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I Write Therefore I Am

Rewriting the Subject in “The Yellow Wallpaper”
and
The Singing Detective

A thesis presented in partial fulfilment of the requirements for the degree of Master of Arts in English at Massey University

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Abstract

Focusing on “The Yellow Wallpaper” (1892) by Charlotte Perkins Gilman and The Singing Detective (1986) by Dennis Potter in dialogue with theories from Freud, Szasz, Foucault and Butler, my thesis considers the role of medicine in encouraging a patient toward a normative subjectivity. The protagonists of each text have become ill as a result of their inability to accept the social contradictions and lies upon which gendered subjectivity is reliant; the unnamed narrator of “The Yellow Wallpaper” comprehends femininity as servitude to male demands, while Marlow of The Singing Detective desires the power patriarchy offers him as a male, but his loss of belief and faith prevent his ascension to masculine status.

Both the narrator of “The Yellow Wallpaper” and Marlow resist the imposition of normative gender by practitioners of mainstream medicine. Therefore, a more complex and subtle method of treatment, the psychoanalysis developed by Freud, is employed in The Singing Detective, thereby encouraging the patient to identify illness and discontent as personal, not societal, responsibility.

I commence the thesis with an overview of the unequal power relations presupposed and encouraged by medical discourse. Through a process of ‘hystericisation’ the patient is infantilised and made dependent upon medical care. Linguistic control is central to manipulating patient behaviour within the hospital, and correspondingly the narrator of “The Yellow Wallpaper” and Marlow both seek a new subjectivity through their writing. Difficulties in appropriating language leads to internal incoherency for the protagonists, met by a split subjectivity – a defence mechanism which allows the protagonists to deviate from, at the same time as preserving, their ‘good self’.
The refusal of “The Yellow Wallpaper’s” narrator to relinquish her defiant self and assume femininity is contained by patriarchy – embodied by her husband, John - as insanity. The strict limitation upon a nineteenth-century woman’s expression prevents her from positively escaping her physician/husband’s script leading to her mental demise. By contrast, Marlow successfully resocialises himself by modifying the hypermasculine persona he idealises, and is finally situated to confront and reform the social contradictions that precipitated his ill-health. However, subdued by having been led to identify discontent as a personal problem, Marlow is unlikely to challenge the power relations which have made his subjectivity possible. His capitulation to normalisation demonstrates a fundamental point linking the otherwise divergent theories of Freud and Foucault, that the creation of agency first requires the subject’s subordination.
Acknowledgements

In the television program Blackadder the Third, Blackadder feigns ignorance of Doctor Samuel Johnson’s New English Dictionary: “And what dictionary would this be?” The doctor responds passionately:

The one that has taken 18 hours of every day for the last ten years!
My mother died; I hardly noticed. My father cut off his head and fried it in garlic in the hope of attracting my attention; I scarcely looked up from my work. My wife brought armies of lovers to the house, who worked in droves so that she might bring up a huge family of bastards; I cared not! (Ink or Incapability)

While it would be grossly exaggerating to say that this project has occupied me for as long, or has diverted me so totally from social life, it has been an all-encompassing endeavour! But, as I hope to explicate in this thesis, writing does not occur in isolation, and so there are some people to thank:

I am very grateful to my supervisor, Jenny Lawn, for her generous assistance, loaning of books, interest and encouragement throughout the year.

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Foreword

French psychoanalyst Andre Green, an internationally honoured member of the Freudian community, has joked that “we are all hysterics . . . except when we are writing papers.” Any honest scholar knows that we are all hysterics especially when we are writing papers. (Showalter, Hystories 13)

This Masters thesis, in content, is about the narrator protagonists of “The Yellow Wallpaper” and The Singing Detective, and their attempts to write themselves anew. The function of the protagonists’ self-narrativity is to generate a new subjectivity, a subjectivity that does not make them sick. Specifically in these texts, the protagonists wish to defy the medical diagnosis which purports to tell the truth of their health, and redirects their troubled subjectivity towards conformity.

During the course of the year I recognised the role this thesis was fulfilling within the terms of my own self-narrativity: like the narrator of “The Yellow Wallpaper” and Marlow I am discursively constituting a new identity which deviates from past identifications with a ‘sick self’. A few years back, about 1994, my doctor mentioned that he had given a paper on me at a conference.1 From memory, my response was little more than “Oh”, but I do recall feeling a little proud that my condition was of enough interest for him to present his findings to his colleagues. I didn’t think much more about it and have never asked him what he said about me. I am hesitant to note the anecdote here – as if I am trying to suggest that I am ‘special’ in some perverse way; however, what I am leading up to is, that while reading a Freudian case study for this thesis, I realised that the subject of the study could be me. Of course, literally it
could not be me, but somewhere, ‘out there’ in the medical world, information about me circulates; I do not know what it says, and although of me, it does not belong to me.

Both the narrator of “The Yellow Wallpaper” and Marlow are talked about and behaviour noted upon in reports, which startles Marlow in particular; the narrator of “The Yellow Wallpaper” is so used to being absent from discussions about her health, she merely mentions it in passing. But it is disconcerting. Being a ‘case’ is objectifying; the patient’s authority to divulge personal information is not required, nor is their input. So when I was reminded of my doctor’s passing comment after six or so years, I felt very sad for the frustrated and sick young woman who had experienced some measure of meaning and pleasure in being of interest to a small portion of the medical world.

I then felt irritated that a version of me is in the public domain which I took no part in and especially that it is no longer current. There is a static piece of medical discourse out there which still defines and constitutes a ‘pseudonymous me’ as debilitated. In the intervening years I have, like the narrator of “The Yellow Wallpaper” and Marlow, become a new person, no longer primarily identifying with my ‘sick self’. Part of this process has stemmed from undertaking academic study. Not just the writing of this thesis, but also each year of study has helped reshape my identity.

My own story therefore operates as a metatext to this thesis. Diane Price Herndl remarks that Gilman was able to bring about her recovery from debilitating nervousness through the ‘writing cure’: “[i]n writing the story of the invalid, [Gilman was] able to avoid living it” (124, italics in original). Thus, ‘disciplining’ myself into the field of English Literature has enabled me to create a new life narrative: within the terms of this thesis I have been able to write about sick characters rather than enact that position. The objectifying distance
affected by writing about the sick ‘other’ is indeed therapeutic; as Showalter writes, “the act of telling one’s story may be therapeutic even when it is fictional” (Hystories 205).

And so I suggest that this thesis is my own public record of who I am at present, serving the same purpose as the narrator’s journal or Marlow’s revised novel. As such, the thesis counters earlier medical discourse. The pen has been passed to this patient and the ensuing possibilities exhilarate and challenge because ‘when I don’t know what to write, my pen waits for me’.2
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Introduction

Dennis Potter explains to Graham Fuller in an interview, “[b]ecause the pain was so great he was trying to think of ‘The Singing Detective’ novelette that he had written, and trying to rewrite it simply as an exercise in not going mad. That in turn led him to start assembling his life” (Potter on Potter 87). Potter speaks of Philip Marlow, the protagonist of his 1986 television serial, The Singing Detective, but the character’s motive for (re)writing his novelette applies equally to the unnamed female narrator of Charlotte Perkins Gilman’s short story “The Yellow Wallpaper” (written 1890, published 1892); that is, the two protagonists write in an effort to stem insanity. The narrator of “The Yellow Wallpaper” and Marlow fear madness will result from their chronic ill-health, the cause of which is their troubled subjectivity. They regard writing as transformative, and therefore therapeutic. Yet, Marlow’s writing culminates in recovery, a refutation of his long-term crippling dependency, while the narrator’s position at the close of “The Yellow Wallpaper” is ambiguous; the narrator “[feels] ever so much better” (Gilman, “Yellow Wallpaper” 44) but is metaphorically crippled – she simultaneously protests at and submits to nineteenth century femininity.

The aim of this thesis is to compare the two protagonists’ processes of subject (re)formation through writing and reading. I will discuss the Foucaultian concept of the subject as a derivative of power. As such, the subject’s ability to manipulate the political impetus at the root of subject construction is circumscribed. However, I suggest that the parodic treatment of power relations in the two texts implies more subtle forces are operating within the process of subject formation. Undoubtedly the power relations which Michel Foucault describes in Discipline and Punish: The Birth of the Prison
(1975) are blatant in both “The Yellow Wallpaper” and The Singing Detective. The Gothic tropes (which by convention are excessive) used in “The Yellow Wallpaper” help convey the narrator’s oppression and incarceration within the ‘haunted’ ancestral hall’s attic as part of a long tradition, that is patriarchy, just as Gilman’s story participates in, and perhaps gently mocks, the Gothic genre.³ Within The Singing Detective the power relations are hyperbolic; Marlow’s perceived powerlessness is portrayed by his inability to prevent the extremely fragile Mr Tomkey climbing on top of him in the night, mistaking Marlow for his wife, Mabel (Potter, Singing Detective 35-36).

The texts foreground the processes of reading and interpreting, and thereby self-consciously direct our reading, and anticipate their own interpretation: in “The Yellow Wallpaper” we read of the narrator reading (and writing down her evolving interpretation of) the wallpaper as a text; The Singing Detective shows a patient, Reginald, reading Marlow’s novelette ‘The Singing Detective’ at the same time as the author revises the out-of-print text at the other end of the ward. In both ‘metatexts’ – “The Yellow Wallpaper” and The Singing Detective – the text being read is revealed as difficult and complex; the narrator devotes her time and failing energy to making sense of the wallpaper in her room, and Reginald reads Marlow’s novelette slowly and haltingly, but with much pleasure. For Marlow, the revision of his text is a painful journey in which he must repeat and rewrite not just moments from his novel, but from his past as well. The revised ‘The Singing Detective’ is the by-product of Marlow’s desire to articulate and make sense of (or ‘work-through’) his ill-health, just as “The Yellow Wallpaper” is the narrator’s secret memoirs of her bid to defy her society’s expectations.

“The Yellow Wallpaper” and The Singing Detective both encourage and comment upon a psychoanalytic interpretation of the protagonists’ mental
health. A psychoanalytic critique complements the Foucaultian power relations by explaining an individual’s psychological internalisation of social forces. Foucaultian and Freudian theory is specifically blended in Judith Butler’s explication of subject formation as performance, a speech act, and Butler thereby informs my reading of the two texts as enactments of a new subjectivity for the protagonists.

For the narrator of “The Yellow Wallpaper” and Marlow the process of transforming their subjectivity necessitates resituating themselves within their social context, and they endeavour to do so through the powerful, creative act of rewriting their own life narrative. The writing the protagonists undertake is performative in that it impacts on their present and so reconfigures their future. Each protagonists writes and then assimilates their fantasised alter-ego: as the narrator of “The Yellow Wallpaper” progresses in her interpretation of the wallpaper (and the corresponding writing of her diary) she gradually embodies the revised text, the wallpaper, until she finally emerges as the wallpaper woman; and Marlow is eventually able to leave the hospital ‘veritably’ the Singing Detective after he has understood how his past has impacted on his various narratives, and has conflated his fiction with the present.

It should be kept in mind that, while potentially liberating, rewriting the self does not necessarily confer either social acceptance or unequivocal personal satisfaction; subjectivity remains a point at which social demands and personal desires can conflict. Nor will the new subjectivity necessarily represent a fully realised subject – that is, able to demonstrate agency, self-control and self-determination. Further, I will argue that while patriarchy may concede particular points when under pressure, it will equally regroup and create new means to constrain its subjects. For example, the late nineteenth-century faced an ‘epidemic’ of ‘hysterical’ women, at a time when, ‘coincidentally’, growing
numbers of women were seeking enfranchisement and social equality. The
dilemma faced by the narrator of “The Yellow Wallpaper” confirms this
example; her desire to be an equal and contributing member of society, which
involves access to masculine privileges, is thwarted and her ensuing ill-health is
construed as feminine fragility to be remedied by the ‘rest cure’.

Gilman wrote the short story after having taken the ‘rest-cure’ herself in
1886 under Silas Weir Mitchell’s observation. She had hoped that the
prominent American neurosurgeon would help her get over the depression she
suffered after giving birth. Unfortunately, his directions to forgo intellectual
stimulation and to embrace domesticity did not ease her emotional sensitivity
(Gilman, Autobiography 96). Finally, Gilman left her husband and took up a
career of lecturing and writing, through which she critiqued the social
inequities between men and women (96). Gilman did not succumb to the
insanity she writes into her story. In direct contrast, she became known for her
prolific didactic lecturing and writing – even writing and editing her own
journal, The Forerunner, between the years 1909 and 1916. “The Yellow
Wallpaper” is anomalous within Gilman’s oeuvre, perhaps Herland too, in that
the literary qualities of the story are not stifled by propaganda. Although
Gilman claimed that “The Yellow Wallpaper”, like all her writing, was written
with a purpose (her political intention with “The Yellow Wallpaper” was to
expose and change the treatments imposed upon hysterical women [121]), its
inclusion in William Dean Howells’ anthology of American stories alongside
works by Edith Wharton, Henry James, and Mark Twain signals the story’s
literary status (Erskine and Richards, Introduction 6-7).

Dennis Potter also drew on autobiographical detail to write The Singing
Detective, although, again, the narrative itself is not Potter’s life story. Potter
grew up in the Forest of Dean, which bears a strong similarity to the mining
community portrayed in the childhood narrative, and he also suffered the debilitating skin condition Marlow is afflicted with; however, Potter’s mother did not have an affair, nor did he desecrate his teacher’s desk as a child. It is the themes and issues Potter considers in *The Singing Detective* which draw upon his experience; attitudes towards the sick in hospital, how cultural attitudes and rituals replace open and constructive communication, how truth is merely that which is socially condoned or communally agreed.

While the two texts under consideration are both thematically concerned with subjectivity, there remains a disparity in genre and medium. “The Yellow Wallpaper” is a modern short story published in 1892, *The Singing Detective* a postmodern six-part television serial first televised by the BBC in Britain in 1986 directed by Jon Amiel. As a modern text, “The Yellow Wallpaper” exploits the conventions of first-person narration, referential and semantic ambiguity and an emphasis upon subjectivity – how the narrator comprehends her situation, rather than literally what she sees – to convey the narrator’s increasing internal incoherence. Gilman achieves the latter through linguistic irony, juxtaposing conflicting ideas and comments, and thereby undermining any literal interpretation of her text. Gilman had difficulty getting “The Yellow Wallpaper” published and, when printed in the *New England Magazine* in 1892, the story provoked some debate calling for its censure (Gilman, *Autobiography* 120). Elizabeth Ammons points out that the criticism of “The Yellow Wallpaper” did not question the reality of the narrator’s experience: “Rather her story was too true, the information in it too depressing. It should remain buried, untold” (259).

*The Singing Detective* also incited controversy, but enjoyed weekly audiences of around eight million (Coward 84; Cook 243) via television – a medium which Potter recognised and valued as pervasive and intimate (Potter,
Introduction 21). The postmodern conventions of narrative fragmentation and intertextuality pervade The Singing Detective: Film noir, Raymond Chandler’s Philip Marlowe, Christopher Marlowe’s Doctor Faustus (1604), 1940s songs, Freudian references, allusions to an Agatha Christie novel, and numerous metalepses and blurring between the four narrative levels combine to create a dense dialogue between past and present texts, metaphorically playing on Marlow’s own self-narrativising by way of rewriting his personal past and present into a comprehensible whole.

Yet, despite their profound differences in genre, these two texts offer a complementarity and continuum precisely through their temporal and gender differences; “The Yellow Wallpaper” and The Singing Detective convey complementary renderings of a female and male protagonist respectively within the normalising medical context, both seeking to readdress their patriarchal subject formation. In “The Yellow Wallpaper” the narrator’s oppression under a stifling phallocentric regime is unquestionable, but, significantly, Potter reveals in The Singing Detective that patriarchy also exacts a high cost from those whom it is supposed to benefit, namely men.

So if both women and men are made unhappy – to the point of illness – by the expectations of patriarchy, despite modifications to the expression of those expectations over time, how can the ideology persist? Does the dissatisfied subject in fact collude in the perpetuation of the system which he or she seeks to challenge? If Western society remains patriarchal despite change which could undermine its dominance, as I suggest in my comparison of “The Yellow Wallpaper” and The Singing Detective, how does it contain and control its subjects so that, fundamentally, the status quo remains? These are issues that I will address, with an increasing awareness of textuality, through the works of
Freud, Foucault, Butler, and Szasz. But first, the texts themselves require exposition.

**Plots and Clues**

“The Yellow Wallpaper” is the disturbing fictional journal of an unnamed young mother whose “slight hysterical tendency” (Gilman, “Yellow Wallpaper” 30) becomes exacerbated by the ‘rest cure’ prescribed by John, her physician/husband. Under the guise of a physician’s superior knowledge and a husband’s love, John isolates his wife in the attic of a country home, then circumscribes her creative aspirations and severely limits her company. Against the injunctions of her husband, the young woman secretly writes of her experiences, presented to the reader as a diary in the first person and present tense. However, she finds writing in secret enervating, and so assumes the attic wallpaper as the focus of her creativity. In contrast to the ‘dead’ paper upon which she writes her progressive demise, the wallpaper offers an intellectual challenge with its irritating yet provocative pattern, changeable “smouldering unclean yellow” (32) colour, and subtle and enduring odour. Through the wallpaper, the narrator ‘reads’ her own depressing situation; the pattern strangles and thwarts an ensnared woman she imagines within. The narrator battles against the pattern to help the wallpaper woman escape, ultimately coming to conflate her subjectivity with that of the imaginary woman. The narrator’s new subjectivity may be her honest interpretation of and protest against her stifled position within patriarchy, but it is defined as insanity by the dominant discourse, of which her husband is both a representative and an agent.

*The Singing Detective* is a six-part television programme that follows the protagonist Philip Marlow’s recovery in hospital from a debilitating skin
disease (psoriasis arthropathy). I will base my textual study of *The Singing Detective* on the transcript, but will refer to the television serial when it reinforces or contextualises a point. I will also note, when relevant to the thesis, where the transcript differs from the television serial. Within the hospital context, Potter contrasts the medical care Marlow receives for his physical complaint with that provided by the hospital psychotherapist, Doctor Gibbon. It becomes evident that the combination of Marlow’s creativity and his opportunity to discuss his past with the psychotherapist is more beneficial to his sustained well-being than the care provided by the medical staff. Through the complex interplay of four narrative levels, the viewer learns commensurate with the protagonist the debilitating attitudes precipitated by traumatic events from his childhood, which he compulsively repeats. The four narratives convey Marlow’s childhood past, his present hospitalised self, and two fantasy narratives – past and present – which reveal his ‘good self’, or unobtainable ideal, as the Singing Detective, and his ‘bad self’ as Mark Binney. In an attempt to maintain his sanity within the hospital, Marlow mentally rewrites his out-of-print crime novelette, ‘The Singing Detective’ (notated throughout the thesis as ‘The Singing Detective’). At the same time he revisits important events from his childhood and, once his estranged wife commences visits to his ward, he embarks on a paranoid fantasy explaining her rekindled interest. Each of the narratives – hospital, detective, present-day fantasy and past– interconnect to suggest a psychological journey, eventually leading to Marlow’s desired integrated self as the narrative levels’ boundaries blur and conflate.

The childhood narrative reveals Philip’s alienation from his classroom peers through his intelligence. He spends his time alone in the forest where he chances upon his mother’s adultery with Raymond Binney. In response, Philip defecates on the teacher’s desk, and blames the deposit onto Mark, Raymond’s
son, who receives a horrendous punishment. Philip’s parents’ marital problems then come to a head and Philip travels to London with his mother. There, his mother commits suicide and the boy returns to his father, but remains emotionally distant.

In the detective narrative set in 1945, a double agent – Mark Binney – contracts the Singing Detective to clear his good name by finding out who killed Sonia, a prostitute. Binney is the prime suspect, having spent the evening in her company. In this narrative, the moral and ethical standards of the Singing Detective are tested. Being written by the adoring Marlow according to the hard-boiled detective formula, the Singing Detective is able to anticipate and avoid threats to his life; however, he is unable to prevent the murder of others. The Singing Detective, Mark Binney, and two mysterious men all want to know who is responsible for these murders – including Mark Binney’s vicious murder at the close. Ultimately, having located Marlow in hospital, the detective and two mysterious men find the author accountable.

The present-day fantasy narrative evolves around Marlow’s pathological fear that his wife, Nicola, is trying to misappropriate his script ‘The Singing Detective’ for her imagined lover, also named Mark Binney. As Marlow writes ‘The Singing Detective’ to reflect his paranoia – he changes the double agent’s name from Haynes to Finney (Potter, Singing Detective 149) – the fantasised Binney becomes increasingly nervous and disconcerted about the proximity of the script to his life. However, his confidence returns when a production company accepts ‘his’ script and they propose a popular actress for the lead role. Furious that Binney has denied her the opportunity to fulfil her dream of playing the part written for her, Nicola, as directed by Marlow’s imagination, knifes Binney in the throat, but is soon after apprehended by the police, following which she drowns herself.
With the two Binneys dead, the fantasised Nicola dead by drowning, and the Singing Detective and two mysterious men closing in on Marlow’s hiding place in hospital, Marlow-as-author loses control of his characters. During his time in hospital, Marlow’s skin condition eases, but his hallucinations and paranoia remain. His meetings with the psychotherapist embellish and elucidate the detective/culprit relationship also conveyed in the past narrative between the teacher and Philip, and that in the detective narrative between the Singing Detective and Mark Binney. As Marlow remembers his childhood he realises that although he was not responsible for the tragic events, he can take responsibility for his reactions and continuing debilitating attitudes. When Marlow finally confesses to the psychotherapist that he falsely accused Mark Binney of his own scatalogical crime in 1945, the patient is able to begin standing up for himself. As a consequence, Marlow can relinquish his habitual self-loathing; Marlow fantasises the Singing Detective executing his sick self in a hospital shoot-out, paradoxically saving him from persecution. Having eliminated this despised self, Marlow embraces the ideals of the Singing Detective, facilitating his departure from the hospital.

