CHAPTER - III

GENDER AND MENTAL HEALTH

1.1 What is gender?

Gender is not sex. Where sex is biological, gender is a cultural construction. Gender is shaped by assigning meaning to a sex by society. Hence gender is a social and cultural construction of the biological fact of sex (Geetha 2006). Ann Oakley in *Sex Gender and Society* refers to gender as the socio-cultural aspect of being a man or a woman. Gender is society’s mechanism of differentiating between masculinity and femininity; on the other hand, sex is the biological difference between men and women (Oakley 1972). Raewyn Connel says that gender can be identified as a social structure and as a matter of social relation within which the activities of individual and groups run. Connel says,

> It is not an expression of biology, nor a fixed dichotomy in human life or character. It is a pattern in our social arrangements and in the everyday activities or practices which those arrangements govern. Gender is a social structure, but of a particular kind (Connel 2009, 10)

According to Connel gender expresses the cultural pattern of the natural difference of bodily distinction between male and female. The dynamics of gender may differ from one culture to another; but in all societies it is the intersections of gender with power, identity, work, and sexuality that shape images of masculinity and femininity. “Gender like other social structure, is multi-dimensional; it is not just about identity, or just about work, or just about power or just about sexuality, but all of these things at once…..Gender arrangements are reproduced socially (not biologically) by the power structure to shape individual action, so they often appear unchanging” (Connel 2009, 11). Gender identification starts with the process of socialization; in fact, gender idiantification starts even before one is born and is continually strengthened and fostered throughout one’s life through sexual stereotyping. Individuals are socialized in such a manner that they are taught to learn the values and norms associated with women’s and man’s role in the society. Thus, though individuals are born into a sex (i.e., male and female)
they must acquire the characteristics of their gender. Gender identification is strengthened depending on the development of the individual’s relation with different institutions of society throughout life and in their day to day interaction with social expectations of playing out the role of boy or girl or man and woman.

1.2 Historical Antecedents of Gender Studies

Historical explanations of masculinity and femininity are described as part of the system of thoughts and actions of human beings and these have been hypothesized over centuries. The meanings of gender are innumerable over time and place and it is influenced both by geography and history. Historical theory explains how, when and why men and women come to be in distinctive worlds. Marxist theory of gender refers to it as one part of the social whole that exists as the facet of a social and economic system which is termed as totality. “In this sense, they reflect, express as well as influence social and economic realities: of economic power, social dominance and cultural authority” (Geetha 2006, 52). Marxism, with its theoretical terrain of production and reproduction, defines that capitalism has given birth to the history of class struggle between producing classes and owning classes and the human agency with their actions of man and women makes the reality that forces them to act in various ways. Karl Marx’s comrade, fellow thinker, writer Frederick Engels in his famous book *The Origin of the Family: Private Property and the State* first published in 1884, described how society in the past with the simple subsistence economy started gradual division of labor between men and women where man used to do hunting, fishing, made tools and women gathered raw materials (Engels 2004). Women could select their mate; they could make choices within the family. Engels had taken the help of Morgan’s theory of evolutionary social development in terms of subsistence economy, marriage, inheritance of property and family structure. From a nomadic lifestyle people changed to settled ways of life; they set up a farming economy and domesticated animals. Human beings produced more foods than they consumed; this could be stored for use in the future. The fight between communities or two groups accrued and the winners carried back the losers to work as slaves for them. Engels called the ‘first great division of society into two classes’: master and slaves and exploiters and exploited (Engels 2004). Society became more complex, accumulation of wealth became a male prerogative and women became domestic
slaves confined to devalued household activities. Thus in a ‘pure and simple outgrowth of nature’, division of labor closed down favor for women. The growth of production created a new institution – private property. Now on, everything from land to animals to slaves to women could be privately owned. The authority of the private property was with man who wanted to retain his control over woman to “own” his children. At the beginning descent traced through the mother’s line and thus property was transferred accordingly. “According to mother right, that is, as long as descent was reckoned solely through female line, and according to the original custom of inheritance in the gens, it was the gentile relatives that at first inherited from deceased members of gens. The property had to maintain with the gens” (Engels 2004, 65).

Gradually, the rights of the mother were overthrown and discarded; the inheritance of property took place through the lineage of paternity. Children became descendants of their fathers (Engles 2004, 64-66). Woman lost her status in the group where man acquired the central position in the kinship group and thus patriarchy came into existence. According to Engels the disappearance of mother’s right is the most striking defeat of women in world history. “The overthrow of the mother right was the world-historic defeat of the female sex. The man seized the reins in the house also, the woman was degraded, enthralled, the slave of the man’s lust, a mere instrument for breeding children” (Engels 2004, 67).

Woman became the property of single man and monogamous marriage became the rule of marriage. Monogamy imposed certain rules on women, for instance they were expected to be chaste and loyal to their husbands. Man on the other hand, possessed extreme power and sexual authority to act in whatever way he desired. “Such a form of the family shows the transition of the pairing family to monogamy. In order to guarantee the fidelity of the wife, that is the paternity of the children, the woman is placed in the man’s absolute power; if he kills her, he is but exercising his right” (Engels 2004, 68). Man in monogamy thus had right to keep several mistresses and wives which leads to sexual insincerity in marriage. Men wanted sexual freedom along with wives and families and women remain confined within the rules and regulation of monogamous families. “It is the existence of slavery side by side with monogamy, the existence of beautiful young
slaves who belong to the man with all they have, that form the very beginning stamped on monogamy its specific character as monogamy only for the woman, but not for the man. And it retains this character to this day” (Engels 2004, 71).

Engels defines that the modern industrial production had given rise to capitalism which required women labour. Rich industrialists exploited the labour in a large scale and economic slavery became predominant. Though women directly did not come under the exploited groups they had to earn coming out from domestic household works in different ways and had to take part in exploited labor’s struggle and that made them socially productive. Women’s domestic work also remained unpaid and unnoticed. But all these were not given value. Thus they suffered from moral horror since they had to work in deplorable conditions. Thus Engels demonstrated how society and history had given rise to dominance of male over female through economic power and sexual authority. He had shown how female role of reproduction devalued her in the family.

