Introduction

This literary deconstruction is completed in partial fulfillment of the requirements for Literary Theory in Teaching Literature. Given the power of choice on both text and theory, the analyst will present *I Never Promised You a Rose Garden* by Joanne Greenberg. Published in 1964, with more than six million copies sold, one play, and one film adaptation, this classic fictionalized semi-autobiography is an account of a teenage girl’s years as a diagnosed schizophrenic and an inpatient of a mental hospital. Hence, the psychoanalytic theory will be used to deconstruct the novel.

The fact that this was written more than five decades ago renders it more interesting in such a way that we can evaluate this book and its characters under a modern light. Schizophrenia is one of the most severe mental disorders, subjected to widespread ignorance. What better way to apply the psychoanalytic theory than to abnormal psychology in its most tragic form, a conflict between id, ego, and superego catastrophic enough to give birth to a spectrum of disturbances in thought, perception, emotion, behavior, and even body function? As grim as the prognoses sound—can it be overcome?

Objectives

The analyst will summarize the psychoanalytic theory in a manner befitting the characters, setting, plot, and themes of the story. The analysis will begin with a summary of the novel, and the deconstruction will be dissected into five parts. First, in line with Sigmund Freud’s (1856-1939) theories of ego disintegration and its manifestations to the body, we will enumerate and discuss the psychotic symptoms of the main character, Deborah Blau. Then, we dwell on her premorbid personality and individuality to make significant distinctions between the asymptomatic and the symptomatic ego. Freudian psychology of childhood trauma and fixations will then be discussed to determine the causes of Deborah’s psychosis. After the causes come the significant supporting characters to compare and contrast their neuroses, struggles, and developments. With the resolution, since Freud heavily aimed his studies on the retrospective agents of the present neuroses, and lesser on the person’s functional intervention, we will introduce more psychoanalytic figures as far as Deborah’s progress is concerned, such as Carl Jung (1875-1961) and Alfred Adler (1870-1937). The flow of discussion is similar to the flow of the psychiatric cycle in real wards. Excerpts shall be extracted as basis.
Discussion of the Theory to be Used

The psychoanalytic theory can be applied for both author and creation. In this case, we adhere to the novel and its fictive elements. According to Habib (2011), psychoanalysis as a literary theory sprung around the nineteenth century. The use of the psychological dimension in reviewing a character’s motivations and intentions have been around since Aristotle’s time, but it was only with Sigmund Freud that psychoanalysis had developed an organized body and used in the study of literature. To give romanticism a credit, Nietzsche, Schopenhauer, and Schlegel, had their own takes on the Unconscious before Freud, but it was the latter who systematized a whole analysis of the mental processes. Critics mostly use Sigmund Freud’s theories as grounds for their literary analysis as he stands at the forefront in these doctrines. Freud believed in the existence of unconscious forces, sexual tensions and stages, and the famous Structure of Personality: the id, ego, and superego.

Freudian psychology proved to be a sudden disruption in the centuries’ worth of Western thought. Man is a rational being, this is the truth that Aristotle, and the philosophers, theologists, and literary critics that followed have hold true for ages. Characters are capable of their own choices, reasoning, and morality. Suddenly the idea of an individual being driven by instinct and psychic energy emerges, and this extends to the literary. How sure are we that our aims and wish fulfillment are a conscious, bodily decision (Habib 2011)?

According to Calvin Hall (1979), Freud argued that all repressed desires are erotic in origin. The id is the pleasure principle. Freud called it “chaos, a cauldron full of seething excitations.” The superego, Heir to the Oedipus complex, represents morals, ideals, and internalized values that seek perfection. The ego, the reality principle, functions to meet the id’s demands with respect to the waking world. Defense mechanisms are the ego’s way of protecting itself from anxiety. They are either mature, immature, or neurotic. Neuroses stem from arrested libidinal development and unmet desires. When the frustration is too great, the unsatisfied subject turns to his neurosis and makes a world of fantasy out of it as a surrogate gratification.

There had been earlier literary texts that Freud had derived pleasure in relating with, such as Rameau’s Nephew, written by Diderot in 1762 (Hall, L.S., 1965). The protagonist in this story is said to be the “disintegrated consciousness,” a greedy and cocky character who went against the norms. Diderot, the writer, was a reasonable and decent man, “the ego.” What Freud suggested afterwards, in his “Creative Writers and Day-Dreaming” was the literary-critical procedure of the writer being a good citizen and functioning within the boundaries of his ego, while the literature he produces could be an extension of the id.

In terms of psychopathology, Freud supported therapy and the relationship between patient and psychiatrist. Positive transference, negative transference, and transference interpreted with the help of an analyst describe the possible dynamics between the two (Engler, 2012). In the novel, we shall also explore the relationship between the main character and her psychiatrist, and the type of transference that influenced the outcome of her holistic progress. However,
Freud was not convinced that catharsis, or the guided expression of extreme emotions, could work on psychosis.

What was Freud’s take on schizophrenia? According to him, the unconscious turmoil that is sporadic with the neurotic person is massive and uninterrupted with the psychotic one. “The psychotic individual appears to be constantly invaded by the other, like a strange person, which bursts inside of him/her and presents itself as a threat to the process of construction of this person’s identity” (Siegfried, 2014).

If Freud’s prognosis on schizophrenia is too antagonistic and does not align with the progress of the novel’s character, then we will break with convention and introduce other schools of thought such as Jung and Adler’s lesser reliance on sex drives and more on the human capacity for free will and self redemption. After all, an effective review of literature is a cross reference of contradicting and complementing sources. Admittedly, Freud functions too philosophically, we even see elements of the classic tragic realism. There are other proponents who made investigations on the demographic prevalence, reproductive, genetic, biological, and neurological factors on this type of psychosis. They will also be injected throughout the analysis as necessary.

Analysis

I Never Promised You a Rose Garden is about sixteen-year-old girl Deborah Blau, who was diagnosed with schizophrenia in 1948 and admitted in an asylum for three years, the name of which is undisclosed. She presented with a continuum of psychotic symptoms: Delusions, hallucinations, disorganized speech and grossly disorganized behavior, and negative symptoms. Together, Deborah and her psychiatrist, Doctor Fried, explored, confronted, and conquered this internal warfare to liberate the young girl from the shackles of her imaginary kingdom.

We begin with the observable. First, we psychoanalyze Deborah’s manifestations. Throughout the novel are smatterings of scientific names, but since it focuses on the character’s subjective experiences, it tones down the iatric, so we do the naming ourselves. Why are symptoms important in the psychoanalytic theory? The goal of human behavior is tension-reduction. If these behaviors, thought forms and contents, and thinking processes have gone awry, then what does it reflect about the ego’s capacity for stress? Signs and symptoms of psychiatric illnesses gauge the magnitude of the internal damage. These are also what must be replaced with mature coping mechanisms, as they drive the plot in a fashion that impairs the character’s daily life and expected roles.

Moving on, we introduce the Kingdom of Yr:

“BLAU, DEBORAH F. 16 yrs. Prev. Hosp: None
INITIAL DIAG: SCHIZOPHRENIA.”
“The Kingdom of Yr had a kind of neutral place, which was called the Fourth Level. It was achieved only by accident and could not be reached by formula or an act of will. At the Fourth Level there was no emotion to endure, no past or future to grind against. There was no memory or possession of any self, nothing except dead facts which came unbidden when she needed them and which had no feeling attached to them. Now, in bed, as she achieved the Fourth Level, a future was of no concern to her. The people in the next room were supposedly her parents. Very well. But that was part of a shadowy world that was dissolving and now she was being flung unencumbered into a new one in which she had not the slightest concern. In moving from the old world, she was moving also from the intricacies of Yr's Kingdom, from the Collect of Others, the Censor, and the Yri gods. She rolled over and slept a deep, dreamless, and restful sleep.”

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“She began to fall, going with Anterrabae through his fire-fragmented darkness into Yr. . . . there was utter darkness for a long time and then a grayness, seen only in bands across the eye. . . . the Pit. Gods and Collect moaned and shouted, but even they were unintelligible. Human sounds came, too, but without meaning. The world intruded, but it was a shattered world and unrecognizable.”

“One in the past, while in the Pit . . . meaning itself became irrelevant. And, of course, there was no fear in the Pit because fear had no meaning either. Sometimes she even forgot the English language.”

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“Dr. Fried sat on the other side of the heavy twelfth-century iron portcullis that Deborah occasionally found separating them. The portcullis had been raised this time, invisible, but when the doctor had mentioned parents and a visit, Deborah heard the sudden heavy rasp, and down it clanged between them.”

“‘What is it?’ the doctor said, not hearing the clang of lowering, but perceiving its effect.”

“‘I can’t really see you and I can’t really hear you,’ Deborah said. ‘You are behind the gate.’”

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“The horror of the Pit lay in the emergence from it, with the return of her will, her caring, and her-feeling of the need for meaning before the return of meaning itself. There had been one day when she had risen from the Pit while a teacher pointed to a word in her book, saying, ‘What is it. . . this word?’ . . . The teacher had been angry.”

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“Behold me! Anterrabae fell. . . . You are walking around your destruction and poking a little finger at it here and there. You will break the seal. You will end. . . you were never one of them.”

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“The gods of Yr had been companions—secret, princely sharers of her loneliness. . . . Its gods were. . . guardian spirits. But Yr was transformed from a source of beauty and guardianship to one of fear and pain. Slowly Deborah was forced to
assuage and placate, to spin from the queen-ship of a bright and comforting Yr to prison in its darker places. She was royalty among gods on the days of the high calendar, debased and wretched on the low.”

“Now she was also forced to endure the dizzying changes between worlds, to bear the world’s hatred voiced in the chanting curses of the Collect, to be subject and slave to the Censor, who had been given the task of keeping the world of Yr from blowing its secret seeds to ground on Earth, where they would spring up wide open to flowering lunacy for all the world to see and recoil from in horror . . . . Once her guardian, the Censor had turned against her. In her mind, the proof of Yr’s reality had become its very cruelty.”