The complexity of the narrative and multiple levels to characterisation within The Singing Detective means the characters need to be differentiated for easy reference throughout the thesis. In the television serial Philip Marlow appears as the hospitalised protagonist (Michael Gambon), the nine year old boy in 1945 (Lyndon Davies) and the stereotyped hard-boiled detective of the 1940s detective narrative (Michael Gambon). To differentiate between the three, I will refer to the first as “Marlow”, the boy as “Philip” and the detective as the “Singing Detective”. (The Singing Detective is, of course, a rewriting of Raymond Chandler’s 1940s hard-boiled detective of fiction and film, Philip Marlowe.) The other equally ubiquitous character is Mark Binney. Mark
Binney is the child convicted of Philip’s scatalogical crime in 1945 (William Speakman), the man who claims to be falsely accused of a prostitute’s murder in the detective narrative (Patrick Malahide), and the fantasised Nicola’s lover (Patrick Malahide). The association between characters is extended through the theatrical device of actors playing multiple roles: Michael Gambon acts both adult personas of Philip Marlow – the sickly, hospitalised author as well as the sagacious and confident singing detective of the detective narrative; Patrick Malahide plays the adult Mark Binney of the detective narrative, as well as Raymond Binney, Marlow’s mother’s lover in the past narrative, and Mark Binney, Marlow’s wife’s lover in the fantasy narrative.

Nurse Mills (Joanne Whalley) is Marlow’s regular nurse, tending to the daily greasing of his skin. As a young, beautiful woman upon whom Marlow is dependent for basic care, Nurse Mills invokes the patient’s mother, Mrs Marlow (Alison Steadman), although the characters are portrayed by different actors in the television programme. The actor who plays Mrs Marlow of the past narrative also appears briefly as Lili in the detective narrative. Nicola (Janet Suzman), Marlow’s estranged wife, is seen in both the hospital narrative and the author’s fantasy narrative. Another major player in the text is Doctor Gibbon (Bill Paterson). As Marlow’s psychotherapist, Doctor Gibbon contrasts with the male medical staff through his short stature, Scottish accent and predominantly friendly rapport with his client.

**Theoretical Methodology**

Before considering how the narrator of “The Yellow Wallpaper” and Marlow specifically endeavour to modify their subjectivity, it is necessary to detail the theoretical views on subject formation that I will be drawing upon. The four theorists whose work most informs my thesis – Sigmund Freud, Thomas Szasz,
Michel Foucault and Judith Butler – represent a continuum in the thought of the creation of subjectivity from the late nineteenth-century to the late twentieth-century – that is, concurrent with the period of the two texts. The term ‘continuum’ suggests a linear and progressive quality about the theories, that each ensuing theorist has not just something more to add to the prior theory, but succeeds and supplants its predecessor. But as theories proliferate (and wane) within literature (and of course other spheres) the theories do not necessarily draw from each other, but offer complementarity. A plurality of interlocking interpretations can therefore be conceived as building a multi-dimensional view of a text, a “layering of significance” (Barthes 12) or, as Clifford Geertz popularised in the context of ethnography, a “thick description” (6). In his essay “Thick Description: Toward an Interpretive Theory of Culture” (1973) Geertz considers social interaction as a “multiplicity of complex conceptual structures, many of them superimposed upon or knotted into one another, which are at once strange, irregular, and inexplicit” (10). His account brings to mind the wallpaper in “The Yellow Wallpaper” which the narrator, as Geertz says of the ethnographer observing the subject, “contrive[s] somehow first to grasp and then to render” (10).

By using four theorists of varying priorities, historical periods, and views, I anticipate extrapolating my own particular “thick description” of the two texts, “The Yellow Wallpaper” and The Singing Detective. As I am following the theorists’ historical development, I begin with Foucault and then turn to Freud, Szasz and Butler. My interpretation of the texts commences from the view that the protagonists as subjects are in conflict with societal demands; therefore, a plurality of discourses will enlarge the field of interpretation, but, of course, will not be definitive of the texts.
Because no one theory, or grand idée, can offer to ‘resolve’ a text or lay bare all possible interpretations of a text, the best the interpreter can do is acknowledge the discourse used – be it Marxist, feminist psychoanalytic, post-structuralist or formalist, or a combination of discourses – and remain cognisant that such an interpretation will not yield all. In Bodies That Matter: On the Discursive Limits of “Sex” (1993), Judith Butler writes of power – but her comments apply equally to theory – that promotion of one view necessarily downplays alternative descriptions:

[O]n the one hand, any analysis which foregrounds one vector of power over another will doubtless become vulnerable to criticisms that it not only ignores or devalues the others, but that its own constructions depend on the exclusion of the others in order to proceed. On the other hand, any analysis which pretends to be able to encompass every vector of power runs the risk of a certain epistemological imperialism which consists in the presupposition that any given writer might fully stand for and explain the complexities of contemporary power. No author or text can offer such a reflection of the world, and those who claim to offer such pictures become suspect by virtue of that very claim. (18-19)

On theoretical positions Geertz writes more baldly: “It is necessary to choose” (5). I have therefore, as noted, chosen four theorists, who have in common a keen interest in the subject. The thesis is as much about the values and limitations of four theories of subjectivity as it is about “The Yellow Wallpaper” and The Singing Detective, providing a thick description of the interplay between gender, textuality, power, and subjectivity through the two texts.
While Freud and Foucault seem theoretically discrepant, Butler and Szasz are bridging figures; in particular, Butler specifically assimilates Freud and Foucault to formulate her own theoretical perspective.

Commencing the theoretical overview with Sigmund Freud, then, the technique of ‘Psycho-Analysis’ arose from his interest in hysteria. Through his study of hysterical women, Freud eventually developed the ‘talking cure’, which drew upon his theories of the psyche. Prior to this new form of treatment, the dominant ‘cure’ for hysteria was somatic, of which Weir Mitchell’s ‘rest cure’ provides an example. Although Freud acknowledged the stifling social conditions and frustrated intelligence of many of his hysterical female patients, he neither criticised society nor promoted radical change.⁸

Eric Fromm describes the individual as participating in numerous ‘circles’ consisting of family, class, society, biological conditions, and extending ever outwards to the solar system itself. He asserts that “[o]nly the narrowest circle, that of the family, had relevance for Freud, and thereby he greatly underestimated all other circles of which man is part” (61). Freud’s emphasis upon family life resulted in a depoliticised theory of subject construction: “[m]ore specifically, [Freud] did not recognize that the family itself is determined by the class and social structure and constitutes an “agency of society” whose function it is to transmit the character of society to the infant even before it has any direct contact with society” (Fromm 61). Nevertheless, the value of Freud lies in his providing a theoretical basis for comprehending the inter-subjective constitution of the individual. Whilst Freud’s theory has limitations, most notably that he did not transcend the thinking of his class (Fromm 6), Juliet Mitchell’s point should be kept in mind: “[h]owever it may have been used, psychoanalysis is not a recommendation for a patriarchal
society, but an analysis of one. If we are interested in understanding and challenging the oppression of women, we cannot afford to neglect it” (xvi).

In the historical context of 1892, when “The Yellow Wallpaper” was published, psychoanalysis as a ‘talking cure’, as opposed to a system of hypnosis and suggestion, was still being developed. However, the effect of the ‘talking cure’, or ‘confession’ as Foucault would have it, is evident upon the character Marlow in 1986. The Singing Detective strongly implies that the medical establishment’s treatment of Marlow is literally ‘skin deep’ and consequently fails to sustain good health. It is only when Marlow meets with the psychotherapist Doctor Gibbon that his healing can be viewed as penetrating below his skin, operating upon his psyche where his true illness lies. Marlow’s ‘cure’, however, is ambiguous, with his health seemingly attained by assuming a masculine persona based upon a fictional character. Marlow rewrites a unified ego in contrast to the split subjectivity of the narrator of “The Yellow Wallpaper”, but is this due to superior skills at creative self-narrativity or a result of the medical institution’s increasingly coercive and conformative power over the subject?

As both supporter and critic of psychiatry, Szasz connects the opposing views of Freud and Foucault. Szasz believes psychiatry can help people (aligning himself with Freud) but at the same time voices concerns about the mystification of power within the therapeutic relationship (foregrounding a primary issue for Foucault). As a prominent figure within the anti-psychiatry movement Szasz draws upon his own clinical experience and patient-centred attitudes to assert the psychiatrist’s affiliation with an institution as detrimental to the patient’s interests; the psychiatrist in this context being more likely to be an agent of social conditioning and normalising than prioritising the patient’s needs.
The rules Szasz refers to in *The Myth of Mental Illness: Foundations of a Theory of Personal Conduct* (1962) point to the broad social context the subject inhabits, which is neglected by Freud, but is fundamental to subject formation in Foucault’s theorising. For Szasz, the conflict between the need to conform to social rules and the requirement to assert personal desires at odds with cultural mores is inherent to the human condition. The subject’s goal is consequently to negotiate a path between social and personal needs; the subject is not ‘innately free’ but born into a set of rules which must be learned and mastered, in order to be consciously amended. Communication is the best means to facilitating a subject through the inherent difficulties arising between society and the individual. Szasz shares with Foucault comparative ideas regarding the correlation of power and knowledge, with access to discourse, – ‘metalanguage’ in Szasz’s vocabulary – imperative to agency.

In his study of the subject between 1961 (*Madness and Civilisation: A History of Insanity in the Age of Reason*) and 1976 (*The History of Sexuality, Volume One: An Introduction*), Foucault details the power relations which, he argues, create subjectivity. Primarily, I will use Foucault’s *Discipline and Punish* and *The Birth of the Clinic: An Archaeology of Medical Perception* (1973). In contradistinction to the Marxist interpretation of power as being solely exercised through the three arms of the state – legislature, judiciary, executive – Foucault views power relations as tactical manipulations; power is enacted on or through sites within unequal and fluid relations and as such permeates society. Because Foucault considers power relations as operating on many levels and sites, with an individual’s priorities changing according to the specific identification he or she acts under at the time (for example, as a mother, a student, a judge), resistance is possible through manipulation or negotiation.
However, the potential of resistance is undermined by the political double bind within Western society. Subjects are both individualised and totalised by modern power structures, leading individuals to believe the misconception that they are freer than ever before. Living in a disciplinary society means subjects are insidiously and coercively controlled by watching themselves and others for deviant behaviour. Under the constant threat of surveillance (including self-surveillance) subjects become docile. By combining surveillance with the redemptive programme of institutions affiliated with the government, such as prisons, hospitals, schools, society produces pliant subjects.

Power and knowledge are fundamentally linked for Foucault; to attain power an individual must have access to knowledge and vice versa. He considers discourses such as medicine as boosting their power potential through governmental endorsement; thus a few – in this case medical practitioners – have the right to determine the terms of health for the majority. In this manner, a hierarchy of exponents of the truth becomes ‘naturalised’ within our society. This is important to the two literary texts under examination as, within the medical situation, the protagonists are deprived of credibility or self-knowledge because they do not have access to medical discourse.

Foucault’s conception of the subject as an effect of power relations, with any agency limited to resistance to and within those relations, contrasts sharply with Freud’s preference for individual responsibility, psychical depth, and universal processes. It is these universal processes – the Oedipus Complex in particular – which are saturated with masculinist ideology, but packaged as empirical fact, that both Szasz and Foucault find objectionable, although not for feminist reasons. Szasz asserts that this type of theorising obscures the simple fact that human relations are problematic, while Foucault regards ‘universality’
as a misconception through which psychoanalysis itself encourages
normalisation (Foucault, *History of Sexuality* 5). ‘Surface’ and ‘depth’ sum up
the basic difference between Foucault and Freud; as an effect of power the
subject is constituted through social forces according to Foucault, but Freud
ignored socio-economic influences and envisaged the subject as vulnerable to
deep impulses and innate compulsions expressed only symptomatically.

Judith Butler’s writings use Freud and Foucault in order to develop and
provide depth to her concept of gender performativity. Butler sees some value
in each theory (although not accepting either in totality) and suggests, “[t]here
may be a way to subject psychoanalysis to a Foucaultian redescription even as
Foucault himself refused that possibility” (*Bodies That Matter* 22). 9 Foucault’s
appeal to psychoanalytic terms, resistance and internalisation, suggest a
“suppressed psychoanalysis” (*Psychic Life* 87) in his work. Thus Butler argues

> [i]f forms of regulatory power are sustained in part through the
formation of a subject, and if that formation takes place according
to the requirements of power, specifically, as the incorporation of
norms, then a theory of subject formation must give an account of
this process of incorporation, and the notion of incorporation must
be interrogated to ascertain the psychic topography it assumes.

(19)

Foucault is vague regarding how it is that the subject becomes imbued with
social values, and Butler views psychoanalytic theory as able to expand, or
rather provide (psychic) depth, to his conception of subject formation.
Butler emphasises the performativity of language and its role in subject creation – subjectivation in Bulterian parlance. She asserts that the efficacy of language emanates from its reiteration, the persistent drawing upon past utterances which presuppose their authority imparted into the present articulation. The need to repeatedly ‘materialise’ the body, Butler claims, is the means towards effecting change. Ironically, it is the very process that seeks to stabilise normative identity which actually destabilises the binary positions of gendered subjectivity: “Although this constitutive constraint [that is, the need to ‘rematerialise’] does not foreclose the possibility of agency, it does locate agency as a reiterative or rearticulatory practice, immanent to power, and not a relation of external opposition to power” (Bodies That Matter 15). Importantly, Butler provides the opportunity to address the issue of gender, which is neglected in Foucaultian theory.10

**Structure of the Thesis**

The thesis will explore the transition of the protagonists from opposing the medical institution’s diagnosis through to their successful self-scription – ‘successful’ here carrying ironic force, as success is measured in terms of the socially dominant discourses, which the protagonists do not necessarily concur with. I will develop the theme of textuality, progressing from a sociological reading in Chapter One, to a psychoanalytic reading in Chapter Two, and culminating in a textual reading in Chapter Three. While Foucault will assist in describing the institutional context in which the protagonists are situated, the premise of their illness, Freudian theory will explain the development of their response, with the protagonists’ incoherence reaching crisis point when they construct a double. Butler’s theorising on gender performativity will explicate the protagonists’ attempts at textual performativity.
Thus, Chapter One will provide a socio-historical background, detailing the medical context within which the narrator of “The Yellow Wallpaper” and Marlow are situated, keeping in mind distinctions between late nineteenth-century and late twentieth-century medical practice. What is the dilemma that each protagonist is in, and how has this situation come about? Both protagonists are infantilised in their treatment, leading to their disempowerment. As such, they are considered malleable to institutional authority. If, as I will suggest, medical practitioners operate as social technicians via the discourse of healing, how is it that patients accept and succumb to such a disenfranchising process? And in what ways do patients protest against, and so try to alleviate, their reconstitution as a socially valid subject?

In Chapter Two I interpret the subjective incoherence experienced by the narrator of “The Yellow Wallpaper” and Marlow as emanating from internal discord, caused by the discrepancy between the stereotypical gender construction expected of them from society and personal desires and expectations. The result is a split identity; both protagonists explore their subject potential through an alter-ego. The narrator’s double – the wallpaper woman – seems to be the ultimate expression of her nervous destabilisation; by contrast Marlow’s ego-ideal operates both as a symptom of his internal distress and the focal point from which he recovers.

Both protagonists seek to confirm their double through the written word. Inherent in this action is the belief in the performativity of language, and Chapter Three explores the extent of self-narrativity for the narrator of “The Yellow Wallpaper” and Marlow. Through Judith Butler’s theorising on gender performativity, I will consider why the narrator’s new subjectivity in “The Yellow Wallpaper” further entrenches her in the margins of society and, as
such, reconfirms the status quo rather than undermining it. In contrast, Marlow is resocialised at the conclusion of *The Singing Detective*. Why is this potential available to Marlow and seemingly denied the narrator of “The Yellow Wallpaper”? Has the narrator merely given a poor performance, or is her desired subjectivity as yet unimaginable to social discourse, and therefore illegible?
Chapter one

Intensive Care

‘Intensive Care’ is the title of Janet Frame’s dystopic novel published in 1970. Set in New Zealand under a eugenic regime, the final section of the novel explores Western society’s drive for human perfection through the “oughtistick” (Frame, *Intensive Care* 189) character, Milly. As a “doll-normill” (190) woman – that is, ‘dull-normal’ – it is expected on Deciding Day that Milly will be classed as ‘animal’ not ‘human’, and “disposed of” (191), coincidentally on her birthday. This eugenic impetus is intended to relieve society of “the exiles, the outcasts, the pitifully deformed, diseased, inefficient; the idiot pools that [give] back no reflection to the searching sky” for the “general good” (184) of the human condition. By entitling this chapter ‘Intensive Care’, I allude to Frame’s commentary on the irrationality and inhumanity of society’s fervour for ‘normality’. Like Marlow and the narrator of “The Yellow Wallpaper”, Milly “[finds] it hard to be what people want [her] to be and [has] quarrels with their sort of learning and speaking the right words and phrases” (190). As a consequence, she is labelled ‘doll-normill’, a diagnostic act that jeopardises her very life.

While in Milly’s world it is the government which promotes the elimination of “ugly sights” (192) from the community, in “The Yellow Wallpaper” and *The Singing Detective* it is the medical institution which is obliged to try to resocialise the sick and abject citizen. Through ‘intensive care’ the medical institution reimposes normative values under the premise of
restoring health. Yet, what power does the medical institution have over its patients to instil such values, and from where do its moral and ethical priorities emanate? Certainly within the two texts under consideration the protagonists do not wish to comply with the medical institution’s treatments, signalling their resistance to the corresponding imposition on their subjectivity.

Through Foucaultian theory on power relations I suggest that the protagonists are prohibited from refusing their medical treatment through their inability to dispel the authority of the physician. This authority is drawn from medical knowledge and social status, as well as the institution’s displaced religious derivation. Both the narrator of “The Yellow Wallpaper” and Marlow are forced to submit to medical authority through their infantilisation, brought about by restrictions on their mobility, language, and activities. The return to a child-like state becomes a site from which to ‘grow up’ into the subjects society expects them to be.

The Power of Discourse

By positing the subject as a construct ‘born’ of power relations, Foucault emphasises the political foundation of an individual’s identity. However, he specifically refutes the limitations of ‘juridico-discursive’ power; that is, he differentiates himself from Marxism and Structuralism by commenting in “Afterword: The Subject and Power” (1982) that “while the human subject is placed in relations of production and signification, he is equally placed in power relations which are very complex” (209). While the juridico-discursive conception of power defines power relations as negative prohibitions set by law, Foucault’s formulation regards power relations as less rigidly oppressive. Rather than power being unilaterally inflicted upon subjects via structures of
state apparatus and ideology, Foucault conceives of power relations as the site from which individuals interact with and negotiate their subjectivity.

In *The History of Sexuality* Foucault proposes five points from which to consider power relations:

1. Power is not a ‘free-floating’ entity which can be held, lost or attained by individuals, institutions or states. Rather, power is enacted on or through sites within unequal and changing relations.

2. Power is inherent within, not separate from, all relationships we enter. Therefore, power acts upon the imparities and fractures in, for example, economic, discursive or sexual relations and assumes a productive role.

3. Power permeates through society not from above (sovereign over citizens) but from below. Power relations operating within the family and other small groupings coincide and conflict with those inherent in wider relations, bringing about broader agreement, changes and discord.

4. Power always has a purpose; however, no individual, group or state is responsible for its emergence. Rather, power operates as a network of interweaving relations within a society; so it is, then, that state and institutional values coincide and are mutually reinforced, but neither is primary instigator or perpetuator of such values.

5. Resistance is fundamental to power relations. In the field of multiple and mobile power relations there are
corresponding plural and shifting points of resistance. (94-96)

The late eighteenth-century was a period of significant social and political change in France, and Foucault identifies this point in time as momentous for the subject. Foucault postulates in *Discipline and Punish* and *Birth of the Clinic* two forms of power which each seek to normalise and totalise the individual. *Discipline and Punish* focuses on social control through discipline within the prison system; the maintenance of social order was modified from physical and publicly specular punishments (such as the guillotine) to the more subtle control of manipulating the body towards a socially acceptable end, that is, normalisation. Social order is still maintained by controlling the transgressive individual, but punishment has altered from being enacted *on* to *over* the body. *The Birth of the Clinic* describes the alignment of the emerging medical clinic in the late eighteenth-century with the state, with the goal of forming “a medical consciousness whose constant task would be to provide information, supervision, and constraint, all of which ‘relate as much to the field of police as to the field of medicine proper’” (*Birth of the Clinic* 26).

The ‘redemptive’ focus of these discourses had an economic purpose and suggests just one instance of the interweaving of the various relations operating within the power network, which became increasingly linked to goals held by the state, and institutions associated with the state. Thus, the state coerces its citizens into a “political double bind” (“Afterword” 224). Through a “tricky combination in the same political structures of individualization techniques, and of totalization measures” (213) state institutions manipulate and regulate the subject potentialities of power relations.
Foucault proposes that the power relations which function to consolidate, or structure, a subject operate via the ‘science of discourse’. The science of discourse, again ascribed to the late eighteenth-century, is a system which, through the mutuality of power and knowledge, asserts a normative truth, by means of which subjects are defined and therefore controlled. However, it should be noted that agency, or resistance, is afforded the subject within that same discourse; the “reverse discourse” is enabled, can protest, “often in the same vocabulary, using the same categories by which it was . . . disqualified” (History of Sexuality 101).

In a 1976 lecture published in Power/Knowledge: Selected Interviews and Other Writings 1972-1977 (1980) Foucault states:

in a society such as ours [France], but basically in any society, there are manifold relations of power which permeate, characterise and constitute the social body, and these relations of power cannot themselves be established, consolidated nor implemented without the production, accumulation, circulation and functioning of a discourse. There can be no possible exercise of power without a certain economy of discourses of truth which operates through and on the basis of this association. We are subjected to the production of truth through power and we cannot exercise power except through the production of truth. (93)

Accessing power, therefore, necessitates the accumulation of knowledge because “there is no power relation without the correlative constitution of a field of knowledge, nor any knowledge that does not presuppose and constitute at the same time power relations” (Discipline and Punish 27). Such a system
privileges knowledge gained within a hierarchical structure; an individual undergoes ‘discipline’ and tactically aligns him or herself with a discourse, such as the language and practices of the public health system. A particular and authorised truth is consequently promoted and, as a result of modernity’s classificatory drive, subjects are scrutinised so as to ensure their conformity. Thomas Szasz also points to the normative impetus of ‘biopolitics’ (a government’s interest in its subjects’ biological processes): “It is evident that anything that affects large numbers of people, and over which the state (or the government) has control, may be used as a form of social control” (Mental Illness 81, italics in original).