Critics of Engels like Claude Levi-Strauss and Claude Meillassoux suggested that male dominance over female first come to the world through different exchange ceremonies that existed among the different communities. Women during the transitional period were used as an important object of exchange. They were demanded as bride and offered to maintain counterfeit relationship between one man and another. Some times women were exchanged as hostages between two different groups. Through these processes women lost control over their sexuality and reproductive worth and became the passive object of men. Gradually the transition turned to the system of marriage and women were displaced from their accustomed context. Children were considered property of man and inheritance taken from the father’s line (Levi-Strauss 1969, Meillassoux 1981). Male control over reproduction introduced the concept of patriarchy. Thus the patriarchal institution gave rise to male power along with economic exploitation and control over female sexuality. Gradually male power was institutionalized at work, culture, custom, religion, education etc (Geetha 2006, 64).

Gerda Lerner in The Creation of Patriarchy summarized the history of patriarchy (Lerner 1986). She, like Engels, studied societies through different archaeological monuments, sculptures, archaic art from different parts of the world and made an
effort to trace the history of patriarchy. She pointed out that through the mode of production and wealth, man established power in the society over time and woman was forced to assume a subordinate position. Woman’s status depended only on the capacity of the ‘performance’ related to her sexuality and reproduction. Thus women never extended her range because of the patriarchal system of the society which usually rejected women from different knowledge systems (Lerner 1986). She argued that women had ‘made history’ but they were barred from “….the enterprise of creating symbol systems, philosophies, science and law…they were excluded from theory formation....” (Lerner 1986, 5). Here Lerner appointed out that the earliest law codes created class hierarchies among women as respectable/not-so-respectable (Lerner 1986, 9). Historically, the ‘respectable woman’ was the ‘veiled wife’ or ‘virgin daughter’ and her sexuality was considered to be under the protection of men; she was considered to be of ‘high class’ and this was articulated by her social status (dress, ornaments, housing patterns). On the other hand, the ‘unveiled woman’ or ‘disreputable woman’ was considered to be unprotected from man and her sexuality was marketed; thus, she belonged to the slave class (Lerner 1986, 139). These types of institutionalized historical concepts of division of ‘respectable’ and ‘not respectable’ women later gave rise to the concept of ‘normal’ and ‘abnormal’ women in the society depending on her class hierarchy, sexuality and expressive behaviour.

Freud undertook a psychoanalytic study of the construction of masculinity and femininity. He made a tripartite division of the human mind into id, ego and superego. His concept of the ‘unconscious’ proved to be highly influential in interpreting the process of socialization of children. The child’s id-driven urge to play with their own urine function is controlled by the ego. The concept of ‘shame’ is the handiwork of the superego. He made an analysis of the feeling of inferiority of females which starts at an early stage of life when she can differentiate her body from her mother and can notice the absence of penis which her father possesses. This is termed as ‘penis envy’ by Freud (Freud 1953, 135-243). Freud’s theory of ‘castration complex’ explains the fear of taboos caused by the superego; it is because of this that children have to repress their erotic desire for the opposite sex, including the parents.
In *Civilization and Its Discontents*, Freud analyzed repression and human development. He said that the entire system of a society such as taboos, religion, customs, rules, law codes, marriage, and sexual customs influenced the sense of repression. Superego as a voice of society acts as a mechanism for repression and mostly women are affected as the feeling of inferiority is triggered off by ‘penis envy’. In some cases it can take the form of neurosis with different society’s norms relating to marriage, monogamous family structure, motherhood etc. Thus in both the psychic and social sense, females suffer from more guilt feelings in the society (Freud 1961).

1.3 **Feminism: History and Emergence in the West**

Feminism is neither a set of guidelines nor a philosophy. Feminism can not be defined in an unambiguous way; rather, it has to be understood broadly. It started as a movement in the West for the liberation of women to achieve women’s rights. The goals of the feminist movement can not be summed up in a single line; more importantly, the goals have been shifting depending on the time and place. It mainly deals with the eradication of traditional inferior attitude towards women and all forms of discrimination and subordination by the society and is committed to provide sexual equality, independence, empowerment in both private and public sphere (Kunjakkan, 2002). Feminists focus on what is marginal and peripheral (Beasley 2005).

During the 19th century women’s social position in England and America was deplorable. They were excluded from basic human rights, civil as well as political. They were restricted in every sphere of life. Feminism started as a liberal movement for women’s rights in the later half of 19th century in the United States and in Europe. Feminism is divided into three waves – the first wave from the later half of the 19th century to early 20th century; second wave of feminism started from 1960s and continued up to the 1990s; the third wave of feminism has been ongoing since the mid 1990s.

The first wave of feminists followed the footsteps of John Stuart Mill who advocated Western liberal thoughts. He promoted equality in legal, political and domestic field for both men and women. Mill’s project of equality under industrial capitalism was centered on women. He, through his ‘The Subjection of Women’,
first published in 1869 concentrated on the need for women’s equality in legal and political sphere and supported women’s entry into higher education and different professions. He described that during the nineteenth century marriages of women in England were fixed without their consent and the father and the church played the dominant role in a woman’s marriage. After marriage women became a doll of her husband as all her legal authorities was under the power of her husband. Women were in fact never in possession of property. Mill through this essay describes about the popular image of women’s lower mental ability and describes the assumptions about women as they are fickle minded, prone to fatigue, lack of consistency. Mill demanded psychological testing on this superior – inferior differentiation based on mental and physical ability. He emphasized the importance of women’s education and employment which could give them equal status in the society (Mill 2006).

Mary Wollstonecraft was a philosopher, writer and feminist critic who made a significant contribution to philosophical writings of the first wave of feminism. She in her book *A Vindication of the Rights of Women*, published in 1792, described the position of women in the Western countries in the eighteenth century. She said that the power of reason or rationality differentiated a man from animal. However, reason came to be seen as an exclusive man’s ‘birth right’ that was inherited and offered by God as a natural right. The irrationality that is attached to women later becomes the ground for the subjection of man.

