drug therapy and humanitarian laws implemented within the field of mental health.” Toole’s fate was ultimately different than that of Ignatius Reilly’s, although both escape from a deeper, more profound type of confinement that is socially-based (and inherently familial at the microcosmic level). Eccentric geniuses must flee from confinement or else risk having their ideas imprisoned and ambitions caged.

The book’s title alludes to a quote from Jonathan Swift’s essay, “Thoughts on Various Subjects, Moral and Diverting”: “When a true genius appears in the world, you may know him by this sign, that the dunces are all in confederacy against him.” The “true genius” of this novel is Ignatius J. Reilly, a self-styled mixture of Don Quixote and Boethius, eclectic and somewhat delusional, at least by society’s standards. Reilly is a thirty-year-old man living at home with his widowed mother, Irene, who, at first, is highly subservient to her son’s demands. Ignatius does

not have much of a social life and is not exactly fond of having to work regular wage-paying jobs, though he does haphazardly pick up a few odd jobs throughout the novel. Ignatius tends to stretch the truth or exaggerate his speech in attempts to garner pity from others. The only character who somewhat sympathizes with Ignatius is “the minx” Myrna Minkoff, his friendly rival since their college days. A feminist who is in touch with her sexuality, Myrna often counters Ignatius and does not believe many of the wild stories he tells her. Myrna isn’t a complete foil for Ignatius; it is Myrna who, in the end, saves Ignatius from being institutionalized in Charity Hospital by his mother, who has become tired of dealing with his seemingly abnormal antics. By this point, Ignatius has worked in a pants-making factory where he tried to stage a rebellion and as a hot dog vendor (although he mostly ate the merchandise). He has also been quite hilariously attacked by a parrot in a strip club. After all this chaos, and with the threat of institutionalization looming on the horizon, Ignatius finally realizes that he must overcome his fear of leaving New Orleans. He and Myrna take off in her car as the Charity Hospital ambulance pulls up to his mother’s house to do Irene Reilly’s bidding and take Ignatius away.

Throughout the course of the story, Ignatius interacts with many other colorful characters (or, perhaps more appropriately, caricatures) in New Orleans. Among these individuals are: Burma Jones, a black man whose eyes are hidden behind funky sunglasses and who works a menial job at the Night of Joy, a club owned by the “Nazi Propertess” (as Ignatius calls her) Lana Lee; Darlene, an aspiring exotic dancer whose parrot attacks Ignatius; George, a good-looking teenager who is involved in Lana Lee’s secret pornography ring; Gus Levy, the disinterested owner of Levy Pants whose wife is even more materialistic than he is; Miss Trixie, a senile elderly employee of Levy Pants who only wants an Easter ham and retirement; Officer

Angelo Mancuso, a bottom-of-the-barrel but hard-working policeman who tries to arrest Ignatius but is punished by his sergeant, who forces him to wear a new ridiculous costume every day; Santa Battaglia, Mancuso's outspoken aunt who befriends Irene Reilly and convinces her to have Ignatius institutionalized; and Claude Robichaux, a senior who is certain that communists are overtaking America and becomes romantically attached to Mrs. Reilly. All of these individuals are weaved together (often haphazardly) through their connection to Ignatius, who, in spite of being rather socially inept, is a catalyst for action throughout the novel. Each character, as a caricature, adds an element of humor to the repressive social structure they operate within, thereby crafting New Orleans as a type of institution that houses these vivacious social misfits. Ignatius's escape in the end of the novel, therefore, is not just from a tangible institution; Ignatius escapes from the social institution of New Orleans and the inmates who run that asylum.

Chapter I: A Modern History of American Madness

Concepts of madness have persisted and changed over time. John Haslam writes in his 1809 work *Observations on Madness* that “[t]here is no word in the English language more deserving of a precise definition than madness” but that “the term which represents the thing is obscure” (1-2). Haslam cites Samuel Johnson’s dictionary definition of “madness” as an originally Gothic term meaning “anger” or “rage” (3). Haslam connects the two connotations of “mad” (the first being “angry” and the second being “insane”) and argues that madness is “not a complex idea... but a complex term for all the forms and varieties of this disease” (4). In Haslam’s opinion, one completely solid, unchanging definition of the term cannot be found because “[t]he language, which characterizes mind and its operations, has been borrowed from external objects; for mind has no language peculiar to itself” (9). This early nineteenth century evaluation of the sociolinguistic associations of madness and mental illness reveals a continuous divide in the ways in which human beings have viewed and treated those labeled as “mad” or “mentally ill.” This divide persisted well into the twentieth century when authors invoked some Gothic “rage” over the treatment of the “insane.”

When Haslam was working on his theories and methodologies in the early 1800s, there was not a broad lexicon ascribed to differently-functioning individuals. Insanity was categorically recognized as either “Mania” or “Melancholia” even though “formerly its distributions were more numerous” (19). A concrete, universally agreed-upon system or set of guidelines for diagnosing and treating individuals with “Mania” or “Melancholia” did not exist until the creation of the first *Diagnostic and Statistical Manual of Mental Disorders* (DSM) in 1952. Physicians like Haslam were the foremost authorities on madness and its treatments, and madness was generally treated as a physical malady. Many practitioners and everyday citizens

labored under the impression that these illnesses resulted from paranormal or supernatural sources – chiefly, that the devil and/or demonic entities could enter living human bodies and bring about behaviors witnessed in those deemed “insane.”

In the American colonies, madness was “not much of a medical problem... [but] an impermanent condition” brought about by divine providence (de Young 65). Communities saw confinement as a solution to issues posed by those deemed mad. Jails, almshouses, and workhouses were used to house the insane but only as a last resort. For the most part, those deemed insane could freely wander their communities as town eccentrics. However, at the height of the Salem Witch Trials in 1692 and 1693, what might have been diagnosable disorders were perhaps erroneously attributed to demonic possession and witchcraft. The entrance of the devil into a human body, it was viewed, would drive a person mad.

Eventually, Americans saw the need to adopt the idea of the asylum, which had long been used throughout Europe. On May 11, 1751, Benjamin Franklin and Dr. Thomas Bond founded Pennsylvania Hospital, the first American hospital to house the mad. It was believed that institutionalized care would yield cures for insanity. However, according to Mary de Young, it should be noted that “there was little evidence of that [Enlightenment-based] optimism in the care of the mad at the Pennsylvania Hospital” (79). Ethical, humane treatment gained ground, starting in Europe with William Tuke’s York Retreat, which provided moral treatment for Quakers (82). Moral treatment meant using as little physical restraint as possible on patients and having staff use gentle speech and gestures toward patients. Americans who visited York Retreat could witness treatments that led to the releasing of “both the acutely and chronically mad to the community.” Based on this model, American asylums were founded on the premises of moral treatment, including The Friends Asylum to the north of Philadelphia, the McLean Asylum for

the Insane in Massachusetts, the Bloomingdale Asylum in New York City, and the Hartford Retreat in Connecticut (83).

Moral treatment, however, soon fell victim to the rise of industrialization and its resulting emphasis on medicating the “insane.” Mary de Young writes that:

[a]s people, by necessity, began assuming active roles in what was becoming an increasingly industrialized society, transforming the raw materials of nature into functional or consumable goods, and competing with each other for jobs, wealth and status, they experienced a shift in worldview. They developed a growing appreciation of the individual capacity for purposive activity and self-determination, and the individual need for self-restraint and self-discipline in a rapidly changing society that offered opportunities and temptations in equal measure. No longer seen as the hapless victim of fate or nature, or the subject of a mysterious God or a menacing devil, the individual was now looked upon as the manager of his or her own destiny, capable not just of charting a course, but of learning, adapting, changing, and coping with anything that interfered with the journey. (84)

The individual, therefore, was expected to exert control over thoughts and behaviors. The inability to do so was viewed as an illness that prevented individuals from actualizing their full potential. Treatment of madness was geared at turning patients into “productive citizens” (85). But who was truly responsible for providing this treatment?

According to noted American physician and hospital superintendent Thomas Story Kirkbride, the state was responsible for the care of its insane. He created the Kirkbride Plan to provide a structured setting for patients in which they were encouraged to work, get exercise, participate in organized games, experience music and the arts, and overall have positive

interactions with staff and other patients. Improved behavior resulted in better ward placements. Structure did not begin and end with patients' daily routines; the architecture of Kirkbride's buildings reflected the need for regime. Buildings were constructed along a linear plan where administration buildings were flanked on either side by male and female wards. These structures extended outward like batwings when viewed from above. Lower floors were reserved for high-behavior patients while upper floors were given to patients who did not exhibit threatening behavior. The buildings were supposed to bring comfort and cheer, yet it is doubtful that many experienced a plethora of positive emotions while confined to any of these asylums. These patients, as well as the eccentric individuals roaming more freely throughout their communities, were still subjected to definitions of madness which were, well into the twentieth century, in a state of flux.

1. Definitions of madness

In a study on twentieth century diagnoses of institutionalized patients at Santa Maria della Pieta in Rome, researchers have found that, similarly to patients admitted to American and other European institutions, proper psychiatric and physical care was severely lacking and potentially led to misdiagnoses and permanent confinement. Throughout the twentieth century

proper diagnostic tools were limited, and patients who had received a diagnosis were rarely re-evaluated during their stay in the hospital. They continued their lifelong career with no chance of a different treatment or a different approach when more knowledge about diagnostic criteria and psychiatric illness was available. (Tatarelli, Serafini, Innamorti, Lester, Girardi, and Pompili 141)

Treatments for psychological disorders ranged from hydrotherapy (i.e., a very cold and forced bath) to electroshock therapy, insulin-coma therapy to prefrontal (or “icepick”) lobotomies. Psychotherapy, group therapy, and medications became more prevalent by the 1950s and 1960s, though “madness” was still something that could land one in an institution. With the publication of the first *DSM* in 1952, “the very notion of madness” was challenged, and “diagnoses [began to] disappear from one edition [of the *DSM*] to the next” (de Young 9). As treatments for “madness” tried to establish a greater sense of order, reality was becoming less static and more chaotic, especially for anyone who did not fit into society’s cookie-cutter pattern.

In the first half of the twentieth century, definitions of madness continued to fluctuate. Schizophrenia and other disorders were thought to originate in the gut, as this was a period during which “psychiatry struggled to enhance its status in medicine and moor itself to medical science” (de Young 31). In fact, the term “schizophrenia” was coined in 1908 by Swiss psychiatrist Paul Eugen Bleuler and was originally used to describe the different functions of memory, perception, personality, and cognition. Prior to Bleuler’s coinage, schizophrenia was diagnosed as “dementia praecox,” which translates into English as “precocious madness” or “premature dementia” and was a deteriorating condition in which young adults slowly degenerated into chronic, disassociated madness.¹ For the most part, those who were admitted to institutions for treatment did not want to be associated with these categorizations of madness and, at least at first, would engage in what Mary de Young calls “role-distancing” behaviors, such as avoiding social contact, falsifying their identities, or flat-out denying any form of madness, a trend that seems to persist in contemporary treatment settings as well as in general

¹ Over the past century, schizophrenia was divided into multiple sub-categories based on correlational symptoms. Today, in the *DSM-5*, schizophrenia is recognized as a spectrum of diagnoses as opposed to a one-size-fits-all categorization.

society (137). The instability of definitions and unwillingness of the labeled to conform to their categorizations leads directly into the question of whether “madness” is nothing more than a social construct intentionally or unintentionally designed to privilege one group and oppress another.

French philosopher and theorist Michel Foucault wrote in his 1954 book *Madness: The Invention of an Idea* that “illness, whether mental or organic, is regarded as a natural essence manifested by specific symptoms” and that “the problem of human unity and of psychosomatic totality remains entirely open” (11). Foucault’s theory provokes the question of what happens to the individual who gets caught up in social constructs of “madness.” In the 1950’s, American society recognized certain attitudes and behaviors as mental disorders, whereas, in other cultures around the world, they might not be seen as “mad.” Someone experiencing visual delusions in America might, “in another country, have been a visionary mystic and a worker of miracles” (100). Foucault claims that, historically, Western understanding of madness “was wide in extension” but lacked medical foundation, and the extension “varies from period to period... it may remain implicit... or, on the contrary, it may surface, emerge fully, and become integrated without difficulty into the whole cultural landscape” (110). Definitions had never been stable, but, in the 1900’s, the drive to establish boundaries for defining and describing symptoms of mental illnesses reached its peak in the newly-industrialized Western world.