“‘And it has a language of its own?’ the doctor asked.”

“‘Yes,’ Deborah said. ‘It is a secret language.”

“A black wind came up. The walls dissolved and the world became a combination of shadows. Seeking for the shadow of firm ground on which to stand, she was only deceived again when it warped away like a heat mirage; she looked toward a landfall and the wind blew it away. All direction became a lie. The laws of physics and solid matter were repealed and the experience of a lifetime of tactile sensation, motion, form, gravity, and light were invalidated. She did not know whether she was standing or sitting down, which way was upright, and from where the light, which was a stab as it touched her, was coming. She lost track of the parts of her body; where her arms were and how to move them. As sight went spinning erratically away and back, she tried to clutch at thoughts only to find that she had lost all memory of the English language. . . . Memory went entirely, and then mind, and then there was only the faster and faster succession of sensations, unidentifiable without words or thoughts by which to hold them. These suggested something secret and horrible, but she could not catch what it was because there was at last no longer a responding self. The terror, now, could have no boundary.”

“When she came from the Punishment she was looking at her fingernails. They were blue with cold . . . . She got up from somebody’s bed, where she found herself lying . . . . She didn’t recognize anyone, but at least she knew to a reasonable extent that she existed and that she was looking at three-dimensional solids, called people, who moved in an element called time. She went up to one of them and asked an irrelevant question: ‘What day is it?’”

“‘It’s Wednesday.’”

“Behind her the three-dimensional solids were complaining about the heat. They fanned the air of their time in front of their faces. She felt nauseated by the freezing cold, so she went back and lay down on a bed.”

“You see what it is . . . . Anterrabae said genially. We can really do it. Don’t toy with us.”

“Lee (another patient) had an aura of dark light around her, the Yri sign for one who was tankutuku—Yri for unhidden . . . . She had put herself in this horrible state for someone else, who would never praise her for it or feel gratitude. Yri had a word for this, too; used rarely, it was nelaq: eyeless.”
“...the Yri laws governing the ultimate substance of each person. People were differentiated by this substance, which was called nganon.”

“Shortly before her sixteenth birthday, she was returning from a doctor's office, heavy with the nonexistent pain of her nonexistent tumor. Anterrabae and Lactamaeon were with her and so were the Censor and the Collect. She suddenly realized that she had lost another day somehow. In an inexplicable way time pleated up again, and it was another time and she was being chased by a policeman. When he caught up to her, he asked her what was wrong; she had been running in great terror from something... even ducking into a building to get away.”

“The walls began bleeding and sweating, and the ceiling developed a large tumor which began to separate itself from its surface.”

“‘I once went to a lady's house and saw blood coming out of her kitchen faucets. There used to be blood clotted in the streets and people were bug-swarms.’”

Deborah was under the influence of active hallucinations with delusional interpretations. She did not want to feel, to think, to remember anything that links her to the mortal coil. To protect her ego, she constructed an intricate sphere to block all present experience that triggers anxiety; a deep mental hiding place complete with a hierarchy of gods and goddesses, regions, and a language of its own. In Freudian dialect, anxiety is caused by experiences overwhelming an individual to the point of “infantile helplessness.” An experience is anxiety-inducing when one’s ego had not developed enough to contain too much unpleasant experiences. Deborah’s hallucinations began when she was a school-aged child (childhood-onset), as seen with her incident with the teacher. Schizophrenic patients’ thought content often border on the abstract, the philosophical, the esoteric.

Deborah lapses into oneiroid states, dream-like states in which one is not oriented in time and place. Her engagement with the hallucinatory
experiences extends to the exclusion of involvement in the real world. In some of the excerpts we see how this affected her safety and productivity, making schizophrenia a functional disorder. Imagine how incapacitating it would be to lose not only hours, but days on end!

The hallucinations are also coupled with neologism, creation of new words by combining syllables for idiosynratic psychological reasons. She had to name Yr, its environs and denizens. She must not use the English language, because it’s too close to home. There were even times when her disturbances in perception permeated the real world, via the portcullis that rose to barricade her from Dr. Fried. We notice that Yr came to her rescue when she is prompted to confront her anxiety; when someone from the real world tries to help her. The recent chaos that had been rocking Yr from its very foundations represent the fact that Deborah was finally brought to a psychiatric ward for help.

“To Esther, it had not been the childish attempt at suicide that had begun this round of doctors and decisions. She sat in the car beside her husband wanting to tell him that she was grateful for the silly and theatrical wrist-cutting. At last a dragging suspicion of something subtly and terribly wrong had had outlet in a fact. The half-cup of blood on the bathroom floor had given all their nebulous feelings and vague fears weight, and she had gone to the doctor the next day.”

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“When she (Esther) looked in the bathroom, she had found Deborah sitting quietly on the floor, watching the blood from her wrist flow into a basin.”

“‘I asked her why she didn’t just let it go into the sink,’ the doctor said, ‘and she answered interestingly... she said that she had not wanted to let it get too far away... You live in an apartment house; you have from your windows a death much quicker and surer at every hand and yet this.’”

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Esther was Deborah’s mother. Deborah’s reason for admission was not the hallucinations but a suicide attempt. Truth be told, the hallucination and the suicide attempt, no matter how similarly destructive, are on opposite poles. Freud recognized two group of instincts, those in service of life, and those in service of death. Ironic as it seems, the suicide was the instinct for life, and Yr, death. The doctor stipulated that if Deborah really wanted to die, all she had to do was a neater job of the wrist-cutting and her mother would not have seen her at all, or she could have just leaped to her death instead. She, muted by Yr with its cries of “You’re not one of them,” found another way to call for help, to which her own mother answered.
“All the other mothers are proud of their young girls! The Collect was saying in the acid, mocking tone it took when things were worse than usual.”

“Walk out of this with that famous doctor of yours! The Censor roared. . . . There are other deaths than death—worse ones.”

“Now it is time to hide and be hidden. . . whispered Idat, rarely seen god who was called the Dissembler.”

“From the endless-sounding embroilment, the flashing by of gods and faces of the Collect, Deborah saw, like a cartoon, flat and unforeshortened, the figure of McPherson walking down the hall of the ward. I'm going to call him—to get help.”

“Anterrabae laughed. Try. Fool!”

“McPherson was passing by. Soon he would be gone. Deborah got closer to him but couldn't speak. . . he saw her out of the corner of his eyes, arrested by the intensity of her look and the strange, almost spastic motions of her hand, twisted by tension into an odd position. ‘Deb? What's the matter?’”

“She could not tell him. . . but he saw the panic she was in. She could only see in gray now and she could barely hear. Her sense of touch was also leaving, so that the reality of contact with her own flesh and clothing was faint.”

“‘Deb—don't be afraid. Can you walk?’”

“‘There was not much direction to the walk. She shambled and had to be taken, leaning on someone.’”

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“There are no colors, only shades of gray.”

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“She lost her ability to see color and the black bars limited the scope of her vision to a small, vertical strip of gray.”

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“I mean that men set backfires, one to kindle yet quench the Other, said Idat.”

“Is it applicable also to stone?”

“With my help, Idat said.”

“Deborah perceived that by burning she could prove to herself finally whether or not she was truly made of human substance. Her senses offered no proof; vision was a gray blur; hearing merely muffled roars and groans, meaningless half the time; feeling was blunted, too. No one counted matches on B ward and what Yr wished her to obtain was always clear to her vision, freed from the blur. She soon had the matches and a supply of cigarettes picked up here and there. With five of them glowing, she began to burn her surface away. She lit the cigarettes again and put them out slowly and deliberately against the inner bend of her elbow.”

“Soon a doctor was there. Deborah saw, with relief, the picture of the face of Dr. Halle. . . that the picture was in fact a living being.”
“The sleeve was now stuck to the burned place, but she pulled it off before he could cry the civilized “Don’t!” instinctively wincing a little and thrusting his hand out. After he looked, he said, a little sadly she thought, ‘I think I’d better take you up to (ward) D. You’ve made pretty much of a mess there,’ Dr. Halle said, studying the burned place. ‘It’ll have to be cleaned up and it's going to hurt.’

“Dr. Halle began to scrub and clean the burn. A faint sensation followed his instruments, but there was no pain.”

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“There were over forty burns, inflicted over and over again on flesh scraped raw to receive them, and yet they didn’t seem worth the fuss that was being made about them.”

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These are more of Deborah’s symptoms on top of the prevailing hallucinations. From being articles of symbolic mediation woven into Yr’s fabric, we extricate them one by one and give them a name. Converting symbol to science will mollify the horrors into something we can understand and eventually address.

McPherson was a trusted male staff in the ward. Deborah, assailed by one of the imaginary gods, wanted to ask help from McPherson. However, she found herself in a state of catatonia, a disruption in motor activity in response to her inner tension. Illusions are also different from hallucinations, as seen with Deborah sometimes seeing only in grays, and her misperception of other people as of having a cartoonish quality. Real external sensory stimuli were being visually distorted, as opposed to hallucinations which were never real to begin with.

Perhaps one of the most harmful symptoms she had was her sudden inability to feel pain—dramatic induced analgesia, or the suppression of cortical pain pathways. The imaginary goddess Idat had been convincing her that she was not human, and a proof would be to burn herself and feel nothing.

“‘I am leaving for my vacation early this summer because of a conference in Zurich. . . . I leave you in good hands,’ Furii said on the last day.”

“‘You know the B-ward administrator well and there is Dr. Royson to talk to. I hope you have a very good and profitable summer.’

“Because Yri law wove into the world's laws, Deborah knew that Furii was gone forever.”

“She is dead,” Lactamaeon said.”

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“My goodness! You’re back,” Deborah said. The self-hate, terror, shame, pity, vanity, and despair never crossed the stone surface. ‘Did you have a good time?’”

“What happened? You were doing very well when I left, and now, back here.”

