

Manifestations of Hysteria in Nawal El Saadawi's *Woman at Point Zero*

OMAR MOHAMMED ABDULLAH

*Faculty of Modern Languages and Communication
Universiti Putra Malaysia
omr_muh1985@yahoo.com*

WAN ROSELEZAM WAN YAHYA

*Faculty of Modern Languages and Communication
Universiti Putra Malaysia*

HARDEV KAUR

*Faculty of Modern Languages and Communication
Universiti Putra Malaysia*

MANIMANGAI MANI

*Faculty of Modern Languages and Communication
Universiti Putra Malaysia*

ABSTRACT

*A well-known Middle Eastern author, Nawal El Saadawi shouldered the grave responsibility of defending the rights of women in her country and the Middle East in general. Hysteria is one of the main problems inhabiting the female characters of El Saadawi's fiction. Many of those female characters suffer hysteric symptoms which manifest as a consequence of sexual violations such as rape, molestation and female circumcision in patriarchal-centered communities. These violations lead to psychological traumas which can eventually give rise to hysteria. Symptoms of alienation, loss of speech, fear, anorexia, disturbed sleep and many others are classified under the bold title of hysteria. Freud attributes the emergence of hysteria to sexual experiences that a subject goes through in childhood, which appear later in the guise of the aforementioned symptoms. This paper will focus on Hysteria according to Freudian perspectives, in order to explore its symptoms and reaction, as well as action undertaken to absolve and actualize the self in El Saadawi's *Woman at Point Zero*. It also underscores how characters go through this process to gain their subjectivity in this novel.*

Keywords: El Saadawi; Freud; hysteria; self-actualization; sexual violence; subjectivity

INTRODUCTION

[H]ysteria tells a story, and specialists in understanding and interpreting stories know ways to read it. As hysteria has moved from the clinic to the library, from the case study to the novel, from bodies to books, from stage to screen, it has developed its own prototypes archetypes, and plots. (Showalter 1997, p. 6)

Hysteria as a term, is a Greek word '*hustera*' which signifies the uterus, that is why it is strongly related to women. As a regenerating discourse, according to Sander Gilman, hysteria was capable of adapting itself as a diagnosed disease, medical case and as a critique of male-female relations (Gilman 1993, p. xii). Specialists diagnosed this disease early and claimed that it results from the movement of the womb inside the body of the woman and this inflicts symptoms, like; weeping, fainting, immoderate laughter, hallucination, loss of appetite, somnambulism, fear, alienation, disorder, character dissociation, and delirium.

According to Freud, Hysteria is a result of sexual denotations represented by some experiences takes place in childhood and stored in memory. The surfacing of these memories is a catalyst for hysteria whereby the subject's behavioral tendencies border on unmanageable emotional excesses. In the case of Firdaus (the heroine of *Woman at Point Zero*), her hysteria

is awakened by two major events that has already traumatized her: the memory of her circumcision and its effect on her, which will be discussed in detail later, and the acts of harassment and molestation she was exposed to throughout her childhood and adulthood. Hysteria can be represented through disturbing behaviors acted out by Firdaus, like weeping, refraining from eating, nightmares, loss of speech (even though she can speak but she abstains) and other such behaviors.

Hysterical symptoms, according to Freud, are only “psychical traumas” and subsequently “any experience which calls up distressing affects such as those of fright, anxiety, shame or physical pain may operate as a trauma of this kind” (Breuer and Freud 1957, p. 6). Herein, Freud demonstrates the connection between the psychical trauma and the neurotic defence. Hence, the psychical trauma works as the catalyst for the appearance of hysterical symptoms. According to Freud, that does not cause the symptom, rather, it acts as an irritant, a foreign body, an invading alien utilizing the invaded body’s own defensive responses (Breuer and Freud 1957, p. 6).

The definition of Hysteria according to the *International Dictionary of Psychoanalysis* (2005) refers to a character type and to a group of psychoneurotic symptoms. Its “manifestations - dramatic, physical and affective-” typify “a psychosexual conflict and, at the same time to defend against acknowledging that conflict” (p. 772). For a long time hysteria was first considered as a disease afflicting the body and subsequently came to be associated with a troubled mind. Recently, physicians and professors have revised the term hysteria to mean “an affliction of the mind that was expressed through a disturbance of the body” (Showalter 1997, p. 14).

Roy Porter argues that being a hysterical woman means showing a battery of incapacitating symptoms which reflect helplessness, enfeeblement, and immobilization and acting these out through sickness pantomime. Hence, hysteria is considered “mock escape by self- mutilation” (Gilman 1993, p. 229). In this regard, Mitchell (1974) in her *Feminism and Psychoanalysis* contended that hysterical symptoms are “an alternative representation of a forbidden wish which has broken through from the un-conscious, whence it was banished, into consciousness-but in an 'unrecognizable' form” (p. 9). So, there are many reasons that explain hysteria; it is not only “modelled ‘stylistically’ on its surrounding culture, but it might also be a consequence of the tensions, conflicts and crises of a specific culture” (Wald 2007, p. 27).

Almost all of these interpretations of hysteria are Freudian. Then, Freud came to associate hysteria through different interpretations such as ‘infantile conflict at the phallic-Oedipal’ phase. Repression is the basis of hysterical ego which works as a defensive power accompanied by dissociation and amnesia. Hysterical symptoms are usually shown as a conversion reaction. These constellations of symptoms are what Freud conceptualized as origins of hysteria.