By the time Dr. Thomas Szasz published *Ideology and Insanity* in 1970, cognitive psychology had gained popularity in the aftermath of World War II, technological developments, and criticism of behaviorism. In his work, Szasz challenges the concept that mental illness is “a deformity of the personality” and, therefore, “the cause of human disharmony” (14). Instead, Szasz argues that diagnoses of mental disorders are “a kind of psychiatric propaganda” in that

“their aim is to create in the popular mind a confident belief that mental illness is some sort of disease entity, like an infection or a malignancy” (19). Psychotherapy, Szasz claims, polarizes people into two separate categories: mentally healthy or mentally ill. The goal of psychotherapy is to make the mentally ill the mentally healthy. Yet, as Szasz asserts, this belief in “the myth of mental illness” is to our detriment (23). Mental illness is, therefore, a construct that results in the privileging of the “normal” over the “abnormal.” Szasz powerfully asserts that “[o]ur adversaries are not demons, witches, fate, or mental illnesses. We have no enemy that we can fight, exorcise, or dispel by ‘cure.’ What we do have are problems in living – whether these be biologic, economic, political, or sociopsychological” (23-24). In other words, what we are really dealing with is the chaos of living in a highly-industrialized, fast-paced, needing-to-define-things-in-order-to-understand-them world. Psychology and psychiatry operate within the borders of this society, as they “reflect and promote the primary moral values of the community” (27). The mental health care system has historically aligned itself with the needs and ideals of the community, not of the individual. People with diagnoses – especially those who are involuntarily confined to psychiatric hospitals and wards – are defined as such by their communities: family members, friends, significant others, employers, co-workers, and even the police categorize “mad” or “mentally ill” individuals based on social perceptions of acting in accordance with or defying certain norms.

2. The rise of American institutionalization

Mary de Young writes that “[t]he history of madness is the history of the asylum” and “also the history of psychiatry as a specialty” (3). Thomas Szasz adds that “psychiatry has accepted the job of warehousing society’s undesirables” (83). This lengthy paradigm in America stems back to the developing colonies when, in accordance with “the English poor laws of 1597 and 1601,

community leaders could... place the deranged person in the local workhouse” (Braden Johnson 5). By 1751, England’s influence on psychiatric care in America became even more obvious with the construction of the first public hospital, located in Philadelphia. It was modeled on Bethlehem Hospital (better known as Bedlam), located to the south of London. Treatment, however, was often cruel and unhelpful, as patients at Bedlam were chained, bled, and ultimately subjected to public scrutiny via paid tours for citizens. Treatment in American institutions was initially focused on providing “moral treatment.” Despite the good intentions of authority figures, managing chronic cases was difficult. Instead of rewarding positive behaviors, negative behaviors were punished using physical restraint. Hospital staff were not trained in how to deescalate intense psychological and physical situations. When it became obvious that the system was failing to produce positive results and help cure madness, various attempts were made over time to try to reform treatment at state-run facilities.

One such attempt was made by Dorothea Dix, a school teacher, who learned of the York Retreat in England due to a connection with the grandson of its founder (de Young 93). Informed of the tenets of moral treatment, Dix began investigating ethics and practices in American institutions. Dix was appalled by her findings, which prompted her to begin campaigning for Congress to grant “states the right to sell millions of acres of federal land, with the proceeds to be used exclusively for the care of the indigent mad” (94). Although Dix experienced some success, her intended changes to treatment were not universal. Mary de Young cites Hiawatha Asylum for Insane Indians as an example of the persistence of mistreatment of patients. Designed as, in the words of Superintendent Oscar Gifford, “a refuge for all kinds of defectives,” Hiawatha originally followed the code for moral treatment: regular sleep schedules, hot baths, outdoor recreation, and vegetarian meals (Walker par. 22). However, patients were prohibited

from having family members come to visit. They also were not allowed to dance, although they were permitted to play cards, board games, and baseball. Those who were able, were put to work in the asylum. Less cooperative patients were put into physical restraints, such as shackles and straightjackets, or were locked inside their tiny rooms. Potassium bromide was a popular treatment among the doctors at Hiawatha; it “accumulates as a toxin in the body, so the routine dose of 3 to 5 grams induced neurological disorders, gastrointestinal problems, irritability, hallucinations, delirium, and lethargy,” making patients appear even more mentally unstable than they were already thought to be (par. 28). While these kinds of methods were not unique to Hiawatha, the fact that this was the first federally-funded American institution for the housing of one ethnic group cannot be overlooked, and its approach to moral treatment was not, in fact, very “moral.” The same rings true for many institutions, and these issues persisted well into the middle of the twentieth century.

Outside the confines of the institution in the early 1900s, community-based groups came together to shed light on the atrocities happening in mental hospitals and to find new, more constructive ways of dealing with individuals with diagnosable disorders. For example, Mental Health America (MHA) was founded in 1909 by a former psychiatric hospital patient, Clifford W. Beers, alongside renowned philosopher and psychologist William James and psychiatrist Adolf Meyer (“Mental Health America”). By the 1920s, MHA had drafted laws for committing individuals, which were adopted as policies by several states. In the 1930’s, MHA led the First International Congress on Mental Hygiene in Washington, D.C. with more than 3,000 individuals representing 41 countries. In true symbolic form, in 1953, MHA commissioned an artist to cast a Mental Health Bell made from restraints formerly used on patients in psychiatric hospitals, signifying a persistent desire for more humane treatment of patients. For some, though,

“more humane” meant experimenting with medications which may or may not be effective in treating symptoms of mental disorders.

At the peak of American institutionalization in the twentieth century, there was a noticeable change in treatment methods that led to an increased reliance on medications, which were new and experimental in nature, to control patients’ behaviors. Angelina Szot, a former nurse at Danvers State Hospital² in Massachusetts writes in her memoir that much of the staff’s time was devoted to trying to control patients. Szot states that:

Before the introduction of tranquilizers, patients were locked in rooms when their behavior got too much for the staff to handle. Control through medication did not start coming into use at Danvers until the 1950’s. New drugs were tried out on patients. Sometimes a patient would have the opposite reaction to a drug than what was expected. A tranquilizer could actually make a patient hyperactive. (84)

Although treatment methods like lobotomies were still utilized, those trends faded as medication and counseling gained prominence. However, as Szot highlights, psychiatric nurses in the 1950’s provided little more than basic medical care since “[h]ope was never really part of the treatment” (81). Ideological changes were happening, and the post-World War II era saw a shift in focus on how to define and treat mental disorders aside from just shutting people away in dimly-lit, locked rooms with little hope of ever leaving these asylums.

3. The world at war, the war in the mind

² This massive Kirkbridge building was built in 1874 atop a hill where John Hathorne, famed Salem Witch Trials judge and ancestor of author Nathaniel Hawthorne, once lived.

The 1930s and 40s were times of tumultuous upheaval throughout the world. America, unable to remain isolated from the war after the Japanese bombing of Pearl Harbor in 1941, underwent vast changes on the home-front. As Barbara Tera Lupack writes, America's forced involvement in the war "implicated Americans in the mounting disorders of the modern world and forced them to enter the historical mainstream" (8). America was entering a time of unparalleled unrest and uncertainty. Technology, crafted by the ingenuity of human minds and hands, was a powerful tool capable of immense good and terrible destruction. The horrific revelation of the truth behind Nazi concentration camps, followed by growing tensions with the Soviet Union and the resulting McCarthy-ist witch-hunt for the Red Menace on American soil, resulted in what Tera Lupack refers to as "homogenization of American culture and thought," adding that "the measure of normalcy became the white, middle-class, suburban society of more or less contented consumers who suffered, if at all, from the spiritual malaise of too much consumption" (10). This drive for cultural homogeneity ostracized those who did not fit this cookie-cutter mold. Anyone deemed eccentric or insane could never truly be considered part of the status quo, even though there was a growing social awareness of mental illness in lieu of World War II.

In 1945, at the end of the Second World War, mind-boggling statistics regarding army soldiers' admission rates to psychiatric care facilities (45 per 1,000 troops, the equivalent of six percent of total admissions) prompted military psychiatrists to seek scientific "answers to its questions about the evident increase in psychopathology among draftees" (Braden Johnson 21). The American dream had turned into an American nightmare in wartime and during post-war fallout. With admission rates skyrocketing, psychiatrists were desperate to "cure" as many patients as possible. In the late 1930's and early 1940's, shock therapy immigrated with

European psychiatrists to American soil. One of the most popular methods of shock therapy was Electroconvulsive Therapy (ECT, also referred to as Electroshock Therapy). Invented by Lucino Bini and Ugo Cerletti in 1938 at the University of Rome, ECT rose to popularity in America in 1943 (Wright 68, 72). ECT was initially used to treat schizophrenia but was also used to treat severe cases of depression, mania, and “shock the gay away” from homosexuals. High-profile Americans like authors Ernest Hemingway and Sylvia Plath underwent ECT. As promising as the results of a trip to what Ken Kesey calls “the Shock Shop” seemed, ECT had numerous side-effects, including fractures and increased psychological distress. The downfall of ECT resulted from a combination of the development of psychotropic medications and negative media exposure. In fact, Kesey is often cited as one of the biggest reasons ECT came under fire since his depictions of it in *One Flew Over the Cuckoo’s Nest* reveal psychiatric practitioners’ abuse of the procedure.

The 1950’s and 60’s saw a radical shift in psychological theories. The zeitgeist of the 50’s had been heavily influenced by tenets of behaviorism, namely classical and operant conditioning. By the 1960’s, however, the paradigm shifted as these dominant ideas became more frequently challenged by those espousing ideas of social and cognitive learning. In 1959, noted linguist Noam Chomsky wrote a critique of behavioral psychologist B.F. Skinner’s book *Verbal Behavior*. In a retrospective introduction to his original piece, Chomsky says his intention was to discuss Skinner’s behaviorist-based theories on language “as a paradigm example of a futile tendency in modern speculation about language and mind” (Chomsky 142-143). Chomsky’s response to Skinner’s empirically-driven notions of language and thought reflect the growing trend to inspect social and cultural issues from a psychological standpoint. By structuring a theory in which functional, evidence-based analysis could explain the complexities of human

language (and, therefore, cognition), behaviorists like Skinner could rely on concrete language to describe human behavior. As is evidenced by Chomsky's response and by the literature of writers like Jackson, Kesey, and Toole, language (or verbal behavior) is not merely the produced response of an individual to a provided stimulus; the subject is not so easily conditioned to respond by a mediator. This idea of society's ability to control versus inability to control the individual defines the era in which Jackson, Kesey, and Toole wrote their novels and experienced their own forms of internal and external "madness." This concept of mind control is inherent in therapies, including the controversial method of hypnotherapy.

Hypnotherapy was a popularly-used method for treating mental illnesses in the twentieth century. Milton H. Erickson revived the use of hypnosis, which was pioneered by Franz Anton Mesmer in the 1700s, to treat patients in his practice during the middle of the twentieth century. Hypnotherapy's main objective was to "bring about deep relaxation and an altered state of consciousness" ("Hypnotherapy" par. 1). A hypnotist was not supposed to control the individual's mind or free will. Twenty-first century hypnotherapists are subject to a strong series of guidelines for practice and must, in addition to having a doctoral or master's level degree, be certified through the American Psychotherapy and Medical Hypnosis Association. However, in the twentieth century, this was not the case.

Patients with multiple personalities (now known as Dissociative Identity Disorder) were often treated with hypnotherapy, as Shirley Jackson fictionally depicts in *The Bird's Nest*. Jackson's fictitious scenes between Dr. Wright and Elizabeth/Beth/Betsy are not terribly far from the truth of what it was like for twentieth-century patients receiving hypnotherapy. With their patient under hypnosis, a medical practitioner could impose their own suggestions for how the patient could change their ways of thinking and behaving. This suggestibility factor called into

question the legitimacy of hypnotherapy, since emotionally and cognitively vulnerable patients could be mentally persuaded by their hypnotherapists. Despite issues with suggestibility, hypnotherapy became a method inextricably linked to the treatment of Multiple Personality Disorder.

In his 1988 book entitled *Through Divided Minds: Probing the Mysteries of Multiple Personalities – A Doctor’s Story*, Dr. Robert Mayer chronicles how he used hypnosis to treat a young woman with multiple personalities. Instead of merely privileging one personality over the others, as is the case with the fictional Dr. Wright in *The Bird’s Nest*, Dr. Mayer attempts to learn the source of his client’s psychological issues and integrate the personalities into as functional and fully fleshed-out personality as possible. Still, there are instances where Dr. Mayer, like Dr. Wright, oversteps his professional bounds. He answers his client’s frantic phone calls at all hours of the night and invests a great deal of his own personal time in trying to find ways to try to cure her multiple personalities. For some therapists, hypnosis became a way to delve into the innermost workings of the human mind and seek to discover what had been systematically repressed throughout a client’s life. But hypnosis went beyond strictly psychiatric practice and into full-blown mind control research.

Hypnosis was not merely used for therapeutic purposes, as evidenced by declassified U.S. government documents. A memorandum on Project ARTICHOKE entitled *SI and H Experimentation (25 September 1951)* describes how the CIA carried out hypnosis experiments on human test subjects. This experiment was conducted on two young women who were hypnotized and given instructions for tasks to carry out. The memorandum’s writer claims that “the experiment was carried off perfectly without any difficulty or hesitation” from either girl, both of whom “acted out her part perfectly” (par. 5). Essentially, the CIA was studying ways of

controlling human behavior. The American public was not aware of the extent to which this type of research was conducted until documents such as this were declassified several decades later, sparking outrage among newly-informed citizens and politicians like Jesse Ventura.