“Deborah closed her eyes. She was stricken with shame and she wanted to escape to the Pit. . . but Furii was back and there was no hiding place. ‘I didn’t know you were coming.’”

“It is the day I said I would be back,’ Furii said.”

“. . . but you were dead.”

“I knew that she must sleep, but I never saw her asleep. Whenever we came into her room at night, she would be wide awake, saying that she heard us coming up the stairs. The steps were heavily carpeted. We used to joke about our light sleeper, but it was no joke. The school recommended that we take her to a child psychiatrist.”

“Without warning the full Punishment fell like an executioner’s hand and the testimony of light, space, time, gravity, and the five senses became meaningless. Heat froze and light hurled tactile stabbing rays. She had no sense of where her body was; there was no up or down, no location or distance, no chain of cause and effect. . . . She endured outside of time and beyond exhaustion.”

Delusions are false beliefs, based on incorrect inferences about external reality. Lactamaeon persuaded Deborah that Dr. Fried, who had become her confidante, died and abandoned her, giving her no choice but to fall back to the comforts of Yr. Furii was a neologistic name Deborah assigned to the doctor. Deborah also presented with physiological disturbances, as evidenced by insomnia. She also suffered from hysterical anesthesia coupled with depersonalization. The former refers to the loss of sensory modalities resulting from emotional conflicts, and the latter a subjective sense of being unfamiliar to one’s self and body—of being unreal.

“The tumor heaved inside her.”

“Redness seethed upward from the tumor until she was hot to the eyes with its pain.”

“‘I never lost that tumor. It's still there, still eating on the inside of me. Only it is invisible.’”
“The tumor woke, angered that there were other powers contending for her allegiance, and it sent a sharp bolt through its kingdoms to remind them that it was still supreme. Deborah doubled up, gasped with pain, and began to tremble.”

“‘I tried to kill my sister when she was born,’ she said.”

“‘How did you do this?’”

“‘I tried to throw her out the window. I was almost ready to throw her when mother came in and stopped me.’”

“‘Did your parents punish you?’”

“No. No one ever mentioned it again.

‘Did you just think about killing her?’

“No! I had her in front of the window all ready to go.”

“‘During the war . . . ’ she said, ‘I was a Japanese.’”

“‘An actual Japanese?’”

“‘I was disguised as an American, but I was really not an American.’”

“‘Why?’”

“‘Because I was the Enemy.’”

“On a certain night before falling asleep, Deborah had been reborn as a captured Japanese soldier. From behind the mask of an American-Jewish girl with a past of an American suburb and city, the elliptical eyes of the Enemy looked for the day of his unmasking. The tumor's impossible, insistent anguish was his war wound, and his mind, versed in a strange language, rang with dreams of escape.”

Of all her symptoms, the aforesaid ones are most distinct because they are direct analogies of the root causes, which will be discussed in further detail later on. The tumor Deborah kept lamenting about no longer exists. She presented with somatization, the recurrent belief that one is ailed by a perceived medical condition. Whether or not it is medically explained, the psychological suffering is authentic.

Deborah was also convinced that she killed her baby sister when she was five. She had latched onto this false memory up to her teenage years. (Later we’ll see that she did not do it.) In retrospective falsification, a memory becomes unconsciously distorted by being filtered through emotional and experiential states.

We wonder, if one peels off the multifold layers of psychoses one by one, does a personality still eke out an existence? Who was Deborah Blau outside of her diagnosis? Before her diagnosis?
“IQ Tests show high (140-150) intelligence.”

“She spent every spare moment drawing and sketching. In those first years, when she was eleven and twelve, she must have done thousands of pictures, not to mention the little sketches and bits of drawing on scrap paper at school. They had taken some of the drawings to art teachers and critics and were told that the girl was, indeed, talented and should be encouraged.”

“Deborah wanted to plead again for the shape that her art would draw in time. . . Furii said, ‘You always took your art for granted, didn’t you? I used to read in the ward reports all the time how you managed to do your drawing in spite of every sort of inconvenience and restriction. You were rich in your gift, even at your sickest, and now you see how it can be with others who are not so lucky to have a creative calling into which they can grow and grow.’”

“Know all of Hamlet by heart from beginning to end. . . some Greek, some Latin.”

Deborah Blau was a born artist with a gift of high intellect and a bit of flirtation with language and literature. This brilliance may also justify her tendency for psychosis, and not only for her, but for real individuals who are on the same boat. A study made by Kaufman of the Psychology of Aesthetics, Creativity, and the Arts, aimed to prove the correlation between “madness” and the “creative genius.” This is based on the premise of latent inhibition which should be present in a neurotypical person. Latent inhibition is an executive function pertaining to a person’s ability to filter, organize, and ignore insignificant information, sensory stimuli, and experiences to prevent psychological overload. Prominent psychological figures Martindale and Eysenck studied diminished latent inhibition as a precursor to both creative achievement and a higher risk for schizophrenia. People with this kind of disinhibition are more likely to make intuitive connections unnoticed by others. Freud believed that too much bodily excitations—instincts and intuitions—cause inner tension.

Why is knowing this important? Because our character’s creative genius was never codependent with her diagnosis. The talent had always existed outside of, despite of, and beyond the psychosis. Poor executive functions can be rehabilitated with individualized techniques without compromising creative potentials. (Plus, how can you paint when you only see in grays?) The earlier the intervention, the better. Intervention of executive functions is another comprehensive topic on its own, so for now, we leave this message for awareness’ sake.
Deborah’s premorbid status was a breath of fresh air after the harrowing signs and symptoms, but we must now move on to the root causes of her schizophrenia, the conflicts.

“Pop had come from Latvia. He had come to America a young man, poor and foreign, and he had borne down on his new life as if it were an enemy. In anger he had educated himself; gone into business, failed, succeeded, and made a fortune. With his fortune and his anger he had bought a great home in an old neighborhood of the inbred and anciently rich. His neighbors had every manner he admired, and in turn they despised his religion, his accent... he cursed them all, in the crude, blunt words of his abhorrent past. The true conquest, he saw, would not be for him, but for his seed, educated and accentless and gently conditioned.”

“Esther said, ‘the daughters of noblemen took harp lessons... I had to take them, even though I hated it and had no talent for it. It was one of the flags to capture, you see, and he had to try to win it, even through me.’”

“Pop’s ‘American’ children had grown up knowing that all their worth and gentility and culture and success was only a surface... The suitors were to be flags also; the emblems of conquests in alliance, as it had been among the great in the old country.”

“But willful Esther had chosen beneath her family’s hopes. The boy was smart enough; still he had put himself through accountancy school and his family was ‘a bunch of poor greenhorns,’ beneath Esther, beneath the dream in every way. They had argued and fought and at last, on the strength of Jacob’s prospects for the future, Pop had given in. Pop began to think of himself as the founder of a dynasty.”

“And Esther’s daughter was blond! A singular, thrilling, impossible fair-skinned blonde. She was Esther’s redemption from secret isolation, and for Pop she was the final retort to a long-dead village nobleman and his fair-skinned daughters. This one would go in gold.

“Jacob had entered his working life at the very nadir of opportunity. The accounts that he had sworn to take in order to deserve Esther as a wife were simply not there... yet they lived in one of the best new sections of town. The daughters of the dynasty had to live well and Pop paid all their bills.”

“The New World was required to do more than obliterate the bitterness of the Old. Pop kept sounding his loud shouts of denial into the deaf ear of the past. When Jacob was earning fifteen and then twenty dollars a week, Deborah had twelve hand-embroidered silk dresses and a German nurse. Jacob could not pay for her food. After a while they moved back into the family home, surrounded by a new generation of neighborhood scorn. Even as a prisoner of her own past, Esther saw that Jacob was unhappy, that he was taking charity from a man who despised him, but her own fear made her subtly and consistently side with her father against her husband. It seemed then as if having Deborah had made her allegiance right. Jacob was consort of the dynasty, but Deborah—golden, gift-showered Deborah—always smiling and contented, was a central pin on which the dream could turn.”

“And then they found that their golden toy was flawed. In the perfumed and carefully tended little girl a tumor was growing. The first symptom was an
embarrassing incontinence, and how righteously wrathful the rigid governess was! But the ‘laziness’ could not be cured by shaming or whipping or threats.”

“‘We didn’t know!’ Esther burst out, and the doctor looked at her. ‘In those days the schedules and the governesses and the rules were god! It was the ‘scientific’ approach then, with everything sterile and such a horror of germs and variation.’

“‘The nursery like a hospital! I remember,’ said the doctor laughing, and trying to comfort Esther with her laughter because it was too late for anything but remorse for the mistaken slaps. . . . At last there were examinations and a diagnosis and trips from doctor to doctor in search of proof. Deborah would have nothing but the best of course. The specialist who finally did the operation was the top man in the Midwest, and far too busy to explain anything to the little girl or stay with her after the miracles of modern surgery were over and the ancient and barbaric pain took their place. Two operations, and after the first, a merciless pain.’

“Esther had forced herself to stay cheerful and strong, to go to Debby’s room always with a smile. She was pregnant again. At last they learned that the operations had been successful. They were jubilant and grateful, and at Deborah’s homecoming the whole house was festive and decorated, and all the relatives were present for a party.”

“Deborah went to the best schools in the winter and the best camps in the summer. Friendships came hard to her. Esther thought. The family had not known until years later that the first summer camp (three silent years of it), was cruelly anti-Semitic. Deborah had never told them.”

“‘One day the psychologist called us and showed us a test that all the children had been given. Deborah’s answers seemed to show him that she was ‘disturbed.’ I saw that she didn’t play with other children. She was always at home, hiding herself away. She ate a lot and got fat. . . . The school recommended that we take her to a child psychiatrist, and we did, but she only seemed to get more and more disturbed and angry, and after the third session she said, “Am I not what you wanted? Do you have to correct my brain, too?” She had that way of speaking even at ten, a kind of bitterness that was too old for her.’