Women are taught to see themselves as dependant on men. Mary Wollstonecraft said that women’s power to reason was ignored because men did not recognize their ability to perform roles other than that of mother, wife or mistress (Wollstonecraft 1992). Wollstonecraft rejected the idea of deliverance of supreme authority by ‘divine rights of kings’, ‘hereditary power’, ‘fixed social hierarchy’, ‘arbitrary rulers’ with the possession of reason. She argued that women’s difference from men can not exclude them from reason or rights. They should have the liberty to enjoy all sorts of opportunities. “Wollstonecraft argued against the double standard applied to women in Enlightenment and Liberal thought. Instead she applied Enlightenment ideas to women’s situation arguing that men and women share a universal human capability of reason, so women also deserved the same rights and opportunities as men” (Beasley 2005, 38).
Virginia Woolf was another of the most prominent first wave feminists. *Orlando* (2012) first published in 1928, *A Room of One’s Own* (2001) first published in 1929 and *Three Guineas* (2006) first published in are all major writings of Woolf and these writings are considered as giving voice to oppressed, subordinate women. In *A Room of One’s Own* Woolf described that women in fiction written by men were depicted as inferior and thus men socially and psychically dominated them. Wolf described how brilliant women writers had to confine their writing within a periphery or had to take a male person’s name in instead of her to display their creativity. Through her writings she wanted to analyze that in this way women’s reason and rationality was being threatened by male power and they were labelled as inferior in the society. The woman in non fiction was also portrayed either as a goddess or as a witch, virgin or prostitute. Thus the identification of women was stagnant due to the domination of male power. Through her phrase ‘women as looking glass’ she wanted to describe that women were considered as ‘other’ by man and men wanted to see their images reflected by women. In her essay she described that women should be economically strong to achieve their status (Woolf 2001).

Simon De Beauvoir’s has made a great contribution towards feminist writing through *The Second Sex* (*Le Deuxieme Sexe*, 1949 in France and translated into English in 1953). Beauvoir’s ideas presented the culmination of the second wave of feminism. She was mainly responsible for highlighting the distinction between sex and gender. Beauvoir describes that women are constructed in the society and they are formed as the ‘other’ of men. To quote her, “One is not born, but rather becomes, a woman” (Beauvoir 1953, 273). Society constructs woman as an ‘object’ through social, cultural and biological identification. Beauvoir by using the term ‘other’ for women has defined man as one in society and the ‘other’ as the dominated. Beauvoir says that the sense of biological inferiority, possession of certain organs, uterus, ovaries make women think of themselves as ‘other’, as being incomplete without men. On the other hand, men with the sense of such organic superiority, think themselves to be the ‘absolute. “He is the subject, he is the absolute- she is the other” (Beauvoir 1953, 16). According to Beauvoir women have to play a mysterious role as ‘other’ in the society as mother, seductress, wives and have to apply different tricks to gain status in the society because they
are inferior and subordinated by men. Women have always been discriminated against throughout history. She argues that from the prehistoric past women have been treated as ‘other’ or ‘deviant’ or ‘abnormal’ by trapping her on the wrong side of binaries such as production/reproduction, nature/nurture, culture/nature etc. Beauvoir claims that women are the ‘second sex’ because socially men enjoy all privileges. Beauvoir clarifies that the maturation and pregnancy of women highlight some external as well as psychic differentiation with men. Due to these biological differences women are petrified and discriminated by man (Beauvoir 1953, 15). Beauvoir argues that men are ‘transcendent’ so they are essential for the society. Hence individuality of man is taken for granted as he remains as an ‘I’ in the society but a woman remains dependent on man, fails to identify as ‘I’, as an individual, but in groups as ‘we’. So woman has remained alien and submissive as the ‘other’ in a group (Beauvoir 1953, 19).

From Wollstonecraft to Beauvoir it is observed that historically women’s reason was in doubt and thought to be inferior. Women’s rationality has often been criticized and sanity of women is always under the scanner. If we examine Beauvoir’s understanding of ‘otherness’ it is seen that ‘others’ are subjected to historical and cultural subordination in the system of patriarchy. Women’s disability is disconnected to the “disadvantages” of her “inferior” body. So disability or mental illness in women is considered to be quite “natural” for women in comparison to her anatomically stronger male counterpart.

Betty Friedan, a psychologist and an influential feminist published a book in 1963 called *The Feminine Mystique*. The book established the middle class women’s status in Western society and the way they had to be happy with their feminine role as housewife and mother performing all the household activities including taking care of husband, nurturing children etc during the 1950s to 1960s in America. The American women of that period enjoyed all material comforts and their femininity rested on their having many children, a beautiful house and a daily dose of struggle to maintain their household. They had nothing to do with the problems of the world outside. “They had no thought for the unfeminine problems of the world outside the home; they wanted the men to make the major decisions. They gloried in their role as women, and wrote proudly on the census
blank: ‘Occupation: Housewife’” (Friedan 2001, 61). Friedan interviewed many American women when she found that there was widespread unhappiness, frustration, anxiety and suffering from ‘The Problem That Has No Name’ though they were apparently happy with their fulfilsments of femininity. But gradually the rate of women was seeking psychiatric advice has increased. The door of Western housewives was opened to problems of a new kind and it became the burning issue for the newspapers, popular magazines, television panels etc. Women’s became a subject of discussion, criticism and amusement and the hypocritical remedies from psychologists, psychiatrists, marriage counsellors were offered as ‘how to adjust to their role as housewives’ (Friedan 2001, 70). With the concept of the ‘modern housewife’, women’s role increased with multiple tasks such as wife, mistress, mother, nurse, consumer, cook, chauffeur; she was expected to be an expert in interior decoration, child care and when she was tired playing these multiple roles, she was subjected to the investigation of doctors. Doctors typically identified the problem as ‘housewife fatigue’ (Friedan 2001, 76) or ‘boredom’ and prescribed tranquilizers as remedy. Women took the tranquilizers but the real solution of the ‘unnamed’ problem was the ‘inner voice’ of the women for Friedan. When Friedan tried to take informal interviews from different experts such as counsellors, psychiatrists, gynaecologists, obstetricians etc on the anonymous problem of women, she found that “evidence which throws into question the standards of feminine normality, feminine adjustment, feminine fulfillment, and feminine maturity by which most women are still trying to live” (Friedan 2001, 77). Friedan examined the representation of the image of American women in women’s magazines, advertisements, television, movies, novels etc. There she found that women were represented in popular media as an object associated with sexual pleasure of man with attractive body, along with other feminine qualities such as housewife and topics on women focused almost exclusively on marriage and family issues, child psychology, sexual correction worked as illustration of their dream or might give some indication for women’s blurred problem.

