

MINISTRY OF HIGHER EDUCATION AND SCIENTIFIC RESEARCH
UNIVERSITY OF TLEMCCEN
FACULTY OF LETTERS AND LANGUAGES
DEPARTMENT OF ENGLISH



A PSYCHOLINGUISTIC ANALYSIS OF THE USE OF LANGUAGE BY DISABLED
CHARACTERS IN: MOSTEGHANEMI'S MEMORY IN THE FLESH AND PLATH'S THE
BELL JAR

*Thesis Submitted to the Department of English in Candidacy for the Degree of Doctorate in
Language and Literature*

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Academic Year: 2020-2021

Statement of Originality

I hereby confirm that this thesis is entirely my own work and that I have written it in my own words. I also declare that the present work contains no plagiarism and that any information taken from published or unpublished sources has been acknowledged in accordance with the standard referencing rules.

Amel SAID HOUARI

Dedication

To Kamel and Fella ..

Acknowledgements

“Praise is to Allah who guided me to this felicity. Never could I find guidance was it not from the guidance of Allah.”

I would like to thank my supervisor Prof. Ghouti Hadjoui for his time, patience, kind guidance, and valuable advice. I am grateful to be mentored by such a professor all along the process of writing my thesis. Thanks also go to Prof. Ilhem Serir and Prof. Amine Belmekki for their valuable support and constant guidance. Their expert advice helped me to develop my ideas and shape my argument.

I would like also to extend thanks to my friends and colleagues who have believed in this project. Special thanks go to Hania Chekali for staying in touch even across time and country. Deep gratitude to Djamila Houamdi for being a constant source of motivation and support and for the countless hours we shared discussing disability issues.

Finally, inexpressible appreciation goes to my parents and my sisters Moufida and Zeyneb for standing by my side all along the way. Your loving care made the completion of this project less difficult. I owe you much love and happiness.

Thanks to all those who had a hand in my education.

Amel SAID HOUARI

Abstract

This thesis addresses the impact of physical and mental disability on language use. Disability is an inseparable aspect of human existence. Despite its pervasive presence in life, it still occupies an almost invisible place in literature. Because fictional representations inform the way we conceive and interpret physical impairment and mental distress, understanding the language of disabled people is vital to understand disability. This thesis argues that the language of disability is an embodied phenomenon. It examines the psychological effects of disability and their linguistic reflections through a psycholinguistic analysis of two novels portraying disabled characters: Mosteghanemi's *Memory in the Flesh* and Plath's *The Bell Jar*. The two novels feature both physical impairment and mental disorder. Thus, they provide deeper insights into the psychological and linguistic nature of disability. The study begins with Plath's *The Bell Jar*. Using many autobiographical elements, Plath provides an account of the hysteric, schizophrenic and depressive experience of Esther Greenwood; a nineteen years old American student. The concern is to demonstrate the semantic, syntactic, discursive and pragmatic manifestation of mental disability in the narrative. As for physical disability, Mosteghanemi's *Memory in the Flesh* is examined. Mosteghanemi depicts the traumatic experience of Khalid Ben Toubal; a war-disabled artist. The linguistic reflections of disability in Khalid's narrative are figured out in the use of paralanguage, body language, silence, and nonverbal art as a form of expression. These fictional representations of disability in its different forms bring into light the daily struggles of disabled people, reflected in a language of alienation, repression, self-estrangement and discriminatory practices. Analysing the language of disability in literature may help to achieve a better understanding of disability as a

creative force and an aspect of richness in human nature. A more comprehensive conception of disability represents a triumph of diversity over normalization and adversity.

Keywords: Psycholinguistics, Disability Studies, Mental Disorder, Physical Impairment.

Abstract in Arabic

تعالج هذه الأطروحة تأثير الإعاقات الجسدية و العقلية على استعمال اللغة. ان وجود الاعاقة شيء ملازم للوجود الانساني. ولكن بالرغم من ذلك فموضوع الاعاقة مازال يشغل حيزا ضيقا في الادب. تسلط هذه الأطروحة الضوء على طريقة تقديم الاعاقة في بعض الاعمال الادبية باعتبار الدور الهام الذي يلعبه الادب في بناء المفاهيم و صياغة المعتقدات المتعلقة بفهم طبيعة الاعاقة وكيفية التعامل معها. تركز الأطروحة على كون لغة الاعاقة ظاهرة مرتبطة بالجسد حيث تدرس التأثير النفسي للإعاقاة الجسدية او العقلية على استعمال اللغة. يتناول هذا العمل التحليلات اللغوية للأثار النفسية للإعاقاة في روايتي ذاكرة الجسد لأحلام مستغانمي و جرة الجرس لسيلفيا بلاث. تدور احداث كلتا الروايتين حول شخصيات تعاني من اعاقات جسدية وعقلية ما يمنح فرصة فهم افضل للطبيعة النفسية-اللغوية للإعاقاة. يتطرق البحث بدياقه لرواية جرة الجرس لبلاث حيث يدرس تأثير الهيستيريا وانفصام الشخصية و الاكتئاب الحاد على الاداء اللغوي لبطله الرواية اسثر قرين وود. تركز الدراسة بوجه خاص على التحليلات السيميائية و النحويّة والخطابية للإعاقاة العقلية في الرواية. بعد ذلك يتناول البحث انعكاسات الاعاقاة الجسدية لخالد بن طوبال في رواية ذاكرة الجسد بعد بتر ذراعه اليمنى في ثورة التحرير الجزائرية على طريقة استعماله للغة. يركز البحث بشكل خاص على تحليل الاداء اللغوي في فترة ما بعد الصدمة حيث يبرز ان اللجوء الى الصمت والى استعمال اقل للغة الجسد هما نتيجتا للاضطرابات النفسية المصاحبة لتجربة الاعاقاة الجسدية. يتطرق البحث ايضا لنظرية العلاج بالفن و يبرز اهم تحليلاتها في الرواية. تحليل التغيرات اللغوية المصاحبة للصدمة النفسية الناتجة عن الاعاقاة في

الروايتين يظهر ان اللغة عنصر غير محايد في التعايش مع الاعاقة كونها تؤثر و تتأثر بمشاعر العزلة والاحباط ونكران الذات الملازمة لوضع المعاق. يمكن لتحليل لغة ما بعد صدمة الاعاقة ان يقود الى فهم افضل للإعاقات الجسدية و العقلية باعتبارها اختلافا يمكنه ان يثري الوجود . الانساني لا وضعا غير مرغوب يجب تصحيحا ورفضه .

الكلمات المفتاحية نظرية التحليل النفسي- اللغوي, الاعاقة العقلية, الاعاقة الجسدية

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General Introduction

The representation of minority identities in fiction has always fascinated me. Through one of my courses of African literature at university, I was given the opportunity to write some essays on the Black minority in the USA. Courses of American civilization allowed me to further develop my interest in minorities through reading and writing about the puritans; the early founding fathers of the USA. Both courses made me realise that minority identities are often subject to misconceptions and misrepresentations. These study experiences fuelled my desire to know more about minorities. Soon after, a personal experience of caring for people with disabilities enhanced my interest in reading about disability. These readings prompted me to choose a topic involving disability representation in fiction for my PhD dissertation. I am glad to be able to integrate both my passion for literature and affection for the minority of disabled people in this work.

“Disability studies” is a fascinating interdisciplinary domain attracting more scrutiny and interest of researchers. The critical reception of disability has remained fairly static, bound to misconceptions, prejudice and social conventions. Images of disability in life as well as in literature are characterized by gross generalizations. Thus, the notions of disability inculcated in the collective psyche are shaped by exclusion and rejection. Disability studies endeavours to recover these misrepresentations proscribed in the cultural psyche.

The absence of analyses of disability in literature creates a gap in the academic attempts to understand the human being in his different states. As a result, disability scholars worldwide are endeavouring to alter the misconceptions about physical impairment and mental disorders through addressing these issues in various disciplines such as medical psychology, sociology, linguistics as well as literature.

This work attempts to read literature through the lens of disability studies. This new vibrant arena offers a variety of perspectives and interpretative possibilities. Focussing on the language of disability in literature promises to deepen critical understanding and inform the reader's perception of people with disabilities. Moreover, it provides insight into the influence of social, political and historical contexts on the conception and representation of physical and mental disability.

Human psychic conditions inevitably affect language. Linguistic production is both an outcome and a reflection of both physical and mental conditions. Normal speech comprehension and production is a sign of mental health, whereas deviance implies mental disorder. Psycholinguistic perspectives on disability in *The Bell Jar* and *Memory in the Flesh* aim at providing insights to Esther's mental distress and Khalid's war disability proving that disability entails difference. Weakness, inability, danger, and rejection are consequently associated with it. As such, language becomes a site of reflection of these feelings.

Disability is a term that covers a variety of meanings. The common aspect among all people with disabilities is stigma and deviance. Disability is an umbrella term, covering impairment, handicap, and mental disorders. In this research, the words "impairment", "disorder" and "handicap" are not used interchangeably. Impairment is used to refer to any loss or abnormality of physiological or anatomical structure or function. "Disorder" is employed in the depiction and description of extreme psychological states and mental disturbances. This implies that "impairment" has a physical (visible) nature whereas "disorder" is an abstract mental trait. Disability accordingly means any restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being due to a physical impairment or a mental disorder. A "handicap" however, is a disadvantage for a given individual that limits or prevents the fulfilment of a role in life,

relative to a peer group. The term 'handicap' is not used in the course of this research because it is linked mainly to the social rather than the psychological theory of disability.

It is worth noting that even within the realm of Disability Studies, the exact definitions of the above mentioned terms are not yet agreed upon among disability scholars. Due to the different conceptions of disability -and because of the difficulty of reaching an agreed-upon definition, debates are still developing about who is a disabled person. The word disabled came to be used as the standard term in referring to people with physical impairments or mental disorders in the second half of the 20th century, and it remains the most generally accepted term in both British and US English. In fact, these debates and contradicting definitions reveal that a large corpus of disability-related issues remains unexplored and warrants academic investigation.

The journey to understanding disability lasted for years. Throughout the long period of surviving this research, I have always been remembering the day when this idea first crossed my mind. Besides my concern about the remarkable lack of literary works representing disabled characters and placing them at the centre rather than the margins of art, my personal motivation has always been the determining factor behind the decision to undertake a research on the portrayal of disability in literature. Being the eldest daughter of a family that includes two members suffering from disabilities, the issue was always how to deal with disability and make its psychological consequences less damaging.

Due to a consanguine marriage, both my brother and sister were exposed to disabilities stemming from genetic origins. As such, they had very limited language abilities and could develop but a few of the skills required in every-day life. Many people who saw them pitied them for what they lack. Some even pitied my parents and the whole family because we had them to deal with, as if they were a burden. No one realized what their presence had to offer

us. They offered love in their own unique way. They taught us lessons in patience and perseverance. Their presence constantly reminds everyone that the value of human life is understood through the simple acts of love and care and not through being ‘normal’.

As the desire to create a research project out of my daily struggle with disability grew stronger, my first steps into the field of Disability Studies made me aware of its interdisciplinary nature. The issue of disability representation crops up in various disciplines including psychology, sociology, history, linguistics and literature. Undoubtedly, there is no exclusive approach to deal with disability-related themes in relation to literature as the topic has multiple, and sometimes interrelated dimensions. Yet, an attempt is made to look at disability from the angle which gives a clearer vision. Psycholinguistic seems the most “suitable” approach. This research uses a psycholinguistic account of the literary portrayal of disability; taking into consideration the social and historical facts surrounding it. The objective is to demonstrate the linguistic reflections of disability in literature.

The study gathers disability related data from two novels: *The Bell Jar* by Sylvia Plath and *Memory in the Flesh* by Ahlam Mosteghanemi. The aim behind the choice of the novels is twofold. First, disabilities can be classified into two major categories: physical and mental. The nature of disability determined the selection of novels portraying both types. Second, the narrators in both novels are the disabled characters themselves. This permits a more authentic linguistic representation of disability and enables deeper insights into the psychological conditions associated with disability and their manifestations in language. Besides, the novels allow an incorporation of both male and female voices as the physically impaired character in *Memory in the Flesh* is male whereas *The Bell Jar* is the story of a mentally distressed young girl. This permits an analysis of gender issues within the context of Disability Studies.

The initial idea of this research topic stems from the remarkable lack of literary works, and analyses featuring characters with disabilities. Though disability is one side of human experience, and despite of its pervasive presence in our life, it is almost absent in the field of literary studies. Disabled people have always been regarded as an unwanted category. Their presence in life or literature has most of the time aroused pity, astonishment, fear, rejection and all sorts of negative feelings.

The overt objective is predominantly set to raise awareness about disability in literature and introduce the psycholinguistic aspect of its fictional portrayals. Research in the field of disability can expand our understanding of disability as a human condition and provide insights about the lives of people with a disabling physical or mental condition. It helps demonstrating that disability is a form of diversity in human existence; though it is most of the time painful and troubling. Besides, analysing disability in literature offers a deeper understanding of difference as a necessary feature of life.

The negative representation of disability in literature invites research. This inaccurate depiction questions the value systems not only of readers or writers but of society as a whole. Portraying disabled characters in literature in a way that elicits prejudice or indifference gives an idea about the way they are perceived and treated in everyday life. Literature helps fostering attitudes and assumptions. As such, it is a vital means of building a new conception of disability based on acceptance, respect and equality.

The research methodology relies on different approaches because the topic requires evidence from different disciplines. Though it is not possible to provide a comprehensive account of all the linguistic reflections of disability, the study attempts to examine the most obvious features of disability narratives. To accumulate the necessary data, the method judged as fruitful for such an investigation is interdisciplinary.

The main approach is psycholinguistic. It seeks to combine psychological and linguistic analyses of the two novels to demonstrate the way the psychological effects of disability are reflected in language. It is used mainly in passage analyses of monologues and dialogues in which disabled characters are engaged. Focusing on psycholinguistics does not prevent implementing other approaches when necessary. A stylistic approach is opted for to evaluate the aesthetic aspects of disability language as well as to compare and contrast the findings in order to validate evidence. The approach is sociolinguistic when examining and assessing the impact of the characters' sociological parameters such as gender, age, social class, cultural and educational background, and religious beliefs on their linguistic production.

The research seeks to answer the problematic about how the psychological effects of disability are reflected in language. Fictional representations are used as evidence of the lasting impact of disability on language use. To demonstrate the effects of physical impairment and mental disorder on linguistic behaviour, the following research questions guide the investigation:

- 1- How is disability represented in art, literature and critical theory?
- 2- Does the language used in *Memory in the Flesh* and *The Bell Jar* match the psychological state of disabled characters?
- 3- What are the semantic, syntactic, pragmatic and discursive manifestations of hysteria, schizophrenia and depression?
- 4- What are the similarities and differences between the linguistic deviations resulting from mental disorder and those caused by physical impairment?

To seek evidence and answer the research questions, the following hypotheses are set:

- 1- The experiences of physical impairment and mental disorder are represented in *Memory in the Flesh* and *The Bell Jar* from a disabled narrator's point of view. This

allows a more accurate portrayal. Autobiographical narratives can be considered a reliable resource providing both psychological depth and linguistic authenticity.

- 2- Artistic representations of disability remain largely influenced by social and cultural misconceptions leading to a marginal and sometimes 'invisible' presence of disabled people in literary works.
- 3- *Memory in the Flesh* and *The Bell Jar* are characterized by an apparent focus on psychological characterization, representing disability in all its social, psychological, cultural and linguistic aspects is attained through the use of autobiographical elements in disability narratives.
- 4- Disability influences the choice of words, jargon and register. It results in a preference of certain grammatical structures and discursive strategies related to the psychic impact of physical difference and mental distress.

In an attempt to answer the research questions, the work relies on four chapters meant to introduce disability studies, analyse the linguistic manifestations of disability, and compare the aspects of disability in the two narratives. The first chapter introduces disability studies as viewed by scholars such as Rosemarie Thomson, Tom Shakespeare, Lenard Davis and Susan Wendell. It attempts to situate disability theory within the other literary theories to which it has links such as psychoanalysis, feminism and Marxism. The chapter also presents a brief overview of psycholinguistics. Then, it illustrates the representation of disability in literature through an account of disability in Elizabethan drama and Victorian novels.

The second chapter is devoted to demonstrating the linguistic reflection of extreme psychological states such as hysteria, schizophrenia and depression on Esther Greenwood's language in Plath's *The Bell Jar*. The chapter traces the way Esther's psychic condition aggravates and correlates this declining mental state with the shifts in her verbal behaviour. First, it analyses *The Bell Jar* as a disability narrative by depicting the aspects of disability in

Esther Greenwood's life. Second, it attempts to trace the impact of Esther Greenwood's hysteria on her linguistic behaviour focusing mainly on irrational speech and hysteric cries. Third, it discusses the linguistic manifestations of schizophrenia and the sense of self-dividedness. Then, the chapter illustrates the influence of Esther's depressive symptoms on her speech production. The aim of this correlation is to demonstrate that mental disability has a transformative impact on linguistic behaviour.

The third chapter aims at examining the portrayal of physical disability in *Memory in the Flesh* focussing on the linguistic manifestations of the physic impact of disability on Khalid Ben Toubal's use of language. First, *Memory in the Flesh* is analysed as a disability narrative by depicting the different dimensions of disability represented in the novel. Second, the semantic features of disability representation in *Memory in the Flesh* are examined to determine the extent to which the psychological impact of physical disability affects the lexico-semantic patterns used by the disabled character. The focus is on the language of alienation and its contribution in capturing the thematic preoccupations and social vision of Mosteghanemi. Third, the chapter examines the way artistic creativity in *Memory in the Flesh* becomes the means through which the trauma of war disability is relived and retold. It provides a brief history of art therapy and its relation with the major psychotherapeutic theories. Then, it focuses on painting as an expressive method used by Khalid. It also analyses writing as an attempt to overcome and narrate disability.

The last chapter is comparative. It compares and contrasts the portrayal of disability in both narratives. First, it compares the effects of the cultural perceptions of disability in American and Algerian culture on the portrayal of disabled characters in both novels. Second, it examines the impact of sociological parameters such as age, gender, class and cultural background on the characters' attitudes towards their disability and the way these attitudes are linguistically reflected in both narratives. Then, the chapter differentiates between the

therapeutic expressive methods used by Esther and Khalid and evaluates their contribution in healing and coping with disability.

Chapter One:

Disability is a permanent incapacitating silence.

Rosemarie Thomson

1.1. Introduction:

Situating disability within the realm of its larger semantic, social, psychological and literary manifestations is vital in any work endeavouring to understand the representation of disabled characters in literature. This chapter aims at providing the necessary theoretical tools that may enable a better and deeper understanding of disability in the grounds of literature and psycholinguistics. First, an attempt is made to sketch the literal and academic meanings of the word 'disability' and differentiate it from words that are often used as synonymous. Second, disability studies are situated within the wider context of literary theory through tracing their linkages with Marxism, Feminism and Psychoanalysis. Third, the presence of disability in literature is traced to contextualize disability in a wider literary context.

1.2. Disability: One Term and Different Conceptions.

Disability is an umbrella term, covering impairment, handicap, and mental disorders. Though the words impairment, disability, and handicap are often used interchangeably, their meanings are very different. Impairment refers to any loss or abnormality of physical, physiological or anatomical structure or function. Disability means any restriction resulting from impairment. It implies a lack of ability to perform an activity in the manner or within the range considered normal for human beings. A handicap is mainly defined in relation to a social group. Carter defines a handicap as "a disadvantage for a given individual that limits or prevents the fulfillment of a role in life, relative to a peer group" (05). The definitions imply that impairment has a more personal dimension as it is related to the physical conditions of the body while a handicap is the limitation that emerges as a social repercussion of impairment.

Disability is a term that lends itself to various definitions. Throughout history, disability was perceived differently. The Oxford Dictionary defines it as, “a physical or mental condition that limits a person’s movements, senses, or activities” (121). A disabled person is thus described as a person with “a physical handicap or a mental disadvantage that results in a lack of adequate power, strength, and physical or mental capacity ; especially one that prevents a person from living a full, normal life or from holding a gainful job” (Carter 36). The World Health Organization defines disability under the Equality Act 2010 as having a physical or a mental impairment that has a substantial¹ and long-term² negative effect on a person’s ability to do normal daily activities.

Due to the different conceptions of disability, and because of the difficulty of reaching an agreed-upon definition of disability, debates are still developing about who is a disabled person. The word ‘disabled’ came to be used as the standard term in referring to people with physical or mental disabilities in the second half of the 20th century, and it remains the most generally accepted term in both British and US English. It is rather preferred to terms such as [crippled](#), [defective](#), and [handicapped](#) which are regarded as offensive.

Although the term is very widespread, its use is still a matter of debate. Some people regard the use of the adjective as a plural noun (as in [the needs of the disabled](#)) as dehumanizing because it tends to treat people with disabilities as an undifferentiated group, defined merely by their capabilities. Focusing on the physical aspect only means neglecting all the other attributes that a disabled person may have such as moral values and intellectual strength. Many disability scholars consider it offensive and even unfair, claiming that the world should find other means to describe the disabled minority (Barnes 55; Seibers 32).

1 Substantial means more than minor. A person with a substantial impairment is thus a person who takes a longer time to complete daily tasks or cannot complete them without assistance.

2 A long-term impairment according to the WHO standards is an impairment that lasts for more than 12 months.

To avoid offence, newer coinages such as the ‘differently abled’ or the ‘physically challenged’ came to use, and the most frequently used way of referring to the group is ‘people with disabilities’. In the course of this research, the term disabled is used merely to describe the physical or mental condition a person suffers from. It is not meant to limit moral and intellectual traits or subjectively judge the physically impaired. Terms such as mad, mentally ill, psychopathic, lame, mutilated, and impaired are employed just in their limited medical meaning. Accordingly, their usage does not aim to have any negative connotation.

The continuing debate about terminology is influenced by the development of disability studies. It demonstrates the increasing importance disability theorists attribute to the way the experience of physical limitation or mental disorder is put into words. The inclusion and/ or exclusion of new terms are a sign of changing conceptions and theoretical frameworks. As thinking about disability undergoes continuous changes, so do terminological coinages.

1.3. An Account of the Rise and Development of Disability Studies:

Disability Studies is a recent field in critical theory. Though disabled characters and disability-related issues are pervasively present in literature, they did not receive critical attention till the nineteenth century. Disability studies owe their increasing development to the works of many researchers. This part attempts to trace this development through providing an account of the major theoretical foundations contributing to the emergence of the field. It focuses mainly on Lenard Davis’ historical model and Collin Barnes’ social model of disability.

1.3.1. Questioning Normalcy and Disability: Lennard Davis' Historical Account of Disability.

Lennard Davis stresses that normalcy is a socially constructed concept. He claims that disability is always defined by being appositionally placed with normalcy (Davis 05). Davis says that, “to understand disability, one must return to the concept of the norm” (05). The problem of disabled people is thus due to the way the concept of normalcy is formulated.

Davis traces the origins of disability as a social construction to people's inherent desire to compare themselves to others. A concept of a norm against which people can measure themselves is accordingly created (Davis 07). This comparison does not only concern the financial situation or the educational level for instance, but extends to bodily features as well. Normality as a concept means possessing the set of moral attributes and physical features that an average person must have. It implies that the majority of the population must be part of a norm.

According to Davis, in societies where the concept of the norm is operative, all deviations are viewed as abnormalities (10). In *Enforcing Normalcy: Disability, Deafness and the Body*, Davis states that, “In the societies based on the principle of normalcy, difference becomes a sign of deviation and non-conformity and the human body is pushed through a narrow canal in which similar features must be shared by the whole population” (12). A different body is consequently deviant and abnormal. What Davis finds problematic about the concept of normality is that it became exclusive. Difference and variation in human physical conditions are accordingly not accepted.

The characteristics of a normal body differ from one society to another. People tend to have different assumptions about how the normal body must be. For example, tribal peoples give more importance to physical qualities unlike industrial societies which tend to consider

intellectual strength. Normalcy is thus a socially constructed concept and not a feature of human nature because the characteristics of normal people are determined by each society according to its own needs. M. Lynn Rose confirms Davis' claims by stating that, "disability has no inherent meaning...it is just a cultural construction" (17). This implies that the concept of normalcy is just a means of categorizing people established by society.

Davis claims that the modern western concept of normalcy dates back to the times of the industrial revolution. He states that, "Up to the seventeenth century, western perceptions of the body were influenced by the notion of the 'ideal' body" (15). Davis traces the idea of an ideal body back to the ancient Greek traditions of representing the nude body of Venuses as the embodiment of physical beauty (15). Davis stresses that as the divine body was represented as an ideal that the human body could never attain; there was no need for members of the population to conform to certain features, simply because there was no possibility of doing so. This vision remained operative in western culture and represented mainly in classical paintings.

Western perceptions of how the normal body should look were largely determined by the emergence of the field of statistics. Davis claims that, "Political arithmetic- which aimed at the promotion of sound, well-informed state policy led to the emergence of medical arithmetic" (16). In the early nineteenth century, statistics started to be used in the area of public health. Davis maintains that, "the application of numbers to illustrate the natural history of health and disease didn't have a direct relationship with the rise of the concept of normalcy because it was merely statistical and didn't aim at generalizing the features of the "normal" as an imperative" (17). It was till the first half of the nineteenth century that the concept of normalcy assumed a generalized meaning.

According to Davis, “The first attempt to a generalized notion of the normal was made in 1835 when a French statistician; Adolphe Quetelet introduced the concept of ‘l’homme moyen’ or the average man” (18). This concept became widely spread all over Europe where it was used to justify ‘les classes moyens’, or middle class ideology. As such, having a physically average body became the exemplar of the middle way of life. Davis criticizes the concept of ‘l’homme moyen’ arguing that it is not comprehensive because it does not take into account the aspects of diversity and variety in human nature (06). Attributing positive value to ‘l’homme moyen’ by describing him as normal means the exclusion of all the other categories which do not fall in the scope of normalcy due to physical or mental difference. The social implication of this idea of the ‘average man’ was that it provided a justification of the concept of normalcy; a concept which became so inculcated in the western cultural psyche that it remained unquestioned for centuries.

The central argument of Davis is that the disabled body should not be defined as the opposite of the normal body. This definition was challenged by other disability scholars and activists. Defining disability in terms of lack or abnormality is regarded as a form of oppression and discrimination. This led to the rise of a new movement calling for a more accurate perception of disability, based on the actual experiences of disabled people in society.

1.3.2. Collin Barnes’ Social Model of Disability.

The emergence of the social modal of disability was the major development that took place in the field of disability studies. Before the formulation of the social model, almost all the definitions of disability were medically based. Disability was viewed from a medical perspective only. As such, its social implications did not receive enough academic attention. Yet, the works of Collin Barnes revolutionized disability studies.

The social model of disability emerged in the 1980's as a reaction to the medical model. It does not represent a unified and coherent approach, but rather a melting pot for different views and perspectives on disability, that have in common the rejection of the medical model as the sole approach from which disability can be understood. The social model of disability is based on the assumption that disabled people "are disabled by society, not by their bodies" (Shakespeare 03). The shift from focusing on the disabled body to considering the disabling impact of society is the major contribution of this model.

As it was the total antithesis of the medical model, the social model of disability shifted interest away from the medical language of physiological defects and cognitive impairments to the expression of objection to all forms of discrimination and suffering disabled people encounter in their everyday life. Disability is accordingly explained not in terms of the body's limitation but in terms of society's failure to adjust itself to the needs of its disabled members.

Mike Oliver states that:

It is society which disables physically impaired people. Disability is something imposed on top of our impairments by the way we are unnecessarily isolated and excluded from full participation in society. Disabled people are therefore an oppressed group in society. To understand this, it is necessary to grasp the distinction between the physical impairment and the social situation, called 'disability', of people with such impairments. Thus we define impairment as lacking all or part of a limb, or having a defective limb, organism or mechanism of the body and disability as the disadvantage or restriction of activity caused by a contemporary social organization which takes little or no account of people who have physical impairments and thus excludes them from participation in the mainstream of social activities. (Oliver 03)

Collin Barnes and Mike Oliver advocated a new perception of disability focusing not on the physical consequences of disability but on the complexity of the relationship between disabled people and their social environment. They claim that the functional limitation necessarily results in a complex social interaction (Barnes 04; Oliver 05). Barnes challenges the traditional personal approach that views impairment as a personal tragedy. He defines disability as a collective problem which requires collective solutions. Accordingly, the basic assumption of the social model of disability is that people with chronic illnesses or physical impairments are “victims of a disabling society” (Barnes 04).

This can be further explained by the barriers faced by people with disabilities. For example, playgrounds, public buildings, and work places are designed to accommodate a specific type of people with no physical or mental limitations. Having a different physical or mental condition certainly means having a trouble-some access to these places; or not having access at all. According to the social model, the inability of disabled children to play with their normal peers is not because of their physical condition but because playgrounds are designed to accommodate normal children only. Society’s failure to provide adequate services and facilities is -according to the social model, the reason behind disability, not the physical impairment.

Barnes claims that discrimination against people with disabilities is also manifested in the way they are treated. Marginalization is shown both in attitudes of pity and those of rejection. Barnes criticizes these societal attitudes towards disability by stating that, “An able-body is not a permanent condition” (07). He stresses that disability is not a matter of misfortune or disadvantage but something that we may all experience if we live long enough. Old age may bring with it a set of disabilities such as sight and hearing problems, mobility limitations, chronic illnesses, and even memory loss such as in the case of Alzheimer sufferers. Moreover,

inclusion under the disability sector is also open to war victims. An able-bodied person may become lame or blind as a result of wars or accidents. Thus, Barnes concludes that the ideal of the perfectibility of the human body and mind remains an illusion (07).

Within the same context, Michael Davidson in his seminal work *Concerto for the Left Hand: Disability and the Unfamiliar Body* provides various examples of normal healthy people who became impaired and had to cope with the new condition of being physically limited and disabled. He says that, “when a healthy individual becomes paralyzed from a spinal cord injury or undergoes chemotherapy, he understands how unstable terms like ‘healthy’ and ‘normal’ are, and how inert the body becomes within medical care” (14). Such life-changing experiences affect the entire life course and require a force of self-help to overcome the traumatic experience.

1.3.3. Development of the Social Model of Disability:

The genesis of the social model of disability is the British Disability Movement. This movement developed an important conceptual distinction between impairment and disability. It is credited for raising awareness about disability issues in Britain. Victor Finkelstien considers the rise of this movement as a revolution in British disability studies (32).

The movement started in the 1970s by activists in the Union of the Physically Impaired against Segregation (UPIAS). It was given academic credibility via the work of Victor Finkelstein (1980), Colin Barnes (1991) and particularly Mike Oliver (1996). In its document, *Fundamental Principles of Disability*, Oliver states that, “The founding principle of the UPIAS is that disability is social construction not a physical condition” (17).

UPIAS activists argued that disability was not correctly defined. They challenged the traditional biological definitions and medical categorizations and called for a radical change in conceptions about disabled people based on the claim that disability is a socially

constructed category. They made a clear-cut distinction between impairment and disability. Impairment is the physical fact of lacking an arm, a leg, or having a limitation. Disability is the social process that turns impairment into a negative identity by creating barriers.

Tom Shakespeare stresses that the most important achievement of the British disability movement was not only changing the conception or definitions of disability but changing the policies of dealing with it as well (22). He even claims that it could dismantle the social barriers by pursuing a policy of social change instead of medical cure or rehabilitation (Shakespeare 23).

What made the British Disability Movement powerful were its political demands. Activists said they could no longer rely on charity or goodwill and started mobilizing disabled people to ask for their social and political rights. Accordingly, they could raise awareness about basic issues related to disability and take it from the personal scope of individual tragedy to the social and political scope of demanding equal rights for a marginalized minority. Despite the lack of resources and support, the British Disability Movement could make an unprecedented success in mobilizing people with disabilities. Thus, part of the success of the movement is attributed to its contribution in transforming disabled people's self-esteem. Shakespeare stresses that this was the key factor behind the commitment the movement could gain (23).

1.3.4. Criticism of the Social Model of Disability:

Despite the strengths of the social model, it was subject to a wave of criticism. The debates surrounding the usefulness of the social model of disability as an academic and practical tool with which to explore the experience of disabled people emerged when disability scholars such as Mike Oliver started challenging the basic assumption of this model and calling for a change of perspectives on disability issues. They claimed that the model

became an “out-dated ideology” that could no longer fit the aspirations of disabled people. The main criticisms were based on three arguments.

First, social model theorists asked for a policy of total social change and barrier removal to make society a better place for disabled people. Tom Shakespeare says that this claim constitutes a flaw in the whole conception because the whole society cannot be changed to fit disabled people (15). The model is criticized on the basis of being over-demanding. The changes it asked for were not practically possible, at least in a short term. Such deep and radical changes in society take decades to become true. Moreover, they generally start with a change in thinking and at the level of disability’s mental conception. Many social model theorists came to the conclusion that the reverse is just an illusion.

Second, the social model is also criticized for its exaggeration in describing the social oppression and discrimination society is said to inflict on disabled people. Collin Barnes states that the social model’s discourse “generated a totalizing grand theory that excluded important dimensions of disabled people’s lived experience and knowledge” (15). Barnes argues that oppression, discrimination and exclusion are not always the cases of disabled people, and not in all societies. He concludes that the British social model’s approach, “because it ‘over-eggs the pudding’, risks discrediting the entire dish” (19).

Third, the social model rests on the distinction between impairment and disability. Yet, there is a claim that this distinction can never be made because in reality, separating the body and its social and cultural aspects is not possible. Away from the theoretical debates about terminology and which terms are more appropriate to describe the disabled minority, no such distinctions can be made in real life. The basic flaw of the social model for many theorists is that it dealt with disability as a disembodied phenomenon. Yet, they stress that there is no pure or natural body, existing outside of discourse.

Another reason for which the social model became controversial is that it didn't deal with the question of identity. Apart from medical debates, disability studies' scholars focused on the cultural assignation of disability. Accordingly, an alternative and more adequate approach to disability politics, based on the cultural aspects of disability, not only its medical and social aspects came into being. It is characterized mainly by the desire to celebrate diversity and difference, and take pride in the positive value of living with impairment.

For the above-mentioned reasons, the social model of disability turned to be an out-dated ideology. Yet, its contributions to the development of the field of disability studies cannot be denied. Social model theorists were the pioneers to advocate the rights of an often neglected minority. Laying the theoretical foundations and formulating a list of social and political demands was the major achievement of this model. Flaws and shortcomings constituted the starting point for new conceptions based on the psychological rather than the social and political dimension of disability.

1.4. Critical Disability Theory: Situating Disability Studies within Social Theory.

In considering the emerging field of literary disability studies, it becomes clear that disability has not been regarded as a minority identity till the late twentieth century. Rosemarie Thomson argues that, "Disability is an issue that has always been present in literature but remains unaddressed" (08). Similarly, David Bolt stresses that, "Regarding disability, a conspicuous absence exists in literature" (21). It is not an absence of disability representation because the history of literature is full of works portraying characters with both physical and mental disabilities. It is mainly an absence of critical attention. It was until the 1970's and 1980's that literary disability studies witnessed rapid growth. Disability thus started being situated within a large theoretical frame and interrelated with different literary

theories. This part endeavours to identify the value of different theoretical approaches for illuminating the particular question of disability's relevance to the field of literary theory. It first considers the materialist theory of disability based on Marxist thought. Then, it addresses disability's relevance to the Feminist movement. As Psychoanalysis is also significant in literary disability studies, the chapter also correlates disability to Psychoanalysis through examining the intra-psychic experiences resulting from disability.

1-4-1. Oliver's Materialist Conception of Disability:

In his work, *Capitalism, Disability and Ideology: A Materialist Critique of the Normalization Principle*, Mike Oliver has produced a variant of the social model of disability based on a different conception of the politics of disablement. Oliver's theorization about disability is based on Marxist political economy. Therefore, it is referred to as the materialist theory of disability. Oliver argues that this theory wouldn't only provide new theoretical foundations for understanding disability issues. He stresses that it would also change the way disability is experienced, explained and dealt with. The materialist theory, as Oliver puts it, "offers disabled people the opportunity to transform their own lives and in so doing, to transform the world in which they live" (12).

The basic assumption of the materialist conception is that human nature, and the resulting choices that individuals can make for themselves, are determined by the structure and ideology of society. It is therefore argued that, "The kind of society in which a disabled person lives has a profound effect upon how their disability is experienced and structured" (Lang 10). Accordingly, in a capitalist society, the individual experience of disability is shaped by the structural features of capitalism including culture, ideology, race, and gender. Oliver's overall purpose is to prove that, "Disability as a category can only be understood within a framework which suggests that it is culturally produced and socially structured"

(Oliver 22). Oliver's perception of disability and the terminology he uses to address it imply linkages with the Marxist materialist ideology.

To explain this further, Oliver goes back to the roots of capitalism. He stresses that the social structuring of disability is founded upon the mode of production prevailing in capitalist societies. This latter refers to the type of economy and its productive units, in addition to the manner in which production and consumption are organized³. The way disabled people are perceived or treated in a society is profoundly influenced by the basic cultural values of society; which are in their turn shaped by the economic structure. Oliver maintains that, "The economic structure and ideological hegemony of modern western society have had a major detrimental impact upon the lives of disabled people, and also other marginalized groups such as those with differing ethnic affiliations, or those with homosexual orientations" (Oliver 12).

Emphasizing the oppression and marginalization disabled people suffer from, according to Oliver places capitalism as the major reason behind their disadvantaged situation in society. Oliver thus identifies disability with other minority groups claiming a distinct identity such as ethnic minorities and people with different sexual identities (13).

With the rise of the industrial revolution, the means of production were transformed. The factory system and the introduction of individual wage labour resulted in the separation of home from the workplace. Following the rapid spread of this system, disabled people suffered from marginalization as they were unable to meet the demands of capitalist society. Disabled people have become further isolated from their families and communities due to their inability to cope with the changing social

³ The manner of production may rely on the network of family units, or t the factory system relying through wage labour.

and economic institutions which necessitated both physical and mental strength.

Oliver believes that disabled people suffer from oppression. He claims that, “this oppression is rooted in the economic and social structure of capitalism” (Oliver 15). Consequently, the rise of capitalism gave rise to the premise that disability is in essence an individual pathology, since a distinction needed to be drawn between those considered able-bodied, and by implication able to work, and those who were considered disabled. Hence, within the modern capitalist era, only able-bodied people can fit as they can meet the expectations of an industrial society. In this context, Raymond Lang states that, “Disabled people could not meet the demands of individual wage labour and so became controlled through exclusion” (17). Exclusion according to Lang is the curse inflicted on disabled people by industrialization.

Oliver also argues that, “The economic and social structures of society, in combination with the dominant ideological hegemony, have resulted in disabled people being perceived as dependent” (22). According to Oliver, this hegemony had serious implications. Oliver states that:

As a consequence, a great deal of the social welfare legislation enacted during the post-war period has compounded his notion. The term ‘dependency’ is used in a two-fold manner. First, welfare states have categorized entire groups of people; disabled people are among them, who have become dependent upon the state to provide them with education, health care, as well as financial support. Second, in relation to disability, attention has focused upon the functional limitations of disabled people who are perceived to be unable to care for themselves. (23)

The dominant hegemony of individualism prevailing in capitalist societies contributed to the growing dependence of disabled people on the state. Oliver claims that this consequent medicalization of disability and categorization of disabled people will remain unaltered. In order to create a 'non-disablist' society, Oliver proposes a three-fold strategy. First, he calls states to enact anti-discrimination legislations, thereby making it an offence to discriminate against disabled people in the fields of education, employment and housing. Second, Oliver urges western societies to put more emphasis on securing freedom of information, so that disabled people can have access to information that has previously remained confidential.

The third and most important demand in Oliver's strategy is that an infrastructure should be established in which the needs and aspirations of disabled people can be met, with the appropriate range of services being provided. To do so, Oliver calls governments to take the necessary measures because this can only happen with adequate state funding, to assist organizations of disabled people to secure their rights. This strategy accounts for the different spheres of disabled people's lives. Yet, it places a huge part of the responsibility on the government and does not consider the role disabled people should play in defining how they wish to live their lives.

1.4.2. Disability and Psychoanalysis:

Perceiving disability only in purely medical, social or economic terms is a narrowing of the discipline's perspective. Deborah Marks, in her seminal work; *Disability: Controversial Debates and Psychological Perspectives*, challenges the previous models and conceptions of disability and attempts to introduce a psychological contextualization of disability studies. She criticizes the medical, social and materialist models of disability and introduces psychoanalysis as a new theoretical approach from which disability can be analyzed and understood.

The dominant paradigm for understanding disability throughout most of the 20th century has been the medical model which identifies the medical condition of disabled people as the source of the disadvantage they experience. This purely medical model sees disability as “an inherent characteristic of a person arising from an objectively identified impairment of the mind or body” (Marks 07). Disability scholars who adhered to the psychoanalytical principles challenged this conception of disability and attempted to alter it by viewing disability from the lens of psychology.

Despite the presence and relevance of the medical and materialist models for a long period of time, it became criticized on the basis of not taking the psychic dimension of disability into account. Marks asserts that, “ The modes of interrogating the disability phenomenon which do not examine the intra-psychic states will inevitably fall short of accounting for the resilience and perpetuation of disability oppression” (19). Marks’ approach to disability promises to be more comprehensive as it uses findings in psychology as analytical tools to understand and describe disability.

Psychoanalytical disability theory adopts a version of disability based on three principles. First, it views it as a psychological construct, not the inevitable consequence of impairment. Second, it recognizes a complex interrelationship between impairment and the individual’s response to it. Third, it claims that the disadvantage experienced by disabled people is caused not only by the physical and institutional environment but also by the attitudes of a disabled person towards the fact that s/he fails to meet the needs and expectations of society.

A complete account of disability according to Deborah Marks and Brian Watermeyer must incorporate the personal experiences of impairment and illness and the psychological states that accompany them (Marks 20; Watermeyer 11). Accordingly, the psychoanalytic lens provides an opportunity to examine how ideas and images of disability are experienced by all of us and how the nature of this experience shapes the way society treats disabled people. It

also enables the analysis of what happens inside the disabled self at the emotional level, and how these psychic processes influence and shape action within society.