The limitations imposed upon the ‘offender’ are key to resocialising the criminal or patient. In Discipline and Punish, Foucault identifies pervasive intra- and inter-subjective surveillance, restrictions on mobility, normalising judgements, and the setting of repetitive hierarchically supervised exercises as instrumental in coercing a normative standard. The crux of this new, or modern, discipline is surveillance, and the intention is that citizens become self-regulating. Bentham’s Panopticon physically encapsulates this new conception of subject control (Foucault, Discipline and Punish 201). The Panopticon is a circular structure; a central observation tower surrounded by the cells located on the outer wall. With each of the inmates isolated in separate cells, unseeing but always potentially under surveillance, it was envisaged the inmates would modify their own behaviour, becoming docile and ‘normal’ by internalising socially constructed expectations.

The medical discourse detailed in The Birth of the Clinic objectifies the patient through the medical ‘gaze’, medical language and spatialisation, thereby circumscribing personal autonomy and self-determination. The ‘gaze’ and medical language are interlinked, with the non-reciprocal look and non-
relating language objectifying the patient at the same time as reinforcing the power of the medical practitioner. The patient’s body is read as if a text, with the practitioner’s gaze, eventually superseded by a ‘glance’, trained to immediately discern only the relevant: “[t]he glance chooses a line that instantly distinguishes the essential; it therefore goes beyond what it sees; it is not misled by the immediate forms of the sensible, for it knows how to traverse them; it is essentially demystifying . . . The glance is silent, like a finger pointing, denouncing” (Birth of the Clinic 121). Similarly, insisting patients be situated in hospitals, the wards divided into the same categories as there are illnesses, reflects medical discourse’s attempts to constrain and control the disease via the patient. Foucault summarises the medical discourse which arose in the late eighteenth-century as follows:

For clinical experience to become possible as a form of knowledge, a reorganization of the hospital field, a new definition of the status of the patient in society, and the establishment of a certain relationship between public assistance and medical experience, between help and knowledge, became necessary; the patient has to be enveloped in a collective, homogeneous space. It was also necessary to open up language to a whole new domain: that of a perpetual and objectively based correlation of the visible and the expressible. An absolutely new use of scientific discourse was then defined: a use involving fidelity and unconditional subservience to the coloured content of experience – to say what one sees; but also a use involving the foundation and constitution of experience – showing by saying what one sees. It was necessary, then, to place medical language at this apparently
superficial but in fact very deeply embedded level at which the
descriptive formula is also a revealing gesture. (196)

Specifically, then, how are the two protagonists constrained by medical
and disciplinary discourse as explicated by Foucault? Being under medical
supervision involves acute sensory deprivation for both Marlow and the
narrator of “The Yellow Wallpaper”. Marlow’s drab ward is devoid of visual
stimulation. His condition precludes him from reading or writing and his
roommates provide little amenable conversation. Being bed-bound means
Marlow is reliant upon his imagination, through which he embarks on an
emotional mental peregrination encompassing recollections of his past, rewrites
of an already published novel, and fantasies of his estranged wife’s infidelities.
Likewise, the narrator of “The Yellow Wallpaper” ingeniously interprets the
wallpaper through necessity. The severe restrictions John places on her
physical and intellectual activity leaves her little else to do. Although John has
imposed a daily routine (“I have a schedule prescription for each hour in the
day” [Gilman, “Yellow Wallpaper” 31]), the narrator is not supposed to indulge
the occupations which are important to her. As physician, John has prohibited
any writing. Although the narrator does have plenty of time to write while
alone, her internalisation of her husband’s and society’s criticisms leads to her
self-imposed inertia: “we have been here two weeks, and I haven’t felt like
writing before, since that first day . . . there is nothing to hinder my writing as
much as I please, save lack of strength” (32).

The doctor’s role as caretaker of social standards and morality is endorsed
by the profession’s derivation from religion (Szasz, Mental Illness 83;
Ehrenreich and English 13); the evangelical scene in The Singing Detective
implies the resultant ‘high-minded’ attitude of practitioners towards his or her
vocation prevails in modern medicine. Potter satirises this moral conviction, displayed by Doctor Finlay when he returns to the hospital ward on a Sunday with an entourage of enthusiastic evangelical singers. Doctor Finlay unquestioningly believes that his medical authority extends to imposing his religious beliefs onto his patients. Word sheets are passed out amongst the patients so that they may participate in the doctor’s religious fervour. However, Marlow undermines Doctor Finlay’s composure by loudly calling out: “We don’t want this crap! Leave us alone!” (Potter Singing Detective 155). Potter notes in his stage directions that the Doctor quivers, “with a comically ill-suppressed rage, reflecting whatever inner torment has oddly led him to primitive Evangelism and authoritarian versions of Medicine” (155). Evidently, Doctor Finlay has assumed his medical power extends to his religious inclination, expecting passive acceptance of his ‘word’ from the patients even when he acts outside of medical discourse.

The medical establishment’s endorsement of and agency for ideology is seen as a point of conflict for the protagonists of “The Yellow Wallpaper” and The Singing Detective. Both texts gesture at the iatrogenic effects of the hospital context, that is, they imply that ill-health is caused, or exacerbated, by medical intervention. In “The Yellow Wallpaper” the narrator’s situation is particularly oppressive and claustrophobic. She is doubly thwarted in her efforts to regain health because the relationship which is making her sick (her marriage) is the exact relationship within which she is supposed to seek a cure (doctor/patient relationship). In this way Gilman highlights the difficulty faced by her middle-class female contemporaries; the social conditions which are at the root of their hysterical illness (lack of financial or emotional independence) are the same conditions which are imposed more intensively in the medical situation. In The Singing Detective the visiting doctor gives a “reluctant” diagnosis of
“iatrogenic” (25) when disclosing Marlow’s long medical history to the consultant. The treatments given Marlow “in pretty usual sequence” (25) have not been successful; as the Registrar admits, “Well. You can see the damage” (25).

As possessor of medical knowledge the doctor assumes authority, and superiority, over the patient, self-assured through his particular ability to ‘read’ the patient’s bodily health; the patient is supposedly an inexplicable text to him or herself as the “sensible truth is now open, not so much to the senses themselves, as to a fine sensibility” (Foucault, Birth of the Clinic 121, italics in original). For example, in “The Yellow Wallpaper” John refuses to accept his wife’s attempt to tell him she is not recuperating under his standardised cure; he either cuts short her speech or belittles her: “she shall be as sick as she pleases” (Gilman, “Yellow Wallpaper” 41). John’s comment suggests his wife’s ill health is a product of her own making – his treatment is therefore beyond reproach.

Marlow’s experience with the visiting consultant shows that as a patient, he is merely a ‘case’; he is not considered as a person, but rather a means through which the consultant can test and evaluate the training doctors. Foucault describes this conjunction of examination and healing as a “mutation” (Birth of the Clinic xv). In the transcript, Potter notes that Marlow is “helplessly flat on his back, laid out like a corpse” (Potter, Singing Detective 4), which is an apt pose for an individual who will be scrutinised but not related to or interacted with. Marlow’s vulnerability in this scene is extreme. Wearing only a loincloth, unable to move from his ‘crucified’ pose and denied autonomy through either speech or awareness of his intelligence, Marlow expresses outrage at being so (mal)treated. Each time Marlow tries to respond to the consultant’s queries (his name, how he is feeling, how long he has had his condition), his reply is cut
short by the other medical staff present. This seems to be normal practice – the consultant does not really expect a reply from the patient, and consequently he is unprepared for Marlow’s ire. When the consultant asks Marlow directly whether he wishes to try a new form of treatment, Marlow does not respond. His silence is regarded as a lack of intelligence, and “the consultant leans in to speak again, as though to a retarded child. CONSULTANT: ‘Do-you-understand-the-question?’” (26). Accustomed to deference from both patients and ‘lesser’ medical staff, the consultant is temporarily taken aback at Marlow’s indignant outburst: “I don’t understand because I seem to have regressed into the helpless and pathetic condition of total dependency. Of the kind normally associated with infancy.” (27). Even the consultant’s reaction is directed towards the medical staff, and not the patient: “[w]hat’s he say?” (27).

Marlow obtains a hearing from the consultant eventually, but Potter notes that “the consultant feels in danger of breaking a precedent” (27) and he impatiently glances at his watch as Marlow painfully prepares himself to speak. Marlow’s tears and demonstrative speech embarrass himself and the medical staff. The consultant bows his head and shades his eyes from the spectacle and the medical staff consider various drugs – “Librium”, “Valium,” “Antidepressants,” “And a barbiturate” (28), anything to alleviate the potential for further such scenes. The medical physician is not adept at dealing with the patient’s feelings – they are to focus on the body itself. Because medical discourse only refers to the empirical, that which can be ‘seen’ by those with the finely tuned ‘gaze’ (Foucault, Birth of the Clinic 107-122), Marlow’s emotional appeal disconcerts the consultant; the best the consultant can offer is, “keep your – ah – pecker up, old chap” (29) and refers him to those with access to an alternative discourse – the padre, or psychiatrist.
By submitting to medical intervention, the patient repudiates self-
knowledge, yet the medical context implicitly suggests the patient is morally
culpable: this situation is the patient’s double bind. In 1877 Silas Weir Mitchell
argued:

[i]f the physician has the force of character required to secure the
confidence and respect of his patients, he has also much more in
his power, and should have the tact to seize the proper occasions
to direct the thoughts of his patients to the lapse from duties to
others, and to the selfishness which a life of invalidism is apt to
bring about. (108)

Weir Mitchell ostensibly advocates invoking guilt as a means to encouraging
the patient’s recovery. In The Singing Detective, Doctor Gibbon questions
Marlow’s desire to recover, asking him sharply, “you do intend to get better?”
(Potter, Singing Detective 97, italics in original). By implication, Marlow should
feel ashamed for wasting the medical staff’s time if he is not trying to help
himself. Yet, as will be considered through Freudian theory in Chapter Two,
Marlow’s ill-health is invoked by the pervasive and indiscriminating sense of
guilt he has nurtured since his childhood experiences of his parents’ separation,
incriminating the innocent child, Mark Binney, and his mother’s suicide.

Marlow is not responsible for either Ali or George’s deaths in the
neighbouring hospital bed, but in both instances he assumes some guilt. Ali
suffers a fatal heart attack as he stretches to reach a lolly with which to sweeten
up Marlow’s sourness, his cynicism. Marlow therefore feels implicated in Ali’s
death. Earlier, Marlow had asked Ali to get him a cigarette, which involved Ali
breaking the doctor’s rule not to leave bed. Doctor Finlay turns upon Marlow
when the latter takes responsibility for Ali’s transgression; the doctor angrily declares to Marlow that if Ali “has another heart attack, then you’ll be responsible, won’t you?” (14). George, a World War II veteran, then takes Ali’s vacated bed. Marlow’s “fierce, puritanical disgust” (108) is invoked when George gloats about the ‘accommodating’ “Frow Lines” (108, italics in original) in 1945. Appalled at the old man’s crowing over past sexual encounters and lack of remorse, Marlow passes judgement on George when the latter suffers a cardiac arrest as a result of his “lascivious, over stimulated [cackling]” (108); rather than calling for immediate medical assistance, Marlow coolly and cruelly informs the dying man, “You can’t say you haven’t asked for it, George old son” (109). Marlow tries to ameliorate his sense of responsibility, asking Nurse Mills if earlier intervention would have saved George, but her response of “[w]ho knows?” (131) fails to assuage his conscience.

Through the weight of institutional authority, doctors have the power to linguistically incarcerate and constrain patients. According to Szasz, “the act of naming or classifying is intimately related to the human need for control or mastery” (Ideology and Insanity 192). Diagnosis, via the “unprejudiced gaze” (Foucault, Birth of the Clinic 195) also purports to describe the truth of the patient’s condition, mystifying the coercive control within the doctor/patient relationship. The doctor’s power in this respect, Szasz asserts, is particularly important for psychiatry, as their classification refers to the patient’s identity. The patient is therefore judged by the classification; ‘hysterical’ and ‘mentally ill’ are not just examples of medical nomenclature but are (evaluative) adjectives as well (198). Therefore, in ‘The Yellow Wallpaper’, John draws on his public and private authority to impose his vision upon his wife, telling her, “you really are better, dear, whether you can see it or not. I am a doctor, dear,
and I know . . . Can you not trust me when I tell you so?” (Gilman, “Yellow Wallpaper” 40, 41).

By limiting his wife’s speech, John wishes to both reinforce his diagnosis and curb the narrator’s deviant views. He interrupts her attempt to tell him of her mental distress with a reproachful look (41), and assumes his words (and views) as authoritative and dominant within their relationship; the narrator’s “real earnest reasonable talk” (38) with her husband reduces her to tears when her wishes and attempt at a ‘rational’ discussion (so prized and valued by John) are denied. So John tells his wife in speech and gestures that she is weak, lacking in self-knowledge and essentially a child: “[a]nd dear John gathered me up in his arms, and just carried me upstairs and laid me on the bed, and sat by me and read to me till it tired my head” (39). By carrying his wife, insisting upon naps after meals (42), calling her a “little goose” (34) and “little girl” (40), John demeans her and deflates any self-respect in the guise of husbandly love. However, because the narrator is not affiliated with a public discourse, she is unable to deflect her husband’s value system.

In treating patients as children, the hospital staff in The Singing Detective deny the maturity and experience of the patients. Nurse Mills’ greasing of Marlow’s skin causes him (uncontrolled) physical excitement; however, his wish to apologise and explain is deflected by the nurse through embarrassment and denial of their intercourse: “[w]e don’t need to talk about it, do we?” (Potter, Singing Detective 20). Similarly, the staff do not acknowledge mortality within the ward. They attempt to hide the deaths of Ali and George from the other patients by drawing the curtains and refusing to discuss the effect of these deaths on the onlookers. Their refusal to think about it (121) reflects the emotional distance the hospital staff try to maintain between themselves and the patients. They are not trained to deal with their patients’ emotions and so
they deflect, ignore such contact. Rather, the hospital has a regimen to be followed by staff and patients alike; when Nurse Mills catches Marlow standing unsupported in the ward (having taken a few tentative steps), she insists, “You can’t do this on your own. Not yet. You must take it in stages” (243). Nurse Mills asserts the hospital system’s circumscription of the patient’s healing; patients must get better according to preset ‘stages’, and not take a risk by determining their own course of recovery.

Through isolation, or decontextualisation, Foucault believes the physician trusts to truly view the disease, free from external interference (Birth of the Clinic 109-110), therefore immediately discounting a social aetiology. Weir Mitchell also notes the value of removing the patient from the influence of family by having a non-family member act as nurse (106); the aim in both instances is the physician’s desire to control the disease via control of the patient. The potential danger is that the doctor conflates the two forms of control, leading to the definition of both patient and disease.

In “The Yellow Wallpaper” and The Singing Detective the patriarchal family is reconfirmed through the roles undertaken; John, as patriarch, is the all-knowing physician, Jennie acts as mother and nurse and operates to reinforce patriarchal values as directed by John, and in the lowest position is the narrator as patient and child. The narrator’s inferior status in the hierarchy is reinforced when John tries to dampen her deviancy by appealing to her traditional moral obligations; he implores her to get better for his sake, their child’s, and last, and most certainly least, her own.

The Singing Detective reveals the hierarchical order as fundamentally unchanged in the twentieth-century, although much expanded. Within the highest level of the patriarchy, the visiting doctor, registrar and trainee doctors all defer to the consultant. During the consultant’s visit Marlow hallucinates
the medical staff singing “Dry Bones”, commanding Marlow as patient/sinner to “hear the word of the Lord” (Potter, *Singing Detective* 29). Below this (notably male) group come the ‘mothers’ – the order of matrons and nurses who tend to daily care of the patients and assume the right to correct language and behaviour. Next comes the porter, who is a young black man – not as high in the pecking order as female nurses, but not as subordinated as the emasculated male patients. The patient is revealed as infantilised irrespective of gender – the ward of subdued male patients in *The Singing Detective* symbolising Marlow’s belief, demonstrated by the nurses’ strict controls over mobility and language, that women are guilty of undermining men’s ‘inherent’ power.

The similarities between the infant and patient encourage their parallel treatment. Both are dependent and so constitute a liability to society. Neither infants nor patients can provide their own food, shelter, or protection, and so participants in the medical relationship easily slip into the roles of parent and child (Szasz, *Mental Illness* 176-77). Judith Butler identifies the child’s complete dependency and unconditional love for its parents as a preparation for later internalisation of authority. The child attaches ‘blindly’ to its parents in order to “persist in a psychic and social sense” (Butler, *Psychic Life* 8). Yet this unreserved attachment to love-objects is denied in adulthood. Butler suggests that this process of denying the primary submission is intrinsic to subject formation: “No subject can emerge without this attachment, formed in dependency, but no subject, in the course of its formation, can ever afford fully to ‘see’ it. This attachment in its primary forms must both come to be and be denied, its coming to be must consist in its partial denial, for the subject to emerge” (8, italics in original).
Just as the parent’s intention is to socialise the child, so too is the medical practitioner’s goal to rehabilitate – that is, resocialise – the patient. Patients need to be ‘retaught’ the social rules so as to make them participating social members – assets, not liabilities, to the community. In “The Yellow Wallpaper” and The Singing Detective, the physician therefore becomes a type of teacher, a holder of the truth who asserts and judges what constitutes good behaviour (normality) and condemns that considered asocial (abnormality).

**Foucault’s Resistance**

The advantage of Foucaultian theory is that it foregrounds the political and social pressures which modify and direct subjectivity, as well as offering a way of conceptualising agency within such power relations. Key to this process is resistance, which, although fundamental to Foucault’s conception of power relations, is not made explicit within his writings. However, his reluctance to theorise or define resistance may be due to his claim that resistance is always local and particular; if resistance is multiple, “each of them a special case” (History of Sexuality 96), how can resistance as such be theorised?

Instead, Foucault offers vague visions of resistance: “the points, knots, or focuses of resistance are spread over time and space at varying densities, at times mobilizing groups or individuals in a definitive way, inflaming certain points of the body, certain moments in life, certain types of behaviour” (96). From these definitions of resistance the narrator’s secretive journal writing and Marlow’s verbal challenges directed towards authority would constitute Foucaultian resistance. Nonetheless, Foucault’s elusiveness regarding resistance means that the individual’s complicity in his or her own oppression is not emphasised, that at some level the individual concurs with the power relations which generate his or her subjectivity, and that resistance is not
necessarily a conscious strategy. Butler considers resistance and internalisation as weak points within Foucaultian theory. She asks, “[w]here does resistance to or in disciplinary subject formation take place?” (Psychic Life 87).

Consequently, I cannot explicate from a Foucaultian perspective how it is that Marlow and the narrator of “The Yellow Wallpaper” come to internalise the disciplinary power that they are subjected to, nor how the two protagonists’ internal incoherence develops, culminating in projections of an alter ego. Thus, Foucaultian theory provides a theoretical stepping-stone for this thesis; from a Foucaultian overview of the political and social pressures which disturb the individual and frustrate potential agency to Freud’s personal and universalising conception of how the split subject arises from psychic defence. Freud, unafraid of theorising richly on both resistance and internalisation, provides in the following chapter a view of the split subject as struggling to cope with ambiguities, which stem not only from socio-political sources, but primarily from the individual’s internalisation of those ambiguities. I will discuss how the protagonists’ resistances are played out on an intrapsychic level, considered in terms of the narrator of “The Yellow Wallpaper” and Marlow’s writing. How self-narrativity brings about these characters’ new subjectivity will constitute the subject matter of Chapter Three.
Chapter Two

The Split Self

Freudian theory facilitates an understanding of how the social and political inconsistencies depicted by Foucault’s power relations are internalised by an individual. Subjected to conflicting information from society, the individual needs to defend him or herself against the resulting internal conflict. How can Marlow and the narrator conceive of themselves as unified when the messages they receive about who to be and how to behave are contradictory, conflict with their real experiences and, as such, generally fail to satisfy their idiosyncratic needs? In a bid to survive, to defend themselves against the pressure to smooth over the contradictions, the narrator of “The Yellow Wallpaper” and Marlow split their identity. The ego maintains coherence against the (now) psychic contradictions by splitting the self – satisfying at once both personal and social needs and demands.

Yet this process of division constitutes an illness, a resistance to the expectation of a unified and coherent subject. According to Terry Eagleton:

unity is in fact a myth[;] . . . the human subject – like the social order itself – is no more than a decentred assemblage of elements. The paradox emerges, then, that we become subjects only by a repression of the determinants which go into our making; and this is precisely the major insight of Sigmund Freud. We become subjects for Freud by passing more or less successfully through
the Oedipal trauma; but to operate effectively we must repress that hideous drama, and we do so by opening up within us the place known as the unconscious, driving our insatiable desire underground. Forgetting is then for Freud our ‘normal’ condition, and remembering is simply forgetting to forget. (16)

The reconciliations undertaken during the Oedipal drama are therefore a precondition for unification of this ‘decentred assemblage of elements’. These ‘elements’ are, precisely, the discrepancies within patriarchy which are perceived by the narrator of “The Yellow Wallpaper” and Marlow. However, the cost of internal coherence, or unity of our disparate elements, is submission to patriarchal constructs; the double bind remains, but is ‘forgotten’.

One of the discrepancies smoothed out during this process is the individual’s “constitutional bisexuality” (Freud, “Ego and the Id” 31). Patriarchy depends upon sexual difference; men cannot be defined as active and dominant, if women are not construed otherwise. Yet identifications can clearly be made with male and female objects, thus encouraging ‘masculine’ and ‘feminine’ assumptions in both sexes. In ambivalently striving to determine his place in society as a masculine subject, and so reap that gender’s specific rewards, Marlow needs to ‘forget’ his strong affiliations with his mother and the ‘feminine’ position.