The image of woman that emerges from big, pretty, magazine is young and frivolous, almost childlike; fluffy and feminine; passive; gaily content in a world of bedroom and kitchen, sex, babies, and
home……the only goal a women is permitted is the pursuit of a man……..In the magazine image, women do no work except housework and work to keep their bodies beautiful and to get and keep a man (Friedan 2001, 82-83)

Friedan took interviews of most of the magazine writers and most of them were men. It was found that the writers wrote their stories according to the interest of the reader and demand of Western culture of that period. They depicted the roles of female protagonists as ‘career women’ with unhealthy experiences and getting depressed due to the threat of masculine attitude, lastly rolled around the job of lover, mother and happy housewife where the women should be satisfied pleasing her male partner. Thus Friedan discussed the creation of the concept of ‘feminine mystique’ for the modern American women after 1949 as ‘housewife mother’ image instead. According to Friedan femininity was underestimated throughout history and it was considered to be a mystery that man could not fathom. “The mistake, says the mystique, the roots of women’s troubles in the past is that women envied men, women tried to be like men, instead of accepting their own nature, which can find fulfilment only in sexual passivity, male domination and nurturing maternal love”( Friedan 2001, 92).

Friedan described the crisis of identity of women to be responsible for the feminine mystique which led to neuroses or other such conditions. Some times the cause of neuroses of women was identified as sexual suppression, inferior status within family confined in sex role with feelings of identity crises. “It is my thesis that the core of the problem for the women today is not sexual but a problem of identity – a stunting or evasion of growth that is perpetuated by the feminine mystique. It is my thesis that Victorian culture did not permit women to accept or gratify their basic sexual needs, our culture does not permit women to accept or gratify their basic needs to grow and fulfil their potentialities as human beings, a need which is not solely defined by their sexual role” (Friedan 2001, 133).

Thus feminists have been concerned with the female sexual role and its negative impact on women’s mental health. Friedan highlighted the women’s identity crisis within the confinement of sex role and frustration due to lack of opportunities to
live a complete life as a human being within specific male dominated cultural boundaries in the process of civilization.

Judith Butler defines the construction of sex, gender and sexuality as formed by a repeated performance of stylized bodily acts. Butler pointed out that gender in the society is constructed through continuous normative performance of gender rationality.

...[G]ender is not a noun, but neither is it a set of free floating attributes, for we have seen that the substantive effect of gender is performatively produced and compelled by the regulatory practices of gender coherence (Butler 2008, 34)

Thus Butler’s concept of normative practices can be utilized in differentiating ‘normal’ from ‘abnormal’ in general; one’s continuous performance of normative behavior can regularize the person’s reasoning as rationality in the society.

First wave Feminists thus focused their struggles primarily on gaining legal rights, such as right to vote (women’s suffrage) and property rights. ‘First Wave Feminism’ really began in earnest in the late 1800’s and early 1900’s particularly in United Kingdom, Canada, United States and Netherland. Between 1917 and 1920 this wave of feminist movement resulted in the acquisition of some legal gains in North America such as the right to own and inherit property, right to vote. The second wave of feminism started in the late 1960s with the stated goal of eradicating oppression against women. Their key struggles were around affirmative action, pay equity, rape, domestic violence, pornographic, and sexism in the media, and reproductive choice. The fight for reproductive choice included a fight to have information about, and access to, birth control as well as the struggle to decriminalize abortion. The second wave radical feminists concentrated on patriarchal domination in both the public as well as private spheres of society. In the early 1990s in the USA, Third- Wave feminism began as a response to the perceive failures of the Second Wave. Third wave feminists developed theories that honor contradictory understandings and deconstruct categorical thinking. Third-Wave Feminists challenge the Second Wave paradigm as to what is, or is not, good for women, and tend to use a post structuralist and post modernist interpretation of gender and sexuality.
Even at the risk of sounding like an essentialist, it can be said the idea of womanhood is universal and fundamental. Feminists have analyzed womanhood and women’s health as constructed categories with the confidence of stating that ideology and the male gaze of the power centralized in the patriarchal institutions are the chief agents of such constructions. Women’s illness is both an outcome and a response to the patriarchal structures. Feminist sociologists argue that the prevalent medical system affixes labels to women’s resistance to their social roles with certain ‘special’ diseases such as hysteria, anorexia nervosa, chlorosis, agoraphobia and this system has sought to define woman by her biology and her reproductive capacity (White 2002). When defined as medical problems which can only be resolved with medical solutions, women lose control of fundamental aspects of their experience with fertility, sexuality, menopause, and aging (Oakley 1984). Foucauldian feminists have made important contribution to issues relating to the construction of the body and analyzed the forms of surveillance and medicalization of women that exist in the world of medical science. Marxist feminists argue that woman’s caring role is a direct outcome of the interrelation of capitalism and patriarchy. For recent Marxist feminists, the interface between patriarchy and capitalism shape both women’s health as well as the ways in which the caring and nurturing roles of women are constructed as natural (Benoit and Heitlinger 1998). This caring role ultimately leads women to overwork and depression. Cultural feminism, a category of Radical feminism is an ideology of women’s nature; it emphasizes the difference between man and woman and considers the difference to be psychological and to be culturally constructed rather than biological. According to Adrienne Rich, woman’s body is privileged over men, and it is in woman’s interest to wrest control of her fertility and reproductive abilities from men (Rich, 1992). Ann Oakley charts the social, political and economic contingencies that shape medical ideas about pregnancy and women’s reproductive health. In the war time, when there was no need to keep women out of the workforce; there was hardly any discussion of their ‘feminine’ weaknesses (Oakley 1984).