Psychoanalytic perspectives on disability focus on the intrinsic origins of oppression inside human nature. If disability evokes such strong emotional responses in the disabled person's psyche as well as in their social surroundings, then it should influence the decisions made regarding individual and collective judgment. Disability results in excessive emotional energy (Marks 21). As an extreme physical or mental condition, its psychological repercussions vary from extreme sadistic and fearful reactions to kind and sometimes submissive ones, depending on the nature of the person affected and his social, cultural, educational, religious and even political background (Watermeyer 12).

First, disability makes can make people feel anxious. This is the first feeling people generally get when confronted with a person with a disability. For instance, in such a case, people might not be sure of whether they should offer help or not. Staring and looking up might also be psychologically painful for the disabled person as they might indicate fear, pity and other sorts of negative emotions. This anxiety may be viewed as a defensive response to the fearful memories and fears of being in a similar situation.

In the late twentieth century, Sigmund Freud introduced the world to the revolutionary idea that all humans have a part which is unknown to them and outside of their awareness. He named this part the unconscious. Freud says that this is the part in which all painful feelings, memories and fears are repressed. These feelings and memories are pushed outside of our consciousness by what Freud calls defense mechanisms. These latter are used to protect our conscious from the feelings we struggle with and want to disregard (qtd. in Marks 23).

Psychoanalytic thinking proposes that human experience is made of both pleasurable and painful parts. Among the painful experiences there is the feeling of vulnerability and

dependency, the fear of looking ugly, or being undesirable and unwanted, and the fear that we are a burden to others. Disability certainly results in these fears and emotions.

As all the above mentioned feelings are part of the painful experiences disabled people might have gone through. Marks stresses that, “disabled people in most societies have come to symbolize the most damaged, shameful, undesirable, and unwanted parts of our humanity which we all bear within us” (23). Deborah Marks maintains that these feelings of shame, vulnerability, alienation and oppression are hard to manage. As such, when the disabled person cannot manage to accept or tolerate these painful emotional experiences, the unconscious tends to manage the situation by ‘pushing down’ all what is undesirable and unwanted to the unconscious. That’s why Marks claims that the experience of disability can never be fully understood without the employment of psychological analytical practices that allow a deep scrutiny of disabled self (24).

The notion of ‘Othering’ is another psychic notion relevant to disability studies. It stands for the idea that human beings usually -sometimes even unconsciously, construct their identities with reference to others. Drawing the similarities and distinctions we have with people around us is an important psychological process through which we construct an idea about ourselves and answer the question: who we are? Accordingly, identity can be defined as a psychological construct and not as an identifiable or reliable reality (Watermeyer 25). This implies that the identity of a disabled person is much more shaped by the psychological realities and conceptions resulting from disability and not merely by their physical impairment or mental condition.

In other words, the meanings of disability and the identities they shape are carried by unconscious operations. Consequently, disability is a psychological accomplishment rather than a unitary social reality. Watermeyer stresses that, “The nature of the disabled identity in

societies such as ours is strongly mediated by the process of Othering” (13). So, by attributing negative characteristics to the disabled identity such as: weakness, damage, and defect, the psyche becomes able to reinforce the positive identity of the able-bodied as the opposite of those unwanted traits.

To conclude, psychoanalysis is an essential theory that provided many insights to disability studies. It is one of the largely accepted theories that enabled a better understanding of the psychological state of disabled people and exposed their internal world to academic debate and analysis. The correlation between disability studies and psychoanalysis contributed to the advancement of the fields as it opened new perspectives of understanding disability.

1.4.3. Feminism, Gender and Disability Studies:

Feminism is one of the cultural and literary theories that influenced and had been influenced by disability studies. The ties between the two movements are strong despite the heated debates and controversies between Feminist activists and Disability Studies scholars. These controversial debates are mainly on the place disabled women occupy within the Disability Movement and whether the movement could sufficiently voice their concerns or not.

Susan Wendell addresses this issue in her book *Feminist Perspectives on Disability* saying that, “For more than a decade, Feminist philosophy has had a productive, but sometimes uneasy engagement with the facts and theory of disability” (43). This uneasy engagement, as Wendell calls is caused by the deficiencies disabled feminists attributed to the Disability Movement. They claim that the Disability Movement has not overcome a residual allegiance to normalcy and that many of the discussions held by disability scholars on feminism tend to proceed by laying aside feminists’ affiliations with liberation, self-affirmation, and

inclusiveness (Wendell 45). Conflating the demands of both movements is thus the source of the controversy.

Similarly, Jenny Morris; a disabled Feminist theorist says that this movement gave disabled women a perspective with which to understand their personal experience. Feminism enabled disabled women to articulate their personal experiences of oppression. Morris emphasizes that disabled Feminists drew aspirations from the Disability Movement in Britain in the 1980's. Yet, she claims that it tended to treat disabled women's particular experiences as invisible, i.e. it gave them no particular importance (Morris 16). Morris goes further to claim that it even excluded issues with particular relevance to women.

This feeling of being neglected and marginalized placed the disabled female in a dialogue between disability studies and feminism. On the one hand, the Disability Movement was much more informed by political debates rather than women-related issues. On the other, feminist activists continued to treat the issue of disability as a side-issue and regarded it as an optional case that cannot be part of their mainstream ideology and academic debates.

Because both movements side-lined disabled women, a new mode of thought emerged in reaction to this and took as its founding idea the assertion of the presence of disabled women in both fields and their right to speak about their personal experiences of being denied opportunities, not because of their bodily limitations but because of the disabling social environment which constantly places barriers in their faces.

Feminist Disability theory has consequently come to being. Morris states that, "It has been going on covertly, and perhaps unnoticed by the mainstream within feminist studies and cultural studies for many years" (16). Central texts have included Susan Sontag's *Illness as Metaphor* (1978), Elaine Scarry's *The Body in Pain* (1985), Rosemarie Garland Thomson's cultural studies work *Extraordinary Bodies* (1997) and anthologies such as *Gendering*

Disability (2004) edited by Bonnie Smith and Beth Hutchinson, as well as works of other scholars and activists such as Barbara Hillyer and Simi Linton.

Rosemarie Thomson's work is the most influential among all the other texts theorizing Feminist Disability Movement. In this work, Thomson states the basic assumptions of the Feminist Disability Movement and explains the reasons leading to its rise. She says that:

Feminist Disability Studies questions our assumptions that disability is a flow, lack, or excess. Disability is a cultural interpretation of human variation rather than an inherent inferiority, pathology to cure, or an undesirable trait to eliminate. Disability finds its significance in the interaction between bodies and their social and material environment. (Thomson 11)

Thomson's definition of disability challenges all traditional definitions in disability studies. The social model defines disability as the product of social barriers and obstacles preventing people with disabilities from living a normal life or playing an active role in society. As such, it rejects limiting disability to the physical condition or medical diagnosis and treatment. Thomson however, goes further to place disability within a wider cultural context. She argues that, "Disability is a form of human variation which can be culturally productive" (Thomson 12). Thomson rejects the attitudes of inferiority and claims disability as a positive identity.

Thus, the social model of disability has given the language with which the experiences of discrimination, oppression and prejudice can be described whereas feminism has provided the liberating spirit that pushed the movement forward. Jenny Morris, in her book *Encounters with Strangers* clearly illustrates this by saying:

For years now, the social model of disability has enabled me to confront, survive and even surmount countless situations of exclusion and discrimination. It has been my mainstay, as it has been for the wider Disabled People's Movement. It

has enabled a vision of ourselves free from the constraints of disability and provided a direction for our commitment to social change. It has played a central role in promoting disabled people's individual self-worth, collective identity and political organization. I don't think it is an exaggeration to say that the social model has saved lives. (Morris 03)

Though the social model made an important contribution to the first steps disabled women took towards the achievement of equality and social justice, it was not the adequate model for which they were looking. The aspirations of disabled women went beyond the demands of social model theorists. As a result, the field of gender and disability came to being. According to disabled feminist activists, it was the only model which could successfully articulate their concerns.

The first contribution of the gender disability theory was the separation of the terms impairment and disability. Unlike social model thinkers, feminist disability thinkers favoured the use of the term impairment. They considered this latter a value-free word used just to describe characteristics of the body while disability is a term that implies not only the physical defect but the social oppression as well. Feminist disability theorists claim that this separation is not merely a semantic one because it enabled them-as they claim, to challenge the silencing of the experiences of impairment and illness.

The second major contribution of the feminist disability movement was the assertion that gender and disability studies do not aim only at describing and examining the double disadvantage that disabled women might experience because of being both female and disabled. The movement was about how disabled women encounter this double disadvantage.

Third, the Feminist Disability Movement aims at finding a way of making these experiences visible and sharing them with each other, as well as with non-disabled people, in a way that asserts their self-worth despite of all disadvantages and difficulties. Morris in her book *Pride against Prejudice* states that, “As disabled women, part of (their) return to 'normal' life is often a return to the pressures of looking after other people. Aids and adaptations which are supposedly about helping (them) to be physically independent are in fact about enabling others to be dependent on (them) for the tasks which keep a house clean and a family fed” (52).

Morris’s words are a call for a total liberation of disabled women. She does not only reject society’s disabling views towards women with impairment but even doubts the attempts to cure them , claiming that these latter do not really aim at helping disabled women but only at maintaining the social order and gender roles. Independence for Morris is not in curing or eliminating disability but in ending domestic dependence on women to perform the daily tasks of “keeping the house clean and family fed”.

Morris’s account could gain acceptance and support from a large number of women with disabilities. Yet, it couldn’t avoid being largely abstract and theoretical. The call for a total liberation of disabled women from their family and gender roles raises many questions on the applicability of the theory. Moreover, the theory was widely criticized for its rejection of medical assistance and attempts of cure. This stands against human nature and its natural tendency towards normalcy and well-being. Being proud of one’s disability against social prejudice does not imply accepting and enduring bodily pain and suffering. Strengthening disabled women through curing their physical deficiencies or mental troubles can contribute to a better social performance and enhance a more positive feminine self-image.

The Feminist Disability Movement has accordingly proved the relevance of disabled women’s experiences to both feminism and disability studies. The movement is credited for

bringing to light the issues and concerns of disabled females and presenting them not as passive victims but as active part of society aiming at liberation, equality and justice.

The approaches identified as being most useful to understand and analyze disability are: The materialist theory of disability; based on Marxist thought, Psychoanalysis which is also significant in literary disability studies as it addresses intra-psychic experiences of and defenses against disability and Feminist disability theory. The latter emerged as a result of disabled women's dissatisfaction with the representation of their concerns in the Feminist movement. Conventionally, these theories are seen as mutually incompatible or opposing. However, they offer complementary and interesting ways of understanding the structures and meanings associated with disability in contemporary society.

1.5. Embodiment Theory: The Body-Mind Connection in Psycholinguistics.

Psycholinguistics is one of the major theories of linguistic analysis employed in the field of literary studies. It is the study of the mental processes and skills underlying the production and comprehension of language and the acquisition of linguistic skills. Psycholinguistics considers the skilled language user as a complex information processing system. Its aim is to account for the user's acquisition, comprehension, and production of language. It considers the various components of the language system, the human psyche, and their interaction. This part attempts to give a brief theoretical overview of Psycholinguistics and examine its relevance to the field of disability studies.

1-5-1. Brief History of Psycholinguistics:

The term psycholinguistics was first used in the 1950's. The field came into being as result of an inspiring cooperation between George Miller and Noam Chomsky. Yet, as a well-

established field of study, psycholinguistics did not start at that time. Interest in the production, comprehension and acquisition of language started earlier. It goes back to the beginning of scientific psychology, under the name of the psychology of language.

David Bolt traces the origin of psycholinguistics back to the second half of the 19th when linguists started doubting the long-standing assumption that language is a spontaneous product of nature (07). He makes reference to the linguists who pioneered to set the foundations of Psycholinguistics as a science saying that, “The psychology of language was invented by Heymann Stienthal, Morris Lazarus, and Hermann Paul to provide the explanation that language was the product of conscious experience” (Bolt 07). Bolt provides a comprehensive account of the rise and development of the field.

Developments in psycholinguistics span over a relatively long period of time and were the outcome of works of many researchers. The interdisciplinary nature of the field necessitated the involvement of scholars in both linguistics and medical psychology. The first half of the twentieth century witnessed a rapid growth of research in the field of psychology; more particularly on developmental psychology. This era witnessed also the rise of speech error research and language disorders.

Yet, the ties between generative grammar and psycholinguistics loosened as the subject matter of the latter broadened. In the 1970’s, psycholinguistics witnessed a major shift of interest from syntax to meaning and interpretation. Psycholinguistics studied how to integrate given information in understanding the meaning of a sentence and how to make relations between sentences in a short text to infer meaning. Accordingly, text understanding became a field of research of its own in psycholinguistics. John Anderson and George Bower made an

influential model of the representation of meaning in texts called “discourse model” (Anderson and Bower 41). The discourse model enabled a better understanding of speech production that considers pragmatics within the scope of discourse analysis. It was fruitfully applied to the study, analysis and interpretation of texts.

In the 1980’s, David Bolt introduced the concept of psycholexicology. This concept turned the attention of psycholinguists to the study of word-meaning psychology. Bolt says that, “Psycholexicology developed a procedural semantics for perception- related words such as colour terms, terms for temporal and special relations and verbs of motion” (10). This revolutionary concept of psycholexicology was a major contribution to the field because it enabled new and different ways of lexical access.

The development of the theory of production was another major advance in the field of psycholinguistics. Sophie Repp considers Charles Osgood and Kathryn Bock as pioneers in the experimental study of sentence production investigating how topical entities were spontaneously incorporated in sentence production (01). Other researchers such as Frieda Goldman Eisler and Brian Butterworth focused on pause patterns in speech to study the speaker’s planning process. They examined the two stages of formulation of the spoken message; the grammatical and the phonological encoding. They came to the conclusion that “these two stages are computationally independent but temporally over-lapping” (Repp 01).

The psychology of sign language became another vastly expanding trend of psycholinguistics. Edward Klima worked mainly on the American sign-language. His research proved that signs are part of natural language and required a structural and neurological processing on developmental grounds.

Psycholinguists also developed an interest in the social rules involved in language production, acquisition and comprehension. Sophie Repp states a set of questions that

psycholinguistics attempted to answer such as: How do children acquire language? How do they acquire two languages simultaneously if they live in a bilingual linguistic environment? How do speakers transform complex thoughts into sound waves taking into consideration societal rules and pragmatics? And how do listeners decode these sound waves to understand the linguistic message? (02). As such, the field of psycholinguistics became an independent field of study having its own basic questions. The development of the field raised new questions and challenges as language and psychology proved to be much more complex and interrelated.

1-5-2. Branches of Psycholinguistics:

Psycholinguistics involves three main components: conceptualizing a linguistic message, formulating the conceptual message and interpreting it. It aims at a comprehensive analysis of the different stages of language production and interpretation. It also attempts to examine language with reference to the psychology of the language user. As such, psycholinguistics comprises three main branches: language acquisition, speech production and language comprehension.

First, psycholinguistics examines conceptualizing as a “conscious planning activity guided by a communicative intention” (Levelt 290). In other words, it considers how the formulation of messages in a target language takes place according to a given conceptual structure. Levelt further adds that this component is examined with much scrutiny in neurolinguistics; a recently emerging field of linguistics analysis with reference to neurological structures, functions and impairments as well.

Second, psycholinguistics defines formulating as generation the presentation of the conceptual message using natural language. This involves two processes; grammatical

encoding and phonological encoding. The former means mapping the message into the grammatical form. It includes retrieving items from the language user's mental lexicon and arranging those items following syntactic structures. Levelt defines the latter means "transferring the syntactic structure into a phonic articulatory plan" (291). Articulating is the third component. It refers to the process of executing the articulatory plan using a set of articulatory gestures and functions. It has a primary and a secondary level. Speaking; or oral production is the primary mode. The secondary mode is writing. It involves the use of manual signs of language. The fourth component is the perceptual encoding. It involves the mapping of the linguistic input such as the use of connected speech or the series of printed words.

The last component is interpreting. It means inferring the intended meaning using mental strategies. Levelt identifies some of these strategies such as, "Identifying the referents and computing a conceptual representation of the utterance along with the use of contextual information" (291). As psycholinguistics takes into consideration this significant issue of language interpretation in both psychology and linguistics, psycholinguists refer to the deep psychic mechanisms involved in inferring meaning from linguistic codes. It also accounts for the speaker's ability to monitor and edit his/her own linguistic output. Self-monitoring is a matter of controversy among psycholinguists. The debate is not only about the extent to which a speaker can monitor his/her own speech but also about the phase in which this monitoring takes place; and whether it occurs before or after the production of language.

The integration of the production and comprehension systems is one of the basic assumptions of psycholinguistics. Psycholinguists assume that conceptualizing and

interpreting are two essential and inseparable aspects in a skilled language user because they make the conversational dialogue a purposeful behaviour (Bolt 12). This integration is justified on the basis of the shared mental lexicon, references, as well as grammatical and phonological knowledge. Psycholinguists stress that the different linguistic processes involved in the production and comprehension of language are mutually dependent.

Psycholinguistics as a discipline has different parts. Experimental psycholinguistics employs the empirical method (experimentation) in the study of language production and comprehension. Developmental psycholinguistics focuses on language acquisition; be it the mother tongue or second language. It uses both observational and experimental methods. It aims at accounting for the way learners acquire language skills starting from their initial state of knowledge, linguistic input, and inductive and productive abilities.

The study of the general psychological mechanisms involved in the production and comprehension of languages is a major concern of psycholinguistics. Both the production and comprehension processes are performed within the constraints of the information processing system. Charles Osgood states that, “The system consists of structural components (memory systems) along with control processes that govern the flow of information processing system and comprehension passes through different levels of processing” (54). He identifies the three levels explaining the roles they play and the way they cooperate to enable the processing of information. According to Osgood, internal lexicon processing is the first level. It enables the analysis of the lexical items that constitute the spoken or written message. Syntactic parsing is the second level. It means the

identification of the grammatical structures used. The third is connected speech comprehension (Osgood 55).

Psycholinguistics offers new ways of understanding language as a psychic product. It promoted the possibility of understanding the way language is acquired, produced and understood in relation to the different psychic states of the human being. Besides, psycholinguistics takes into account the use of language in the case of extreme psychological states and mental disorders using the theory of embodiment. This theory permits a better understanding of language in the context of disability.

1-5-3. Psycholinguistics and Disability: The Embodiment Theory.

The primary focus of psycholinguistics is on language processes in normal individuals. Yet, the study of language disorders also falls in the scope of psycholinguistics. Studying cases of individuals with impaired language functioning can extend knowledge about the psychology of language. For this reason, psycholinguistics is judged as an appropriate analytical tool to examine the interrelation between language and disability including both physical impairments and mental disorders.

This issue of mental disability has direct relevance to psycholinguistic accounts of speech disorders. The discussions concerning the causes of specific speech disorders depend on the

examination of the mental processes that manipulate linguistic symbols. The psycholinguistic approaches to understanding speech disorders focus on developmental speech delay and speech production in persons with neurological disease. Other speech disorders such as speech delay, hearing impairment, and fluency problems, as well-developmental apraxia of speech⁴ have also been conceptualized in psycholinguistic terms.

Besides, the physical conditions of the body are also proved to influence language production and comprehension. The rise of the theory of embodiment was the major outcome of psycholinguistics. Embodied approaches to language challenged the basic assumptions upon which the psychology of language rested for long. Embodiment brought new ideas concerning the perception of the body, mind and language as an outcome of both parts. The body-mind split or the Cartesian division of body and mind remained a fundamental principle in the analysis of human behaviour for decades. In a Cartesian system, the body is characterized as the fleshy part that houses the mind but is separate from it. This view suggests that the mind is disembodied. As such, it is also objective and connected only to rationality and science.

This Cartesian perception of the body remained unchallenged and widely popular till the second half of the twentieth century. Humanists then had a different conception of the body. Under the lens of humanist scrutiny, bodies were seen, analyzed, and portrayed in different ways. In his book *Phenomenology of Perception*, Merleau Bonty explains the different ways

⁴ Apraxia of Speech is a motor speech disorder which results from neurodegenerative diseases.

in which perceptual systems are subject to physical (i.e. bodily) processes. This assumption laid the foundation of what came to be called “the embodiment theory” (Bonty 04).

Embodiment is a theory based on the assumption that all feelings, thoughts, and behaviours are grounded in the body. Psychologists are increasingly interested in the body and its interaction with the environment. More particularly, they attempted to understand the way the mind works and examined questions of whether human behaviour is influenced by the body’s physical state.

Research in social psychology before the 1950’s came to the conclusion that “cognition is situated and action-oriented” (Gruther 19). This implies that bodily processes are central in shaping our perception of the world and the way we react to it. As such, social phenomena are to a large extent the result of men’s bodily states and physical conditions. Gruther states that, “Sensory experiences play a decisive role in the formation of human actions and emotions” (20). This can be further explained by the fact that mental processes involve stimulation from the body, i.e. body-related perceptions and actions shape the cognitive conceptualization of actions and events. The interpretations the mind offers are accordingly subject to the way the body perceives and receives external phenomena. He argues that this can adequately explain the fact that human and actions reactions towards similar stimulations are varied and not mutual or exclusive (Gruther 21).

Margaret Wilson gives a further argument by stating that, “We evolve from creatures whose neural resources were devoted to perceptual and motoric processing” (03). She

emphasizes the developmental process and stresses that “our early experiences with the physical world such as moving around in the space structure our later understanding and representation of more abstract concepts such as likes and dislikes. This process is referred to as scaffolding (Wilson 05). For instance, a bad relationship is described as ‘distant’ whereas a good one is described as ‘close’. Physical cleanness is also linked in social use to moral cleanness. People with ethical and moral behaviour are described as having ‘clean consciousness’. Wilson explains this by saying that people like to be physically close to those they love and distant from those they do not like.

Embodied approaches are used by social psychologists to examine social behaviour since the 1990’s. Yet, the theory did not have clear and unified assumptions. The development of the embodiment theory as a sub-branch of psycholinguistics gave it a unifying framework. Brian P. Meier laid the foundations of embodiment in his seminal work *Embodiment in Social Psychology*. He states that, “People feel, think and act inside their bodies” (21). This reveals how sensory, motor and perceptual processes influence human thoughts, feelings and behaviours. Meier gives the example of the feeling that a place is physically colder after being socially rejected.

Embodied approaches assume that exposure to a hostile social interaction causes a stimulation to re-enact the sensation. These accounts contend that bodily states are an integral part in the representation of hostility. Impression formation is also linked to physical perception. The physical appearance and gestures are essential to the views and opinions we form about other people and the world as a whole.

Despite the strengths of the embodied approaches to human behaviour and the scientific neurological evidence that support them, embodiment is still subject to criticism. It is

claimed that embodiment is based on some sweeping generalizations. As it grants the body a central role in shaping mind states and actions, it is criticized for neglecting individual differences and their role shaping behaviour. Moreover, the fact that physical abilities may decay over time and do not last all over a person's life span brings doubts to the theory's basic assumption. Disability scholars stress that phenomenon-based approaches are the most suitable to explain disability's effect on human behaviour.

1.6. The History of Disability Representation in Literature.

Depicting the presence of disability in literature is vital for any work attempting to examine the language of disability. The position of disabled characters in literary representation is still insufficient. Because literature has the capacity to influence the imagination of readers, disabled characters can be read as an image of societal attitudes and cultural conceptions of the disabled minority. Consequently, the issue of disability's image in art and literature is worth investigating. This part attempts to trace the presence of disability in literature through centuries. It first provides a brief account Rosemarie Thomson's work about disability representation in American literature. Then, it traces the depiction of madness and mental disorders in literature. Furthermore, the place disability occupies in Arab literature is examined and illustrated.

1-6-1. Rosemarie Thomson's Account of the Representation of Physical Disability in American Literature:

Despite the prevalence of disability as a human condition, it still occupies an invisible place in the study of literature. Disability is present in many literary works, yet as a critical

concept, it is not sufficiently addressed. In her seminal work *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature*, Rosemarie Thomson contends that, “Throughout history, discriminatory practices against the sick and disabled have varied greatly from country to country and from century to century; they have ranged from complete rejection and ostracism to oppression and misrepresentation” (06). The proof is that main characters usually never have physical disabilities. Disabled characters remain in most cases on the margins of fiction, as uncomplicated characters.

As people with disabilities emerge from the accumulation of stereotypes that have governed their being, literary critics such as Thomson, Abir Hamdar, and Susan Wendell agreed that the texts that rely on disability’s symbolic images to achieve their intended impact must be revisited⁵. They call for a new understanding of the metaphoric figures of disability, claiming that this will inevitably result in altered responses, fresh possibilities of meaning. In their critiques, they consider mainly the permutations of consciousness required in the highly socialized institution of reading, whereby the reader with a label of disability is forced to identify with the able-bodied protagonist, endorsing the “equation of able-bodied with the universal” in the way that not long ago the female reader was expected to think like a “universal” man. The literary enterprise, in this way, has been disabling for people with disabilities and for the collective imagination of readers (Hamdar et al. 32).

Exploring the representation of physically impaired people in literature reveals that this category is subject to a form of Otherness. From myths and folk tales to postmodern

⁵ Thomson focuses on the analysis and interpretation of disability in American lit and Wendell deals with the representation of disability in English literature, whereas Hamdar studies the image of the disabled female in modern Arab literature.

“grotesque” images, Thomson states that, “The disabled body remains a freakish spectacle presented by the narrative voice” (09). Corporeal difference becomes a means of Othering the disabled character as it is frequently highlighted in the narrative. Dickens’s Tiny Tim in *A Christmas Carol*, J. M. Barrie’s Captain Hook in *Peter Pan*, D.H. Lawrence’s Clifford Chatterley in *Lady Chatterley’s Lover*, and Tennessee Williams’ long suffering Laura Wingfield in *The Glass Menagerie* are all represented in a frame that distances them from normal readers.

Although such representations refer to actual social relations, Thomson claims that they do not reproduce those relations with mimic fullness. Disabled characters thus, are rendered an illusion to reality far from being true or accurate (Thomson 10). The textual descriptions of disabled characters emphasize their traits, qualities, and behaviours rather than others. This makes the image always incomplete because many of the positive attributes of disabled characters such intellectual strength, ambition, passion for life, determination, perseverance, and enduring physical and psychological pain tend to be neglected.

As such, disability does not function only as a physical difference but as a psychological and moral one as well. This difference signals meanings of Otherness. Putting more focus on what the disabled character lacks rather than what he/she has as an advantage is read as a discriminatory practice. It accordingly affects the imagination of readers and constructs a subjective image of the impaired character, based on an incomplete and often inaccurate literary representation. The role literary representation play is thus to intensify images of

Otherness instead of challenging and changing them. On this basis, Thomson criticizes the American and European cultural heritage that concerns disability.

Thomson says that, “What makes the literary representation of disabled characters almost inaccurate is the fact that when disability is concerned, novelists most of the time rely on cultural assumptions to complete missing details” (11). They construct interpretive pictures that make the world of the disabled seem impenetrable, unknowable and unpredictable. She provides evidence from Herman Melville’s *Moby Dick*; the novel representing the well-known disabled figure in American literature. Despite his Physical strength, courage and determination to destroy the Whale, the physically disabled protagonist is always represented in the image of the sufferer; a man totally obsessed by his impairment. The lost arm in this case turns to a disturbing reality that changes the course of a man’s life preventing him from enjoying a normal, static and stable one. Thomson claims that this depiction is quite inaccurate, and even exaggerated because not all disabled figures develop feeling of hatred and attempt to take revenge (11). Melville’s disabled body is for Thomson an exception that cannot be used to make cultural generalizations.

1-6-2.Representations of Madness in Literature:

Besides physical impairments, extreme mental states occupied a rather larger space in literary imagination. This is due to the fact that mental disorders represent a more serious deviation from the norms of human nature than physical ones. The history of literature is thus full of plays and novels representing mentally ill characters. From Greek tragedies, through

the Jacobean and Renaissance Theater to Victorian novels, cases of extreme psychological states and violent madness have been recurrent in literary creation.

In each literary era, madness was approached as both a result and representation of society's religious, political, social, psychological, and economic tensions. As a result of this vision, Christopher Jones claims that literature can be used as a cultural ground for diagnosing cultural approaches to madness (08). Using images of madness according to Jones enables a better understanding of social relations, power structures, religious convictions and even economic conditions.

Madness narratives tend to deal with different aspects of mental illness. There are three basic approaches to madness in literature. The approach of temporal mystery attempts to answer the question: What has caused madness to happen? The hermeneutic approach looks for the answers to what madness means. The third is the existential approach which focuses on the question: What is madness like?

This latter approach considers the behavioural, psychological and linguistic manifestations of madness. It is the approach adopted in the course of this research, focusing on the strategies of narration and description that convey the experience of mentally disabled characters. Giving weight to the personal, social and cultural causes of madness, this account is an attempt to reveal the extent to which literary representation matches the actual experience of mental disability.

In the 19th century, women writers used madness as a double for the author. Employing madness in a narrative is seen as a device to escape the pressure of patriarchal society. The

portrayal of madness allows the female author to enact her thoughts and desires to escape male domination without being critically judged, as the socially rejected thoughts and desires are expressed by a mad character not a rational one. Madness in literature was thus a way to articulate repressed fears, anger, and quest for freedom.

In cultural theory, madness is subject to different accounts. Michel Foucault's account is one of the approaches that received wide recognition and much critical attention. Foucault sees psychiatry as a tool of social control. In his work *Madness and Civilization*, Foucault argues that, "The existence of madness raises many troubling questions that society tries to avoid through the policy of cure and psychological help" (05). Foucault goes further to state that the history, language, and practice of psychiatry silenced madness in the first place through asylum, prisons, and the use of socio-political power. In Foucault's view, authorities exert power by creating divisions such as sane/mad and normal/ abnormal.

As a subfield of Disability Studies, mad studies deal with the representation of mental disorders and psychological distress rather than physical impairment. Depicting madness and mad characters enables writers to convey certain social, cultural, and political messages. Infusing mad characters into the plot often offers the work an aspect of psychological depth. Accordingly, the discourse of madness in literature takes various dimensions different from the negative connotations with which society associates it. Far from the ideas of unstable or negative identity, mad characters in plays and novels are used by writers as means to different ends.

William Shakespeare is the most famous playwright who made madness a crucial theme in almost all his plays. Madness is the epicenter of *King Lear*. King Lear fights against his

emotions. He internalizes all negative feelings and troubled psychological states. In act II, he says:

“Do you think I’ll weep:
No, I’ll not weep; I have full cause of weeping,
Storm and tempest,
But this heart shall break into a hundred thousand flaws,
Or ere I’ll weep, O fool, I shall go mad!” (Shakespeare 32)

As the storm breaks, so does the king’s mind. Pride, ingratitude, and self-pity have exhausted him. Madness is the psychological consequence of his broken heart and the negative energy he never externalizes. It is the ultimate result of the accumulation of shocks and negative thoughts.

In addition to the character of King Lear in *King Lear*, *Hamlet*’s Ophelia also suffers from a severe mental breakdown resulting from betrayal and resentment. Ophelia is depicted as a pure timid girl who undergoes different stages of transformation throughout the play. Her failure in love is aggravated by oppressed feelings to lead her to a severe psychological tension. Her personal tragedy reaches its peak after the murder of her father; Polonius at her lover’s hand. Ophelia’s fragile psyche cannot bear the shock. The sorrow of her failed love and her father’s loss deeply affect her already weak nature and finally drive her mad.

Though Ophelia’s madness plays the role of a destructive power in the play, it is on the other hand her gateway to liberation from all the chains being sane places at her hands. Being

a mad woman, she can freely express herself and reveal her repressed feelings. In lyrics and songs, through madness, she reveals her real emotional states regardless of social pressure and constraints. Her death represents the culmination of her tragedy and the failure of all attempts of reconciliation with a world full of political tensions, personal dilemma, and psychological suffering.

Through the language of madness, Ophelia attempts to reconstruct her personal female voice and overcome the social roles assigned to her as a frail woman and obedient girl. Madness allows her the space to escape her cruel reality and openly represent her inner struggle. In the final Act, Hamlet also uses madness as a disguise to avenge his father's murder. Hamlet's psyche is represented as troubled and unstable right from the first Act. This is clearly stated when Polonius tells Gertrude; Hamlet's mother, "I will be brief, your noble son is mad" (Shakespeare 17). Yet, critics claim that Hamlet is never mad. His disturbed psychological state is much afflicted by indecision rather than true madness.

Shakespearian drama depicts mad characters, mainly women. Shakespeare comprehends madness as a crucial theme in life and death. He links it to other universal issues such as love, knowledge, power, death, sorrow, deception, and loss. While madness in Shakespearian drama represents the culmination of a fierce psychological struggle against personal, social, and political forces, madness in nineteenth century literature poses a mystery. Victorian novels did not focus on the causes of madness when portraying mentally-ill characters.

Accordingly, this makes it even harder to understand the nature of madness in the Victorian society.

Bertha Mason; whom Charlotte Brontë creates as Edward Rochester's lunatic wife in *Jane Eyre* is one of the most famous mad women in the early nineteenth century literature. She became a sign of mad women and a symbol of feminine oppression as she is a recurrent figure in literary criticism.

Bertha Mason is represented in the narrative as a lunatic, brutal, and inferior woman. She is "tall and large, with thick and dark hair ...with a curious, distinct, formal and tragic mirthless laugh" (Brontë 192). The tragic mirthless laugh is Brontë's way of telling the reader that Mrs Rochester is mad. This reveals that Brontë is influenced by the cultural representations of madness in the Victorian era. It reinforces the assumption that people suffering from mental illness are strange in both behaviour and physical appearance.

Furthermore, Bertha Mason is portrayed as a violent woman with ghostly features and actions. Her night visit to Jane's room contributes to create a mystery over her character. This mystery is strengthened by her attempt to burn the house, which is used as a justification of her imprisonment. The image of the mentally disabled as a threat is reinforced in *Jane Eyre* and given many social and cultural dimensions; one of them is giving a moral justification to the policy of home confinement.

In addition, Bertha is deprived of linguistic expression. She is seen only through the lens of others. Jane; the narrator assumes the authority to draw Bertha's image as she sees her.

Jane's image of the mentally disabled woman is similar to that of society as a whole. The shared stereotypes and often negative representation of madness eliminate any possibility of an accurate portrayal of mental illness or a positive attitude towards it. Rochester further contributes to this stereotypical portrayal by excessively emphasizing his mad wife's "hereditary disease" and "the way she permanently developed the germs of insanity" (Brontë 216).

Linguistic expression is central to the understanding of human motives, conditions, and mental and emotional states. Accordingly, Bertha's lack of ability to narrate her story and tell her condition makes her subordinate and oppressed. Lacking a voice of her own, she is disregarded, humiliated, and misunderstood.

The Victorian cultural images about madness and more particularly about mad females persist in American texts. The tradition of limiting mad women in home confinements or medical institutions prevails in American settings. This implies that the cultural understanding of mental disabilities remains restricted to the notions of being strange and dangerous. Neglecting the origins and causes of madness, society uses nearly similar means of limiting and repressing the mad voice.

An example of this is Charlotte Perkins Gilman's *The Yellow Wallpaper*. Marilena Hohn says that, "This novel can be considered a mirror of how Victorian women experienced mental disability" (222). It portrays the life of a middle class American woman in the late 19th

century. The novel reflects gender roles and the limitations American women suffered from during that era. It is the life story of a young intellectual American woman who is dedicated to writing, and who has been suffering from slight depression. In a male-dominated society, being a creative woman and using one's imagination to freely express ideas and opinions is portrayed as not being socially accepted, especially for a married woman. This latter's role is essentially limited to performing domestic duties.

The protagonist's aspirations for self-realization and the powerful social forces opposing her are the direct reason behind her depression. Her husband's reaction is not different from Mr Rochester's in *Jane Eyre*. Home confinement is the only solution he thought appropriate, despite his being a doctor. As she starts showing traits of mental disorder, she is locked in a rented house for an entire summer. Not being allowed to move or talk to anyone, her state worsens. Thus, contrary to the prevailing medical belief that total restriction from any intellectual or physical work would serve the purpose of her recovery, the protagonist's depression increasingly intensifies and her mental health gets worse.

Ironically, her husband and doctor increasingly isolate her instead of letting her release her excessive emotional energy⁶. The therapeutic rationale for this was preventing her from being over excited by locking her, what is medically called 'the rest cure'. This action however, produces an unintended result. The psychologically unstable protagonist starts looking for

⁶ The protagonist was diagnosed with hysteria. Her excessive emotional responses to people and events were interpreted as an exaggerated reaction that should be minimized through setting her apart from the outside world.

ways to release her excessive emotional energy. She imagines a woman in the room's yellow wallpaper and spends her entire day looking and talking to her. Despite her husband's attempts to make her give way to such fancies, it is not possible for her to restrict those thoughts. Consequently, her mental health continues stepping towards the worse. All attempts to cure her went in vain. By the novel's end, she puts an end to her life.

The story of Gilman's protagonist is similar to that of Bertha Mason in *Jane Eyre*. Both mad women live in societies governed by Victorian norms. Due to the shared conceptions and interpretations of mental illness, both characters go through the same chain of suffering; starting with mental break-down, home confinement, neglect and male oppression, declining psychological states, and self-destruction as a culmination. The only difference between the two mad women is that Gilman's protagonist is not deprived of linguistic expression, unlike Bertha. Yet, even her being a writer does not serve her much to ameliorate her condition. Her severe psychological depression and prison make her husband and doctor the only responsible for explaining her health state to others. This renders her powerless and helpless. She attempts liberation but in Victorian society, this remains an illusion.

1-6-3. Disability Representation in Arab Literature:

The depiction of physical impairment and mental illness in modern Arab literature is not sufficiently present. Arab texts usually tend to neglect the issue of disability and place

disabled characters on the margin of art. Examining texts that address disability in Arab societies brings to light to the aspects of absence, misrepresentation, and marginalization. Abir Hamdar's *The Female Suffering Body: Illness and Disability in Modern Arabic Literature* explores this issue and provides a significant contribution to the field of modern Arabic literary studies.

In her study, Hamdar outlines as an objective the explanation of “how the female character in modern Arabic literature experiences her own disease and how it impacts upon her personal and social sense of identity, and how it is narrated by the text itself” (11). Hamdar focuses mainly on the suffering female body because disabled female figures are more recurrent in Arab literary texts than male figures. According to Hamdar, “suffering is a position that has been imposed upon Arab women by the prevailing discourses” (07) and so her analysis aims to “tell how women are able to resist these symbolic discourses and start narrating their own bodies” (12). Literature thus became a site of reflection on the experiences of women with disabilities though, for Hamdar, it failed to meet the challenge of depicting the long history of the disabled body's suffering.

In the prose fiction works of male writers from 1950 to 2000, disabled characters are always positioned outside the major events of the plot. They are given minimal narrative voice and their disability is never treated as a major issue in the text, but just as an incident.

By doing so, the corporeal reality of the disabled female character is effaced as she becomes just a means to explore larger cultural, religious, and socio-political themes in the narrative. Naguib Mahfouz's depiction of disability can be taken as an example. The character of Amina in *Al-Thulathiyya* or *Cairo Trilogy* (1956-1957) reflects the status of the ill woman in the Egyptian society. Hamdar states that, "Amina's story is one of an absence, of a character outside the text" (12).

This state of a voiceless absentee that Arab literary works offer to disabled characters persists and prevails in the works of Nawaf Kabbara, Lina Abu Habibi, and Jahda Abu Khalil. Hamdar contends that though these authors emphasize the civil and legal rights of disabled women, they tend to eclipse their personal and individual dimension because they are not given a chance to narrate their own bodies and their tragic experiences with disability (15). She claims that Mahfouz makes the character of Amina invisible by situating her entirely in the domestic sphere. By doing so, she is denied a chance to play any role in the narrative apart from the female's traditional role. This image of the disabled woman is positioned to reveal the fact that disability in Arab societies has to be endured along with patriarchy. This implies that the patriarchal notions of "what a woman is" and "how she should live" impact the notion of disability, and even shape the lives of disabled women.

In parallel, other male authors such as Ghassan Kanafani in *Rijal-fi- Al-Shams* (Men in the Sun) and Ziyad Qasim in *Abnaa-Al-Qal'a* (Sons of the Castle) have portrayed physically

impaired characters as symbols of the nation. Accordingly, the wounded body becomes a metaphor for the wounded nation and its personal dimension is neglected. For instance, even the incident in which disability occurs or the consequent suffering and psychological pain tend to occupy an almost invisible place in the work. As such, disability in these texts is just a means to an end. The disabled character stands in the text not as an impaired human being but merely as a sign for the nation's unstable state and its unclear fate. Stressing the political dimension of physical disability at the expense of the personal individual one led to a kind of "body politics". Both novels fail to address the sick body in depth.

Ahlem Mosteghanemi is the first Algerian novelist to portray a disabled character. She is also credited for challenging the tradition of putting physically disabled characters on the margin of literature. Mosteghanemi puts her physically disabled character in the center of the work. Khalid Ben Toubal; the protagonist of *Memory in the Flesh* brings the issues of disability to academic debate, especially after the success the novel made.

Right after its publication in 1985, *Memory in the Flesh* received serious critical attention both in Arab and western literary circles. Yet, the focus was mainly on Mosteghanemi's representation of post-independence Algeria and the challenges of building a new nation. The representation of disability is placed within this historical dimension of the work.

Accordingly, the character of Khalid Ben Toubal is not examined from the perspective of disability; importance is given to his being an ex-freedom fighter in the Algerian war of independence.

Khalid is not a man who arouses pity. Therefore, the issue of his physical difference is neglected and sometimes it even goes unnoticed. The heroic features attributed to the character of Khalid and Mosteghanemi's vivid description of his courage, deep love for the country and readiness to die for the Algerian cause, along with his artistic talent play a role in driving critical attention away from his physical disability. Thus, Khalid the soldier and the artist marginalizes Khalid the disabled.