“When the Second World War began it was no longer possible to maintain a fifteen-room house. Esther struggled on while they tried to get rid of it, the awful compulsion to ‘keep things up’ in the critical eyes of Pop and the rest of the family. At last they found a buyer, dropped the weight of the past gratefully, and moved into an apartment in the city.”

“It seemed a good thing, especially for Deborah; her little oddities, her fears, and her loneliness would seem less strange in the anonymity of a large city.”

“She was still not really happy.”

“It was the first day of her third year at the camp, and still fighting against what she felt was the injustice of having been born as herself, she reported the two girls who had ridiculed her and refused to let her walk with them. The camp director gave her a hard look. ‘Who actually said those words to you: We don’t walk with stinking Jews—Was it Claire or Joan?’”

“Because it was the first day, Deborah was confused over names and faces in the swarm of girls. ‘It was Claire,’ Deborah answered. Only when Claire was
called and hotly denied saying the words did Deborah realize that Claire had only listened and nodded agreement and that the speaker had been Joan.”

“Claire denies this. What do you say now?”

“Nothing.’ The train of ruin was keeping its track. She stopped struggling and said no more. That night there was one of the comradely campfires that campers remember years later with wistful sadness at the innocence of their youth. The director gave an impassioned speech about ‘a liar in our midst who uses her religion to get pity and involve innocent girls in trouble—one among us who would stoop to any evil, any dishonor.’ They all knew who it was.”

“Some days later. . . she heard a voice from somewhere saying in a sweet, dark sound, You are not of them. You are of us. She looked for the voice but it was part of the mosaic of leaves and sunlight. Fight their lies no longer. You are not of them. After a while, hoping to hear the voice, becoming sadder with the loss of it, she found it again in the night of stars, inaudible to the others walking with her, the same rich voice saying like a poem, You can be our bird, free in wind. You can be our wild horse who shakes his head and is not ashamed.”

“The hatred of the people in the world was, rather than a wound, suddenly a proof of the truth of Yr and it was reflected in its mirror, suddenly, when Anterrabae called her from a crowd in a car and she had to make them stop and let her go. In the camp the world had held her hour after hour, but henceforth she could no longer be kept, for she belonged otherly, as Yr said.”

“. . . the move to the city. Mother had thought it would be such a happy change. They could have their own place at last, even if it were an apartment, and Deborah would find friends of her own age. She had laughed as they left the old house, for she knew they were taking the ruin with them. In the city the fatal taint would stand out with even more clarity and the issues themselves would be clearer. At last, the old hate and loneliness could no longer be attributed to their being Jewish. But the hate of the old place had grown familiar. In the city the new scorn and the new loneliness cut their channels deep in the parts of her feeling that had not yet been toughened.”

Pages 61 - 62

“She had been five, old enough to be ashamed when the doctors shook their heads about the wrongness inside her, in the feminine, secret part. They had gone in with their probes and needles as if the entire reality of her body were concentrated in the secret evil inside that forbidden place. On the evening that her father made the plans for her to appear at the hospital the next day, she had felt the hard anger of the willful when they are dealt with and moved about like objects.”

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“When her sister, Suzy, had been born, Deborah’s senses had told her that the intruder was a red-faced puckered bundle of squall and stink, but the relatives had all come crowding into the nursery, crowding her out in their wonderment at the beauty and delicacy of the newborn child. They had been shocked and angered at the truth she felt so naturally: that she thought the thing ugly, did not love it, and could not conceive of it as ever being beautiful or a companion.”

“‘But she is your sister,’ they had said.”

“‘That was not my doing. I wasn’t even in on the consultation.’”
"With that remark the family’s discomfort about her had begun. A clever and precocious comment for a five year-old, they had said, but cold, cruel. An honesty, which rose from anger and selfishness and not from love. As the years went by the aunts and uncles had stood off from Deborah, proud but not loving; and Suzy had come behind with a careless, bright sweetness, loved without reservation.”

Four major events marked Deborah’s precipitating stressors during her early years: The grandfather’s high expectations on her to resurrect their “dynasty;” her childhood incontinence (tumor in the urethra), the cruel governess and the torturous operation; the discrimination and bullying owing to being Jew; and the birth of a new sibling. The inability to process these objective realities was what Deborah substituted the Kingdom of Yr with. Neurotypical people may overcome these experiences with their psyches intact, but we know that with Deborah, she may already have had an impaired latent inhibition.

For Deborah’s grandfather, his seed is to be “gently conditioned.” The power struggle within the family coursed from the grandfather to the mother, created a subtle schism between her and the father, and then seeped through the daughter, the emblem. As the analyst I’d like to believe that the role of the grandfather’s dominance could have been easily placated, and the one with the real power over Deborah was Esther. Real people have these authoritative figures in their lives—bosses, professors, etc.—but they needed not appear as tyrants if the immediate parents of the individual are emotionally available to him. Deborah’s mother had always been in a steady state of denial through the years, only seeing things for the first time after the suicide attempt. A study of 4-year-old British children who had poor mother-child relationships showed a sixfold increase in the probability of developing schizophrenia. Deborah’s toddlerhood had also been entrusted to a governess, Esther did not even know her daughter was being whipped and shamed for wetting herself. The mother-child relationship had been distorted during too early a stage, defecting ego functions and vulnerability to stress. Years later, seeing how Esther and the rest of the family members fonder and adored the baby sister, Suzy, in contrast to her being the direct object of criticism veiled under a veneer of righteous birthright, Deborah regressed into further horrific mess.

In Freud’s *Three Essays on the Theory of Sexuality*, he postulated the developmental stages of childhood sexuality that outlined the “vicissitudes of erotic activity from birth to puberty.” One of the earliest infantile manifestations of sexuality is bowel-bladder control. We now connect this to Deborah’s urethral tumor when she was five. According to Freud, a child would focus on urination as the main erotic activity during ages three to five. We go back to our premise that a disruption in one libidinal stage may result to ego malfunction. Freud also highlighted the mandatory presence of parents in psychosexual development, and his take on schizophrenia as caused by developmental fixations that dents ego development. Ego disintegration affects reality interpretation. “Loss of ego boundaries” is a term describing the lack of sense of
where a person’s own mind, body, and influence begin and end, thus the intrapsychic conflicts. What more with Deborah who not only had a perceived absentee mother figure, but a serious affliction that affected her urination?

Racial antisemitism was also prevalent during those years. Our main character, being of Jewish descent, was bullied for being a member of a hereditary kin prejudiced as being greedy and starved for money, rigid and imposing, and lacking in social graces. Environment is also a factor in determining the outcome of schizophrenia.

“I saw that she didn’t play with other children. She was always at home, hiding herself away.” Before a full-blown schizophrenic diagnosis, prodromal manifestations also exist. Vulnerable individuals had been characterized as introverts, passive and acquiescent children who didn’t explore and made a lot of friends.

From the main character, we zoom out to the significant supporting characters to explore how psychosocial conditions affect not only the sufferer but also the family and immediate acquaintances. Esther and Jacob, the mother and father, had changed in their own ways. What about the coveted sister, Suzy? Aren’t we all curious with her and Deborah’s relationship after the alleged “murder?” Then, we present a rundown of some of Deborah’s fellows in the ward to show the different faces of abnormal psychology.

“It was a bright and easy answer to Esther’s gray, vague suspicions (Deborah’s artistic talents), and she tried to pull it up over her eyes. To the whole family it suddenly seemed to explain all the sickness and sensitivity, the sleeplessness, the intensity, and the sudden looks of misery, covered quickly by a blank hardness of the face or the bitter wit’s backthrust. Of course... she was special, a rare and gifted spirit. Allowances were made for her complaints of illness, for her vagueness. It was adolescence, the adolescence of an exceptional girl. Esther kept saying it and saying it, but she never could quite believe it. There was always this or that nagging sign that seemed to taunt her perceptions.

“The doctors say she has to go,” Esther whispered back.

“‘The doctors,’ Jacob had never wanted to put them all through the experience, even from the beginning.”

“‘It’s a good place,’ she said, a little louder because she wanted to make it so.”

“They call it a mental hospital, Es, a place where they put people away. How can it be a good place for a girl—almost a child!”

“Oh, God, Jacob,” she said, “how much did it take out of us to make the decision? If we can’t trust the doctors, who can we ask or trust? Dr. Lister says that it’s the only help she can get now. We have to try it!”

“He was silent, conceding to her once more; she was so much quicker with words than he. They said good night; each pretended to sleep, and lay, breathing deeply to delude the other.”
“My love for Jacob didn’t stop me from hurting him and lowering him in his own eyes as well as my father’s. And our love for Deborah didn’t stop us from . . . well, from causing . . . this . . . sickness.”

Dr. Fried looked at Esther and listened to the words of love and pain coming from the carefully composed mother. The love was real enough and the pain also, so that she said very gently, “Let us, Deborah and I, study for the causes. Do not agonize and blame yourself or your husband or anyone else. She will need your support, not your self recrimination.”

“‘Debby, you don’t need to stay with all those . . . those screaming women.’”

“‘What screaming women?’ Deborah asked.”

“‘Well, when we visited . . . we heard it——’”

“The pain of looking at him escaped in a laugh. ‘Oh, I know—that must have been big, dumb old Lucy Martenson. She gets even with everybody by playing Tarzan out the front windows of the D ward and scaring the visitors to death.’”

“It had never occurred to Jacob that the screamer who still haunted his dreams might just be a person, someone named Lucy, and the realization eased him . . . he hugged Deborah hard when he said good night.”

“She phoned home especially proud to give her parents that second bit of news, and glad that their time of pride, while hedged-about and deferred, was still possible.”

“‘Wonderful! It’s wonderful! Oh, wait until I call all the family! They are all going to be so proud!’” Esther said.”

“Jacob, by comparison, was almost still. ‘Very proud,’ he said. ‘It’s fine, just fine.’ His voice seemed on the verge of breaking.”