Feminist historians have made significant contributions to enhance our understanding of the gendered meaning of mental illness in traditional historical writings and psychiatric practices in the West (Showalter 1985; Chesler 1972).
Historically women have always been suspiciously viewed in society. Thinkers from different fields of social sciences have established that who fits into the category of normal/abnormal, sane/insane are decided by the society and asylums are architectures to punish people rather than to treat them (Busfield 1996; Houston 2002). Accordingly, women by dint of their ‘nature’ were included in the society in the category of ‘unreason’ and thus related to insanity (Busfield 1996). Showalter defines that nineteenth century English culture generated different types of ‘female malady’ and divided three phases of the history of English psychiatry based on psychiatric text, views and literature and its correlation with each phase: ‘psychiatric Victorianism (1830-1870), psychiatric Darwinism (1870-1920) and psychiatric modernisms (1920 – 1980)’ (Showalter 1985, 17).

During the Victorian period there were massive changes in treatment procedure, asylum structure and architecture. Class became a major component in treating mentally ill, where rich people received proper treatment in their private houses and their disease were defined as ‘nervousness or eccentricity’. While, on the other hand poor were treated inappropriately in the public asylums. The new laws for the betterment of Victorian asylums were formed in England.“By 1858 ‘madhouse’ had become an ‘opprobrious epithet’ replaced by ‘asylum’ or ‘retreat’ – “benignant refuges for the ‘mentally afflicted. ‘Mad doctors’ became ‘alienists’, ‘asylum superintendents’ or ‘psychiatric physicians’; ‘keepers’ became ‘attendants’. Madness became ‘lunacy’, mental derangement,’ ‘insanity’ or ‘mental deficiency’ and its treatment became ‘mental science’ or psychiatry (Showalter1985, 28). Showalter says that the most significant creation of psychiatry in Victorianism is the ‘domestication of insanity’ (Showalter1985, 24), through creating home like atmospheres in asylum and through the Victorian psychiatric theory with ‘moral insanity, ‘moral management’ and ‘moral architecture’. ‘Moral insanity’ during that period was defined as deviance from ‘normally’ socially accepted norms and behaviour. ‘Moral management’ was the learning for the insane to ’re-educate’ them with ‘harsh treatment’ and physical control in practice of ‘industry’, ‘self control’, ‘moderation’ and ‘perseverance’. All these are trained under supervision of ‘parental concern’ (Showalter1985, 29).

Asylum planners divided the ‘moral’ as normal according to class and gender. “Inside the asylum, lunatics were to be classified and segregated according to the
nature of their disorders, but also according to their social class and sex” (Showalter1985, 34). In the Victorian period there was increase in women population in the asylums including those who were diagnosed as senile, tubercular, epileptic, physically handicap, mentally retarded. The treatments were mostly conducted under male supervision. Some time their disease was considered as a result of poverty and this has been termed as ‘feminization’ of Victorian poverty by Showalter (Showalter1985, 54). Victorian psychiatrists believed that females were more prone to mental illness than males because of their unpredictability in reproductive systems hindered by sexual, emotional and logical power. “In contrast to the rather vague and uncertain concepts of insanity in general which Victorian psychiatry produced, theories of female insanity were specifically and confidently linked to biological crises of female life –cycle – puberty, pregnancy, childbirth, menopause - during which the mind would be weakened and the symptoms of insanity might emerge” (Showalter 1985, 55).

Victorian doctors defined puberty as the most dangerous period of psychological disturbances for a girl in her life time. They argued that the menstrual discharge inclines women to madness. ‘Menarche’ was considered as the most troublesome stage in a life of a Victorian girl. As not only the girls, but their mother’s also had to be cognizant towards their daughter’s controlled and ‘normal’ menstrual behavior as well as their social behaviors, restricting them from going out, exercising and traveling which could potentially lead daughters to insanity (Showalter1985, 56).

Along with puberty, ‘menopausal’ women were also considered as a dangerous group of women prone to mental illness. “In this age group, expression of sexual desire was considered ludicrous and tragic, and husband of menopausal women were advised to withhold the desired sexual stimulus” (Showalter 1985, 75). The treatment of controlling women’s mind was done by regulating their bodies by conducting clitoris surgery (Showalter1985, 75). In asylum, women’s dietary allocations were also different from men; which were poor in quality and sometimes cooked separately. Women were considered and labelled ‘mad’ if they did not posses female characteristics and delivered ‘female speech’ making self expression deviant from the traditionally accepted nature of women. “Women’s deviations from ladylike behaviour were severely punished…..put in solitary
confinement in the basement…” (Showalter 1985, 81). The psychiatrist’s view of Victorian female patients was subjected to moral management. The women’s appearance was also considered more important than that of men as their sanity is often referred to their fulfilment with ‘middle-class standard of fashion’ and thus ‘sane’ female’s dress pattern should be matched with their age and social class (Showalter 1985, 84-86).

Showalter expressed that fewer number of records of women patients were received from the women workers of asylums; their works were limited to that of matrons or nurses. In the writings and documentation of male psychiatrists, it was found that the superintendents of Victorian asylums hardly listened to women patients; their treatment did not allow to listen to their feelings, and also ignored their demands; instead of that women patient’s minds were diverted from the ‘delusions’ through ‘physical activity’ and amusement. Victorians considered ‘unmarried middle class women’ prone to mental illness and considered them to be problematic for the society. They were discriminated by terms as ‘redundant’, ‘superfluous’ and ‘odd’ (Showalter 1985, 61). ‘Uncontrolled sexuality’ (Showalter 1985, 71) was considered to be the major cause of mental illness among women during that period: ‘…while doctors blamed menstrual problems or sexual abnormality, women writers suggested that it was the lack of meaningful work, hope or companionship that led to depression and breakdown” (Showalter 1985, 61).