In 1959 (coincidentally, the same year Jackson published *The Haunting of Hill House*), Dr. Milton Rokeach headed an innovative study on how “delusional systems of belief” in three men claiming to be Christ were challenged when all the men were forced to interact (3). In his published research, entitled *The Three Christs of Ypsilanti*, Rokeach chronicles the interactions and lifespans of these three men (Clyde, Joseph, and Leon); the implication is that their paranoid schizophrenia diagnoses, with the addition of Christ identifications, are curable. All three men, confined to an institution in Ypsilanti, Michigan, are at least moderately well-educated and are sometimes lucid within reality. At times, they retreat into their own realities, generally when some threat or challenge to their identities is presented. Each of the three men has something which has repressed him (e.g., Leon’s mother is so obsessed with her own religious beliefs that her priest told Dr. Rokeach in an interview that she practices religion too heavily) and seems to play a role in their delusions. The biggest lesson Dr. Rokeach draws from his research is that “even when a summit of three is composed of paranoid men, deadlocked over the ultimate in human contradiction, they prefer to seek ways to live with one another in peace rather than destroy one another” (332). Although the three men become less fit to deal with reality over time, their sense of isolation is something Dr. Rokeach attributes to “years of neglect by a society which up to now has been more ready to disburse funds for incarceration than for regeneration” (334). Here, the call for positive therapeutic intervention is being placed by a psychologist who has seen the sad results of what happens when people are labeled “other” because they do not behave within society’s normative constructs. Yet clear and impactful changes in the treatment

of individuals with different disorders would not come to fruition for another several decades amidst the political and economic upheaval of the Reagan administration.

4. Deinstitutionalization and its repercussions

By the early 1960's, literature and broader popular culture helped to expose some of the horrors taking place in mental institutions and in politics. As Jonathan M. Metzl writes in *Mental Illness in Popular Media*, "popular representations of mental illness served as metaphoric critiques of American political culture" (1). He cites *One Flew Over the Cuckoo's Nest* as a novel that "warned of the dangers of state authoritarianism." The 1960's brought about an increased questioning of social order as John F. Kennedy's promise of progressive change was ripped asunder by his assassination in 1963. Kennedy's sister, Rosemary, had been given a prefrontal lobotomy at age 23 in an attempt to cure her of her increasing mood changes and eccentric behavior; however, the operation was unsuccessful, and Rosemary was permanently institutionalized and isolated from her family after the botched operation. On Kennedy's presidential agenda was the Community Mental Health Act of 1963, which was written in order to provide federal funding for community mental health services. States were given grants to establish locally-based community health centers capable of providing outpatient care as an alternative to institutionalization. After Medicaid was enacted in 1965, deinstitutionalization began to accelerate, but major changes did not rapidly occur. However, the Kennedy persistence in investigating institutional treatment did not end with John's untimely death. In 1965, Robert Kennedy toured Willowbrook State School, a state-funded institution for intellectually-disabled children on Staten Island. Senator Kennedy found that the children lived in a vile "snake pit", where they received sub-par care. The stories of Willowbrook's horrors spread through the media until, in 1972, budding reporter Geraldo Rivera conducted several investigative journalism

pieces there. “It was horrible,” Rivera states in the introduction to his documentary (Rivera). Rivera adds, “What we need is a new approach... We ask for change. We demand change.” Change, indeed, was about to take place on an unprecedented level.

While the shift to community-based mental health care slowly gained momentum in the 1960’s, the 1970’s saw a change in public opinion on institutionalization. In 1975, Ken Kesey’s *One Flew Over the Cuckoo’s Nest* was adapted into a film, with Michael Douglas serving as a co-producer and Jack Nicholson starring as McMurphy. The film won the Academy Award for Best Picture, the Golden Globe for Best Motion Picture – Drama, and the BAFTA Award for Best Film. Kesey’s critical message regarding the mistreatment of institutionalized patients reached the shocked and outraged masses. Mental institutions were finally revealed to the previously largely-unaware public as failing systems that did not provide the adequate care they often espoused. Not only were care techniques rather uncaring, but the steep costs of hospitalization became apparent in the aftermath of Rivera’s Willowbrook exposé.

However, it was the era of Ronald Reagan’s presidency which saw the sharpest decline in institutionalization of the mentally ill. This had less to do with public outcry and more to do with politics and economics. After being sworn in as America’s Commander-in-Chief in 1981, Reagan discarded the Mental Health Systems Act, which “would have continued funding federal community mental health centers... basically [eliminating] services for people struggling with mental illness” (Roberts par. 11). The number of institutionalized patients steadily declined from the peak population of 559,000 in 1955 (Penney and Stastny 183). When state-run hospitals were finally forced to close their doors in the 1980’s and 90’s, there were few options for where to send patients. Some patients were fortunate enough to have loved ones who could take them. Many did not have that luxury and were either transferred to other institutions or ended up out on

the streets, causing inner-city homeless populations to spiral out of control. Some patients returned to abandoned facilities – the only “homes” they knew.

As of 2003, over 103,000 United States citizens lived in board-and-care and adult foster care facilities (Penney and Stastny 184). An additional 300,000 individuals with diagnosed psychiatric disorders were living in nursing homes, and many of the over 1.25 million imprisoned individuals in 2006 were diagnosed with mental health issues. Those living in adult foster care (or “group”) homes are often involved in work programs and regularly attend therapy sessions. They have state-mandated behavior plans that are implemented by their home’s staff. Those dwelling in nonprofit-owned homes are transported in company vans bearing the company’s name and the obligatory handicap sign. Some elderly residents were institutionalized in their younger years. Those placed in homes were some of the lucky ones since they did not fall victim to homelessness, as many others did in the chaotic wake of Reagan and post-Reagan era deinstitutionalization. Unfortunately, many former patients were never able to gain therapeutic re-entry into any sort of community.

Chapter II: Communities, Not Sane: Madness at Home and in Society

Japanese film-maker Akira Kurosawa once wrote as dialogue in his script for the film *Ran* (1985) that “In a mad world, only the mad are sane.” If this is true, then, as readers, we must assume that characters like Elizabeth Richmond, Eleanor Vance, Ignatius Reilly, and Randle McMurphy are not simply suffering from forms of internal, physical madness. They are all products of a mad world, and, in being such, often make more sense than their “sane” counterparts. None of these characters can easily hide their eccentricities, no matter how hard they try. In fact, each character views themselves as relatively normal despite how others perceive them and recognize the chaos going on in the world around them.

As demonstrated by the literary works of Shirley Jackson, Ken Kesey, and John Kennedy Toole, as well as in the historical institutionalization of those deemed “mad,” the role of family as a microcosmic representation of society plays a pivotal role in determining why individuals might be perceived as “mad.” Relationships between mothers and their children, as well as those between significant others, are the most troublesome and, especially regarding the former, inescapable realities.

1. Community Exclusion and Isolation

Characters in *The Bird's Nest*, *The Haunting of Hill House*, *A Confederacy of Dunces*, and *One Flew Over the Cuckoo's Nest* experience isolation as they are excluded from their communities, starting at the familial level and branching outward into their larger social communities. These characters are often viewed more as problems than as people capable of a wide array of thoughts and feelings. Exclusion results in confinement, which is both literal/physical and figurative/cognitive. Self-worth, anxiety, doubt, and trust all seem to

diminish for those facing isolation and exclusion. Self-isolation, emotional withdrawal, and feelings of loneliness and hopelessness can also increase for these excluded individuals.

In *The Bird's Nest*, Elizabeth's personalities seek to gain inclusion in the outside world. Her third personality, Betsy, especially craves a connection with her mother. Beth seemingly enjoys her friendship with Dr. Wright and develops a bond of trust with him. Elizabeth has been isolated at work and at home with Aunt Morgen. All of Elizabeth's identities have been metaphysically confined within her psyche until they are each finally able to break through to the surface of Elizabeth's conscious mind and grapple with one another for dominance over Elizabeth's body. When Betsy gains dominance and runs away to New York, she feels stirrings of excitement at the potential of finding happiness in developing new friendships within the city:

A thought of the world swept over her, of people living around her, singing, dancing, laughing; it seemed unexpectedly and joyfully that in all this great world of the city there were a thousand places where she might go and live in deep happiness, among friends who were waiting for her here in the stirring crowds of the city (oh, the dancing in the small rooms, the voices singing together, the long talks at night under the cool trees, the swaggering arm in arm, the weddings and the music and the spring!); perhaps there were some, searching face after face with eager looks, wondering when Betsy would be there. A little touch of laughter caught her, like the touch of the waves of the river, and she tightened her fingers delightedly upon the windowsill; how happy we all are, she thought, and how lucky that I came at last! (95)

Betsy, finally feeling free, experiences something that eluded her in captivity – happiness. Of course, her happiness comes at Elizabeth's expense, as Elizabeth is repressed by Betsy. Betsy's happiness is short-lived as both internal and external forces keep grappling for control of

Elizabeth's body. Happiness seems to elude all the personalities, and, in the end, they are once again confined by Aunt Morgen and Dr. Wright. The external community controls its undesirables (here, Betsy, Bess, and – to a lesser extent, Elizabeth) by confining and isolating them.

Similarly, Eleanor has been confined throughout her entire existence in *The Haunting of Hill House*. Initially repressed by her mother and sister, then by her own psyche, Eleanor finally succumbs to the dominant figure of Hill House itself. In the beginning of the novel, Eleanor does not belong to a community. She is friendless after having spent the previous eleven years of her life “caring for her invalid mother, which left her with some proficiency as a nurse and an inability to face strong sunlight without blinking. She could not remember ever being truly happy in her adult life; her years with her mother had been built up devotedly around small guilts and small reproaches, constant weariness, and unending despair” (3). Eleanor's life has been one of seclusion, riddled with guilt and shame. The isolation, however, did not start in adulthood, nor did it start with Eleanor.

At the age of twelve, Eleanor and her sister Carrie witnessed a shower of large stones falling onto their house. Their mother insisted that this happened as a result of “malicious, backbiting people on the block who had it in for her ever since she came” into the neighborhood (4). Eleanor's mother harbored paranoia or resentment toward a community she felt had outcasted her and her daughters, but reasons for this are extremely vague. Although this event has been forgotten by most, it is the reason Dr. Montague brings Eleanor to Hill House, as he suspects she possesses some sort of psychic (possibly telekinetic) ability. Almost an entire lifetime of isolation is ultimately what brings Eleanor into the society Dr. Montague assembles at Hill House. She struggles with living in a mad world and exists in her own fog-like state. As

Laura Miller writes in the novel's introduction, Hill House, much like the inner workings of Eleanor's mind (and like the atmosphere of a mental institution), represents "physical and psychic claustrophobia" (xv). Additionally, society is destructive, chaotic, and uncaring, as we see early in the novel, when Eleanor accidentally bumps into a physically small lady trying to get home in a taxi. The little lady states that "[s]ometimes the people who knock you down never turn once to look" (9). The only salvation Eleanor possesses is the car she co-owns with her sister. The car is a "little contained world all her own" that gets her to where she wants to be – Hill House (10). On her way, Eleanor contemplates ditching the car on the side of the highway and wandering away, yet she is held back by fear of reprimand, of consequences which society would place on her and that she places on herself. She continues on to Hill House despite her momentary misgiving.

The house is also a haven for Theodora, although, unlike Dr. Montague, Luke, and Eleanor, she is not trying to avoid family members who repress her. Theodora has already fled from an unpleasant living situation with a partner but does not share the same motivations as the others for coming to Hill House. When she and Eleanor happen upon a ghost family having a picnic, Theodora instructs Eleanor to run and not look back. Theodora later admits that she looked back, but the reader is not privileged with the knowledge of what Theodora saw. Theodora might not be escaping family itself but the social norms for women and families. Theodora, who is possibly lesbian or bisexual, seems to be fleeing from society's expectation that a woman must surely want a family of her own.

Hill House is a self-contained society for its inhabitants. Tucked away from the closest town (whose inhabitants try to forget that the house exists), Hill House is an isolated location in which four social misfits attempt to form their own society. When Eleanor, Theodora, Luke, and Dr.

Montague stand together in the home's entrance for the first time, they look "trustingly at one another" (41). These four, previously strangers, are no longer social misfits, or so it appears. Over time, cracks appear in the surface as Eleanor's mental status becomes increasingly more unstable. The actions of one character impact everyone, mimicking, in a microcosmic way, the macrocosmic manner in which human beings function within reality.

Eleanor is not the only character in the novel who has been isolated in some way. In fact, all the participants in Dr. Montague's study – including Dr. Montague himself – are excluded from their communities. Dr. Montague is not taken seriously within the scientific community because of his interest in parapsychology. Luke, who stands to inherit Hill House, is considered a liar and thief, and his family would like to be rid of him. Instead of dumping him off in an institution, his aunt forces him to stay with the group at Hill House. Like the rest of his family, Luke has no desire to live in Hill House, but he is forced into the role. Finally, Theo, though she sometimes appears to have an air of freedom and strong sense of self, is potentially a semi-closeted bisexual who seems to be running away from the traditional woman's roles of mother, wife, and all-around nurturer. Theo seeks to destroy households and objects, and she never divulges her surname.