The difference between Jacob and Esther was that Esther’s transformation preceded Jacob’s. Throughout Deborah’s unnatural youth was the constant uneasiness that Esther felt about the wrongness of it all, but once confirmed through the suicide attempt, she was the one who responded to the call. As a mother, the love had always been there, but so was that fear of wrongness and the internal conflict. On Deborah’s part, her mother being an “absentee” was also attributed to that daughter’s evasiveness, her silence. She never opened up about the governess and the bullying. Jacob did not have it easy either. We may take him for someone who sees mental health as a stigma, but he is in fact a man of great patience and fortitude. Given the skewed setup of the family on account of the grandfather’s dominance, and Esther rarely choosing his side on familial matters, he always submitted for the welfare of all, and we also see it with him adapting to his daughter’s needs.

“For weeks Esther Blau had worried and fretted over having to tell Suzy about her sister’s illness. Who had not heard all the old-style high melodrama of insanity; of the madwoman in Jane Eyre; of lesser dramas in lesser memories, and of maniacs
who murdered and passed on the taints of their blood to menace the future? Esther could not bear the thought of Suzy replacing the familiar image of her sister with the wild-eyed face of the straitjacketed stereotype chained in an attic. She realized now that it was this stereotype that she and Jacob had begun to imagine the first time they heard the grating of the locks, when they saw the barred windows, and when they shuddered to the screaming of a woman from some high gable. Still, Suzy had to know; it was past time. The little sister was growing up and they could no longer talk around her; it wasn’t fair to keep shutting her out from the source of their deepest concern.”

“She began to tell her younger daughter that Deborah’s ‘convalescent school’ was a hospital; her doctors, psychiatrists; her illness not physical but mental. After they had eased into the icy subject, Jacob began to add, modify, explain this part and that, presenting as fact much of what he himself had been uncertain about.”

“Suzy listened with the complete impassivity of a twelve-year-old, her face giving no sign or flicker by which the parents could detect how she was hearing the words they were wringing out of themselves. When they had finished, she waited a while and then spoke slowly.”

“‘I always wondered why those reports seemed to be more about Debby’s thoughts than about her body, like pulse or temperature.’”

“‘You read the reports?’”

“‘No. I hear you quoting things to Grandma sometimes, and once you read to Uncle Claude part of it, and it sounded kind of funny to be about the usual kind of sickness.’ She smiled a little, no doubt remembering something else that had puzzled her. ‘It all fits now. It makes sense.’”

“‘I hope she comes home soon—sometimes I miss her a lot.’”

“They sat for a long time shocked at the difference between the expectation and the happening. Esther felt weak with the sudden easing of the tension. Jacob said slowly, ‘Is this all? I mean is this all there is or didn’t she really hear us? Will she be back, when the shock wears off, with the look on her face that I have been afraid of for all these months?’”

“At dinner, Esther praised Deborah’s poise and charm, while it seemed to Deborah that Suzy had somehow darkened over these two days. She had been free to go out and leave the prodigal elder sister to all the praises, but she had stayed.”

“She took her sedative early that night and went to sleep. As she drifted away, she heard Suzy’s and Esther’s voices from the living room. They were voices of argument, and full of anguish.”

“‘You don’t hear them,’ Suzy groaned, ‘because when it isn’t about Debby, you just don’t hear anything, but I’m more than just a careless and brainless dope!’”

“‘You’re not being fair,’ Esther said. ‘It’s that she’s only home for a few days, so we seem to be making a bigger fuss.’”

“‘Every letter,’ Suzy cried, ‘every visit that you make to her! I draw, too; I dance, and I wrote two of the songs for the camp follies last year. They may not be as ‘profound’ as Debby’s pictures, but you never stop Grandma or invite Aunt Natalie and Uncle Matt to hear the new song that I wrote or the smart thing that I said.’”

“‘Don't you see, you stupid girl,’ Esther said almost savagely, ‘I don’t have to! Praising you is bragging. Praising Deborah is—excusing—’”
It seemed like tables had turned for Suzy. From being the doted little girl of Deborah’s nightmares, she felt she had become the disregarded one. These Blau daughters were both intelligent, talented, and perceptive. Only, Suzy had more fighting spirit in her, telling her mother off whenever she felt offended. Yet we know that she loved her sister, she said so herself that she missed Deborah.

The thing about familial love in this novel is that love alone as an emotion never rendered the imperfect perfect. However, within that immediate Blau family, no one had really been the black sheep or the stereotypical abusive parent. No one meant to hurt the other. The Blau family dynamics had been a consolidation of individual beliefs, personalities, and ego functions. But that it was it means to be family, to communicate and compromise over differences beyond emotional “love.” Schizophrenia has no known biological cure. The novel ended with a functional Deborah, but we’ll never know about the relapses, or what this ordeal will do to Suzy in the long run. We are, on a lighter note, assured that the parents’ characters are developed by the end, and this gives us hope that they continue to be the towers of strength for their children.

There is an anecdote from Paulo Coelho’s *Adultery*, about a prickle of porcupines who lived during the Ice Age. In order to survive the gnawing cold, these porcupines decided to huddle together for warmth, but their spikes would annoy and prick each other, so some of them isolated themselves. Those who did died. The remaining ones accepted the fact that keeping each other close is the only way to survive, that they have to risk and endure the little wounds they inflict on each other for warmth and security. The Blau family, and modern families all over the world, live in such ways.

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“Another nursing group had come and was being broken in on Constantia’s spontaneous nudity, Helene’s graceful and bone-breaking violence, and Deborah’s locked eyes.”

Page 100

“The ward administrator spoke to everyone about the fight . . .”

“‘How did it start?’ the doctor asked Deborah.”

“‘Hobbs came down the hall and then there was the fight . . .’”

“‘Deborah. . . I want you to tell me. . . Why is it always Hobbs and why never McPherson or Kendon? Is Hobbs rough on the patients without our knowing about it?’”

“Hobbs. . . was frightened of the craziness he saw around him because it was an extension of something inside himself. He wanted people to be crazier and more bizarre than they really were so that he could see the line which separated him, his inclinations and random thoughts, and his half-wishes, from the full bloomed, exploded madness of the patients. McPherson, on the other hand, was a strong man, even a happy one. He wanted the patients to be like him, and the closer they got to being like him the better he felt. He kept calling to the similarity between them, never demanding. . . The patients had merely continued to give each man what he really wanted.”

Pages 65-66
“The night before Mr. Hobbs had gone home after his shift, closed his doors and windows, turned on the gas, and died. In the non-prisoner-pigmy confinement of Ward D everyone knew, even the unknowing. . . . they all envied the dead.”

Page 86

“The people on the edge of Hell were most afraid of the devil; for those already in hell the devil was only another and no one in particular. So Wards A and B whispered their little symptoms and took their sedatives and were terrified of loud noises. . .”

Page 72

These excerpts are included to give a general, psychoanalytic idea of the similarities and differences between psychologically vulnerable people. They did not even have to be the patients themselves, some are ward staff, like Hobbs, the patients’ favorite target to taunt. The culture of the asylum is richly explained in the novel, patient interactions abound, and they do range from funny to violent.

Here we see the different defense mechanisms some of the characters use to relieve their egos. Constantia resorted to sexualization. She alleviated her own anxieties through sexualized behaviors such as disrobing in front of others and making inappropriate remarks. Helene was the classic violent type, which most people generalize psychotics to be. She represented the aggressive type in the novel, attacking not only ward staff but sometimes fellow patients, to draw contrasts to the harmless ones. There’s Hobbs, whose lack of true empathy is felt by the surprisingly attuned patients, and whose narcissistic means of coping finally failed him in the end. With the mask of superiority broken, his fragile self-esteem had been exposed. His aversion to be labeled as mad, his binding repression, pushed him to do the ultimate act mental health services strive their best to prevent—suicide. McPherson, on the other hand, was a symbol of the stabilized personality, whose coping mechanism had been altruism, a mature one. Altruism is achieved when one deals with their stresses through dedication and service of others.

An interesting concept presented in the novel is the patients’ own insights about being in which ward. They take comfort in the thought that D ward is not the worst one, but only the most “honest;” that those in wards A and B are still bound by the expectations of others, still under the mercy of social constructs, faux pas, and criticisms. This is a misinterpretation, through rationalization, they romanticize the idea that in the D ward, one is free. Free to be the masters of one’s own destruction and not the society.

“‘I remember. . . Doris was there, Doris Rivera.’
‘Who the hell is she?’”
‘‘Oh, kid, she was before your time, a veteran of every treatment I ever heard of and she was as crazy as a bedbug. She was up here for three years. . . She’s living outside now and working.’”
“‘They were incredulous. Did someone really know? Could someone really name the name of a success—one for whom this place had been means and not end? They deluged Lee with questions until she said, ‘Listen, I knew Doris when she
was up here on ‘D,’ but I don't know her formula for success and I haven’t seen her since she left! All I know is that she’s out and has a job. Now damn it leave me alone!”

“Deborah, fully conscious, began to stretch, feeling the now-familiar bone-ache of restricted circulation in her feet and ankles. She could see the motionless mummy hump of Carla in the bed near her.”

“Deborah. . . Deb. . . I know what it was—what happened to us. . . Doris Rivera.”

“Somewhere inside Deborah an awful ache rose, a recent but now familiar ache which she had begun to identify with Yri words—an ache hiding the ancient and fearsome English word: Truth.”

“No, it wasn’t.”

“Yes, it was,’ Carla said, gaining conviction. ‘She got well and went out and she’s working, and we got frightened because we might someday. . . have to be “well” and be in the world; because there’s a chance that they might open those doors for us, on. . . the world.’ Carla's voice was cut with the knife of her panic.”

“How can she stand it, day after day—the chaos?’ Deborah asked Carla. . . ‘Does she have a choice? Can she be sane by willing it?’ Deborah asked, seeing Doris in her mind as a listless frozen ghost bending her every energy to the Semblance.”

“My doctor says we all choose, really, these different ways.”

“It’s a readmission, the attendant said lightly, ‘. . .her name’s Doris Rivera.’”