After 1870 the concept of moral management failed and the concept of ‘Psychiatric Darwinism’ entered with the view that insanity is the product of ‘organic defect, poor heredity, and an evil environment’ (Showalter1985, 118). During 1870-1910, middle class women went out of home in search of jobs, education and political right as well as ‘Darwin’s nerve specialists’ declared proper ‘feminine behavior’ as a symbol of sanity. During this period the psychiatrists role changed from ‘kindness’ to ‘manliness, maturity and responsibility’ and middle class women with opposing sex role were considered women with nervous disorder (Showalter 1985, 120). Women who went out of the home were warned by doctors that deviant roles and opportunities as professional, educational, political would lead them to ‘sickness, sterility, and race
suicide’ associated with epidemics as ‘anorexia nervosa, hysteria and neurasthenia’ (Showalter 1985, 121). Showalter says that Darwin and his disciples made the ‘scientific confirmation’ of ‘Victorian ideals of femininity’; ‘female intellectual inferiority’ which could be judged by their reproductive nature. Showalter says through the term ‘natural’ Darwin made a division between the ‘powers between the sexes’; men became superior with ‘courage’, ‘energy’, ‘intellect’; on the other hand; with the qualities like ‘intuition, perception and imitation’, females became inferior. Showalter criticizes the theory of cell metabolism in differentiating sex as ‘male cells, they explained, were katabolic, or active and energetic; female cells were anabolic, or energy – conserving, passive and life supporting (Showalter 1985, 122).

The first and foremost nervous disorder of women diagnosed as anorexia nervosa was caused mainly due to physical starvation. Female were restricted from consuming meat, as it was considered a food for warriors, reflecting anger, yearning and food for sexual excitement, heavy menstrual flow. “Thus in the rigid control of her eating, the anorexic both expressed her fear of adult sexual desire and enacted an exaggerated form of the deadening life of the dutiful daughter” (Showalter 1985, 129). Nervous disorder ‘hysteria’ has entered into the psychiatric career as exchangeable with femininity; extreme emotion and with physical symptoms. Nineteenth century doctors described hysteria as ‘the seizure’, ‘sensation of choking’, ‘pain in uterine region’. “…[H]ysteria generated by Darwinian psychiatry, however related it to faulty heredity, exacerbated by the biological and social crisis of puberty” (Showalter 1985, 130). Hysteria was also considered as an expression of ‘unnatural’ desire for solitude and autonomy (Showalter1985, 134). Neurasthenia, then called hysteria, was considered to be a prestigious nervous disorder in female. Neurasthenia was metaphorically termed as ‘American nervousness’ as they are thought to be ‘cooperative and ladylike’ which carried out a special connection between ‘modern social organization and nervous illness’. This disease is diagnosed among the middle class, educated, urban women specially career oriented women. Women’s lower capacity to bear load in the brain was considered responsible for the disease. The treatment incorporates complete submission of patient to the treating person; the aim of the treatment was to segregate the patient from ‘family support systems’, expose her
to fraudulent tricks, pressurize her into yielding her symptoms and to conquer her self-interest (Showalter 1985, 134-137).

During the post war period ‘psychiatric modernism’ started with modern techniques of treatment and the female malady ‘hysteria’ was unspecified by a clinical form of ‘schizophrenia’. Treatment of schizophrenia could not be handled by psychoanalysts and instead handed over to psychiatrists. “….schizophrenia encompasses several different disorders rather than single phenomenon with a single cause” (Showalter 1985, 204). Though schizophrenia does not carry the gendered meaning, it offers notable example of ‘cultural conflation’ of ‘femininity’ and ‘insanity’ (Showalter 1985, 204). Showalter says that English women’s literature of twentieth century extensively reflects the interconnection of ‘culture and medical’, schizophrenia and femininity. The proper expression of the resentment of the culture in their narratives is seen in autobiographies, poems which describe the harsh treatments of schizophrenia as shock, psychosurgery and chemotherapy. Showalter says that schizophrenia became the ‘bitter metaphor’ for identifying cultural condition (Showalter 1985, 210).

1.4 The Rise of the Feminist movement in India

Indian society has always been hierarchical in terms of family, age, sex, kinship, community, caste, class, race ethnicity and all these hierarchies are incorporated by different customs, rituals and religious beliefs. In India women’s movement continued with the goals of women’s education, legal rights, right to vote in the heterogenic contexts of caste, class, community, region, religion, ethnicity right from the 1880s under British rule. Colonialism conveyed a major change in Indian traditional social system, economy as well as in gender relations. First and foremost goals of Indian men and women were to form an independent Indian nation state with political enunciation of democracy within the discourse of anti-colonial nationalism. Women’s movement in India started in the nineteenth century as a social reform movement by some Western educated Indians who were familiar with European liberalism such as Raja Ram Mohan Rai, Iswar Chandra Vidyasagar, Kesav Chandra Sen, Malabar, Irawati Karve and Mahatma Phule etc. Their movement was against social evils such as abolition of sati (self sacrifice of widow) and custom of child marriage, widow remarriage. They
primarily focused on women’s education. “Both groups of reformers, revivalists and progressives, shared a concern with the status of women and were instrumental in beginning a movement directed towards changing the reality of their times” (Forbes 2008, 13). Christian missionaries come out and provided education to the daughters converted to Christianity and thus they educated some portions of Indian women. According to Forbes women with education achieved a ‘voice’ to articulate their own problems and these became obvious in the talk of “tearing the purdah”, “breaking out of the cage” and “escaping from bondages” (Forbes 2008, 13). Earlier women rarely got the chance to speak in public; they usually had to abide by the command of social reformers. But women oriented organizations started with the Bharat Mahila Parishad in 1904 in Bombay where a single man was not allowed to attend the conference. The problems related to dowry, child marriage, were discussed in these conferences. Later Saraladevi Chaudhurani started Bharat Stree Mahamandal (The Great Circle of Indian Women) with the statement that men in the guise of social reformers fantasized themselves to be the defenders of women. So she demanded that to make visible women’s problem it was very necessary for women to come out collectively. Mahamandal started zenana education or education within home but it could not last long. Dorothy Graham Jinarajadasa, Margaret Cousin and Annie Besant; ‘connected with militant feminism in the British Isles’ (Forbes 2008, 16) had a great contribution in the feminist movement of India. Jinarajadasa and Margaret Cousin organized Women’s Indian Association in 1917 and discussed and educated women on social issues, passed resolutions on rights of vote, prevention of child marriage and inheritance of property. In 1925 the National Council of Women in India (NCWI) and in 1927 the All India Women’s Conference (AIWC) were founded. In these conferences the issues of women, especially education, was discussed along with the problems of purdah, child marriages as these were the barriers in women’s education. These three organizations acted for establishment of ‘equality’ and with an ‘anti-British’ ideology; women believed in the nationalist and reformist attitude of their native men. Indian Nationalism was always the major issues of discussion along with issues related to women among first wave feminists. So in British India the feminist movement cannot be separated from the political movement. Sarojini Naidu was another woman who made a significant contribution towards women’s movement as well as the
political movement. Sarojini Naidu took active participation in the Indian National movement. She became the first Indian women president of the Indian National Congress. Naidu travelled different regions of India delivering lectures on women’s empowerment and nationalism. She took initiatives to establish Women’s Indian Association in 1917. Another leader of the women’s movement, socialist and nationalist was Kamaladevi Chattopadhyay who argued that it was very difficult to fight against the customs of society and the legislative victory was not ultimate victory of women. So some women continued their fight against other social injustice after achievement of legislative victory (Forbes 2008).