Paradoxically, Marlow does forget his feminine identifications, even though his ‘recollection’ is played out daily through the language he uses and attitudes he embraces. Marlow has become ill as a result of being unable to reconcile his identification with his mother with social expectations of masculinity; however, he is loath to recall specific events which contribute to his psychic confusion. In their seminal text on hysteria, Studies of Hysteria
(1895), Freud and Breuer state that in therapy the level of force used to initially repress the disturbing event or idea into the unconscious is sometimes employed to the same degree as resistance against bringing the idea back to consciousness (268-70). An individual may thwart recovery therefore by refusing to access his or her unconscious; Freud describes the analysand who proves particularly resistant to therapy as viewing imminent recovery as a danger itself (“Ego and the Id” 49). Freud reads this obstinacy as due to a “‘moral’ factor, a sense of guilt, which is finding its satisfaction in the illness and refuses to give up the punishment of suffering . . . But as far as the patient is concerned this sense of guilt is dumb; it does not tell him he is guilty; he does not feel guilty, he feels ill” (49-50). Marlow’s internalised guilt as a child for his parents’ marital split, his mother’s death, and his false accusation of Mark Binney become manifest and nurtured as his chronic illness in adulthood, and in “The Yellow Wallpaper” the narrator’s guilt at failing to be, or more exactly, not wanting to be, her husband’s helpmeet results in fatigue. Therefore, the illness provides gratification for the underlying sense of guilt for the patient; to relinquish the illness necessitates addressing the cause of the guilt.

Gilman presents to the reader the stereotypical symptoms of an hysterical demise, but undermines popular medical assumptions that the illness reflects an innate and specifically female fragility which must be exorcised through strict self-control. Rather, female hysteria is a defensive response to the imposition of an alien – masculine – truth. Only a change in the narrator’s social situation, her journal implies, could bring about her full health. Julie Bates Dock documents contemporary reviews, two of which both recognise Gilman’s indictment of marriage for women, but with contrasting responses: Henry Blackwell asserts in the Woman’s Journal that the story should be “perpetuated and widely circulated” (qtd. in Dock 19), while the reviewer for
Time and the Hour believes “The Yellow Wallpaper” is a “book to keep away from the young wife” (qtd. in Dock 19), which Dock ascribes to the “story [being] calculated to prevent girls from marrying” (19). Contemporary objection to the story was clearly levelled at its subversive message; Shumaker suggests “the story was unpopular because it was, at least on one level, understood all too clearly, because it struck too deeply and effectively at traditional ways of seeing the world and woman’s place in it” (136). Critics have pointed to “The Yellow Wallpaper” itself being as incoherent as the wallpaper; Judith Fetterley notes that “The Yellow Wallpaper” has contributed to its “negative reception, outright rejection, and eventual obliteration by a male-dominated literary establishment” (181) due to the short story not being “susceptible of a masculinist reading” (181).

Potter, too, directs our reading – in this case to a psychoanalytic diagnosis of Marlow. That Marlow’s skin complaint is psychosomatic is implied by the general medical staff’s inability to secure his permanent health by way of skin applications and anti-depressants, through the patient’s repeated hospitalisations over 25 years (Potter Singing Detective 25). This view is further established by the psychotherapist’s contrasting steady progress towards accessing Marlow’s most cherished and related secrets; witnessing his mother’s adultery, falsely accusing Mark Binney of egesting on the teacher’s desk, and his mother’s suicide by drowning. As a result, the nine-year old Marlow is unable to successfully navigate the Oedipal process, and instead as an adult submits to the overt criticism of the Singing Detective – his superego.

Through the hard-boiled detective narrative, Marlow seeks resolution of his Oedipal crisis, while psychoanalysis within the hospital narrative provides a safe environment for emotional catharsis. In luring the viewer into concurring with a psychoanalytic interpretation of Marlow’s condition, Potter ‘winks’ at
the viewer’s acceptance of Marlow’s recovery within the institutional system. Psychotherapy in fact facilitates Marlow’s ‘metamorphosis’ from one kind of patriarchal agent, the misogynist, to another, the masculine figure adapted to authoritarian structures. Potter plays on the paradox of the radical theory made normative in therapy; Freud’s psychoanalytic theory is now associated with normalisation as a therapeutic institution. Roger Horrocks states:

[t]he subsequent history of psychoanalysis has tended to play down the more radical currents in Freud’s thinking. For if much of Freud’s theoretical exploration is potentially liberating, in the sense that ‘perversion’ is seen as normal, and ‘normality’ itself is seen as highly problematical, none the less, psychoanalysis as a political institution came to adopt a conservative, even punitive standpoint. (64)

Freudian psychoanalysis provides the tools for considering the two protagonists’ split subjectivity, yet, in the process of providing individual analysis, the political dimension is supplanted by a personalising and universalising impetus – precisely the effect Foucault sought to displace from his own theoretical perspective. With this limitation in mind, I will look first at the double binds which lead to the protagonists’ psychical confusion, and then review how the double becomes manifest in each text.

Unheard-of Contradictions

The narrator of “The Yellow Wallpaper” is thwarted in her desire to satisfy her wish to contribute meaningfully to society, and enjoy financial and emotional independence from her husband, by the general social attitudes which denied
nineteenth-century women these potentialities. Patriarchy determines who the narrator can be and what she can do; yet within this network of ideas, the narrator discerns inconsistencies and contradictions. These contradictions provide sites from which she can disrupt and confront patriarchy, but they can equally confuse and contain her determination to challenge the system. John and, by extension, patriarchy confound the narrator through binary oppositions, such as “sick and well, the real and the fanciful, order and anarchy, self and other, and male and female” (Haney-Peritz 194) and I would add to the list, ‘good’ and ‘bad’. Within each of these oppositions the narrator appears on the ‘wrong’ side of the ledger according to John’s rationale. Having internalised John’s point of view the narrator wishes to comply with what she has learned is ‘good’ – that is, to embody her contemporary feminine ideal – but increasingly finds that being ‘good’ is at odds with what she finds personally acceptable.

John conveys conflicting messages to his wife, which confuse and frustrate any resistance she puts up against his definitions of her. He tells the narrator she is not sick, but treats her as an invalid. Similarly, on one hand he wants her to exert her “will and self-control and not let any silly fancies run away with [her]” (Gilman, “Yellow Wallpaper” 39); that is, he would like his wife to be sensible, practical, and to value only that which is manifest, as per his own example. On the other hand, he asserts his wife as ‘other’ to his rational, masculine self, and therefore she cannot hope to fulfil the criteria he has promoted. To be female within patriarchy is to be fundamentally flawed.

The contradictions which emanate from these binary oppositions reflect the discrepancies inherent in John’s discourse. Through a “labor of miming” (Haney-Peritz 194) the narrator reveals the “unheard of contradictions” (Gilman, “Yellow Wallpaper” 32) within patriarchal reasoning by exposing
John’s fact as fancy. John initiated the move to the country solely for his wife’s benefit, but when she asks to occupy a downstairs room, or leave, John refuses, ostensibly for financial reasons (33-34). John originally intends to change the wallpaper but then decides he won’t as a lesson in self-constraint for the narrator (33), rationalised as economy: “I don’t care to renovate the house just for a three months’ rental” (33). The narrator’s requests are deflected as inconvenient or costly, but John does arrange to have the downstairs furniture moved into the attic, so that the “room is no worse than inharmonious” (35). Similarly, John asserts his wife’s health is improving, contradicting her own interpretation and his own actions. Through medical authority and the strength of his ‘love’, John hopes to convince his wife that through him she will realise her true subjectivity.

Left with little to do in her isolated attic other than lie on her “great immovable bed – it is nailed down” (37) and dwell on her condition, the narrator studies the wallpaper. She notes that the pattern is “as good as gymnastics” (37), “pointless” (37) and, in a certain light, it radiates: “the interminable grotesques seem to form around a common center and rush off in headlong plunges of equal distraction” (38). At once fascinated and frustrated by the ‘confusion’ of the pattern, the narrator becomes fatigued. Thus she writes in her journal:

I don’t know why I should write this.
I don’t want to.
I don’t feel able.
And I know John would think it absurd. But I must say what I feel and think in some way – it is such a relief! (38, italics in original)
The narrator’s determination to find a coherent design in the pattern is stymied, just as her need to make sense of her social context, and hence her subject formation, is circumvented by the lack of rationale or logic. She acknowledges that in writing down the confusion she sees, she is brought some respite; however, “the effort is getting to be greater than the relief” (38).

These contradictions undermine the narrator’s sense of self, as does the failure to name herself, or be named, in the text. John Berger and Thomas Luckman purport that “the self is a reflected entity” (152) and as such takes on the general attitude of significant others through a process of identification and self-identification. Further, “[e]very name implies a nomenclature, which in turn implies a designated social location. To be given an identity involves being assigned a specific place in the world” (152). Significantly, then, the narrator internalises her lack of individuality and lack of importance to society, and never reveals her name in her journal. This fundamental means of expressing identity and individuality is resisted by the narrator; she is both no woman and every-woman.

Equally, the narrator refuses the identity of wife and mother, finding that those positions in her specific social context are essentially already effaced, and also very visible in normative discourse of ‘the mother’. Her assigned role requires her to give priority to all others, pledge subservience to her male benefactor and offer nurturance upon demand, without reciprocation. As wife and mother within the middle-class Victorian patriarchal context, then, the woman is encouraged to perpetuate the phallocentric paradigm, and be satisfied with no other reward than an assigned task well done. According to Eric Fromm, the late nineteenth-century bourgeois male’s proprietal attitude towards women results in the assumption of women as ‘inanimate’: “[o]nce the conquest was assured by the first intercourse, the woman was relegated to the
task of producing children and to being an efficient housekeeper; she had changed from an object of chase to a no-person” (8). The narrator therefore needs to (re)invoke her subjectivity, to differentiate herself from her husband’s referents. His diminutives (‘little’, ‘girl’) and animal references (‘goose’) further convey to the narrator her husband’s designation of her as at best immature, at worst subhuman.

“The Yellow Wallpaper” itself can be considered one of the “unheard-of contradictions” (Gilman 32) because of its contradictory narrative structure. Diane Price Herndl suggests there are three ways in which the journal could possibly have been written: either “we are reading a madwoman’s text, a sane woman’s post facto description of madness, or an entirely impossible text, one that could never have been written” (133). Treichler is inclined towards the latter; how can the reader accept the story as a journal entry when the narrator claims the wallpaper consumes her time? The narrating instance is significantly troubled when the narrator relates events as John discovers the door to her room is locked. The narrator mixes present tense, “Why there’s John at the door!” (49), with past tense, “I kept on creeping just the same” (50) and consequently, “we are forced to experience a contradiction: the narrative is unfolding in an impossible form” (Treichler 73). Yet, attempting to fathom the contradictions inherent in this narrative’s production simply reiterates the narrator’s position– seeking to resolve the irresolvable.

Marlow of The Singing Detective is similarly caught by contradictions and double binds within the hospital context. Being treated like a child irritates him, but his frustration is vented through childish outbursts of invective and sarcasm. His immature reaction further encourages the authoritarian and ‘maternal’ scolding against which he was protesting, and so the cycle continues. Potter says that his character Marlow has, “no faith in himself, no belief in any
political, religious or social system. He [is] full of witty despair and cynicism” (Potter, “Interview with Melvyn Bragg” 12). Marlow’s loss of belief emanates from his perception that patriarchy is a socially constructed system, founded on the (mis)conception of men and women as polar opposites.

As a nine-year-old child, Philip realises that, contrary to the social belief that men are active and superior to subservient women, the boundary between the genders is in fact flexible. Philip grows up amongst strong-willed, vocal women and quiescent men, which troubles his learned belief of what constitutes masculinity and femininity. His schoolteacher and paternal grandmother, Gran, both exert a strong influence within their sphere, although they use their authority to promote and bolster patriarchy. The school teacher’s power comes from and in turn upholds Christian doctrine, while Gran assumes authority over Mrs Marlow in order to make her defer to the authority of her husband, Grancher, as patriarch.

Powerful women continue to dominate Marlow’s life in the hospital; Staff Nurse White and Nurse Mills – the nurses who provide most of Marlow’s care in hospital – cross-refer to his school teacher and mother in the past narrative. Both the strict and terrifying teacher and Staff Nurse White correct their students’/patients’ language, while the association between Nurse Mills and Mrs Marlow is made through their appearance and intimacy of care for Marlow. Marlow regards the former pair as exhibiting masculine traits, their severe demeanour and authority contrasting with the maternal care and feminine aspect of the latter pairing.13

The past narrative suggests that Marlow’s misogynistic attitude towards women emanates from his chance witnessing of his mother’s adultery. Upset and confused, one of the boy’s responses is to defecate on his teacher’s desk. This ‘filthy’ act in turn signifies Philip’s confusion over the supposedly firm
boundaries of right and wrong, good and bad. He wants to think of his mother as good, but knows that she has committed a sin. As witness he feels bad, defiled, but wants to be acknowledged as good – that is, innocent again. His school teacher has often confirmed Philip as a good and clever boy, who “put[s] the others to shame” (Potter, *Singing Detective* 76), and so by presenting to the all-knowing teacher the “moral mess” (Cook 232) that he has witnessed, he asks her to decide which side of the fence is he on: is he good or is he bad?

It soon becomes blatantly clear to Philip that he will be forever tainted as a “dirty – nasty – shameless – little beast –!” (137) if he owns up to the deposit. Not only does he not wish to be regarded as unequivocally bad for a single act, but he is also terrified of the horrendous punishment due the perpetrator. Following the lead of his teacher, who has difficulty believing her star pupil could perform such a gross deed, Philip avoids public humiliation and punishment by pointing the finger at Mark Binney. The severe punishment Mark Binney receives is Philip’s comeback for the humiliation Mr Marlow has unwittingly undergone at the hands of Mark’s father, Raymond Binney. Philip is shown as intensely aware of the danger Raymond Binney presents to his parents’ marriage, and fantasises public scandal over Raymond’s “rather too proprietal hand” (119) on his mother’s shoulder during one of the musical performances his parents give with Raymond Binney at the club.

The inability to accept that individuals can be both good and bad, that a single ‘bad’ act does not henceforth constitute that person’s moral value, leads to public endorsement of abstract and unattainable ideals. Marlow reveals his overzealous desire to conform to these ideals through his acceptance of the virgin/whore dichotomy – a defensive projection which says more about his own inner fragility than it does about those whom he judges.
The virgin/whore dichotomy is used in the hard-boiled detective genre to expose women as inevitably dangerous. Unlike the classical detective, who remains aloof from the crime and relies upon ratiocination to reach the ‘truth’, the hard-boiled detective invariably becomes involved in the criminal situation. The physical threat to the hard-boiled detective reflects the threat to his unified subjectivity and frequently the threat comes from a woman. Neither virgin nor whore stereotype can assuage the hard-boiled detective’s cynical attitude towards women. The Virgin figure, or potential wife and mother, threatens resocialisation of the self-determining hero, effectively stifling him through normalisation. For Raymond Chandler, author of the 1940s hard-boiled detective Philip Marlowe, women in the genre were valuable as a means to convey the detective’s sexual prowess, his masculinity, but any long-term relationship would be “quite out of character. I see him always in a lonely street, in lonely rooms, puzzled but never quite defeated. I am writing [Philip Marlowe] married to a rich woman and swamped by money, but I don’t think it will last” (qtd. in Krutnik 96).

Posing even more danger to the hard-boiled detective is the woman who has forgone the ‘haven’ of dependency – the femme fatale. James Maxfield describes the femme fatale as, “typically conceived of as an extremely attractive woman who deliberately tries to lead men to their destruction; she is composed of equal parts of seductive beauty and malice” (n.p.). Commonly, the femme fatale embodies the threat the masculine subject experiences from possible emotional dependency on a woman. According to Maxfield, the private detective’s masculine ideal, and hence his sense of self, would be subverted by a permanent attachment to a woman:
Attraction to a woman threatens one’s ability to adhere to the [masculine] code; it calls forth tender, yielding emotions that undermine toughness . . . the male protagonists seem to have a sense of what their culture expects of them as men, and allowing themselves to be led or manipulated into acting contrary to those expectations is necessarily perceived by them as a significant weakness: it is a violation of what they expect themselves to be, which expectation is based on their understanding of what their culture expects them to be. (n.p.)

Laura Mulvey asserts the femme fatale’s “textual eradication involves a desperate reassertion of control on the part of the threatened male subject” (qtd. in Maxfield n.p.). The hard-boiled detective therefore retains his probity through the repeated deflection of the aggressive femme fatale and the rejection of stifling normality engendered by the suburban woman. Foster Hirsch points to the “decided misogyny” (33) which prevails in Chandler’s oeuvre; the moral and sexual order Chandler’s Marlowe craves is obtained only when the invariably conniving women have been eliminated.15

In The Singing Detective, Marlow’s distorted and defensive attitude towards women results in an emotional tug-of-war; he is attracted to and wishes to have sexual relations with women, but, in consequence, the woman is inevitably reduced in his estimation to a whore. Intellectually, Marlow feels dirty and defiled by sexual relations, yet he succumbs to his ‘animalistic’ instincts, as evidenced by his use of prostitutes, which further ingrains his feelings of self-contempt. In an effort to relieve himself of the burden of his intense self-criticism, Marlow projects his self-hatred onto women.
When Marlow’s estranged wife, Nicola, visits him in hospital, he coarsely tries to deflect her attentions: “The plain fact of the matter is that you are a filthy, predatory and totally wanton bitch who is always on heat. And I do not wish to see you. Not now, and not ever” (Potter, *Singing Detective* 134). He accuses Nicola of being a whore, and yet it is he who knows the top price for such services (135). Marlow is unable to believe that Nicola could sincerely care for him as he judges her by his own warped and unrealistic standards. Nicola’s interest in rekindling physical intimacy with Marlow (134, 200) and knowledge of a film offer on the novelette he is imaginatively recreating, make the patient feel vulnerable and paranoid. In defence, Marlow fantasises that Nicola is endeavouring to appropriate his manuscript – the work which embodies his masculinity – in order to pass the script on to her fantasised lover, Mark Binney.

Marlow envisages that Binney will receive public accolades from ‘The Singing Detective’, thereby reinforcing Binney’s (stolen) masculinity, while he, the author, will remain unidentified and unheralded in a hospital bed. For her part – seducing Marlow so as to gain his signature conferring rights on the script – the fantasised Nicola expects Binney to give her the lead female role. Nicola knows that the role has been written for her, and that it is her chance to gain prominence as an actress. However, to eliminate Nicola as a threat, Marlow vindictively fantasises Binney telling Nicola that her role has been given to a younger, well-known actress, on the basis that Nicola is “a teeny bit too old now” (217). In fact, Marlow delights in the ‘social death’ experienced by women through the aging process (217). As a woman’s beauty fades with age, her sexual allure withers, thereby alleviating the threat she poses to men. Marlow has anticipated the fantasised attack on Nicola during a visit:
MARLOW: You are without any shadow of doubt an exceptionally beautiful woman. At the very peak of her nubility.

NICOLA: That sounds exactly like a death sentence.

MARLOW: It *is* a death sentence. (133, italics in original)

Marlow accentuates in this transaction that although he is attracted to Nicola by her beauty, it is this very quality which marks her as a threat to him; he views her as a femme fatale. By succumbing to her, Marlow makes himself vulnerable and he is not yet strong enough, or masculine enough, to take on that risk. So Marlow draws upon the values of his super-ego, the Singing Detective, to protect him from the perceived attack on his subjectivity. By fantasising Nicola’s suicide Marlow protects his precious, if illusory, self-sufficiency.

The contradictions Marlow and the narrator of “The Yellow Wallpaper” perceive within patriarchy become symptomatically expressed in their doubling. The narrator’s mental coherence is undermined by the confusion which arises from being simultaneously constituted as sick and well, prisoner and patient, mother and child; hysteria becomes her avenue of protest. Marlow’s desperation to be regarded as ‘good’, but primarily viewing himself as bad, results in his intense self-loathing. Splitting into the Singing Detective and Mark Binney is therefore a defence mechanism for Marlow, allowing him the possibility to explore both potentialities. Yet, how has the manifestation of a double come about for both protagonists? What processes have made splitting possible? Foucault describes how power relations can exert pressure upon individuals to conform, but it is Freudian theory which explores the psychic response to that pressure. The view that impositions come to be played out within the individual’s psyche asserts subjectivation as an internalised drama, a performance which requires more than one actor.
In Defence of the Self

Doctor Robert Carter suggested in 1853 that when dealing with hysterics doctors ought to:

[a]ssume a tone of authority which will of itself almost compel submission . . . If a patient . . . interrupts the speaker, she must be told to keep silence and to listen; and must be told, moreover, not only in a voice that betrays no impatience and no anger, but in such a manner as to convey the speaker’s full conviction that the command will be immediately obeyed. (qtd. in Smith-Rosenberg 93)

This medical advice implies Doctor Carter viewed hysteria as less an illness than as insurrection on the part of the female patient. Similarly, Silas Weir Mitchell’s rest cure sought to subdue the patient through bed rest. His treatment entailed the complete rest (physical and mental) as promoted by the narrator’s husband, John: “neither to read, write, nor sew, and to have one nurse, – who is not a relative, – [so] repose becomes for some women a rather bitter medicine, and they are glad enough to accept the order to rise and go about when the doctor issues a mandate which has become pleasantly welcome and eagerly looked for” (Mitchell 105-6). Viewed retrospectively, the rest cure appears punitive; it was a punishment through which Mitchell intended to return hysterical women to their duties as wives and mothers, which they had purportedly eschewed in favour of invalidism.

Mitchell’s attitude towards his female hysterical patients reflects his society’s ambivalence towards women. Although he despaired that “[i]f the
mothers of a people are sickly and weak, the sad inheritance falls upon their offspring” (109), he also promoted the perception of women as biologically deficient, stating, “it were better not to educate girls at all between the ages of fourteen and eighteen, unless it can be done with careful reference to their bodily health” (110). Mitchell had no time for female patients who questioned his authority, asserting, “[w]ise women choose their doctors and trust them. The wisest ask the fewest questions” (110). He clearly regarded his role as doctor as extending to a type of ‘moral police’, enforcing cultural mores which the women were apparently shunning:

If the physician has the force of character required to secure the confidence and respect of his patients, he has also much more in his power and should have the tact to seize the proper occasions to direct the thoughts of his patients to the lapse from duties to others, and to the selfishness which a life of invalidism is apt to bring about. Such moral medication belongs to the higher sphere of the doctor’s duties, and if he means to cure his patient permanently, he cannot afford to neglect them. (108)

This condescending attitude did not extend to the men who also endured hysterical symptoms – Weir Mitchell himself being a notable sufferer (Showalter, Hystories 50). The derogatory connotations associated with female hysteria (inability to cope with mental or physical strain) were supplanted by complementary theories of too much exhausting intellectual endeavour, brought about by the male’s profound public role in society. This gendered attitude towards the aetiology of hysteria was similarly reflected in treatment; the traditional values of female passivity and male activity were endorsed
through the female hysteric being ordered to bed and the male having to counter his cerebral fatigue with physical exercise (50,65-66).

