Bodies Tell Stories: Freudian Hysteria in Fay Weldon’s *The Life and Loves of a She-Devil*

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**ABSTRACT**

Fay Weldon’s *The Life and Loves of a She-Devil* deals with the nature of the hysteric psychological state women in abusive relationships or situations may suffer from and how they may react in either passively relenting to these conditions or taking control of their lives to achieve change. Thus, the question is raised as to whether the hysteric condition may be used as a means to an end. Women’s Freudian hysterical symptoms are often physically manifested by anorexia nervosa, loss of speech (muteness), disturbed sleep, and alienation, among other maladies which may be subsumed under the category of symptoms of Freudian hysteria. Such symptoms, according to Freud, appear as the consequences of sexual violations a subject may have encountered, resulting in the manifestation of psychological disturbances characteristic of hysteria. This paper aims to investigate Fay Weldon’s *The Life and Loves of a She-Devil* from Freud’s theoretical perspectives on hysteria in order to indicate the influences of hysteria and its symptoms and reactions, focusing on the actions taken by the heroine of the novel under discussion to actualise herself.

**Keywords:** Fay Weldon, Freud, hysteria, subjectivity, *The Life and Loves of a She-Devil*

**INTRODUCTION**

Fay Weldon’s oeuvre is pregnant with references to psychological disturbances, among which are the novels of the *She-Devil* and *Praxis*, which are prominent perhaps because of her being a student of psychology and suffering from such disturbances herself in some periods of her life. Leading a lonely life after she got married and had her first...
baby caused Weldon many troubles, which made her life difficult and led her to divorce that made her life hellish and beset with psychological tension. While Weldon’s career was being established, psychological concepts and references became a common discourse employed by her contemporaries. Her career and oeuvre “twine interestingly with psychology” (Blymiller, 2007, p. 16) because she studied psychology at St. Andrews and went through Freudian psychoanalysis.

Hysterical symptoms reflected in Weldon’s fiction find their roots in her own person. She suffered from eating disorders, which were addressed as bingeing in her first novel, The Fat Woman’s Joke (1967), which clearly reflects such hysterical symptoms. Weldon’s matrimonial life is somehow intricate for the numerous (three) marriages she had since her earlier one in the early 1950s till her last one in 1994. Her first marriage was not successful, leaving her with her son Nicholas. Her hard life used to be considered, by her, as the source of her writings and ideas. She crawled under poverty, hard work, and missing protection. During the 1960s, Weldon started experiencing psychological problems and disturbances that reached the level of depression due to the difficult life she had, and this is what can be traced in her fiction (Weldon, 2003, p. 61).

The question of eating disorders, anorexia nervosa and bulimia (Freudian indicated symptoms) are again confirmed in her The Life and Loves of a She-Devil (1983). Barrecka confirms that Weldon’s “fiction and nonfiction alike are filled with images of transgression, subversion, heresy, and hysteria” (1994, p. 4). Women have endured a lot of suffering, and it may be concluded in this regard that “the intellectual system under patriarchy deliberately neglected and buried the female intellectuality and consciousness, and the only means to regain such intellectuality is to change the way of thinking itself” (Hassan & Talif, 2014, p. 69) by following new modes in order to actualise the self and construct identity. Women, for their being subjected to violence, servitude of males and controlled in patriarchal societies, would look for means to gain their voice, liberate themselves and assert their identities as human beings with voices and desires and equivalent to the males. Thus, for her being “the embodiment of psychologically tormented women” Ruth “will attack all kinds of patriarchal institutions” (Caliskan, 2016, p. 451).

Weldon proved to be dedicated to women and their issues since her first novel The Fat Woman’s Joke (1967). She has been preoccupied with subjects related to “women their condition and their lot” (1979, p. 15), which is why she is described by Hill as “an expert chronicler of the minutiae of women’s lives, good at putting their case and pleading their cause” (1979, p. 16). Thus, women’s psychological issues are well represented in her fiction, among which is hysteria. These elements of hysterical representations attached to female characters in Weldon’s oeuvre are attributed through the many afflictions they
experience and women’s attempts to thwart these afflictions through abjection. Krouse (1978) contends that Weldon’s oeuvre explores women’s lives on many levels, i.e. from childhood to motherhood. She notes that “her major subject is the experience of women: sexual initiation, marriage, infidelity, divorce, contraception, abortion, motherhood, housework and thwarted career”, all of which receive Weldon’s attention and concern (p. 5). Weldon, in most of her fiction, portrays women delusively depending on men, which leads them to be hidden in the shade of the men they depend on. Some characters fall victim to the misconception that life without a man is impossible. Conversely, these characters, according to Weldon’s representations, symbolically denote that such conceptions are only self-destructive.