Hill House is also excluded from its community. The surrounding community is, according to Dr. Montague's initial letter to Eleanor, "rude to strangers and openly hostile to anyone inquiring about Hill House" (10). As Eleanor finds out from locals she meets on her way to Hill House, people tend to leave town; they don't come to it. This colors Eleanor's impression, because when she first lays eyes on Hill House, she thinks it is "vile, it is diseased; get away from here at once" (23). However, she continues. As the house's new occupants discover, "[s]ome houses are born bad," and Hill House is one of them (50). Dr. Montague even diagnoses

the house as being “disturbed, perhaps. Leprous. Sick. Any of the popular euphemisms for insanity; a deranged house is a pretty conceit” (51). While he believes, or at least encourages the others to believe, that there is something wrong with Hill House, Dr. Montague’s philosophy of psychology matches what Szasz would later espouse – that humans create categories that must be conformed to lest we risk becoming outcasts from society.

Eleanor, Theo, Luke, and Dr. Montague initially seem to delight in each other’s company. They form a new, exclusive, but ultimately secluded community of “four separated people” who trust in one another (41). As time goes on, their trust in each other – and in Hill House – wanes. Hill House is not essentially what changes; it is the psyches of its inhabitants that change in their state of isolation. The imposition of Mrs. Montague and her boy-toy Arthur further complicate the group dynamic. Mrs. Montague’s domineering and needy presence mirrors that of Eleanor’s late mother, potentially sending Eleanor over the psychological threshold of what she can take. When Eleanor’s mental breakdown prompts Dr. Montague to force her to leave, their little community is forever fractured. Eleanor’s demise as she crashes her car into a tree on the property ensures that a part of her will forever remain at Hill House but that she can never have a living, loving community of friends and family.

While isolation is not overcome in either of Jackson’s novels, there is more hope for the characters in *A Confederacy of Dunces* and *One Flew Over the Cuckoo’s Nest*. In *A Confederacy of Dunces*, Ignatius struggles with not fitting into social schemas and, therefore, is always on the outskirts of society. Ignatius has spent his entire life, save for a brief trip outside the city, within the confines of New Orleans. The departure was traumatic, as Ignatius reminds others: “Leaving New Orleans also frightened me considerably. Outside of the city limits the heart of darkness, the true wasteland begins” (11). Although this excursion only took him as far as Baton Rouge

(roughly a distance of just over 80 miles), it removed Ignatius from the comforts of home. Ignatius has failed to launch by age thirty, as he has not left the safety and comfort of his mother's home. His self-containment reflects his perception of the outside world – a tumultuous upheaval of what he perceives to be (and what others in the late 1950's and early 1960's regarded as outdated) sense, order, and decency. To quote a Beach Boys song, Ignatius "just wasn't made for these times." Ignatius does not neatly fit into the box society has constructed for him. His physical enormity and awkward fashion choices exemplify his mish-mashed identity of creative genius and social deviant. Because he does not conform to the world around him, Ignatius attempts to construct his own rules for how the world works, with often disastrous (and semi-comedic) results.

After he is fired from Levy Pants, Ignatius is confronted by his mother, who is fed up with his behaviors and finally pushes him to do what she thinks is best for Ignatius. Mrs. Reilly tells Ignatius he must find another job. Ignatius' reply, though seemingly a bit narcissistic, echoes his worries of being completely outcast: "Am I going to be thrown out again into the abyss?" (144). When he states that "Fortuna has decided upon another downward spin," his mother does not understand what he means (145). All he can respond to her is "Nothing." Beneath his façade of narcissism, Ignatius knows most people – including his own mother – do not understand his way of thinking. One character, George (a young man who helps distribute pornographic photos in high schools), notices how educated Ignatius sounds despite working as a hot dog vendor (the job he is forced to acquire after getting terminated from Levy Pants). George, judging by the way Ignatius speaks, concludes that "he had gone to school a long time. That was probably what was wrong with him" (284). Ignatius' education places him outside of social norms in New Orleans. While Ignatius seems to hold a high self-esteem, there are moments in Ignatius' dialogue when

confidence is betrayed by the perception of insanity, which ultimately isolates Ignatius on a cognitive and emotional level. When his boss, Mr. Clyde, offers him a new hot dog vending route, Ignatius replies, “You may send a map of my new route to the mental ward at Charity Hospital. The solicitous nuns and psychiatrists there can help me decipher it between shock treatments” (210). This might justifiably inspire a soft chuckle from the casual reader, but Ignatius’ statement reflects his awareness of his outcast status and what type of life awaits those who fail to conform to society’s standards.

There is some hope for Ignatius in the end of the novel, as his sole friend, Myrna Minkoff, comes to Ignatius’ rescue; he actually views her as “an escape route” from the institutionalization he knows awaits him, per his mother’s will (386). Myrna immediately notices how haggard and worn-down Ignatius looks and takes pity on him. Ignatius lies to her about the letters he has sent to her, detailing his numerous misadventures throughout the novel. He even claims that “psychotic desire for peace was no doubt a wishful attempt to end the hostilities which have been existing in this little house” (388). Myrna, however, acknowledges that this is a negative atmosphere for Ignatius and is all too willing to help him break free from “this dungeon, this hole” (390). Ignatius is finally ready to venture back out into the heart of darkness because he has also found that it exists within New Orleans. He is not quite ready to adopt Myrna’s idea of self-discovery, but Ignatius finally has a way of leaving behind a community that does not understand him in favor of being with a companion who, to an extent, does.

In *One Flew Over the Cuckoo’s Nest*, Chief Bromden prefers to hide in the (partially medically-induced) fog of his mind because he feels safe there. The fog is where Chief goes to escape from reality – from the possibilities of reprimand for speaking or acting outside the norms of “the Combine.” As a newcomer, McMurphy does not understand why the men on

the ward wish to hide like this. Chief says that McMurphy “keeps trying to drag us out of the fog in the open where we’d be easy to get at” (114). In a mad world, the safe thing to do seems to be to hide one’s “madness.” To avoid a trip to the Shock Shop (the room where patients are given electroshock therapy), Chief has learned to “stay still when the fog comes over [him] and just be quiet” (118). Chief’s silence is mistaken by others for deafness, muteness, and even insanity, but, for him, it is a survival mechanism. Chief endures the unpleasant stimulus of the fog to avoid the even more unpleasant one of electroshock therapy. It is not until McMurphy outwardly questions and defies the Combine that Chief and the other men on the ward start to emerge from the fog and confront reality. This is also what unites them as a community.

This questioning and defiance within the text demonstrates how mental hospitals function as isolated communities that strip individuals of their identities in order to normalize them. Chief’s external community has been taken away. His father, a tribal chief named Tee Ah Millatoona (“The-Pine-That-Stands-Tallest-on-the-Mountain”), married a white woman and adopted her surname. Over time, he was deprived of power and land. Chief and his father are severed from their cultural heritage and have artificial identities constructed for them by “repressive institutions that, because of the weight of their authority, prohibit meaningful action” on Chief’s part (Tepa Lupack 68). Tepa Lupack writes that Chief’s “reentry into the world of the living, particularly the community of nature” is what will bring about his healing (70). Psychiatric drugs and shock treatment are not the “cures” he needs. Over the course of the novel, due to McMurphy’s pronounced demand for more freedom for the men on the ward, Chief comes out of his shell. Chief, McMurphy, and the other men form a brotherhood that eventually prompts Chief to lift “the control panel in anticipation of his ultimate escape” (70). While several characters, including McMurphy, do not survive the novel, McMurphy’s sacrifice frees the men with whom

he has formed bonds. Some, including Harding, check themselves out, while Chief uses his physical and internal power to lift the panel in the tub-room and hurl it through a window. Chief frees himself from the Combine and goes back into the community of nature.

2. Mothers and children

Social psychologist Milton Rokeach writes in *The Three Christs of Ypsilanti* that personal identity and a sense of physical reality are cultivated throughout one's lifespan, starting in childhood with one's parents. Rokeach asserts that a "child depends on his mother to remain his mother – with the pattern of behavior and all the feelings that the word implies – and on his family and social groups to remain his family and social groups no matter what variations" occur (22). A significant disturbance in these consistencies could, Rokeach theorizes, bring about issues of distrust of the exterior world as well as a lack of self-trust, leading to extremes that can include the manifestations of phobias, anxiety, depression, paranoia, and hallucinations.

As we see with Eleanor Vance in *The Haunting of Hill House* and Betsy in *The Bird's Nest*, adult children often attempt to flee the negative and confining aspects of their families. Laura Miller writes that Eleanor, perhaps much like Jackson herself (who had a troubled relationship with her mother, Geraldine), shows us that "the harder you try to escape the emotional dynamics of your family of origin, the more likely you are to duplicate them" (xx). Is this the fate all children are doomed to experience, or is there a way to negate the repressive madness brought about by families? Perhaps the best way to start to address this question is to examine the relationships between mothers and their children and how, when there is an imbalance of love and power, "madness" can result. This must commence with the lives of the writers and their familial relationships.

As previously mentioned, Jackson had a difficult relationship with her often-controlling and seemingly eternally disappointed mother, Geraldine Bugbee Jackson. Geraldine wanted “a daughter who was beautiful and a fool; instead, she got Shirley, who would never for one instant be either” (Oppenheimer 11). Geraldine’s mother, Evangeline “Mimi” Field, was a plain woman who had “none of her daughter’s pretensions or zest for the social milieu” (12). Geraldine’s father, Maxwell Greene Bugbee, built a house for Geraldine and her husband, Leslie Jackson that also served as a dumping ground for Mimi, the wife he no longer wanted. Mimi was continuously a presence in the household, save for the dinner parties Geraldine threw, during which Mimi was relegated to her room in the attic. It is in this dynamic of three generations of women that we start to see the emergence of the house as an institution for unwanted women, which becomes prevalent in *The Haunting of Hill House*.

Hill House is a mother substitute like many real-life mental institutions. Expected to provide comfort and serenity for its family, Hill House, “not sane,” is anything but comfortable and serene, and one can imagine Eleanor’s mother (and, perhaps, even Geraldine Jackson) as that failed provider of solace. Mothers, as adult members of society, stifle their children in *The Haunting of Hill House*. On her way to the house, Eleanor stops into town for a bite to eat at a restaurant where she sees a little girl crying for her cup with moving stars. The mother tells her daughter she must be obedient and drink from an ordinary cup since her cup of stars is at home. Stricken with empathy for this child, Eleanor thinks to herself that the girl must insist on having her cup of stars; if she does not, society will be victorious in getting the girl to conform to its rigid norms, much as Eleanor has done throughout her life. Eleanor tried to be the dutiful daughter and sister to a mother and sister who did not understand her but ultimately wound up as the proverbial black sheep of her family – an exile on the cognitive, emotional, and physical

fringes of the microcosmic society that is supposed to be loving and accepting of her but is cold, condemning, and unsupportive, all of which Eleanor draws inward and uses as the basis for her own self-doubts and critiques.

Toward the end of *The Haunting of Hill House*, Mrs. Montague seems to potentially make legitimate contact with a spirit in the house via her planchette. The spirit says “Nell,” “Home,” “Mother,” and “Child” and that there is nothing anyone can do for it because the spirit is “Lost. Lost. Lost” (141-142). There are three possible explanations for why this is happening: Mrs. Montague is simply making it up, a spirit is trying to talk to Eleanor, or this is Eleanor’s subconscious mind telekinetically speaking through the planchette, making her struggles known. Eleanor lacks a positive home environment and nurturing mother figure. Perhaps it is only in the failed mother figure of Hill House that Eleanor finds a home, even though Hill House is “an enticing and devouring mother” to her (Rubenstein 318).

Aunt Morgen is another failed mother substitute in *The Bird’s Nest*. Elizabeth’s real mother, Aunt Morgen’s sister, is deceased, and Aunt Morgen is the only family Elizabeth has left. Aunt Morgen has seemingly sheltered her niece and selects Elizabeth’s society for her. Their relationship cannot be as readily described as loving or supportive as it can be controlling and oppressive. Aunt Morgen wants Elizabeth to be a good girl, a quiet little nobody who does not go out at night, who keeps house, and whose only real excursion is going to work at a mundane job. Although Elizabeth’s more dominant personalities struggle to free themselves from their existence in Elizabeth’s confined world, in the end, Aunt Morgen and Dr. Wright are successful in molding Elizabeth into the person they want her to be. They even joke that Elizabeth is now nameless and should take on the name “Morgen Victoria” (Morgen’s idea, privileging her name over the feminine form of Victor Wright’s name) or “Victoria Morgen” (Dr. Wright’s

suggestion, which counters Morgen's). The newly nameless "Elizabeth" laughs as well and says "I'm happy... I know who I am" as she walks off, arm-in-arm with her father and mother substitutes (250). Parents tend to take pride in naming their children and want to select fitting names, but Aunt Morgen and Dr. Wright are both trying to control Elizabeth and seek dominance over one another as well. Therefore, Elizabeth is robbed of the opportunity to have her own singular personality; it has been constructed for her by these two domineering forces, somewhat like how parents manufacture their children's identities from (or even prior to) birth.