The narrator of “The Yellow Wallpaper” may turn to hysteria as a means of protest, but how successful can she be when isolated and in bed? “The more women became hysterical,” write Barbara Ehrenreich and Deirdre English, “the more doctors became punitive toward the disease; and at the same time, they began to see the disease everywhere themselves until they were diagnosing every independent act by a woman, especially a women’s rights action, as ‘hysterical’” (46). Freud and Breuer came to a very different opinion from Weir Mitchell regarding hysterical women: “[i]n our opinion ‘among hysterics may be found people of the clearest intellect, strongest will, greatest character and highest critical power’” (Studies on Hysteria 232). Rather than viewing hysterics as mentally weak and requiring redirection through firm, paternal governance, Freud and Breuer considered these people, predominantly female, as possessing “an excess of efficiency, the habitual co-existence of two heterogenous ideas” (233, italics in original). In the ‘normal’ individual, an idea which produces anxiety or displeasure becomes available to consciousness due to the increasing intensity which attaches to it, whereas for those with an ‘excess of efficiency’ the idea may be “inadmissible to consciousness” (225). As a consequence, the troubling idea, despite its ‘liveliness’ or ‘great intensity’, remains in the unconscious – a pathological state (225).

In order to cope with incompatible information, which remains specifically unknown although psychically disturbing – the contradictions that trouble the narrator of “The Yellow Wallpaper” – the potential hysteric dissociates at a psychical level from the information as a means of self-protection: “hysteria originates through the repression of an incompatible idea from a motive of defence” (285). Two states of consciousness develop, causing
a splitting of the mind, and this, according to Freud and Breuer, is the “consummation of hysteria” (249).

The hysteric therefore engenders a dual personality; one, the primary state, is construed as ‘normal’, the secondary state assumed pathological. In *Studies on Hysteria*, Breuer proposes two psychical characteristics that predisposed Fraulein Anna O. to a divided personality: first a lack of intellectual stimulation in her colourless family life, resulting in “an unemployed surplus of mental liveliness and energy” (41); second, the direction of her unused energy into her imagination. While daydreaming is not in itself a cause for concern, the slippage from “habitual day-dreaming” into “hallucinatory absence” is (42, italics in original). Breuer describes Fraulein Anna O.’s secondary consciousness as similar to “a dream in view of its wealth of imaginative products and hallucinations, its large gaps of memory and the lack of inhibition and control in its associations” (45). This depiction of the secondary state relates closely with the narrator’s double in “The Yellow Wallpaper”; the narrator’s primary state—her ‘sanity’—is associated with the daylight or empirical clarity of John’s world, while her ‘insanity’ is revealed at night as she imaginatively invokes the wallpaper woman by moonlight.

Although there is a sharp division between the primary and secondary states, these spheres are never entirely separate— they are, after all, parts of the same psyche. The secondary state intrudes upon the primary, taking advantage of fatigue or enervated moods to impose its consciousness. But equally, the primary state is always present; Fraulein Anna O. described to Breuer that “a clear-sighted and calm observer sat . . . in a corner of her brain and looked on at all the mad business” (46). Anna O. was eventually to overcome her illness through the articulation of her hallucinations, which she called the ‘talking cure’ (Breuer 30).
It is the narrator’s increasing identification with her secondary state, the wallpaper woman, which brings about the shift in her behaviour from “a slight hysterical tendency” (Gilman, “Yellow Wallpaper” 30) to insanity. Through irony the narrator linguistically reveals her deepening internal division; the narrator distances herself not only from John’s behavioural demands and Jennie’s model example of femininity, but also from her own internalisations of those behavioural prohibitions and attitudes. This antithetical attitude seeps into the journal and ranges from conscious, although tempered, transgressive remarks – she writes on the first page that her physician/husband may be responsible for exacerbating her illness (29) – to seemingly unconscious irony: “[John] is very careful and loving, and hardly lets me stir without special direction” (31). The narrator devalues her feelings as ‘irrational’ by writing that her anger at John is “unreasonable” and she is “basely ungrateful” (31) for not appreciating the lengths he will go to for her care, at the same time revealing that her anger is entirely justified due to John’s stubborn refusal to listen to his wife’s desires: “I don’t like our room a bit. I wanted one downstairs that opened on the piazza and had roses all over the window, and such pretty old-fashioned chintz hangings! But John would not hear of it” (31).

As the journal entries progress, the narrator becomes seemingly oblivious to her act of writing. She writes, “I think sometimes that if I were only well enough to write a little it would relieve the press of ideas and rest me” (34), and later in the journal when referring to her lack of helpfulness during her mother and sister’s visit she notes, “I don’t feel as if it was worthwhile to turn my hand over for anything” (37). Yet, the narrator does use her hands, most effectively and rebelliously by continuing to write the journal, despite John’s instructions otherwise. “The writing of the narrative is itself the narrator’s most successful act of rebellion” (DeKoven 212-13), but the narrator comes to find the process
depleting; whether it is the writing itself that is enervating, or the act of “having to be so sly about it” (Gilman, “Yellow Wallpaper” 30), is ambiguous.

The narrator’s deepening hysteria is further signalled by the increasing clarity with which she sees the woman trapped within the wallpaper’s complex pattern. At first the narrator notes the offensiveness of the wallpaper – it is torn, has an irritating pattern, and an unclean yellow colour (32). But, under moonlight, she soon perceives “a strange, provoking, formless sort of figure” (36). Eventually this figure comes to look “like a woman stooping down and creeping about behind that pattern” (39). As her incarceration in the attic continues under John’s suffocating ‘love’ she discovers “the dim shapes get clearer every day” (39).

Corresponding to the narrator’s increasing identification with the wallpaper woman, the tonal and pronominal ambiguities within “The Yellow Wallpaper” become more pronounced, culminating in the narratological dilemma of who exclaims “I’ve got out at last” (50) – is it the unnamed narrator or the wallpaper woman? Immediately having noted that writing in her journal is “such a relief!” (38), the narrator counters this assertion, with the effort exceeding the benefit (38). Seemingly unconscious to the dramatic irony, the narrator writes, “I never thought of it before, but it is lucky that John kept me here after all, I can stand it so much easier than a baby, you see” (39). Of course, as readers and confidantes of her secrets and contraband writing, we ‘see’ that she is in fact unable to withstand her isolation. Yet, the narrator’s use of irony means that, overall, the reader is never quite sure what the journal’s author actually thinks. For example, the narrator’s query of John, “So you won’t go away?” (41), can be interpreted as both a literal request for information and as an expression of regret.
Having learned that her physician/husband will not leave before the expiry of their rent, and that he has sternly deflected her intimation of mental instability, the narrator lets her “false and foolish fancy” (41) dominate her view of the wallpaper. She now watches the paper all the time, but especially at night, because in the moonlight, the wallpaper clearly reveals a woman. As the narrator watches this woman, her writing becomes more assertive and triumphant. No longer rhetorically asking, “what can one do?” (29), she refuses to take John’s condescension and deflects his pleasure in her returning ‘health’ with a laugh (43). Now the narrator is certain that the woman she has discerned, one of many caught within the pattern, “just takes hold of the bars and shakes them hard” (45). She believes that this woman “crawls around fast, and her crawling shakes [the pattern] all over” (45), which seems to answer her query regarding the streak, or smooch, that runs around the room, and foregrounds her own eminent daylight creeping.

“Hurrah! This is the last day, but it is enough” (47); the narrator is exultant as she begins her final journal entry. However, who is writing by this stage is less clear. She writes of the wallpaper woman in the penultimate entry that “it must be very humiliating to be caught creeping by daylight” (46), while she herself takes precautions: “I always lock the door when I creep by daylight” (46). The narrator’s conflation with her double is highlighted by the fluidity of their positions and common act, realised in her prose through chiasmus: “I pulled and she shook, I shook and she pulled, and before morning we had peeled off yards of that paper” (47). Left alone in the attic, the narrator has finally facilitated her double’s escape from the wallpaper pattern; her secondary state dominates, rather than merely intruding upon, her primary, ‘sane’ condition. So now the narrator exclaims, “I suppose I shall have to get back behind the pattern when it comes night, and that is hard!” (49) and finds
comfort in the room she originally found unsatisfactory: “here I can creep smoothly on the floor, and my shoulder just fits in that long smooch around the wall, so I cannot lose my way” (49).

Thomas Szasz proposes that a potential hysteric is encouraged to regress to non-verbal communication when verbal communication fails. Ironically, the iconic behaviour employed in hysteria, as noted, is ambiguous, and often misinterpreted – exactly what the hysteric desires according to Szasz, for “hinting serves mainly to protect a speaker who is afraid to offend” (Mental Illness 142). Hysteria therefore allows the individual indirectly to convey information, which may be unpalatable to the recipient. Even if the information is unconsciously held, the communication satisfies the need to ‘speak out’ without risking punishment or admonishment.

At root of hysterical behaviour, then, is a problem for one person in her relations with another; the narrator refutes the view that women are so predisposed. So as to satisfy at once her own integrity and social expectations the narrator splits her identity, but within this division she primarily identifies with the transgressive woman, not the complicit ‘Jane’: “I’ve got out at last, in spite of you and Jane” (50) she triumphantly tells her husband. Philip Marlow likewise identifies more immediately with his socially transgressive double, Mark Binney. However, Marlow’s identification with Binney is negative, a form of self-loathing. To become socially acceptable and, by extension, healthy, Marlow needs to redirect his primary identification to a figure whom he can respect. A figure like the Singing Detective.

The Super-ego and the Id

If the hard-boiled crime fiction genre is a rewriting of the Oedipal complex (Krutnik 113) it follows that Marlow’s rewriting of his out-of-print novelette
‘The Singing Detective’ is a re-rewriting of his own Oedipal process through which he will subject himself to the law of patriarchy. Marlow does want to conform; he desires the power and autonomy promised him by patriarchy, but because these boons are not biological givens he must achieve masculinity by undergoing, according to Freudian theory, the Oedipal drama.

Marlow’s original writing of his novelette indicates his desire to reinitiate himself into masculinity; however, the out-of-print status of ‘The Singing Detective’ intimates that his reconstructed subjectivity was not successful. Through illness and hospitalisation Marlow ensures his literary failure, even though he intuits he must write – that is, he must resubmit to the process of masculinisation – to secure his release from hospital: “If I don’t think I’ll never get out of here” (Potter, Singing Detective 16, italics in original). Ironically, and appropriately, Marlow commences rewriting his subjectivity while enduring enforced dependency in hospital.

According to Freudian psychoanalytic theory, the Oedipal complex is the process by which boys are initiated into masculinity. Freud writes summarily, “[a]t a very early age the little boy develops an object-cathexis for his mother . . . the boy deals with his father by identifying himself with him” (“Ego and the Id” 31). The child’s relationships with his parents become troubled, however, when interest in his mother develops into sexual desire, and thus his father becomes a rival: “[the boy’s] identification with his father then takes on a hostile colouring and changes into a wish to get rid of his father in order to take his place with his mother” (32). Resolution lies in giving up the object-cathexis of his mother. “Its place,” asserts Freud, “may be filled by one of two things; either an identification with his mother or an intensification of his identification with his father” (32). The latter is regarded as normal, with identification with the father “consolidat[ing] the masculinity in a boy’s character” (32).
Of course, this is a simplification of the empirical process; Freud notes that the above representation, “is by no means the commonest form” (33), and Marlow’s experience suggests complications within his original Oedipal drama. The past narrative reveals an unhappy extended family cohabiting in Philip’s paternal grandparents’ home. Living with Gran and Grancher means Philip’s parents are subject to the grandparents’ authority. Mr Marlow is consequently not head of his own household, not the patriarch Philip is supposed to emulate. Rather, it would seem that Mr Marlow is literally waiting for Grancher to die before assuming any masculine power. He is portrayed as arbiter of the peace in the house, as his wife, “very unhappy with her situation in this tiny squabbling-box of a house” (Potter, Singing Detective 69), angrily tries to reinforce her authority over Philip against Gran’s interference.

Mrs Marlow’s baulking at Grancher’s spitting into the fire grate and calling his home a “poky hole” (69) precipitates decisive action in the ongoing family feud; Mrs Marlow senior orders her ‘apprentice’ out of the house and so Philip and his mother leave for London. Philip realises, “Summat’s wrong. Summat’s bloody wrong, mind!” (94). In leaving Mr Marlow behind, Philip increases his identification with his father, literally taking on his father’s role of protector and ‘owner’ of his mother. Aware of his mother’s adultery and the ignominy of being cuckolded within patriarchy, Philip desperately tries to protect his father’s position during the train journey: “Doons’t thou touch her! Kip thee hands off our Mum! Leave her alone!” (118), he yells at the soldier who attempts to console Mrs Marlow.

But Philip is unable to protect his mother; she commits suicide by drowning in the Thames. Philip consequently returns home to his father and beloved forest. If Philip aligned himself with his absent father during his short stay in London, then his return to the Forest marks a consolidation of
identifications with his mother, coping with her death through introjection. Freud believes, “[w]hen it happens that a person has to give up a sexual object, there quite often ensues an alteration of his ego which can only be described as a setting up of the object inside the ego . . . It may be that this identification is the sole condition under which the id can give up its objects” (“Ego and the Id” 29). So when “[a]lmost slyly, certainly shyly, Philip reaches for and then curls his hand into his father’s hand, as they walk” (Potter, Singing Detective 233) through the forest, the boy takes his mother’s place, allowing his identifications with her to dominate. Freud explains in “Mourning and Melancholia” (1915) that this identification can become problematic: “The loss of a love-object is an excellent opportunity for the ambivalence in love-relationships to make itself effective and come into the open” (250-51). Philip’s identification with his mother means that, although he has ‘lost’ her, he can maintain the conflict which arose from knowledge of her adultery. Although this conflict is played out within his psyche, Philip is able to punish his mother by the “circuitous path of self-punishment” (251).

This observation is reinforced by the self-loathing with which he views himself as an adult. Having witnessed his mother’s adultery, Marlow has developed a distorted understanding of women. He links negative qualities with women, culminating in his confessed association of “woman-fuck-dirt-death” (Potter, Singing Detective 177). Through his identification with his mother, Marlow also brings these attitudes to bear on himself. Although he projects his disgust and anger at women (“You disgusting tramp! Nicola! You two-bit, rutting whore!” [84]), he gradually acknowledges that his revulsion is actually directed at himself: Marlow informs Nicola: “It’s an improvement, ennit? . . . Spitting at me. At my own reflection. Couple of weeks ago my idea of happiness would have been to spit into your face” (197, italics in original).
His moral ambivalence is reflected in his recollection of apologising for verbally abusing a prostitute: “I’m sorry I – Look. It wasn’t really *me* calling you names. I don’t mean them. I don’t want to do it. It’s just that – afterwards – I always feel – It’s nothing personal” (182, italics in original).

Regarding an individual’s morality Freud proposes, “[f]rom the point of view of instinctual control, of morality, it may be said of the id that it is totally non-moral, of the ego that it strives to be moral, and of the super-ego that it can be super-moral and then become as cruel as only the id can be” (“Ego and the Id” 54). Marlow, Mark Binney and the Singing Detective represent this tripartite schema as the different psychical versions of Marlow. The hospitalised Marlow figures as his ego. As such, it is Marlow’s ‘job’ to give “mental processes an order in time and [submit] them to ‘reality-testing’” (55), which he undertakes as he reminisces and tries to rationalise his past, present and fantasies. The Mark Binney characters personify his id. Associated in Marlow’s case with the feminine, his id is ruled by the pleasure principle, seeking sexual gratification, success, and material tokens of that success through devious means. The superego, as an ideal of masculinity as well as the understanding that this ideal is unattainable, operates as a censor, or critic, berating the ego for failing to meet its standards. The superego is therefore representative of “man’s higher nature” (36). What this ‘higher nature’ is for any individual is dependent upon the teachings of external authorities: “[a]s a child grows up, the role of father is carried on by teachers and others in authority; their injunctions and prohibitions remain powerful in the ego ideal and continue, in the form of conscience, to exercise the moral censorship” (37). The Singing Detective is, of course, the super-ego, watching and recriminating Mark Binney within the detective narrative for his low moral standards, and ultimately passing judgement on Marlow.
Marlow, as author of the detective narrative, expresses his closest affinity with Mark Binney; the latter experiences the same heat and sweat as his author (Potter, *Singing Detective* 23) and is shown to repeat Marlow’s personal experiences, such as his liaison with a prostitute (182). Marlow’s self-loathing is implied by the projection of his negative qualities onto the character with whom he is so closely aligned. Through his association with the prostitutes Amanda and Sonia, Mark Binney is revealed as misogynistic but weak; he buys Amanda champagne so as to secure her company in his bed, but is tricked by the women into taking Sonia home instead. Once there, he attempts to humiliate Sonia by associating her paid conduct with the filthy river and demanding she “[s]ay please to Daddy” (47, italics in original) before he will pay her. This “wholly nasty creature” (47) is confounded by Sonia’s composure and disregard for money, hissing, “What are you trying to do? Make me feel small?” (48) when the prostitute eats his money. Sonia’s ensuing death leads to Mark Binney’s perceived persecution; he pleads innocence and employs the Singing Detective to clear ‘his good name’.

“The super-ego arises, as we know, from an identification with the father taken as the model” (Freud, “Ego and the Id” 54). As such, the super-ego develops out of the Oedipal drama. However, as a passive and cuckolded father, Mr Marlow did not provide Philip with the patriarchal standard of masculinity; rather, the Singing Detective-as-super-ego represents to the ego what he should be, but in fact never will be. Implicating the institutional supports of patriarchy, Freud asserts, “[t]he super-ego retains the character of the father, while the more powerful the Oedipus complex was and the more rapidly it succumbed to repression (under the influence of authority, religious teaching, schooling and reading), the stricter will be the domination of the super-ego over the ego later on” (34-35).
From his hospital bed, Marlow tells Nicola that his health problems stem from “sex and lies” (Potter, Singing Detective 197). Witnessing his mother’s adultery as a child and recognising the extent of lies one must comply with to participate in society undermine Marlow’s learned belief in the possibility of truth. Upon realising the fallacy of the ‘truth’ espoused in secular and religious education as a boy, Marlow turned to the hard-boiled detective as a role-model: “when I grow up I be going to be a detective” (77, 249). Hard-boiled crime fiction and film were very popular in the 1940s, and so it is not unreasonable that the child would wish to emulate this popular hero. The Singing Detective’s quips, “What’s the day? What’s the age?” (62) suggest that irrespective of the time, the attitudes embodied by the hard-boiled detective remain pertinent to Marlow in 1986 due to the 1940s being the era of his most influential childhood experiences. As a boy Marlow was attracted by the fictional character’s self-confidence and ability to determine ‘who did it’ – qualities which elude the adult Marlow as he tries to determine who is responsible for his perpetual ill-health.

It is through his detective narrative that Marlow explores and tries to rewrite his masculinity. Thomas Schatz claims that the original Philip Marlowe is Raymond Chandler’s “ideal fantasy version of himself” (36), and likewise Marlow draws his Singing Detective as his ego ideal. Marlow is attracted by the stereotypical hard-boiled detective’s uncompromising sense of right and wrong. Ironically, it is this strong conviction which demands the character’s existential isolation, continually walking a slippery path between the criminal world, which seeks to defeat his quest for the truth, and the suburban world of social responsibility. The genre is more about the hard-boiled detective’s journey towards a unified masculinity than it is about restoring order to society; the detective narrative’s function is to affirm the hero as an “idealised and
undivided figure of masculine potency and invulnerability (precisely as ‘His Majesty the Ego’)” (Schatz 93, quoting Freud’s “On Narcissism”).

“Langwidge!”

The detective’s construction of the truth through first-person narration is foregrounded in the detective narrative, with the legitimacy of this truth conveyed by his personal integrity. As a “non-affiliated professional” (Krutnik 92) the hard-boiled detective believes himself morally superior to the police, who are frequently portrayed as corrupt. This social corruption extends as a threat to the hard-boiled detective’s very identity, with the hero’s primary concern being to triumph over “the dangers presented by the feminine – not just women in themselves but also any non-‘tough’ potentiality of his own identity as a man” (113).

Because Marlow writes so as to gain internal coherence and self-respect, language clearly plays a fundamental role in his quest for a new subjectivity. Marlow regards language as his means to power; if he has control of language, he will automatically attain the self-mastery he perceives, and longs for, in the hard-boiled detective. However, the problem for Marlow is that he believes women have purloined language from men. During the past narrative – the time of Marlow’s original Oedipal drama – strong, articulate women contrast with meek and inarticulate men. Marlow tries to reappropriate language from women because he has witnessed the power, albeit circumscribed, women have assumed as the result of men not using their voice. Philip’s swearing and frequent adult blaspheme ‘Christ almighty’ is copied from his mother, and in taking on the London accent as an adult he may have accepted her direction that to speak with dialect is to be thought unintelligent: “‘Do you?’ You’d better
say ‘Do you?’ now, not ‘Doost’, Philip. Up here, anyway. People’ll think you’re funny” (Potter, Singing Detective 184).

In contrast, Mr Marlow mostly relies upon body language, gestures and music to communicate. He nods and winks across the bar to Philip and expressively whistles ‘birdsong’ to entertain his community (71). Although Philip understands his father’s body language, he views verbal language as an indicator of intelligence due to the teacher’s fierce indoctrinations and his mother’s likeminded reverberations. Responding to Philip’s bestial act of defecating on her desk, the teacher insists that humans are superior to animals through reason. Mr Marlow’s affinity for animalistic or primal communication therefore indicates a dubious ‘civilised’, or even human, status:

TEACHER: [Animals] can’t speak. They can’t reason. They know not the difference between right and wrong. They are animals! But – ! But *we* are not animals. God has given us all the sense of good and of bad. God has allowed us to tell the difference between the clean and the dirty. (138, italics in original)

Philip comes to believe that ‘speaking out’ leads only to pain. Mark Binney is severely punished for Philip’s distressed act and Mrs Marlow is banished from the family home, eventually drowning herself when Philip does not stop asking her when his father will join them in London. Attempts to communicate within the past narrative and the hospital are curtailed; Mrs Marlow tells Philip to “shut up about it” (185), while Nurse Mills refuses to discuss Marlow’s unintentional emission during his greasing (20).