Weldon’s representations of psychological disorders and their physical manifestations may be attributed to her own experiences. Having “suffered from an eating disorder herself [a hysterical symptom], she addresses bingeing in The Fat Woman’s Joke (1967), thus capturing a previously hidden life and openly questioning ideology—in this case, thinness as privileged” (Blymiller, 2007, p. 19). Thus, she reflects what she herself went through in some of her novels. Exploring the psychological conflict of the characters highlights the suffering of women in Weldon’s oeuvre. This conflict, which results in many psychological disturbances including hysteria, is portrayed in her early fiction and started specifically with The Fat Woman’s Joke (1967), which explores hysterical symptoms of her characters. The hidden hysteric representation of certain symptoms continues with Weldon’s novels including her next novels Praxis (1974), The Life and Loves of a She-Devil (She-Devil) (1983), The Cloning of Joana May (1989) and Affliction (1994). She-Devil has not been explored from the Freudian perspective of hysteria, which is why this merits exploration as the subject of this paper.

FREUD’S VIEW OF HYSTERIA

Symptoms of hysteria, as Freud theorised, are brought about by “psychical traumas” and consequently, “any experience which calls up distressing effects such as those of fright, anxiety, shame or physical pain may operate as a trauma of this kind” (Breuer & Freud, 1957, p. 6). According to Freud, […] the causal relation between the determining psychical trauma and the hysterical phenomenon is not of a kind implying that the trauma merely acts like an agent provocateur in releasing the symptom, which thereafter leads an independent existence. We must presume rather that the psychical trauma or more precisely the memory of the trauma acts like a foreign body which long after its entry must continue to be regarded as an agent that is still at work; and we find the evidence for this in a highly remarkable phenomenon which at the same time lends an
important practical interest to our findings. (1957, p. 6)

Freud, in *Studies on Hysteria* (1957), claims that hysteria is a consequence of sexual trauma and demonstrated that through the many cases he encountered, wherein hysterical symptoms were provoked consequential to sexual experiences, molestation, or incest, subsequently resulting in repression of desires.

Freud’s theory relates the emergence of reminiscences (memories) about some forms of sexual harassment with mental trauma, or as he said, “hysterics suffer mainly from reminiscences” (1957, p. 7). These experiences are repressed, but appear later in the guise of hysterical symptoms. According to Freud, these symptoms appear in response to certain triggers that seemingly unleash hysteria. This form of repression is concerned with sexual matters, as Freud confirmed through the cases he treated.

Fright hysteria, according to Freud, has some hidden connections with the sexual factor. He contends that “[a]longside sexual hysteria we must at this point recall hysteria due to the fright – traumatic hysteria proper – which constitutes one of the best known and recognized forms of hysteria” (1957, p. 247). Freud highlights fright hysteria because this element is pivotal in pushing women to be hysteric especially in certain patriarchal societies. Women’s being in frightening situations because of expected rape, molestation and/or physical violence lead them to develop hysterical symptoms. Such kinds of symptoms are manifested in anaesthesia, neuralgia, vomiting, paralyses, anorexia, bulimia, hallucinations, alienation, loss of speech, fear, disturbed sleep and many others.

Explaining its origin and how it evolves, Freud avers that hysteria starts with the overwhelming of the ego. The rising tension at the primary experience of pleasure is great to an extent that the ego does not resist it and forms no psychical symptom but is obliged to allow a manifestation of discharge, frequently an excessive repression of excitation (Freud & Gay, 1989, p. 96).

**DISCUSSION: FREUDIAN HYSTERIA IN SHE-DEVIL**

The *Life and Loves of a She-Devil (She-Devil)* centres around the character of Ruth, the heroine of the novel who suffers from Freudian theorised hysteria. Ruth, the narrator of the story, left her house while she was still a teenager because of the unwelcomed intrusion of her step-father. Her mother ran away with her lover, leaving Ruth to live in a hostel run by nuns. Ruth happens to be working under Agnus (her future father in-law). She impresses upon Brenda, Angus’ wife, that she was invited to live with them in their house. Ruth’s predicament is worsened with her first experience of sexual intercourse when she was raped by Bobbo. As she lives in Angus’ care while their son Bobbo is studying away from home, Ruth finds refuge in Bobbo’s room, as suggested by Brenda. When Bobbo comes for a visit, he sneaks into Ruth’s room in order to satisfy his sexual desires with the innocent Ruth. This first experience
of sexual intercourse, followed by other recurrent ones, puts her in an unenviable situation and causes her grave psychological disturbance. This leads to their subsequent marriage, as urged by Angus and Brenda, through which Ruth’s traumatised body begins reacting through the symptoms that emanate from her.