Ignatius Reilly also has a less-than-ideal relationship with his mother, who accidentally acts as a catalyst to the actions that spiral Ignatius into complex scenarios throughout the novel. Ignatius is an embarrassment to his mother, as the narrator reveals early on in *A Confederacy of Dunces*. Ignatius' mother begins to detach herself from her needy son when she learns to bowl, and she also finally stands up to him. Mrs. Reilly makes friends and begins dating again after living for years as a widow. Ignatius, who "vehemently opposes sexual contact with other people," views "[t]hose who want his mother to end her widowhood and return to an active sexual life" as his enemies (Leighton 203). However, Mrs. Reilly has been an overly-indulgent mother who has spoiled Ignatius. The damage has already been done, and the tension between mother and son mounts. Mrs. Reilly lies to Ignatius about going over to her friend Santa Battaglia's house, telling Ignatius instead that she is going to a novena. Mrs. Reilly confesses to Santa that she is "getting kinda fed up on Ignatius, even if he is [her] own son" (Toole 193). Based on what Mrs. Reilly has told her, Santa comes to view Ignatius as "poor Irene's crazy boy" and thinks Mrs. Reilly has "gotta get that boy put away" (346). Ignatius treats his mother poorly, admits to doing so, and justifies that she brings it upon herself. Perhaps due in part to her son's mistreatment of her, Mrs. Reilly tends to drink a lot of alcohol. In fact, it is her drinking

that causes her to crash her car into a balcony after getting intoxicated at the Night of Joy in the beginning of the novel, thereby propelling Ignatius into unpleasant scenarios. It is only in the end of the novel, after Mrs. Reilly has made up her mind to have Ignatius committed to Charity Hospital, that she finally apologizes and tells her son that she loves him. She then takes off, leaving Ignatius to cope with the realization of her intentions. It is then that he calls upon Myrna to help him escape his mother's house and, essentially, his life with his mother.

As with Shirley Jackson, it should be noted that John Kennedy Toole had a complicated relationship with his mother, Thelma Toole. Thelma was a worldly woman who controlled many aspects of her son's life, choosing the friends he was to associate with and grooming him to become an entertainer. Coping with rejection of the publication of *A Confederacy of Dunces*, familial tensions, his father's dementia, and his own alcoholism and depression, Toole became disheveled and erratic in his final years. When Toole lost his position at Dominican College in January of 1969, he and his mother engaged in a massive verbal disagreement (Nevils and Hardy, 166-167). This prompted Toole to leave the home and go on an extended road trip. On March 26, 1969, Toole was found dead in Biloxi, Mississippi. He had committed suicide by connecting a garden hose from the exhaust pipe through the front window of his running car. Despite their troubled relationship, Thelma entered a deep depression after her son's death, but she was eventually successful in fulfilling one of her late son's ambitions by getting *A Confederacy of Dunces* published. Some scholars speculate that Irene Reilly embodies the aspects Toole disparaged in his own mother and that Ignatius and Toole are alike in that they are misunderstood by society at large and even those closest to them, although the narrator often comedically describes Ignatius and the scenarios he finds himself mixed up in. Nevertheless, the

relationship Ignatius has with his mother is no laughing matter; their co-dependence turns volatile and leads Ignatius to finally leave the nest.

As with *The Haunting of Hill House*, *One Flew Over the Cuckoo's Nest* presents two failed mother figures – the more obvious of the two being Nurse Ratched, and the less obvious being the psychiatric institution. Both Nurse Ratched and the institution are assumed by society to act as care-givers. The pristine external appearances of Nurse Ratched and the institution are (rather poor) attempts to mask the coldness of each. Although the hospital is a step up from "how it was in the old hospital" for Chief, the "paint and decorations and chrome bathroom fixtures" simply mask the cold, uncaring nature of the hospital ward (112). Even a visiting doctor is reduced to visible shivering. Chief thinks that "[m]aybe he feels the cold snow wind off the peaks too." The coldness of the institution mirrors Nurse Ratched's chilly nature. Both Nurse Ratched and the hospital fail to live up to their roles as care providers. On the surface, both appear pristine and to have plenty of assets (for example, Nurse Ratched's large bust and the TVs in the institution), yet these things do not make them able to provide true compassionate care and comfort. Chief describes the ward as "a factory... for fixing up mistakes made in neighborhoods and in the schools and in the churches" and that a "completed product" re-entering society "*better* than new sometimes... brings joy to the Big Nurse's heart" (40). Her joy does not (as a nurturing mother-figure's might) come from the individual finding a meaningful existence for themselves but, rather, from the pride she can take in putting out a successful result.

Harding tells McMurphy that all of the men in the hospital are rabbits, saying "we'd be rabbits wherever we were – we're all in here because we can't *adjust* to our rabbithood. *We need* a good strong wolf like the nurse to teach us our place" (61). Not only is Nurse Ratched cold, she

is also a predator. McMurphy brushes this off, but Harding seems to firmly believe that he has always been a rabbit, always the prey for a stronger creature.

Toward the end of *One Flew Over the Cuckoo's Nest*, Chief considers joining McMurphy on a fishing trip, but he is terrified of defying Nurse Ratched, much in the way a child simultaneously fears and yearns to defy its mother. Chief initially refrains because he would expose himself as a fraud who heard everything that anyone around him had ever said. If Nurse Ratched found this out, Chief thinks she would "fix [him] where she knew [he] was deaf and dumb" (78). In other words, Nurse Ratched would order that Chief be given a lobotomy. Chief must keep up the facade of deafness if he wants to keep hearing at all. Chief is well aware of how fixated Nurse Ratched is on control. When reprimands the Acutes for their "unspeakable behavior concerning the house duties" three weeks prior, Nurse Ratched attempts to justify her position on punishment:

Please understand: We do not impose certain rules and restrictions on you without a great deal of thought about their therapeutic value. A good many of you are in here because you could not adjust to the rules of society in the Outside World, because you refused to face up to them, because you tried to circumvent and avoid them. At some time – perhaps in your childhood – you may have been allowed to get away with flouting the rules of society. When you broke a rule you knew it. You wanted to be dealt with, *needed* it, but the punishment did not come. That foolish lenience on the part of your parents may have been the germ that grew into your present illness. I tell you this hoping you will understand that it is *entirely* for your own good that we enforce discipline and order.

(171)

Nurse Ratched, in her critical and narrow-minded judgment of the patients' upbringings, assumes the authoritarian role as deliverer of punishment, disguised by the mask of caring. The truth of the matter is that Nurse Ratched, like real-life authoritarian figures, cannot handle not being in control. For her, the need for control extends to other individuals. In Chief's mind, this is the function of the Combine and the hospital – to control human behavior. These failed mother substitutes seek to regulate and restrict through authoritarian oppression, conditioning those in their care to believe that there is something inherently wrong with them since they break rules and defy social norms. Unfortunately, this type of controlling relationship is not limited to parental figures; it also manifests in the relationships characters in each novel have with significant others.

3. Significant others

Significant others play crucial roles in the lives of those deemed “mad.” Historically, significant others, much like parents, were the ones responsible for involuntarily institutionalizing “mad” individuals. Most frequently, husbands could have unwanted or embarrassing wives locked away in mental institutions since men were assumed to be rational and reasonable, whereas their wives, as women, were figured to be more prone to hysteria or illogical thinking. However, as Jackson, Toole, and Kesey show, significant others were often major contributors to “madness.”

In *The Bird's Nest*, Elizabeth and her personalities do not have a significant other, mostly due to Aunt Morgen's controlling power. It is Aunt Morgen who has struggled with romantic relationships. Aunt Morgen reveals in the beginning of the narrative that her brother-in-law (Elizabeth's father) first laid eyes on her but was somehow stolen away by Elizabeth's mother, Elizabeth Senior. Aunt Morgen claims that, toward the end of that marriage, she noticed that “he

came to [her] more and more” and that she knew about her sister’s affairs (15). Aunt Morgen’s resentment toward her sister and probable regret over having not been chosen by Elizabeth’s father now manifest in her relationship with her niece. Elizabeth is secluded from the outside world, and it is only when Aunt Morgen catches her (when Betsy has taken over Elizabeth’s body) sneaking out during the night that Elizabeth is forced to go to therapy. Aunt Morgen does not accept these deviations from the “good girl” persona she expects Elizabeth, whom she treats like a child, to embody.

Eleanor Vance, somewhat like Elizabeth, is single, but she is hopeful of finding love, often reciting the line “Journeys end in lovers meeting” from William Shakespeare’s *Twelfth Night*. While exploring the grounds around Hill House on the first evening there with Theodora, Eleanor finds a charming brook and feels certain she has been there previously, “[i]n a book of fairy tales, perhaps... This is where the princess comes to meet the magical golden fish who is really a prince in disguise” (37). Eleanor’s romanticized vision of the spot is immediately countered by Theodora’s perception of reality: “[the frog] couldn’t draw much water... [the brook] can’t be more than three inches deep.” When Eleanor meets Luke, she immediately thinks “Journeys end in lovers meeting” (40). While discussing their fantasy lives, Eleanor imagines herself an artist’s model whose affairs are gossiped about. Her afterthought of “Dear me” seems to reveal that Eleanor knows this romanticized life is unrealistic but that she secretly aspires to find romance. Eleanor’s hopes are dashed as Hill House gains control over her mind. She submits to the will of Hill House because she has been conditioned to be submissive, first by her mother, then by her sister Carrie and her family. Now, Hill House becomes the possessive figure in Eleanor’s life, and Eleanor believes that the house is waiting for her, that “no one else could satisfy it” (178). Eleanor admits to liking what has happened to her at Hill House, although she

has put herself and her companions in danger. This prompts Dr. Montague to send her away. Unfortunately, Eleanor seals her fate when she drives her car into a tree on the property. If Eleanor's spirit is confined to Hill House, she has no companions, no chance at her romanticized life with Luke or anyone, for "whatever walked there, walked alone" (182). The thrill of romance forever eludes Eleanor.

Eleanor is not the only character in the novel who struggles with romantic relationships. Pronounced marital issues exist between Dr. and Mrs. Montague. As a man of both science and spiritualism, Dr. Montague is caught in a push-and-pull dichotomy of skepticism and belief. Neither side takes him seriously. Science privileges facts and ignores the metaphysical, but the spiritualism movement – as Mrs. Montague demonstrates – privileges sensationalism and ignores facts. As the narrator suggests, "perhaps the painstaking documentation of phenomena has largely gone out as a means of determining actuality" (2). Dr. Montague views himself as a "careful and conscientious" man who is thorough in his research. His wife, on the other hand, claims to have a deep psychic connection with the spiritual realm and seems to enjoy parading this about in front of Dr. Montague and his assistants at Hill House. Soon after her arrival, Mrs. Montague tells the group that Hill House's "spirits may be actually *suffering* because they are aware that you are afraid of them" (135). Eleanor silently takes pity on Dr. Montague, who is clearly the submissive spouse in the relationship. Not only is Dr. Montague submissive, but he allows his wife to bring Arthur, her assistant and, though not explicitly stated, lover. Arthur is a foil for Dr. Montague's docile and paternal character. Unlike the Victorian-era loving, *Pamela*-reading, ultimately outdated reserved masculinity of Dr. Montague, Arthur is bold and athletic. Arthur is the embodiment of 1950's machismo and seems to be a better match for Mrs. Montague and her narcissistic devotion to the supernatural. Dr. Montague lets his wife get her

way with everything from using her planchette to investigate Hill House's supposed hauntings to letting her keep Arthur around. Mrs. Montague constantly talks over her husband, belittles him for expressing his opinions and what he knows to be factual, and asserts her inflated sense of superiority over all her companions. Essentially, Dr. Montague is trapped in an unhappy marriage where he is unable to truly be himself and feel valued.

Similarly, in *One Flew Over the Cuckoo's Nest*, Dale Harding and his wife are completely at odds. In fact, Harding, as a likely closeted homosexual, has voluntarily admitted himself to the psychiatric ward. When Vera – who refuses to be called “Mrs. Harding” – comes to visit, Harding refers to her as his “counterpart and Nemesis,” adding that he “would be trite and say ‘to my better half,’ but [he thinks] that phrase indicates some kind of basically equal division” (158). Vera dresses in flashy clothing and flirts with other men. She also demeans Harding by commenting on how his laugh sounds like a “mousy little squeak.” McMurphy previously noticed this about Harding and commented on it in a way that was meant to calm Harding. As Chief notes, when Vera says it, Harding becomes more anxious. The only way that Harding can assert any sort of power with his wife is through his capacity for intellectual dialog. He points out the flaws in Vera's speech, including when she uses a double-negative in a sentence. Harding knows this is the only dominance he can possibly hold over Vera.