India is a country with social stratification of caste and class, race, ethnicity and gender. People’s struggle with these social inequalities continued from simple agrarian society to a complex capitalist society. Gender is interconnected with class and caste. History states that division of labour between male and female developed very early. With production system men acquired power in the society where women came to be confined to household activities, childbearing and childrearing practices; thus she acquired a lower position in the society, both in feudal and capitalist social history (Mohanty 2004).

Class in patriarchal society is complex and constantly changing with changes in the modes of production. “..the relation between changing modes of production, patriarchal structures and class position is both aligned and disjunct” (Sangari and Veid 1989, 5). With the advent of colonialism and with the already existing inequalities of Indian society different ideologies of production entered. Through change in the British administration with the introduction of the land revenue system, power was handed over to landlords and land lords; the upper castes through their representation in panchayats increased the exploitation of rural women. In this feudal economic system of colonialism oppression of women in agrarian society was augmented; this was manifest in harassment of women tenants, stress to sales of daughters to manage caste and class based marriage customs and sexual principles. Thus women suffered in the complex interrelation between indigenous patriarchal norms and rules detained by British administrators in agrarian society in India. There was a major shift in occupation of urban areas with the advent of industrialization in colonial regime. Women came out from the traditional village occupations; but in the new sector their prospect became
restricted in textile and jute mills. Many women from the working classes were pressed to the ‘domestic sphere’ and thus the middle class ideologies of division between ‘private’ and ‘public’ domain became popular. The middle class consisted of urban professions, trading classes, village people worked with colonial administration (Sangari and Vaid 1989).

Sangari and Vaid say that this middle class developed the ideologies of ‘Hindu’ womanhood in opposition to the concept of the ‘Western’ women (1989, 9). Mohanty says that the ‘Great Indian Middle class’ grew in India and reached the dominant status among other classes in that situation with male dominated professionals and thus patriarchal ideology always dominated lives of the middle class in India (Mohanty 2004, 31).

Caste is a hierarchical social group divided on the basis of occupation dominated in Hindu cultural recommendation originated as Varna. Varna is separated into four social groups; Brahmins (priest), Kshatrya (warrior), Vaisya (trader) and Shudra (labour/peasant). ‘Untouchables’ the impure caste comes from the lowest position where it remained as an outcaste. Uma Chakravarti has elaborately discussed the subordination of women in India through the ‘powerful instrument of religious tradition which have shaped social practices’. Chakravarti argued that the Brahmanical social order had shaped the principles of caste hierarchy and gender hierarchy in Indian society (2004, 271). Brahmanical texts of early India clearly reflect the relationship between class, caste and gender; the analyses of highly stratified and closed structure of caste system used process of control over female sexuality to subordinate the upper caste women and also to maintain caste purity. Puberty was considered as ‘dangerous’ and thought to be the landmark between female purity and purity of castes so there were rituals connected to puberty and girls were being married before attaining puberty among the brahmins.

These ideologies were shaped by the upper castes and are still accepted as beliefs and practices in Indian society (Chakravarti 2004, 272-273).

In Brahmanical texts there is evidence of the fact that women have the power to destroy the ‘structure of Hindu orthodoxy’ as dishonored women can demolish the
whole social system, so the upper caste women was considered as ‘object of moral panic’. So to avoid such possibility women’s sexuality was subordinated through Brahmical ‘law codes and enforced by the power of the state’ (Chakravarti 2004, 274). Gradually with the increased dependency on agriculture during post Vedic period Aryan women became more subjugated as they could not go out of the home and take part in productive activities so their role was completely confined to household activities and reproduction. The sharp distinction between motherhood and female sexuality was made; motherhood confined women within the four walls of the house to maintain caste purity.

“... the preservation of caste purity meant that the sexual behavior of certain categories of women needed closely to be guarded” (Chakravarti 2004, 279). The ancient Hindu along with Buddhist texts represented women’s ‘innate nature’ as sinful, unfaithful, with an intention to seduce men:

Their uncontrolled sexuality was perceived as posing a threat and the narrative and normative literature of ancient India is thus full of references to the wickedness of women and of their ‘insatiable’ lust” (Chakravarti 2004, 282)

Thus the Brahmanical ideological control over women to maintain chastity and purity meant that women had to be armoured and protected through different rituals, codes and customs; many of these continue till today. Chakravorty argues that these Indian texts had ignored the figure of the ‘Vedic dasis’ (women in servitude), one major part of Indian womanhood, highlighting the high caste Aryan women (Chakravarty 1989, 28).

Anupama Rao describes the subjugation of Dalit and lower caste women in India in the past. She says that Dalit women were suppressed in three ways; as women, as Dalit women and as dalit women performing ‘stigmatized labour’. They always had to suffer from lack of water, sanitation, lack of education and segregation in religious and public spaces. They continue to stand for the symbol of untouchability (Rao 2012, 527).

Colonialism always used caste for gaining social and political mileage and to highlight India’s social backwardness. Caste and religion were used by colonial
administrators to create political segregation and to create division along the lines of religion and caste (Rao 2012, 527). Orientalism represented Indian women as ‘faithful widows’ burning in the funeral pyre and an object of brutality for the husband. Thus colonialism tried to represent India as a barbaric, uncivilized country with immoral Hindu males controlling helpless females, requiring ‘protection’ and intervention of colonial state. This was seen as a justification for continuing the morally superior colonial rule as reasonable in India (Chakravarty 1989, 35). Thus in colonial India gender, caste, class, race, ethnicity, became the political weapon. The colonial states were not of course concerned with mitigating these differences. Instead, they politicised the prevalent socio-political inequalities of the country for their own benefit.