Weldon’s Ruth goes through submission, rebellion, degeneration, promiscuity, transformation and awakening, and in the end, she achieves her rebirth (Chen, 2014, p. 240). All these stages of development were accompanied by hysterical symptoms that led her through the aforementioned developmental stages. At the very beginning of the story, Ruth’s persona is described in a grotesque manner, as an unfit woman in her society, which worsened her situation. She describes herself as follows:

I’m a six feet two inches tall. Which is fine for a man but not for a woman. I am dark as Mary Fisher is fair, and have one of those jutting jaws that tall, dark women often have, and eyes sunk rather far back into my face, and a hooked nose. My shoulders are broad and boney and my hips broad and fleshy, and my looks do not agree. I was unlucky, you might think, in the great lottery that is woman’s life. (Weldon, 1985, p. 5)

Ruth’s appearance is the focus of much of the abuse inflicted upon her. This abuse has its roots in her childhood when she heard negative comments from her mother about the way she looked. These words are stored in her mind as trauma, which emanates from her later in a Freudian process of hysterical conversion. She confirms this in her statement, “my mother was ashamed of me. I could see it in her eyes” (Weldon, 1985, p. 8). Ruth’s mother once said, “little ugly duckling […] almost weeping, smoothing my wiry hair” (Weldon, 1985, p. 8). She is not even loved by her mother because “ugly and discordant things revolted her” (Weldon, 1985, p. 8). Thus, Ruth’s suffering is not recent in the context of the narrative, but it originates from childhood suffering that she could not control. These feelings correspond with the Freudian perspective that considers hysterical symptoms as “physical traumas” and “any experience which calls up distressing effects such as those of fright, anxiety, shame, or physical pain” (Breuer & Freud, 1957, p. 26). These symptoms of shame, fright, anxiety and physical pain are represented in Ruth’s body, especially after the appearance of Mary Fisher, her husband’s mistress.

Bobbo, Ruth’s careless husband, feels himself pushed in this marriage, and being a womaniser, he declares that they should have an open marriage so he can choose his mistresses and spend time away from their home. He says “we’ll have an open marriage […] that we must both live our lives to the full and always be honest with each other. Marriage must surround our lives, not circumvent them. We must see it as a starting point, not a finishing line” (Weldon, 1985, pp. 34-35).
In this way, the writer paves the way for the appearance of Mary Fisher, a “forty-three [old] and accustomed to love”, who never fails to have “a man around to love her” (Weldon, 1985, p. 1), who happens this time to be Bobbo. Mary Fisher becomes a source of torture for Ruth, being her antithesis, stealing her husband and leaving her in abject suffering. Bobbo never cares for his wife, basically because of the way she looks compared to his mistress, Mary, which is a further factor in the deterioration of Ruth’s psychological state. One of the hysterical symptoms Ruth suffers is the lack of sleep, particularly when her husband is near. She declares, “I don’t sleep much on the nights he is with me: I get out of bed, quietly, and go into his study and look through Mary Fisher’s life” (Weldon, 1985, p. 10). The hysterical situation inhabits her life by then to the extent that she could not even sleep because of her husband’s behaviour of negligence and his making Mary Fisher his priority, while leaving his wife in a dark corner.

Bobbo’s prioritisation of Mary over Ruth leads the latter into a state of disharmony not only with herself but also with her family and children. This is clearly evident when she starts crying and weeping while Bobbo’s parents are invited to their house. Fits of crying and desperation are by then common symptoms apparent in Ruth’s character and behaviour.