When Philip returns to his father after Mrs Marlow’s suicide, he withdraws from emotional contact, having learned that personal expression
only leads to being hurt: “Don’t trust anybody again! Don’t give your love.” (232). So when Mr Marlow suddenly tells his son, “I love you, Philip. I love you, o’but. With all my heart” (222) he is rejected: “Shhh! … Kip tha’ quiet!” (222). Philip runs away from the emotional admission, hiding behind trees, but watches his father’s dejected figure slowly making his way down the forest path. He is deeply pained by the loss of his wife and now his son’s rebuff:

Mr Marlow suddenly stops walking. He stands dead-still. A long strange moment, in which both he and his watcher [Philip] remain absolutely motionless. Then, suddenly, Mr Marlow – imagining himself to be alone and unobserved – throws back his head and lets out one long and strange and almost animal-like cry of absolute grief and despair. (233)

Although seemingly unmoved by his father’s “terrible release of anguish” (233) as a child, we understand that the hospitalised Marlow regrets the cost of ‘hiding within himself’. Marlow hallucinates himself sitting in his hospital pyjamas at a table in the club frequented by his parents, shocked that his arthritic, curled hands preclude him from “join[ing] in the hand-banging, foot-stamping applause for his father” (78) who has just whistled ‘Birdsong at Eventide’. The hospitalised Marlow’s metaleptic appearance in the past narrative does not disturb the patrons, rather, one patron takes the opportunity to accuse Marlow of not wanting to applaud his father, and that he “never did give the poor bugger credit when him was alive” (78). Devastated at the news his father is dead, Marlow splutters, “But – no – but you see – There’s so much I want to say – I need to talk to him very badly” (79). Unable to speak to his father, even with “all the love in the world” (79), Marlow’s attempt is defined as “[n]othing – just
a babble” (79) by the registrar back in the hospital narrative. To relieve Marlow from his distress of trying to communicate with his father, the registrar administers a sedative so that “[e]verything is under control” (79).

Communication is also troubled within the detective narrative. Exasperated by the Singing Detective’s “unhelpful, paperback-soiled, mid-Atlantic, little side-of-the-mouth quips” (100) Binney complains, “I have no idea what you mean. Really. No idea of what you are talking about. Isn’t it possible for you to talk properly, in ordinary, decent English?” (101). Schatz defines hard-boiled detective language as cynical but controlled, highlighted by the many ‘wisecracks’ and ‘side of the mouth quips’ which signify the detective’s potency (43). Marlow’s ‘purple prose’ within the published (but out of print) ‘The Singing Detective’ does not fulfil these criteria, suggesting his inability to “obey the rules” (Potter Singing Detective 143). Doctor Gibbon has Marlow listen to his own voice by reading him a paragraph which “doesn’t seem to belong in a detective story” (58):

Mouth sucking wet and slack at mouth, tongue chafing against tongue, limb thrusting upon limb, skin rubbing at skin . . . – Faces contort and stretch into a helpless leer, organs spurt out smelly stains and sticky betrayals. This is the sweaty farce out of which we are brought into being – . . . We are implicated without choice in the slippery catastrophe of the copulations which splatter us into existence – . . . We are spat out of fevered loins. We are the by-blows of grunts and pantings in a rumpled and creaking bed. Welcome. (58)
This passage is an angry and bitter description of sexual intercourse, which does not reinforce the hero’s potency, but rather indicates the author’s repressed material has forced its way into his writing, just as it has onto his skin. Marlow’s rewriting of the novel therefore seeks to modify his hypersensitivity towards emotional content. As the Singing Detective in the detective narrative sings ‘Paper Doll’, he thinks:

There are songs to sing. There are feelings to feel. There are thoughts to think. That makes three things. And you can’t do three things at the same time. The singing is easy. Syrup in my mouth. The thinking comes with the tune – so that leaves only the feelings. Am I right? Or am I right? I can sing the singing. I can think the thinking. (Suddenly savage) But you’re not going to catch me feeling the feeling. No, sir. (86, italics in original)

Marlow uses the detective genre to comment on his own overwhelming sensitivity, which stems from past experiences.

The scene cuts to the past narrative, where Mr Marlow stands, a dejected man, as Philip and his mother leave by train for London. Mr Marlow’s distress is conveyed by his scarecrow-like countenance: “Mr Marlow waits abjectly on the edge of the platform, his arm up, oddly stiff and not actually waving . . . Like a statue” (86). In contrast to Mr Marlow’s bottled feeling, Mrs Marlow begins to cry uninhibitedly in front of the soldiers who share their carriage. Philip is embarrassed and confused – just as he is when he, too, cries, this time as an adult, symbolically crucified before the emotionally detached consultant.

It is implied in The Singing Detective that Marlow’s psoriasis is to a large extent caused by repressed emotions. Although Marlow refutes the
psychologist’scouched suggestion that repression may be his problem (56), his reminiscences of the past validate the idea. Following their departure from the country, Philip shows his mother his first psoriatic lesion while in the London Underground – which his mother notably tells him to cover up with his sleeve (185). Although Mrs Marlow is concerned about her son’s skin condition, she does not concede to Philip’s persistent demand to use the lesion to return home: “Better show our Dad, an’ us? We’d better show this here arm to our Dad. That’s what we got to do, ant us?” (185).

The child’s skin lesion develops into the debilitating condition witnessed at the beginning of The Singing Detective, which the medical fraternity are unable to sustainably ‘cure’ – their somatic treatment failing to address the foundations of his ill-health. In contrast, the psychotherapist, Doctor Gibbon, is quick to perceive Marlow’s problems: “You don’t like women. Do you? . . . Is it not the case that you regard sex with fear and distaste, even – loathing?” (53-4).

Although Marlow regards himself as intellectually superior to most,18 the failed status of his ‘cheap’ literature indicates that his talent is unrealised and confidence misplaced. In reality, his grasp of language is limited to swearing and quotations about hell from Christopher Marlowe’s Doctor Faustus. Doctor Gibbon affords Marlow the opportunity to return to and relearn the basic skills of word association through a language game, and so advance from his use of protolanguage to the abstract complexities of metalanguage.

The word association game consists of the doctor offering up a word to which Marlow must respond immediately with a word that he links with the doctor’s. Marlow is confident that he will outwit Doctor Gibbon in the verbal sparring; however, like a detective, the doctor manoeuvres his client into speaking his ‘crime’ and exposing his damaging attitudes, self-loathing, and fatalism. The associations of “women-fuck-dirt-death” (177) point to Marlow’s
compulsive metaphorical murder of women within his writing. As a child he learned through his mother’s adultery that women deviantly threaten patriarchal order through their sexuality. He understands that the penalty is death; hence the recurrent images in *The Singing Detective* of naked female bodies floating facedown in the Thames. Doctor Gibbon is surprised that Marlow would use such personal information in his writing (210), yet we learn that from his hospital bed Marlow is planning a similar fictional demise for Nicola.

According to the logic of the hard-boiled detective genre, in the hospital narrative Nicola threatens to subsume Marlow within normative society through her love. Nicola is a strong, articulate, and intelligent woman, whom Marlow explicitly conflates with his mother when he envisages his estranged wife in the forest with Raymond Binney (75). He is attracted to Nicola but also fearful that she will undermine his fragile masculinity. Consequently, Marlow believes that he cannot be the Singing Detective and be married at the same time.

As Marlow suspects, Nicola colludes with Doctor Gibbon over his future. Like Doctor Gibbon, Nicola suggests Marlow take a separate room to facilitate his writing. Both the psychotherapist and wife, as vehicles for the heterosexual imperative within patriarchal society, direct Marlow to change his personal script; Doctor Gibbon counters Marlow’s fatalism about “things as they are” (173) with the alternative perspective of events as ‘accidents’, thus allowing for agency; while Nicola encourages Marlow’s literary talent towards a ‘normal’, and acceptable, genre – realism: “[w]rite about real things in a realistic way – real people, real joys, real pains – Not these silly detective stories. Something more relevant” (140).
Marlow is resentful of such interference; however, Nicola is one of the few people around who are interested in Marlow and ready to catch him should he “fall” (242). Although Nicola was not originally candid about how she learned of the film offer on ‘The Singing Detective’, she does eventually concede under Marlow’s keen scrutiny that she opened his mail. Marlow’s penchant for the truth backfires, however, when he asks his estranged wife if she sleeps alone.

So Marlow faces some dilemmas: he wants love but is frightened of losing that love; he wants to know the truth but the truth hurts; he wants to be masculine but has difficulty repudiating early female identifications; he wants to be a successful writer but denies the possibility of his own distinctive voice. What Marlow needs to work out is how to accept these contradictions so that he may embrace his masculine potential, and feel without being overcome by emotion. The word association game coupled with the limitations imposed by his crippled hands have convinced Marlow the importance of carefully choosing his words for future narrativity: “For the first time in my life I shall have to really think about the value of each and every little word” (225, italics in original). With his identity so closely bound to his detective novel, Marlow begins to realise that the outcome of this narrative will impact upon his own future; as Cook writes, “the writer made the text but so too could the text (re-)make the writer” (292). Chapter Three, ‘Scripting the Self’, will therefore revisit the detective narrative to discern how this story aids Marlow’s recovery.
Chapter Three

Scripting The Self

The role of the self-narrativity embarked upon by the narrator of “The Yellow Wallpaper” and Marlow is to turn the speech act imposed upon them within the medical context into self-oriented speech acts. The two protagonists write their own idiosyncratic ‘case history’ to challenge the reports favoured by the medical establishment. Endeavouring to access the power that is the privilege of the masculine subject, they both performatively script their own futures, their own endings.

By arguing that these protagonists each successfully draw upon performative discourse to scribe a new identity, I do not mean to imply that, by default, both the narrator and Marlow achieve a new subjectivity which satisfies their needs and concerns for autonomy. Rather, I suggest that the two texts, “The Yellow Wallpaper” and The Singing Detective, provide examples of the difficulty inherent in undertaking the self-narrativising process, and further that the power relations which operate to help delimit subject potentialities have scribed the psyche itself.

Although, as her double the wallpaper woman, the narrator enacts the truth of nineteenth-century femininity at the same time as refusing to play ‘her part’ in patriarchal society, she disavows any possibility of moderating her physician/husband’s overpowering authority. If the narrator’s hysteria is a personal symbolic revolution, then, as per Foucault, she will not effect the potential change that persistent resistance to the power relations (which enable
her subjectivity) can procure (History of Sexuality 96). The limitations on the narrator’s discourse have ensured that by refusing to succumb to the role of helpmeet, her only other subject potential is that of a madwoman. But this insane persona is also a marginal site produced and contained by patriarchy, and as such does not dismantle the oppressive ideology but confirms it.

Ironically, it is by being mainstream that the subject is best situated to influence his or her subjectivity. So it is then that Marlow’s capitulation to patriarchy is promising in that the agency afforded his socially-condoned subjectivity allows further action upon power relations to produce change. From a feminist perspective Toril Moi similarly notes, “[t]he attack upon phallocentrism must come from within, since there can be no ‘outside’, no space where true femininity, untainted by patriarchy, can be kept intact for us to discover. We can only destroy the mythical and mystifying constructions of patriarchy by using its own weapons. We have no others” (198).

How is it, then, that both the narrator of “The Yellow Wallpaper” and Marlow have been able to defy the medical institution’s imposed speech act, and invoke their own, the liberalising speech act of self-performativity? Why is it that Marlow’s self-performativity nevertheless leads him towards normativity, hence resocialisation, while the narrator writes herself into the margins of society? The different outcomes for the two protagonists lie in large part in their gender. Although he understands the dubious basis of patriarchy, Marlow wants to achieve masculinity, and, as a male, he is entitled to access the empowering discourse. It is culturally intelligible for Marlow to desire and attain the privileges associated with masculinity; however, nineteenth-century western society regarded the female narrator’s need for social value as unintelligible. Unlike Marlow, the narrator of “The Yellow Wallpaper” is
denied a discourse with which to rewrite herself as anything but ‘other’ to her husband.

However, for change to occur to social values and gender boundaries, discourses must be correspondingly subject to modification. Yet, how can we, as subjects, exert difference and progressively alter what is accepted as ‘normal’, when our social actuality relies upon subordination? Of this conundrum Butler declares, “if the terms by which we gain social recognition for ourselves are those by which we are regulated and gain social existence, then to affirm one’s existence is to capitulate to one’s subordination – a sorry bind” (Psychic Life 79, italics in original). It is through her theoretical fusion of Freudian and Foucaultian views on subject formation that Butler attempts to tease out the elements of this ‘sorry bind’ and thereby comprehend how the acts of exceeding and condoning normative genders are, in fact, bound together in the one process. From this theoretical perspective, I will discuss in the final two sections of this chapter how the narrator of “The Yellow Wallpaper” and Marlow each create a dialogue between themselves and their larger social context through self-narrativity, thus linguistically altering their subjectivity.

But, to begin with, I will consider three different ways of theorising self-narration: narrative in psychotherapy; narrative as a means of obtaining self coherence; and Butler’s related theory of performativity, which locates agency in the reiteration of a subjectivity.

**Performing Narratives**

In The Singing Detective, Marlow recognises the healing value of telling one’s story: frustrated with his debilitated state, he desperately tells the consultant, “[a]nd if I don’t tell someone, if I don’t admit it – I’ll never never never get out of it, never beat it off . . . “ (Potter, Singing Detective 28). As a result of his
appeal, Marlow is offered psychotherapy, which he ambivalently accepts, because, as Mr Hall tells himself at the other end of the ward from Marlow, “[e]verybody needs somebody to talk to” (35). Within the psychotherapeutic context, self-narration is directed towards abreaction; the client is encouraged to reclaim and redirect their future by appropriating, re-experiencing and re-interpreting significant experiences from the past. The American psychiatrist Judith Herman claims, “[i]n the telling, the trauma story becomes a testimony . . . Testimony has both a private dimension, which is confessional and spiritual, and a public aspect, which is political and judicial. The use of the word testimony links both meanings, giving a new and larger dimension to the patient’s individual experience” (181, italics in original). The narrator is not afforded the privilege of someone to talk to; however, Marlow’s public dimension comes from his undertaking the ‘talking cure’ with Doctor Gibbon. The psychotherapist’s institutional affiliation authorises him to ratify Marlow’s confessions, culminating in his encouraging his patient to finally ‘stand up’ for himself (Potter, Singing Detective 213). “It appears, then, that the ‘action of telling a story’ in the safety of a protected relationship can actually produce a change in the abnormal processing of the traumatic memory” (Herman 183).

According to the ‘testimony method’, “the final written testimony is read aloud, and the therapy is concluded with a formal ‘delivery ritual,’ during which the document is signed by the patient as plaintiff and by the therapist as witness” (Herman 182). Writing, it would seem, is closely associated with the telling of life stories.

While this form of narrative therapy clearly functions within The Singing Detective, self-narrativity can also refer to the emergence of a subjectivity, and this is the form of self-narration that this thesis specifically invokes. This category can be further delineated between theorists prioritising a linguistic
manifestation of subjectivity, and the subject as a performance. Anthony Paul Kerby states, “acts of self-narration [are] not only . . . descriptive of the self but, more importantly, . . . fundamental to the emergence and reality of that subject” (4, italics in original). Subjectivity can only be generated within a community through dialogue: “the self, or subject . . . becomes a result of discursive praxis rather than either a substantial entity having ontological priority over praxis or a self with epistemological priority, an originator of meaning” (4). Thus, by telling stories about ourselves we put forward our version of who we are, and we consolidate a personal history which enables us to conceive of ourselves as coherent through this continuity. The particular adjectives used, or tense articulated (passive or active?) in self-narration expose the subject’s perspective about him or herself, which, Jerome Bruner asserts, ultimately delimits life experiences:

[the] ways of telling [our life histories] and the ways of conceptualising that go with them become so habitual that they finally become recipes for structuring experience itself, for laying down routes into memory, for not only guiding the life narrative up to the present but directing it into the future . . . a life as led is inseparable from a life as told – or more bluntly, a life is not ‘how it was’ but how it is interpreted and reinterpreted, told and retold: Freud’s psychic reality. (“Life as Narrative” 582, italics in original)

Judith Butler also affirms that language (broadly understood as text, gesture, discourse) constitutes subjectivity (Psychic Life 11). In Gender Trouble: Feminism and the Subversion of Identity (1990), Butler infers that gender is the routine performance of stereotypical masculine or feminine acts, which become
entrenched as subjectivity through repetition: “[g]ender is the repeated stylisation of the body, a set of repeated acts within a highly rigid regulatory frame that congeal over time to produce the appearance of substance, of a natural sort of being” (33). Informed by speech act theory, Butler’s *Bodies That Matter* attends to the materialisation of the body as heterosexual, which arises from both identificatory processes and imposed power relations. That the subject colludes in his or her own subjectivation through internalisation of normative heterosexuality is developed further in *The Psychic Life of Power*. Butler regards the binary gender positions of heterosexuality as based upon a melancholic premise; to be masculine, the male subject must repudiate feminine identifications, yet, necessarily, this subject requires the feminine to confirm his masculinity. Butler’s oeuvre, therefore, focuses on inconsistencies within the process of subject formation, which gendered subjectivity ultimately obscures through its apparent coherence. Resistance is possible in the repeated performances of subjectivity, in contradistinction to Kerby, whose semiological view of subjectivity emphasises (and celebrates) the role of narrativity to conjoin an individual’s past, present and future into a continuum.

Psychoanalytic terminology and referral to specific Freudian texts (“Ego and the Id”, “Mourning and Melancholia”) colours Butler’s theorising to imply the unconscious and compulsive nature of the repetition of gendered subjectivity. The terms ‘identification’, ‘projection’, ‘repetition’, ‘internalisation’, ‘abjection’, all operate to evoke and understand, through the psychoanalytic discourse they infer, Butler’s premise that “certain regulatory norms form a ‘sexed’ subject in terms that establish the indistinguishability of psychic and bodily formation” (*Bodies That Matter* 22).

Thus, the performative potential of the speech act does not imply the protagonists’ self-narrativity emanates from sheer will, nor is the performative
potential of language realised by utterance alone; context and historicity play key functions in discursive enactment. Defined by Butler as, “the power of discourse to produce effects through reiteration” (20), performativity occurs only when the act is able to draw on the authority of, and is a recitation of, previous like acts. The historicity of the performative is the force, or authority, which precedes and mobilises the utterance, but in the performance this “constitutive convention” (227) is unrecognised. Therefore, discourse relies upon an unacknowledged history, inferring that the statement originated with the speaker.

The two protagonists are constrained in their self-narrativity by the discourses to which they have recourse, although their performativity is not determined to the extent that they have no agency at all. Butler explains that because the success of our subjectivity is “always and only provisional” (226), subjectivation is necessarily a reiterative process. This continual reconstitution of the subject signals the instability of the normative subject construction and the failure of this construction to encapsulate the whole. As a consequence the subject’s agency is enabled – notably by the normalising process itself.

Therefore, the repeated acts of subjectivation reinforce the norm at the same time as affording the subject the potential to undermine that norm. Further, reiteration not only implies that subjectivation has miscarried at some level, but also that ensuing acts or reiterances are likewise failings (249). Butler explains in the context of sexual identity:

As a sedimented effect of a reiterative or ritual practice, sex acquires its naturalized effect, and, yet, it is also by virtue of this reiteration that gaps and fissures are opened up as the constitutive instabilities in such constructions, as that which escapes or
exceeds the norm, as that which cannot be wholly defined or fixed by the repetitive labor of that norm. This instability is the deconstituting possibility in the very process of repetition, the power that undoes the very effects by which ‘sex’ is stabilized, the possibility to put the consolidation of the norms of ‘sex’ into a potentially productive crisis. (10, italics in original)

Each reiteration operates to both endorse and destabilise a norm by which we are constituted; it is because the repeated acts are not “self-identical” (244) that homogeneity is avoided. Herein lies the progressive potential for the narrator of “The Yellow Wallpaper” and Marlow. Through self-narrativity, rewriting their subjectivity, they set in place the necessary parameters for subverting those gender norms which are imposed upon “The Yellow Wallpaper’s” narrator and ambivalently sought by Marlow. Their agency is “immanent to power” (15); to make sure that they ‘matter’, the narrator of “The Yellow Wallpaper” and Marlow need to engage in the discourse which produces them: “[t]he ‘I’ draws what is called its ‘agency’ in part through being implicated in the very relations of power that it seeks to oppose. To be implicated in the relations of power, indeed, enabled by the relations of power that the ‘I’ opposes is not, as a consequence, to be reducible to their existing forms” (123).

By purporting the ‘psychic life of power’, in which the subject embraces social power as originating within, it would seem that Butler’s is a pessimistic theory; how can agency be realised within such a stifling environment? At base of this complaint is the fact that subjectivity is a complex, paradoxical and ambivalent process: “the subject is itself a site of . . . ambivalence in which the subject emerges both as the effect of a prior power and as the condition of possibility for a radically conditioned form of agency” (Psychic Life 14-15, italics
in original). The dual condition of power is central to understanding Butler’s conceptualisation of subject production. The power which effects the subject is not the same as the power or agency produced by the subject, for “[a]gency exceeds the power by which it is enabled” (15).

Butler proposes the psyche is both formed by and forming of social norms; power is interiorised and disseminated via the subject:

The psychic operation of the norm offers a more insidious route for regulatory power than explicit coercion, one whose success always allows its tacit operation within the social. And yet, being psychic, the norm does not merely reinstate social power, it becomes formative and vulnerable in highly specific ways. The social categorizations that establish the vulnerability of the subject to language are themselves vulnerable to both psychic and historical change. (21)

The potential of language, through its ambiguity and fluidity, enables modification and change, even as it assists in the perpetuation of norms. Patriarchy’s desire to produce and delimit a rigid hierarchical gender complementarity is both brought about and frustrated by language.