As a heterosexual, unmarried man, McMurphy does not completely understand Harding's marital woes. McMurphy is left speechless after Vera and Harding argue about Harding's male friends – “hoity-toity boys with the nice long hair combed so perfectly and the limp little wrists that flip so nice,” according to Vera – who come to their house, looking for Harding (159). Harding snaps back that perhaps these boys are looking for her instead, implying that she is the one having extra-marital affairs. McMurphy finally tells Harding that he is not a marriage

counselor but thinks the couple treats each other pretty poorly by constantly degrading one another. While McMurphy's observation is legitimate, he fails to fully comprehend the reason for their power struggle. In the early 1960's, it was not socially acceptable for a married woman to dress provocatively and see other men, but it was even more taboo to be a homosexual man, as being gay put men on a social footing below straight women. Harding is fighting to gain some ground while coping with the anxiety he feels from being in a loveless marriage and having to hide his sexuality.

A Confederacy of Dunces depicts multiple types of strained relationships, including the damaged relationship that exists between Gus Levy (the owner of Levy Pants, where Ignatius works for a brief period) and his wife. The first glimpse the reader is given into their lives reveals, on the surface, a "sensually comfortable" home filled with luxuries; however, Gus and Mrs. Levy consider "each other the only ungratifying objects in the home" (94). Gus and Mrs. Levy constantly bicker over business and domestic affairs. They even argue over the employment of Levy Pants' elderly accounting assistant, Miss Trixie. Mrs. Levy views herself as something of an expert in psychologically caring for Miss Trixie, although she is just forcing Miss Trixie to be her pet project. Mrs. Levy also tries to psychoanalyze her husband even though she has no qualification to do so. Mrs. Levy tells Gus that "the tragedy of his life" is that he has made a failure of his father's pleated pants factory, when, in fact, pleated pants have simply gone out of style, decreasing the demand for their supply. Mrs. Levy wants her husband to feel guilty for not being a successful businessman like his father and even uses their two daughters against him to deepen the wound. When they start to fight over Gus firing Ignatius, Mrs. Levy comes to Ignatius' defense. Gus tells her that Ignatius is "a real psycho," but Mrs. Levy thinks Ignatius is a "young idealist" (148-149). Mrs. Levy automatically projects her values onto Ignatius, whom she

has never met. Mrs. Levy sees herself as an idealist who is oppressed by Gus, yet she cuts her husband down by saying things like “I should have married a doctor, somebody with ideals” and accuses him of brutalizing her (150-151). Their fighting continues even after Gus lets Mrs. Levy have Miss Trixie come stay with them so that Mrs. Levy can use Miss Trixie as a project. Mrs. Levy also attempts to informally diagnose Miss Trixie with “age psychosis” (which Gus argues is just senility) because Miss Trixie says she is tired (185). The relationship between Gus and Mrs. Levy is a constant struggle for psychological dominance. Gus believes Ignatius is psychotic and that Miss Trixie is just senile while Mrs. Levy thinks Miss Trixie is psychotic and Ignatius is merely a disillusioned idealist. Neither Gus nor Mrs. Levy accept responsibility for the psychological damage they deal to others and each other. Mrs. Levy refuses to let Gus take Miss Trixie back to Levy Pants and shoves Miss Trixie into a seated position. Miss Trixie tries to fight back but is physically held down by Mrs. Levy on the Levys’ yellow nylon couch. Miss Trixie’s inability to rise is symbolic of the psychological restraints placed on individuals like Miss Trixie who were deemed incompetent. The Levys’ toxic relationship does not just harm the couple; it affects those around them and becomes symbolic of upper-middle class society’s treatment of those perceived to be inferior and “mad.”

Chapter III: We Have Always Lived in the Combine: Disempowerment Based on Gender, Sexuality, Socioeconomic Status, and Race/Ethnicity

“Madness,” gender, and sexuality are closely linked in each of these novels. Male and female characters can be either the oppressed or the oppressors – or simultaneously both, as is the case with Nurse Ratched in *One Flew Over the Cuckoo’s Nest*. Sexuality is also a factor that has historically lumped individuals into binary categories of “normal” and “abnormal.” Sexual repression is directly and inextricably linked to gender since perceived sexual aberrations have been considered deviations from gender norms. Those publicly or privately identifying along the vast Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual (LGBTQIA) spectrum have long been labeled “other” by society and, particularly in conservative eras and geographical locations, were treated as psychological abnormalities. In post-World War II American society, men were supposed to be strapping, outspoken, obvious heroes, and women were still expected to be domestic goddesses despite advances in women’s rights. Embracing what was largely perceived to be a deviant sexual identity often resulted in community exclusion and, in some cases, institutionalization. Psychoanalysis was a popular tool for conversion therapy in America until the American Psychological Association finally removed homosexuality as a disorder from the *DSM-III-R* in 1974. However, as these novels show, the damage had already been done; many lived the majority of their lives in isolation or were disowned by their families for not conforming to gender roles and sexuality norms.

In addition to women and homosexuals, the poor and racially and ethnically diverse have been outcast from society and often labeled as “mad” throughout history. Separate mental institutions were even created to segregate black and Native American patients from the white population housed in regular institutions. In the earlier half of the twentieth century, especially in

the southern states, concerns grew over “insane” black people. To ease the burden of overpopulation and to ensure that black “insanity” was not mixing with white “insanity,” many states constructed all-black institutions, such as Searcy Hospital in Bryce, Alabama. This mirrors the societal trend to segregate and further disempower those who were poor and/or ethnic or racial minorities. Post-World War II literature captures this difference in power and privilege, depicting poor people of various racial and ethnic backgrounds as confined by biased social standards. Jackson, Toole, and Kesey all tackle issues of socioeconomic status, and the latter two authors place significant emphasis on issues of race and ethnicity in the “treatment” of “mad” people.

1. “Dispute not with her”: Women and madness

Women and “madness” are closely linked in all four novels, but Shirley Jackson’s works perhaps most vividly encapsulate the oppression faced by “mad” women. Jackson’s stories, as Joan Wylie Hall points out, focus on “anxious” or “divided” women, many of whom are “imperiled” (qtd. in Rubenstein 311). These characters are often caught up in situations that entrap them and involve the absence of a strong and caring mother. Elizabeth’s mother has been dead for four years prior to the beginning of the plot in *The Bird’s Nest*, and Eleanor’s mother has also been dead for quite some time. Elizabeth and her mother were likely victimized by an abusive lover that Betsy remembers as Robin. Elizabeth and Eleanor shoulder guilt over their mothers’ deaths; Elizabeth may or may not have killed her mother during a physical outburst, and Eleanor resents having sacrificed so many years to caring for her uncaring mother. Elizabeth and Eleanor have both been confined by failed mothers and mother substitutes for most of their lives. They crave community yet are continuously omitted from society. Elizabeth’s multiple identities are her only community and might have been constructed as protective barriers to

guard against the abuse she endured during her childhood. Eleanor seeks external affirmation from her three companions at Hill House, especially from Theodora, who is more emotionally and sexually free than Eleanor. Eleanor ends up making a “suicidal sacrifice to the embracing/consuming mother/house” while Elizabeth and her personalities are subsumed into the identity Aunt Morgen and Dr. Wright want her to embody. These “mad” women are not allowed to exist as they are within society and are swallowed up by stronger parental substitutes.

Additionally, in *The Haunting of Hill House*, Mrs. Montague acts as a foil to Eleanor. Dr. Montague assumes the more submissive and obedient role in their relationship, and Mrs. Montague talks down to him about how she has a deeper psychic connection with the spiritual world and justifies it based on gender: “I have simply more of an instinctive understanding; women do, you know, John, at least *some* women” (136). Eleanor sees Mrs. Montague as an “impossible, vulgar, possessive woman” (140). Although Mrs. Montague functions as comedic relief, she also represents feminine oppression in her reversal of stereotyped gender roles. In an era when women were expected to be acquiescent and fulfill the role of domestic goddess, Mrs. Montague takes on more of a masculine persona. She is strong-willed, outspoken, somewhat narcissistic, and is having a fairly obvious extra-marital affair. She is also childless, as are Theodora and Eleanor, but, as a married woman, this would have been looked upon quizzically and perhaps critically by society. Although she probably would not fit a definition of “mentally ill,” Mrs. Montague has enough non-traditional gender qualities that make her an outcast in the small, intimate Hill House community.

Nurse Ratched is perhaps one of the most troubling characters in any of the novels discussed within this paper. Kesey’s treatment of the “Big Nurse” in his novel reinforces gender stereotypes and links them with “madness” and power. Nurse Ratched does everything in her

power to conceal her femininity, although this is easier said than done for the large-breasted woman. Nurse Ratched hides her femininity and her psychological issues behind a controlled, hardened exterior. Even her uniform is “starched so stiff it don’t exactly bend any place; it cracks sharp at the joints with a sound like a frozen canvas being folded” (42). Nurse Ratched is often described with adjectives for coldness, indicating that she tries to appear unemotional and comes off to others as being inhospitable and cruel. She emasculates the men of the ward in order to maintain a sense of control and power. In the end, Nurse Ratched is emasculated by McMurphy when he tears open her uniform and reveals her femininity. After Billy Bibbit commits suicide, McMurphy confronts the Big Nurse and criticizes her for “gambling with human lives – as if [she] thought [herself] to be a *God!*” before physically attacking her (266). Even though she has McMurphy removed from the ward to be lobotomized, Nurse Ratched cannot recover control over the ward. Chief even deprives her of the post-lobotomy vegetable version of McMurphy who would have served as her “example of what can happen if you buck the system” (270). Nurse Ratched is not able to regain her former sense of orderliness and power as the men in the novel find themselves holding the power to govern their own lives and speak up for themselves. Nurse Ratched, therefore, can be read as a cautionary tale for women who try to seek systematic dominance over men; empowered, the men rise in the end, disempower the woman, and remind her of her femininity.

The female characters in *A Confederacy of Dunces* can be considered as “mad” as their male counterparts, and they still face repression from a “mad” society. In the beginning of the novel, Mrs. Reilly is clearly dominated over by Ignatius, whose outrageous demands are almost comical. According to Mrs. Reilly, “Ignatius gets nasty if [they] run out of cake” (4). As silly as this sounds, this is an early indicator of the power structure inherent in their relationship. Even

though Mrs. Reilly is the parent, she is not an authority figure to Ignatius, who tends to disregard authority. Ignatius views his mother as a mechanism for meeting his needs and nothing more. His refusal to drive, though not directly responsible for Mrs. Reilly's drinking, is a contributing factor to Mrs. Reilly crashing her car. Ignatius blames her for the incident and claims that she has "ruined [his] stomach for the next few days" (26). As time goes on, it appears that Mrs. Reilly turns to alcohol, as well as to her time spent with Santa, as escapes from her unpleasant life at home with Ignatius. For women like Mrs. Reilly, the home is just as confining as an institution. Mrs. Reilly finally decides to end her cycle of oppression by standing up for herself to Ignatius, although she simultaneously disempowers him and labels him as insane, thereby making him a problem she can put off onto the staff at Charity Hospital.

2. Of men and madness

The men on the psychiatric ward in *One Flew Over the Cuckoo's Nest* exemplify masculine repression in a system that has labeled them as "other" despite their biological sex. Chief Bromden has lived for years in a mental fog, which results from a mixture of the psychiatric drugs he takes every day, electroshock therapy, and the painful aspects of his past. Despite the fog, Chief successfully eludes his traumatic past in the end "by confronting the forces that initially caused him to lose his identity and propelled him into the fog" (Tepa Lupack 70). The other men on the ward eventually find the courage to stand up for themselves with McMurphy as their example/martyr. After McMurphy attacks Nurse Ratched following Billy's suicide, the men on the ward begin verbally asserting themselves, and many check themselves out or are transferred elsewhere. In the end, only Scanlon, Martini, and Chief remain, and the former two remind Chief of McMurphy's once-espoused escape plan. While McMurphy was not physically powerful enough to lift the console and throw it through the window, Chief, with his massive

stature, is. This is symbolic of Chief finally becoming empowered to reclaim his freedom and identity outside the confines of the Combine. “Madness” is ensnaring for anyone socially bestowed with that label, and not everyone escapes unscathed. McMurphy likely knows full well that an attack on Nurse Ratched will lead to a lobotomy, but his actions, which are born of an aggressive frustration with the way the men on the ward have been oppressed to the point of suicide, help to liberate the surviving men. Those men, as Chief notes, want to be liberated so badly that they do nothing to stop McMurphy from attacking the Big Nurse. McMurphy helps them reclaim their masculine power by literally and figuratively stripping Nurse Ratched of hers.