“With a sick feeling Deborah moved back against the wall and the attendant went by her. Fear and anger, fear and vindictive joy, fear and jealousy rose in her. She began to gag with the surfeit. The great Doris Rivera had broken her back on the wheel of the world. It was proof of something. Suddenly, the envy burst out of her mouth in a great gust of bitter laughter.”

“So much for Rivera, the North Star! Who did she think she was anyway!”

“That’s where you are, Presumptuous!’ she said to the person behind the door. Who was she to have tried, challenging them all? And how dared she have failed under the grinding of the world!’ But there also came a long surge of pity, which was also pity for herself, and an answering terror, which was also terror for herself. So they come back; the ones who are too stubborn to accept that their ngamons are poisonous and who are beaten to ruins. They come back. . .”

“Although those in the hospital wondered how springtime could come in spite of their particular pain, it came and was triumphant. It made the patients on ward angry that the world which had murdered them did not suffer for its sins. . . . And when Doris Rivera tied up her hair, put on a suit and a shallow smile, and left again for the world, it seemed to many as if she were in league with the springtime against them.”
Doris Rivera was regarded as a legend by the inpatients of the ward. Though living and working in the outside world, her name exerted an influence and even triggered symptoms among the psychotics. She was seen as a symbol of the “cured,” of someone who faced the world and turned away from symbolic mediations, something they could not fathom they’d have the guts to do someday. The second excerpt was post bedlam. The idea of confronting the external reality provoked their faulty mechanisms, like it kept doing to Deborah’s Yr on separate occasions. The resulting reactions, aggregated, had been mayhem.

On the latter part of the novel, Doris relapsed. Deborah struggled with the ambivalence of triumph and with pity in Doris’ sudden descent. Ambivalence, in psychiatry, is the coexistence of two opposing impulses towards one person in a particular situation. If one wants to read stories about mental illness that are as closest to the truth as possible, one should be prepared to be disappointed and disillusioned. Do not expect a black-and-white happy ending because healing is non-linear.

If healing is non-linear, how had it been with Deborah?

“The thing that is so wrong about being mentally ill is the terrible price you have to pay for survival.”

Page 63

“’Well. . .’ Deborah came into a sort of sunshine. I’m crazy now. As soon as you admitted that I was sick—as soon as you admitted that I was so sick that I had to be in a hospital, you proved to me that I was saner than I had thought.”

Page 146

These are dialogues of Deborah, showing that she had an initial insight of her plight. Although insight must also include an understanding of her symptoms and the social judgement for effective interactions, which she still lacked in the fullest sense, we can magnify on the presence of this little milestone because presence of insight in psychosis is followed by compliance to treatment. Even Deborah herself said that she needed that sound validation from trusted persons.

“The spring went on and although Deborah gave and gave to Furii the secrets and fears and passwords of the passages between her worlds, she was surrendering them only to hasten her own capitulation to a total deceit that was as sure as the Juggernaut or the falling of Anterrabae. She did not lose the chill feeling of detachment before the doom and for a while she even posed a little in drama of that doom, making a high art of dying beautifully.”

Page 154

“But I remember. . .”

“You may remember hating, but the facts are against you! What did your mother say when she came in? Was it: ‘Put that baby down!’ or ‘Don’t hurt the baby!’?”

“No, I remember clearly. She said, ‘What are you doing here?’”
“What astonishes me about this whole business is that I was so busy listening to the emotional content—the hatred and the pain—that I lost the facts and they had to shout at me again and again before I could hear them. The hatred was real, Deborah, and the pain also, but you were just not big enough to do any of the things you remember doing, and the shame you say your parents felt all these years was only your guilt at wishing your sister dead. With the false idea of your own power, you translated those thoughts into a memory.”

“‘It might as well have been real; I lived for all those years as if it were.’

“…Our would-be murderess is no more than a jealous five-year-old looking into the cradle of the interloper.”

“‘Bassinet,’ Deborah said.”

“‘Those ones on legs? My God, you couldn’t even reach into it then!’

“Deborah was back in the room being five again and standing with her father for a view of the new baby. Her eyes were on the level of the knuckles of his hand, and because of the ruffles on the bassinet she had to stand on her toes to peep over the edge. ‘I didn’t even touch her…’ she said absently. ‘I didn’t even touch her…’”

Pages 204-205

“They spent the time cutting ways to the old secrets and seeing facets of them that needed the new hunger for life to come real. Deborah saw that she had taken the part of the enemy Japanese as an answer to the hate of the ones at the summer camp, his foreignness and violence being an embodiment of anger. A part of the same insight opened on to the subject of martyrdom—that being martyred had something to do with Christ, the pride and terror of every Jew. ‘Anger and martyrdom,’ she said, ‘that’s what being a Japanese soldier was, and I gave the doctors the “good soldier” that they wanted. Anger and martyrdom… it sounds like something more… like the description of something I know…’”

“‘What more?’ Furii asked. ‘It must have had many walls to have supported itself all these years.’”

“It’s a description of… why… why, it’s grandfather!’ Deborah cried, having unearthed the familiar tyrannical Latvian to whom she had given such an unrecognizable mask. It was a description of him and it fitted him better than height or weight or number of teeth. ‘The secret soldier that I was is a mulu—what Yr calls a kind of hiding image of my kinship with him.’”

Pages 194-195

“Early in their time together, when the first trust was coming and Deborah had wrestled with her understanding and had forced herself to stay tankutu (unhidden) while Furii’s questions probed, Furii had risen at the end of the hour and had broken off a large and beautiful blossom from a cluster of cyclamen in her flowerpot. She had said, ‘I don’t ordinarily break flowers, but this you have earned. I don’t often give presents either, so take it.’”

“It had been worth the cost of the two terrible punishments from Yr that Deborah had received for accepting flowers from the Earth.”

Page 155
“‘I don’t want to think anymore!’ Deborah said, with her voice rising in the wind of her sudden anger. ‘I’m tired and scared and I just don’t care anymore what happens. Work in the dark and work in the cold and what for!’”
“‘To get you out of this damn place, that’s what for.’ Furii’s voice was as loud.
“‘I won’t tell you anything more. The more garbage I give away the more I have left. You can turn me off and go with your friends or write another paper and get another honor for it. I can’t turn me off, so I’m turning the fight off, and don’t you worry—I will be nice and docile and nothing more will go on the walls.”

Page 185

“Never pretend to give it (Yr) up. I think you will want to give it up when you have the real world to replace it, but there is no pact with me. I do not ask you to give up your gods for mine. When you are ready, you will choose.’”

“Then she said gravely, ‘Don’t let them torture you every time you let some of the world’s good light in your windows.”

Page 209

“You are now parting with food that sustained you—all the secrets and the secret powers—and no other nourishment has yet appeared to replace it. This is the hardest time of all, harder than even your sickness was before you came here. At least that had a meaning for you, as awful as the meaning was sometimes. You will have to trust me enough to take on faith that the new food, when it comes, will be richer.”

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“Deborah and Dr. Fried worked without inspiration—a kind of mental day labor, finding in the new freedoms new confrontations with the past.
“‘I wanted to ask you,’ Furii said, ‘to look back again to the past and tell me if you see any light breaking through that grayness of which we have spoken.’”
“Deborah sank back into the memories. The reign of ruin and calamity, which had seemed so total, now admitted of some patches of sunlight all but lost under the conquering powers of Yr. ‘Yes...yes...I do!’”
“She smiled. ‘I seem to remember whole days of it some times—and there was that year in the house where we were before we moved back to Chicago—and there was my friend—how could I have forgotten!”

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“...I’ve got a fake tumor...”
“What hurts is being kicked by the forces that everyone else lives by...and not being able to tell anyone and have them believe you. Every time you double up with a theoretical tumor pain, some professor is there to tell you why it can’t be hurting.'”

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Dr. Fried’s role in the had been to bring to light the many false beliefs, understand the function each serve for Deborah, connect them to objective reality, no matter how nerve-wrecking, and then reframe. In the novel, Dr. Fried’s approaches had both been individual psychotherapy and cognitive behavioral therapy. In the psychotherapy approach, the relationship had been
deliberately established: the emotional distance, and the sincerity and trustworthiness that Dr. Fried projected and Deborah interpreted. Schizophrenics are wary with closeness and intimacy for these draw suspicions and regressions as proved by Yr’s “punishments” upon Deborah’s voluntary alliance with her doctor. Dr. Fried did not pressure her into giving up her secrets all at once, told her that no ultimatum would be given, and that everything would still be Deborah’s choice in the end, after all options are presented. To answer the Freudian-based question as to what type of transference existed between Deborah and Dr. Fried, whether it be positive, negative, or interpreted, the answer is all. Deborah’s “first trust” marked the positive transference because there is the relief in the unburdening of secrets to a sympathetic listener. The negative transference are brought about by the resistances, Yr’s punishments, the “capitulation,” which leaves Deborah exhausted and more agitated. This is the height of the battle, in weakening the psyche’s defenses, they strike back. Now, a transference that has been interpreted with the help of an analyst happened when both of them have reconstructed the childhood experiences “in the light of increased maturity.”

The cognitive behavioral approach had been utilized whenever Dr. Fried would help Deborah reframe her years’ worth of cognitive distortions. She freed Deborah of her shame and guilt from the false memory of murdering her younger sister; and prompted her to name the Japanese Enemy, who turned out to be the righteous grandfather. Deborah was also freed of her negativistic thinking that all her life had only been a string of traumatic events. She allowed herself to remember the good old days, and of having a friend.

In the tenets of abolishing maladaptive beliefs and behaviors, a person must always replace those with something productive. You cannot force someone out of a habit if there is nothing to replace it with. The goal for Deborah was not just to get rid of the illness, for healing is not merely the absence of illness, but for her to be reintegrated into the world equipped with maturity.