**EATING DISORDERS (ANOREXIA AND BULIMIA)**

Considering the eating disorders anorexia and bulimia as major hysterical symptoms based on Freud’s claims, Ruth can thus be easily identified as a hysterical figure. She suffers from excessive eating habits which clearly express her unsettled and disturbed psyche. Whenever she experiences new distress, she resorts to eating, and this explains her huge, grotesque body. Some psychiatrists now reject eating disorders as hysterical symptoms, but according to Freud, they are the true symptoms of hysteria because these symptoms reflect how the subject is troubled from within. Also, Grosz, a Freud critic, confirms that “there are distinct waves of particular forms of hysteria (some even call themselves fashions)” and “the most ‘popular’ forms of hysteria today are eating disorders, anorexia nervosa and bulimia in particular” (1994, p. 40). Grosz’s claims correspond closely with Freud’s, which in turn, confirm Ruth’s hysterical situation. When Bobbo, Ruth and Marry Fisher were all invited together, Bobbo drove Mary to her house, dropping off his wife at a distance from their house so that she was forced to walk home in the rain rather than being driven home. Ruth’s subsequent reaction to this is captured in the following passage:

Went home and thought about it, lying awake at night, and of course
Bobbo did not come home, and in the morning, Ruth shouted at the children, and then told herself it was not fair to take her distress out on them, and got herself under control, and ate four toasted muffins with apricot jam when the house was quiet and she was alone. (Weldon, 1985, p. 37) (Emphasis added)

In such situations, she translates her hysteria into particular acts and behaviour that are expressive of her traumatised inner self through shouting at her children and excessive eating habits.

As discussed above, anorexia is a major hysterical symptom identified by Freud. Such symptoms do not spontaneously appear and are, for the most part, the psychological impetus for the subject’s anorexia. In Ruth’s case, she suffers from bulimia (bingeing), which is one of the hysterical symptoms which she could not control. She would carry a butter nut can with her as if it was Coleridgian opium, used to escape from any pressures she might encounter. Ruth suffers from anorexia in a unique manner, which does not involve decreased food intake. Her anorexia manifests itself in the form of plastic surgery she undergoes to make her body conform to the image she has created in her mind. Anorexia is abstaining from eating, whether intentionally or not, which results in the subject having an emaciated body. This targeted skinny body is achieved by Ruth through a more demanding metaphorically anorexic need for having her body butchered through many surgeries. Although this is obviously self-destructive, Ruth perceives it as rebirth in the pursuit of achieving some of her goals.

The process of self-destruction is more direct since it is positioned in loathing the physical body and then has much in common with anorexia. In Caskey’s definition of anorexia, what is important is “the literal-mindedness of anorexia to take ‘the body’ as a synonym for ‘the self’, particularly as it is reflected to the anorexic by the perceived wishes of other” (cited in Suleiman, 1986, p. 184). Anorexia, therefore, is a re-shaping cultivation of the body, and based on Caskey, it is not necessarily achieved through food diet. Thus, Ruth’s anorexia can otherwise be considered so as manifesting itself through her elective plastic surgery in as far as it carries the same aim. It is then representative of the impulse to “escape the body entirely as a way of escaping this funnel of alien desires” (Suleiman, 1986, p. 184). One might question the relationship between hysteria and body construction through the plastic surgery Ruth has had. The whole process of rehabilitating the body is a method no less significant than the methods employed by hysterical women, especially as may be gathered from the French scene referred to in the early chapters of the novel. Women have been known to sometimes exhibit hysteria resulting in paralysis, convulsions and breathing troubles, which are the culmination of aspects of protest. The victimisation of her own body, Ruth has endured through many surgeries, reveals her protest and dissatisfaction with the way she lives and at the same time, shows
her obsession, as Dowling claims, with the inadequacies of her body, which is a neurosis carefully nurtured by men (1998, p. 74). However, this victimisation seems to be constructive for Ruth in managing to achieve her aims, as is discussed below.

HYSTERIA AND THE SOCIETY

The ghost of Mary Fisher is haunting her and setting her in a haphazard state. This is seen when she declares, “sometimes in the night I scream so loud I wake up the neighbours” (Weldon, 1985, p. 56), and in that during many of her bad times, she “wept and wailed and clung to her neighbours” (Weldon, 1985, p. 69). As Bobbo gets more attached to Mary Fisher, he decides that Ruth should take responsibility for their house, while he would move to Mary’s house. Their problems persist because of Bobbo’s disloyalty and indulgence of Mary’s life. Bobbo can no longer tolerate Ruth as his wife and begins to find pretexts to stay away from home. After going through many degrading moments, Ruth is addressed by Bobbo as follows:

You are a third-rate person. You are a bad mother, a worse wife, and dreadful cook. In fact, I don’t think you are a woman at all. I think that what you are is a she-devil.

(Weldon, 1985, p. 47)

At this shocking moment, which plunges her into real hysteria, Ruth’s life has started to take a new turn. She thinks she can now do what she wants as far as there is no shame, no guilt or drearily striving to be good. She said, “[A]nd I can take what I want. I am a she-devil” (Weldon, 1985, p. 48).