The aim in this research is to examine the implications of Khalid's disability on his use of language. In *Memory in the Flesh*, he experiences a multi-dimensional disability. In addition to the physical paralysis, Khalid feels paralyzed towards the growing pace of political events in the country. This is intensified by a paralysis at the individual emotional scale caused by the death of his brother Hassan and the forced marriage of his beloved Hayat.

1.7. Conclusion:

Considering the terminological, linguistic, psychological, historical and literary dimensions of disability, it is noticeable that disability did not receive enough critical and

academic attention. The on-going terminological debates, the neglected psychological aspects of being disabled in a society that adheres to the principle of ‘normalcy’, the lack of scholarly attention to the language of disability and the absence of literary works addressing disability through putting it at the center rather than the margin of literary representation are the conclusions that can be drawn about disability’s theoretical presence in the academic field. The following chapters are thus an attempt to make a contribution in bridging the gap in disability representation.

Chapter Two

Illness is the night-side of life.

Susan Santag

Illness as Metaphor.

2-1. Introduction:

Human distressed psychic conditions have serious effects on language use. Linguistic production is both an outcome and a reflection of mental conditions. This chapter aims to provide a psycholinguistic perspective on *The Bell Jar*. It probes in Esther Greenwood's mental distress proving that she suffers from hysteria, which later develops to schizophrenia and culminates in a depression. This chapter therefore attempts to trace the impact of Esther's hysteria, schizophrenia and mental depression on her linguistic behaviour. Using a psycholinguistic approach, it examines the way language in *The Bell Jar* reflects the

character's hysteric, schizophrenic and depressive symptoms. The aim of this correlation is to demonstrate that mental disability has a transformative impact on linguistic behaviour.

2-2. *The Bell Jar* as a Disability Narrative:

The Bell Jar has been read as a young woman's struggle against oppressive social and economic forces. In the 1950's, critics such as Elaine Showalter and Linda Wagner read the novel as a "testimony of the feminist problems" (qtd. in Parker 59). They focussed mainly on the protagonist's attempts to overcome the imposed social, cultural, and sexual norms and construct her identity as a free, liberated woman. Wager stresses that, "Plath wrote *The Bell Jar* to question the family power that has been so coercive a force in Esther's life" (Wagner 34). As such, Esther Greenwood's mental illness is seen as a response to patriarchy and its oppressive norms.

However, Esther's experience of mental illness can also be read from a different perspective. The rise of Disability Studies offered new opportunities of understanding the novel that give particular importance to Esther's mental and psychological condition. Esther is viewed as a disabled character. Thus, using a Disability Studies' lens, her journey into madness can be understood and analysed.

The concerns and life-events of Esther in *The Bell Jar* are quite similar to those of people with disabilities. Rosemarie Garland Thomson stresses that there are numerous overlaps

between the feminist struggle and that of disabled people. In *Integrating Disability*, She says that, “Western thought has long conflated femaleness and disability, understanding both as defective departures from a valued standard” (Thomson 260). In Thomson’s view, females are already considered disabled because they lack what was seen as superior male qualities such as physical strength. This conflation of femaleness and disability further intensified the problems disabled females face.

Susan Wendell in her book *The Rejected Body* notes that both the female body and the disabled body are socially rejected (54). This rejection stems from the negative responses society tends to have when interacting with both categories. Accordingly, it is not a rejection of the biological or biomedical reality of being female or disabled but mainly of the latter’s social functioning and frequent exposure to harm, damage, and violence. Wendell also mentions the reasons that make the ‘rejected body’ further rejected and unwanted like the low levels of economic productivity. In a capitalist society, the ability to hold a gainful job is also a sign of normality. She concludes that one of the major concerns both groups share is that the body can and should be controlled.

The disabled body and the female body are viewed with suspicion. Nancy Nairs explains this by stating that, “Both bodies are treated as subordinate and inferior in moral status

because they are associated with things that shame” (53). This idea of shame is a cultural assumption associated with the concept of femininity, leading women to feel that their bodies are “dark, secret, and should be hidden” (Nairs 57). Similarly, the disabled body faces such assumptions deeming it to inferiority and shame and treating it as a less acceptable body.

This similarity led to a growing interaction between feminist studies and disability studies. In an attempt to voice their common concerns and find ways of expressing discontent with social oppression, women writers frequently represented disabled female protagonists. A woman suffering from a disability became the embodiment of the fears and concerns expressed by both feminist activists and disability studies scholars. Plath’s Esther Greenwood is one of these disabled female figures.

The critical readings of *The Bell Jar* as a disability narrative are based on Esther’s emotinal and psychological difference and its consequences on her mental health. Though she does not suffer from a physical limitation, Esther is regarded as an ‘Other’ in her society. This ‘Otherness’ is caused by her rejection of societal values and rebellion against what she calls the unjust patriarchal norms. Arthur W. Frank says that this process of Othering affected Esther’s self-perception (Frank 51). She begins to regard herself as a deviant unwanted girl.

This feeling is aggravated by time and led to the construction of a stigmatized identity. Esther's mental and emotional difference further intensifies societal anxieties about her normality.

Esther then can be regarded as a disabled character. The social responses to her disability are different. While physically disabled people are most often regarded with pity, people suffering from mental distress are more likely to elicit attitudes of rejection and hostility. Rosemarie Thomson says that, "Physical disability is clearly anomalous" (21). As such, the disabled body is a physiologically deviant body which requires social care. However, society casts mental illness as a rejected identity or even a negative and dangerous one because it fails to meet social norms and expectations. For this reason, Thomson argues that attitudes of hostility most of the time overcome those of pity and sympathy.

Because no exact medical diagnosis is given in *The Bell Jar*, Esther Greenwood's mental disability was a subject of heated debate in literary circles. The term "madness" is used to describe Esther's mental condition. Yet, in psychiatric terms, it is a vague term which bears a vogue description of the different psychic states leading to mental breakdown. Psychoanalytic

readings of *The Bell Jar* assume that Esther suffered from Hysteria, schizophrenia, and severe mental depression.

Maple claims that an absolute identification of Esther's mental disability is hard to make (08). The individual experiences of the mentally distressed young girl show that her condition does not have a physiological or biological origin. Accordingly, she asserts that the societal factor plays a role in her disability (Maple 08). Esther's inability to accept and adjust to her society's norms and ideals, especially those limiting women's role to the domestic sphere, and the very little support she receives from her family and professional surroundings creates a strong pressure on her. While striving to create a balance and trying to find her way amid all that confusion, she demonstrates a deviation in thought and behaviour that does not meet societal expectations.

Contrary to what Esther Greenwood expects, society fails to provide emotional and medical support. In *Revels in Madness*, T. Beresford points out that, "The oppression faced by the survivors of psychiatric systems is similar to that faced by physically impaired people" (170). Therefore, the social model of disability can be applied to Esther's case. It opens new

ways not only to understanding her mental condition and consequent suffering but also to understanding the conditions of mentally distressed people as a whole.

Tom Shakespeare, the major theorist of the social model offers an explanation of the relationship between mental disability and what he calls a “disabling society” (12). He argues that both kinds of disability result in an emotional difference. Because of their apparent physical condition, physically disabled people are subject to a treatment that ranges from pity to rejection and hostility. Psychologically distressed people however, feel the change in social attitudes towards them as long as their mental illness aggravates. This results in a feeling of emotional distance and social alienation that further disables their already disabled minds.

Esther’s journey to madness confirms Shakespeare’s explanation. Her disability is first noticed by her professional environment. This may be due to her cold distant relationship with her mother. Her sadness with no obvious reason, hysteric cries, changing attitudes towards people and things, and slowing pace of achievement makes her look like a “strange girl” (Plath 04). Being treated like a stranger intensifies Esther’s feelings of difference and alienation. She says:

Only I was not steering anything, not even myself. I just pumped from my hotel to work and to parties, and from parties to my hotel and back to work like a

numb trolleybus. I guess I should have been excited the way most of the other girls were, but I couldn't get myself to react. I felt very still and very empty.
(Plath 05)

It's not a disability that can be seen but felt. It is an emotional state that can be understood neither by the family and friends, nor by the distressed girl herself. Feeling "still" and "empty" is not like being "blind" or "limb", not finding "taste" in going to work or parties is not like being "unable" to go to work because of wheelchair inaccessibility. Yet, the emotional outcome is exactly the same.

Whether Esther's feeling of emptiness was an unconscious response to social pressure or an inevitable outcome of a genetic factor remains debatable. However, what is certain is that Esther suffers from a serious incompatibility with society. This incompatibility affects all aspects of her psychological condition.

Esther also shares many of the obstacles disabled people face. She experiences stigmatization. After the symptoms of mental breakdown become apparent, Esther begins to feel ashamed of her actions and linguistic behaviour. Her involuntary violent ravings and lack of control over her speech affected her self-esteem. The consequent inability to make people

understand her motives and psychological state causes social, emotional and even linguistic alienation. Esther describes this linguistic disability by saying: “I no longer feel able to read or write” (Plath 04). Despite of being an “A” student, grades are not of any use when her psychic integrity starts falling apart.

Disability scholars such as Thomson and Wendell stress that all disabled people experience a form of dissociation from the self at a certain period of their lives with the physical impairment or psychological distress (Thomson 09; Wendell 31). Esther Greenwood is not an exception. This is clear in the fact that she takes up many identities. In a one of the parties, she introduces herself as “Elly Higginbottom” (Plath 08). This is not the last incident in the novel when she hides her identity. Esther repeatedly refuses to reveal her identity at work, hospital, or even with the new people she meets in daily life. Maple argues that this is a sign of a wide psychological gap inside the mentally distressed girl.

Attempts of dissociation from the self are read in disability studies as an outcome of anxieties and deep inner dissatisfaction. Psychiatricians even say that it usually means that the person is suffering from diffidence or schizophrenia (Lang 70). In Esther’s case, it is apparent that she is looking for a different psychological reality.

Many other patterns in Esther’s experience can be viewed using a disability studies’ lens. The cultural responses she faces because of her difference and refusal to accept social

norms and traditions are among them. Society reduces physical, mental or emotional difference into a negative identity that must be either adjusted or rejected. Interest, curiosity, fear and societal prejudice are other disabling features in society. They play a vital role in the construction of the stigmatized identity. Stigma further worsens Esther's case and confirms the views held by the advocates of the social model of disability.

For instance, Esther Greenwood has a hostile attitude towards men. She rejects the social role assigned to women as being only dutiful mothers and obedient wives. Many times she argues with Jay Cee saying, "I hated ideas of serving men anyway" (Plath 18). She doubts the idea of happiness after marriage and stresses that even if she gets married, she will not like to have many children (Plath 18). Thus, Esther fails to meet societal expectations. This elicits multiple responses from society. While her mother considers it just a temporary misunderstanding of life from the part of a little inexperienced girl, Buddy Willard and her friends respond with negative comments that aggravate Esther's psychological problem.

As the symptoms of mental disability become clear, Esther attempts suicide. Following two unsuccessful attempts, her doctors admit her to confinement. Esther considers this latter

as a punishment more than a treatment. She once again feels deceived. Yet, the deception here comes from the doctors and health professionals she trusts. In a bitter voice she says, “The more hopeless you were, the further they hid you” (Plath 75).

Besides the symptoms of disability identified in the novel, disability scholars also focused on the issue of body-relatedness in *The Bell Jar*. In *The Wounded Storyteller: Body, Illness and Ethics*, Arthur W. Frank demonstrates that illness narratives share many common characteristics (12). He argues that most of them address the relationship between the body and the self in disabled characters. Controlling the body is an obvious problem for ill and disabled people. In *The Bell Jar*, Esther is portrayed as a girl who has little control over her body. For instance, when Marco attempts to rape her, she shows no resistance. Though she is aware of his intentions, she cannot get her body to react. She describes the event by saying, “I was blow and bend like a tree in the wind... without any will of my own” (Plath 56).

Appearing in this image of a very weak, defenceless and submissive character shows that Esther’s mental disability weakens her sense of the self. The problem of mental disability is in this case intertwined with her identity as a woman. She encounters both a sexist bias and an

ableist bias. Thus, she has to fight against the conventions and expectations of her society not only to build her own sexuality but to build her own identity on the first place. Esther strives to make both ends meet.

Esther's reaction when she returns back home after the attempted rape is quite telling in this sense. She throws her clothes from the balcony, watching them float away beyond her control, "Piece by piece, I fed my wardrobe to the night wind, and flutteringly, like a loved one's ashes, the grey scraps were ferried off, to settle here, there, exactly where I would never know" (Plath 57). As Linda Wagner suggests, throwing the wardrobe demonstrates rejection to the traditional image of the pretty girl who is always an easy object for man's acquisition (61). The incident further intensifies Esther's inner troubles. She becomes aware that being a mentally disabled female in an ableist, male-dominated society means a lot of oppression, victimization and suffering.

Esther's crisis of control extends from the physical body to an inability to control her thoughts as well. Esther loses control over her mind on multiple ways. In the first stage of her mental problems, she frequently states that she cannot read or write. As she tries to read, "her

eyes sank through an alphabet soup of letters” and when she makes an attempt to write, her letters seemed to her “big and jerky like those of a child” (Plath 69). Even when she speaks, her voice seems to her as “a zombie-like voice” (Plath 69). It is an extreme case of dissociation between her mind and her body.

This inability to read or write later aggravates to an inability to take decisions or solve problems. This is illustrated in the image of the “fig tree”⁷ Esther draws. The “fig tree” and Esther’s confusion about which fig should be picked, since all the figs seem ripe is a metaphor to her inability to choose a path for her life. Esther seems to want social, professional and emotional stability. Yet, she lacks the mental force to make these decisive life-choices. Frank states that one of the outcomes of disability is being subject to forces that cannot be controlled (120). This lack of control widens the gap between the body and the self. It establishes a form of separation between what the mentally distressed person wants and what s/he is actually able to do.

⁷ The fig tree is a story of a Jewish man and a nun. It is about the incompatibility of origins and the impossibility of a happy ending. The story is a metaphor to Esther’s state as it foretells her future.

thinking about suicide. She makes the first attempt on her life using sleeping pills. As this fails, she quickly rules out slitting her wrists. Esther once again demonstrates inability to fulfil her plan, “the skin of my wrist looked so white and defenceless that I couldn’t do it. It was as if what I wanted to kill was not in that skin...but deeper, more secret, and a whole lot harder to get at” (Plath 78). Here Esther shows an extreme case of dissociation from her body. She describes it as if it does not belong to her.

Besides body-relatedness, disability can also exhibit a form of other-relatedness. Disability scholars described the interconnectedness between the self-image of the disabled person and the way s/he is perceived in society. As with most disability narratives, Esther’s self-perception when her depression worsens is largely affected by the perceptions and reactions of others. She is deeply affected when strangers in the hospital regard her with fear or interest. For instance, when she is moved to a new hospital after her successive suicide attempts, she feels so relaxed and satisfied to find a friendly roommate. This satisfaction does not last for long. Upon learning that Esther tried to kill herself, the roommate’s friendly attitude changes, “She whispers something that (Esther) couldn’t hear, and then somebody stepped and pulled the bed curtain between (them) like a white wall” (Plath 94). It becomes clear to Esther that the woman exhibits an unnatural fear of her.

According to Thomson, Esther in *The Bell Jar*, like all disabled people serves as a “spectacle” in American culture⁸. In *Extra-Ordinary Bodies*, Thomson discusses the representation of the disabled body by comparing it to the freak show phenomenon. She says that, “The disabled body is represented as spectacle-sympathetic, grotesque, wondrous, pathological, and an object of stare” (136). In many incidents in the novel, Esther is an object of stare. For example, she is disturbed by the way a hospital employee looks at her “with big,

⁸ Rosemarie Thomson in her book *Extra-Ordinary Bodies* limits her study to the representation of disability in American culture. Disability scholars however, claim that Thomson’s findings can be generalized to include different cultures all over the world.

rolling eyes” (Plath 95). When relatives and friends come to visit her, she receives the same stare “as if (she) were some exciting new zoo animal” (Plath 95).

The stare is the most common response to disabled people, Thomson states. The subject of the stare accordingly feels estranged, distinguished and even rejected. A form of ‘Otherness’ develops within the disabled person. Esther feels deeply hurt with those cultural responses to her disability. Similar to physical disability, mental distress can also elicit curiosity and prejudice. Yet, unlike physically impaired people, the mentally troubled are feared and avoided. The psychological impact of this fear and rejection pushes Esther to compare herself to “a wild dangerous animal”.

Besides these attitudes, Thomson says that disabled people are even held responsible for their condition. They believe that it is some fault from the part of the victim that leads him/her to mental troubles. Esther’s mother holds this prejudicial view. The mother believes that her daughter could get better just if she had the will to co-operate with the doctors. She ignores Esther’s lack of control over both her body and mind. Mrs Greenwood frequently asks her daughter to do voluntary work and “stop thinking too much” (Plath 90). She is not aware of Esther’s many attempts to occupy herself with reading or writing, attempts which go all in vain. Blaming the disabled person for his/her disability goes with the popular assumption that “if something bad happens to someone, then there must be some good reason”⁹. Lacking her mother’s understanding and support speeds Esther’s mental breakdown.

Using a disability studies lens offers a new perspective on *The Bell Jar*. It enriches the understandings and interpretations of the novel. Esther Greenwood’s experience correlates in

⁹ This assumption is further explained in Jeni Maple’s *Disability Narratives*. p, 21.

many ways to the experiences of people with disabilities. For this reason, disability theory is a useful tool to demonstrate this interconnection and overlaps between Esther's struggle and that of physically impaired or mentally distressed people. Despite of belonging to different cultures and having different conditions, they always share the same hopes and expectations.

2-3. THE LINGUISTIC REFLECTIONS OF HYSTERIA IN *THE BELL JAR*:

This part attempts to demonstrate the impact of Esther Greenwood's hysteria on her linguistic behaviour. Using a psycholinguistic approach, it examines the way language in *The Bell Jar* reflects the character's hysteric symptoms. It first situates hysteria within a historical context and gives a psycholinguistic account of hysteric symptoms. Then, it correlates Esther's use of language and her mental troubles. The aim of this correlation is to demonstrate that mental disability (hysteria particularly) has a transformative impact on linguistic behaviour.

2-3-1. Historical and Psycholinguistic Perspectives on Hysteria:

Hysteria is one of the oldest psychological disorders. The diagnosis of hysteria dates back to the ancient Greeks. The word hysteria is derived from the Greek word for uterus¹⁰. This implies that hysteria in ancient times was considered as a female condition (Krohn 17). In the late 17th century, Thomas Sydenham proposed that men too could display hysteria. Yet, the image of it as typically affecting women persisted till the late 19th century.

Modern psychology defines hysteria as "an excessive emotional response caused by the increasing stress of modern life" (qtd. in Krohn 18). It is a disorder of sense and motion

¹⁰ Uterus is a Greek word meaning "womb".

caused by a general defect in the nervous system. Hysteria is an expression of various types of emotional distress and internal conflict. George Boeree defines it simply as, “A poor ability to adapt to one’s environment, an inability to develop a richer, more complex, and more satisfying personality” (10). According to Boeree, psychic mechanisms interfere to help the distressed person cope with such disturbances but these coping mechanisms only worsen the situation causing more distress. As such, hysteria has also been defined as “symbolic behaviour in defence against excessive psychobiological pain which is self-perpetuating because symbolic satisfactions cannot fulfil real needs” (Karen 20).

Theories about the causes of hysteria have evolved from anatomy, theology and physiology. Anatomists argue that the origins of hysteria can be traced back to the “wandering womb”, a name used to refer to the repressed female sexual desire (Woos 22). In theology, the causes of hysteria have been attributed to “witchcraft” and the intervention of metaphysical powers to affect human behaviour. Physiologists however provide an explanation based on biological and physical factors. They argue that hysteria originates from a weak physical constitution (Woods 22). This divergence of opinions strengthens psychologists’ claim that hysteria is marked by a quality of inexplicability.

Despite of this inexplicability, the analysis of symptoms helps rendering hysteria more comprehensible. The major hysterical symptoms are: wide emotional and sometimes violent ravings, irritability, mental depression and physical weariness, morbid fears, forgetfulness, palpitation of the heart, headaches, mental confusion, and constant worry. Yet, the most

common symptom is insomnia (Woods 23). These behaviour traits gave the basis upon which the diagnosis of hysteria was made.

Hysteria has often been viewed in the light of the cultural influences of the age. The late 19th century was characterized by the prevailing notions of idealized femininity. The traits of an ideal female held by middle class women such as: domesticity, restricted sexuality, and respectful behaviour. These societal expectations were viewed as restrictions limiting female freedom and chances in life. Feminist activists sought radical change and women writers, especially in the USA supported these aspirations in their literary works. Jung said, "I have frequently seen people become neurotic when they content themselves with inadequate or wrong answers to the questions of life"¹¹ (qtd. in Woods 25). Hysteria therefore stems from wanting to know many of the fundamental truths of life but being unable to attain satisfactory answers. This constant questioning and lack of understanding creates permanent mental instability. The chaotic and confused state of mind drives people towards being hysteric.

Freud's revolutionary formulations about the role of repression in the creation of hysteria opened the domain of sexuality for understanding psychic life and its transformations. In *The Female Malady*, Showalter explains that the terms hysteric and feminine were almost interchangeable (147). Hysteria has often been called a 'female malady' because women are by nature emotionally sensitive. A woman's emotional structure is characterised by being easily affected by hardship and shocking events. Furthermore, women were traditionally compelled to repress their emotional and sexual needs to meet social, cultural, and religious

¹¹ This explanation is based on Freud's theory of the sexual origins of mental disorders.

conventions (Showalter 148). Freud claims that the repressive impact of the super ego creates constant pressure within the ego, leading ultimately to the appearance of hysteric traits (qtd. in Showalter 149).

In *The Newly Born Woman*, Hélène Cixous argues that hysteria is an effective form of resistance and rebellion that serves as a deconstruction of patriarchal ideology. She states that:

Hysteria is necessarily an element that disturbs arrangements; wherever it is, it shakes up all those who want to install themselves, who want to install something that is going to work, to repeat it. It is very difficult to block out this type of person who doesn't leave you in peace, who wages permanent war against you. (Cixous 47)

For Cixous, hysteric behaviour means a rebellious spirit. It is a manifestation of lack of power, rejection of societal pressure, and an expression of a desire to create a change. This objection of cultural norms and dislike of female powerlessness develops to a psychological suffering. It culminates in a self-destructive behaviour characterized by hysteric symptoms. This is what feminists call the hysteric protest.

Psycholinguists however approached hysteria differently. They studied cases of hysteria by focusing on its speech-related symptoms. James Wilce stresses that hysteria inevitably involves language (415). According to Wilce, though hysteria is not a linguistic disturbance only, yet it leads to some transformations in both language production and comprehension.

Deviant speech is a serious indication of mental troubles. In cases of hysteria, it plays a vital role in defining the type of distress. It can even be considered a hysteric symptom.

It is a medical fact that hysteria is a personality disorder. It is a disorder of thought not of speech. Yet, since language is the tool through which thoughts are expressed, it is necessarily affected by mental states, especially deviant or extreme ones. Wilce stresses that, “Since speech expresses private thoughts, it certainly precludes an inter-actionist perspective on the joint construction of understanding and even its breakdowns” (415). Thinking occurs within the realm of language and language is the major medium of expressing thoughts. The dynamic relationship between thoughts and speech implies that the “mental” and the “linguistic” are inseparable.

Language is also a tool of sociality. Linguists define it as an exclusively human attribute and a feature that distinguishes man from all other creatures. Wilce argues that, “The ability to speak coherently enough and to respond appropriately using language and help creating recognizable social contexts using verbal signs can define our sense of humanness” (417). The concept of humanness is therefore built upon the capacity to use language appropriately, i.e. to be competent at both the receptive and productive skills. The social function of language accordingly depends on the capacity for correct and effective linguistic interaction.

As such, deviation from the norms of linguistic interaction can cause the language user to be judged as insane or even less than completely human. When the power of linguistic interaction is lost, the whole state of being human is shaken¹². Wilce stresses that this is not to claim that the capacity for language is reducible to the grammatical delivery of information only because language must serve diverse social and semiotic needs (415). Language derives its importance mainly from being a means of communication in society. Therefore, the way language should be used is largely defined by society.

12 Linguists here exclude people born deaf, speechless or with speech disorders.

Wilce stresses that effective linguistic social interaction requires a 'Theory of the Mind' (ToM). This latter refers to the ability to make continual inferences about others' internal disposition such as feelings, emotions and hidden intentions. ToM involves intentionality. If the words used by a speaker do not involve any intention to signify, this deviance can indicate the existence of mental troubles. Linguists agreed that the absence of conscious planning of speech severely implies a socially and linguistically distressed mind.

Sylvia Plath's *The Bell Jar* is one of the most renowned works that represent the depressive influence society had on young females. Esther Greenwood shows many hysterical symptoms originating mainly from her rejection of cultural traditions and social and sexual conventions. The most apparent traits showing that she suffers from hysteria are long hysterical cries and insomnia.

2-3-2. Hysterical Cries:

Emotional liability is among the most noticeable personality traits of hysterics. Hysteria is a disease that upsets its victims. The psychological fragility of hysteria sufferers stems from the fact that all its symptoms cause stress such as fears, insomnia, headaches and forgetfulness. Being emotionally upset is translated into language. *The Bell Jar* presents an interesting example of the way the hysterical mind functions. An analysis of passages from the novel reveals that the use of language, particularly the choice of words is a reflection of Esther's hysterical condition.

Stressful circumstances are the times during which hysteria manifests itself. In *The Bell Jar*, professional pressure is an immediate factor leading to Esther's hysterical ravings. When in

New York, after she wins a school prize and joins a fashion magazine, Esther is supposed to be enjoying a very happy life. This is the image society drew for young successful girls. Despite of her success, Esther cannot get herself to react or enjoy. She says, "I felt very still and very empty" (Plath 03). This feeling of dissatisfaction is an indication that she does not have a stable psychological condition. Though she is not yet medically diagnosed with hysteria, the language she uses clearly reflects weakness and fears.

Esther's psychological instability strongly appears in her daily interaction with the magazine workers. While she is taking pictures with the girls for the magazine's cover, she says, "I didn't want my picture taken because I was about to cry. I didn't know why I was going to cry but I knew that if anyone spoke to me or looked at me closely, the tears would fly out of my eyes, and the sobs would fly out of my throat, and I would cry for a week" (Plath 50). Crying with no obvious reason clearly demonstrates a very weak psyche. In psychic terms, it was a case of hysteria. Esther is emotionally fragile to the extent of not being able to perform her duties in the magazine or do any other work appropriately. She was not even able to respond to the photographer's and the editor's questions.

When the photographer says to her "Hey, you look like you are going to cry" (Plath 50), Esther bursts in a hysteric cry. As she is not able to restrict her tears and sobs, she says, "I buried my head in the pink velvet facade to Jay Cee's seat, and with immense relief, the salt tears and miserable noises that had been prowling around me all morning burst out into the room...when I lifted my head, I felt limp and betrayed like the skin shed by a terrible animal (Plath 50-51).

The passage above tells in details Esther's immense psychological suffering. The pressure put on her to accelerate her achievement pace and work for a better future has devastating

psychic consequences. Linguistically speaking, the excessive use of words linked to bad emotional states such as cry, tears and sobs reflects that the character's mind is already overwhelmed by gloomy thoughts. It shows the way hysteria upsets its victims. This emotional distress is a sign that Esther is on the verge of mental disability.

Plath creates an authentic scene in which the experience of being hysteric is realistically represented. The hysteric outburst of Esther is described in a language that increases the reader's sympathy with her experience. This aspect of being true and real is given not only by the fact that Plath herself lived the experience but mainly by the power of linguistic expression she possesses. The choice of words makes the passage full of agony and the metaphor of the "skin shed by a terrible animal" could sufficiently express the feelings of abandonment and betrayal Esther Greenwood endures.

The passages describing hysteric states are characterized by the use of short sentences. This further strengthens the aspect of authenticity. Long sentences usually reflect deep, coherent and rational thoughts. Esther's troubled mental condition does not enable such depth, coherence and rationality. That is why her sentences come out short, disorganized, with many pauses, and sometimes even not fitting in the context. For instance, in a conversation with Buddy, Esther says, "And you...well, you are right... I am neurotic..." (Plath 49). Plath's use of language permits an insightful understanding of Esther's mind, and her experience as a whole.

Language in *The Bell Jar* reflects emotional vulnerability. Esther is not able to maintain control over language as her psychological condition aggravates. Because language is the

medium of conveying the experience, it becomes the site in which hysteric symptoms appear. The use of short incomplete sentences, the choice of gloomy sad words, and the repetition of the first person pronoun all result from psychological factors. Language gives insight to the hysteric mind. It reflects the character's weak emotional structure and facilitates access to the hysteric mind.

2-3-3. The Linguistic reflections of Insomnia:

The protagonist's altered behaviour and constant weeping were the earliest symptoms of the disease. As this latter develops, Esther's state aggravates. Consequently, other symptoms become apparent, and insomnia is one of them. Insomnia is a condition that causes irritability. It leads to a loss of inner stability and constant pathological fatigue. In addition, it results in a confused state of mind and has an impact on language use.

Esther suffers from insomnia after she returns back home from New York. She is not able to sleep for nights. Consequently, she becomes irritable and violent. Despite her mother's attempts to make her feel better by turning her attention to other activities such as learning shorthand, Esther's sleeplessness persisted and she turns to the family's doctor.

You say you want more sleeping pills?

Yes

But the ones I gave last week were very strong!

They don't work anymore.

There was a little pause, and then Teresa said: What seems to be the matter then?

I can't sleep, I can't read... , I tried to speak in a cool calm way, but the zombie rose up in my throat and choked me up, I turned my hands palms up. (Plath 63)

The passage above illustrates Esther's psychological suffering. It authentically represents Esther's emotional fatigue. Esther's language illustrates her troubled thoughts. She often speaks in the negative form: "They don't work", "I can't sleep", "I can't read", which reflects a state of disability and lack of control.

The unintentionality of speech is another hysteric trait that can be identified in Esther's use of language. The loss of control of her behaviour extends to language. Esther says that she does not manage to speak in a cool calm way. Modelling an intention to do something in relation to the interlocutor is a basic feature of normal speech (Wilce 418). This feature is lacking in Esther's hysteric speech. Instead, her linguistic output is characterized by lack of control, deconcentration, and unintended expressions.

Furthermore, insomnia leads Esther to doubt the intentions of others. Hysterics are always predisposed to fears and doubt. When the sleeping pills don't work, Esther starts doubting their efficiency and even her doctor's intentions. As a consequence, she has the same raving and violent reaction with Dr Gordon as she says, "He seemed so slow to understand how I

hadn't slept for fourteen nights" (Plath 68). It is a clear sign that sleeplessness makes Esther emotionally fragile. All what she wants is "something to make (her) sleepy and peaceful" (Plath 70).

Describing the psychological and linguistic impact of insomnia, Plath sets an authentic scene in which the reader can feel the experience of mental distress and sympathize with the distressed character. She sets a dialogue between the patient and her doctor that sounds so real. Besides, Plath gives voice to the suffering person herself and does not give an outsider's account. The experience of insomnia, narrated from the first person perspective gave both psychological depth and linguistic reliability to the novel.

2-3-4. Metaphors of Descent and Captivity and Hysteric Decline:

Esther's psychological decline is linguistically signified using metaphors of descent and captivity. Bodily metaphors in *The Bell Jar* are a symptomatic acting out of the dark thoughts Esther's hysteric mind cannot verbally articulate. Through metaphors, the body speaks on behalf of the distressed mind. It embodies the inner turmoil and gives it concrete manifestations. Carroll states that, "In hysteria, the body speaks using the mode of gestural faculty to express the impossible or forbidden speech" (33). During the period when Esther Greenwood suffers from hysteria, the coded language of her body substitutes speech.

Metaphors are an effective way to communicate the experience of an extreme mental condition such as hysteria. They provide the primary linguistic resource through which the abstract mental distress can be conveyed and analysed. The language of people narrating

hysteric states facilitates a psycholinguistic understanding as it gives insight to the sufferer's inner thoughts. *The Bell Jar* contains a variation of metaphors of descent implying Esther's mental and emotional decline.

McMullen states that, "Metaphors are important means of emotional expression" (23). Among all the transformational discursive styles caused by hysteria, he argues that metaphors are the most frequently used methods of telling the hysteric experience (McMullen 23). From a linguistic perspective, the metaphors of descent and captivity used by Plath in *The Bell Jar* give the conceptual framework within which her protagonist's hysteria can be understood and critically analysed.

The Bell Jar contains a number of metaphors relating to containment and constraint. This reflects a type of mental illness in which the self is imprisoned. The sad feelings resulting from insomnia, fears, irritability, headaches and alienation from society as well as from language create a strong psychological need for an escape. It is this idea of escape that installs in the distressed mind the feeling of being confined. Metaphors of captivity are the linguistic gateway through which these 'trapped' feelings are conveyed.

In *The Bell Jar*, the title itself is a metaphor of captivity. It illustrates Esther's state of mind since the appearance of her first hysteric symptoms. She first communicates the idea of the existence of a bell jar that captivates her and separates her from the world as she says:

I knew I should be grateful to Mrs. Guinea, only I couldn't feel a thing. If Mrs. Guinea had given me a ticket to Europe, or around-the-world cruise, it wouldn't

have made me scrap of difference, because wherever I sat, on the deck of a ship, or at a street café in Paris or Bangkok, I would be sitting under the same glass bell jar, stewing in my own sour air. (Plath 98)

The prison that Esther imagines follows her everywhere. This conveys the intensity of Esther's emotions. She is put in the image of a prisoner who wishes to interact with the world but finds that practically impossible. Even when she tries to get out of home, she feels unable to enjoy, "I sank back in the gray, plush seat and closed my eyes. The air of the bell jar waded around me and I couldn't stir... I had my own room again" (Plath 98). Over-repeating the metaphor of the bell jar reveals that her feelings of imprisonment overwhelmed her thoughts. The bell jar means that Esther's hysteria intensified.

Since the metaphor of captivity means a troubled mind, recovery necessitates the disappearance of the 'bell jar'. Esther uses this metaphor for the last time when talking to Dr. Nolan, "All the heat and fear purged itself. I felt surprisingly at peace. The bell jar hung, suspended, a few feet above my head. I was open to the circulating air" (Plath 113). It is only after hysteria is cured that Esther ceases to represent herself as a captive in the narrative.

Psychological decline is metaphorically represented in the image of descending objects. Expressions of bodily degradation in *The Bell Jar* illustrate a degrading psychic state. For instance, after hysteric crises, Esther ceases to wash her body or change her clothes, "The white blouse and the dirndl skirt drooped a bit now as I hadn't washed them for my three weeks at home. The sweaty cotton gave off a sour smell" (Plath 67). This indicates a total

abandonment of the self. Through the metaphor of bodily descent to a lower state, Plath demonstrates that Esther's thoughts are centred on a single troubling fact; hysteria.

As she succumbs to the conditions of the body, Esther frequently refers to physical descent. Descending into the car, the stairs, and inability to raise herself from her bed are recurrent metaphors reflecting the downward transformation from mental well-being to hysteric troubles. Furthermore, the incident of throwing her wardrobe from the window¹³ represents a mute protest against the body and its distressed condition. The conversion of psychic disorder into bodily metaphors constitutes an effective linguistic tool to demonstrate the impact of disability on the body as well as on language.

2-3-5. Repressed Sexuality and the Language of Repression:

Repressed sexuality has several mental and linguistic manifestations. In *The Bell Jar*, the link between sexual repression and hysteric disorders can be clearly seen. Plath represents sexuality as the embodiment of social norms. Elaine Showalter discusses the concept of "moral insanity" claiming that female insane behaviour can be traced back to the severe moral code that enforces the idea of sin and evil in relation to female sexual experiences (15). Plath holds a similar perception to Showalter's. The language of *The Bell Jar* helps to understand the impact of sexual repression on linguistic behaviour.

A number of psychologists have reported that it is healthier to have a normal sexual life. However, they reported that the majority of males and females in the 1950s had a stereotyped

¹³ After she is a victim of an attempted rape.

one (qtd. in Showalter 20). Cultural stereotypes represented good mature women as more submissive and less adventurous. As an adolescent girl, Esther keeps asking the question: What is normal sexual life? She feels uncomfortable about her society's sexual norms. Esther laments, "I couldn't stand the idea of a woman having to have a single pure life and a man being able to have a double life, one pure and one not" (Plath 70).

Psychologists argue that guilt after sexual activity is one of the major causes leading teenage girls to suicide. Plath also says, "A man would try to persuade a girl to have sex with them and say they would marry her later, but as soon as she gave in, they would lose all respect for her and start saying that if she did that with them, she would do with other men and they would end up by making her life miserable" (Plath 78).

When emotion exceeds repression, Esther decides to find her sexual identity regardless of social and cultural conventions. Her words are a bitter expression of dissatisfaction with the double sexual standards established by patriarchy. Plath's literary voice is credited for telling the story from a female perspective. This reverses the long-established literary tradition of male writers being the only ones allowed to voice sexual matters.

Psychologists affirm the interconnectedness of sexuality and mental disorder. Even when issues of sexual life are not openly discussed, language serves as a reflection of sexual repression. Esther frequently evokes sexual topics. The language she uses reflects her conception of sex as the "unknown". She uses words such as "mystery, the thing, a great tradition, the secret, that ..., what they were doing" (Plath 07, 21, 50, 73). Sex is represented

as forbidden matter that shouldn't be openly discussed. Esther says, "The only boy I ever actually discussed going to bed with was Eric" (Plath 41).

When discussing sexual issues, Esther uses opposites. This reflects her conception of sex as a binary opposition. She says, "The world for me was not divided to blacks and whites, and rich and poor, but to people who slept with someone and people who didn't" (Plath 36). She uses adjectives such as: innocent vs. sexy, virginal vs. dirty, pure vs. sexy (Plath 37). This paradoxical attitude intensified Esther's psychological impairment. Plath suggests that these ideas were formulated in childhood and persisted in adulthood creating serious psychic troubles.

2-3-6. Hysterical Silence:

After the bitter verbal protests Esther wages, she finally realises the existence of powerful social and cultural forces deeming her to be submissive and silent. Esther surrenders to a mute protest through bodily paralysis as she absents herself from the text, holding her voice and assuming a silence which affirms her identification with the figure of the hysteric. In *Castration or Decapitation*, Hélène Cixous writes that:

Silence is the mark of hysteria. The great hysterics have lost speech, they are aphonic, and at times, have lost more than speech: they are pushed to the point of choking, nothing gets through, they are decapitated, their tongues are cut off and what talks is not heard because it is the body that talks, and man doesn't hear the body. (Cixous 49)

Indeed, when Esther is institutionalized after her suicide attempts, she chooses to identify with the silent. With Miss. Norris; a patient at the medical hospital, Esther sits in a "close, sisterly

silence” (Plath 133). In many instances in the novel, Esther is described as “brooding over the pale, speechless circle of her lips” (Plath 134).

The systematic compulsion and inability to speak are symptomatic hysteria. Hysterics are reported to feel a choking sensation when trying to speak. Esther seems subject to this trouble as she feels “suffocated by the soar air of (her) voice” (Plath 130). Her efforts to voice out her suffering end up in permanent silence, as if her words are frozen in the moment before expression. In such a case, Esther opts for grimaces to let out her inner troubles. She substitutes words with facial expressions between pain and laughter. She says that even her “cries are only mouthed like grins” (Plath 135).

Esther’s inability to defend herself against the sarcasm and aggressive speech of Buddy Willard leads her to internalize the dialogue. She later says, when lying under the fig tree, “I spent a lot of time having imaginary conversations with Buddy Willard” (Plath 58). She arranges in her mind all the arguments and justifications she wishes to voice when talking to him, but remains unable to speak.

Esther also imagines an ideal conversation with her psychiatrist. She wishes to be able to voice out all her concerns and find the words to describe her distress, “I would find words to tell him how I was so scared, as if I had been stuffed farther and farther into a black, airless sack with no way out” (Plath 68). Yet, this effective verbal interaction never takes place when she meets him due to her involuntary hysteric silence. The black airless sack stands for her hysteric condition which deprives her of fruitful linguistic exchange. It denies her the possibility of giving account of her experience.

Dr. Nolan tries to liberate Esther from this self-imposed silence. Her medical strategy consists of permitting her to say what she wants, not what people want to hear from her. For

instance, Nolan allows Esther to admit that she hates her mother (Plath 107). This confession helps Esther to externalize her private thoughts through words. Yet, it leads to feelings of guilt and self-punishment. Breaking social conventions through words does not bring its intended results because Esther still feels society's censorship even over her individual speech and private thoughts.

When thoughts cannot be translated into linguistic codes, the hysteric suffers from an alienation from language. Julia Kristeva explains this alienation by stressing the necessity of assuming a male voice, "The masculine speaking role is necessary to have a place in language"¹⁴ (72). The female voice of Esther, i.e. refusing to speak from a male's position and voice masculine interests, constitutes a linguistic barrier between Esther and her society's linguistic norms. The hysteric silence she endures represents her exclusion from language as a consequence of being excluded from society.

The suppression of Esther's voice is depicted in the narrative not only through her inability to speak but even through her failure to express herself in writing. Esther is a student accustomed to publications and successful writings. Hysteria however, weakens her power of literary expression and exhausts her linguistic capacities. When she attempts to find relief in writing a novel, she can only write two sentences (Plath 63). She describes the experience saying, "It was lively enough, and I was quite proud... only I had the dim impression I have probably read it somewhere else, a long time ago" (Plath 64). The gloomy thoughts overwhelm her and she stops writing. She desperately needs the experience of being successful and able to write, yet her hysteric silence triumphs once again.

¹⁴ Julia Kristeva was a pioneer in explaining the idea of cultural complicity between male language and society.