1.5 Indian feminism Vs Western feminism

Indian feminism was quite different in ideology from Western feminism. First of all Indian feminist movement started with men’s social reform movement. Indian women rejected the label of ‘feminist’ as they never considered men as enemy; rather they measured Indian traditions as the cause of ‘women’s issues’. Their first and foremost fight of Indian women was against the oppression and exploitation of British rule and to free them from colonialism. “That Indian women were unlike Western feminist is true. They shied away from the very term ‘feminist’ and from discussion of sexual issues. Indian men are not to blame, the reiterated; ‘custom’ was the enemy and customs were the result of wars and imperialism” (Forbes 2008, 25).

Suma Chitnis says Western feminist set up their movement with concept of individualism but for Indian society the concept of individual freedom was very unacceptable and Indian women’s sense of justice is different from Western women (Chitnis 1988, 84). However, a generalization about this is not possible as there is a difference of opinion within feminists of India. While as already pointed out, many are suspicious about the Western origin of feminism (Chitnis 1988), there are others who contend that dismissing feminism for its Western origin is itself a ploy of Brahmanical patriarchy. Similarly there are others like Tejaswini Niranjana who has highlighted the importance of the feminist project in the context of India (2007).
1.6 Women and Mental illness in India:

Indian social structure, family structure, kinship pattern, economic condition is quite different from that of the West. Indian colonialism brought the structure of asylums and treatment procedure along with them. Waltraud Ernst in ‘European Madness and Gender in Nineteenth –century British India’ has said that social class, ethnicity, racial superiority, and other factors made the issue of madness unclear and very difficult to scrutinize from the gender perspective; the European mental health problem is different from Indian mental health problem (Ernst 1996, 380). The colonial power associated the concepts of irrationality, undisciplined, uncontrolled, deceitful with reference to the ‘natives’, the ‘Indians’; so reason’s suppression of unreason, men’s oppression of women can be placed within the wider context of the ‘colonizer’s subjugation of the colonized (Ernst 1996, 360).

During the nineteenth century the major causes of women’s mental illness was considered to be ‘loss, grief and emotional disappointments’, loss of husband or relatives, loss of love and sometimes the inability to perform the gender roles of daughter and mother. Sen argued that in the colonial context ‘there was no place for a woman” and the situation of white women or Anglo Indians in British India was very crucial (Sen 2005, 32). White women had to suffer from alienation and isolation from the natives as they were all alone with their husbands, leaving behind native places, and their children were usually sent to England for their education. The Memsahib thus had to confine herself only to her roles and responsibilities of housekeeping along with the demands of wifehood and motherhood so they very often suffered from frustration, isolation and loneliness. Archival records and some writings suggest that middle class European women were more prone to mental illness and their illness was diagnosed as nervous breakdown, homesickness, hysteria and depression. Medical discourse describes a condition like neurasthenia to be caused by the stressful social life of Anglo Indian women in colonial India and nervous disorder. The condition of the white women of the lower classes, such as wives of soldiers or other low ranked employees, was pathetic during nineteenth century colonial India. They had to suffer from poverty, garrison of alcoholism, harsh treatment and negligence from their husbands, marriage at an early age and its complicacy; so the feelings of powerlessness, helplessness, isolation, alienation lead to mental illness. In such
cases mental illness in women is triggered off by the combined effect of class and
gender discrimination. Thereby the social, economic and political causes in the
colonial context of India contributed to the construction mental illness as ‘female
malady’ (Sen 2005). The hot tropical climate of India or other tropical colonial
countries was also considered as the cause of mental illness though it was an issue
of much debate (Enfield and Nash 2005; Sen 2005). Asylum treatments were
also hierarchical among white women itself: ‘middle class white women’ or lower
class ‘barrack wife’, their social and sexual condition as economic destitution and
sexual vulnerability was the deciding factor (Sen 2005, 45).

Ernst has argued that the treatment of patients inside asylums was gendered as
women were attached to ‘female’ stereotypical roles such as sewing, knitting
where as men were involved in ‘male’ works as playing cards; women’s treatment
therapy is also different from men. Race, class and caste play a crucial role in
treatment procedure along with gender. The European lower class was excused
from engaging in physical works in the asylums while both ‘native’ men and
women were engaged in different tasks. There was also a prejudice of caste that
was perceivable in the performance of menial work (Ernst 1996, 366-367).

Women (not only the Memsahib but also the native women) suffered from
discrimination and negligence both inside and outside the asylums. The colonial
ruler subordinated the colonizers inside the asylums. “Within the colonial context
of the raj gender differences were at times subordinated to those between the
ruling group and its vassals-even within the lunatic asylum ”(Ernst 367).

Women with mental illness in colonial India thus had to fight with womanhood,
colonialism, and other social conditions such as caste, class race and ethnicity and
also with mental illness. Davar in her epidemiological study on women’s mental
illness in contemporary India has identified that there is statistical correlation
between social variables and mental illness in women. She had explored some
common social conditions for causing mental illness in women in contemporaray
period; as widow hood, women that are not married, divorced women, women
without child etc (Davar 1999). Davar has argued that the larger structure of the
Indian joint and extended family and its imbalanced power distribution, where
women acquired minimal power and their ‘inner problems’ are usually ignored,
often leads to mental distress of a women in India (Davar 1999, 48). She demands that women’s lack of self expression or socialization process makes them more submissive and their problems are rendered clinically invisible. Violence, domestic violence, sexual abuses are some factors which makes women prone to mental illness in India. The cultural stereotypes and clinical definition of some definitions of some illnesses such as hysteria, neurasthenia created confusion both in India and in the West. Davar had shown that there is strong hold of cultural healing practices of mental illness among women in India that sometimes creates a clash between clinical health practices; she argues that both the services show bias in treatment of the mentally ill (Davar 1999).