Emasculation of men and the link to madness is less prominent in Jackson’s novels, though it is important to note that both doctors in Jackson’s works – Dr. Wright and Dr. Montague – are often perceived to be paternal figures who “care” for women (Elizabeth and Eleanor, respectively) who are considered “mad.” Despite this commonality, the two men have vastly different approaches to dealing with “madness” and view their masculinity in rather opposite ways. Dr. Wright sees himself as Beth’s (not so much Elizabeth’s, and certainly not Betsy’s or Bess’) knight in shining armor almost from the beginning. Dr. Wright initially expects her to be the embodiment of feminine hysteria. Instead, what he finds is “a personality disturbed and beset with problems it was incapable of solving alone,” thus the need for hypnotherapy (38). Dr. Wright discredits women throughout his puffed-up narratives and even assumes his readers will all be men, even though there were numerous women (such as Karen Horney and Sigmund Freud’s daughter, Anna Freud) in the field of psychology during and even prior to the 1950’s. Dr. Wright appeals to his young client because he states that he does not want to treat her as “a problem in arithmetic,” yet this is almost exactly what he does (47). He sees Elizabeth’s divided

psyche in binary terms of “good” (Beth) and “bad” (Betsy and Bess) and, since he believes himself to be essentially good, acts as the savior of the “good” and defeater of the “bad.”

Dr. Montague, on the other hand, does not view Eleanor in such a binary way; he sees many shades of gray. It can be conjectured that his compassion is linked to his own submissive, feminized role in his relationship with his wife. Mrs. Montague laughs off offers of protection from her husband and lets Arthur assume the authority role of patrolling the hallways of Hill House to ensure the safety of the others from paranormal dangers. Arthur, however, proves to be rather incompetent at protecting anyone, and Dr. Montague takes on a much more protective, paternal role throughout the novel. The intuition his wife previously accused him of not having due to not being a woman seems to exist within Dr. Montague. He is even able to predict that something bad will happen in Hill House before it occurs. Dr. Montague tends to hold on to outdated values of sexuality. He reads Samuel Richardson’s *Pamela: Or Virtue Rewarded* (in which the young heroine, who tries to escape the unwanted advances of a man, is “rewarded” with marriage to the man pursuing her and in whom she instills her virtues) and has a dislike for writers, such as Henry Fielding, who have a freer stance on human sexuality. Ever the doting father figure to his three companions, Dr. Montague even offers to read *Pamela* to them should they have trouble falling asleep. Dr. Montague’s repressed, somewhat patriarchal Victorian views on sexuality could potentially have contributed to or resulted from his wife’s obvious infidelity.

Like Dr. Montague, Luke Sanderson does not embody the ideal Gothic hero in the novel and cannot ultimately save Eleanor from the clutches of Hill House and her own mind. Unlike Arthur, he does not cower behind a door when Eleanor’s life is in peril; Luke climbs the rickety old staircase, sounding frightened and cautiously making his way up it to rescue Eleanor. Luke

certainly is not one of the “[c]rybabies” that Arthur tries to whip into manly shape at his school, but he is someone who experiences fear and feels emotions. Luke is more courageous than Arthur and not at all a paternal figure like Dr. Montague, but Luke is also not a hero. Like the rest of the men in the novel, he cannot save the “mad” woman from the darkness that lurks within her own mind.

Ignatius Reilly, who is “writing a lengthy indictment against [the twentieth] century,” views himself as a Renaissance man but is consistently perceived as an outcast and nut-job by those he encounters in New Orleans. It is highly tempting for readers to assume Ignatius’ madness. Ignatius is undoubtedly eccentric and might even possess “a heart of ice” as his mother claims (43). The case for an Oedipal Complex can be made. It would, however, be inaccurate to label Ignatius as purely neurotic. Ignatius, despite his intellectualism, seems to have stopped emotionally maturing at an earlier age, possibly in conjunction with the loss of his father. Ignatius’ attachment style, which could be best described as avoidant, coupled with his narcissism, prevents him from forming close emotional bonds with others. The only attachment he has is a symbiotic one to his mother. Ignatius is used to having his mother indulge his every whim and, much like a toddler, becomes upset when things do not go his way. Ignatius never accepts responsibility for his misdoings and is quick to belittle those he sees as being beneath him, especially women. This is characteristic of both avoidant and narcissistic personalities and leaves readers with little room to doubt Ignatius’ unstable mental status, yet Ignatius cannot be fully blamed for his cognitive and emotional stagnation. Ignatius is a spoiled man-child who, in order to escape what he views as oppressive forces, uses people to help him get his way.

Ignatius is not the only repressed male in the novel, though he is the easiest to deem “mad.” Patrolman Angelo Mancuso, Gus Levy, and Burma Jones are all subjected to the wills of the

women in their lives. Mancuso, who is already emasculated at work, is Santa's nephew and does not share her outspoken nature. Gus is ensnared in a loveless marriage where all he and Mrs. Levy seem to do is argue. Jones has the double-whammy of being black and poor. He ends up working at Night of Joy for the domineering Lana Lee. Mancuso and Jones are more similar to Boethius than Ignatius, as the two former characters tend to persist in the face of adversity better than Ignatius. Nice guy Mancuso is often the butt of jokes at the precinct, and, since he is viewed as being incompetent, is given exhausting grunt work. He only earns respect as a policeman and a man when he just so happens to be in the right place, at the right time. Mancuso gets the credit for busting Lana Lee's pornography distribution ring. In this case, the kind and virtuous man triumphs over the amoral and mean-spirited woman. Jones, who had caught onto Lana's schemes much earlier and is the voice of reason within the text, is the one who shows Mancuso the cabinet where Lana keeps her secrets. Jones costs himself his job at Night of Joy just to expose Lana's unscrupulous activities. He goes from being "a glorify broom expert" to a "vagrant" overnight (351). Despite the numerous oppressive forces working against him, Jones' identity remains stable and intact throughout the novel. He does not experience a downfall like Ignatius, rise in power like Mancuso, or have a wife who belittles him like Gus Levy. Jones tries to do better for himself, stands up for himself as best he can, and keeps a realistic outlook on society better than any of the other men in the novel.

3. The closet and the institution: Homosexuality and madness

Toward the end of *One Flew Over the Cuckoo's Nest*, Harding (who voluntarily admitted himself), McMurphy, and Chief are talking about their plans to exit the institution for good.

When McMurphy asks Harding what will happen to the men on the ward who might always need

psychiatric care, Harding's heartfelt reply serves as a powerful reminder of how homosexual "others" have historically been equated with "madness" due to how society oppresses them:

I don't think I can give you an answer. Oh, I could give you Freudian reasons with fancy talk, and that would be right as far as it went. But what you want are the reasons for the reasons, and I'm not able to give you those. Not for the others, anyway. For myself? Guilt. Shame. Fear. Self-belittlement. I discovered at an early age that I was – shall we be kind and say different? It's a better, more general word than the other one. I indulged in certain practices that our society regards as shameful. And I got sick. It wasn't the practices, I don't think, it was the feeling that the great, deadly, pointing forefinger of society was pointing at me – and the great voice of millions chanting, 'Shame. Shame. Shame.' It's society's way of dealing with someone different. (257)

McMurphy does not entirely understand Harding's coded language, even though McMurphy is also someone who, for reasons unique to his own self and situation, has faced the destructive forces society heaps upon those who fails to conform to its standards. There are different types of shame and guilt expressed and experienced throughout the novel, but it is Harding who puts his into words. The fact that Harding checks himself out in the end brings about a sense of hope; Harding's change in self-perception can be read as a signal that, if this happens on a larger social scale, homosexuality will be seen less and less as a shameful act and, to be certain, not the result of a mental disorder, which is a change actualized when the American Psychiatric Association declassified homosexuality as a mental disorder.

Living as a homosexual outside the confines of an institution was not ideal, as many lived in the closet, hiding away from the labels of "mad" and "sick." In *A Confederacy of Dunces*, homosexual undertones run throughout the novel and pervade the city of New Orleans. Like the

spinster *tantes* (the French word for “aunt” but is also a pejorative word for homosexuals) long ago housed in the old house on St. Peter Street where Ignatius attends Dorian Greene’s (who happens to be homosexual) party, social deviations are shut away. Homosexuality is still a taboo subject in the 1950’s and 1960’s, but, slowly, is coming more to the forefront of social consciousness, as evidenced by Dorian’s flamboyant nature and his house parties. When Ignatius and Dorian originally meet, Ignatius believes that Dorian’s friend Timmy, who is dressed as a sailor, is impersonating a sailor. This inspires a design in Ignatius’ mind to infiltrate the military with homosexuals who would bring about peace (through a massive orgy) instead of war. Dorian and Ignatius plan a rally for the cause, but the rally is just a giant costume party for Dorian and his friends. While this hilariously foils Ignatius’ grandiose plan to promote world peace and lord his achievements over Myrna, there is a seriousness to the subject which cannot be ignored.

Toole, who was drafted in to the army in 1961 and rose to the rank of sergeant, was placed in a barracks where men were openly homosexual. Toole was looked down upon after a gay instructor attempted suicide by overdosing on an APC (aspirin, phenacetin, and caffeine) cocktail; Toole found the man and waited half an hour to call for help because he knew the man would end up being court marshalled for attempting suicide. Toole knew from his firsthand experiences that homosexuality was present in the armed forces but, unlike his character Ignatius, understood that life was not one big happy orgy for those men. Alcoholism and recreational drug use ran rampant, and most gay men in the military knew that they had to keep their sexualities to themselves.

Shirley Jackson takes a similar approach with Theodora. Readers tend to speculate that Theodora is a lesbian. Theodora is not exactly open about her sexuality, but she is freer than Eleanor in her self-expressions. Theodora is an artist and is relatively independent. She

represents how women were “beginning to reject strictly prescribed roles in the Victorian era to the scientific designation of lesbianism as a type of aberrant sexual behavior” (World Heritage Encyclopedia, para. 30). Theodora’s potential lesbianism might be a foil for Eleanor’s lack of autonomy and romantic experience. Eleanor’s crush on Luke reduces readings of eroticism between Theodora and Eleanor, and the emphasis on the darkness of the mind supersedes any possible love triangle between the three characters. Little is revealed about Theodora’s past and her relationships, save for that she “departed in cold silence” from the home she shares with a friend after an angry dispute and heads toward Hill House (5). The terms “homosexual” and “lesbian” do not appear in the text, but Theodora, regardless of her sexual preference, epitomizes the struggle of modern women to separate themselves from oppressive gender expectations. The fact that Theodora does not speak about her personal life reflects how many homosexuals refrained from discussing their sexualities.

4. Socioeconomic status

Shirley Jackson’s characters mainly represent white, middle class Americans. Even Elizabeth has been endowed with a relatively sizeable fortune in the aftermath of her mother’s death, although her finances – just like the rest of her life – are controlled by Aunt Morgen. Elizabeth works a mediocre position at the local museum, but it does not seem to offer her much autonomy. Elizabeth’s frugality is juxtaposed to Aunt Morgen’s gluttonous greed. Their meals together are “calculated exquisitely to Aunt Morgen’s appetite” although Elizabeth gets served equal portions (13). Elizabeth has relatively little independence, but Betsy cleverly devises a plan to escape to New York and relies on Elizabeth’s money to get her through. Although Elizabeth is forced to be frugal, Betsy is more aware of what trouble she might attract if she lets her financial standing be known. When Betsy slips up and tells an older woman on the train that all her money

is in her suitcase, Betsy immediately recognizes this as a mistake and stands up to the woman trying to take her suitcase. Betsy hangs onto her money, but money cannot buy her what she is missing most – her mother.

Unlike Elizabeth and her personalities, Eleanor Vance is relatively poor. The only thing that is partially hers is the car she drives to Hill House. Eleanor is not supposed to take the car since she shares it with Carrie, who refers to the vehicle as her car. Carrie even engages in psychological warfare by telling Eleanor that their mother would not have wanted Eleanor taking the car to go “run wild” with an unknown man (Dr. Montague) for probably unscrupulous reasons (6). Eleanor takes the car anyway and refrains from telling Carrie where she is going. Without the car, Eleanor is confined to her miserable life with Carrie and her family. Eleanor’s taking the car demonstrates that Eleanor is trying to pursue freedom and happiness. Eleanor, however, realizes that she can never go back to living with Carrie now that she has taken the car and tasted a little bit of freedom. She has no one waiting for her, no one wanting her to go home. Instead, she comes to view Hill House as her home, and she at least partially willingly submits to its ensnaring grasp. Since Eleanor cannot possess, she allows herself to become a possession.

In *One Flew Over the Cuckoo’s Nest*, it is implied that McMurphy, who is sent to the hospital after being found guilty of statutory rape, assault and battery, disturbing the peace, and gambling while placed on a work farm following his dishonorable discharge from the U.S. Marines, is financially and mentally unstable. The doctor at the work farm states that McMurphy “might be feigning psychosis to escape the drudgery of the work farm” (46). At first, McMurphy sees the institution as providing him small luxuries he did not receive at the work farm. For example, McMurphy is delighted to get his “first glass of orange juice in six months” (92). On the work farm, he was served food that “was burnt black and had potatoes in it and looked like

roofing glue” (92-93). However, when McMurphy says he will nick some food for the black cook who, to McMurphy, looks like he is starving, Nurse Ratched informs him that staff are not allowed to eat with the patients and cannot accept food from them. McMurphy is restricted from getting up to leave the mess hall, and it is then that he realizes that his liberties in the hospital are limited, possibly even more so than on the work farm. The type of care McMurphy assumed he would get on the psych ward is not, in fact, what he receives. He starts to see jail, while not exactly preferable, as almost a step up from the soul-crushing monotony and restrictions he experiences on the ward. Even as an “Acute” (someone who is still mostly physically and cognitively functional), McMurphy has little power. Certainly, socioeconomics has little sway here, but coming from a working-class Irish background, McMurphy knows he must work his way up to the top of the food chain by being the Alpha male of the group.