2-4. Schizophrenic Speech in *The Bell Jar*:

Psychoanalytic readings of *The Bell Jar* state that Esther Greenwood's hysteric condition rapidly aggravates. Soon after, she starts showing schizophrenic symptoms. This part discusses the linguistic manifestations of the thought disorders related to schizophrenia. It attempts to reveal the correlation between the sense of divided-self and verbal expression. It also provides a psycholinguistic account of schizophrenia and examines Esther's schizophrenic language by analysing and evaluating how schizophrenia affects semantics, syntax and discourse.

2.4.1. A Psycholinguistic Account of the schizophrenic Experience:

During the post-war period, the "female malady" was no longer linked to hysteria but assumed a new form; schizophrenia. Despite the hysterical traits Esther Greenwood shows, many psychiatrists and literary critics argued that most of her actions revealed a schizophrenic character. Marelna Hohn in her analytical work of madness in literature *Out of her Mind* stresses that Esther's condition indicates that she is struggling with a form of schizophrenia (48). She states that according to research done in the field of mental illness, and particularly

the experience of psychosis in the 1950's, Esther's case can be medically read as Schizophrenia because she suffers from a sense of dividedness of the personal self.

Schizophrenia refers to the multiple personality disorder. The term was introduced to the field of psychology by E. Bleuler in 1911. Schizophrenia as an illness is the subject of thought and critical debate among psychiatrists. 'Having two minds' is the image most people have about schizophrenia. However, this is quite misleading and far from being scientifically accurate. In psychological terms, it is defined as dissociative identity disorder.

The most common symptoms of schizophrenia are: troubles in hearing voices, paranoia, inner-detachment, emotional disorder, inappropriate laughter and ideas of reference¹⁵, Yet, psychiatrists agree that these symptoms are just diagnostic and cannot represent a coherent syndrome because they are not common to all schizophrenic patients. Controversy also extends to include the causes of schizophrenia.

While some psychiatrists trace the origins of the illness back to family history, stressing that interpersonal family dynamics in a schizophrenic family may lead its members to become schizophrenic, others claim that its origins are externally located. Yet, research in psychiatry does not provide any comprehensive explanation of the specific organic or constitutional origins of the schizophrenic experience.

The definition provided by Roland Laing is perhaps the one that could explain in details the internal battle a schizophrenic person fights every day. In *The Divided Self*, Laing says that:

(a) Schizoid is an individual the totality of whose experience is split in two main ways: In the first place, there is a rent in his relationship with the world, and

¹⁵ This implies experiencing events as having a reference to one's self, even if they do not.

in the other, there is a disruption in his relationship with himself. Such a person is not able to experience himself with others at home or in the outside world, but on the contrary, he experiences only despairing aloneness and isolation. Moreover, he does not experience himself as a complete person but rather as 'split' in various ways. (Laing 19)

Laing describes schizophrenia as the state of having a mind which is less linked to the body. It is a psychological crisis characterized by the feeling of two selves; the real self and the opposing self. For a normal person, the self is experienced only in and through the world. There is a "totality of experience" represented in the existential match the self establishes with the world. Schizophrenia however creates an abruptness in this match. It refers to a man in isolation both from the personal self and the world. It is an existential estrangement from the abstract self. The popular term for this case is madness. Yet, Laing argues that in clinical psychiatric terms, schizophrenia is the most accurate label.

Besides the descriptive psychiatric account provided by Laing, psycholinguists such as Kuperberg, Bleuler and Caplan provide a psycholinguistic perspective on schizophrenia based on the speech-related transformations caused by the sense of inner dividedness. Abnormalities in language are central to the schizophrenic syndrome (Kuperberg et al. 459). Laing recognizes that most disorders of thought can only be deduced from the speech of patients (Laing 20). Because thought cannot be accessed directly, disordered speech can be used to infer disturbances at the cognitive level¹⁶. This implies that the dissociated schizophrenic self finds its manifestation in language. Kuperberg et al. accordingly identify speech and writing disorders as secondary accessory symptoms of schizophrenia (445).

¹⁶ Some psycholinguists expressed only partial agreement with this explanation. Rochester and Martin argue that the link between thought and language disorders cannot always be affirmed because a patient may have major problems in his/her thought processes but choose to say nothing whereas another may be intact but finds difficulty in using the appropriate tools of linguistic expression.

Thus, tracing these accessory symptoms helps to relatively understand the relationship between thought, knowledge, and linguistic expression in schizophrenic minds. Bleuler conceives schizophrenia as a problem of dissociation at the level of single words because this mental trouble causes difficulties in accessing semantic memory (qtd. in Bhowmik 45). As a result, the cognitive dysfunctions related to schizophrenia are manifested in linguistic behaviour. These dysfunctions occur at the level of language output and comprehension. Kuperberg et al. identify three levels of linguistic schizophrenic symptoms.

The first linguistic abnormality is described at the level of single words. Schizophrenia causes disturbances and deficits at the structure and function of lexico-semantic memory. As a result, schizophrenics are known of their poor performance in relation to the semantic features of the words they use. This is manifested in a disability in naming, categorization and recall. Schizophrenic language thus, reveals the existence of disorders of storage, retrieval and interpretation of semantic data.

At the level of sentences, schizophrenic language is characterized by impaired use of different types of linguistic contexts. They are described as disorders of content, i.e. disorders in making predictability judgement on normal speech. For instance, a schizophrenic patient finds it hard to make a systematic connection between the sentence and its context. Schizophrenic speech is also characterized by lexical ambiguity and the use of words out of context (Kuperberg et al. 451). In addition, syntactic relationships within sentences break down in schizophrenia. Analyses of the speech produced by schizophrenic show that they are grammatically deviant. As such, schizophrenia affects contextualization and the manipulation of grammatical structures.

The most noticeable linguistic impact of schizophrenia is at the level of discourse is difficulty at establishing connections between sentences. Schizophrenics show a disability in

making relationships between the meanings of sentences. Laing reports that schizophrenic patients use less cohesive ties (Laing 27). His findings reveal that schizophrenic speech is less comprehensible as it is characterized by the lack of reference words and conjunctions. As such, schizophrenic speech is ambiguous and unclear.

Verbalizing the schizophrenic experience renders it more understandable. Plath attempts in her narrative to explain what it means to be neurotic. Narration is one of the most successful modes of communicating schizophrenic troubles¹⁷. Art expression provides authenticity to the experience. *The Bell Jar* can be read as an attempt to heal the fracture between the inner-self and the false self-system so that a real and viable identity can come into existence.

2.4.2. The Unpredictability of Schizophrenic Speech:

The Bell Jar can be read as a young girl's quest for identity. Esther Greenwood struggles to achieve inner stability and self-understanding. Along this quest, she discovers that she has to overcome her inner-dividedness so that a real and viable identity can come into existence. Esther is a victim of what Laing calls "the false self-system" (Laing 70). Laing defines the false self-system as

The mask, front, persona that schizophrenic individuals 'wear'. It may consist in an amalgam of various part-selves, none of which is so fully developed as to have

¹⁷ Other psychiatrists such as Harriet Wadeson and William T. Carpenter used other methods to understand schizophrenia such as analysing the patients' drawings. They even used art as a therapeutic method.

a comprehensive 'personality' of its own. The central split is between the schizoid's own 'self' and what he calls his 'personality'... what the individual calls his own 'inner', 'true', 'real' self is experienced as divorced from all activity that is observable by others. (Laing 73)

Esther's actions reveal such a double identity though she is unaware of it. Her interpersonal relationship undergoes many changes resulting in a feeling of self-estrangement. In the first chapter of *The Bell Jar*, Esther's self-image is presented as the brilliant, successful, ambitious girl who strives for prizes and publications. Yet, the Esther others see is just the beautiful fashionable girl. For her mother, she is the perfect good girl who causes her no trouble at home or at school. Buddy Willard similarly sees her as the pure innocent sweet girl while for her professors she is the model student with all 'A' grades.

Esther feels that all these perceptions are misleading. She is dissatisfied with the fact that she inhabits identities which are not her own just to please the people around her. Over-concern about this issue of identity leads her to enter the whirl of false self-system. Esther accordingly shows symptoms of schizophrenia as a result of her identity crisis.

The most obvious schizophrenic trait Esther demonstrates is unpredictability of actions. When her psychological reality is split into two selves instead of being a wholly united one, both her social and linguistic behaviour turn from normal to pathological. For instance, when Buddy disparages her literary aspirations with the remark that a poem for him was just "A piece of dust" (Plath 30), Esther, unlike what might be expected from a girl who aspires to be a poet, replies by saying: "I guess so" (Plath 30). This unexpected behaviour that Esther herself regrets later is repeated in other situations.

When Buddy accuses her of going out with a lot of boys, drawing an image of another Esther who is quite different from the real one, she prefers to identify with the 'new self' he

creates for her and replies in the positive, “Well, I guess I do” (Plath 33). Esther continues to give such short positive answers in other incidents in the novel, even when Buddy asks her consent about his sexual advances, she almost always replies with, “All right, I guess so” (Plath 74).

In psychic terms, it is the false self that responds when the answer is unpredictable or unexpected from the real self. In *The Ritual of Being Born Twice*, Marjorie G. Perloff asserts that the verbal action in such situations takes place in an artificial way (09). Considering Esther’s rebellious spirit, these actions cannot be read as submissive or neglectful. The feeling of guilt that overwhelms Esther after the conversations means that some of her actions and experiences are not fully controlled by her real self. Esther’s false self-system serves as a reflection of her schizophrenic mind.

Besides, this schizophrenic trait is reflected in language. From a psycholinguistic perspective, even in the lack of a medical diagnosis, Esther’s mental disability can be inferred from her speech. Kuperberg et al. state that, “On the syntactic level, schizophrenic speech is characterized by deficits in the combination of syntactic and semantic items... schizophrenics perform poorly on manipulating grammar” (Kuperberg et al. 453). Using these findings to analyse Esther’s speech, her diagnosis with schizophrenia is affirmed. During the schizophrenic crisis, Esther’s speech is characterized by the use of simplified syntax. Sentences like, “All right, I guess so”, “Well, I guess I do”, and “I guess so” demonstrate no syntactic complexity.

Furthermore, it is noticeable that nearly the same sentence serves as an answer in different and sometimes contradicting situations. This implies that the repeated sentence does not express agreement but rather reflects a dysfunction in accessing lexical memory. Schizophrenia causes difficulties in the retrieval of the appropriate words suitable for the

situation. Esther seems to face troubles in naming objects and feelings or categorizing words. This is what leads her to opt for the simple answer, “yes, I guess so”.

Esther’s speech deficit may also be attributed to her inability to plan her speech. Speech-planning is an essential step in normal linguistic behaviour. It is the step that follows discourse comprehension and precedes the production of discourse. Kuperberg et al. explain that, “schizophrenia affects the ability to select information relevant to discourse topics” (454). Esther’s schizophrenia is thus manifested in a disability to select items and information in order to accomplish the task of planning her speech.

2.4.3. Self-Estrangement and the Creation of Multiple Identities:

Schizophrenia is characterized by a form of detachment from the self. The inner self experiences a temporary estrangement from the body. This estrangement occurs without the schizoids’ control and as such it is a psychologically disturbing experience. Plath in *The Bell Jar* portrays the feeling of dissociation Esther experiences after her schizophrenic suffering intensifies. Plath’s language shows both the psychological and grammatical impact of self-estrangement in schizophrenia.

Images of Esther’s feelings of inability to recognize her real self are recurrent in *The Bell Jar*. For instance, when Esther returns back to the hotel from Lenny’s apartment after the terrible experience of feeling withdrawn and unattractive, she enters the mirrored lift of the Amazon Hotel. There, she says, “I noticed a big, smudgy-eyed Chinese woman starting at me idiotically into my face; it was only me, of course. I was appalled to see how wrinkled and used up I looked” (Plath 11). Because of her schizoid condition, Esther’s reflection in the mirror becomes a stranger. A similar incident takes place when Esther returns back home on the train to Boston. Esther says, “The face in the mirror looked like a sick Indian” (Plath 59).

Esther's self becomes increasingly disembodied. The symbolic representation of the "false" self in the mirror as a "Chinese woman" and a "sick Indian" reflects a severe case of dissociation. Laing explains this condition saying that:

Schizoids could be multiplied indefinitely. It is in this way that they experience actions at home, at work, and with friends. The consequences of this mode of being are that the false self-system becomes more extensive and autonomous. It also results in compulsive behaviour fragments. All that belongs to the "real" self become more and more dead, unreal, false and mechanical. (Laing 143)

Dissociation weakens the relationship between the self and the body. The body is accordingly conceived just as one among other objects in the world without any sense of belonging to the self. In Esther's case, it is not only the face that becomes an object of estrangement and dissociation but the body as a whole. The evidence is that Esther refers to her voice as the zombie voice, "I dialled to the admission office and listened to the zombie voice leave a message that Miss Esther Greenwood was concealing all arrangements to come to summer school" (Plath 63). Esther speaks about herself as if she is speaking about another person. She estranges not only her voice but her body as a whole. The body in schizophrenic cases becomes detached and passive.

The dissociative disorder of thought is reflected in schizophrenic speech. Schizoids speak about their own experiences as if they were not their own, which is the case with Esther Greenwood. Crowther attributes this crisis to the way the brain makes the indexical distinctions between thoughts, one's own speech production, and the speech of others (09). The ability to index speech and address with "I" and "you" is made possible by the brain's lateralization¹⁸ (Wilce 414). Schizophrenia affects the brain's language-related functions making it difficult for its sufferers to distinguish between speeches as heard and as produced.

18 Lateralization means having two hemispheres of the brain which are specialized but integrated.

Being dissociated from her real self, Esther attempts to take up a different identity. She falls in what Laing calls the “double bind” (Laing 20). When there is uncertainty of identity, the mentally distressed person has a tendency to look for other means of personal identification. The threat of losing one’s identity becomes an existential issue. The failure to achieve self-understanding results in anxiety and insecurity. The schizophrenic mind thus looks for an alternative identity.

Esther’s schizoid nature shakes her sense of identity. Consequently, she decides to take up an alternative one to feel psychologically secure. She ceases to identify as Esther Greenwood and opts instead to the name of Elly Higginbottom. In her first meeting with Lenny, Esther refuses to reveal her real name, “My name is Elly Higginbottom... I come from Chicago... after that I felt safer” (Plath 08). The false self-identification, Esther justifies, is a means to feel safe and secure.

The meeting with Lenny was the first time when Esther inhabits another identity. Yet, it was not the last. When she meets a sailor in the beach, she once again hides her “real” identity.

“Hi there, what’s your name?”

“Elly Higginbottom”

The sailor fell into step beside me and I smiled.

“Where do you come from, Elly?”

“Chicago”. (Plath 70)

is the strategy some schizoids use to feel relieved from anxiety. Laing calls this false identification a “schizoid defence mechanism” (Laing 21). He reports that schizophrenia sufferers feel that this mechanism helps them to establish a stable defence against the loss of identity and even against the other who is perceived as a source of danger. In *The Bell Jar*, this defence is repeatedly carried through.

Freud traces back the deficits in self-consciousness to childhood. He states that the earliest and seemingly simplest stages of human life are considerably important in self-dissociation (qtd. in Laing 115-6). Freud explains that it is a common game for children to play being invisible or being another person. It is in this game that some children develop a desire to inhabit another identity. He argues that such games are to be understood as attempts to mask the self. This is exactly what Laing calls “the schizoid false self-system”. These simple infantile situations for Freud are the origins of a number of psychic troubles.

Applying Freud’s explanation to Esther’s case, it becomes clear that the name of Elly Higginbottom is the mask she uses to hide her inner dividedness. The sense of split and dissociation is manifested through another imaginary character that Plath uses as Esther’s false self. Schizophrenia is characterized by the use of multiple identities as a defence mechanism. Yet, this defence works only for a short while. It collapses as Esther return back home or to the mental hospital. She returns back to her inescapable reality.

2.4.4. A Discourse Cohesion Analysis: The Schizophrenic Mind and Ambivalent

Narrative:

The hallmark of speech among individuals suffering from schizophrenia is the lack of discursive cohesion. Schizoids produce language that deviates from the general discourse of the spoken conversation or the written production. They consciously or unconsciously lose

control over their speech. In *The Bell Jar*, a set of deviations occurs in Esther Greenwood's speech. Identifying and analysing these discursive deviations may offer an explanation to the way schizophrenia creates linguistic disabilities.

The narrative in *The Bell Jar* is characterized by ambivalence. The novel is centred on the existence of dichotomies. Plath, through Esther expresses a sharp duality of meaning at the level of feelings, conceptions and psychic states. This duality gives her narrative an ambivalent nature. In *Therapist Intervention and Client Ambivalence*, Rebiero et al. define ambivalence as

A cycle of opposing expressions by two internal voices. The emergence of a suppressed voice produces an innovative moment challenging the dominant voice, which represents the speaker's problematic narrative. This emergence is opposed by the dominant voice, leading to a return to the problematic self-narrative. (Rebiero et al. 01)

Applying this definition to *The Bell Jar*, Plath shows aspects of a similar situation. Esther Greenwood's attitudes towards her society are expressed using two internal voices. She is caught in a dilemma between accepting the social norms which she considers unjust and out-of-date or rejecting them and assuming all the hard consequences. Because of her inability to take a position, the two opposing voices persist.

The ambivalent nature of Esther's existence is reflected first in her relationship with her mother. The young girl seems divided between her innate feelings towards her mother and her dissatisfaction with her mother's way of life. Esther finds her mother's life worthless and below her ambitions. She accordingly refuses to learn shorthand "my mother had taught shorthand and typing to support us ever since my father died...she was always on to me to learn shorthand after college" (Plath 22). This implies a deception from the mother's part,

especially as Esther believes that her mother “hated (her father) for dying and leaving no money” (Plath 22).

Despite the image of the materialist, self-interested mother Esther presents, she shows a deep affection for her during her psychic decline. In the incident of the mother crying in Dr Gordon’s cabinet after discussing her daughter’s improvement, Esther reveals affection for her mother and represents her as a loving and caring person. Yet, this positive attitude towards her mother does not last for long. Esther once again accuses her mother of hypocrisy and claims that her mother’s visits to the hospital were just were just to make her feel worse: “I hate her”, she says to Dr Nolan (Plath 107).

Esther’s mother is not the only subject of an ambivalent representation. She shows the same attitude towards almost all the women represented in the narrative. For instance, Jay Cee; the magazine editor is admired for her professional success but openly criticized for her failure in her private life. On the contrary, Mrs Willard is represented as a good wife and mother but criticized for being totally devoted to family life. Esther is never assertive in her relationship to women. She always represents them in two opposing states, using two opposing voices.

Like her ambivalence to women, Esther’s response to men is similarly divided. She is looking for the ideal man and perfect lover but at the same time expresses a total rejection to societal guidelines for family life, “The trouble was that I hated ideas of serving men in any way. I wanted to dictate my own thrilling letters” (Plath 14). This split of personality Esther suffered from can be explained by the lack of a good and successful model that she can draw after.

relax after a long day's work. Her relationship with Doreen seems very good was it not for the change of attitude Esther shows when she knocks on her door after midnight, "I felt if I carried Doreen through the threshold and helped her into my room I would never get rid of her again" (Plath 13), a discourse which is quite unexpected for a close friend. This clearly reflects the feelings of loss and confusion Esther experiences.

Discursive ambivalence in *The Bell Jar* is another manifestation of schizophrenia. Through Esther, Plath uses narration as a therapist method to externalize internal splits and conflicts. Schizophrenic talk is symptomatic of the existence of two opposing selves telling the story from two opposing perspectives. The reader finds it difficult to make a meaningful combination between the contradicting attitudes expressed by Plath. The inability to place logical associations between sentences, attitudes and conceptions is a schizophrenic symptom.

Inconsistent discourse in schizophrenic speech results from anxiety. Laing states that anxiety is a significant characteristic of schizoids. He attributes the deficits in discourse cohesion to "the experience of the uncoupled self and the perception of disconnected world which make anxiety creep back more intensely than ever" (Laing 132). Anxious thoughts render all what the schizoid person does inextricably ambivalent in nature, including linguistic output.

For Esther Greenwood, anxiety had two basic sources; society and the future. Esther's schizophrenic nature is linked to her social situation. The dilemma of being a woman in a patriarchal society that she can neither accept nor refuse results in serious anxieties and multiple questions that overburden her already weak and fragile psyche. The anxieties of stereotyped world which she inhabits and represents in her works cause Plath to produce a narrative with a duality of attitudes.

Besides social anxieties, worries about the future constitute a basic factor in producing inconsistent portrayals of the self and the other. Esther uses the fig tree metaphor to describe her fate saying:

From the tip of every branch, like a fat purple fig, a wonderful future beckoned and winked. One fig was a husband and a happy home and children, and another fig was a famous poet and another fig was a brilliant professor, and another fig was Jay Gee, the amazing editor, and another fig was Europe and Africa and South America...and beyond and above these figs were many more figs I couldn't quite make out. (Plath 29)

The fact of having different and sometimes contradicting choices in life affects the way the self is perceived and represented. This experience of multiple social roles in the absence of family support is linguistically articulated through ambivalent passages with a duality of meanings. Laing stresses that ambivalence becomes a schizophrenic strategy to “cope with an unliveable situation” (Laing 19). The Narrative of *The Bell Jar* is thus an outcome of a severe schizophrenic crisis.

2.4.5. Evaluating Schizophrenic Speech in *The Bell Jar*:

Schizophrenia is just a phase in Esther Greenwood’s mental breakdown. Yet, it is the phase that has the most significant impact on her language. Linguistic disorders are inevitable in schizophrenic sufferers. Thus, understanding the characteristics of schizophrenic speech in terms of semantic features, syntactic structure, and discourse abnormalities is vital to understanding the schizoid character within the narrative. Plath in *The Bell Jar* manages to give her work an authentic nature as the language of Esther exhibits most of the features of schizophrenic speech.

At the level of phonetics and phonology, schizophrenia leads to aprosody, rhyming and alliteration. Covington notes that, “Schizophrenic patients have been described as aprosodic; they produce flat intonation and may be distracted by phonology” (55). Accordingly, the primary level in which schizophrenic symptoms become apparent is that of utterances. Yet, there is no reference in *The Bell Jar* as to Esther’s phonological disorders. Besides, the literary work is of a written nature. Thus, the phonological deviations could not be analysed.

Apart from phonetics and phonology, the literature dealing with the speech of schizophrenic people classifies the vast majority of abnormal output in the categories of semantics, syntax and discourse competence. Analysing Esther Greenwood’s linguistic production during her schizophrenic crisis, it becomes apparent that all of the three levels are affected by schizophrenia but with varying degrees.

Concerning morphology and syntax, Esther seems to have a normal access to morphological and syntactic systems. She does not produce grammatical errors. Her syntax remains slightly affected by schizophrenia. The most apparent linguistic disorder she demonstrates is the use of simplified syntactic structures. Throughout the narrative, Esther rarely uses complex grammatical structures. Her linguistic production is limited only to the basic parts of speech. In addition, she reveals a systematic disruption in receptive syntax. The instances in which Esther complains about inability to read or write serve as evidence.

Unlike many schizophrenic sufferers who are reported to respond by a large quantity of information, Esther’s responses are characterized by being short, one-word responses most of the time. Besides, she rarely asks questions of her own or voluntarily provides any information. The only exception was in her conversation with the sailor:

What do you want to do when you get out of the navy? I asked the sailor suddenly.

It was the longest sentence I had said, and he seemed taken aback...

Well, I dunno. (Plath 71)

This reveals that excess of speech is not a feature of Esther's linguistic production. She alienates herself from the world around her and minimizes her interaction with people to the inevitable communications only.

Esther's schizophrenic speech is also characterized by simplicity. This feature is shared by all schizoids as Kuperberg et al. note, "schizophrenic speech is less complex... as reflected by a higher percentage of simple sentences" (453). Besides, Esther's linguistic output is also characterized by poor content. She uses simple, linear forms of speech without any regression, metaphors or imaginary ideas. Instead of focusing on the production of new meaningful sentences, the schizophrenic mind opts for repletion, and it is the case with Esther.

The other set of disordered linguistic features that Esther demonstrates is related to pragmatics and discourse. The most apparent pragmatic disturbance is illogicality. Inadequate logic is a schizophrenic symptom that characterizes Esther's linguistic output. For instance, Esther thinks that the Electro-Shock Treatment that her doctors use to cure her mental troubles is a punishment (Plath 12). The idea of punishment seems illogical for a person who wants to be cured. Yet, for a schizoid, this faulty and inadequate logic is the truth.

Analysis of the underlying semantic, syntactic, and discursive process in Esther's speech shows that she reveals maximum accordance with the linguistic diagnosis of schizophrenia because she exhibits a minimum sense of identity. Though not all the symptoms are present, Esther's speech features most of them. This implies that verbal behaviour differs between schizophrenic patients. The other reason is that Esther does not suffer only from schizophrenia but is even on the verge of a mental depression.

2-5. Language of Depression in *The Bell Jar*:

Esther Greenwood's schizophrenic suffering is followed by a phase of severe depression. Esther's use of language reflects aspects of depressive speech. To have a better understanding of the impact of depression on the linguistic behaviour of Esther Greenwood, this part investigates the major characteristics of depressive speech and assesses their relevance to the passages portraying Esther's depression in *The Bell Jar*.

2-5-1. Psycholinguistic Account of Depression:

Many literary critics and researchers working on Plath's works interpret Esther's case as suicidal depression. Donnelly refers to Esther as a woman showing depressive disorders. He notes that, "*The Bell Jar* is a madness narrative informed by the vogue diagnosis of depression" (Donnelly 253). Edward Shorter also holds a similar view. He relies on Esther's suicide attempt to prove her psychic depression. He informs that, "When considering the casualties of that despair, up to a quarter of all depressed patients suicide" (Shorter 222).

Depression is a mood disorder. Alghowinem defines it as, "A serious psychiatric disorder that affects the individual's thoughts and ability to function in everyday life" (01). It is one of the most common psychic disorders affecting a wide range of people all over the world. Debjit Bhowmik asserts that there are several types of depression, "It may range from a very mild condition, bordering on normality, to severe (psychotic) depression accompanied by hallucinations and delusion" (15). Depression is identified as one of the major causes of mental disability.

The causes of depression are varied. Bhowmik maintains that depression results from the negative responses to life's situations. When the individual's reactions to unpleasant things or events become so intense and repetitive, the risk of showing depressive symptoms gets higher. When negative emotional responses such as fear, anger, sadness, anxiety, guilt and frustration

become chronic and recurrent, they substantially lead to the prevalence of symptoms of depression. According to Bhowmik, “The cause of depression include genetic, environmental, psychological and biochemical factors” (20). Depression may be caused by one or more factors.

The symptoms caused by depression vary from one person to another because it affects every individual differently. Bhowmik states that, “Inherited traits, age, gender and cultural background all may play a role in how depression may affect” (21). The major symptoms of depression are feelings of sadness, irritability, frustration, loss of interest and pleasure in normal activities, reduced sexual desire, insomnia or excessive sleeping, and changes in appetite. Other symptoms may include slowed thinking, speaking or body movement, fatigue and loss of energy, indecisiveness, distractibility, and inability to concentrate.

Psychiatrists classify depressed patients into three categories according to the symptoms they show. Variations in the number, timing, severity and persistence of the symptoms reveal the type of depression the patient experiences. Major depression is characterized by mood disorders that last for two weeks or more. The depression that lasts for a longer period is called dysthymia. It is characterized by long-term (chronic) symptoms that disable the individual from functioning in a normal way at the personal, social and professional level.

The type of depression relevant to this research is bipolar disorder; also called manic depression. It is a combination of mania and depression¹⁹. It is characterized by a cycle of mood disorders including episodes of both mania and depression. Bhowmik states that, “The mood switches in bipolar depression are sometimes dramatic and rapid, but most of the time they are gradual” (23). The crises in this condition are recurrent as they may occur several times in a life span.

¹⁹ Mania is a mood disorder that affects thinking, judgement, and social behaviour causing serious problems and embarrassment.

Depression is also noted to affect language. The troubled thoughts and mood swings that characterize depressive episodes have a serious impact on verbal behaviour. Rude et al. state that, “The cognitive operations associated with depression have several speech-related symptoms” (01). In a study conducted on a number of formerly-depressed, currently-depressed and never depressed college students, Rude et al. confirm that the three groups demonstrated major differences in terms of linguistic behaviour.

The study revealed that currently-depressed participants demonstrated both the negative focus predicted by Beck’s cognitive theory and the self-preoccupation predicted by Pyczsinsk model of social disengagement. They were also reported for using more first-person pronouns rather than third-person pronouns. Besides, the most common linguistic indicator of depression, as noted by Rude is the expression of dark thoughts and negative emotions.

2.5.2. Language and Negative Cognitive Biases in Depression: Beck’s Cognitive Model.

Cognitive therapy is a comprehensive system of psychotherapy and treatment. It is based on the cognitive theory of psychopathology developed in the 1960’s by Aaron Beck. Beck’s cognitive model describes how “people’s perceptions of, or spontaneous thoughts about, situations influence their emotional, behavioural, and often physiological reactions” (Miller 07). Beck’s model came as a reaction to Freud’s notion that depression was the result of unconscious anger directed towards the self (Holon). Beck developed a major formulation that held that the factors leading to depression are not the outcome of unconscious drives but the consequence of negative beliefs and biased information. This revolutionary cognitive theory became widely used in psychotherapy since the 1970’s.

healthy psyche. In the case of a negative or biased control, mental disorders and psychological troubles become inevitable. Beck's investigation focussed on depressive disorders analysing both the effects of negative beliefs and their behavioural manifestations.

Building on Beck's cognitive model, Nuria Romero attempted to link the manifestations of negative beliefs to linguistic behaviour. She suggests that major depression disorder is characterized by cognitive biases in memory, attention and language as well. A study conducted by Romero provides evidence of the impact of negative processing on verbal behaviour. The study demonstrates an association between the modes of negative processing and memory biases for negative self-referent information and linguistic modifications in depressed individuals (134). It confirms that the cognitive control intervenes in how events and information are negatively processed leading to the use of more negative than positive words and expressions.

Applying Beck's cognitive model and Romero's findings to Esther Greenwood's mental condition, it becomes clear that she suffers from a depression caused by a negatively biased memory. Negative cognitions characterize Esther's depressive episode. Esther, like all depressed individuals reveals cognitive biases to recalling more emotionally negative events, ideas and people. This correlation provides evidence as to how depression affects her memory. Beck's cognitive model suggests that depressed mood states are maintained by a negatively biased memory. This becomes evident as Esther selects and remembers more negative than positive information. Beck explains this by the existence of some schemas in the mind that favour the negative recall operation. Romero also maintains that, "These schemas include themes of loss, separation, failure, worthlessness and rejection" (128). Consequently, depressed individuals tend to remember only the information and events relevant to these themes. The retrieval of negative material is one of the major characteristics of Esther Greenwood's depressive episodes.

The themes of loss and personal failure are recurrent in *The Bell Jar*. For instance, despite of her “A” grades at school and her professional success, Esther tends to think about her future in negative terms. The use of negatively biased vocabulary to talk about the future is one of the major characteristics of Esther’s depressive episode. In cognitive science, lexical decisions are used as determiners of mental states. Emmanuel Stip states that, “In a lexical decision task, patients suffering from depression have more access to negative categories of words than healthy controls” (65). Depressive speech is therefore characterized by a low rate of positive words resulting from a dysfunctional positive memory.

Considering the passages in which Esther describes her future, the following word-list can be made.

Positive words list	percentage of repetitions	Negative words list	Percentage of repetitions
Happy	00.07%	Regret	00.75%
Enjoy	00.12%	Death	02.63%
Hope	00.33%	Suicide	01.80%
Wish	00.49%	Alone	00.42%
Love	00.001%	Confused	00.80%

Table 01: Percentages of Repetition of Positive and Negative Words in *The Bell Jar*.

The over-representation of negative emotive words and death words is noticeable. On the other hand, there is a low representation of positive emotive words. By comparing the verbal

recall of words related to negative feelings and those related positive ones, it becomes clear that the depressive episodes of Esther have serious linguistic outcomes. The high rates of repeating negative emotive words are linguistic markers for depression. Esther's depressive mood affects her choice of words. She speaks differently because of the serious psychological consequences of depression not only on her thoughts but even through deficits in learning and intellectual speed. The negative emotional tone of the narrative represents a key aspect of her depressive cognitive state.

In another passage, Esther describes the delivery of a baby; an event which is supposed to bring joy and positive feelings. Esther however portrays the delivery in a sad tone:

The woman's stomach stuck up so high I couldn't see her face or the upper part of her body at all. She seemed to have nothing but an enormous spider stomach and two ugly spindly legs... and all the time the baby was being born, she never stopped making that inhuman whooing noise. Later on Buddy told me the woman was on a drug that would make her forget she had had any pain and that when she snored and groaned, she didn't really know she was doing because she was in a kind of twilight sleep. (Plath 35)

The choice of words in the above passage reflects the negative cognitive biases overwhelming Esther's thoughts. Esther expresses her primer thoughts, beliefs, expectancies and fears about the delivery operation using negative terms such as: ugly, inhuman noise, snores and groans. It becomes clear that depression influenced the way her mind makes negative associations even with one of the happiest events in a woman's life; the birth of a new baby.

Esther's conviction about the validity of her negative associations and conceptions is strengthened by the images of pain that accompanied the delivery scene:

I thought it sounded just like the sort of drugs a man would invent. Here was a woman in terrible pain, obviously feeling every bit of it or she wouldn't groan like that, and she would go straight home and start another baby, because the drug would make her forget how the pain had been, when all the time, in some secret part of her, that long, blind, doorless and windowless corridor was waiting to open up and shut her in again. (Plath 35)

The repetition of the word "pain" reveals how extreme of Esther's biased emotions are. As her depression deepens, her stream of consciousness reflects only the negative side of the event. Depression leads to a dysfunctional positive memory. The evidence is that she makes no reference to the positive feelings associated with giving birth to a new life. Instead, she even describes the newly-born baby as a dark, fuzzy thing:

Finally I saw a dark fuzzy thing appear. "That's the baby's head", Buddy whispered under cover of the woman's groans. But the baby's head stuck for some reason, and the doctor told Will he would have to make a cut. I heard the scissors close to the woman's skin like cloth and the blood began to run down- a fierce, bright red. (Plath 35)

Even when the baby is born, Esther's depressive thoughts are immediately directed the negative painful consequences of the delivery. She describes the groans, the scissors, the cut and the fierce red blood. This negative attentional focus is a basic feature of depressive thought. It is till Esther's depression is cured that the use of negatively-valenced linguistic expressions decreases. The passage in which Esther describes her baby is filled with hope and positive emotions. Esther joyfully says, "I realized we kept up piling these presents because

they were as good as free advertising... I got such a kick from all the free gifts showering on us. For a long time, I hid them away. But later, when I was all right again, I brought them out ... and last week, I cut the starfish off the sun glasses for the baby to play with (Plath 135).

Esther's semantic choices shifted after she was all right again. Her automatic attention starts focusing on positive things and events. Consequently, her language turns to be much more positive. Expressions such as: Piling presents, gifts showering, and a baby playing reflect a depression-free psyche. This certainly implies a depression-free language.

2.5.3. Depressive Self-Focus and the Excessive Use of First Person Pronouns:

The expression of negatively-valenced thoughts is not the only linguistic dimension of depression. Beck's cognitive model was used to examine the impact of negative thoughts on the recurring grammatical structures in depressive speech. This part examines the syntactic effects of self-focused attention on language use.

Research in psychopathology has found that depression is characterized by a heightened degree of self-focused attention. Jeff Greenberg states that, "the negative memory bias commonly found among depressed people is mediated by excess levels of self-focused attention" (351). Greenberg studied the patterns of recall of information in depressed individuals and demonstrated that the events and information recalled by currently depressed persons were more related to the self if compared to non-depressed persons who were noticed to recall events happening to other people. Greenberg's findings pointed a major characteristic of depressive thought; self-focused attention.

Self-focused attention is therefore defined as a major disorder in the cognitive regulation of thoughts and emotions. Ingram defines it as, "An awareness of the self-referent, internally

generated information that stands in contrast to externally generated information derived through sensory receptors” (Ingram 136). During the depressive episode, the depressed person experiences a severe dissociation from the outside world. This dissociation results in shifting interest from external events to internal states. This shift in its turn leads to a series of disabling psychic conditions which Ingram explains as follows:

When attention is self-directed, it sometimes takes the form of focus on internal perceptual events, that is, information from those sensory receptors that react to changes in bodily activity. It may also take the form of an enhanced awareness of one’s present or past physical behaviour, that is, a heightened cognizance of what one is doing or what one is like. (Ingram 158)

The previous focus on the environment which characterizes a healthy psyche is turned in depression to a subjective self-directed recollection of negative impressions on those previous events. Yet, self-focused attention is not conceptualized as psychopathological unless it is associated with difficulties in cognitive control, i.e. it happens involuntarily, despite of the individual’s efforts to control it.

The self-focused state in depression has linguistic manifestations. Sedikides says that it tends to induce language patterns that are different from the ordinary patterns used by non-depressed persons (129). The recurring linguistic patterns in *The Bell Jar* reflect Esther Greenwood’s self-directed thoughts. Through the excessive use of first-person pronouns, Plath reveals important aspects of her protagonist’s depressive episodes. The syntactic aspects of self-focused attention are analysed using the text analysis program: Linguistic Inquiry and Word Counting (LIWC). The focus of the present analysis is to examine the use of first person pronouns (I, me, my) and third person pronouns (we, us, our). The passages describing

Esther's depression are selected as samples for analysis²⁰. The overall usage of these pronouns is represented in the following tables:

First Person Pronouns	Percentage	Third Person Pronouns	Percentage
I	07.97%	We	00.48%
Me	01.21%	Us	00.00%
My	02.66%	Our	00.00%
Myself	00.48%	Ourselves	00.00%

Table 02: The percentages of the use of first person pronouns and third person pronouns in passages describing depressive episodes in *The Bell Jar*. P, 63-64.

First Person Pronouns	Percentage	Third Person Pronouns	Percentage
I	05.75%	We	00.86%
Me	02.01%	Us	00.00%
My	01.44%	Our	00.87%
Myself	00.35%	Ourselves	00.00%

Table 03: The percentage of the use of first person pronouns and third person pronouns in passages describing depressive episodes in *The Bell Jar*. P, 83-84.

²⁰ The percentages are made out of the total number of words in the passage.

Tables 02 and 03 represent the percentage of the use of first person pronouns and third person pronouns in two different passages from *The Bell Jar*. The two passages were selected on the basis that both describe the peak of Esther Greenwood's depression. The first passage extends from, "Then I decided I would spend this summer writing a novel" (Plath 63) to "At first I felt hopeful" (Plath 64). It portrays Esther's attempt to use art as a therapeutic method to externalize depressive thoughts. The second passage represents another depressive episode in Esther's life, which she tries to overcome through volunteering in collective activities. It extends from "My mother said the cure for thinking too much about yourself was helping someone who was worse off than you" to "then she disappeared" (Plath 86).

The total number of words found in each category demonstrates a higher use of first person pronouns. Percentages belonging to the use of third person pronouns are lower. Accordingly, Plath, through Esther Greenwood tends to report the experience of depression from a self-directed perspective. As her attention is always directed to her mental distress and internal conflict, she rarely refers to the experience as a part of a group. The use of pronouns is accordingly a grammatical parameter that shows depressive symptoms.

Table 02 reveals that the first person pronoun "I" is recurrent in the passage if compared to third person pronouns which had an insignificant percentage. This may not be explained only by the fact the passage is narrative. The total absence of third person pronouns "us, our and ourselves" demonstrates that narration takes place from a highly individualized and self-directed perspective. This syntactic feature can be psychologically attributed to the narrator's depressive thoughts.

Table 03 bring out approximately similar results. The percentage of using the "I" is higher whereas third person pronouns are almost absent from the passage. Though the passage

portrays Esther's participation in communal activities, Esther rarely addresses other characters or speaks in the collective. The instances in which she uses third person pronouns were aimed to make reference to community-shared places, "our hospital, our church..." (Plath 86).

The results confirmed the self-preoccupation described by Psyszczynski and Greenberg's control theory of depression. As depression leads Esther to see her identity and the world in pervasively negative terms, the cognitive operations related to the production of language reflect this influence. *The Bell Jar* reveals the employment of specific syntactic structures related to depression. It confirms that thinking a great deal about the self results in the recurrence of language structures containing more first person pronouns. Rude explains this by the loss of self-worth which characterizes depression. The expressions and grammatical structures centred on the self are an attempt to regain what was lost (Rude 32). Thus, thoughts and utterances become a means to magnify negative emotions and self-blame. Despite of Esther's efforts to inhibit this self-focus tendency, it remains an uncontrollable feature.

2.5.4. Suicidal Speech:

Considering all the factors leading Esther Greenwood to depression, an explanation can be provided to her suicide attempt. Esther attempts to take her own life mainly as a way to end her serious psychological suffering. It is the sense of dissociation from the self, and from the outside world that disabled her. The language of *The Bell Jar* reflects symptoms of suicidal depression.

Suicidal behaviour is complex. Both sociologists and psychiatrists attempted to provide a comprehensive definition to suicide. Durkheim defines it as, "A social fact which consists of manners of acting, thinking, and feeling external to the individual which are invested with coercive power by virtue of which they exercise control over him" (57). From a sociological perspective, suicide is the result of coercive social forces which the individual cannot

overcome. However, in psychology suicide is viewed as an ultimate consequence of intolerable psychological pain and perturbation.

Individuals with symptoms of depression typically experience an intensely painful psychological perturbation. This provokes a disability at the level of emotion regulation. Besides negative memory bias and self-focused attention, depressed individuals with suicidal thoughts experience a severe dissociation from society. Accordingly, suicide for them is just a way to escape an order to which she does not belong.

Literature suggests that depression influences not only how depressed individuals react to the social environment but even how they communicate. Depression and affective states have an influence also on linguistic style. Findings suggest that depression and temporary negative moods both affect pronoun use, but depression influences use of first-person pronouns, whereas negative affect influences use of third-person pronouns.