In consequence to her conversation with her husband and her new determination to change herself, Ruth sends her two children away from the house and sets it on fire. She takes some of her husband’s important papers and goes to fetch her children. This act of burning the house is a reaction against Bobbo’s mischievousness. His maltreatment, bad words and behaviour activated Ruth’s hysterical reactions. She then takes her children and leaves them with their father at Mary’s house and goes to lead her own life. Within the process of establishing her new life, Ruth goes through many stages of self-development and construction of her identity, aiming to destroy her rival Mary and take back her husband, but as she says, “on my own terms” (Weldon, 1985, p. 85).

Ruth’s hysteria is positive in certain aspects, which leads this discussion to the case of Anna O, one of Breuer’s, and later Freud’s, patients. Anna was suffering from hysteria but undergoing psychotherapy. She managed to become a successful figure with a high level of education. Her hysteria led her to construct her identity and become a subjective person in male-dominated culture. In much the same manner as Anna’s, Ruth assumed many roles and different names in order to exist. She started an employment agency for women and exacted revenge upon her husband by incriminating him for embezzlement for which he was sent to jail to serve an eight-year sentence through

Omar Mohammed Abdullah and Mustafa Mohammed Abdullah

entreaty on judge Bishop and convincing him. Her new situation sets Mary Fisher in a state of hysteria, suffering from the absence of her lover. Weldon sets Mary and Lady Bishop, a character appearing later (discussed below), in hysteria to magnify the suffering of women and their hysterical symptoms. Mary, just the same as in Ruth’s early suffering, enters a circle of torture. She “lies awake and alone at night, and weeps for lack of Bobbo” (Weldon, 1985, p. 155). Her hysterical symptoms become more prevalent as “she goes to her room and weeps” (Weldon, 1985, p. 229).

Mary’s predicament is underscored by Weldon as she offers another aspect of hysteria in addition to the one represented by Ruth. She is portrayed as living in a high tower, wishing that she did not. “She doesn’t want to live anywhere. In fact […] she wants to be dead […] she is suicidal” (Weldon, 1985, p. 243). Her body obviously emanates the hysterical symptoms as she becomes thinner and begins to age. Her situation is worsened when she falls ill, leading to her death in the end. Weldon succinctly portrays Mary Fisher as:

Tired, tired. With success comes failure. Her body has noted her earlier despair, seized its opportunity returned to disorder, to misrule. The steady flowering pattern has lost its head, spun into disorder. (Weldon, 1985, p. 245)

After leading Mary to this state and her subsequent death, Ruth encounters Lady Bishop, the judge’s wife. Ruth’s intervention in the judge’s house is intended by Weldon to contextualise the hysteric situation of Lady Bishop. Because of the torture she receives from her husband, Lady Bishop obviously manifests visible bodily hysterical symptoms. Her husband tries to keep her as a properly functioning female, subjecting her to extreme sexual practices, which according to Freud, are responsible for triggering later hysterical symptoms:

[A]s long as he nipped her nipples with his teeth so that she cried out, her breasts would not disappear. As long as he could tug and twist her pubic hair, it would continue to grow. It was for her own good […] he was vigorous and sexually active, and Lady Bishop, as a wife, was at the mercy of the demands of her husband’s profession. (Weldon, 1985, p. 164)

The pressures she endured set Lady Bishop in a state of suffering which could never be concealed. Consequential to all that she went through, “Lady Bishop would be too bruised and bleeding to come down to breakfast but would at least have the next three weeks to recover” (p. 165). She would sit “alone at night” and the memories of “bondage and whips” which she had not yet recovered from would set her in a state of psychological disturbance (Weldon, 1985, p. 168).

CONCLUSION

The She-Devil offers a panorama of hysteria and hysterical symptoms which women often
suffer. Although the main focus of the novel and this paper is Ruth and her many roles, it was also important in the above discussion to touch on the situations of other characters suffering similarly to Ruth and how the effects of this suffering were manifested in the resulting action taken by the characters in dealing with such abuse.

An important variation on Freud’s talking cure used as a cathartic technique employed in treating his patients may be seen in the action Ruth took in taking control of her life. Through this technique, the subject gets rid of whatever burdens her and cleanses the psyche of hysterical symptoms. Ruth reacted against the appropriation of her body and negligence she received from her husband through manifesting what she repressed through her body rather than through expressing this through speech. She managed to overcome her hysteria by assuming many roles and speaking through actions and behaviour as her words were not considered.

REFERENCES