Remember that Freud didn’t believe that psychotherapy to alleviate severe psychosis. In the novel, other than cognitive behavioral therapy and psychotherapy, the third curative factor had been pharmacotherapy. The administration of sedatives had been mentioned more than once considering that the first generation of antipsychotic medications had already been introduced in the 1950s. It is important to admit that in reality, sedatives are not enough. Even if a schizophrenic patient has succeeded beyond inpatient status, he will need these biological boosters for maintenance. Let’s put it this way, would you rather have a subdued person, unable to act out the impulses of his id, but suffering from active perceptual disturbances? Or an alert one with intact orientation? This might be the reason why Deborah’s hallucinations had been persistent for the most part of the book.

“Slowly and steadily. . . she saw the form and the colors of the trees and the walkway and the hedge and over the hedge to the winter sky. If the sun went down and the tones began to vibrate in the twilight, giving still more dimension to the Preserve. And in a slow, oncoming way, widening from a beginning, it appeared to Deborah that she would not die. . . It had a sense of wonder and awe,
great joy and trepidation. ‘When will it begin?’ she said to the gradual night. It came to her that it was already beginning.’

“She ate supper and found herself capable of suffering that she had to do it messily, with fingers and a wooden spoon. The food tasted. It was substantial under her teeth and afterward she remembered having eaten it.”

“Whatever this thing is. . . I wonder when they will pull it out from under.’ She spent the evening listening to the attendants talking to one another like lonely outpost sentinels in a strange and barren land. They wouldn’t know what this thing was, but it was beginning to frighten Deborah because she didn't know what it was going to turn into. Maybe it was another part of the Game, that always recurring last laugh of the world. When she gulped down her sedative and walked to bed she said to Yr, Suffer, gods.”

“Suffer, Bird-one, we are waiting. . . .”

Deborah fought the sedative for a while, thinking about what he (McPherson) had said and how. It was tough but true, and under the anger of it ran the tone—the tone rare anywhere, but in a mental ward like a priceless jewel—the tone of a simple respect between equals. The terror she felt at the responsibility it bore was mingled with a new feeling. It was joy.”

“You’ve only got one kind of cold, the kind coats can fix.”

“The attendant sniffed. . . Deborah remembered back, through a thousand falls and punishments, to McPherson saying, ‘What makes you think you have a corner on suffering?’”

“I’m sorry,’ Deborah said. ‘I didn’t mean it as an insult.”'

Deborah remembered that there was no Yri word for ‘thank you.’ She had no word to give Furii her gratitude.”

“. . . an attendant left a smoldering cigarette on an ashtray near the nursing station. Deborah picked it up, hid it, and took it to the dormitory where she was staying. . . she sat on the floor, hidden by the other beds, and looked at her scarred arm. The tissue would have no feeling, the burn do no good. She began to start a new place, moving the burning cigarette to put it out against undeadened flesh. As it came closer she felt the warmth of it, the heat, the burn. The first singe of hair brought a red-hot stab with it so that she jerked her arm away, astonished.”

“It was a reflex!’ she said incredulously to the bedrail.”

“She tried again and again, but at every place, a burning hot pain prevailed upon instinct and she had to pull away from the burn before it had even closed upon the flesh. . . She had begun to cry because of the terror and joy of it.”

“When it was time to see Furii, she ran to her office, terrifying her tracker, and burst in to the beginning of the session. ‘Hey! You know what happens when you burn yourself? You get burned, that’s what! And it has a hurt called a burn, that's what!’”

“You burned yourself again?’ Furii asked, drawing away the smile with which she had answered Deborah’s.”

“I tried to, but I couldn’t.’”

“Oh?”
“‘Because it hurt!’”
“‘Oh, I’m glad!’ They smiled at each other.”

“‘Tell me, do you love your parents?’”
“‘Of course I love them.’”
“‘And your sister, whom you never murdered?’”
“‘I love her—I always did.’”
“‘And your friend Carla?’”
“‘I love her, too.’ She started to cry. ‘I love you, too.’”

Different emotions returned to Deborah one situation at a time throughout her stay in the ward: Joy, guilt, shame, terror, awe, gratitude, trepidation, and love. Guilt and shame are acceptable as long as they are appropriate with the context, which they were, according to the excerpts—not the shame from falsely accusing oneself of murder; not the terror of throbbing walls and nonexistent pits on hallways. In the psychoanalytic theory, human relatedness terrifies severely regressed psyches, and Deborah’s apathy had thawed, improving engagement in social participation. She felt ashamed when she offended McPherson and the attendant; felt grateful towards Dr. Fried; felt love for her family. Laughter and tears had replaced the erstwhile stolidness on her face.

Not only did the ego welcome back the emotional, but also the physical. Upon trying to burn herself again, Deborah’s pain receptors kicked in for the first time—better than the aching of an imaginary tumor. Even the colors are back full-scale, and the taste of food. She had gotten annoyed with the mundane things neurotypical people are annoyed with, such as messy eating.

“Despite the dangerously hypnotic effect of the double two-hour ride each day, pride in the stubborn battle gave her the strength she needed. She struggled to stay up to the demands of the study and travel. In time the teachers were able to open a tiny crack in the wall of her separation. . . . During the month that she went to school from B ward the nurse woke her before full light.”

“How many of the dead could be raised? Of all the D-ward women, how many would be free someday? In her three years there many faces had come and gone, and many had stayed. Of those who had gone, maybe three quarters had left for other hospitals. Some had improved enough to live a kind of half-life as outpatients. How many were really out, alive, and free? You could count them on your fingers! She shivered. She would have to force herself to her books tonight.”

“Months went on and the high-school subjects began to fill in the notebooks. . . . The heavy textbooks gave her a kind of pride, as if she might someday weigh in the world what her schoolbooks weighed in her arms.”

“The city remedial school was mainly for young children with reading problems or speech impediments, but apart from sitting at tiny deal tables, Deborah liked it. She liked not having to be uncomfortable with her teachers, working alone and hard and with no precocity, and not belonging in the middle of the Varsity Drag. After a while her teachers began to praise her for her tenacity.
Steady and steadfast, they said, and she was greatly pleased. It was only when she was returning to her room in the afternoon that the world hurt."

"Young and rustling, loud with charm-bracelets and giggling, the high-school and young college girls would overwhelm the buses, and she would once again find herself peering into the world of the elaborately vain, mirror-mad, fearing and predatory young girls—a world where she had failed. . . . She looked down at her own school skirt and sweater. She looked the way they did, but she was still a stranger, the imitation of a young schoolgirl."

"And am I not as that world is? Idat asked from Yr. I am veiled and mysterious; I am rewarding and full of splendor. If you leave me and Lactamaeon, who loves you, and Anterrabae, who is your friend, with whom you laugh and are easy, will you ever have such light?"

"Then, strangely, the images of her tutors at the remedial school appeared in Yr to speak to Idat."

"Are you joining the Collect? You too? Deborah called to them."

"Certainly not!" the English tutor said. We are against those creatures of yours!"

"Listen, you, the math tutor said to Idat, that girl works hard. She is here every day with sharp pencils and conventional dress. She is prompt and obedient and never insane in the classroom. She’s not overbright in math, but she works hard for what she gets and that’s the good, solid truth!"

"Hardly a shower of stars, Idat said dryly. Hardly a silver raven. (It was an Yri metaphor for flattery—because of the high polish.)"

"That evening at the church, Deborah invited her hymnbook mate out for a soda. The girl blanched and stammered so badly that Deborah became frightened that those who had seen might think she had said something indecent. She saw a momentary picture of the ancient fear, as Onward Christian Soldiers marched onward against the little girl of the past. Slipping back to invisibility she sang on through choir practice about Compassion."

"At the end of the month the Regents of the State called her out of the springtime to open their letter. She had passed well—well enough to be certified by the state as having an education equivalent to that of students who had attended high school—and there were enough points over to make her an acceptable applicant to any college."

"Across the field, gleaming in the sun, two other figures walked. A slender young girl, all grace and innocence, held the hand of the boy who walked with her. His jacket hung loosely on her slim shoulders. Slowly they walked around the field past her. A few times they stopped, playing or saying something that ended in laughter; he would lean over nuzzling her gathered-up hair or her cheek."

"Deborah talked to herself out loud, the way crazy people do. ‘I will never have that,’ she said. ‘Not by fighting or study or work or withstanding will I be able to walk with one of them or be warmed by their hands.’"

"Carla told you that long ago, Lactamaeon said from the fence. Your studies, your job—it’s all the same: ‘good morning’ and ‘good night.’"

"—Work hard, lazy girl; fight hard, clumsy girl. . . never. . . never. . . never. . ."
“I won it hard! she cried to them. I showed up even when I was sick. I showed up neat and on time and sane every day. I have some certain pride—”

“She had given all her strength, all her struggle, all her will to succeed at her study. Now it was over and what had it been, after all, but what everyone else did without half trying, and it was two years late. She was nineteen and a high-school graduate.”

“. . . through the streets; she went vacant-eyed, listening into Yr. Past the church, where she sang on Wednesdays and Sundays, the gods mocked her father’s breaking voice.”

“Male and female created He them. She was nearly at the hospital now—she could make out the two lights where the cars turned in. She went as if by habit, blindly. The Pit was waiting. Soon. She was terrified. Sight go soon. Voice . . . nothing. Up the steps to the door. Now, open it. Someone there, please! Inside: ‘Hello, Miss Blau.’”

“And then, ‘Are you all right, Miss Blau?’ One thing left: make a sign. Though a god screamed she could still hear the other sound—three buzzes: emergency. The Pit.”

“She emerged again back at the eternal beginning, with her heart just slowing from the terror. Because she was still alive, still bearing the insolent pumping muscle in her chest, she began to fight and struggle in her bonds, hoping to become exhausted and die. Exhaustion came, but death was adamant against her. After a while Dobshansky came again. This time his face had been carefully strained to remove all but the bland hospital expression.”

“‘You feel okay now?’”

“She was very tired. ‘I guess so.’”