Depressive speech is thus characterized by a reduced use of social referent words and fewer words linked to collective life. Regarding the linguistic behaviour of Esther Greenwood, it is noticeable that the impact of her mental disability is reflected in language. Esther's speech, especially during severe depressive episodes reveals that Esther shows linguistic indicators of suicide. All along the narrative, Esther expresses feelings of loneliness, alienation and disengagement from society.

The sense of disengagement is examined through the medium of writing. Using a linguistic analysis program (LIWC), linguistic patterns are analysed to determine the presence of suicidal symptoms in the language of Ester Greenwood. A list of nouns related to family and social environment is used to assess the interconnectedness of suicide and language use. The findings are represented in the following table:

Community-related Words	Percentages
Family	01.31%
Friends	00.48%
Religion	00.00%
Society	00.48%
Certainty	00.00%
Support	00.00%
life	02.11%

Table 04: Percentages of linguistic reference to community-related words in the passage portraying Esther Greenwood’s depressive episodes in *The Bell Jar*. p, 130.

The table represents the percentages of the use of community-related words by the depressed protagonist of *The Bell Jar* the passage portraying the period that precedes her suicide attempt. The passage extends from “Starlet Succumbs after 68-Hour Coma” (Plath 77) to “I had locked myself in the bath room, run a tube full of warm water, and taken out a Gillette blade” (Plath 78). It has been selected for word count analysis because it reflects Esther’s deep thoughts before the suicide attempt takes place.

Linguistic predictors of suicide can be discerned through the passage. The words depressed persons use can reveal important facts about the suicidal risks they have. Analysis of the

linguistic style of Esther Greenwood provides evidence of the link between her psychological reality and linguistic decisions. The low percentages of using words related to social life serves as a marker of emotional states, cognitive styles, and suicidal intentions.

Verbal manners reflect the tendencies of thought. The choice of words and the tone of speech are important determiners in analysing depressive suicidal speech. The self-focused attention that characterizes depression leads to a weakness in connecting to others. The use of fewer words related to the family and community is an indication social disengagement. Accordingly, it can be systematically used to compare the speech of depressed individuals to healthy ones. Suicidal risk among depressed persons can therefore be detected through linguistic symptoms.

Language of social disengagement is a powerful indicator of suicidal depression. Words and expressions related to social networks reflect a healthy relationship with society whereas their absence in a text is indicative of a distanced relationship.

The findings confirm that linguistic patterns are influenced by suicidal thoughts. Thus, language can be used as a means to predict suicide in depressive speech. The linguistic changes over time as suicide approaches account for a significant amount of variance.

2.6. Conclusion:

The language Sylvia Plath uses in *The Bell Jar* is reflective of the psychological implications of mental disorders. Plath manages to reveal the impact of mental disability on Esther Greenwood's verbal behaviour. Through language, the linguistic dimensions of Hysteria, Schizophrenia and depression are expressed in *The Bell Jar* through the use of a language that retells the experiences of insomnia, repression, descent, decline, self-estrangement and obsessive focus on the self. As such, mental disability results in a linguistic disadvantage as well.

Chapter Three

Th
ese undecipherable markings on
the body render a kind of
hieroglyphics of the flesh whose
severe disjunctions come to be
hidden.

Hortense J. Spillers

3-1. Introduction:

In the aftermath of the Algerian War of Independence, the issue of war disability emerged as a significant social and political challenge. It particularly started gaining prominence in post-independence literature. The character of Khalid Ben Toubal in Mosteghanemi's *Memory in the Flesh* is the most celebrated Algerian war-disabled literary figure. Mosteghanemi creates this character in a vivid, moving way that gave her novel a human and nationalist dimension. This chapter aims at examining the portrayal of physical disability in *Memory in the Flesh* focussing on the linguistic manifestations of the physic impact of disability on Khalid's use of language.

3-2- THE CULTURAL AND POLITICAL DIMENSIONS OF PHYSICAL DISABILITY IN MEMORY IN THE FLESH:

War disability is an inevitable consequence of revolutions. Besides death and massive destruction, war leaves painful scars on the bodies and minds of people. Among these scars, physical disability stands as the most ravaging trace. War disability is often regarded as the greatest sacrifice a person can give for the nation's sake. An imputed or disfigured body is a symbol of honour in any war. Yet, when the war is over, norms and principles may change. Emotions of pride and zealous nationalism may turn to deep pain, powerlessness, worthlessness and neglect.

In literature, war-imputed bodies become once again victims of the same neglect they face in life. Physical disability resulting from war occupies an almost invisible place in literary production. The scarcity of literary works portraying war disability implies that this issue is put on the margin of literature. The disabled body is put in a place that neither resembles life nor equals death, a place for pain only.

After a revolutionary fight that lasted from 1954 to 1962, colonization came to an end and independence became a reality. Algerian's aspirations for a strong independent Algeria faded away as the country entered a major recession in the late 1980's. The neo-colonial elite that seized power did not gain the consent of all Algerians. Consequently, discontent was expressed through riots, military status-quos and a civil war.

Algerian literature became a site of reflection on the political, social and psychological realities of post-independence Algeria with many poets and novelists trying to tell their own versions of the story. Algerian literature in the aftermath of independence was written in French. Writers such as Mouloud Feraon, Kateb Yassin, Assia Djebbar and Malak Haddad were educated in French schools, which enabled them to express in French rather than Arabic. Ahlam Mosteghanemi was the first Algerian female writer to publish a novel in Arabic. In her trilogy: *Memory in the Flesh* (Dhakhirat-el-Jassad), *Chaos of the Senses* (Fawda-El-Hawass), and *Abir Sarir*²¹ she interweaves the stories of personal and national failure.

The Algerian war of independence is thus the backdrop of *Memory in the Flesh*. After its publication, Mosteghanemi became regarded as a literary transgressor. The novel crossed all cultural and artistic conventions and was viewed by critics as a literary revolution. First, an overview of the novel's historical context will be given to contextualize.

21 The two first novels were translated to English by Baria Ahmar. *Abir Sarir* is not yet translated.

Memory in the Flesh is situated in post-independence Algeria. But, Mosteghanemi uses the flash back technique to recall events of the Algerian war of independence. Thus, it spans 40 years of Algerian history. Clark states that, “the narrative has a flexible spectrum that is opened and closed, being reduced from the macro to the micro level circumspection” (01).

The narrator; Khalid narrates events from his past situating himself in Paris in the 1980s. Khalid is an orphan, one-armed, ex-militant, freedom fighter during the revolution and a painter and well-known artist after independence. He falls in love with a young Algerian writer; the daughter of his ex-military leader Si-Tahar. Hayat²² becomes a symbol for Khalid’s mother, Constantine; his lost city, and even the country as a whole.

Khalid lost his left arm in a battle during the war of independence. The missing arm is a constant reminder of the donation he gives to the country. He later turns from a freedom-fighter to a painter and establishes a good reputation in Paris as an artist. Khalid obsessively paints the bridges of Constantine. They become a symbol for his love, his country and his unstable physical and psychological state.

Khalid starts the narrative with images retrieved from his childhood, schooling, imprisonment and inscription in the army. He makes constant flashbacks to the 1950s, 1960s and 1970s and moves in scenes from Algeria, Tunisia and France. He provides psychological insights on the impact of the Algerian revolution on both the people and the political elite. The story then is a profound description of his emotional responses to the troubling events he witnesses throughout his life.

Events in *Memory in the Flesh* are recounted anachronistically as there is no time sequence in the narrative. This temporal dissonance gives the work a personal rather than a historical

²² Hayat is the second name of the novel’s heroine. Her father Si Tahar Abdul-Mawla originally gave her the name of Ahlam. Yet, because Abdul- Mawla family was living in Tunisia and the father was busy in the fight for independence, the message in which he gives his daughter her name reached the family more than five months after her birth. Her mother had already given her the name of “Hayat”. This latter was the name she identifies with, though her official name is “Ahlam”.

aspect. Khalid and Hayat's story is told as being the story of the Algerian people. The brutalities of war are linked to the physical traces it left on Khalid's body and its devastating impact is associated with his unhealed memory.

Through Hayat, Khalid's past is brought back into life. She revives his feelings for Constantine and Algeria. She also reminds him of his mother. Through her jewellery (Mekyass)²³, Khalid's memories of childhood, of his mother's kessra²⁴, her traditional dresses, and her infinite love and care come to invade him in a rush. When hearing Hayat's family name, Khalid goes back to memories of her father and his revolutionary commander Si Tahar Abd-El Maoula. Hayat thus, is the embodiment of all his adorned life experiences. In a monologue, Khalid wonders, "How beautiful it is for martyrs to return that way in your looks, how beautiful it is for my mother to return in the bracelet in your wrist, and for my homeland to return today in your presence" (Mosteghanemi 40). Khalid's first meeting with her brings him to a confrontation with his past, his country, and his heart as well.

The novel is characterized by cross-referencing. Khalid first considers Hayat as his own daughter when he sees her for the first time. She was just five months old when her father charges him to officially register her as "Ahlam". When Khalid meets Hayat/Ahlam for a second time in the opening of an exhibition of his paintings, he sees her as a young attractive woman and develops a strong love towards her. The image of the daughter and the beloved is reversed in Hayat's case. Hayat meets in Khalid someone who closely knows her father and can provide private information about him, information going beyond the image of the national icon he has. So, she encounters in Khalid the image of a father, an image which fades away because of their mutual fascination. Cross-referencing gives the novel a psychological dimension.

23 'Mekyass' is a piece of Jewell (bracelet) that women in Algeria; particularly in the eastern part wear in their wrists. El Mekyass has a symbolic value as it represents a symbol of belonging to the Algerian culture and a means to show pride of its traditions.

24 'Kessra' is a mane of a type of home-made bread in Algeria.

Memory in the Flesh represents the ravages of colonialism. Mosteghanemi exposes the fate of revolutionary ideals in a post-independence nation. The story of Khalid represents the disappointment and displacement of the freedom fighters who sacrificed for the nation when the new bourgeois class accumulated wealth and gained political power. It compares Algeria's past and present demonstrating that after the bitter struggle for independence, the situation did not change to meet Algerians' aspirations. The complexity of the novel reflects the complexity of Algeria's present.

In *Memory in the Flesh*, Mosteghanemi leads another war of decolonization. Her choice of Arabic to write her novel is a victory of the policy of Arabization that Algeria started after independence. Hamad states that, "By writing in Arabic, Mosteghanemi accomplishes another victory over the system of colonization...This implies that the liberation of the land was only the first step in decolonizing the nation, not the end of it" (44). Mosteghanemi dedicates the novel to her father; the man who died without being able to read in Arabic, and to Malik Haddad; the Algerian poet and novelist who swore after independence not to write in a language which not his own (Mosteghanemi 02). The novel is thus Algeria's story, written in Algeria's own language.

Besides being a story of the nation, *Memory in the Flesh* gained another victory by being written from the victim's perspective. It reverses the order that allows only the powerful victor to write history. Mosteghanemi gives voice to Khalid to narrate his experience and depict his successive failures and great losses. Khalid lost his mother as a child, his left arm as a fighter, his creative ability as a painter, and status as a national figure. His tragedy culminates by the loss of his brother as well as the woman he loves.

Memory in the Flesh also evokes the question of identity. Like many postcolonial works, the novel portrayed issues of cultural belonging by representing characters that embody within

themselves many cultural contradictions. Hamad points out that “the characters represent Algeria in its wounds, pain and dilemmas” (Hamad 50). The characters of the novel—particularly Khalid and Hayat—are caught between the Arab Islamic civilization and the western civilization. Mosteghanemi, through the character of Khalid, harshly criticizes the way the Cultural Revolution in Algeria was carried out. She expresses strong discontent with the priorities the Algerian government set after independence:

There were changes in factories, farmers’ villages, buildings, and big plantation, but human beings were left to the last...all the industrial revolutions in the world started with human beings themselves, and for this reason Japan and Europe have become what they are today... but Arabs went on building big buildings and calling the walls a revolution. (Mosteghanemi 97)

This comparison reveals that Mosteghanemi aims at giving her work a cultural and political dimension. She goes beyond telling Khalid’s and Hayat’s story to telling the story of Algeria after independence. The novel creates a dialogue between the old and the new generations and sets the scene for a moving representation of the triumphs and failures of Algeria.

3-3. THE AESTHETIC DIMENSIONS OF PHYSICAL DISABILITY IN *MEMORY IN THE FLESH*:

Memory in the Flesh is often read as a searing love story and a hymn to Constantine; Khalid’s lost city. Critical analyses of the novel tend to give importance to the way it portrays the fate of a celebrated Algerian painter, and an ex-freedom fighter seduced by a young Algerian novelist who came to embody the city for which he grieves. Thus, disability representation in *Memory in the Flesh* has often been neglected. This part attempts to analyse

Memory in the Flesh as a disability narrative by depicting the different aesthetic dimensions of disability represented in the novel.

3-3-1: Disability as a Metaphor for the Nation:

The memories of the body in *Memory in the Flesh* are memories of the whole nation. Like Algeria, the character of Khalid has psychological and physical postcolonial deformities. At twenty seven, Khalid has a part of his body amputated. It is the price he pays for independence. This price is so high and elevated, similar to the price Algeria had to pay during the Revolution. Khalid does not have another choice, “Joining the army was no more than an undeclared attempt to look for a more beautiful death, out of all the pathological feelings that filled me with hatred for everything” (Mosteghanemi 27), Khalid declares. The revolution was the outcome of the feelings of despair and oppression that Algerians suffered from. Like Algeria, Khalid has to sacrifice for the sake of freedom. The removal of the French colonizer costs him the removal of a part of his body as it cost the country the death of millions of Algerians.

The physical amputation solved Khalid’s immediate problem as it saved him from death. Yet, it resulted in serious psychological and social consequences. Similarly, independence gave Algerians the freedom they longed for. However, it was not the cure-all and the end-all of Algeria’s problems. “History made its turn and the roles were exchanged. Now, we no longer reject France, it is the reverse... we are deadly humiliated, and humiliation kills” (Mosteghanemi 319), Khalid laments. Decolonization gave rise to new challenges concerning the building of a new nation. The injured body becomes the symbol of the injured nation. It

tells the story of grief, pain and disappointment. Disability in this case is a metaphor for the country's disabled fate.

Having to co-exist with disability and find new ways of living a normal life reflects the choice made by Algerians in the post-independence era. Khalid manages to turn disability into a new ability and create new opportunities out of it. Hamad says that, "Mosteghanemi captures the impact of colonialism on the nation by capturing the impact of amputation on an individual" (Hamad 51). Through Khalid, the reality of Algeria's critical situation is comprehensively understood through understanding the consequences of disability on Khalid's life.

As a handicapped person, Khalid experiences many psychological transformations. The physical scars the war leaves on his body are similar in impact to the massive destruction French colonialism left in Algeria. Like Algeria in the post-independence era, it is so hard for Khalid to stand again and find his way in life. Building a new relationship with the world becomes the basic challenge for both. Algeria had to choose between Arab and French culture. Concerning economy, Algerians had to opt for communism or capitalism and had also to build strong political institutions. Similarly, Khalid had to choose between living in Algeria or France. Perhaps the most decisive choice he had to make is the one between writing and painting.

Collision with the painful realities of disability awakens in Khalid feelings of loss and confusion. This confusion is partly the result of the new complicated relationship with his country. "Between the first and the last bullet, hearts had changed, aims had changed, and the country itself had changed" (Mosteghanemi 44), Khalid stresses. Disability changes both his vision about his country and his people's attitudes towards him. Khalid says, "It is an awkward contradiction; to live in a country that recognizes your talent but rejects your injuries. To

belong to a country that respects your injuries but refuses you as person” (Mosteghanemi 44). Mosteghanemi skilfully links individual wounds to the wounds of the nation as a whole.

The interconnectedness of the personal and the national in *Memory in the Flesh* situates disability in its wider historical context. Therefore, Khalid and his country are similar. They are both victims of French colonialism and they both experienced disappointment and unfulfilled dreams after independence. Both attempt to attain stability. War troubles the integrity of both the personal and the national self, creating disunity, displacement and fragmentation. However, disability stands as an obstacle hindering their aspirations.

3-3-2. Imputed Arm and Imputed History:

The imputed arm in *Memory in the Flesh* stands as a metaphor for the history of Algeria. Mosteghanemi claims that the new generation goes along unaware of their disconnection from the past. She denounces that the new generation of Algerians born in the aftermath of independence innocently believes the version of history written by the new elite and takes for granted all what is presented to them as historical truth. Mosteghanemi however holds a different conception. Through Khalid, she expresses objection and discontent:

You must realize that you will not understand anything of the past you are looking for, nor of the memory of the father you never had the chance to know unless you understand the traditions of Constantine and adhere to them. We will not discover our memory by looking at a picture, postcard, or even a painting like this one. We only discover it when we touch it, when we wear it and live by it. (Mosteghanemi 77)

Memory in the Flesh calls for a new perception of history based on direct contact with its sites and icons rather than just hearing or reading about it. Tanja Stampfl points out that, “The work depicts one individual’s quest and demarcates how far this individual is able to master

the “now” that is his destiny, place, geography and history” (34). History and the “now” are therefore closely linked in the novel. The latter is shaped by the former and can never be understood without it.

The disabled body thus, becomes a site to see and understand the country’s history. Unlike all other types of disability, war disability assumes a national and historical dimension. Mosteghanemi defines war disability as, “The nation’s violent signature on the masses’ bodies that become abruptly alienated, belonging neither to the dead nor the living, but to an arena only of pain” (Mosteghanemi 20). Through Khalid, she bitterly laments the change that rendered war disability a personal rather than a national issue.

Hamad explains how, “The body which once honourably served as a collective historical memory, because of the logic of time, turns into a private memory that concerns no one but the disabled person” (19). After independence, the logic of the war time changed. Mosteghanemi stresses that collective feelings weakened and personal interest became the ulterior motive for political and social actions. As a result, the ideal of self-sacrifice aroused more pity than pride. History in *Memory in the Flesh* serves both as a cause and a justification of disability. The mutilated arm stands as an allegory for the mutilated historical truth. Khalid claims to use the right arm he still has to defend the cause for which he lost his left one.

Disability in *Memory in the Flesh* stands as a historical identity. When Khalid meets Hayat for the first time in Paris, in an exhibition of his paintings, he notices that she is equally attracted by his missing arm as by his tableaux. Khalid describes it as a meeting with history, with memory, “You wonderingly looked at me, and before you said anything, your eyes were discovering the empty sleeve of my jacket hiding timidly in my pocket... that was my identity card” (Mosteghanemi 52). Disability enables an authentic identification with the nation. It substitutes all forms of official papers, it is a historical fact that Khalid bears on his body.

3-3-3. Disability as a Metaphor for Being an Orphan:

The country in *Memory in the Flesh* is conflated with the image of the mother. Khalid joins the revolution after his mother's death. Defending the national cause is a kind of psychological compensation that helps him transcend the feelings of loss, sadness and loneliness. As such, the disability which distances Khalid from the Algerian War of Independence is viewed as another form of orphanhood.

As an orphaned ex-militant, Khalid reflects about his childhood. Memory takes him back to days of his imprisonment. In el Kodya²⁵, Khalid has his first imprisonment experience for participation in the demonstrations of 1945, when he first meets Si Tahar. At that time, Khalid's mother is still alive. He bitterly admits that his mother's grief is the only reason for which he regrets being imprisoned. Through Si Tahar, Khalid reflects, "He knew my mother very well, and he knew the extent to which my detention would affect her" (Mosteghanemi 30).

Thus, Khalid is strongly attached to his mother. Her death has certainly caused him serious emotional suffering. After becoming an orphan, Khalid loses all feelings of belonging. Three months later, he joins the revolution in an attempt to be related to the mother once again; the mother this time is Algeria. Khalid describes his decision to join Si Tahar in his armed fight as strongly linked to his personal motives, "I was the only one who left behind just a little brother and a father busy with the demands of his new young bride" (Mosteghanemi 30). This idea of looking for the mother-son relationship is Khalid's ties with the revolution is further confirmed as he says, "Si Tahar asked me about my family, particularly my mother, and I told him she died three months ago. I guess he then understood everything" (Mosteghanemi 33).

25 'El Kodya' is the name of the prison where Khalid has his first detention experience.

As such, disability in Khalid's case doesn't only mean losing an arm, it means losing the new sense of belonging that comforts him. Disability distances Khalid from the new mother to which he is attached. The conflation of the mother and the country reaches its peak as Khalid says, "Destiny pushed me away from the only refuge I had... I didn't say anything. I felt-for some reason- that I became an orphan once again" (Mosteghanemi 38). Disability revives the feelings of orphanhood which were diminished by his love for the country.

The country becomes the object of love that can fill the void left by the mother's death. It eventually turns to a source of contradicting feelings. The imputed arm meant a different form of amputation from the sole refuge that can compensate maternal absence; the revolution. Laurant says that, "Khalid discovered in Algeria his dead mother ... He was full of dreams and energy until two bullets from the colonial army found their way to his left arm" (Laurant 49). Expulsion from the armed fight is another form of a mother's death.

The boundaries between disability as a medical physiological fact and its psychological implications collapse. The traces of disability on the body are perhaps less damaging than its traces on the soul. For Khalid the orphan, being disabled does not mean alienation, repression, and physical pain only. It means also a lost sense of belonging, a new and more painful experience of orphanhood.

3-3-4. Disability as Memory:

The title of the novel: *Memory in the Flesh* describes the significant connection between disability and memory. The flesh represents the physically disabled body. As such, it has different and sometimes contradicting meanings. The disabled body may exhibit emotions of pain, shame, regret as well as pride and inner-satisfaction. These contradicting feelings are the outcome of both the individual's psychological state and external events. Accordingly,

memory becomes the means of recalling all the situations that relate to disability. When linked to a physically impaired body, memory acquires different meanings.

For Khalid, memory enables the retrieval of painful and troubling events. As the narrative relies on the flashback technique, most of the events Khalid recalls are linked to sad and unpleasant situations. He describes at length the moment when he lost his arm and provides a detailed representation of the physical scene and a vivid account of his sensation:

That day, Si Tahar tried to keep a natural steady voice. He bid me farewell as he used to do before every new battle. Yet, this time, he knew that he was preparing me for my battle with destiny... I didn't say a word... tears crystallized in my eyes, I was bleeding and the pain of my arm was gradually transmitted to my entire body. (Mosteghanemi 36)

Khalid shows an astonishing capacity to capture all the details of the scene. Being injured and bleeding does not prevent his memory from saving the way the traumatic event took place. He is able even to remember the voice of his commander, his words and his helplessness. In psychic terms, Khalid experiences a hyper-arousal of senses that enable him to integrate the overwhelming negative emotions with thoughts. As a result, while creating the narrative, memory serves as a reminder of the terror that disability causes. Narrating disability in this case helps to purge out all its consequent pain.

Being endowed with the ability to forget is generally perceived as a healing power. Yet, Khalid is deprived of that gift. Khalid says, "I bear my memory on my body" (Mosteghanemi 135). The imputed arm constantly reminds him of the traumatic experience. That is why he is unable to forget the moment which marked his life. He remembers it with both its positive and upsetting aspects.

In *Art and Memory*, Christine Steineck says that, “Memory concerns something that is not physically present” (07). Despite of its abstract nature, memory in *Memory in the Flesh* is closely linked with the physical condition of the body. Khalid reflects, “We carry our memory in the flesh, and that requires no explanation” (Mosteghanemi 136). This in fact makes oblivion even harder. As Khalid fails to forget, memory gives the traumatic event immunity against time.

Along his disability narrative, Khalid is unable to find peace with the past. Memory recalls Constantine in his paintings. Baaqeel explains the representation of Constantine bridges in Khalid’s art as “an attempt to a solution or a promising avenue through which he can reach an accommodation with the painful past” (93). Yet, this accommodation is never reached because the bridges revive his memories of pain, loss, horror and estrangement. Khalid states that when he paints bridges, he is in fact painting himself, as the bridge “was simply an expression of (his) situation that is forever in suspense” (Mosteghanemi 42). Bridges, and all connections with the past, are means to make the traumatic experience of being disabled re-lived and re-told.

3-4. SEMANTIC FEATURES OF DISABILITY REPRESENTATION IN *MEMORY IN THE FLESH*:

The issues of human alienation and self-victimization are important themes in *Memory in the Flesh*. The novel addresses these themes with reference to physical disability and its damaging psychological consequences. Disability produces feelings of self-victimization and alienation from society. As such, disability narratives reflect a certain linguistic bias towards the use of items and structures related to these themes. This implies that in *Memory in the Flesh*, the construction of a disability narrative is a linguistically conscious activity as the

linguistic choices made by Mosteghanemi match the semantic options at her character's disposal. By exploring the semantic features of disability representation in *Memory in the Flesh*, the aim is to determine the extent to which the psychological impact of physical disability affects the lexico-semantic patterns used by the disabled character.

3-4-1. Alienation and Physical Disability:

This part attempts to examine *Memory in the Flesh* in terms of linguistic patterns through analysing the lexical choices made by Khalid Ben Toubal and demonstrating the role played by his physical disability in shaping the semantic features of his speech. The focus is on the language of alienation and its contribution in capturing the thematic preoccupations and social vision of Mosteghanemi. Khalid's alienation²⁶ is experienced and expressed through language.

The Oxford Dictionary of Psychology defines alienation as "turning away; inducing someone to become indifferent or hostile or causing their affections to be diverted; the state of being an outsider or feeling detached from society, the state in which one's emotions are experienced as being foreign so that the self and the outside world appear unreal" (03). The concept of alienation can be traced back to the Latin concepts: alienation (*alienare*) and (*alalienatio*). The term was at first used to indicate the sale of a commodity or the transfer of a property. It also has medical and psychiatric connotations.

The term was used in western civilization to indicate the separation of individual consciousness from the "other". It was used to embody feelings of loss of affection, meaninglessness, powerlessness, and self-estrangement. It also entails cultural difference and social isolation. The basic characteristics of an alienated person are anxiety, doubt,

²⁶ Alienation is a term that covers a wide range of meanings. From a materialist perspective, alienation is the separation of man from his natural being and his subjection to an economic system that does not provide him with the means of self-realization. Marx and Hegel believe that alienation is the result of capitalism. In the context of this research, the meaning attributed to alienation is not the Marxist one. Alienation is rather given a psychological dimension, separate from all economic or racial connotations, by focusing on the forms of alienation that all human beings can experience.

psychological pain, and internal tensions. As a result, people experiencing one form of alienation or another are noticed to have social and psychological dysfunctions. Alienation affects normal systematic action and shapes unhealthy attitudes towards the 'Other' and towards life as a whole.

Psychiatrists claim that no human being is free from feelings of alienation. Fanon says that, "We bear a form of otherness within ourselves" (23). Alienation is thus a state of being that exists and persists within every individual. Yet, it becomes pathological when the person cannot find ways of co-existing with it. An individual with a normal psychological condition may face alienating situations on daily basis. The ability to transcend such situations by finding ways to cope with the 'Other' determines one's normality. In the opposite case, the person shies away feeling that his/her identity and self-integrity are in danger. Alienation in this case becomes pathological.

Human identity has two different levels: the individual and the societal. Self-integrity implies the co-existence of the two levels whereas alienation means a misbalance. The inability to maintain a balance results in conflicts and psychological distress. In *Re-thinking, Re-shaping, Re-defining Disability*, Thomson says that, "Conflict of identity breeds tension in a man who loses his unity of being" (17). Identity crises mean fierce struggles and perpetual suffering. Thomson points out that these identity crises may have positive effects on the growth of individual identity and the diversity of the societal one. However, when the individual does not have the ability to sustain difference and estrangement, identity crises leave permanent scars on his/her personality.

Melvin Seeman in his work: *The Meaning of Alienation* provides a comprehensive analysis of alienation as a psychological concept. He defines it as a mode of experience in which the individual experiences himself as alien within his group or society. He points out that

alienation is a universal concept that has five major modes: powerlessness, meaninglessness, normlessness, social isolation and self-estrangement (Seeman 21). He also identifies six basic factors that determine human behaviour: physiological needs, security and safety needs, need for love, affection and belonging, competence prestige and esteem, self-fulfilment, and curiosity and need to understand (Seeman 23). If these needs are not satisfied, Seeman maintains, the individual may fall a victim of alienation.

In the case of a disability, these aspects of alienation intensify as disability involves physical difference that can be directly noticed on the body²⁷. Disabled people are subject to multi-factors of alienation. In addition, they experience it differently. Disabled people encounter an external world which further intensifies their internal conflict by continuously designating them as different and abnormal. Alienation is closely associated with their physical condition. All the psychological pain caused by disability cumulates to create a kind of dissociation between the individual and the societal self.

Situations of personal or social disadvantage result in alienation. Disability theorists such as Collin Barnes and Raymond Lang claim that the social position of disabled people has many alienating dimensions. They stress that the social system makes the conditions of disabled people complex through the lack of social integration mechanisms. Barnes says, “We are disabled by society not by our bodies” (Barnes 10). He stresses that society exercises an alienating disabling pressure on physically impaired individuals. As such, even if their bodies allow them a certain access to social services-though a limited one in most cases, social

²⁷ It is worth mentioning here that the interconnectedness between alienation and physical disability is still a matter of debate. James C. Romeis conducted a study in which he brought contradictory evidence as to the alienating impact of disability. Romeis compared a sample of unimpaired workers and a sample of severely impaired workers. The findings revealed that five years after a work-related injury, impaired workers no longer suffered from any form of alienation. Yet, these findings cannot be generalized on all physically disabled people for two reasons: First, Romeis considers a sample of impaired workers who received social and psychological assistance after the impairment, which is not the case of all impaired people. Second, the study focused on the work place only. This latter is a limited social network. Accordingly, workers' behaviour there does not necessarily resemble the way they interact in other situations, with society as a whole. James C. Romeis. Alienation as a Consequence of Disability: Contradictory Evidence and its Interpretation. *Journal of Sociology of Health and Illness*. Vol. 5. N 1. 1983.

attitudes towards disability remain always an obstacle hindering their total integration as normal individuals.

Rothschild also holds a similar viewpoint. She argues that the disabled person “is crushed by too many heterogeneous and warring influences which end up dominating the mode the mode and outcome of his disabled life because at a very early point of his life, they were successful at taking away his sense of autonomy and self-determination” (10). For Rothschild, physical incapacity necessitates reliance on others, which implies dependence. She points out that it is the responsibility of society to help enhancing the sense of autonomy in disabled people so as to facilitate their full integration.

Possessing an impaired body meant for a long time staying away from mainstream social life. The assumption that physical disability disturbs normal social life and prevents participation in the productive work force had serious consequences on the disabled individual’s self-esteem. The disabled person comes to feel that he/she has less control over his/her own life. As such, the disabled individual is caught in the whirl of self-blame, inability to meet society’s expectations, and discontent with the physical condition. Romeis argues that, “Society pushes the disabled person to play the role of the ‘invalid’ who is seriously incapacitated for life, which hides his disability and tries to pass for ‘normal’... Consequently, they may feel uneasy with society” (123). Feeling uneasy with society implies feeling alienated.

3-4-2. Emotional crisis and Trauma-Related Lexicon:

This theoretical account of physical disability and its alienating effect is illustrated in *Memory in the Flesh*. The novel vividly captures the psychological state of Khalid during the trauma of losing an arm and after he opts for art to seek recovery and social integration. Khalid suffers from external calamities: war, orphanhood and amputation. He has an acute

sense of rootlessness which is manifested in his alienation from himself and the different aspects of his social life. The way Khalid chooses his own variety of language is a strong evidence of the alienating emotional crisis disability produced in his psyche.

The analysis of lexical categories used in *Memory in the Flesh* reflects meanings related to a serious emotional crisis. After losing his arm in a battle, Khalid starts to feel powerless. His first visit to Si Tahar's mother after amputation made him aware of his physical limitation:

That day, you walked across me; you made two shaking steps and your little hands stretched towards me seeking help. At that moment, I felt how terrible it (amputation) was. I tried to catch you with the only hand I still had but I couldn't do, I couldn't put you on my lap and prevent you from escaping... it was my first exam, my first complex. (Mosteghanemi 113)

Such an incident is a turning point in Khalid's self-perception. The powerful ex-fighter is now unable to catch Hayat's²⁸ hand and prevent her from falling down. This makes Khalid conscious of his powerlessness and helplessness. Khalid realizes that he can no longer live a normal life. This incident marks the beginning of a series of physical limitations that alienate the disabled body and distance him from social life.

Besides alienation from social life, disability marked the end of Khalid's military life. As an orphan, the War of Independence was his sole refuge. Being unable to take part in the war that brought him back to life intensified his feelings of alienation. Khalid calls himself "the man who was rejected by both life and death, to be left in a space for pain, thrown to the unknown" (Mosteghanemi 35). Semantically, Khalid's speech is characterized by employing a lexicon related to feelings of powerlessness, incapacity, pessimism and helplessness. The recurrence

²⁸ Hayat then is a little baby of seven months and this first meeting takes place ten days after Khalid's amputation.

of negative emotional words such as death, pain, terrible, the unknown, gives the narrative a sad tone to reflect disability's painful alienating impact.

Furthermore, Khalid experiences uncertainty and doubt. When Hayat starts asking questions about her father's past, Khalid's immediate answer is, "He (Si Tahar) was not one of the fighters who joined the Revolution in the last wave, just to guarantee their future, the fighters of 1962 and the heroes of Algeria's last battles" (Mosteghanemi 42). Khalid seems to lose confidence in the country's new elite. He is trapped in thoughts of meaninglessness of life and uncertainty of the future, "Is it because I no longer know how to walk forward on a straight line that does not take me back to this country, to this memory" (Mosteghanemi 311). This uncertainty extends to religious beliefs as he stops fasting and praying.

Normlessness is the most apparent outcome of disability. Psychiatrists believe that the individual is not aware of the existence of norms until becoming an exception. The ideology of normality imposes itself to make all forms of deviance unacceptable. Being disabled, Khalid feels he is cast away from society. Normlessness leads to separation and social isolation. The disconnection between Khalid's actual and ideal self is also apparent in *Memory in the Flesh*. Seeman calls the ideal self the "ought-to-be" self; i.e. the state of the self the individual seeks to attain.

Khalid also suffers from cultural estrangement. He refuses to make part of Algeria's post-independence cultural institutions. Following his first exhibition in Paris, Khalid bitterly admits, "My exhibition was over. It interested only the French newspapers devoted to art and very few Arab magazines ... only Algerian media did not give it any attention, out of neglect, as usual" (Mosteghanemi 179). Khalid openly expresses his deception about the cultural scene in post-independence Algeria.

This deception is not limited to governmental institutions but to individuals as well. He satirizes the way his friend Abd-el-Kader; an Algerian journalist, annuls covering the exhibition for a festival in which people “could dance, shout and sing till dawn, spending all the Dinars accumulated in their pockets and the Libido accumulated in their bodies” (Mosteghanemi 180). This criticism takes Khalid back to the time when he worked in Algeria. He declares that the government’s intervention in all forms of artistic production leads him to resign his post as a sensor to devote his culturally-estranged self to unrestricted artistic production.

Home as the comfort zone is lost and exile, for Khalid constitutes an alternative but a less comfortable refuge. He moves from a place to which he belongs by right to a place to which he belongs by compulsion and choice. In *Literature from Exile*, Ciocirlea says that, “For displaced artists, the linguistic aspect of exile is the most painful, leaving behind a perpetual uncertainty in expression and hence in behaviour” (06). Though self-imposed exile for Khalid is a chance for maturity and evolution, complete adaptation of the new space cannot be achieved. He can only come to a form of compromise between what he was and what he becomes. As Ciocirlea puts it, Khalid “assumes a state of scepticism, of generalised suspicion seen on the conceptual level as a profound understanding of the unstable nature of the world” (06).

After the traumatic amputation experience, Khalid suffers the breaking pain of separation from the home space. This pain results in a pathological alienation. Khalid’s approach to life after disability changes and “his artistic creation in exile entails abandoning all social, cultural and linguistic constraints allowing the practice of unfettered freedom, sometimes carried almost to an extreme” (Ciocirlea 07). He remembers with deep pain and secret pride what his doctor said few months after the amputation surgery, “start painting. Who knows; maybe you

will not need me anymore” (Mosteghanemi 212). Painting in his case becomes a counter-alienation force.

However, this force is not really successful in bring him back to normal social life. Khalid’s interpersonal relations are limited. His social network in France constitutes of Katherine, Ziad, Hayat and her uncle. In Algeria, Khalid remains in contact only with his brother Hassan. He is alienated even from religion and spiritual realities. This separation between him and the social substance is represented as a surrender or sacrifice to attain unity and preservation of ideals. It is a conscious attempt to find internal peace and escape the question that people never stop asking whenever faced with a physically disabled person. Khalid says, “All eyes were asking one question that lips could not utter; how did this happen?” (Mosteghanemi 153) Khalid’s mode of expression reflects a self-imposed alienation.

Khalid’s self-imposed alienation is aggravated by the absence of stability in his life. He says that after independence, realities became doubted, historical truths falsified, and martyrs disrespected as the ideals they fought for were not maintained. Khalid ceases to have contact with his ex-friends. The collective change of ideals and denial of the revolutionary principles for which they fought renders him alone in facing the wave of betrayal and standing against it. He loses his universality and experiences an extreme discordance with his new environment. Khalid deliberately surrenders and relinquishes his life and relations prior to his impairment with a desired end. This conscious withdrawal from life widens the gap between him and people. Ahmed Abuzeid calls this, “A process of emptying the self, and thus establishing it as an objectively universal substance” (10).

Khalid’s unfulfilled needs represent the most complete expression of alienation. His alienation is explicitly social and implicitly personal. His failure to identify in society

constitutes the major theme of the novel. The novel foreshadows themes of failure, frustration, futility, disharmony, isolation, rootlessness and obscurity as inescapable conditions of life. Thus, alienation stems from and contributes to Khalid's intellectual depth.

3-4-3. Bridges and the Disabled Body: Ever in Suspense.

Perhaps, the only positive aspect of Khalid's alienation is being able to express freely. Alienation and exile turn physical disability into a possibility of expressing without restriction and behaving without worries and obligations. Khalid becomes free from the cultural coercion that dominated post-independence Algeria. He sets free all his creative and sometimes destructive impulses. The lost native place from which he is alienated becomes the topic of his artistic meditation and creative expression.

Khalid obsessively paints bridges. Through painting the bridges of Constantine, Khalid recreates the world that alienates him. Ciocirlea considers this "an attempt to recreate it (the native place) or destroy it on a subconscious level" (06). Khalid's first tableau is called "Nostalgia". It is Khalid's first psychological and emotional response to disability. References to "Nostalgia" throughout the narrative are always charged with the feelings of alienation, pain, loss and separation that Khalid experiences just after his amputation. It reflects Khalid's growing sense of hopelessness and despair but it stands as a constant reminder of his ability to survive and overcome disability. "Nostalgia" is not only a representation of "El Hbal" bridge²⁹ but a hymn to the lost city and the lost normality. By painting a bridge on the first place, the disabled body is trying to demonstrate an ability to recreate the place that witnessed the traumatic shift from able-bodiedness to permanent disability, loss and alienation.

Reading *Memory in the Flesh* from an exilic-linguistic perspective, the process of meaning making is found to rely on alienation-related lexicon. Deciphering the multiple

²⁹ 'El Hbal' is a Bridge in Constantine.

dimensions of the word bridge helps discovering the semantic depth of Khalid's speech. The bridge symbolizes a new canal of connection with the lost city. It embodies the notion of being distanced but close, far but near, and absent but present. Through building bridges, man challenges geography and nature to create new possibilities of encounter. Similarly, through painting bridges, Khalid challenges his physical disability and consequent alienation to create possibilities of encounter with his native city.

The notion of challenging physical impairment through evoking images of nature and geographic facts is recurrent in *Memory in the Flesh*. Khalid reflects:

Those who believed that 'mountains never meet' were wrong, and those who built bridges between them, so that they can join hands and meet without surrendering their height could not truly understand the laws of nature ... Mountains meet, but only in earthquakes, in nature's great calamities ... Then, it is not to join hands but to be destroyed, to turn into one soil... and so we met. (Mosteghanemi 97)

Khalid describes his love affair with Hayat using geographic terminology. Bridges are used as a metaphor for a love that was born against the laws of nature. Both Khalid and Hayat are represented as mountains, separated by age, interests and memory. Despite all attempts to find a compromise, the laws of nature triumph. Khalid describes Hayat as a "volcanic mountain" (Mosteghanemi 297). Deeply affected by her destructive nature, he comes to the conclusion that their love "was born amidst fires" (Mosteghanemi 298). As such, it can never last without destroying them both. On a lexical level, the recurrence of words related to nature such as mountains, bridges, volcanoes, soil, fires and earthquakes is an allusion to the unstable nature of the world and to Khalid's unstable condition after disability.

The creation of the past native territory in the new exilic background symbolizes a denial of the idea of distance in space. Constantine becomes the city that “lives in Khalid” not “the city in which he lives” (Mosteghanemi 275). It is a new way of inhabiting the native land and overcoming alienation. The bridge as an object of recall becomes idealized. It is the only way to purge out bitterness of alienation and exile. Hamad states that, “The bridges of Constantine hold more symbolism for Khalid than simply a connection with the physical place. The bridge connects him with his former self” (Hamad 45).

The bridge is *Memory in the Flesh* is also a bridge with the past. It reflects the peak of Khalid’s locative crisis. Painting a bridge is a reference to a past that will never be abandoned. It is a connection with memory, an expression of the physical body, and an oath of loyalty to the past, culture, traditions and ideals of the home country. Colouring bridges was in fact no more than adding lively colours to painful memories, “The colours suddenly started to take on the colours of my memory and became a gaping wound very difficult to stop ... As soon as I have finished one neighbourhood, another would be aroused. As soon as I had finished one bridge, another would spring to mind” (Mosteghanemi 276). The gaping wound is that of amputation, of alienation, and of being no longer able to live and love and ‘normal’ people do.

In very alienated individual, there is a crisis that manifests itself through language. The constant use of words related to space, location and time such as bridges, mountains, houses, hospitals and exhibition rooms, reflects a linguistic attempt to overcome feelings of rootlessness. This lexical choice becomes a means to convey physical as well as emotional attachment with the home land.