In a similar vein, Burma Jones – who is probably the most glaringly obvious statement an author can make on the type of oppression faced by blacks in the south during the 1950’s and 1960’s – must work his way up the socioeconomic ladder in order to achieve power. The police tell Jones he “better get [his] ass gainfully employ” (31). Jones begs Lana Lee for the porter job at Night of Joy and earns a measly twenty dollars per week (about one-hundred and sixty-two dollars in 2017 dollars) for working there. If he does not make any money, Jones will inevitably find himself a vagrant in trouble with the law. Jones knows Night of Joy is a seedy business from the get-go but has no other choice than to work there. Jones befriends Darlene, a stripper with a cockatoo she is training to perform with her on stage at Night of Joy, and tells her that Lana is “kinda buyin [him] off a auction block” (34). Unlike Ignatius, who blows every job opportunity that comes his way because he thinks he should not have to work on anything but his writing, Jones keeps his job as a porter until the time is right for him to rat Lana’s pornography ring out

to the police. Losing the job means vagrancy for Jones, but he is mistreated so frequently by Lana that it eventually becomes worth it to expose Lana's secret side business. Certainly, Jones has a calculating and critical personality; as a poor black man, Jones has to be resourceful and independent, making him a foil for the narcissistic Ignatius. Unlike Ignatius' self-pity, Jones pities others who are caught up in an oppressive social system. He even stands up for Darlene when Lana tells him Darlene is a B-drinker. Jones knows that Darlene is "*force* to be a B-drinker" because she is struggling to break into show business. When Lana states that Darlene is lucky she hasn't been shipped off "to the funny farm" for her lacking intelligence, Jones says she would be better off there (72). The world outside of the institution is, for people like Jones and Darlene, a harsh place where dreams go unfulfilled and opportunities for advancement are unequal between certain groups of people. Those born without silver spoons struggle to acquire them, and factors such as gender and race prevent people like Darlene and Jones from rising out of poverty.

5. Race and ethnicity

Race and ethnic identities place characters like Burma Jones into systematically oppressed categories, leaving little to no opportunity for advancement within society. Jones was born an outcast with the double-whammy of being poor and black. He has never fit into the privileged white community in New Orleans. At one point, when discussing Darlene using her cockatoo in her show, Jones jokes that, "[i]n color bars peoples all the time tryina keep birds *out*" (106). Jones sees through the façade of charity better than anyone else in the novel. He knows that Lana's so-called "charity" for the orphans is just a shady cover for her pornography ring operation, and Jones takes jabs at her for not being more charitable to her underpaid employees. The false front of charity for the underprivileged extends to Charity Hospital, where Mrs. Reilly

threatens to send Ignatius, Mrs. Levy threatens to send Gus, and Jones thinks Darlene would be better off. Jones' view of "charity" and Charity Hospital is different from that of Mrs. Reilly and Mrs. Levy, two moderately-privileged white women. Jones, who faces institutionalized racism outside of an actual mental institution, knows that there is no genuine charity to be found in the outside world for those who do not adhere to social norms.

Still, as Ken Kesey demonstrates in *One Flew Over the Cuckoo's Nest*, racism is prevalent inside the walls of an institution, and there is possibly even less compassionate charity to be found. Chief has been reduced to a silent man with a broom at the beginning of Kesey's novel. His cultural heritage has been stripped away by white people, including his own mother. Chief cannot fully embrace either racial identity; if he is white, he is an oppressor, but if he is Native-American, he is oppressed. Even the black orderlies on the ward express racist attitudes toward Chief. When they find out that Chief is signed up to go on McMurphy's fishing trip, one of them asks the others, "Why, who you s'pose signed Chief Bromden up for this foolishness? Inniums ain't able to write" (191). One of the other orderlies replies, "What makes you think Inniums able to *read*?" These generalized assumptions reflect a difference in power and privilege between non-institutionalized black people and institutionalized Native Americans. The three orderlies seem aware that their job titles are their only sources of power; the only power they can hold is over the institutionalized men on the ward. It is Chief, though, who develops an authentic sense of identity in the end. After Chief escapes the hospital, he considers going back to his former village to see if the guys he knew there had not "drunk themselves goofy" and "to see what they've been doing since the government tried to buy their right to be Indians" (272). Chief also seeks total mental clarity and knows he can get that from reuniting with nature. Chief yearns to

return to his roots and rebuild those bonds broken by the “madness” he has been subjected to for years on the ward.

Chapter IV: “An occasional cheese dip”: Humor in an Insane World

Humor might not seem like much of a cure for psychiatric ailments, but in an insane world, humor functions as something of a coping mechanism. Nowhere is this more obvious than in post-WWII pop culture that deals with social chaos and individuals caught up in it. The social upheaval generated by the aftermath of WWII was no laughing matter, but it was during this era that comedians rose to fame for turning serious social and racial situations into comedy gold. Lucille Ball and Phyllis Diller provided voices for women, while men like Mel Brooks and Redd Foxx brought up racial issues in their comedy acts. Comedy’s influence seeps over into the literature written in the years following the end of WWII.

In *A Confederacy of Dunces*, humor is used to make caricatures of characters who might otherwise be simply tragic figures. Ignatius, above all, epitomizes this type of humor. He is not intentionally funny and takes himself rather seriously, but the situations he ends up in and the ways he deals with them are quite often hilarious. One of the funniest moments in the novel occurs when George shows Ignatius, who sees himself as a modern Boethius, a pornographic image of Lana Lee holding a copy of Boethius’ *The Consolation of Philosophy*. When he had been shown a pornographic image in high school, Ignatius “collapsed against a watercooler, injuring his ear” (288). However, due to the mere presence of Boethius’ work, Ignatius views the picture George shows him as being “far superior” because it depicts something he likes. He cannot, however, stand a comedy film he watches in the theater because an actress in it is a “Chinese communist agent sent over to destroy us” (291). Ignatius even shouts “Rape her!” when the actress appears on the screen. Ignatius’ reaction is, of course, riddled with racist and sexist language, but it also reflects the comedic aspect of Ignatius’ eccentric character. Ignatius perceives comedy as smut and smut as intellectualism, never realizing his own hypocrisy.

Despite serious implications of the bigotry pervading American culture in the 1960's, Toole provides readers with comic relief by adding a level of sheer ridiculousness to Ignatius' personality and interactions with other caricatured characters throughout the novel.

While Jackson's and Kesey's works generally carry more serious tones, there is humor to be found in their works. In the latter half of *The Haunting of Hill House*, Jackson introduces the quirky spiritualists, Mrs. Montague and Arthur. As is the case with Ignatius in *A Confederacy of Dunces*, Mrs. Montague is narcissistic and condescending. The only person who seems to like her is the equally-narcissistic Arthur. Upon her arrival, Mrs. Montague insists that she is to be lodged "in your most haunted room, of course. Arthur can go anywhere" (133). While Mrs. Montague has brought her assortment of spiritualist tools, Arthur has brought his golf clubs "just in case" (134). Mrs. Montague reacts negatively to Theodora asking her "Just in case of what?", but the situation is rather comedic, since the reader is prompted to imagine someone being bored enough during a paranormal investigation to practice their swing.

The investigation of Hill House itself is ludicrously humorous, revealing a mock-Gothic layer to the novel inherent in Mrs. Montague's paranormal zeal. Firstly, Mrs. Montague refers to her planchette as though it is a person, which Luke pokes fun at behind her back. Further, Mrs. Montague claims, quite falsely, that a spirit guide named Helen (or Helene, or Elena) has warned her about the spirits of a "mysterious monk" and a nun, whom Mrs. Montague believes haunt Hill House. Mrs. Montague and Arthur speculate that the nun and monk had a sexual relationship, that the nun got "walled up alive," and that "[t]hey always did that, you know. You've no idea the messages I've gotten from nuns walled up alive" (139). When Dr. Montague points out that there are no documented cases of this ever happening, Mrs. Montague

narcissistically challenges him and upholds her spiritual conjectures about Hill House to be factual.

Kesey reminds readers that humor is one of the most important coping techniques for living in a mad world. At one point in the novel, McMurphy tells the men on the ward that “when you lose your laugh you lose your *footing*” (65). It is laughter that alerts McMurphy to Chief’s falsifying being deaf and ultimately brings Chief out of the fog. At first, McMurphy laughs and sings. Chief overhears him one morning, singing in the latrine as if “he didn’t have a worry in the world” (83). McMurphy’s jubilant nature does not go unnoticed, and his strength and laughter become infectious. McMurphy is dynamic, in a perpetual state of motion and sound. This leads Chief to believe that the Combine is unable to catch McMurphy. McMurphy reminds Chief of when Chief and his father laughed at the government officials who came from Canada to prospect their land. As he reminisces, Chief remembers “what laughter can do” (86). Laughter holds power. It is not a false sense of power like that of Nurse Ratched; laughter has healing properties and helps bring people together. Had McMurphy been an easily silenced, already inherently oppressed patient upon admission to the ward, Chief might never have broken his own silence and freed himself from the repressive Combine. This ending suggests that not only is a recovery process possible, it requires a combination of humor and determination. Having the ability to laugh in the face of adversity lends strength and will-power to those striving to overcome repressive psychological forces. Perhaps there is hope for a “cure” after all if the “cure” is laughter.

Conclusion

Today, individuals with various diagnosed mental disorders live seemingly functional lives within general society, yet not all of those who seek treatment do so willingly. Those who either willingly or unwillingly seek psychiatric care do not always experience successful treatment. America's few remaining in-patient institutions have limited space, and health care coverage restricts the amount of time patients spend in these places. By 2007, American institutions only held about 57,000 beds and had an annual admissions rate of about 240,000 individuals (Penney and Stastny 183). What is to be done with the "mad" living in contemporary America? A video posted by the Facebook page Opposing Views on October 21, 2016, attempts to answer this question, as the video's creators discuss the differences between psychiatric treatment in Italy and America ("Mental Health Care in America vs. Mental Health Care in Italy"). Mental hospitals do not exist in Italy; instead, clients receive community-based care and are encouraged to be active participants in daily events. In America, on the other hand, men and women with various diagnoses are sent to psychiatric wards and hospitals or, if they're considered violent or dangerous criminals, they are slapped with prison sentences and guaranteed little-to-no rehabilitation geared toward their diagnoses.

So, where is the outrage and retaliation against the social pressures placed on individuals that we see in post-WWII literature? It is now up to twenty-first century American writers to respond to issues of psychiatric treatment and the question of society's inherent insanity much in the way that Shirley Jackson, John Kennedy Toole, and Ken Kesey did in the 1950's and 1960's. The silenced population of the mentally "ill" still need advocates to help them tell their stories. As Robert Whitaker writes in the foreword to *The Lives They Left Behind*,

Today, we tell ourselves, we are much more ‘humane’ in our treatment of those with mental health problems, and our therapies are better, too. Yet any close examination of our care today should give us pause... The number of psychiatrically disabled people in the United States has increased from 600,000 in 1955 to nearly six million today, a statistic that shows we do not still have a form of care that truly helps people recover, and even suggests that we are doing something today that may actively prevent recovery. (11)

Contemporary writers, much like Jackson, Toole, and Kesey, are gifted with numerous breakthroughs in psychological theory, and there is a burgeoning cultural awareness of the language used to describe those with differing abilities. Literature is therapeutic for both its writers and its readers. Literature exposes issues that are often kept out of view because of their taboo nature and because those with power and privilege are bound by cognitive dissonance. Shirley Jackson, John Kennedy Toole, and Ken Kesey used their command of written words to drag from the shadows the serious psychological ramifications of physical, mental, and emotional confinement shrouded in the guise of a cure for “madness.” Their novels remain as signifiers of the need for awareness and advocacy for those given “mental illness” and “disability” labels. They also continue to function as metaphors for the social stressors put on individuals who, when they fail to live up to these lofty expectations, are perceived as being “mad.” Guilt, shame, fear, and isolation of the “mad” individual result when society does not know how to deal with someone who deviates from the norm.

Perhaps our greatest lessons as contemporary practitioners come from these post-World War II era writers. We can see how important it is to treat patients with dignity and respect; we try to avoid being Nurse Ratcheds and Dr. Wrights. We make more allowances for eccentric individuals like Ignatius and no longer view homosexuals as mentally disabled. We can look

back on these novels and see how far America has come in just over sixty years in terms of how those with mental “illnesses” are treated. We recognize the intense social pressures placed on Americans. Shirley Jackson, Ken Kesey, and John Kennedy Toole – much like their fictional counterparts – struggled with their own mental health issues, as do some of their contemporary readers. What these authors demonstrate is that positive community bonds, self-expression, and laughter are possibly the most effective forms of therapy any of us can hope for in facing the concept of “madness.”

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