“We had to call your landlady and tell her you weren’t coming back there tonight and that you were here. She got worried about your school and came over with your books and some clothes. She was concerned about you.”

“She looked again at the faces on the ward. Her presence was making them struggle with Maybes. Suddenly she realized that she was a Doris Rivera, a living symbol of hope and failure and the terror they all felt of their own resiliency and hers, reeling punch-drunk from beating after beating, yet, at the secret bell, up again for more. She saw why she could never explain the nature of her failures to these people who so needed to understand it, and why she could never justify scraping together her face and strength to go out again . . . and again. In some ways reality was as private a kingdom as Yr. The dimension of meaning could never be made plain to people whose survival depended on its abridgment or eradication.”

“When the trays were cleared away, she asked for her schoolbooks. The attendant brought them out and handle them to her with something of a respect for what they symbolized. She opened the first one.”

“AN EQUILATERAL TRIANGLE IS ONE IN WHICH THE ANGLE OPPOSITE AC IS EQUAL TO THE ANGLE OPPOSITE AB AND IS ALSO EQUAL TO THE ANGLE OPPOSITE BC.”
“You rotten whore! Let me go!” sounded from the dormitory.”

“You are not of them, Anterrabae said quietly.”

“I am of them. Furii says that you will be a contribution, but I don’t yet know how, Deborah said to him. I will have to learn how. Then, maybe . . .”

“A LINE BISECTING AN 80-DEGREE ANGLE FORMS TWO ANGLES WHOSE SUM IS 80 DEGREES.”

“Mary: ‘I wonder if insanity is catching. Maybe the hospital could sell us for antibodies.’”

“Will you not save us as a shield against your hard rind, Bird-one?”

“I can’t do that anymore. I am going to hang with the world.”

“But the world is lawless and wild . . .”

“Nevertheless.”

“Remember your own childhood—remember Hitler and the Bomb.”

“In spite of it.”

“Remember the blank-wall faces and the ‘sanity papers’—’and hungering after ones that go hand in hand.”

“No matter. No matter what.”

“We could wait until you called us . . .”

“I will not call. I am going to hang with the world. Full weight.”

“Good-by, Bird-one.”

“Good-by then, Anterrabae. Good-by, Yr.”

“TECHNOLOGICAL ADVANCES AFFECTED WESTERN EXPANSION IN MANY SPECIFIC WAYS.”

“Constantia: ‘Can’t you see that I’m suffering, you goddamn pigs!’”

“THE INVENTION OF T.N.T. MADE POSSIBLE THE JOINING OF THE COASTS BY RAILROAD.”

“’I am the secret first wife of Edward VIII, Abdicated King of England!’”

“Jenna’s going again. Call Ellis; we’d better get a pack ready.”

“’AND BOTH RAILROAD AND THE MORSE TELEGRAPH MAINTAINED CONTACT INDISPENSABLE TO MODERN INDUSTRIAL SOCIETY.’”

“Full weight, Deborah said.”

By choice, Deborah resumed her studies despite of the delays. She also participated in activities that required interaction with peers, such as the church choir. From being supervised within the walls of the asylum as she prepared for school, the hospital staff and social workers supported her in renting a place of her own. Deborah plowed through to fulfill social and personal roles that most of us “did without half trying.” Deborah relapsed because Yr wouldn’t let her go, when we thought she was already doing good. In the end was a sort of catharsis in the form of a farewell, but how do we know, really, that she will go home to live the rest of her days zero percent symptom-free? We don’t disregard her progress. Three years before, we would never have expected Deborah to reintegrate herself into the society. We don’t disregard the superhuman effort she exerted for normaley’s sake, we praise her for it. But for people like her, we take it one day at a time. Gauge expectations, set reasonable goals. Respect their pacing.
The novel could have had more potential when it comes to what the world and its concerned professionals can do for Deborah, because there is. Understandably, the character portrayed is as a perilous survivalist compound that she would rather seek solace in limbo because it was part of her intrapsychic conflict. Deborah was constantly bombarded with terrifying imagery, so why wasn’t her artistic tendencies utilized in a structured, professional-directed manner during the healing process? Even the presence of the other patients were not utilized, why not something of a group therapy, a supportive milieu to reduce social isolation, develop a sense of cohesiveness that improves reality testing? What about the family—Esther, Suzy, and Jacob? Why weren’t they brought together where the doctors can assess and comment on their dynamics? The mental health care system, in theory, is powerful and all-encompassing if all disciplines under it work together. Whatever is found lacking in the book (including the medications mentioned earlier) we have to promote awareness for in our analysis, especially since it concerns health and well-being.

Freud’s patients during his time were mostly women. However, he kept using a male paradigm and depicted the female counterpart as a deficient gender for their “immature superegos” and lack of the penis. On the other hand, Juliet Mitchell (1974) noted that Freud’s “psychoanalysis in not a recommendation for a patriarchal society but an analysis of one.” If we kept using Freud to analyze Deborah’s progress, won’t that be too reductive on her part? Also, we find Freud to be somehow limiting when discussing progress and healing. He left us hanging on *maturity*. But what does maturity entail? He kept yielding his torch on the antecedent conditions of the individual’s plight. (A fixation in itself, perhaps?)

Carl Jung, who was indebted to Freud but dissented when it came to the construct of the psychic energy being too self-serving, believed that such energy actually strives for synchronity, individuation, and transcendence. He believed in the person’s capacity for *self-realization*, and that we can be liberated from the mental constraints forced on us by childhood traumas. For Freud, a person is “inescapably in conflict.” For Jung, there is a goal—harmony. Behavior is purposeful, fulfilling, and not merely protective of the ego, like Deborah finding her purpose in going back to her studies. We do not simply exist to protect our minds. There are dreams to achieve, risks to take, and people to care for. Deborah was in her adolescent years when her intervention began, and this answers to Jung’s conviction that the psychic birth does not yet transpire until adolescence, where it begins to contribute to personality development.

We also see Deborah’s efforts in entering the nurturing and cultivating world of social reciprocity. She loved her family, made friends in the ward—inpatients and staffs alike. She tried to reach out to peers post-hospitalization, placed herself in the shoes of two lovers, of a typical schoolgirl. *Social interest* had been both means and ends for Deborah. Alfred Adler supposed that a person has a natural urge to “adapt oneself to the conditions of the social environment.” This natural urge, which had failed during those overwhelming years in the antisemitic camp, under the family’s own roof, and within the
school grounds, finally won by the end of the novel. Adler was adamant that we do not have to be slaves to our unconscious instincts and anxieties, and by restoring consciousness and the power of choice to the center of our personalities, we are offered freedom. Dr. Fried kept presenting these options to Deborah, from which Deborah fully and consciously chose to live.

In life, we often feel that we want to start over from something, a traumatic experience, a broken heart, loss, failure . . . so we begin anew, but the truth is that we are always just carrying on as before. That’s how strong we are. If we think of life that way, psychotic or not, only then do we realize that we are in no pressure to not relapse in the future, to “live happily ever after” just because we have “upgraded to versions 2.0;” only then do we realize that we are in no pressure to live perfect, asymptomatic lives . . . just communing, purposeful ones.

Conclusion

The deconstruction of I Never Promised You a Rose Garden began by devising a nomenclature of psychotic symptoms presented by the main character, Deborah Blau. All of these symptoms have personal meanings for the schizophrenic person, so we attached the meanings they convey to deeply understand where Deborah was coming from. She suffered from hallucinations, delusions, neologisms, apathy, dream-like states where the disoriented body is devoid of sensations, catatonia, illusions, analgesia, insomnia, depersonalization, somatization, and false memories. All of these are immature attempts to indemnify her mind for all the trauma she had experienced.

We then explored Deborah’s identity preceding the full-scale onset of symptoms. Behind every mental disorder is a real person, and Deborah was a young girl in possession of a high IQ, a talent for arts, and a mastery of some classic literature and languages.

Pathological disruption in ego functions are the result of “cumulative experiential traumas,” for Deborah, the four causative factors had been the following: The pressure from her grandfather to be the heiress of his legacy; the tumor in her urethra and the consequential abuse from a governess and the operation; the bullying from the antisemitic camp; and the birth of the baby sister.

Significant characters were also mentioned. First, the family: Esther the mother, Jacob the father, and Suzy the sister. Esther’s denial for most of Deborah’s curious childhood ways was made apparent, only answering for everything after her daughter’s suicide attempt. Jacob was the skeptical yet submissive father, fearful of the asylum and the prospect of her daughter mingling with the insane. His respect for Esther prompted him into acceptance, though initially reluctant. Suzy was the one in constant conflict, from once being the begrudged presence in the house, she became the jealous and outspoken one against all the attention given to Deborah. The inpatients and staff were also a motley crew. There’s Constantia who
overused defensive sexualizations; Helene who settled everything with violence; Hobbs, the staff who harbored secret anxieties of his own, afraid of contamination, and who took his own life; and McPherson, the altruist who genuinely cared about everyone. Doris Rivera, the feared and revered name, was the symbol of the “cured.”

After three years of admission, Deborah showed significant improvements with the aid of Dr. Fried, her psychiatrist. Deborah’s insight on her illness was the first agent of change. Together they demystified her fantasies, and once they turned concrete, shattered the associations altogether. However, these fantasies fought to keep hold of Deborah as she and Dr. Fried passed through the three types of transference: Positive, negative, and interpreted. The return of her emotions, both pleasant and unpleasant, is an accomplishment. More than that, her physical symptoms, such as the absence of pain reflexes and color blindness, had disappeared.

Symptom alleviation and looking through the world in the “light of increased maturity” are not the only goals of Deborah’s intervention. She had to be proactive, functional. Deborah was able to take up the student role once again despite her delayed status; join extracurricular activities; and rent a place outside of the ward. Her hopes are pined on self-realization and social interest. Still, a relapse costed her readmission. This readmission, however, was just an episode, and Deborah did not let herself plummet back into the imaginary kingdom. She bid Yr farewell, and promised to hang on to the world, full weight.

References