Besides being a connection with the past, painting the bridges of Constantine is a manifestation of Khalid’s contradictory feelings towards his native city. For instance, Khalid laments his brother’s death by saying that “Constantine’s bridges did not take him anywhere”

(Mosteghanemi 389), an expression that conveys a deep deception. Khalid believes that a city with a glorious history like Constantine's should at least be able to give its people a decent life. Khalid further criticizes, "Here is Constantine, the bad totalitarian mother that kills her children and swears to bring them back to her, even as corpses" (Mosteghanemi 391).

Through the bridge, Khalid glorifies Constantine's past but criticizes its present. Ciocirlea calls this artistic contradiction "a constructive penalty and a mandatory step towards purification" (03). Khalid puts in his paintings his most complex vision about the present and the past. They are an attempt to go back to the Constantine of his childhood and a declaration of abandoning all its present cultural, social and even linguistic forms. After being physically detached from Constantine, Khalid's intrinsic impulses are purged out, possessing both creative and destructive shapes. This is what Ciocirlea calls the art of counter exile

3-4-4. Temporal and Linguistic Crises:

Distance in time is an effect of distance in place. The exilic experience of the disabled body creates ruptures in spatial as well as temporal relations. Alienation from time is a feeling common among disabled people. This feeling even aggravates when the exiled disabled person is an artist. Artistic sensitivity produces a serious alienating impact when combined with physical disability. *Memory in the Flesh* portrays the temporal dimension of alienation through Khalid's complex relation with time.

Ciocirlea claims that, "The artist -departed from his native land- does not perceive the linear flow of time, having the feeling that things happen too recent or too far in the past" (05). This is relevant to Khalid's case. Khalid openly expresses boredom with the way his days and years pass, being similar to one another, without any prospect of change. Khalid seems to totally suspend real time to replace it with his subjective one. The day of his first meeting with Hayat, Khalid says, "On an agenda full of dates and addresses that have no

value for me, I put a circle around that date, I wanted to make it special... Before you entered my life, days were as empty as the papers of my agenda” (Mosteghanemi 65). He neglects the temporal aspect of the world except when it comes to important events that make a turning point in his life.

Khalid’s alienation from time lasts for the eight years of his self-imposed exile. Eight years that seem to him long because they are painful but short because they are so similar. Khalid describes them, “Eight agendas for eight years, with nothing special. The eight years were like one another, without any special date, except the date of my exile. It was an exile that I tried to sum up with misleading calculations that make of the exilic eight years just to eight agendas” (Mosteghanemi 65). Khalid’s internal conflict reflects the drastic change that disability brings to his life. The eight years of disability and exile seem to be a missed period in his life.

In addition, importance is also given to national days. Khalid remembers the First of November as the most glorious day in Algerian history. He decides to make it more special by linking it to a personal event. It is the day when he decides to write his novel.

Time in *Memory in the Flesh* is viewed as cyclical, events are repeated and characters too. Khalid’s mother reappears again in the character of Hayat. Similarly, he sees in her his lost commander Si Tahar and Constantine; his lost city. The narrator does not draw clear dividing lines between places, characters, and events:

Let me hold in you all those whom I loved. I look at you and recall in your smile and the colour of your eyes Si Tahar’s features. How beautiful for martyrs to return that way in your looks! How beautiful for my mother to return in the bracelet in your wrist, and for my homeland to return today in your presence.
(Mosteghanemi 393)

Khalid tries to survive the pain of exile and disability through the moments he spends with Hayat. Meeting her is like a meeting with memory and with all the people who made his past happy; his mother and Si Tahar.

Besides Hayat, Art was also another means to transcend the temporal alienation of exile. Though painting is a time-consuming activity, Khalid does not feel the flow of time before his canvas. When modifying his tableau "Nostalgia", Khalid spends a whole night doing the work. He does so because it is his way of overcoming the disastrous effects of being disabled. It is a way of surviving and preserving physical and mental integrity.

Home is also the place where one can use the native language. Alienation from home means being alienated from the mother tongue. Khalid does not communicate easily. Alienation disturbs the process of natural communication. Though Khalid is a bilingual, which implies that the problem of translation is not posed, he seems limited in terms of verbal communication. This is not caused by linguistic incompetence but by psychic states. Khalid remains attached to his native language, he writes his first novel in Arabic. Contrary to Khalid, Hayat manages to adapt the new culture easily.

Khalid's linguistic crisis is reflected in the linguistic shifts he makes. Knowing the overwhelming importance of using the appropriate linguistic tool in every situation, Khalid's speech is characterized by linguistic shifts. Physical deformities extend to language. Disability thus has linguistic manifestations.

3-5. ART THERAPY: THE HISTORICAL CONTEXT OF DEPICTING DISABILITY THROUGH ART.

Art is a powerful healing tool. Malchiodi states that, “It is widely acknowledged that art expression is a way to visually communicate thoughts that are too painful to put into words” (01). Art therapy is based on the idea that non-verbal communication is more effective in some cases of psychic disorders. This part attempts to assess the importance of non-verbal artistic forms in communicating the experience of physical disability. It examines the way artistic creativity in *Memory in the Flesh* becomes the means through which the trauma of war disability is relived and retold. It starts first with a brief history of art therapy and its relation with the major psychotherapeutic theories. Then, it focuses on painting as an expressive method used by Khalid. It also analyses writing as an attempt to overcome and narrate disability

3.5.1. Brief History of Art Therapy:

Art therapy has various and sometimes conflicting definitions. It describes the therapeutic application of image-making. In *What is Art Therapy*, Adrian Hill explains the psychic process involved in using art as a therapeutic method. He says that, “The value of art therapy is completely engrossing the mind (as well as the finger) ... and in releasing the creative energy of the frequently inhibited patient, enabling (him) to build strong defences as (his) misfortune” (12). In *An Introduction to Art Therapy*, Margaret Naumberg points out that art therapy relies on “releasing the unconscious by means of spontaneous art expression ... the images produced are a form of communication between the patient and the therapist” (11). Both Hill and Naumberg emphasise the healing potential of art, though their approaches to art therapy had been suspended by later developments in the field.

These recent developments include the work of other psychiatrists and art therapists. Cathy Malchiodi defines art therapy as:

Art therapy is the application of the visual arts and the creative process within a therapeutic relationship, to support, maintain and improve the psychological, physical, cognitive and spiritual health of the individuals of all ages. It is based on current and emerging research that art making is a health-enhancing practice that positively impacts the quality of life. (Malchiodi 63)

Malchiodi's approach to art therapy is based on the positive changes that art may bring to the lives psychologically distressed individuals. Malchiodi is a pioneer in emphasising that art can be used as a therapeutic method to physical and spiritual troubles not only cognitive and psychological distress.

The aims of art therapy vary according to the patient's psychic condition and the intentions of the therapist. Regardless of the sophistication of the artistic product, the act of painting or drawing serves in releasing negative energy. Creating images gives insight to the intrinsic impulses and drives of the distressed individual. As such, it strengthens the aspects of exploring the distress and sharing the experience of living with it. This helps enduring the painful psychological effects of illness. Besides, art therapy provides an opportunity for a deeper understanding of the self. In *Art Therapy*, Edwards says that, "Creativity provides the means of coming to terms with, or finding symbolic solutions for the internal tensions from which all human beings suffer with varying degrees" (15). Thus, the process of using art for therapeutic ends differs from one individual to another, depending on their medical and emotional needs.

Because words tend to dominate all forms of communication in society, non-verbal art assumes an almost invisible place in human exchange of ideas and information. Words are the

most useful means of communicating with the world. Yet, some emotional experiences are beyond the communicative power of words. Most of the time, we struggle to find the words to describe feelings such as terror, trauma, frustration, neglect, despair and powerlessness. In this case, art therapy offers an alternative medium of sharing emotional experiences. It integrates the communicative function and the therapeutic effect and takes the patient beyond the realm of words to other vaster and more expressive worlds.

Illness has consistently been part of life throughout the history of mankind. Man therefore sought different methods of healing. Since ancient times, art was used both as a preventive and reparative strategy to cure different mental health problems. Accounts of art therapy often trace its origins back to the 1930s and 1940s. Yet, they actually go back to the ancient Greek and Egyptian civilizations. The mid twentieth century is the time when art therapy started to be regarded as serious clinical work having scientific bases but as a practice, it has its roots deeper in history.

Malchiodi et al. have assembled a large corpus of literature while writing the history of art therapy. In its turn, MacGregor's book: *The Discovery of the Art of the Insane* provides an extensive prehistory of the field. These accounts not only describe and theorize the field of art therapy but even trace the influences from the distant past and the neighbouring fields.

In his work: *Expressive Therapies*, Malchiodi proposes that ancient civilizations knew some forms of artistic expression that were used for therapeutic ends. He points out that, "Egyptians are reported to have encouraged people with mental illness to engage in artistic activity" (04). This implies the existence of an awareness of the healing power of artistic creativity. Malchiodi further says that, "Greeks used drama and music for their reparative properties" (04). The calming attributes of art were discovered and used in medical treatment since ancient times.

Art therapy was also used in Europe during the Romantic period. Romanticism focussed basically on the depiction of internal emotional reality rather than external physical facts. Edwards explains the way Romanticism contributed to art therapy by saying that, “Among the characteristic attitudes of Romanticism were a deepened appreciation of nature and the privileging of emotion over reason” (19). The interplay between the world and the spirit became an essential theme in art. MacGregor confirms the Romantic origins of art therapy by examining the relationship between madness and art, painting more precisely:

Although the influence of the painting and drawing of the mentally ill becomes visually and ideologically obvious during the first quarter of the twentieth century, the origins of this new sensibility appear very strongly as a fundamental aspect of Romanticism. Within this all-pervasive movement, the concept of insanity and attitudes towards insane people underwent a profound change ... The madman was transformed from a mindless unfeeling animal into an embodiment of Romantic ideals. (MacGregor 04)

This new perception of the art produced by disabled people paved the way to a new conception of relationship between art and health. The artistic works of the insane, for instance, were no longer regarded as meaningless but rather as an expression of deeper thoughts and psychic states.

Interest in the representation of extreme emotional states through art evolved along with the rise of other literary movements, with each providing new insights to the relationship between art and disability. Impressionism originally focussed on self-expression. Edwards says that expressionist painting is “the representation of emotion in its most compelling and immediate form” (20). Accordingly, expression outside the existing cultural norms became an

acceptable and even desirable attribute. Expressionism gave the art of the disabled a new aesthetic value.

Despite the contributions of Romanticism and Expressionism, developments in psychiatry had the most significant impact on the use of art as a therapeutic method. Edwards argues that the development of modern psychological theories changed the perception of mental disorders. Madness for instance was commonly viewed as a result of demonic possession. Psychiatricians however, proved that madness results from genetic predisposition, psychological trauma, or biochemical imbalance. As such, methods of treatment considerably changed from the use of spiritual practices to the application of medical tools including the use of art as a therapeutic aid in diagnosis and treatment³⁰.

The discovery of the unconscious was the starting point for the development of psychological methods of treatment. The notion of the unconscious revolutionized the perception of man as a rational being. Freud's personality theory fostered a new understanding of the nature of mental disorders by tracing them back to the patient's inner drives and unconscious impulses. Freud used the "talk therapy" method to verbally externalize the disturbing emotions associated with negative experiences.

In the late 19th century, Alfred Adler used other projective methods to cure psychological disorders. He perceived man as "an indivisible, social, creative, decision-making being whose beliefs and behaviours have a purpose" (qtd. in Weihi 06). For Adler, man can be holistically understood as "a total being whose thoughts, feelings and beliefs are presented in a consistent and unified pattern of action" (qtd. in Weihi 06). Adler's theory stressed the creative power of man and its therapeutic capacity. It is based on the assumption that man is both the picture and the artist. which implies the goal oriented function of any creative activity through which man approaches the world. Within a psychological therapy framework, Adler encouraged the

30 For a further explanation of this idea see Edwards, David. *Art Therapy*. SAGE P, 2004. p, 23.

client to engage in a creative process. This Adlerian art therapy perspective enhanced the use of painting, drawing and writing as methods to free the patient from psychological disorders and re-establish a healthy relationship with the world.

The development of psychology and the establishment of art therapy associations led to the extension of art's application in various therapeutic settings. The American Art Therapy Association AATA applied art to cure the troubling psychic impact of physical disorders as well. Thus, art gained a significant place within disability studies. Physically disabled people became a subject of art therapy and disability scholars gave the field more academic attention.

Within a disability arts perspective, Colin Barnes claims that, "For centuries, impairment and suffering have been seen as a necessary prerequisite for creativity and artistic endeavour" (Barnes 02). The disability arts movement stresses the role of art in developing cultural identity. He quotes Vasy saying that:

Disability art provides a context in which disabled people can get together enjoy and discuss issues of common concern. But it goes deeper than that, as disability culture really offers people a key to the basic process of identifying as a disabled person, because culture and identity are closely linked concepts. (qtd. in Barnes 03)

Barnes theorizes disability from an interdisciplinary perspective. Situating the disabled person within a cultural rather than a merely medical context creates new possibilities of identification. Thus, the implementation of art as a therapeutic method facilitates the socialization of disabled individuals by allowing them to participate in the formation of society's cultural identity.

Sochor confirms Barnes' claims. He states that, "Disabled individuals are no longer mere 'subjects' of sociocultural representations, but they themselves participate in creating

permanent values of cultural wealth” (Sochor 05). Disability gained prominence in fine arts through the works of disabled artists. This raised debates in medical and artistic circles about the efficiency of art production and creativity on the psychological health of impaired individuals. Sochor notices that the topics depicted in the art works of disabled artists are most often disability-related topics (09). This implies that art helps transforming the disabled person from a passive receiver of social and psychological support to an active creator of culture, theory and identity.

Art therapy may also help changing societal attitudes towards disabled people. It increases not only their self-awareness but even social acceptance. People tend to prefer productive social categories and regard the dependent ones with an eye of hostility and even rejection. Art accordingly, provides disabled people with the means to social integration as it implies exchange of ideas, viewpoints and aspirations. On the individual level, art helps the disabled person to overcome depression and find a sense of well-being. Creativity leads to shame-reduction and generates feelings of self-worth.

3.5.2. Disability as an Inspirational Divergence:

The realization of physical impairment as a source of inspiration can be situated within the larger historical and cultural changes in attitudes towards disabled people. The dynamic development of both art therapy and disability studies in the late twentieth century gave rise to many initiative of artistic and cultural production by disabled individuals. Khalid Ben Toubal’s experience in *Memory in the Flesh* can be situated within this context. After the amputation of his left arm, Khalid devotes the right one to painting. Art became his way to challenge disability and achieve a better understanding of the self.

Painting and drawing strengthen Khalid’s communication through a fine arts work. Enhancing his motor activity plays a significant psychological role as it helped releasing

negative emotions. At a therapeutic formative level, Khalid's fine arts activity served to release his creative potential leading to a feeling of independence and self-worth. Painting helped shaping new personality features such as depth, strength and emotional maturity.

Khalid's first attempts to paint are in fact attempts to impress the self. He starts his first tableau "Nostalgia" to regain self-confidence and rebuild a healthy relationship with memory. Overcoming feelings of helplessness, worthlessness and weakness after amputation was the primary aim of Khalid. In fact, Khalid never dreamt of becoming a celebrity or an "artistic phenomenon" as he admits:

Where can I find Dr Kapotski who advised me to opt for art? I want to tell him that his prophecy came true and I really no longer need him. I want to show him what I could do with one arm, he who never showed me what he did with my left. He is the only one absent in this auditorium where no Arab artist has exhibited his art works before. (Mosteghanemi 64)

This reflects feelings of pride and re-gained self-confidence. Art can heal the psychological wounds caused by physical disability. Khalid's journey to art starts with an advice from his doctor after the end of medical treatment and physical rehabilitation sessions. The doctor is aware of the feelings of hopeless and diffidence that accompany amputation surgeries. With an expert's eye, he diagnoses Khalid psychological suffering and gives him a ready-made recipe not only to recovery but to success as well.

Healing through art in Khalid's case takes place via re-exposure to the traumatic event. This confrontation makes externalization of disability's inner impact possible. Drawing and painting are non-verbal forms of trauma narratives. After amputation, brushes and white canvas became Khalid's vehicle for a cognitive reframing of his past experiences. William Steele proposes that, "Externalizing the story into a visual representation of the elements of

the traumatic experience...promotes safety and contributes to a successful psychiatric intervention” (Steele 141). This healing process for Khalid took three forms:

First, re-exposure to past memories helps bringing the experience of losing an arm into consciousness. Constant recalling the day of amputation facilitates the normalization of this event through making it like memories of every day experiences. Khalid describes the process of painting as both sickness and recovery, “The colours were suddenly taking the colour of my memory, turning to a bleeding which was difficult to stop” (Mosteghanemi 190). He becomes familiar with his wounds through painting. When putting colours on the canvas he is in fact bleeding his memory. Painting in *Memory in the Flesh* is a process of learning how to confront disability and triumph over it.

Steel states that drawing is one way to provide a link between traumatic memories and their retrieval into consciousness (142). After that, the experience of disability is translated into a painting which reintegrates the past memories of normalcy and the present state of disability and pain. Khalid says, “I felt happy and excited when painting ‘Nostalgia’. As a beginner, my ambitions were limited to impressing my doctor, or impressing myself on the first place, and winning the challenge with a single arm” (Mosteghanemi 136). More than a physical condition, disability is a challenge. This visible projection of the self gives comfort to the disabled artist. Khalid’s unconscious preoccupation with bridges for instance is both a form of compensation for his lost arm and connection with his lost city. He declares that when painting bridges, he is in fact painting himself.

Pynoos explains the process of recovery through art. He says that ,“Drawing provides for an externalization of the experience through the motor actions which help the victim move from a passive (internal) involvement with trauma to an active (external) control of that experience” (121). Khalid is the embodiment of this externalization process. Khalid admits to

Hayat that 'Apology', the tableau in which he paints Catherine's face is no more than an attempt to overcome the old complexes of the past (Mosteghanemi 93). As such, energy is no longer spent in avoiding remembering the experience of disability and its negative effects but rather in co-existing with it and turning it into another kind of ability.

As to the choice of a non-verbal art form, Steel explains this by saying that the traumatic experience of losing an arm is encoded in images because it is a sensory experience rather than a solely cognitive one (143). When narrating disability, Khalid describes the traumatic experience in the form of a set of scenes. His vivid descriptions of the battlefield, Si Tahar's unsteady voice, the two balls that targeted his arm, and the dead and injured soldiers all contribute to convey the intensity and difficulty of the day that constituted a turning point in his life. The visual recollections automatically leads to a visual artistic production.

Yet, Khalid does not produce exact copies of those scenes in his paintings. He explains this saying that, "A painter is not a photographer capturing images from reality. A painter's camera is rather an inner one, hidden inside him in a place that he himself might ignore. That's why painters never paint with their eyes but with their imagination and memory" (Mosteghanemi 93). Khalid finds in Constantine's bridges enough symbolism to embody all the painful scenes engraved in his memory. Bridges witnessed Khalid as a child, an orphan, a freedom-fighter, and a disabled artist.

Mosteghanemi describes Khalid's last visit to his doctor as a moment of divine revelation. That moment, Khalid becomes aware that disability entitles him to speak on behalf of war disabled Algerians. Painting is the means to do so. It constitutes Khalid's first step to transcend the trauma of becoming imputed, distanced from his homeland his mother and his adorned leader to start a new life as an exiled disabled artist:

The surgery I made to you has been made to tens of war-injured people, who have lost part of their bodies in a battle. Yet, though it's the same surgery, its impact varies widely depending on the age of the amputee, his job, and social status and more importantly his cultural level, because an intellectual reconsiders his relationship with himself and the world whenever something changes in his life. (Mosteghanemi 60)

Mosteghanemi stresses that the psychological consequences of physical disability differ, as well as the way of expressing it. Khalid says:

I didn't sleep that night. I kept recalling my doctor's voice 'paint, you will not need me once more'... I remembered the first word of Quran, when the Holy Spirit revealed it to Prophet Mohamed 'Read. In the name of thy Lord', I was feverish, anxious, confused, lonely and in deep pain, but I didn't utter a word. (Mosteghanemi 62)

When his doctor says, "Draw whatever you like, the things you love most" ((Mosteghanemi 63), Khalid immediately thinks of bridges. The purpose of the doctor is not the artistic or aesthetic value of what his disabled patient produces but rather to trigger the sensory memories of trauma. To concretize his experiences, Khalid continuously paints bridges and gives every bridge a new meaning and a unique identity. As a result, his first attempts in painting are characterized by a kind of simplicity and over-generalization.

The earliest period of Khalid's artistic career is characterized by mood swings and anxiety, usually stemming from troubled psychological states and failed social interaction in the past.

The idea that suddenly invaded my mind, of adding retouches on 'Nostalgia' impressed me. What astonished me the most was my new concern with details...

the detailed I didn't care about a quarter of a century ago, when I drew this same bridge for the first time. Is it because beginnings are always characterised by concern with the general lines and basic characteristics of things? Or because my aim at that time was only to impress myself and impress my doctor? (Mosteghanemi 136)

Concern with details reveals a process of artistic and personal maturity. Malchiodi states that, "Drawing and painting provide a visual focus on details that encourages the victim to give the story a 'language' which helps diminishing reactivity and anxiety to those memories" (149). When producing a detailed painting of Constantine's bridges, Khalid becomes less reactive on an emotional level. This may be explained by a process of normalization that occurs as a result of frequent violent encounters.

The visual focus on details thus allows the disabled artist to reduce the impact of the psychologically disturbing memories. For this reason, at the beginning Khalid is painting just to overcome the feelings of powerlessness and depression that accompanied amputation. Art is his escape and sole refuge. With the realization of many works of art, he could regain his psychological balance and positive self-esteem. The consequent feelings of pride and self-confidence initiate the second phase of the disabled artist's career.

The later phase of Khalid's career as a disabled artist starts as he meets Hayat. This meeting revolutionizes his life and challenges his basic assumptions. Hayat becomes the embodiment of all the people and things Khalid adored in his past. Khalid's love to Hayat brings him back to social life after years of self-imposed exile and isolation. Accordingly, art becomes the new means of social inclusion and communication with society. Socialization through art is one of the basic objectives of disability art therapy.

Sochor refers to the objective fact that, “Artistic production by disabled individuals becomes an effective tool of social inclusion” (85). For Khalid, reintegration in society is achieved through the success of exhibition in Paris, the day when he first meets Hayat.

Now, after all those long years, I no longer care about proving anything to anyone. I just want to live for my secret dreams, to spend the rest of my life in asking the questions that seemed a luxury in the past, not allowed for the youth, and for the disabled freedom-fighter I were, may be because that past was not the right time for details. It was a collective time and we had to spend it together. It was the time of great issues, great slogans, and great sacrifices, a time at which no one cared about discussing details and marginal issues. (Mosteghanemi 136)

Caring about details and marginal issues is the result of feminine presence in Khalid’s life. His attention is no longer focussed just on his physical disability. Finding a new object of emotional engagement rather than the disabled body added more colours to the picture that was in the past a mere representation of an ex-freedom fighter’s wounds, exile and physical impairment.

As such, Khalid’s objectives change. Painting becomes a re-creative power. Khalid says, “That night, I felt I was painting you, with all your contradiction. I was making a more mature and more detailed copy of you, of a tableau that was exactly your age” (Mosteghanemi 137). The boundaries between the beloved and the tableaux vanish. They are reduced to make the bridge a representation of the woman and the woman an embodiment of all the qualities of the bridge, as well the qualities of the Constantine; Khalid’s lost city. This fusion of love and art awakens Khalid’s interest in details. Painting things with a lover’s eye means more emotional involvement with the object of artistic representation. This is reflected in a focus on

the aesthetic details that were neglected in the past. It is no longer art to challenge disability but rather to express deep and pure love.

Khalid's love for Hayat initiates not only a new phase in his artistic career but also a phase of reconciliation with the past. That strong emotional bond changes Khalid's self-image as a victim. Consequently, the aim of Khalid's continuous attempts to capture the essence of Constantine change. The memories of violence, injustice and oppression that lurk around every corner of Constantine are conquered by feelings of longing and love. As such, Khalid ceases to contemplate and retreats to bitter reflections. As he meets Hayat, his art takes a more personal dimension.

The art work becomes the bridge of what is occurring in the inner world of Khalid to the surface. This integration helps him get a better understanding of the self. It is a problem-solving process. It is also a stress reliever and anxiety reducer. The doctor told Khalid, "Art is good for you. Paint or write. It doesn't matter whether it is good art or not as long as it makes you feel better" (Mosteghanemi 63). After more than twenty five years, Khalid sees that his doctor's prophecy came true. Art can heal some of his deep wounds and restore balance to his life after the damaging impact of disability.

In neuro-linguistic terms, painting and writing enabled Khalid to use both sides of the brain. Neuro-linguists propose that the right side is spatial and visual whereas the left is verbal. This left side can be constrained by logical and rational order of words. The right side offers different complexities of expression, often in the preconscious. Neuro-linguistics offers the explanation as to why art was the only expressive tool available for Khalid to transcend the trauma of becoming disabled. Malchiodi explains in cognitive terms how art facilitates the healing process:

The way memory is stored is also shedding light on why art therapy may be helpful to those who are traumatized. There are two types of memory: Explicit memory is conscious and is composed of facts, concepts and ideas and implicit memory is sensory and emotional and is related to the body's memories. (Malchiodi 21)

Khalid's liberation of his sensory memory through painting allows him to be relieved from the emotional burden of being disabled. The painful impact of disability is often communicated symbolically. Thus, bridges are Khalid's meditative tool. The cognitive and narrative approaches to art therapy revealed that engagement in painting is an important modality in trauma intervention. Through art, Khalid becomes actively involved in his own healing. The paper serves as a container of all the pain, anger and worries that trouble him.

The self-conscious application of crude brush strokes, shape, colour and texture is a form of visual language through which emotions are conveyed. He communicates with the world via representing emotions on canvas and not words.

You resembled me in a way. I had to paint with my single hand to compensate the lost one. I prefer to have been a normal man with two arms to do normal things related to daily routine than to be transformed to a genius man with a single hand. My dream was neither to be a genius, nor a prophetic artist, I did not fight for this. My dream was to have a wife and children but destiny wanted another life for me, and here I am an exiled husband of the brush. They imputed my dreams too. (Mosteghanemi 106)

The brush and the pen are both vehicles of emotional expression. Art in Khalid's case is a compensation for the lost arm. He makes a sound on his state as he admits his secret drives behind artistic production.

3.5.3. Testifying Wounds: The Disabled Author as a Creator.

Disability enhances the creative capacity of the disabled individual. The traumatic experiences associated with being disabled result in psychological suffering. Artistic creativity becomes a means to articulate mourning and melancholia. In *Memory in the Flesh*, Khalid shifts from painting to novel-writing. Using a verbal method of artistic expression reflects the devastating impact of recurrent traumatic events. The linguistic change is grounded on Khalid's body through physical and emotional change. Disability is thus no longer testified visually but linguistically. This part examines the way the disabled body releases a voice that testifies the traumatic experience of disability.

Reactivating traumatic memories through narrating them to Hayat served at modifying them. As this happened in an emotional context, between a disabled man and the woman he loves, fear and anxiety were decreased and Khalid could relive the traumatic events in a safe uncontrolled atmosphere. This gives the narrative a strong healing aspect.

Narrating disability helps Khalid to join the fragments of his story and give them a new coherent meaning. This helps to diminish negative psychological responses. Writing is a process of reconciliation with the self and the world. It creates a kind of inner order and places disability in a generalized context of everyday life.

Through writing, Khalid realizes that avoidance of the disturbing memories of disability and its devastating impact is no longer possible. He feels the necessity of confronting the past and resolute its unsolved mystery. The publication of Khalid's novel means that he was no longer a victim of disability but a survivor. William Steel explains, "When trauma is put in a narrative form, inclusive of the details of the experience, these details must be reordered in a way that is manageable. Once manageable, the victim is in control of rather than reacting to the experience" (142). This process of recovery through writing, Steel maintains, is based on a

cognitive transformation from the belief that disability has ruined the victim and left him no choices to the alternative idea of removing those emotions and experiences through art. Steel calls this process cognitive reframing (143).

Cognitive reframing through the production of narrative addresses specific disability-related themes. The homeland, the bridges, the mother, childhood memories, first imprisonment experience, joining the revolution, Si Tahar and his family, and the last battle that ended with his amputation. These memories are ordered linguistically and placed within a disability context. The present is then interpreted in terms of the past. Baeting states that, “Disability trauma is experienced at a sensorimotor level then shifts to a perceptual (iconic) representation at a symbolic level” (12). Baeting explains that when trauma is not linguistically expressed, it remains at the symbolic level. The production of narrative helps retrieving that experience so that it becomes encoded in language. As such, it is transferred from the symbolic to the perceptual level (Baeting 13).

Verbalization reactivates Khalid’s negative emotions. The confusion he feels before writing the first lines and finding a beginning to his interweaved story with Hayat reflects the absence of a clear vision. The pen awakens memory and plays the role of a psychotherapist.

Later, Khalid realizes the power of writing back. He appropriates writing as a weapon of revenge. Khalid says, “Let me admit to you that at this moment I hate you and that I have had to write this book to kill you. Let me borrow your weapons and use your tricks” (Mosteghanemi 09) . This violent anger that Khalid expresses explains the reason why he decides to take up a new art form. Hamad states that, “Khalid wishes to appropriate the new feminized art of the pen to achieve violent revenge, even though he regards this as an inferior juvenile art form” (Hamad 179).

Experiencing a new trauma arises in Khalid the desire to take revenge. Khalid has been receiving different forms of violence during his child and adult life. Yet, he does not react in a similar way. However, the emotional breakdown that Hayat's sudden departure causes leads to an emotional injury that reminds him of his physical one. The disabled artist once again feels rejected, victimized and powerless. Khalid considers the possibility of a new art form due to this betrayal.

There is nothing more difficult than to start writing at an age when other had finished saying everything. Writing for the first time after the age of fifty is something at once both sensual and insane, a reversion to adolescence. Something exiting but also dumb, resembling a love affair between a man in decline and a new pen, the former confused and in a hurry and the later an eager virgin that all the ink of the world would fail to satisfy. (Mosteghanemi 10)

It is a moment of inspiration mixed with secret fears and pain. Age adds a new form of disability to Khalid's life. It fuels the worries of not being able to put his tragic story into words, using the same weapons of Hayat to avenge all the psychological damage she causes him. Khalid decides to opt for words despite of his fears. He takes up a new challenge to prove his intellectual ability -in spite of physical disability- at the age of fifty. At the age when others had finished saying everything, Khalid's story is yet untold and he feels the need to tell it.

The decision to start writing is unfolded at the novel's beginning. Yet, chronologically speaking, it comes at a late period in Khalid's life. Substituting the colours and the brush with a pen and papers opens new spaces of expression that painting does not allow. Verbal expression enables detailed description, long narration, and more opportunities to explore the self. Writing for Khalid is "to touch one's gaping wounds with a pen without feelings of pain,

to turn back to the past without nostalgia, without madness, and without hatred too” (Mosteghanemi 55). It is a reconciliation and purification process that would lead to inner peace.

Story-telling in *Memory in the Flesh* is a kind of psychotherapy. In trauma theory, suffering raises again when confronted with traumatic memories. Daily confrontation with past experiences through writing serves the ends of exposure and reconciliation that Steele discusses in his work: *Using Drawing in Short Term Trauma Resolution*³¹. The term scriptotherapy was coined to describe the healing power of writing.

Through writing, Khalid also obtains the power to shape reality. Telling the story from his own perspective gives him an equal position to Hayat’s. Hayat states that her motives for writing are to “kill those who have become a burden to (her), to finish them off” (Mosteghanemi 110). As Khalid remembers this confession, he feels it is actively directed to him. Being “Killed” and “finished off” is an end he feels unable to accept. So, he decides to write back.

Reacting with an act of creativity is a reproduction of Khalid’s incident with his doctor following the amputation surgery, “Paint, you might not need me once more” (Mosteghanemi 136). Khalid once again overcomes disability and trauma with art. The ability to turn painful memories into a narrative empowers Khalid’s self-esteem. Taragi claims that, “Through writing, an individual becomes able to understand their core issues on a subconscious level” (01). Writing provides deep insights to the story that was once told through painting only.

Khalid’s complete spontaneous expression enables him to transcend trauma. In *Expressive Art Therapies*, Taragi maintains that, “During the process of creation itself, the healing can occur. There is a range of benefits and outcomes of creative writing, predominantly the ability

31 The work is cited in the previous part and the two processes are explained with references to painting.

to facilitate letting go the repressed emotions and feelings that are stored in the disabled body” (01). Within the framework of writing, Khalid develops an aesthetic capacity to retrieve painful memories as a means to probe deeper into the self and achieve a higher sense of self-awareness.

Cathy Malchiodi discusses the unique characteristics of writing as a form of expressive therapy. She states that, “As a strictly verbal therapy, writing has several characteristics including, but not limited to, self-expression, active participation, imagination, and mind-body connection” (Malchiodi 09). As a modality of art therapy, writing encourages the individual to externalize psychological suffering using the pen and papers. This plays a vital role in speeding up the recovery process. Verbalization allows a re-experiencing of the story which in its turn enables having new, and sometimes more positive perspectives on it.

Malchiodi describes a multimodal approach to art therapy based on the integration of two or more art forms. She states that, “Expressive arts therapy has been linked to the traditions and cultural precedents of world healing practices because they frequently involve the integration of all the arts” (Malchiodi 106). This integration necessitates the employment of different cultural practices such as painting, drawing, music, novel-writing, poetic composition and even sand play. Art therapists believe that this inclusion speeds up the healing process. Furthermore, it makes it more effective as trauma victims may move from a less suitable expressive modality to a more efficient one depending on their individual differences and the type of trauma they have experienced.

Within his auto-treatment, Khalid applies this notion in art therapy to his healing journey. The decision to move from painting to writing offers him the chance to cure the gaping wounds that the brush and the colours could not touch. Yet, this movement is not a smooth one as Khalid finds difficulties during the transitional phase. At the novel’s beginning, he

openly wonders, “How some artists can move from one art form to the other swiftly and cleverly, as if they were moving from one room to another or from one woman to another, without restrains” (Mosteghanemi 332). Khalid’s commitment to painting hardens the transformative process to another therapeutic method.

Khalid’s application of the intermodal method served different ends. In disability art, the “person-centred” approaches are more vital in the recovery than the “audience-centred” ones. Painting depended more on the audience, on what people see in the tableaux and the way they interpret them. Khalid admits that, “Nothing in the world hears more non-sense than a tableau in an exhibition. People may stand before it for hours, each giving it a new meaning that you yourself did not have in mind while creating it. You have just to keep listening and smiling” (Mosteghanemi 333). Writing however is a more personal thing. It is a form of private expression which allows the exploration of inner struggles and secret fears and defeats. Providing that Khalid first attempts in writing are not intended for publication, he finds in this artistic modal more freedom to probe deeper in the pains and complexes that disability and failed love have caused him.

As physical disability imposed many restrains on Khalid’s body, writing offered his mind the possibility to engage with new realms of ideas and freely communicate emotions. Malchiodi calls this, “A form of ability to explore the structural properties of art and to imbue this form with feelings” (109). Narrating his experience with disability using words rather than lines and shadows allows Khalid a reflective distance or self-observation and assessment. Khalid says: “I used to think that we cannot write about our lives till our pains are fully cured. Now, I can say that memory can never be cured. That’s why we write, that’s why we paint, and that’s why others die too” (Mosteghanemi 08).

Applying neuro-linguistic principles to the analysis of art and disability, it becomes clear that writing re-activates the left side of the brain. It is a way to reshape and repair some early experiences that imprinted the brain. Malchiodi states that, “The body is a mirror of an individual’s emotions ... images affect our brains and result in different emotions. Expressive therapies help to display the emotion even without being conscious of what induced it” (20). This implies that verbal expressive allows images of trauma to be externalized from the brain more than any other art form.

Khalid suffers from perpetual images of emotional shock and physical impairment since childhood. Re-exposure to these images through writing helps re-activating the left side of the brain leading to a vivid emotional involvement with them. Khalid calls this process of seeking cure in writing about painful memories “a state of waiting for few words to come back to life, to transcend silence to narration, oblivion to remembrance, and death to life” ((Mosteghanemi 08).

Through representing the positive impact of artistic expression on healing the wounds of physical disability, *Memory in the Flesh* opens the door for new debates in both art and disability studies. Khalid becomes the embodiment of a prophetic disabled artist. He creates masterpieces using a single hand and narrates disability as no other novelist has done before.

3-6. Expressing Disability through Body Language:

Traditional studies on communication have always focussed on linguistic expression. Yet, effective communication has never been limited to language. Besides linguistic expression, the body itself has a potential to convey ideas and emotions. In the case of a physically disabled body, body language assumes more importance as it compensates alienation from language³² and reflects disability’s consequent inner focus on the body. This part analyses

³² This point has been argued before. Part one of this chapter explains the relationship between physical disability and alienation from language.

facial expressions, bodily traits, and dance movement as means of representing the disabled body. It defines the basic facial expressions frequently used by Khalid and examines how they are linked to the psychological impact of physical disability. Then, it deals with the scene of dance movement with which *Memory in the Flesh* culminates and attempts to explore its importance in expressing and communicating disability.

3-6-1. Brief History of Body Language Analysis:

Zhan claims that, “To study communication is to examine all the ways in which human beings send information and integrate their actions and feelings ... It is to study both verbal and non-verbal communication” (1628). The flow of information carried by non-verbal codes can be larger and more accurate than what language expresses. The body sends an enormous number of messages that need to be analysed in order to achieve a better understanding of its needs and various states. In literature, Zhan argues that the analysis of verbal codes is never enough to understand the characters’ emotions, customs, inner motives, and social status. She stresses that, “Non-verbal codes are vital to understand a literary work because they carry more than 70% of information during an interaction” (1622). According to Zhan, a study of communication that is limited to verbal language is never comprehensive.

Besides, Henry H. Calero wrote one of the most comprehensive analyses of body language and its importance in human communication. In his book: *The Power of Non-Verbal Communication*, he claims that non-verbal cues are critical in conveying ideas and emotions, sometimes even better than spoken or written language (08). Calero describes body movements and explains the various meanings they may serve, depending on the speaker’s intention and the context in which they are used.

Considering the origins of non-verbal communication, linguists confirm that it existed long before languages developed. Calero states that, “The biological antiquity of non-verbal

communication shows that for thousands of years, mankind has used wordless messages to communicate thoughts, attitudes, ideas and emotions by using gestures, posture, facial expressions, sounds and symbols” (02). The origins of using non-verbal codes in human interaction go back far in history. However, academic attention to this field is recent. He traces the origins of body-language analysis back to Ray Birdwhistell’s book: *Introduction to Kinesics* and G.W Hewes *World Distribution of Certain Postural Habits* which established the basis of the scientific study of non-verbal communication.

Zhan makes a comparison between verbal and non-verbal communication focusing on the main characteristics of each mode of expression. She developed her comparison on the light of arbitrariness, grammaticality, self-reflexivity and the sense organs involved (Zhan 1623). She comes to the conclusion that like linguistic forms, bodily signs are arbitrarily chosen. For instance, there is no logical connection between raising one’s eye brow and expressing doubt. Yet, this meaning has been arbitrarily attributed to this gesture. Furthermore, non-verbal codes can be produced and received by different organs. The difference is that body language does not have grammar. In addition, it is not self-reflexive, i.e. non-verbal language cannot be used to explain itself.

The fact that body language shares some characteristics of linguistic codes implies that it can be viewed as a language though it is limited in scope and expressivity if compared to the ability of linguistic expression using verbal signs. The messages the body sends through different verbal and non-verbal channels are consolidated by the human brain to get a coherent meaningful message. Calero explains, “Non-verbal signs are another dimension of communication that helps the listener get the hidden meanings of what the speaker says” (05).

The analysis of body language includes body movement, facial expression, touch, physical appearance, personal space, and vocal communication such as pitch, intonation and speech

rate. Besides, non-verbal communication can be analysed on two basic levels; the individual and the collective level. Mai states that, “At the collective level, non-verbal communication consists of codes that can be universally understood and recognized” (03). These codes are certainly influenced by the culture of the community. Accordingly, Mai maintains that deciphering a non-verbal cue relies on understanding how it is interpreted in the social surrounding (03).

However, understanding body language use by individuals is a complex issue. It requires not only an understanding of the individual’s cultural belongings but also of his/her personal differences, social and cultural attitudes, and psychological states. Mai says that, “At the individual level, each person is unique and we can just make a guess that s/he has similar collective outward expressions as the majority of the people of the same community. This adds complexity to the issue of understanding bodily signs” as Mai maintains (03).

As such, context is quite important in understanding body language. For instance, a firm hand-shaking in an Arab context indicates a close relationship. It reflects that the two persons shaking hands are glad to meet each other. However, in a western context, this may be seen as a sign of violence. It can even be taken for an indirect threat. Actions of the body are determined by the context within which they take place. Thus, they cannot be comprehensively understood without contextualization.

The messages that our bodies produce can be conscious or spontaneous. Mai labels these two types: effective and neutral messages. He proposes that neutral people tend to reserve their bodily movements and actions whereas effective people tend to find an outlet of their emotions and use an animated body language (Mai 11). On this basis, people differ in their employment of different bodily signs such as silence, eye contact, touch, gesture and facial expressions.

Despite of the prevalence of body language analysis and its application in a wide range of social and cultural studies, there are some shortcomings to the theory. The basic limitations of body language analysis are: ambiguity, individual differences, and context comprehension.

3-6-2. Beyond Words: Expressing Disability through Facial Expressions:

The analysis of facial expressions begins with the taxonomy of facial action. In *Analyzing Non-Verbal Behaviour*, Matsumoto defines this taxonomy is defined as, “the way the face moves and the information it imparts” (01). Eliciting the non-verbal behaviour of individuals with disability requires a systematic comparison with the facial behaviour of normal people so that the impact of disability on the language of the human body can be measured. The focus in this part is twofold: First it identifies instances of using body language, particularly of facial expressions. Second, it analyses these non-verbal behaviours in the light of psycholinguistics and disability studies. The facial expressions under analysis are limited to the transformative phases of Khalid’s life such as amputation, falling in love with Hayat, and his brother’s sudden death. These are the conditions under which samples are obtained.