**Self-regulating Narratives:**

Cynical of Nicola’s visits to the hospital and amorous attentions, Marlow embarks on a paranoid fantasy; Nicola is feigning sexual interest to get him to sign a contract on his screenplay of ‘The Singing Detective’, which would financially benefit her lover, the fantasised Mark Binney. To complete the narrative Marlow now needs a murderer: “It’s always the least likely character
who turns out to be the killer. Got to obey the rules. The least likely. This must be him. This must be the one. Old Noddy here . . . Well, it can’t be me. I didn’t do it” (Potter, Singing Detective 143, italics in original). The narrative formula for Marlow’s fantasy is a repetition of the past and detective narratives; each of his narratives involve a woman who uses her sexual wiles to deceive a male, and, in consequence, she is punished with death. In the past narrative, and as it turns out, in the fantasy narrative, Mrs Marlow and Nicola commit suicide, while in the detective narrative, both Sonia and Amanda are murdered.

By continually repeating this formula, Marlow reinforces his view of himself as innocent and wrongly persecuted. Yet, the juxtaposition of scenes which ask ‘who done it?’ with images of the young Marlow, indicate Marlow is responsible. One such juxtaposition occurs following Marlow’s authorial decision to have Noddy as the fantasised Nicola’s killer. Marlow’s younger self tells us from the tree tops of the past narrative, “They won’t find out who it was. Na! Thoy’ll never ever-ever find out. Na!” (143). From the safety of the forest canopy the viewer is taken to the scene of the scatological crime; in the classroom of Marlow’s past the teacher terrifies her pupils by invoking the “Almighty and Awful Creator” (144) to indicate “Who? Which one? Who is it?” (144) – who is responsible for defecating on her desk?

If, as Marlow tells the psychotherapist, Doctor Gibbon, “minute by minute, we make the world. We make our own world” (96), then Marlow needs to change his story, to break the formula which feeds his paranoia. The past narrative explains the genesis of Marlow’s ensuing narratives, with his mother’s infidelity, his peers condoning his lie of Mark Binney excreting on the teacher’s desk, and his mother’s suicide, feeding his ensuing narratives. It is from this period, his childhood, that Marlow begins his adoration of the hard-boiled detective, hence I reconsider the detective narrative in this chapter to
investigate its role in Marlow’s healing process. This fictional figure fulfils his desire to know, to find out the truth, without undermining his scrupulous moral values in the process. Only by being the hard-boiled detective will Marlow “find out who did it” (77), and, once he knows who is responsible, “everything ool be all right” (77, italics in original).

With the past narrative indicating the origins of his ill-health, the fantasy narrative demonstrates how the protagonist perpetuates his belief of persecution and the untrustworthiness of women. Marlow imagines that his estranged wife purloins the expression of his masculinity – his screenplay ‘The Singing Detective’ - from him. It is no accident that Mark Binney is the “bastard” (142) that Marlow decides on as Nicola’s lover; Mark Binney has been Marlow’s scapegoat in the past and, because Marlow repeats and rewrites the same story, Binney continues as a foil in Marlow’s future stories.

Although Marlow’s act of turning his detective novel “into something else” (136) indicates a desire to rewrite the narrative by which he lives his life, a chance to re-envision his future as other than sick and dependent, the hard-boiled detective genre continues to dominate his writing style. Responding to Binney’s complaint about his “silly, second-hand remarks” (100), the Singing Detective states, “It’s too late in the day to change my style” (100). Marlow’s habitual personification of the hard-boiled detective derives not only from his childhood wish to realise his fictional hero; with his namesake one of the most popular hard-boiled detectives in both fiction and film during the 1940s, Marlow believes that he is fated to inhabit the genre: “You’d think my mother would have had more sense than to call me Philip, wouldn’t you! I mean, with a name like Marlow. Philip Marlowe . . . What else could I have done except write detective stories? She should have called me Christopher” (21-22). Ironically, Marlow does show some connection with the famous sixteenth-
century playwright. Like Marlow’s double, the Singing Detective, Christopher Marlowe was involved in intrigue and, as an atheist, sceptical of accepted belief systems (Hilton 137). Although Marlow draws on the kudos of the playwright by quoting from Doctor Faustus, he has construed his name as a “rigid designator” (Butler, Bodies That Matter 212), a strict limitation on his subject potential. For the name to carry the finite potential for each namesake there would need to be “homogeneity of social intention” (213), with the set terms of the name fixed each time it is invoked. However, in the very process of rearticulating himself as Raymond Chandler’s ‘Philip Marlowe’, Marlow inadvertently works on the “gaps and fissures” (10) generated by the act, enabling modification of the subjectivity bequeathed him.19

“Tell me” (53), the psychotherapist’s demand of Marlow in the hospital narrative, echoes the Singing Detective’s “What’s the story?” (51) when he first meets Mark Binney in the detective narrative. Potter invokes the well-worn cliché of the psychotherapist as “detective of the psyche” (Žižek, “Detective and Analyst” 29); Doctor Gibbon first appears pulling back venetian blinds so as to watch Marlow unnoticed.20 Yet the analogy is appropriate to this interpretation, in that both the psychotherapist and detective, although within different narrative levels, operate ‘together’ to assist Marlow’s recovery. Žižek purports both figures discern “the true meaning of our act, the meaning that appears through the false appearance itself. The detective’s domain, as well as that of the psychoanalyst, is thus thoroughly the domain of meaning, not of ‘facts’” (37). That is, they do not take the information they are given literally, but as “false solutions” (35) – details which must be considered “abstracted from their inclusion in the imposed field-of-meaning” (35, italics in original). Because “there is no path leading directly to the truth” (34) the psychoanalyst and detective use these false solutions, or ‘red-herrings’, to infer alternative
meanings, which take them closer to the truth. For example, Marlow tells Doctor Gibbon that he felt he was watched by a scarecrow on his train journey back to his father after his mother’s suicide. While Marlow tries to recollect whose face the scarecrow had, who to accuse of persecuting him, the psychotherapist considers the deceptive function of the scarecrow: "But if it is watching you – Mmm? Why? What for? What does it think you’ve done?" (Potter, *Singing Detective* 210, italics in original). Doctor Gibbon correctly focuses on the role of the scarecrow for Marlow; by remembering the scarecrow’s face was that of his terrifying schoolteacher, Marlow can lure himself into believing she is responsible for his dis-ease: Doctor Gibbon, however, realises that the memory “exist[s] only in order to conceal the reason of [its] existence” (Žižek, “Detective and Analyst” 35, italics in original). Thus, what had Marlow done to fear being watched?

The Singing Detective is too wily to fall for the false solutions, the deceiving clues which the murderer has laid to lure him away from discovering the truth of the crime. Even though Binney is chief suspect, of dubious moral character (witness his rough treatment of Sonia) and lacking in integrity (it is inferred Binney is a thief [Potter, *Singing Detective* 102]), the detective wonders from the beginning whether his client is being set up: “Who’s trying to swing you into this number? (50, italics in original). Binney may not be innocent of all criminal activity, but that does not necessarily make him the murderer. It does, however, make him an effective scapegoat.

The Singing Detective needs to watch Binney – it is through the false solution that the detective will catch the true murderer: “he will entrap him by taking into account his cunning. The very deceit the murderer invents to save himself is the cause of his downfall” (Žižek, “Detective and Analyst” 37). And so the Singing Detective ‘vamps’. “So far”, the detective casually tells his
nervous client, “the intro does not tell us what sort of song we’re going to hear. We have to vamp. Until things start – unravelling – a bit” (Potter, Singing Detective 101, italics in original).

In the meantime, Doctor Gibbon prepares Marlow for his ‘confession’, for his rewriting of the past so that he may tell a different story in the future. Within his writing, the detective and fantasy narratives, Marlow has used his mother’s death as a motif – an act which indicates to Doctor Gibbon a ‘disturbance’, but Marlow prefers to regard it as a cannibalistic act, typical of writers: “You don’t know writers … They’ll use anything and anybody. They’ll eat their own young” (210-11). Marlow then describes to Gibbon the troubling event which first made him realise that writers are liars (176); having falsely accused Binney of defecating on the teacher’s desk in the past narrative, the young Marlow is amazed at the corroboration his lie receives from others in the class. Notably, the first child to endorse his lie is female, a femme fatale in the making, and the other children quickly follow suit. So overwhelming is the evidence against him, that the victim, Binney, admits responsibility for an act he did not commit.

By describing this memory to Doctor Gibbon, Marlow admits his deepest shame and finally expresses remorse. Even though the act was “long ago and far away” (211), Marlow has been haunted by his lie – the guilt cloaked as illness. Within therapy Marlow now has the chance to rewrite his past. The mise-en-scene is appropriate for restaging the traumatic event; Marlow has previously hinted Gibbon reminds him of his schoolteacher (98), and the psychotherapist’s room is similar to the 1945 classroom, with its sparse décor and school-type chair/desks set out in front of a white board. As Marlow recalls the scene (with full emotional affect) it is as if he takes his rightful place in front of the class as culprit, and confesses his guilt to the teacher (represented
by Doctor Gibbon): “‘And you did, didn’t you?’ ‘Yes, miss.’ ‘You came back and you did this dirty thing–!’ ‘Yes, miss.’ ‘And you are a filthy, wicked, horrible little –’” (213), at which point Marlow begins to cry. Marlow has finally relinquished his habitual use of Mark Binney as scapegoat.

But if Marlow can no longer resort to a scapegoat, he will have to take the ‘rap’ himself; he has acknowledged responsibility for past events within the present, now he must do likewise in the remaining narratives. This is the mistake the detective has been waiting for; by rewriting the fate of Binney – eliminating him through murder in both the detective and fantasy narratives – Marlow reduces the distance between himself and the truth-seeking detective.

At this point in the fantasy narrative Marlow still has Nicola to accuse of Binney’s murder, but in the detective narrative the detective is closing in. Typical of the hard-boiled detective genre, the Singing Detective needs to find the murderer so as to alleviate his own culpability. As author of the detective narrative, Marlow has incriminated the Singing Detective in Lili’s death, and in doing so the detective’s integrity and high morals are compromised, which threatens “his very identity as a subject” (Žižek, “Detective and Analyst” 43). Lili, the actress Alison Steadman (who plays Marlow’s mother) dressed as a prostitute – blonde wig and fur coat – follows the Singing Detective down the ill-lit street despite the detective’s directive to meet elsewhere, and is shot. Although he had warned her to “Keep back. Keep out of sight” (Potter, Singing Detective 125), the detective’s quickening steps lured Lili into the open, to her death. The detective has been “played for a sucker” (Žižek, “Detective and Analyst” 43): employed by Binney to investigate Sonia’s murder, the detective himself is manipulated by events into a position not unlike that of his client. That is, he needs to find out ‘who done it’ so as to absolve his own responsibility. The hard-boiled detective’s “acts
acquire an unforseen dimension, and he can hurt somebody unknowingly – the guilt he thus contracts involuntarily propels him to ‘honor his debt’” (43).

This the Singing Detective swears to do. Rocking Lili’s lifeless body, his eyes obscured by shadow, the detective turns towards the camera and hisses angrily, “I’ll get you. Whoever you are. Whatever you are. Wherever you are” (Potter, Singing Detective 125). As if the author himself is recoiling from the Singing Detective’s final shout of "I'll get you!" (not in transcript), motion perspective is used to quickly traverse narrative levels; from the canted, high angle of the detective narrative, the camera ‘chases’ Philip in the past narrative, as he runs through the London Underground away from his mother and his forbidden knowledge.

Within the revised ‘The Singing Detective’, the detective finds Binney in his apartment, knifed in the throat. Again the detective resolves to “wait and see” (227). The two mysterious men then enter, finding a clue by Binney’s body: “Who killed Roger Ackroyd?” (231). Although they don’t know who Ackroyd is, they realise the clue ‘points’. It, of course, points to Agatha Christie’s 1926 novel The Murder of Roger Ackroyd, which has many parallels with The Singing Detective. In both texts the detectives, Hercule Poirot and the Singing Detective, ultimately find the first-person narrator (Doctor Sheppard and Philip Marlow respectively) responsible for the crime committed. With each of the suspects having their own particular secret to protect, even the criminal becomes confused by the evidence during the investigation; Doctor Sheppard admits, “[i]n fact, all through the case there have been things that puzzled me hopelessly. Every one seems to have taken a hand” (Christie 193).

Both Marlow and Doctor Sheppard set up another as a likely suspect in their narratives. Marlow finds he can ‘get away with murder’ by using Mark Binney as his scapegoat in each narrative level, and Doctor Sheppard
encourages the view of Roger Ackroyd’s stepson, Captain Ralph Patton, as chief suspect. However, the detectives in these texts insist the true criminal must take responsibility, thereby clearing the scapegoat’s ‘good name’. In this way the detectives manipulate the end of the narrators own stories – both Marlow and Doctor Sheppard must acknowledge the superior skills of the detective, their narratives ultimately celebrating the law.

By the time the two mysterious men locate Marlow in hospital, the patient is more mobile and, having reminisced key moments from his past, he has rewritten his fantasy narrative so that Nicola will not commit suicide in the river. Rather, the author acknowledges the psychic dimension of his ill-health:

MARLOW: I’m going to walk right out of here. I’m not staying in this place!
NICOLA: But are you going to stay in this condition?
MARLOW: (Passionately) No!
NICOLA: I don’t just mean your skin and your joints.
MARLOW: (Subdued) No. (243)

But Marlow’s self-narrativing is not yet complete, although the appearance of characters in other narrative levels – metalepsis – signals the conflation of each of Marlow’s narratives as he synthesises past, present and fantasy together in his mind. The two mysterious men, as personifications of his random paranoia, confront their author in the hospital narrative about their “unclear roles” (245). These characters “glean their own fictivty and resent the fact that they have never even been fleshed out enough to merit names” (Bell 203), so they turn to torture to find out “Who we are. What we are” (Potter, Singing Detective 246). It is only by conceiving his emotional pain as physical torture within the terms
of his detective fiction that Marlow can acknowledge and vent the anguish he feels. According to Elaine Scarry, the difficulty of expressing pain and its “unsharability” (4), or intransitivity, is due to its conflict with language: “[p]hysical pain does not simply resist language but actively destroys it, bringing about an immediate reversion to a state anterior to language, to the sounds and cries a human being makes before language is learned” (4). Thus Marlow’s language is reduced to “Ow!” and “Aaaaaaagh!” (Potter, Singing Detective 246) by the two mysterious men’s brutality.

Marlow’s eventual cries for help disclose his whereabouts to the Singing Detective. Marlow’s hero bursts into the hospital ward and a shoot-out commences between one of the mysterious men (the two only have one ‘shooter’ between them) and the Singing Detective. As hero, the Singing Detective wins the altercation. With one bullet left in his gun, the detective rounds upon the second mysterious man, who shelters behind Marlow’s bed. Marlow pleads for the unnamed man’s life: “No! Wait! That’s murder” (247). However, authority within this narrative belongs to the Singing Detective. His voice-overs throughout the detective narrative and direct comments to the camera suggest that his truth, his story, will not concede to Marlow’s. Having been incriminated with Lili’s murder and unable to prevent Binney’s, the Singing Detective needs to declare Marlow as the instigator of the murders of Sonia, Amanda and Binney in order to reassert his own untarnished ethical stance, which underwrites his identity. While the sick Marlow remains author there will be no change in the narrative formula, so this subjectivity must be disavowed for personal change to occur.

The death of the narrator is my final analogy between The Murder of Roger Ackroyd and The Singing Detective. Having acted outside the law, both Doctor Sheppard and Marlow commit suicide to avoid disgrace. Doctor
Sheppard decides to poison himself so that his sister, Caroline, need never know the truth; although the doctor pays the ultimate price for his crime, in doing so, he maintains the public illusion of his own good name. Marlow’s is a psychic suicide. His sick, or murdering, self is eliminated from the narrative, leaving the hard-boiled detective as the dominant subject potentiality: “Will you listen to that? Murder, he says. I call it **pruning**. Only one of us is going to walk out of here” (Potter, *Singing Detective* 247, italics in original). A gunshot resounds in the ward and the remaining mysterious man clutches his chest weeping. Then he realises that he has not been shot; the camera follows his gaze to Marlow, who lies back in his bed – a single bullet in his forehead.

Ironically, the demise of Marlow’s sick self reiterates Christopher Marlowe’s death. The shoot out in the hospital ward parallels the playwright’s brawl with friends over a tavern bill, with Marlow’s gun shot in the forehead a present-day representation of Christopher Marlowe’s fatal stab wound, just above his right eye (Hilton 141). Marlow, therefore, does have an association with the famous playwright; however, Potter mocks this pretence by having the connection through their ignominious deaths, rather than through mutual literary genius.

The sick Marlow’s death is immediately followed by Marlow’s departure from hospital with Nicola. Marlow is dressed as the Singing Detective – wearing the trademark trench coat and trilby hat. By relinquishing the dominance of his sick self, his identification with the persecuted Mark Binney, Marlow is able to reconstitute his subjectivity as a synthesis with the Singing Detective. This process has been essential as internal coherence is compromised if the individual attempts to subscribe to all potentialities: “[i]t is doubtless true that certain disavowals are fundamentally enabling, and that no subject can proceed, can act, without disavowing certain possibilities and avowing others”
(Butler, Bodies That Matter 115). Marlow appears finally to have embraced an identity that assists his psychical, and therefore physical, health.

Yet there is something disconcerting about Marlow’s departure from hospital. His anger against patriarchal contradictions and lies has subsided into cliché; Marlow drops the verbal sparring which marked the detective’s potency, and withdraws to the inane. Thus when he leaves the hospital, he glances around with a smile and tells the men, “keep your noses clean” (Potter, Singing Detective 248) – a departing line as devoid of emotional content and explicit wisdom as the consultant’s “keep your – ah – pecker up” (29) and the Singing Detective’s “Keep your whistles dry” (49).

Vera Lynn sings, “We’ll meet again” (249), suggesting that the transformation we have witnessed is not a one-off act, but an ongoing process. Paraphrasing Žižek, Butler reminds us that subjectivity is reinforced by that which we disavow: “[w]hat is refused or repudiated in the formation of the subject continues to determine that subject. What remains outside this subject, set outside by the act of foreclosure which founds the subject, persists as a kind of defining negativity” (Bodies That Matter 190). Therefore, in repudiating his feminine identifications, killing off his emasculated, sick self, Marlow reconstitutes his subjectivity as masculine. However, this new identification requires cross-reference to the ‘other’; to be masculine, Marlow needs to assert his difference to the feminine. Hence, Marlow embraces normativity and is successfully heterosexualised; by refusing feminine identifications he consequently “wants the woman he would never be” (Psychic Life 137).

Assuming a masculine subjectivity allows Marlow to accept his wife as his gender complement, thereby reaffirming his repudiation of identification with the feminine.
On the psychic stage, Marlow has berated himself for failing to meet social standards through his moralistic and critical superego – the Singing Detective. By embracing that persona, albeit with some modification, Marlow acquiesces to a self-regulating subjectivity. Butler asserts:

"figured within the workings of the psyche is the power of the state to pre-empt an insurrectionary rage . . . This is not to suggest that conscience is a simple instantiation of the state; on the contrary, it is the vanishing point of the state's authority, its psychic idealization, and, in that sense, its disappearance as an external object. The process of forming the subject is a process of rendering the terrorizing power of the state invisible – and effective – as the ideality of conscience. (Psychic Life 190-91)"

Internalised comprehensions of social prohibitions and values become ‘divorced’ from their exteriority, henceforth regarded as the individual’s own internal conscience. Thus, by donning the garb of the Singing Detective, Marlow not only finally grows up, but also subjects himself to patriarchal law; ironically, he can only grow up through this submission.

Through Butlerian theory we understand that Marlow will have to repeatedly confirm his masculinity, but will he use these opportunities to explore and modify the patriarchal construct he has become? As a stereotype, the Singing Detective will not submit himself to the heterosexual paradigm, preferring self-containment; by refusing to “feel the feeling” (Potter, Singing Detective 86) the Singing Detective relinquishes the need for emotional contact. This hardened character can therefore seek the truth and sing the songs and not be overwhelmed by the contradictions or pain he encounters. By writing a
measure of feeling into the detective persona (the detective is “deeply upset” by Lili’s death [125]), Marlow reaches a compromise between his hypersensitivity and the detective’s refusal to acknowledge emotion. However, this compromise, which allows Marlow to refute his marginal status as a perpetual patient, is tainted; in taking on a figure who is protective of patriarchal society, it is unlikely that he will question the values which have troubled him in the past.

Marlow appears to have lulled himself into a false sense of sovereignty; a view which is reinforced by the Faustian allusion in The Singing Detective. In Christopher Marlowe’s play, the protagonist sells his soul to the devil in order to access forbidden knowledge for a period of 24 years. Philip Marlow likewise ‘sells his soul’ when he gains sexual knowledge. However, while Faustus enjoys “fritter[ing] away his time in futile and frivolous pursuits” (Simkin 99), Marlow becomes ill. His illness debilitates him for 20-30 years (Potter, Singing Detective 20) and, in contrast to Faustus, it is this period of illicit knowledge which is hell. Marlow’s feverish condition and favourite Marlovian quotes imply that being in hospital, troubled by the “sex and lies” (197) patriarchal society depends upon for perpetuation, is hell itself:

Hell hath no limits nor is circumscrib’d
In one self place, where we are is Hell,
And where Hell is, there must we ever be –

(C. Marlowe qtd. in Potter, Singing Detective 22)

When Faustus is being escorted to hell in the eponymous play, his last attempt to avert his eternal damnation is to refute his knowledge: “I’ll burn my books! – Ah Mephistophilis” (Marlowe 56). But it is not enough; Philip Marlow
in *The Singing Detective* has thrown away his original script of ‘The Singing Detective’ to no avail. Equanimity does not ensue because Marlow still retains the knowledge within himself.

So should not Marlow’s confession, repentance, to Doctor Gibbon be construed as alleviating his hellish experience? I suggest that, paradoxically, Marlow’s repentance and taking on the hard-boiled detective persona is in fact collusion with the devil – patriarchy. Having (re)learned the importance of words through the word game, Marlow tells the physiotherapist that words are “little devils” (Potter, *Singing Detective* 226) which cannot be trusted – a significant point considering words are the building blocks of subjectivity. One of the first acts Marlow scripts when he can again write on paper is ‘BLOOD’ (227), echoing Faustus’ pact with the devil sealed with his own blood (Marlowe 20-21). Philip Marlow’s word is Mark Binney’s death warrant and ultimately leads to his own, with the Singing Detective ‘conjured’ by this act and killing him in his hospital bed. However, if, as he claims, Marlow is going to choose his words very carefully in the future (Potter, *Singing Detective* 225) and the text ‘The Singing Detective’ that Reginald reads is the text that confirms Marlow’s new identity as the Singing Detective, then the Singing Detective is a diabolical figure; Reginald painstakingly reads out the final words of ‘The Singing Detective’ as Marlow-as-detective leaves the hospital with Nicola:

heavenly. Similarly, Nicola’s kiss reclaims Marlow; it ‘clamps’ him into normality.