Matsumoto explains that the study of facial behaviour related to physical disability is a wide and critical field. He says that, “The face contains nearly 80 muscles that act in rapidly changing patterns. The muscles are capable of forming tens of thousands of expressions. Consequently, choices about how to measure facial expressions are crucial. Also crucial are choices about which facial expressions to measure (Matsumoto 08).

The different types of facial expressions occurring in natural interactions in these situations convey a lot of information on Khalid’s psychological states. The psychic information that can be gathered from Mosteghanemi’s descriptions of Khalid’s facial movements reveal that even when he reserves judgement and opts for silence, his face tell a great deal about his inner state . Facial language is for instance pervasively present in Khalid’s first meeting with Hayat

in his exhibition in Paris. Khalid says: "...before your words reached me, my sight was captured by the bracelet on your wrist, Constantine's Mekyll. It is women's favourite piece of jewellery in the east of Algeria. We joined hands, and I was not able to move my sight away. It is the minute that took my memory an age back" (Mosteghanemi 53).

The use of facial action in this passage highlights and punctuates language. As memory is awakened by this incident, Khalid opts for silence. He keeps observing the Mekyll without uttering a word. Only his sight and the astonishment on his face tell the deep impact of this fatal encounter. When joining hands with Hayat, Khalid is in fact joining hands with his past, with his memory.

Sight becomes once again a medium to communicate emotions. The meeting takes a new dimension through eye contact. Khalid states, "You gently withdrew your hand because I was unintentionally pressing it. You looked at me and I did the same. Our looks crossed, in half a look" (Mosteghanemi 164). Perhaps words were not able to bear the burden of telling her how much this first meeting, with all its details affected him. He leaves it to the eyes to tell what words cannot tell. Eyes become the medium of reflecting the disabled body's inner turmoil. The looks Khalid directs towards Hayat bring him to contact with his past, his memory.

Besides, following the amputation surgery, Khalid is overwhelmed by emotions of fear, sadness and distress. He does not convey these emotions through language as he is lonely and even unwilling to talk. Yet, Khalid's facial expressions tell the story of his psychological suffering with the new physical condition. The facial expressions he uses are prototypic of these emotions. As he starts painting to heal the damaging impact of disability, Khalid rarely exchanges words with others. He keeps observing and his eyes occupied with reflecting pain and suffering.

Assessing Khalid's non-verbal behaviour, it becomes clear that it is largely influenced by the physical state of being disabled. He uses non-verbal signs in meaningful ways. He acts in the context of shared meanings to promote self-communication. Though Khalid has no verbal communication difficulty, he intentionally opts for silence. Linguistic alienation is an outcome of his disability.

The touch is another instrument of bodily expression. Hubbard states that, "A typology of touch has emerged including two types of touch: instrumental touch which means the bodily contact between the disabled person and a professional caregiver for a purposeful task, expressive touch is that which is spontaneous and effective" (156). It is this second type that falls within the scope of body language analysis. Giving meaning to Khalid's employment of touch as a means to communicate disability allows a better understanding of the impact of disability on his social interaction and self-expression. Khalid uses touch to initiate, enhance and maintain spoken conversation.

Body movement is also used to amplify the meaning of verbal communication and compensate for the loss of willingness to talk. For instance, when Atika, his brother's widow asks him if he wants coffee, Khalid describes his response saying: "Language betrays me, so I answered her with a movement of my head" (Mosteghanemi 03). Expressing approval using a bodily sign without uttering the three letter words 'yes' reflects a severe damage in interactive exchange abilities. Hubbard argues that these body movements and gestures are used "as a strategy to cover up inability to maintain a conversation" (160). It is a way of escaping a reality Khalid was never able to accept.

The firm handshake he shares with Si Chrif reflects warmth and old friendship. Despite of all political and cultural difference, Khalid still maintains the relationship and refuses to cut ties with Si Chrif. Khalid says, "He warmly hugged me. I admit that despite of the

disappointment of not seeing you, I felt very happy. I saluted him with happily” (Mosteghanemi 80). This communicates Khalid’s deep respect for their shared revolutionary past, despite of all present differences. Maintaining communication through the body, without verbal utterances can also be achieved through contact with inanimate objects.

3-6-3. Expressing Disability through Dance Movement:

Dance movement therapy is defined as “The therapeutic use of movement to further the emotional, cognitive, physical and social integration of the individual ... based on the empirically supported premise that the body, mind and spirit are interconnected” (Dunphy 08). Dunphy states that dance movement therapy is used to cure different of troubles of psychological as well as physical origins such as: anxiety, depression, behavioural problems, trauma and physical disability.

The outcomes of dance movement therapy in reducing psychological distress are significant. It helps decreasing body-image distress and increasing self-esteem.

You may feel sad when you take the metro and hold the belt reserved for those who do not find empty seats to read on some chairs: “seats reserved for the pregnant and war disabled”. No, you can never sit there. These seats are not reserved for you. Your pride refuses this. You prefer to stand and hold the belt with your single hand. (Mosteghanemi 73)

Standing in this passage is a bodily expression of pride and dignity. The disabled body refuses the seats reserved for pregnant women; a metaphor for Khalid’s refusal of all political responsibilities that might corrupt the image of an honourable soldier he had. The scene of the bus can be interpreted from the perspective of body language and physical disability. Khalid’s refusal to sit is not only an ordinary action in life’s daily routine. It is an expression of his political attitude. It is also a reflection of his deep respect of his body which keeps challenging

life despite of being disabled. Through his bodily actions, Khalid challenges the world that “respects (his) talents but refuses (his) wounds” (Mosteghanemi 73). The body here expresses what language is not able to convey.

Although there is no evidence that the facial activities of disabled people can always be interpreted in the light of disability-related psychic disorders, Ekman stresses that, “Disability is likely to be characterized by unique facial dynamics” (qtd. in Dunphy 03). For example, disability is likely to result in periods of sadness that are relatively longer and more intense than those of normal people. Mood swings are reflected on the face and represented in its conscious or unconscious movements.

Khalid shows facial expressions of apprehension and evaluation such as knitting brows, of exaggeration or minimization of stress such as smiles, and eye contact. Disability turns Khalid to an inexpressive person. Thus, facial expressions become the means to understand much of his hidden motives and repressed thoughts. When he was not in communication, his facial expressions change from being attentive and animated to apparent vacancy. The face drops, the eyes stare ahead, and the face would remain motionless.

When facial expressions are associated with speech, the intended message becomes more apparent. The language of space setting (proxemics) is also important in analysing body language in *Memory in the Flesh*. Mai states that, “Human beings are territorial” (Mai 05). Men maintain personal territories with invisible borders. Distance is crucial in human interaction because these territories aim at determining how is to be close, how close, and why. When Hayat visits Khalid for the first time, he transcends social space to close proxemics.

3-7. CONCLUSION:

An assessment of disability language in *Memory in the Flesh* reveals that Mosteghanemi manages to narrate disability using both verbal and non-verbal means. As to verbal codes, Khalid's use of language manifests alienation, emotional crises, nostalgia, fears and psychological pain. Non-verbal methods of expression assume more importance and disability is told through artistic creation. It is an attempt to create a new type of ability out of physical disability.

Chapter Four:

Emotion; which is suffering, ceases to be suffering as soon as we form a clear picture of it.

Spinoza

4-1. Introduction:

This chapter aims to compare and contrast the linguistic manifestations of disability in *Memory in the Flesh* and *The Bell Jar*. It first addresses the cultural representations of

disability in American and Algerian culture and considers the impact of cultural images and assumptions about disability on characterization in both narratives. Then, it examines the influence of social and historical circumstances on the portrayal of physical and mental disability. It also traces the similarities and differences in Esther Greenwood's and Khalid Ben Toubal's linguistic behaviour through examining the effect of gender, educational level and family history on the language of disability.

4.2. The Representation of Disability in Algerian and American Cultures :

Throughout history, disability has been represented differently. Time, place, culture, religion, medical development and political decisions are factors that influenced the conception of disability. The United Nations' *World Report on Disability* affirms that "a person's environment has a huge impact on the experience and extent of disability". According to this report, some environments contribute in creating disability by creating barriers to participation and inclusion.

Accordingly, besides health conditions, personal and cultural factors are significant in determining the way disabled people are perceived and treated. For instance, stereotypical views may influence not only societal attitudes towards disabled people but even their self-image. Generalizations about disability also stimulate negative representations. Putting all disabled people under the same umbrella, regardless of their physical or mental conditions, age, gender, socio-economic status and the factors causing their disability produces a prejudiced discourse that reflects neglect and misleading judgement of this category and its concerns.

In literature, the situation is not different. Cultural perceptions of disability continue to influence the way disabled characters are represented and interpreted. Rosemarie Thomson in her book *Extraordinary Bodies* analyses the perception of corporeal difference and mental distress in literature attempting to correct misunderstandings and alter negative representations. She claims that, "Disability is like any other culture-bound, physically-

justified difference to consider along with gender, class, ethnicity and sexuality” (Thomson 01). The cultural encoding of physical and mental disability established the conventions of literary representation. This is what Thomson tries to deconstruct.

According to Thomson, cultural assumptions about disability undoubtedly affect the literary representation of disabled people. Disability is thus defined by culture. Without awareness of how disabled individuals are perceived in the target culture, it is not possible to comprehensively understand works of art representing disability. Due to various sociocultural factors, physical impairment and mental distress were perceived differently. American and Algerian perceptions of disability varied, and so did the representation of Esther Greenwood and Khalid Toubal in *The Bell Jar* and *Memory in the Flesh* respectively.

4-2-1. Perceptions of Disability in American Culture and their Effect on Characterization in *The Bell Jar*:

The history of disability representation in American culture was influenced by three main factors: Belief systems, economic productivity, and medical progress. Coleridge states that, “The tendency to categorize all people with different impairments as ‘disabled’ is a fairly recent phenomenon emanating from western societies” (22). He stresses that in many societies all over the world, it is hard to find synonyms to the words ‘impaired’, ‘handicapped’ and ‘disabled’ which had been coined only American disability theorists. This implies that impairment was not regarded as a serious form of deviation from the state of ‘normal’ human beings. According to Coleridge, this deviation was considered as a different condition that does not hinder ‘normalcy’ and full participation in both social and economic life.

However, the perception of disability in American culture is different. Attitudes towards difference in physical and mental conditions were characterized by complexity. The sources of ideological manipulation while defining and classifying disability were diverse. They were

influenced by historical, social, economic and even political events. Yet, despite of this influence, the changes brought were not really revolutionary.

The first source of Christian perceptions of disability is the Bible. Biblical images of physical impairment are primarily derived from Christ's life. Contrary to what some Biblical scholars such as Amos Yong claim, the Bible did not have a 'normative perspective' on the issue of disability. Disabled figures were not ignored or eliminated in the Biblical message. Images of physical impairment are recurrent in the Bible. The bleeding body of Christ and the wounds which led to his death tend to remind people of physical disability and its negative painful impact. Disability is thus associated with images of suffering and death.

Unexpected healing of disability is extensively explained by Heidi J. Hornik. She examines the scene of a man lame from birth. The man was carried to the temple seeking alms. The Apostle Peter replied, "I have no silver or gold, but what I have I give you. In the name of Jesus Christ of Nazareth, stand up and walk" (qtd. in Hornik 57). This scene is interpreted as a typical representation of disability perception. Emphasis on healing-though the lame man did not seek it- is quite telling. The way Apostle Peter dealt with the disabled man reflects the prevailing belief that disability is an 'unwanted' condition. It cannot be accepted as part of life and should rather be healed.

In another scene, a haemorrhaged woman seeks cure by touching the body of Jesus Christ (qtd. in Yong 08). When questioned about her deed, she replied that she suffered a lot and spent all she had on doctors without any one being able to cure her or at least reduce the pain she had. Heidi Hornik describes her as the more aggressive and less passive in seeking Jesus' aid. She was socially ostracized because of disability. This marginalization before cure and restoration of normal life after demonstrates that it is hard for disabled individuals to be restored to the community unless healed. Hornik claims that this representation of

haemorrhaged woman in the Bible not only reflects societal perceptions of disability at Christ's times but even influences and shapes its perception in modern times mainly within religious circles.

These three Biblical scenes give a brief sketch of the representation of disability in Christian culture. The Bible has certainly contributed in shaping images of impairment and physical difference. Whether it still continues to influence western thought on this issue or not is uncertain. Yet, what is clear is that the western emphasis on the necessity of curing disability rather than adapting with its existence stems from the Bible.

The second factor influencing disability perception in American culture is economic. Participation in the labour force is a determining sign of an individual's position in society. The ability to fulfil a job implies the ability to live a normal life, to be educated, to have a home and a family, and to access social, economic and even political life.

Labour ability accordingly plays a vital role in shaping social and public perceptions of disability. James Baker states that the American society tends to "understand the disability experience by regarding the environment that accommodates it" (03). Having a physical or mental limitation that hinders holding a job or pursuing any type of gainful activities implies the absence of a sustainable income. This in its turn leads to dependence and non-productivity. As such, Americans with disabilities' participation in national economy is limited (Harris 36). Harris attributes this to the absence of a national policy to employ disabled people and so to ensure their full integration in social and economic life.

Therefore, the participation of adults with disabilities in the labour force helps promoting the way they are regarded and represented. More importantly, society values creativity and productivity. In a capitalist society based on the principle of competition, only one type of disabled people could take full advantage of disability and access positions of power, fame

and influence. These are called the “Super Crips”. The best example is perhaps Franklin D. Roosevelt; the president who suffered from Polio which caused him a physical disability. Though in a wheelchair, Roosevelt succeeded to save America from the Great Depression. Helen Keller is another figure. Being blind, she strove to invent a type of writing that enabled all people with sight disabilities to read and write. This is what Thomson calls an extraordinary body endowed with extraordinary abilities.

The third important reason influencing disability perception in America is medical progress. Advances in the medical field helped to cure different types of physical impairments and mental distress or at least reduce the disability they cause. For instance, Coleridge traces the development of Community Based Rehabilitation (CBR) and demonstrates its significant impact in ameliorating the views of Americans regarding disability. Coleridge states that the development of CBR programs was paralleled with cultural developments related to disability because “any program of rehabilitation that does not consider culture is bound to failure” (Coleridge 24).

Medical progress thus constituted a chance to enhance the position of disabled individuals. Whether through a return to ‘normalcy’ after treatment and rehabilitation or by minimizing the disabling effects of illness, advances in medicine reducing dependence and gave disabled people a kind of autonomy. As a result, the fact that disability is not necessarily a permanent condition became deeply rooted in American cultural awareness.

This cultural contextualization of disability helps understanding Esther’s position as a disabled American figure. *The Bell Jar* depicts the story of the young mentally distressed Girl in the wider context of culture. Reactions to Esther’s disability were largely formed by cultural prejudice. This further aggravates her state. Plath employs the struggle between

Esther and her family, friends, mates, colleagues and even doctors to discuss and criticize social and cultural reactions to mental disability on a larger scale.

4-2-2. Disability Perception in Algerian Culture and its Manifestations in *Memory in the Flesh*:

The situation of disabled people in Algeria is subject to various influences. Perhaps all disabled people worldwide face similar attitudinal barriers such as prejudice, stare, fear, rejection and low expectations. They suffer from the same limitation of access to jobs, education and full participation in society. Yet, considering the cultural specificities of Algeria, the image is not quite uniform. The factors influencing disability perception in the Algerian society are related mainly to religion, history, and governmental policy.

At first, religion played a vital role in shaping disability perceptions. As the belief systems in Algeria are largely derived from Islam, understanding how Algerians see disability largely depends on the way religion represents it. Yet, it is worth noting that the classical sources of Islamic faith³³ did not use an Arabic equivalent for the English word *disability*. A broad range of terms referring to different types of disabilities is used but none can be considered an exact equivalent.

Bhatty identifies a list of words used in Qur'an to describe individuals with disabilities including the blind (a'mà), deaf (asamm), mute (abkam), lame (a 'raj) and insane (majnun). Bhatty states that there is only one term used in these sources that might cover all the types of physical and mental disability; ill (marid). Yet, illness is still not an equivalent of disability (Bhatty 162). This terminological frame gives insight to the portrayal of disability in the legal sources of Islam. The absence of specific terms to describe the physical and mental

33 The classical sources of Islamic faith are the Qur'an, Ahàdith and fiqh (jurisprudence).

conditions of disabled people in details does not mean neglect or disregard. It simply indicates a more positive attitude and affirms the neutrality of disability as a fact of life.

The conclusion about the Islamic perception of disability can be drawn from terminology. The absence of terminology implies the absence of categorization. Contrary to the widespread belief that disability is a result of curses or evil spirit that characterises many cultures, the Islamic faith has rather emphasised that health and disease are caused by God. As such, they both constitute two forms of natural human conditions. The afflicted or stigmatised should not be rejected but rather cured.

Besides, the Islamic perspective on disease differs widely from the western views. While pre-Islamic cultures regarded disability as a form of divine punishment, Islam came to give it a redeeming quality. Bhatti states that, "Although health is definitely viewed in Islam as part of God's benevolence, it is not guaranteed for any specific individual. Disease may befall an individual and such an occurrence is viewed as a trial from God" (Bhatti 163). This implies that Islamic philosophy has a positive attitude towards disability. Being disadvantaged is neither a sign of being possessed by demonic forces nor a proof of divine punishment. It is rather another form of 'normalcy' which requires specific caring services.

H. Al. Aoufi illustrates the Islamic attitudes towards physical and intellectual disability with two facts from Islamic history. Omar Ibn Al-Kattab; the second Muslim caliph initiated a tradition for providing specific accommodation for physically disabled individuals when he provided a house near the mosque to a disabled boy after this latter's father complained about his son's inability to reach the mosque. Such a decision reflects a deep concern for the needs of this category as well as the obligations befalling both society and political leaders towards it. A further example of the Islamic perspective on disability was given by the Umayyad

caliph Al Walid Ibn Abd-Al Malik as he established the first care house for the intellectually disabled and assigned specific caregivers to look after them³⁴.

Respect, understanding, cooperation, solidarity, compassion and help should be provided to the physically or mentally disadvantaged according to the Islamic perspective. Moreover, they should not by any means be forced to perform activities beyond their abilities. The Quranic verses are clear about the issue of obligations and duties in Islam. For instance, even when Jihad is concerned, the physically disabled Muslims are not required to take part in it. An example is given in the verse of Al-Fath, “There is not upon the blind any guilt or upon the lame any guilt or upon the ill any guilt. And whoever obeys Allah and His messenger- He will admit him to gardens beneath which rivers flow, and however turns away- He will punish him with a painful punishment” (Qur’an 48:17). This verse supports the notion of social responsibility. Accordingly, in disadvantaged situations, society must play a role in providing the necessary services that disabled people cannot access due to their physical impairment or mental distress.

To draw a conclusion on the conceptualisation of disability in Islam, it is worth noting that though the sacred texts in Islam gave the disabled individuals a privileged position, social and cultural attitudes towards disability are not shaped only by religion. These attitudes may be influenced by people’s own understanding and interpretation of the sacred texts and not necessarily by what the texts say. Moreover, the changing social, economic and political situations have a tremendous impact on the way disability is conceptualised.

History is also a significant factor in shaping disability representation. Algeria suffered from war for more than seven years. In fact, even before the war of independence, Algerian resistance of French colonization never stopped. So, the history of Algerian resistance spans

34 Examples on the Islamic perspective on disability are given in: Al- Aoufi, Hiam.et al. Islam and the Cultural Conceptualisation of Disability. The International Journal of Adolescence and Youth, vol. 17, no. 04, December 2012. 205-219. <https://doi.org/10.1080/02673843.2011.649565>

over more than a century. The bloody wars against the French colonizer extended from 1830 to 1962, resulting not only in losses of life and property but also in a huge number of disabled people.

Like in any war-torn country, war disability occupies a central place in governmental policies. It is true that the most essential factors of sustainable development are economic growth and providing education and health care services. Yet, the post-independence Algerian government was faced with an emergency situation regarding disability. The huge number of war-disabled rendered it necessary for the government to take serious and rapid measures regarding this category.

The governmental development programs were accompanied with a changing social and cultural vision towards disability. The massive upsurge of the population of war-disabled persons brought about a new social as well as political debate. Initially, social attitudes towards disability were positive. The imputed body in post-independence Algeria became a source of pride as it signified participation in the War of Independence. The images of heroism and strength were still attributed to the ex-freedom fighters, especially those who sacrificed a part of their bodies for the national cause. Yet, people suffering from pre-war impairments did not enjoy the same heroic perception. They were not negatively represented but they have been regarded and represented differently.

Besides the physical injuries, psychological disturbances were also an inevitable consequence of war. Though the distressed mind was a less common outcome of war, the traumatic experiences of torture, genocides, loss of property, and absence of stability left deep traces on the Algerian collective psyche. The individuals, mainly women and children who were engaged in resistance activities were deeply affected by the atrocities of war and

massive killing. As such, they run the risk of being subject to different types of psychological distress.

Because national disability statistics are not developed and updated, research on disability in Algeria remains surrounded by many obstacles and difficulties. The lack of funding, adequate human resources, and appropriate institutional policies makes it hard to establish a comprehensive framework for research on disability. Accordingly, a change in policy is vital to achieve a better understanding of issues related to disability and so, a fuller integration of disabled people in society. The challenge of increasing the social, economic and political inclusion of disabled individuals in post-independence Algeria is still one of the fundamental issues facing both the government and civil society.

Amid all these challenges and debates about disability in Algeria, it is noticeable that literary creation did not go up to giving a full image of the situation. Literary works dealing with disability in general- and war disability in particular- were very few. Apart from Mosteghanemi's *Memory in the Flesh*, disability is still occupying an almost invisible place in Algerian literature. Thus, disabled people in Algeria and the Arab world in general -like their counterparts in the west- did not have the advantage of accurate literary representation yet.

4.3. Autobiographical Aspects of Disability Representation in *Memory in the Flesh* and *The Bell Jar*:

The portrayal of physical and mental disability in *Memory in the Flesh* and *The Bell Jar* is obviously shaped by the novelists' life experiences and historical circumstances. The images of pain, suffering, trauma, instability and inability to sustain disability's social and psychological impact in the two narratives are the outcome of Plath's and Mosteghanemi's direct or indirect contact with disability. Personal and historical influences not only determined the way disability is portrayed in both narratives but even shaped its linguistic

reflections. This part addresses these personal and historical influences with the aim of revealing their linguistic manifestations in both narratives.

4-3-1. Reflections on Plath's and Mosteghanemi's Personal Experiences with Disability:

In the introduction of an essay on Plath's novel, Sandra M. Gilbert says, "I have never met Sylvia Plath. Yet, I can honestly say that I have known her most of my life" (01). This feeling of familiarity, Gilbert explains, stems from the fact that critics used Plath's literary works and the critical commentaries on them as a fertile source to gather information on Plath's life. Her Journals, letters, poems and novel provide fragments that helped both critics and readers to construct an image of her, the way she lived, and the different influences of her life on her fiction. This close connection between the personal and the fictional is much more apparent in *The Bell Jar* which many critics believe to be a "rehearsing" of the hard times in Plath's life.

The Bell Jar was originally published under the pseudonym of Victoria Lucas. Critics claim that Plath did so because she was recording much of her personal experiences, very lightly veiled in fiction. Attempts to make a parallel between the life of Sylvia Plath and her heroine's reveal many striking similarities. The novelist's life events are integrated in the narrative to create an intimate connection between the experiences of Plath and those of Esther Greenwood, giving the novel an autobiographical quality.

The events of *The Bell Jar* mirror very closely those of Plath's life. Rosi Smith states that there are many overlaps between Esther's life and what Plath personally experienced as a college girl, though their attitudes cannot be considered the same (39). Given this autobiographical nature of the work, critics identified many associations between Sylvia Plath and Esther Greenwood. Esther is portrayed as a successful brilliant young girl accustomed to prizes and publications. She wins a competition to work for a month as a guest editor on a New York fashion magazine.

Plath herself went to New York during her college years as a winner of a *Mademoiselle*³⁵ writing contest. Like her heroine, she achieved success in her academic endeavours and won many prizes for her writings. Yet, the pace of academic and literary success started to slow down as the symptoms of a mental illness became apparent. In the first sentence of *The Bell Jar*, Plath/ Esther says that she was “stupid”, she feels “sick”, she didn’t know what she was doing in New York, and that she was “preoccupied with death” (Plath 01). Plath herself suffered from these death-oriented thoughts for a long time (Wagner 42).

The next aspect of association between Plath and Esther is the portrayal of mental illness. Plath’s descriptions and presentations are so valid that it becomes clear that they are derived from a personal experience. Her insights into a complex and troubling psychological state such as madness strengthened the claim that the novel is an autobiography. Furthermore, they gave an aspect of reliability to the novel and contributed to its success.

The causes of the mental breakdown of Plath and Esther are also similar. Both suffered from the lack of supportive Institutions. Belonging to an incomplete family, there are no good supporting systems in their lives. Both young adolescents couldn’t build a good sense of the self because everyone around them was pressuring them to achieve personal, academic and professional success without offering them an adequate “good model” that can be followed. For instance, the mother is supposed to play a vital supportive role in Plath/ Esther’s life in the absence of the father. Yet, this was not the case. The lack of mutual understanding led to a total breakdown in the mother-daughter relationship; a breakdown which had serious repercussions on the writer/ heroine’s psyche.

Mosteghanemi’s *Memory in the Flesh* also reveals many autobiographical influences. Her fictional creations resemble many aspects of her personal life. The life of Hayat; the novel’s heroine reveals striking similarities with Mosteghanemi’s. Mosteghanemi weaves the first

³⁵ *Mademoiselle* is the name of the fashion magazine that Plath worked for during her college years.

threads of connection between her personal life and Hayat's right from the beginning of the novel. Hayat was born in Tunisia in 1953. This is the exact date and place of Mosteghanemi's birth. Besides, names in *Memory in the Flesh* overlap with reality. Hayat's official name is Ahlam; Mosteghanemi's first name. Names establish the first linguistic linkage between personal life and fictional portrayals of disability in the novel.

Paternal influence is another aspect of similarity. Mosteghanemi appears in most of her novels and poems as a woman strongly attached to her father. Mosteghanemi repeatedly dedicates her art works to her father³⁶. Hayat's life is however shaped by the father's absence. As Hayat tells Khalid about the effects of her father's absence in her life, the reader feels that Mosteghanemi is describing how her life would have been if she had not had a father. Hayat constantly evokes the father's image in her literary works to compensate her emotional needs. She clearly states, "If I had had the ability to choose, I would have preferred to have him by my side not just to see his name on the streets and institutions named after him. I would have wanted him as my own father, not as the martyr and the symbol, the nationalist figure and father of all Algerians" (Mosteghanemi 78). The way Hayat laments her father resembles the way Mosteghanemi honours her father in most of her works.

The next aspect of resemblance between Mosteghanemi and her novel's heroine is professional. Being a young Algerian female writer, Hayat is the vehicle Mosteghanemi opts for to express her thoughts, feelings and political attitudes. The character of Hayat enabled Mosteghanemi to criticise the social and political scene in post-independence Algeria. As such, the critical perception of Hayat as Mosteghanemi's spokeswoman is justified and strengthened.

³⁶ The dedication in *Memory in the Flesh* is made to the father among other Algerian historical and literary figures. Chaos of the Senses' dedication: "To my father, once again". Abir Sarir's dedication falls within the same tradition of Mosteghanemi: "Always to my father".

The conception of disability in *Memory in the Flesh* is not only physically-bound but also socially and politically constructed. The Disabled artist is disabled not merely because of his imputed arm but due to social injustice and political alienation. Through the victimization of Khalid, Mosteghanemi criticises the belief systems that created disability and the government systems that aggravated its psychological and social impact.

Autobiographical elements are more apparent in *The Bell Jar* than in *Memory in the Flesh*. Plath's personal experience with mental distress gave her narrative both depth and authenticity. Mosteghanemi portrayed war disability from an outsider's perspective. Yet, her nationalist concerns and lose relationship with ex freedom fighters gave her deeper insights into the psychological, social and political circumstances surrounding the experience of living as a disabled in post-independence Algeria.

4-3-2. Plath's and Mosteghanemi's Historical Contexts: Impact on Disability Representation:

At the historical level, the eras during which both novels were written were characterized by social and political unrest. Many literary scholars have consistently read Plath's novel as the story of a woman's struggle against the oppressive social and political forces of America in the 1950's. Linda Wagner calls the novel, "A testimony of the cultural mould that trapped many mid-century women" (Wagner 67). Similarly, Mosteghanemi's novel is read as the story of Algeria's struggle against foreign domination and attempts to build a new nation. *Memory in the Flesh* retells the nation's history and describes its injury. Viewing both narratives from a historical perspective, it becomes clear that they reflect the particular concerns of the age.

Written in the 1950's, *The Bell Jar* mirrors cold war America and reflects the creation of an ideology cultural containment. Plath and her protagonist came at an age when gender roles

were strictly assigned. Smith states that, “Women during the 1950’s were explicitly told that happiness could only be achieved through the enactment of a biological imperative, in a society in which all deviance was treated with suspicion” (38). Accordingly, Esther’s search of an individualized identity and a viable self-image is hindered by the compelling social standards. Being torn between many incompatible choices, a psychological breakdown becomes inevitable.

At the time when Esther reaches maturity, American women fell in two groups. The first was that of the “good girls” who married well and had children. They kept nice houses, cooked for their husbands and children, and performed all domestic duties. These dutiful wives were the model of a successful woman. The second group, in contrast, included unmarried women who were doomed in society because they didn’t play their gender role properly. Thus, women were classified in society following their relationship to men and not in terms of their qualities, personalities, or endeavours. Smith described the state of women in Cold War America as “being shoved into an either/or situation”(39).

Being aware of this situation, *The Bell Jar*’s protagonist is caught in a dilemma. She refuses that socially assigned role and wants instead to be herself. Her quest is to integrate the pure innocent girl, the “A” student, the successful writer, and the fashion-conscious young lady. As she proceeds in life, her concern is always to make all these ends meet. Her tragedy lays in her inability to make a choice, perhaps because of the lack of a successful model that encourages her to be different, individual, and brave.

Esther’s dilemma was not merely a personal but a national one. Many brilliant successful females in the 1950s found it hard to assimilate an identity. The image of womanhood was subject to different and often contradicting perceptions. Therefore, many American women at that time displayed what Smith calls, “Neuroticism resulting from being torn between many

hard and incompatible choice ranging from the simplistic idealization of femininity by merely reducing it to biological destiny and the intellectual quest which were utterly dissociated from the female body” (38).

This failure of physical and mental recognition is closely mirrored in the events of *The Bell Jar*. The novel starts with a reference to the Rosenberg executions³⁷. Ironically, this incident ties the beginning of Esther’s story to its end. Esther represented the intelligent American woman who rebelled and decided to deviate from “the American way”. The symbolic value of the Rosenberg executions is made clear through the novel as Esther’s rebellious acts lead her to mental illness. Plath’s first lines of *The Bell Jar* reveal the inescapable tragic end of all those who didn’t conform to the American ideals in Cold War America.

Although Esther says that this incident “has nothing to do with (her)” (Plath 01), yet it plays a significant role in understanding her psyche and her society at large. Expressing sympathy with outsiders conveys the irony of Esther’s dissociation from society and her inability to internalize the ideals of domestic femininity. She says, “I couldn’t help imagining what it must be like being burnt all along your nerves” (Plath 01). Thinking that the Rosenberg punishment was so severe, and even “inhuman”, Esther clearly reveals that has no connection with the ideals of active citizenship and collective responsibility.

Showing opposition to the American public reaction, Plath breaks the societal constraints that coerced women to silence. Due to McCarthyism, as Smith explains, “society had been permitted, even mandated to monitor, arrest, and punish deviance and unconventionality. Dissent on a personal or a political level was conflated” (40). Very few American women could express their rejection of society’s norms openly. The fifties were a time of restricted

37 Plath refers to Julius and Ethel Rosenberg; a Jewish communist couple who were executed for accusations of passing US nuclear secrets to the USSR.

female roles. It is true that Plath in her *The Bell Jar* was among the first female writers to express dissatisfaction but it was not until the rise of feminist movements that a radical change could be brought about.

In her study of Cold War American society, Betty Friedan in *The Feminine Mystique* stresses that women in the fifties undertook a regressive move back to the home under the influence of a repressive ideology. She explains this move saying that:

Under the influence of a feminine mystique that idealized the role of housewives and gave them an unjustified privileged status, psychological and anthropological insights were used to condition women into believing that female self-expression and fulfilment were possible only within a sexual and social model of passivity and receptivity. (Friedan 102)

It was this conformist model of femininity that Plath denounces in *The Bell Jar*. Through the character of Esther, she posits the damaging impact of such attitudes not only on the happiness of her protagonist but even on her mental health. Friedan goes further to argue that the only reason behind Esther's mental disability is being put in the crossroads, obliged to make just one choice among many attractive but irreconcilable options. Friedan maintains, "It is in the blank starkness of this choice that her sense of self and direction began to crumble" (103).

The 1960's witnessed the rise of major social movements calling for women's liberation. The prospects of change appeared with a changing perception of education. It started being regarded as a means of social progress that enhanced the chances of women in terms of finance, freedom and cultural awareness. Marriage was also subject to a different understanding. Many women could openly express a partial or total rejection of domestic

destiny. Plath, through Esther attacked marriage as an unsuccessful social institution by saying “I am never going to get married” (Plath 11).

Navigating through the postcolonial space, *Memory in the Flesh* is also shaped by historical circumstances. The novel pictures the devastating impact of the Algerian War of Independence and its aftermath on the life of Khalid Ben Toubal. Entrapped by the circumstances of history, Khalid is faced by two significant paradoxes. The first is the body between physical limitation and cultural transgression. The second paradox which amplifies with the first is the nation as both the mother figure and the oppressor. His identity has been altered by both unstable physical conditions and the changing power relations.

Memory in the Flesh documents a delicate phase in Algerian history. The aftermath of independence was characterized by political upheaval, cultural displacement and psychological trauma. Amidst these unstable conditions, Mosteghanemi weaves her narrative to reflect and reflect on post-independence Algeria. She questions previously unquestionable issues such as the legitimacy of FNL rule³⁸ and the usefulness of the economic, social and cultural reforms it implemented. *Memory in the Flesh* thus can be read as a historically contextualized work of art which broached sensitive subject matters.

Historiographical literary paradigms are apparent in the novel as they shape the characters’ fate. Khalid, Hayat, Hassan and Si Chrif Abdelmula conflate the personal and historical in their lives. Their destinies are primarily shaped by the past. A historicist reading of the novel demonstrates the impact of historical trauma on the lives of the first and second generations of Algerians who experienced colonialism, anti-colonial struggle, decolonization and neo-colonialism.

³⁸ FNL is the Front of National Liberation, the ruling party in Algeria since Independence in 1962.

History is obviously told through the character of Khalid more than any other character in the work. Being an artist who suffered neglect in her country, Mosteghanemi partakes in a fierce criticism of the cultural scene in Algeria through the character of Khalid Ben Toubal³⁹. Khalid's personality is shaped by two major influences; his participation in the Algerian War of Independence and his post-independence loss and alienation as a disabled artist. Disability adds to the burden of the marginalized artist. Denouncing the cultural violence and intellectual displacement of artists that characterized the post-independence scene in *Memory in the Flesh* stems from Mosteghanemi's individual quest for a space and a voice as a young female writer. In Khalid's attempts to shape and develop his role as a writer in a state that makes him subject to discrimination and violence, Mosteghanemi not only portrays a historical fact but a personal crisis as well.

Writing and painting amidst the struggle for nation-building and identity formation is a form of political resistance in the novel. The unvoiced concerns and aspirations of the Algerian nation after independence are physically inscribed in the memory of the imputed body. Mosteghanemi's fierce attacks on the ruling party and the political, social and cultural situation in Algeria are manifested through the Khalid's displacement, disillusionment, estrangement, alienation and physical amputation. Art is accordingly adopted as a form of protest engaging both the fragmented memory and the imputed body in a form of creation that takes place on paper but aims at creating concrete waves of awareness and social progress.

The disabled artist's crisis of existence intensifies as he meets Hayat; the female figure embodying similar social, political, and artistic concerns but assuming different stands in life. Hayat in *Memory in the Flesh* represents the new generation of Algerians who didn't take part in the War of Independence but faced a situation in which they had to assume the legacy of colonialism and the consequences of the war. Loss, exile, fragmentation of memory and

³⁹ Mosteghanemi often touches upon historical events through Khalid's monologues. As such, she gives her own interpretations and judgements.

sentimental amputation were the heavy burden Hayat's generation had to deal with. A generation that didn't have the scars of the past on the body, as Khalid did but rather on the memory which missed historical figures, events and truths.

Si Chrif Abdelmula and Hassan Ben Toubal are two opposing figures reflecting historical realities in *Memory in the Flesh*. The former represents the ruling elite; the class that assumed power and wealth and reaped the fruits of Algeria's bloody military struggle. Si Chrif manages to get diplomat's position in the Algerian embassy in France and to secure many privileges using his brother's name. On the contrary, Hassan represents the fate of many Algerians who were subject to estrangement, neglect and political exclusion. Hassan's miserable life as a poor teacher of Arabic and tragic death due to a random ball epitomizes the social and political dilemma of many Algerians.

Memory in the Flesh and *The Bell Jar* can thus be read as a historically contextualized works. The portrayal of disability in the two novels is largely shaped by historical circumstances. History is accordingly indispensable for reading and understanding disability.

4.4. Similarities in the Language of Disability in *The Bell Jar* and *Memory in the Flesh*.

The language of disability in both *Memory in the Flesh* and *The Bell Jar* exhibits many common characteristics. Though the two novels are set in different times and places, representing disabled characters with different political and socio-economic backgrounds, the language they use to talk about disability reveals many striking similarities. The lexicosemantic choices of disabled characters were deeply affected by their physical and psychological states. The shared semantic features of disability representation in *Memory in the Flesh* and *The Bell Jar* are alienation, silence and the expression of repression.

4-4-1. Expressions of Alienation:

Feelings of social and cultural alienation can be an inevitable outcome of being different. Difference here implies both physical and intellectual unconformity. While *Memory in the Flesh* addresses this theme with reference to the damaging social impact of physical disability, *The Bell Jar* examines the psychological nature of being alienated. The causes of social and intellectual alienation for Esther Greenwood and Khalid Toubal were different. Yet, the consequences were almost uniform; the use of a language reflecting deep psychological uneasiness.

Esther's alienation stems from denouncing the feminist model of conformity in her society. Being unable to play her assigned gender role, she is caught in a dilemma. At a time when the dutiful wife was the model of a successful woman, Esther dreams higher. She tries to create an individualized identity that integrates the 'good girl', the all grade 'A' student, the successful writer, and the fashion magazine lady. The self-image Esther draws did not match societal expectations.

Rosi Smith attributes the origins of Esther's psychological suffering to the absence of the feeling of social belonging. She states that alienation was an inevitable outcome of living "in a society where all deviance was treated with suspicion" (Smith 38). Esther defends a young woman's desire to be classified in society according to her own qualities and capacities not merely regarding her relationship to men. She voices this concern with bitter contemplation as she says, "I hated ideas of serving men anyway" (Plath 18).

Similarly, Khalid in *Memory in the Flesh* experiences the same form of alienation. Khalid's alienation results from the wide gap between his wartime expectations and his collision with the painful realities of post-independence Algeria. Besides, the interconnectedness between the personal and the national in Khalid's case increases disability's alienating effect. As he feels unable to separate the ex-freedom-fighter and the

present disabled artist, the feelings of difference, hostility, rejection and inability to co-exist with the painful realities persist.

Disappointment, fragmentation of identity, unfulfilled dreams, deception, displacement and psychological suffering were the ultimate outcome. The psychological transformations Khalid experiences after the amputation surgery shake the balance between his individual and societal self. This in its turn, results in a troubled self-integrity. Losing the identity of a glorious and honoured freedom fighter and acquiring the undesired one of a disabled man creates an identity crisis for Khalid. As such, he is no longer able to be at peace with himself, and with the world as a whole. Becoming estranged and powerless intensified Khalid's alienation. As his physical difference could easily be noticed on the body, estrangement is caused by people's stares, comments, questions and even expressions of pity which he fiercely rejects.

Furthermore, both Esther and Khalid did not enjoy well-integrated social lives. In a disability context, the family of the disabled individual plays a decisive role in shaping his/her attitudes towards disability. Receiving assistance and support from the social surroundings, particularly family members may reduce the damaging psychological effect of disability. In the opposite case, the disabled individual grows conscious of his/her 'abnormality'. Social alienation is accordingly intensified.

For Esther, the social network is not much supportive. After the traumatic loss of her father, Esther's childhood is violently interrupted. Similarly, Khalid loses his mother while still an adolescent. A parent's death meant the loss of emotional and psychological support for both characters. Besides, Esther does not enjoy a close relationship with her mother. Khalid's feelings towards his father are not quite different. The impact of this emotional complex appears on a later stage of their lives. Both Esther and Khalid do not succeed to find true love

with the opposite sex. Esther develops attitudes of doubt and rejection towards men. Khalid's relationship to women is not stable after his strong love for Hayat culminates in a deception. As such, after becoming disabled, they remain lonely, estranged and alienated.

Accordingly, Esther and Khalid face the same social deception. Both are not able to come into terms with their societies' changing standards. Disability as an alienating force is highlighted in both novels. Though such deceptions might befall many individuals, disability however aggravates their alienating impact. The psyches of disabled people are already predisposed to alienation and sensitive towards deceptions because of their physical or mental difference. As such, linguistic expression in both novels is influenced by feeling of alienation. Language plays the role of probing deeper in the disabled characters' psyches to reflect their inner suffering.

Both disability narratives reflect a certain linguistic bias towards the use of items related to alienation and self-victimization. The linguistic choices made by Mosteghanemi and Plath in their disability narratives match the psychological states of their disabled characters. Considering Mosteghanemi's semantic options, they are characterized by the use of lexical categories reflecting a serious emotional crisis. The narrator; Khalid employs words related to powerlessness, helplessness, pain and vulnerability in the passages narrating the traumatic event of amputation. Following physical recovery, the psychological scars of an arm's loss are still reflected in Khalid's linguistic expression. Khalid opts for negative emotional words which make his narrative more reflective of alienation.

Esther in *The Bell Jar* is represented as a typical alienated American female in the fifties. In her narrative, Plath makes lexical choices reflecting captivity, descent, decline, hopelessness and loss of self-control. Disability resulted in an immense psychological suffering which was carried and released through language. The words "cries, tears and sobs" are recurrent in the

novel and their repetition is a sign of disability's ravaging effects. The use of short sentences to describe hysteric states makes the narrative more authentic as hysteria affects Esther's language faculty. The use of incomplete or incoherent sentences reflects her inability to maintain control over language as well as over her emotional states.

Language in *Memory in the Flesh* and *The Bell Jar* becomes a site of reflection of disability. For both Esther and Khalid, language was shaped by disability's alienating effect. Though the linguistic impact of disability on each character's use of language was different, it is noticeable that both opted for similar semantic choices. Perhaps, expression was different on the syntactic level as Esther employs more incomplete and incoherent structures while Khalid keeps using a refined classical Arabic. This is due to the nature of disability itself. Mental disability has a direct impact on the quality of linguistic expression while physical disability manifests an indirect effect reflected in the use negative emotional words.

4-4-2. Silence:

Physical deformities and mental troubles not only effect semantic choices but may have a silencing impact as well. Abandoning language means resigning to a state of self-focussed attention. Due to the feelings of alienation, hopelessness, and cultural exile, silence in disability substitutes all forms of verbal communication. As language is a tool of sociality, silence indicates withdrawal and distance from society. In the context of disability, linguistic expression is subject to misunderstanding, neglect and inability to convey the experience of being disabled. As such, disabled characters are noticed to opt for silence. In both *Memory in the Flesh* and *The Bell Jar*, the narrative is strikingly characterized by episodes of silence.

In *The Bell Jar*, Esther's mental disability does not lead only to psychological and social suffering but has linguistic repercussions as well. Esther attempts to verbalize her psychic condition seeking compassion, help and cure. Yet, all her attempts go in vain. After a long

phase of protests and hysteric cries, she resigns to silence. Poyatos Fernando claims that, “The existence of extra linguistic elements that complement the semantic contents of verbal language”. Silence is one of these elements. It is a linguistic mechanism that enables a different type of communication when verbal codes fail to do.

Esther’s silence is the outcome of hysteria. Hélène Cixous states that “the great hysterics lose speech. They are aphonic” (49). Assuming silence through absencing herself from the text, Esther affirms her identification with the state of a typical hysteric girl. It is not out of inability to use words but rather an outcome of deception. Words became no longer able to convey her experience or help in speeding the healing process. Silence is thus an indication of being on the verge of a mental decline.

Khalid similarly experiences periods of silence. Yet, unlike Esther, Khalid’s silence does not stem from a medical origin. While Esther suffers from a hysteric compulsion that silences her, Khalid is willingly exiled from language. The exilic experience of the disabled body creates ruptures with space, time and language as well. Right after the trauma of amputation, he expresses inability to put his feelings into words. Disability becomes a permanent incapacitating silence.

Memory in the Flesh thus represents a typical post-trauma narrative. Through the character of Khalid, Mosteghanemi illustrates the linguistic impact of disability. The absence of language manifests the disabled body’s deep psychological pain. Leaving the mother country further intensifies Khalid’s suffering. Home is the place where one can use the native language. Exile results in an exile from language well. Khalid’s verbal communication in the new setting is limited. This is not due to linguistic incompetence as he is a bilingual. It was rather the devastating psychological impact of disability.

Accordingly, physical deformities extend to language. Making no efforts to describe pain or voice one's concerns is the epitome of psychological suffering. Disability becomes a state when thoughts cannot be translated into linguistic codes. As such, all the pain resulting from the trauma of becoming disabled is accumulated within the self. Contrary to what Durst Morin Says, "Don't look at my disability, use your ears, don't use your eyes, and listen to what I am saying" (27), both Khalid and Esther are alienated from language. Disability for both of them was a retreat from verbal communication. Both came to the conclusion that the burden of being disabled in a normative society is so huge a burden that words cannot bear and convey.

4-4-3. Language of Repression and Marginalization:

The storage of traumatic events in memory involves complex neurological processes. The capacity to retrieve elements from the traumatic experience from one time to another is the result of both physiological and psychological mechanisms. Perry states that, "The brain changes with experience- all experience, good and bad" (02). Experiencing disability after normalcy is certainly traumatic. It affects the process of making internal representations and the way these latter are externalized and generalized. In *Memory in the Flesh* and *The Bell Jar*, both Khalid and Esther experience a state of post-trauma marginalization which is reflected in the use of a language of repression in both narratives.

Considering the language of trauma used by Khalid and Esther, a striking similarity is noticed. Language becomes a site of re-living and re-telling how painful and damaging it is to be disabled. Perry explains the process of the linguistic representation of trauma by saying that:

The human brain is an amazing organ which acts to sense, process, perceive, store (create memories), and act on information from the internal and external

environment to promote survival... The structural organization and functional abilities of a mature brain develop throughout life. The stored memories and reflections on traumatic events help modifying and re-structuring these functions. (Perry 03)

While growing up, the brain becomes more responsive to the external environment and everyday life events. Trauma thus, modifies the brain and its functions. The neurophysiological organization of the brain is affected by disability. This implies a significant change in different areas of the brain, including the one responsible for language production.

In *The Bell Jar*, mental disability altered Esther's patterns of speech. It produced a noticeable transformation from coherent, socially acceptable, and artistically valued discourse to a troubled, incoherent, inconsistent, and aesthetically rejected linguistic production. This shift spans all along the period during which Esther's mental state was in decline. It can be illustrated using both her conversational exchange in everyday life and her artistic production of short stories and novels.

In *Memory in the Flesh*, Khalid ceases to describe his state of mind in the period following amputation. It is only after more than twenty years later that he speaks and writes about his physical impairment and the consequent psychological turmoil he experiences. This period of reflection can be interpreted as a repression phase. The long struggle, the fierce crises, and the perpetual suffering Khalid managed to repress for more than two decades came to be released at once in his first novel.

Esther's mental condition inevitably affects her linguistic production on the short term but Khalid's physical disability takes a longer period of time to show its repercussions on language. As language is an outcome and a reflection of the mind, madness results in a

language of repression describing Esther's state of mind. However, a war disabled ex-freedom fighter finds it hard, and even shameful to express pain and suffering openly. Esther's inability to put the disabled female's inner suffering into words further intensifies her psychological suffering whereas Khalid's unwillingness to reflect on the experience speeds the process of moving from psychological vulnerability to maturity.

Applying Perry's analysis of Trauma to Esther's case, it becomes apparent that her mental condition transformed her linguistic functions. Esther's crisis of control over her actions and responses develops to a crisis of control over language. As she starts showing symptoms of hysteria, Esther reveals many linguistic disturbances. Though hysteria is a personality disorder, it has many speech-related effects. For instance, inability to maintain a coherent rational discussion with both her family and professional circles reveals the intense impact of psychic disorders on Esther's speech production.

In *Memory in the Flesh*, Mosteghanemi reveals a long-term impact of trauma. The physical scars on Khalid's body did not show in language till a late period in his life. Perhaps it was the failure in love that led to a new mode of linguistic expression characterized by pain and sarcasm. Collision with other painful personal and political realities makes a turning point in Khalid's conception and linguistic representation of disability.

Due to mental disability, Esther loses the power of effective linguistic communication. Hysteria upsets its victims. Being emotionally fragile is translated into language. The choice of words related negative emotions such as fear, danger, sadness, failure, loneliness and pain is one of the ways hysteria manifests itself. These repressed feelings find their way out through language. As hysteria can be simply defined as emotional excess, the language used by hysteric characters excessively represents negative emotions.

Esther's language of repression is the outcome of repressed sexuality. Repression has several physical, mental and linguistic manifestations. As a nineteen years old girl, Esther is still in the process of forming a sexual identity. Khalid however is a mature experienced man who has a gratifying sexual life though he is never married. The factors influencing both Khalid's and Esther's sexualities are different, and so is their impact on the language of repression.

In *The Bell Jar*, American society in the fifties is represented as having double sexual standards. Esther confirms the interconnectedness between repressed female sexuality and mental troubles. This is clearly reflected in language. Describing sexual life as a "mystery", "unknown" and "the old great tradition" reflects repression. Besides, the use of opposites when talking sexual matters stands as a reaction against the paradoxical attitudes of her society towards her sexuality as a disabled female.

Contrary to Esther, Khalid never experiences such a sexual repression. His language of repression is the linguistic manifestation of political injustice. Khalid's imputed arm is the greatest sacrifice he gives for the sake of the nation. Yet, after independence, the disfigured body is no longer a symbol of honour but rather a shameful sign of disability and vulnerability. Unable to voice out his deep pain, powerlessness, grief and disappointment, Khalid represses all his negative feelings. Language seems unable to bear his unknown personal and political fate.

The Bell Jar and *Memory in the Flesh* stand as two vivid examples of the repressive impact of disability. The sources of repression varied between sexual and political factors but the result was certainly the same. The two disability narratives proved that disabled individuals are predisposed to repression. Linguistic expression often becomes their sole refuge to externalize the devastating impact of being disabled in a 'normative' society.

4-4-4. Language of Nostalgia and Captivity:

Memory in the Flesh and *The Bell Jar* address the themes of nostalgia and captivity with reference to physical and mental disability. Both Mosteghanemi and Plath have a certain linguistic bias towards the use of items and syntactic structures related to these themes. The semantic features of both disability narratives match the psychological state of the disabled characters and give an aspect of authenticity and reliability to their linguistic choices.

Perhaps the most obvious characteristic of Esther's speech production during her hysteric phase is the use of short sentences. This makes the narrative more authentic because long, well-structured sentences reflect deep, coherent and rational thoughts. Language in *The Bell Jar* mirrors the character's psyche. It exhibits an aspect of reliability because it matches Esther's psychological suffering. The description of hysteric cries and laughs permits an insightful understanding of Esther's mind.

In Esther's case, Plath opts for metaphors of captivity to represent the psychic condition of the disabled young girl. Pathological fatigue results in a confused state of mind and has an impact on language. After long sleepless nights, Esther's language illustrates troubled thoughts. Esther speaks using negative forms. This reflects that disability is a state of loss of control over language. Moreover, Esther's linguistic production reflects other traits of madness such as unintentional speech. In normal language use, the speaker models an intention before uttering sentences. Yet, in the case of hysteria, the speaker doesn't manage to think well and formulate a conception of the message before speech production. Carroll explains this by saying that, "In hysteria, the body speaks using the mode of gestural faculty to express the impossible or forbidden speech"(Carroll 33).

Similarly, in *Memory in the Flesh*, Khalid is unable to find peace with the past. Memory continues to recall the bridges of Constantine. This proves that the disabled person is never

able to find an accommodation with the painful past. Khalid states that when he was painting bridges, he was in fact painting himself, as the bridge “was simply an expression of (his) situation that is forever in suspense” (Mosteghanemi 135). The Bridge is a metaphor for the self. It symbolizes an attempt to be connected to the past, a means to make two distant ends finally meet.

The way Khalid chooses his own variety of language reflects a deep emotional crisis resulting from his nostalgia to his homeland and his past ‘normal’ life before disability. His choice of words conveys powerlessness and helplessness. During the identity crisis he experiences, linguistic expression becomes his sole means of creating links with old self and artistic creation constitutes a refuge from exile. Khalid recurrently uses linguistic items reflecting his altered self-perception after becoming disabled. This means that despite of the passing of time, the injuries resulting from amputation still hurt, as they used to do in the day when he his arm was the target of the two balls.

Comparing Khalid’s and Esther’s relation to language, it becomes evident that both opted for the linguistic expressions which manifested their psychological states. Language becomes an authentic site of reflecting the experiences of physical disability and mental distress. All the dark thoughts related to the experience of mental distress are verbally articulated. The metaphors of descent reflect psychological decline. While Esther experiences discursive transformations because of hysteria, Khalid makes many attempts to modify his first tableau ‘Nostalgia’. Both forms of expression constitute the psychological and linguistic framework within which disability is perceived and experienced.

The complexity of the relationship between the disabled character and language stems from various reasons. The first is psychological. Disability’s alienating impact extends to linguistic expression. Language becomes the tool that translates the disabled character’s

feelings of negative difference. The second reason is temporal. In the case of Khalid, disability became a permanent condition. He is in a position to co-exist with it for his whole life. Perhaps this is what made its linguistic impact more intense. Esther's disability however is just a phase in her life. The possibility of being cured later allowed the reader to notice the difference between her linguistic choices during and after disability.

Third, the social factor played a vital role in shaping the disabled characters' relationship with language. Colin Barnes defines disability as "a functional limitation caused either by chronic illness/impairment, or by the complex interaction between the limitation of the body/mind and society at large" (Barnes 72). Society shapes not only people's attitudes towards disability but even the disabled person's attitudes towards him/herself and towards language as well.

All the thoughts of the characters are centred on a single troubling fact; disability. For this reason, disability theory is a useful analytical tool to read *Memory in the Flesh* and *The Bell Jar*. It demonstrates the interconnection and overlaps between Esther's struggle and that of physically impaired or mentally distressed people. Despite of belonging to different cultures and having different conditions, they always share the same hopes and expectations.

4.5. Differences in Disability Language in *Memory in the Flesh* and *The Bell Jar*:

Though *Memory in the Flesh* and *The Bell Jar* shared many aspects of disability representation, the points of divergence are also recurrent and warrant investigation. Differences in the language of disability used by Plath and Mosteghanemi can be attributed to psycholinguistic and sociolinguistic factors. On the psycholinguistic level, the verbal and non-verbal manifestations of disability in the two narratives are examined with reference to choice of art forms by both Esther and Khalid. Then, the impact of the body-mind relationship on

expressing disability is analysed. On the sociolinguistic level, the influence of social parameters such as gender and age of disability language is examined.

4-5-1. Art Forms and Disability Language:

Artistic creativity in *Memory in the Flesh* and *The Bell Jar* is a means to transcend the trauma of physical disability and mental disorder. Through art, trauma is relived and retold. Both Khalid and Esther opt for art to overcome the negative effects of disability. Though their forms of artistic expression were different, both allowed a psycholinguistic and a psychoanalytical understanding of mental distress and physical disability.

To start with, Khalid and Esther's psychic states during and after disability were different. Accordingly, their art subjects were different as well. Esther feels that she was captivated in a bell jar whereas Khalid was attracted by wide and sublime places in nature. The metaphors are different and even opposing. Esther through the metaphors of captivity expresses her psychological need for an escape whereas Khalid, through painting Constantine's Bridges expresses a desire to go back to the past; a past in which he was not disabled.

The means to analyse the impact of disability on Esther Greenwood is linguistic whereas Khalid Ben Toubal externalized all his suffering in paintings. Between abstract expression and concrete creation, the experience of physical disability appears as a pressure for compensation whereas mental disability is reflected in a desire for externalization. Khalid attempts to create beauty using his disfigured body. The high appreciation his works receive helped him to compensate the loss of a part of his body. Esther however speaks and writes to let out the heavy pressure of psychic disorder.

Besides, the choice of their forms of expression sheds light on the difference between physical and mental disability. Esther uses metaphors of descent and Khalid paints static

objects. Using a psychoanalytical lens, variation in art forms is an embodied phenomenon. The choices people make about art partially reflect their bodily states. Through artistic creation, the body speaks on behalf of the distressed mind. Both Khalid and Esther opt for art during the worst periods of their extreme psychological conditions. Coded language and coded painting illustrate fears and substitute speech. Both give insight to their inner mind and convey the experience of being disabled. This gives both psychological depth and linguistic reliability to the narratives.

Unlike Esther, art provides Khalid with an opportunity for a deeper understanding of the self. As Esther's mental disorders aggravate, she suffers from a serious inability to read or write. This inability later intensifies to an inability to take decisions or solve problems. The metaphor of the 'fig tree' and Esther's confusion about which fig should be picked since all the figs seemed ripe illustrates this mental state. This is a metaphor to her inability to choose a path for her life. Esther seems to want social, professional and emotional stability. Yet, she lacks the mental force to make these decisive life-choices. The lack of psychological control widens the gap between the body and the self. It establishes a form of separation between what the mentally distressed person wants and he/she is actually able to do. Art thus becomes Esther's sole refuge.

Yet, *Memory in the Flesh* illustrates the healing potential of art. As disability results in the accumulation of negative energy, art helps letting it out. Cathy Malchiodi stresses that, "Art helps improving the psychological, spiritual and even physical conditions of disabled individuals" (63). The images Khalid creates give insight to inner states and enable a better understanding of the impact of disability. Enduring the painful new realities that came with disability was facilitated through creating new spaces for escape.

Art could bring a positive change to Khalid's life whereas it failed to improve Esther's psychological state. Thus, the process of using art for therapeutic ends differs from one individual to another, depending on their medical and emotional needs. Esther opts for verbal art because it tends to dominate all forms of artistic expression. She believes that words are the most useful means of conveying her experience of mental distress. Khalid however decides to take a different path. The intensity of his experience was beyond the communicative power of words.

In *The Bell Jar*, Esther struggles to find words related to trauma, despair, powerlessness and neglect. Yet, she does not reach a satisfactory outcome. She cannot translate thoughts into linguistic codes. Verbalizing the schizophrenic experience renders it more confusing whereas visualizing amputation, exile and emotional failure renders them more understandable. Through brushes, colours and white papers, Khalid finds the adequate space and appropriate means to let out his inner instability and fragility.

Disability results in many negative emotional experiences. Its silencing effects create pressure to look for an alternative medium of expression. Both Khalid and Esther attempt to use art as a reparative strategy. To minimize the feelings of loneliness and neglect, Esther opts for writing. Despite the fact that she was a successful short story writer, her depressive mood hinders her expressive abilities. "I could neither read nor write" (Plath 75), Ester complains. On the contrary, Khalid's disability revives his creative powers. During the darkest periods of his life, his artistic production intensifies.

Within a disability arts perspective, Colin Barnes claims that, "For centuries, impairment and suffering have been seen as a necessary prerequisite for creativity and artistic endeavour" (Barnes 02). Thus, the implementation of art as a therapeutic method facilitates the socialization of disabled individuals by allowing them to participate in the formation of

society's cultural identity. Disabled individuals are no longer mere 'subjects' of sociocultural representations, but they themselves participate in creating permanent values of cultural wealth. Art helps transforming the disabled person from a passive receiver of social and psychological support to an active creator of culture, theory and identity.

Memory in the Flesh and *The Bell Jar* represent disability as a source of inspiration. This promotes an anti-thesis of long-standing cultural representation of disabled people. The attitude of both Khalid and Esther towards art allows them to challenge disability and gain a new understanding of the self. After all the bridges of effective communication with friends and family members were broken, Esther creates another form of communicating through writing. Similarly, Khalid turns to painting bridges as a form of enduring disability and self-imposed exile.

Engaging in works of fine arts, Khalid manages to release psychological pressure through the motor activity of painting. This gratifies his desire for independence and strengthens his feeling of self-worth. After every successful tableau, Khalid feels that he "succeeded to bear the weight of that heavy challenge using a single hand" (Mosteghanemi 101). For the disabled artist, art is always a matter of proving ability for himself and for the world. Unlikely, Esther's attempts of writing her first novel never went up to the level of impressing others, or even satisfying her. Esther says that, "Writing was all like an immense, vain effort" (Plath 75). Perhaps, for her already exhausted mind and spirit, a motor activity in which her body can release negative energy would have been much beneficial and successful than a cognitive activity which worsened her already fatigued mental capacities.

Furthermore, art enabled Khalid to achieve maturity, dignity and self-respect. His first tableau 'Nostalgia' contributed in building a healthy relationship with memory. For Esther, the first novel was an attempt to re-draw a new image of her. The main character was a

nineteen years old American girl who has almost the same conditions and bodily features as Esther. Yet, she was healthy, capable of thinking and enjoying a successful personal and professional life. It was an attempt to create a non-disabled Esther.

Healing through art in Khalid's case takes place via re-exposure to the traumatic event. However, Esther's attempts for recovery through art constituted in finding an escape from disability. Khalid's confrontation with the new reality of amputation makes the externalization of disability's inner impact possible. Drawing and painting are his non-verbal forms of trauma narratives. Yet, Esther's decision to verbally narrate mental disability does not attain its intended results because her linguistic faculties were already troubled by hysteria, schizophrenia and depression.

Testifying wounds through painting helps bringing back the traumatic event of amputation to memory. This process of familiarization with trauma via retrieving it to consciousness has a powerful healing impact on Khalid as it plays an active role in his recovery. Esther however, passively attempts avoid confrontation by creating a new reality in her fictional settings. Esther never manages to transform her desired fictional world into a psychological reality. As such, the process of recovery through artistic creation remains an allusion.

4-5-2. Body-Mind Relationship and Disability Language:

Disability certainly affects the body-mind relationship. The body is the natural symbol of thinking about our relationship with others. Besides the medical discourse of care and rehabilitation, the psychological dimension of disability and its relation to the conception of the body raises heated debates in literary circles. *Memory in the Flesh* and *The Bell Jar* represent a typical case of the damaging influence of physical impairment and mental distress on the body-mind relationship.

The interconnected between the physical condition of the body and the social, political, cultural, psychological and even linguistic state has been pointed out by many researchers. Nancy Hughes and Margaret Lock affirm that, “The body is a social, political and cultural artefact” (Hughes 06; Lock 41). The way the disabled body is conceptualized has a profound impact on its personal and social relations. Self-perception is shaped by the image of the body. Looking different psychologically means feeling alienated, under-estimated and even rejected.

In *The Bell Jar*, Esther Greenwood experiences a severe sense of dissociation from the self because of her mental condition. Body-mind dissociation is a Schizophrenic trait. Esther inhabits a different (false) identity to feel safe. She calls herself Elly Higginbottom not only as a mere lie but as an attempt to escape her own identity and become a different (sane) person. Schizophrenia is characterized by the use of multiple identities as a defence mechanism.

In *Memory in the Flesh*, Physical disability surprisingly strengthens Khalid Ben Toubal’s self-integrity. Schizophrenia weakens herself integrity but physical disability strengthens Khalid’s sense of the self. Khalid’s sense of integrity reaches its peak after amputation. He consolidates all his physical and psychological powers to transcend that trauma. This difference in disability’s impact may be due to the fact that Khalid’s impairment is a sacrifice for the nation. The mutilated arm stands as an allegory for the mutilated historical truth. Khalid claims to use the right arm he still has to defend the cause for which he lost his left one. Placing disability in this wide historical and cultural context gives it a bigger dimension and makes it a source of pride instead of pity, shame and dissociation.

Unlikely, Esther’s disability stems from personal problems and identity disorders. Dissociation weakens the relationship between the self and the body. The body is accordingly

conceived just as one among other objects in the world without any sense of belonging to the self. In Esther's case, it is not only the face that becomes an object of estrangement and dissociation but the body as a whole.

Disability's impact on Khalid is not as severe as on Esther. Yet, the missing arm is sometimes a source of troubles and feelings of embarrassment. Images of Esther's feelings of inability to recognize her "real" self are recurrent in *The Bell Jar*. Because of her schizoid condition, Esther's reflection in the mirror becomes a stranger. A similar incident takes place when Esther returns back home on the train to Boston. Esther says, "The face in the mirror looked like a sick Indian" (Plath 59). Similarly, Khalid also has this fear of seeing his reflection in a mirror. Disability causes the disabled person to end up hating his/her body.

Linguistically speaking, disability has a negative influence on the disabled individual's verbal representation of the self. The evidence is that Esther refers to her voice as the zombie voice, "I dialled to the admission office and listened to the zombie voice leave a message that Miss Esther Greenwood was concealing all arrangements to come to summer school" (Plath 61). Esther speaks about herself as if she is speaking about another person. She estranges not only her voice but her body as a whole. The body in schizophrenic cases becomes detached and passive.

The dissociative disorder of thought is reflected in schizophrenic speech. Schizoids speak about "their" own experiences as if they were not "their own", which is the case with Esther Greenwood. Disability also affects Khalid's language-related functions making it difficult for him to speak about the self using positive words.

Verbal manners reflect the tendencies of thought. The choice of words and the tone of speech are important determiners in analysing language in *Memory in the Flesh* and *The Bell Jar*. Esther's language reflects depressive suicidal speech. Khalid's linguistic expression also

reflects a certain bias towards negative emotional words. The self-disengagement of both characters reveals the depressive impact of disability. For Esther, mental disorder leads to a form of alienation from the body. For Khalid, physical disability enables an authentic identification with the nation. It substitutes all forms of official papers, it was a historical fact that Khalid bears on his body.

4-5-3. Gender and Disability Language:

Gender differences have always played a significant role in shaping linguistic behaviour and attitudes towards disability. Male and female perceptions and modes of expression are not uniform. Through gender differences, Mosteghanemi and Plath constructed the literary tools through which they addressed their themes and voiced their concerns. In *The Bell Jar*, Plath through her female protagonist deconstructs her society's attitudes and norms of beauty, sexuality, motherhood and gender roles. In *Memory in the Flesh*, Mosteghanemi holds the masculine perspective of Khalid to challenge the values of courage, loyalty, strength, patriotism and family relationships.

First, considering the origin of disability in both cases, it becomes clear that impairment is due to factors related to gender. Esther's mental disorders, mainly hysteria stem from physiological and hormonal origins. Hysteria is even considered a 'female malady'. Through Esther, Plath represents the depressive influence of society on young females. Esther Greenwood shows many hysterical symptoms originating mainly from her rejection of cultural traditions, social rules and sexual conventions. The most apparent traits of her mental illness are related to her being a female: hysteric cries because of societal pressure, insomnia because of indecision, depression due to emotional deprivation, and schizophrenia because of the double standards of society towards women.

Khalid is however a war disabled ex-fighter. His physical impairment is the result of participation in the war of independence. As disability originates from an honourable cause, its conception and effects were different. His disability is a political construction related to the bloody struggle in which Algerians were involved. Though the War of Independence gives Khalid the opportunity to build a positive self-esteem, it causes him another disastrous loss. Thus, the repercussions are further damaging on the psychological level. War disability is regarded as the greatest sacrifice Khalid gives for the nation's sake. His imputed and disfigured body is a symbol of honour in any war. Yet, when the war is over, norms and principles changed. Emotions of pride and zealous nationalism turned to deep pain, powerlessness, worthlessness and neglect. It is the price men had to pay to conform to the expectations of society.

Second, the imagery used by both Khalid and Esther reflects a gender difference. The importance of metaphors in disability expression cannot be denied. Images related to the ugly, aberrant, deformed and feeble-minded females are associated with disability representation. Esther relies more on literal language whereas Khalid opts for figurative one. With varying degrees, both disabled characters use metaphors and image schemas related to disability. Having a disordered mind, Esther does not show ability for deep thoughts and elaborated linguistic expression. As such, she narrates her experience using plain language and literal semantic constructions. The construction of meaning in her disordered mind takes a simplistic dimension. Esther's cognitive states such as hysteria, schizophrenia and depression were certainly behind the semantic and syntactic choices she makes.

For instance, Esther's direct and sometimes even harsh language is a symptomatic acting-out of her troubled inner state. Her violent attitudes towards friends and colleagues, her sudden hysteric cries, and her accusations of bad intentions to both her mother and doctor reveal her incapacity for linguistic control. The feelings of weakness and inability to take

control of her life are aggravated by the position women at that time had in society. The severe social code which strictly determined gender roles worsened Esther's mental state. Mental disorder hinders the capacity for socially-accepted linguistic expressions for negative thoughts. It makes them direct and unveiled.

Unlike the images used by Esther, the metaphors Khalid uses in *Memory in the Flesh* are figurative. Physical impairment traumatized him but also stimulated his creative capacities. Khalid's reaction to disability has the masculine features of demonstrating strength and resistance. The moments of weakness and powerlessness in the narrative are less common than in *The Bell Jar*. For instance, unlike Esther's frequent hysteric cries, Khalid admits that after he receives the two balls, he was not preoccupied with his bodily pain but rather with the idea of whether he would join back the Front of National Liberation or not . Khalid tries to challenge the cultural stigmas about disability by deconstructing the 'ideology of ability' which dominated his society.

Regarding the gendered effects of disability, it is noticeable that the discourse of disabled female and their male counterparts are different. Disability presents a crisis of control over language for Esther. This can be partly attributed to the nature of her illness. Yet, the other important factor in shaping Esther's use of language is related to female psychology. Unintentional speech and unpredictable actions are hysteric trait related to gender. They can be identified in Esther's use of language. The loss of control of her behaviour extends to language. Esther says that she does not manage to speak in a cool calm way. Her linguistic output is characterized by a lack of control and concentration and the repetition of unintended expressions.

On the contrary, Khalid presents the image of the disabled man who is always in control. We rarely find unintentional words and expressions from Khalid's part. He keeps his emotional

strength and mental integrity even in the hardest periods of life. The narrative gives Khalid the dimension of the undefeatable masculine character that succeeds to survive loss, impairment, failure in love and national deception.

The consequences of changing attitudes towards gender and disability result in a changing attitude towards language. Linguistic behaviour in disability is related to gender and demonstrates a certain bias towards male modes of expression. Julia Kristeva explains this alienation by stressing the necessity of assuming a male voice, “The masculine speaking role is necessary to have a place in language” (qtd. in Nairs 42). The female voice of Esther, i.e. refusing to speak from a male’s position and voice masculine interests, constitutes a linguistic barrier between Esther and her society’s linguistic norms. The hysteric silence she endures represents her exclusion from language as a consequence of being excluded from society.

Images of the ‘fragile mad girl’ and the ‘crippled hero’ are reflected in *The Bell Jar* and *Memory in the Flesh*. This confirms the impact of gender on the perception of disability and its effects. Certainly, no generalization can be made as to the psychological and linguistic symptoms associated with disability for all males and females. The findings are strictly limited to the two cases examined above.

Attitudes towards sexuality constitute another major difference between Khalid and Esther. To challenge the ideology of ability, Esther in *The Bell Jar* celebrates sexuality. She holds disability as an identity and attempts during her mental illness to form her sexual identity away from the masculine norms of her society. In *Memory in the Flesh*, Khalid has a different attitude towards sexuality. Because of the physical nature of his disability, his sexual life is certainly affected. He openly declares that his missing arm disturbs his girlfriend Katherine “in some situations” (Mosteghanemi 25). This implies that owing to disability, both Khalid

and Esther do not manage to have a normal sexual life. Accordingly, Esther strives for more sexual freedom whereas Khalid ceases from all sexual activities.

Memory in the Flesh and *The Bell Jar* represent disability as a gendered phenomenon. As both Khalid and Esther interact with a society based on some cultural attitudes and expectations, meeting these expectations became a challenge. The disabled body and the distressed mind are exposed to societal pressure for conformity. In the case of women, disability originates from the fact that they were deemed as ‘the second sex’. This patriarchal ideology makes disability more poignant. When society dictates what is to be ‘normal’ and ‘abnormal’, women live under the pressure of failing to meet societal expectations. The literary representation of the disabled female in *The Bell Jar* proves that gender differences may cause and intensify disability. In the case of men, the ideology of ability has a different impact. In a society where the concept of manhood is built on bodily strength and economic contribution, physical impairment has a negative effect on the disabled man’s self-perception. Khalid represents the typical image of the war-disabled man who struggles to meet social expectation and rebuild a positive self-esteem.

4-5-4. Age and generational Influence on Disability Language:

Age has a considerable influence on determining the way people react to disability. Differences in age imply belonging to different generations. Generational influence has always played a vital role in shaping the disabled person’s attitudes towards him/herself and the world. In literary representations, the portrayal of disabled characters reveals a striking difference between those affected by disability as children, youth, adults or aged. In *Memory in the Flesh*, Mosteghanemi portrays the effects of disability on an adult character whereas *The Bell Jar* narrates the story of the nineteen years old mentally disabled girl. The repercussions of disability are accordingly different and sometimes even opposing.

The formation of norms, ideals, values and cultural assumptions is a process that takes place through age. The accumulation of life-experiences may radically change the impact of the traumatic events leading to disability. As a consequence, the psychological and linguistic manifestations of disability vary according to age. Considering the portrayal of disabled characters in *Memory in the Flesh* and *The Bell Jar*, it is noticeable that age differences between Khalid and Esther fostered their attitudes towards disability and their reactions to it.

To compare the role of age in shaping attitudes towards disability in both novels, some key concepts in disability studies are questioned in both disability narratives. The two novels challenge the concept of similarity regarding the impact of disability. They proved that age differences may render disability a unique experience for its sufferers. In her model of counselling, Pamela Hays confirms the existence of gender, cultural, linguistic, ethnic and age biases is dealing with disability (232). The concern in this comparison is age biases. Through comparing Khalid's and Esther's reaction to the trauma of being disabled, this part attempts to make gender differences in disability more apparent.

To start with, the hallmark of disability portrayal in the two narratives is the way the experience of being disabled is verbally expressed. Esther in *The Bell Jar* experiences and starts writing about mental distress at an early age. As a result of her lack of experience, the narrative is characterized by ambivalence. Esther produces a language that deviates from the general discourse of the spoken conversation or the written production. She consciously or unconsciously loses control over her speech, mainly during the peaks of her Schizophrenic and depressive episodes. A set of deviations occurs at the level of discourse cohesion. Identifying and analysing these discursive deviations may offer an explanation to the way age influences disability representations and even creates linguistic disabilities.

Unlikely, Khalid in *Memory in the Flesh* narrates disability from an adult's perspective. Khalid often complains about "staring to write at an age when others have said almost everything" (Mosteghanemi 301). After a long career as a painter, he opts for writing as a new artistic form of expressing disability. Owing to both artistic and personal maturity, the narrative he produces is characterized by depth and consistence. He manages to voice many of the personal, cultural, political and economic concerns of disabled people through the lens of his war-disability. Thus, the differences in discourse cohesion between the two disability narratives stem from age differences. Khalid started narrating disability very late whereas Esther started very early. The narratives demonstrate that Esther lacked maturity and experience in life while he was mature enough to narrate the experience from an adult's perspective.

Besides, the repercussions of disability on Khalid and Esther varied due to age. Esther makes many suicide attempts whereas Khalid does not. This reveals that Khalid succeeds to co-exist with disability while Esther fails to do so and tries to put an end to her life. Esther's account of disability is characterized by pessimism and the use of negative emotional words. Furthermore, the lack of adequate logic, perseverance and resistance of social and cultural forces in *The Bell Jar* originates from the disabled character's generational belonging. Belonging to two different generations certainly generated two different attitudes towards disability and even towards life.

Considering the impact of age on the portrayal of disability in *Memory in the Flesh* and *The Bell Jar* offers an opportunity to examine disability within a more comprehensive context that takes account of the personal and generational factors. Yet, the findings are relevant to the two narratives examined and no generalizations can be made as to the influence of age on the perceptions of disability. The reason is that such generalizations may develop stereotypes about disabled people through categorizing them under the same labels.

4-5-5. Conclusion:

The language of disability in the two narratives reveals similarities and differences. It is not uniform but it shares many common linguistic manifestations. Alienation, repression, self-victimization and psychological pain are the most common aspects of disability language that the two narratives share. Yet, they obviously differ in some linguistic aspects related to the disabled characters' psychological differences and socio-linguistic parameters such as age, gender, education and family history.

General Conclusion

Searching about the meanings disability images impart to our collective consciousness both as readers and citizens was a central endeavour in this research. In reading the literary inheritance related to disability with a critical eye, it becomes clear that many new concerns contribute in shaping our current understanding of it. Disability representation in literature is such a wide and diversified field of research that it is not easy to make generalizations or reach satisfactory conclusions. Yet, an attempt was made by the end of the four chapters to state the findings.

To begin with, it is important to assign that the remarkable absence of disability in literary studies was not the result of a scarcity of literary works portraying disabled characters but rather due to the lack of critical attention. After tracing the fictional representations of disabled characters since the times of Shakespeare up to the Victorian Age, it became apparent that disability was always present in literature as it did in life. Poets, playwrights and novelists have always used their creative skills to reflect disability and create accurate representations of disabled characters embodying all the feelings, attitudes, suffering, alienation, repression and aspirations of people with disabilities worldwide.

It has also been crucial before tracing the presence of disability in literature to address the linkages disability theory has with other literary theories. Sketching Mike Oliver's materialist conception of disability, it becomes clear that disabled people suffered from social marginalization because disability hinders a fruitful participation in economy. Feminist disability theorists such as Rosemarie Thomson focused on gender roles and the double victimization disabled females experience in patriarchal societies. The psychoanalytical accounts of disability gave a different perspective as they focused on the unconscious manifestations of the negative feelings associated with disability such as alienation, oppression, anxiety, low self-esteem and self-victimization.

This theoretical background provided the necessary analytical tools to analyse Mosteghanemi's *Memory in the Flesh* and Plath's *The Bell Jar*. The sample novels give accounts of disability in its physical and mental manifestations. They have been analysed from a psycholinguistic perspective to highlight the verbal transformations resulting from disability and their representations in the narratives.

Chapter two addressed the language of disability in *The Bell Jar*. Using a disability studies lens enabled seeing *The Bell Jar* from a different perspective. It enriched the understandings and interpretations of the novel. A correlation was made between Esther Greenwood's experience of mental troubles and the experiences of people with disabilities. Overlaps between the two experiences were not only related to having the same conditions, suffering from the same alienation and oppression, and sharing the same hopes and expectations but even in exhibiting similar linguistic patterns.

The chapter first analysed Esther Greenwood's hysteria focusing on its speech-related symptoms. Though hysteria is not a linguistic disturbance, yet it leads to some transformations in both language production and comprehension. Deviant speech is a serious indication of mental troubles and it plays a vital role in defining the type of distress. It can even be considered a hysteric symptom. Hysteric symptoms in *The Bell Jar* were mainly the outcome of Esther's rejection of cultural traditions and social and sexual conventions. The most apparent traits of hysteria are long hysterical cries and insomnia.

The passages describing hysteric states are characterized by the use of short sentences. This further strengthens the aspect of authenticity. Esther's sentences came out short, disorganized, with many pauses, and sometimes even not fitting in the context. Plath's use of language permitted an insightful understanding of Esther's mind, and her experience as a whole. The use of short incomplete sentences, the choice of gloomy sad words, and the repetition of the

first person pronoun also arose from psychological factors. Language gives insight to the hysteric mind. It reflects the character's weak emotional structure and facilitates access to the hysteric mind.

Psychological decline is metaphorically represented in the image of descending objects. Expressions of bodily degradation in *The Bell Jar* illustrate a degrading psychic state. The chapter accordingly examined the linguistic manifestations of the thought disorders related to schizophrenia. It revealed the correlation between the sense of divided-self and verbal expression. A Psycholinguistic account of schizophrenic language in *The Bell Jar* proved that schizophrenia affects semantics, syntax and discourse. It alters Ester's patterns of speech and produces a noticeable transformation from coherent, socially acceptable, and artistically valued discourse to a troubled, incoherent, inconsistent, and aesthetically rejected linguistic production. Thus, the crisis of control over actions and responses associated with mental disability develops to a crisis of control over language. Schizophrenic speech is characterized by an impaired use of different types of linguistic contexts. At the level of discourse, Schizophrenia results in a difficulty at establishing connections between sentences. Besides, the false self that results from Schizophrenia means a poor manipulation of grammar.

Depression is the last phase of mental disorder in *The Bell Jar*. The chapter also discussed the linguistic reflections of depression on Esther's use of language. These latter are reflected mainly in the use of negative emotional words and suicidal language.

Chapter three examined the portrayal of physical disability in Mosteghanemi's *Memory in the Flesh* focussing on the linguistic manifestations of the physic impact of disability on Khalid's use of language. As to the semantic features of the representation of physical disability, disability produces feelings of self-victimization and alienation from society. As such, disability narratives reflect a certain linguistic bias towards the use of items and

structures related to these themes. In *Memory in the Flesh*, the construction of a disability narrative is a linguistically conscious activity as the linguistic choices made by Mosteghanemi match the semantic options at her character's disposal.

The psychological impact of physical disability affects the lexico-semantic patterns used by the disabled character. This is reflected in the use of a language of alienation. Physical disability results in an alienation from language. Reading *Memory in the Flesh* from an exilic-linguistic perspective, the process of meaning making is found to rely on alienation-related lexicon.

The chapter then examined the way artistic creativity in *Memory in the Flesh* becomes the means through which the trauma of war disability is relived and retold. It provided a brief history of art therapy and its relation with the major psychotherapeutic theories. Painting and writing are two expressive methods used by Khalid to express the psychological impact of disability. Art accordingly, provides disabled people with the means to social integration as it implies exchange of ideas, viewpoints and aspirations. On the individual level, art helps the disabled person to overcome depression and find a sense of well-being. Creativity leads to shame-reduction and generates feelings of self-worth. Art turns physical disability to an inspirational divergence.

The chapter also analysed facial expressions, bodily traits, and dance movement as means of representing the disabled body. It revealed the importance of using the disabled body as a means of self-expression. The basic facial expressions frequently used by disabled characters are linked to the psychological impact of physical disability.

The last chapter compared and contrasted the findings of the second and the third ones. It addressed the significance of cultural perceptions on the way disability is represented. Besides, it examined the language of disability in the two narratives and revealed the

similarities and differences between them. Disability language is not uniform but it shares many common linguistic manifestations. Alienation, repression, self-victimization and psychological pain are the most common aspects of disability language that the two narratives share. Yet, they obviously differ in some linguistic aspects related to the disabled characters' psychological differences and socio-linguistic parameters such as age, gender, education and family history.

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