Marlow finds peace through collusion, by writing a narrative of normalisation, and concealing the lies upon which his identity is based. In contrast, the narrator of “The Yellow Wallpaper” uses her words to expose the truth; an act that the dominant discourse defines, and thereby controls, as insanity.

**Marginal Discourse**

According to Butler, “the power of discourse to materialize its effects is consonant with the power of discourse to circumscribe the domain of intelligibility” (*Bodies That Matter* 187). Being inferior and ‘other’ within patriarchy, the narrator of “The Yellow Wallpaper” is reliant upon a language steeped in phallocentric values to reconstruct, or rewrite, her self. Only by subscribing to patriarchal discourse can the narrator assert her subjectivity as intelligible to her community. Yet, this signifying network designates her, as a female subject, as marginal and constitutive of those who matter – that is, men.

As patient and female subject, the narrator’s language lacks the cultural authority of both John’s public (medical) and private (patriarchal husband) discourses.

Hence, writing (and reading) is very important to the narrator. It is through her writing that she endeavours to promote her reality over that imposed by John. But as physician and masculinised subject, John does not acknowledge the validity of his wife’s reality – his extreme practicality means “he has no patience with faith, an intense horror of superstition, and he scoffs openly at any talk of things not to be felt and seen and put down in figures” (Gilman, “Yellow Wallpaper” 29). To eliminate his wife’s alternate reality, John
prohibits writing and manages her reading material by reading aloud to her; by controlling the narrator literally, John controls her literally. Judith Fetterley claims “that [John] chooses to make such an issue out of what and how she reads tells us what we need to know about the politics of reading” (182).

John’s prohibition on writing and control over reading reflects his insistence that his wife become part of his masculine text. In doing so, he requires she eliminate “the self that tells a different story from his” (Fetterley 185). By secretly writing her journal the narrator attempts to resist her husband’s control: “yet,” asserts Fetterley, “because his text has infected her mind, she experiences anxiety, contradiction, and ambivalence in the act of writing” (186). The narrator’s journal is a story of her personal dilemma – how is she to create a coherent subjectivity from the contradictory and derisive discourse which informs her? Kerby proposes that “[o]ne becomes a subject for oneself, or one has a self, within a speech community where the ‘I’ or ‘you’ are played out” (72). If subject formation is an act, a performance, then doesn’t the narrator’s self-narrativity require an audience in order to be realised? With no reader, the journal fails to communicate and so does not assist in the narrator’s self-narrativity. Yet, the narrator does not desire the discovery of her journal; the narrator “rightly suspects that the treason of a resisting author is more serious than that of a resisting reader; for this reason, in part, she turns the wallpaper into her primary text: what she writes on this paper can not be read by John” (Fetterley 184).

What the narrator ‘reads’ is revised and ‘rewritten’ as she gradually discerns a subtext within the frustrating incoherence of the main text, or pattern. At first the narrator interprets the wallpaper with its “sprawling and flamboyant” pattern and “repellent, almost revolting” (Gilman, “Yellow Wallpaper” 32) yellow colour as a visual representation of patriarchy. But after
sustained close reading, as her situation consumes her attention, she reads with increasing clarity a subtext, that of a woman trapped behind bars. “Who or what the self (and ultimately the person) can be is a result of the semiotic and discursive practices and techniques within which the speaking subject functions” (Kerby 113), therefore, from within the masculine text, the narrator recognises that this role has been written for her. Taken to an “ancestral hall”, a “haunted house” (Gilman, “Yellow Wallpaper” 29) by her caring husband and ensconced in an upstairs attic, the narrator recognises her role; according to the literary formula epitomised by Poe, she will be the woman who haunts the hereditary estate, having first been buried alive.

Resistant to the subject potentiality embodied by her sister-in-law, Jennie, the narrator reads into the wallpaper a figure with whom she can communicate and thus reflect her alternative subjectivity. However, as Ammons points out, “the idea that women will band together in mutual support and accomplish as a group what cannot be won by any one individual remains just that, an idea. For the narrator, solidarity exists with the imaginary women in the paper” (265).

Kerby notes that in a repressive society, new meanings or significances can be spawned by way of metaphor or metonymy; the narrator’s increasing identification with her wallpaper woman can be interpreted on this basis as her means of creating a subjectivity other than that desired by her husband. However, for this persona to become her own, the narrator requires public confirmation of this fact – the dimension her physical writing lacked. Thus the narrator manipulates John into unlocking her new subjectivity, and in doing so, temporarily makes him a character in her text. From within this feminist text the insane narrator’s rational, explicit dialogue contrasts with John’s irrational fervour to break down the door with an axe. Through her controlled discourse
the narrator governs John’s actions – he must collect the key and unlock the
door. Metaphorically then, the narrator implicates her husband; John holds the
key to her mental health and by unlocking the door to her room he unleashes
her insanity.

John’s response to his wife’s ‘flamboyant’ behaviour is a stereotypical
hysterical gesture – a faint – and in this act he temporarily accedes defeat in
their battle of subjectivity. For what is John to make of his own masculinity if
his wife is not reflecting back to him conventional nineteenth-century
femininity – that is, what he is not? According to Butler, “[t]he economy that
claims to include the feminine as the subordinate term in a binary opposition of
masculine/feminine excludes the feminine, produces the feminine as that
which must be excluded for that economy to operate” (Bodies That Matter 36).
Thus, John’s prostrate form contrasts with his wife’s mobile, albeit tied and
creeping, shape: “[a]s she steps over the patriarchal body, she leaves the
authoritative voice of diagnosis in shambles at her feet” (Treichler 67). Treichler
points out that in refutation of John’s diagnosis of her condition as ‘not serious’,
the narrator has pursued her own beliefs. As an ironical consequence, “her own
projects [lead] to this final scene in which madness is seen as a kind of
transcendent sanity” (67).

However, having no historicity to draw upon, no socially sanctioned
authority to diagnose or dictate, the narrator’s manipulations are short-lived
and extort an enormous cost. From his faint, the dominant and authoritarian
physician will rise all the more determined to impose his masculine text over
his wife. By defining the narrator as abnormal, unintelligible to patriarchal
knowledge, society places her in a marginal sphere which constitutes and
reinforces the subject who matters: “the production of the unsymbolizable, the
unspeakable, the illegible is also always a strategy of social abjection” (Butler,
 Bodies That Matter 190). Thus, as hysterical/insane patient, the narrator helps install Jennie, who enjoys her role as caretaker and cleaner, as the ideal of femininity, and so aids the perpetuation of patriarchy via her abjection; the frustration her demands as invalid gives rise to does not effect “an enabling disruption” (23). The narrator will not, as hysteric, redefine female subjectivity, shifting the boundary which separates sane from insane, normal from abnormal, legitimate from illegitimate. This potential “radical rearticulation of the symbolic horizon” (23) is only possible through dialogue with the dominant discourse.

Butler claims the Procrustean movement of supposedly finitely defining the subject through labels such as ‘woman’ is in fact a violent act – and the narrator’s demise reinforces this view. “To ameliorate and rework this violence,” declares Butler, “it is necessary to learn a double movement: to invoke the category and, hence, provisionally to institute an identity and at the same time to open the category as a site of permanent political contest” (221-2). This means of modifying subjectivity seems exhausting – truly an “agonism” (Foucault, “Afterword” 222).

Although the narrator has succumbed to her husband’s text (Fetterley 188), Gilman’s story “The Yellow Wallpaper” does constitute an ‘enabling disruption’. Gilman invokes masculine literature – the Gothic genre – and undermines the genre at the same time. She disrupts the genre by taking it into the domestic haven – eschewing the Poe-esque castle to imply the home as prison for the housewife. In The Forerunner, Gilman was explicit: “So long as [women’s] universal business is private housework they remain, industrially, at the level of private domestic labor, and economically a non-productive, dependent class – servants of the other sex” (“Nervous Breakdown” 71). Most importantly, Gilman writes her story from the point of view of the entombed
woman. The narrator’s proximity and accessibility to the reader are intensified through first-person narration. In all, Erskine and Richards believe “The Yellow Wallpaper” was regarded as “dangerous” (Introduction 7) and threatening to the prevailing order as the female reader might “also question medical authority and assert their own rights” (7).

Gilman claims in her autobiography that her specific purpose with the “The Yellow Wallpaper” was to “reach Dr. S. Weir Mitchell and convince him of the error of his ways” (Autobiography 121), and that this was successful; the eminent doctor “had changed his treatment of nervous prostration since reading ‘The Yellow Wallpaper’” (121). Yet, how Weir Mitchell changed his rest cure, and to what extent, is not explained. Julie Bates Dock has found no reference in Weir Mitchell’s published texts and letters either to an altered view on his treatment, or to Gilman and her short story, and further, “there is no evidence that “The Yellow Wallpaper” discredited either Mitchell or his cure in the eyes of the general public or the medical profession” (25). However, Dock’s challenge to the myth of “Saint Charlotte and the evil Dr. Mitchell” (24) does not deflect from the controversy which “The Yellow Wallpaper” contemporaneously evoked through its feminist message; as one male reviewer declared, “[n]othing more graphic and suggestive has ever been written to show why so many women go crazy” (qtd. in Dock 19).
Conclusion

Charlotte Perkins Gilman and Dennis Potter both write with a socio-political purpose, aiming to raise the audience’s consciousness regarding issues of gender and subjectivity.23 “The Yellow Wallpaper” and The Singing Detective suggest that an individual can reassert him or herself through self-narrativity, but, by invoking the medical context as an example, emphasise that internalised social power relations circumscribe subject potentiality.

Both texts criticise medical practice as normative and objectifying. From within the medical profession Margaret Miers confirms, “[t]he importance of involving patients in decisions concerning care and treatment is now acknowledged through policy, public and professional initiatives” (187); nevertheless, it is difficult to democratise the unequal relationship between medical staff and patients. Recent research about the implementation of practices to empower patients state that the new strategies do no more than reiterate the status quo, resulting merely in a “new manifestation of the traditionally asymmetric nurse-patient relationship” (Candlin 230). Candlin argues that although the patient is given the opportunity to speak and is genuinely listened to by the nurse, the friendly conversation remains controlled by the nurse:

While the discourse is friendly and the patient is allowed the floor, the information is one way. The rules governing its structure are strictly adhered to and reflect not just the rules of politeness, but demonstrate that information and particularly painful self-disclosures are given by the patient about the patient, not by the
nurse about the nurse. Participants are acting out a script where roles are pre-determined. (Candlin 242)

In an article discussing the progress of ‘user empowerment’ within the mental health sector, Anthony Fraher and Michel Limpinnian write that if the patient is to be truly empowered then the ability to define his or her own health issues must be validated. Further, patients can set and pursue their own objectives. Clearly, these are practices which undermine the traditional power associated with medical practitioners. The rigid boundaries of powerful, all-knowing practitioner and passive, compliant patient are gradually shifting: “[c]urrent policies appear to have placed the interests of users firmly on the agenda, but the timescale involved suggests evolutionary rather than revolutionary change” (Fraher and Limpinnian 157).

Referring back to the two texts, “The Yellow Wallpaper” and The Singing Detective reflect some evolution. The narrator at the close of “The Yellow Wallpaper” is a crippled woman, crawling around the floor of a room she refuses to leave. Gilman effectively asks the reader, “Is it right that a woman should be so reduced through her wish to access the privileged discourses available to men?” In the intervening 94 years between the writing of “The Yellow Wallpaper” and The Singing Detective, significant changes have occurred concerning women’s rights. However, for the socio-political conditions to change for women, corresponding change is required of men. And this issue informs The Singing Detective; Potter believes that “men treat women badly . . . I take it for granted that men exploit women as a fact to deal with and show” (Potter qtd. in Cook 281). By investigating the “nature of patriarchy” Potter necessarily invokes “traditional male attitudes to women” (Cook 280). He also points out the agency afforded individuals within society is
frequently disavowed, leading, in the case of *The Singing Detective*, to a complacent and numbed masculinity.

John Cook claims:

The *value* of Potter’s work is thus that he demonstrates to audiences that far from simply being determined by a set of external events and imperatives beyond their control – the social, cultural, sexual, health ‘facts’ of their background – they have the active power to take control; to get their own ‘lives in order’, shaping them in any way they choose. Just as with *The Singing Detective* in which the central protagonist, Philip Marlow, overcame the dislocations in his life caused by the trauma of past events and in so doing literally transformed himself into a new person, Potter’s work was concerned with reminding audiences of their own sovereignty and agency; that not only were they ‘made’ but ‘making’. (292, italics in original)

Having ‘remade’ themselves, then, what are the two protagonists likely to write from their new subjectivity? It is unlikely that the narrator of “The Yellow Wallpaper” will write anything further from her marginalized position, although, of course, the story’s enigmatic existence problematises this conjecture. If Marlow of *The Singing Detective* continues to write, whether in the hard-boiled detective genre or in realism as promoted by both Nicola and the chronological narrative sequencing of psychoanalytic therapy, he is likely to write in support of the heterosexual imperative. It is the texts themselves – Gilman’s “The Yellow Wallpaper” and Potter’s *The Singing Detective* – which confront the audiences’ (possible) acceptance of simplistic binary subjectivities
through the disjunction between what the narrators say and what the texts show; although the narrator of “The Yellow Wallpaper” may ‘feel better’ creeping around her room, she exemplifies a “desperate, and ultimately self-destructive, form of protest” (Showalter, *Hystories* 10); Marlow also feels better, but only by recoiling from and forgetting the knowledge which upset his assumption of a masculine subjectivity as a child.

Foucault asks: “How does it happen that the human subject makes himself [sic] into an object of possible knowledge, through what forms of rationality, through what historical necessities, and at what price? My question is this: How much does it cost the subject to be able to tell the truth about itself?” (qtd. in Butler, *Bodies That Matter* 93). I suggest that “The Yellow Wallpaper” and *The Singing Detective* reveal that the cost of telling, or even learning, the truth is a culturally acceptable subjectivity; a cost to which Gilman sacrifices her protagonist in order to show the radical circumscription of female subjectivity under nineteenth-century patriarchy, and which Potter has his protagonist baulk at, intimating male reluctance to negotiate socially endowed power.

My question is this: How much does it cost the subject to not tell the truth about itself?
ENDNOTES:

1 I would like to make clear that I have immense respect for, and a very good report with, my doctor.

2 I am grateful to Andrew Crowe for passing on this truism.

3 For discussion of Gilman’s use of Gothic symbolism within “The Yellow Wallpaper” see Greg Johnson’s “Gilman’s Gothic Allegory: Rage and Redemption in ‘The Yellow Wallpaper’”.

4 Women and Economics: The Economic Factor Between Men and Women as a Factor in Social Evolution (1898) was highly acclaimed, establishing Gilman’s reputation as a significant commentator on gender relations. See Degler’s Introduction to Women and Economics, xiii, xix.

5 Mary Whitehouse upset Potter’s mother, Margaret, by claiming in a BBC radio 4 interview that Potter’s ‘skin trouble’ resulted from witnessing “his mother having sex with a strange man in the grass” (qtd. in Creeber 11). Mrs Potter successfully sued the BBC for the slander. See also, Carpenter 443.

6 Philip’s defecation on the teacher’s desk is a retelling of Nigel Barton’s misdemeanour in Potter’s 1965 television play Stand Up, Nigel Barton. Nigel takes a daffodil from the classroom and when called upon by the teacher to divulge his knowledge about the deed, he lies that Georgie Pringle had stolen the flower (63). The other children in the class confirm Nigel’s lie, and Georgie confesses his crime. In turn, this story is taken from Potter’s own personal experience; having taken the daffodil from his classroom, he was then reluctant to take the punishment for his actions.
Eight-year-old Potter told his teacher ‘Isaac Holt’ was responsible, and, once others in the class contributed to this story, Isaac admitted the theft (Carpenter 24-5).

7 The narrator’s name may be Jane; at the close of the story, the narrator tells John, “I’ve got out at last, in spite of you and Jane” (50). In my interpretation of “The Yellow Wallpaper”, the narrator is at this time identifying with the emergent wallpaper woman, and so I regard ‘Jane’ as being the ‘good’, or patriarchally-identifying, persona of the narrator.

8 For example, Freud thought John Stuart Mill “simply crazy” (Fromm 6) advocating the equality of women.

9 The psychic depth of Freudian theory complements Foucaultian theory, while the political power structures postulated by Foucault complement Freudian thought. See Chapter Three “Between Freud and Foucault” in Butler’s The Psychic Life of Power: Theories in Subjection.

10 See further, Sawicki Disciplining Foucault (1991) and Diamond and Quinby Feminism and Foucault (1988).

11 Roger Horrocks points out that Christianity “has operated both at the political macro-level of government, diplomacy and war, and also at the individual level, in terms of morality and conscience. In this sense, it is one of the most efficient and thoroughgoing multi-level political institutions that has existed in Western society” (4). Religion is a major theme throughout Dennis Potter’s oeuvre, and The Singing Detective is no exception. Cook quotes Potter: “[t]he sort of ‘religious drama’ I want to write will not necessarily mention the word ‘God’ at all. Perhaps too, it will be based on the feeling that religion is not the bandage, but the wound” (104). According to Cook, Potter is “[u]ltimately a religious not a politically didactic writer” (293); yet, the
power relations described by Foucault, and Horrocks’ quote above, indicate that religion in fact operates as a political force. For discussion of Marlow’s ‘spiritual journey’ as Christian redemption, see Cook 222-39.

12 Julie Bates Dock seeks to undercut such ‘cherished legends’ about Gilman’s writing as the belief that “The Yellow Wallpaper” was ‘obliterated’ from the literary landscape by a hostile “male-dominated literary marketplace” (Dock 26). Gilman did have difficulty getting the story published, and worse, her agent did not forward to her the New England Magazine’s payment of £40 for its publication (Gilman, Autobiography 119); however, rather than being relegated to oblivion, Dock claims the story went to print “nearly two dozen times [after] 1892” (Dock 4). “Between Gilman’s death and the Feminist Press edition of 1973, the story was anthologised in 1937, 1938, 1941, 1942, 1943, 1948, 1950, 1961, 1965, 1966, 1967, 1971, and three times in 1972” (4). The story was clearly in circulation, but may have “reached the common reader far more readily than the scholar” (4).

13 In the televised The Singing Detective, Staff Nurse White and the schoolteacher have their hair pulled back into a tight bun, visually linking their shared authoritative manner. In contrast, Mrs Marlow, Nurse Mills, and Nicola, who ‘seduce’ Marlow through their beauty, and therefore constitute potential ‘femmes fatales’, all have long, full brown hair which enhances their allure. Interestingly, Barbara, the first child to corroborate Philip’s lie in the past narrative, also has long brown hair.

14 In The Singing Detective, Philip suffers much pressure from his teacher to make up a story, to point the blame elsewhere (Gilbert 267). In contrast, in Stand Up, Nigel Barton Nigel Barton falsely accuses Georgie without hesitation. Marlow learns from this incident, in The Singing Detective, that he can generate considerable power
through his ability to tell stories, that is, manipulate a new truth. Hence, in the word association game Marlow responds with ‘liar’ to Doctor Gibbon’s ‘writer’ (176). Interestingly, Janet Henfrey is cast as the teacher in both the BBC versions of *Stand Up*, *Nigel Barton* and *The Singing Detective*.

15 For example, in Raymond Chandler’s novel, *The Lady in the Lake* (1944), Mildred Havilland, otherwise known as Muriel Chess, is a devious woman who contrives an innocent man’s arrest for the murder she committed. Ultimately, Philip Marlowe deduces, Mildred was herself killed by “[s]omebody who thought she needed killing, somebody who had loved her and hated her, somebody who was too much of a cop to let her get away with any more murders, but not enough of a cop to pull her in and let the whole story come out. Somebody like Degarmo” (Chandler, *Lady in the Lake* 232). Degarmo, a policeman, is consequently shot dead by police as he attempts to avoid arrest.

16 Gilman wrote in *The Forerunner* (July-August 1916): “Of course [nervous breakdown] occurs among men, but that is always accounted for on quite other grounds. We seldom hear it advanced that the nerve-weakness of women is similar to that of men, and due to similar causes. Still less is it shown that the special conditions of women’s lives are such that there is reason for a much greater amount of neurasthenia than we see; and that the ability of women to sustain their present condition as well as they do, shows a high degree of nerve power” (“The ‘Nervous Breakdown’ of Women”, 67).

17 Potter, *The Singing Detective* 68.

18 During an hallucination, Marlow recalls being called a “cocky bugger” (Potter, *Singing Detective* 79) who “[g]ot too big for thee boots” (78).
Another Marlow alluded to is Joseph Conrad’s Charlie Marlow. In *Heart of Darkness* Charlie Marlow takes a physical and correspondingly psychological journey to the darkest depths of Africa. There he meets Mr Kurtz, a figure who, Peter Firchow neatly sums up, “is . . . tempted, by excessive pride and by actual or imagined superior ability, into believing that he is morally above the conventions of his own society and therefore justified in doing just about anything he pleases, including the exploitation of supposed inferiors” (84). Simple parallels can be made with Potter’s Philip Marlow, not least of which is the inveterate story-telling both characters indulge in (Conrad 8, 10-11).

For discussion of the detective/analyst analogy see, for example, Žižek, *Looking Awry* 60-68.

Robert Bell suggests that this ‘chubby’ second mysterious man may be a “grown-up version of the slandered boy Mark” (207). Significantly, then, Marlow is protecting ‘Mark Binney’ with his own life in this scene, by taking the punishment due a murderer within the detective narrative.

Mr Hall also describes being in hospital as a “living hell” where he “hardly [speaks] a word with a living soul!” (Potter, *Singing Detective* 9).

Gilman goes so far as to propose, “it is a pretty poor thing to write, to talk, without a purpose” (*Autobiography* 121).

This thesis refutes Cook’s broad assumption that an individual can alter their subjectivity in ‘any way they choose’.