In his book, *Studies on Hysteria*, (1957) originally published in 1895 with Joseph Breuer, Freud claimed that hysteria is a consequence of sexual trauma: all the cases that he had treated proved that their hysteria was a result of sexual molestation, incest or repression of desires. Freud's theory expounds the emergence of reminiscences and memories of some form of sexual harassment, as mental traumas: "Hysterics suffer mainly from reminiscences" (1957, p. 7). These reminiscences become repressed in the unconscious mind, only to surface years later, manifesting as symptoms. According to Freud, these symptoms appear in response to certain triggers that seemingly unleash hysteria. This form of repression centres on all matters sexual, as predicted by Joseph Breuer and confirmed by Freud. Freud held the belief that sexuality was the basis of every problem and it is the repressed memories of sexual assaults, molestation and incest, inflicted in childhood that create hysteria. Such violations lead directly to certain psychological disturbances represented in the symptoms of fear,

mutism, anorexia, nightmarish sleep. These symptoms are the true embodiment of hysteria which appear in a result to bad sexual experiences that the subject goes through. This is the Freudian perspective which will be the basis of analysis in this study.

FIRDAUS FROM CHILDHOOD TO EXECUTION IN WOMAN AT POINT ZERO

Nawal El Saadawi's critique of the way her society treats women is satiric and starkly represented in her masterpiece *Woman at Point Zero* (WPZ) (1983). It "is perhaps the most dramatic and accessible novel penned by her" (Malti-Douglas 1995, p. 27). Moreover, since the thematic purpose of this novel centers on the ill treatment of women, Malti-Douglas also described WPZ as a "searing feminist indictment of male-female relations" (1991, p. 137). The story of Firdaus encompasses many events which occurred during a span of almost three decades beginning from the 1950s. The novel is thus set in Egypt during this time frame. El Saadawi is a physician and psychiatrist who deals with traumatized, hysterical and psycho-neurotic women in Egyptian society and this is how she encounters the case of Firdaus in Al-Qanatir prison. While conducting research on neurosis in women, El Saadawi visits Al-Qanatir prison where she interviews Firdaus in the early 1970s. She learns about Firdaus's background and weaves her story into her novel, WPZ. El Saadawi portrays herself as the psychiatrist and interviewer, while Firdaus is the protagonist of her narrative.

Firdaus has been portrayed famously, as a femme fatale of sorts in this novel. As a prisoner waiting her execution she relates her story to a psychiatrist. Firdaus's life has been marked by violence and cruelty since childhood, the consequences of which led her to suffer hysteric symptoms for most of her adult life. Born into a big family, she grew up in poverty and hardship. She and her siblings often went without food and had to work long hours in the field, tending livestock. Their father was cruel and selfish; he would always have food for himself and would never fail to have his meal because it is the role of the wife to consider the husband as a godfather, an idol who is preferred to all the family members, especially the females. While the children would go to sleep hungry:

My father never went to bed without supper, no matter what happened. Sometimes when there was no food at home we would all go to bed with empty stomachs. But he would never fail to have a meal [...] he would sit eating alone while we watched him. One evening I dared to stretch out my hand to his plate, but he struck me. (WPZ, pp. 17-18)¹

Firdaus moves in to live with her uncle after the death of her father. After she completes her secondary school education, she is forcefully married off to a man thrice her age. This marriage set Firdaus in a state of turmoil that turned her life upside down due to the maltreatment she received from her old husband. She flees her married life of oppression and suffering at the hands of this tyrannical husband. She seeks shelter with Bayoumi, a coffee shop owner. Bayoumi treats her well in the beginning but he then starts beating her and exploiting her sexually. She flees again only to lead a life of prostitution until she encounters an abusive man who threatens her life. She stabs him to death, is imprisoned for her crime and sentenced to death.

DISCUSSION

FIRDAUS' VICISSITUDE and FREUDIAN HYSTERIA

Freud's perspective on hysteria centered on sexuality as the basis of all neurotic diseases from which hysteria emanates, irrespective of whether these are real acts or mere fantasies and visualizations. According to Freud, only "physical traumas" and consequently "any

experience which calls up distressing effects such as those of fright, anxiety, shame or physical pain” can lead to hysterical symptoms (Breuer & Freud 1957, p. 26). Firdaus also exhibits hysterical symptoms which will be explained later.

Firdaus, the main character of the novel, undergoes clitoridectomy at a very early age. Clitoridectomy was a very common and painful practice in African countries, known to afflict the female psyche and induce hysteric symptoms. Firdaus condemns her mother when she describes her experience: “she brought a woman who was carrying a small knife or maybe a razor blade. They cut off a piece of flesh from between my thighs” (WPZ, p.12). The physical trauma caused by this act proved its influence on Firdaus and her fellow sisters who also suffered the same fate.² She describes her feelings after circumcision: “I cried all night. Next morning my mother did not send me to the field” (WPZ, p.12). This act had a long term effect on the subject which, according to Freudian theory, would trigger hysteria at a later stage of life. The loss of this part of her genitals (clitoris) as a result of circumcision refers to the Lacanian castration and more specifically, hints at Freudian hysterical anesthesia which explains the psychological anguish over physical loss of part of her body. The actual clitoral scission from the body renders the subject unwholesome; the loss of her identity and wholesomeness stems from this bodily excision which causes real mental and physical trauma. This disconnection between body and psyche, this psychophysical disorientation and hysterical anesthesia, all result from alienation and loss of control over her body.

Mary Daly (1978) explains the psychological state of girls who suffer circumcision as “those who physically survive these atrocities live their entire lifetimes, from early childhood or from puberty, preoccupied by pain” (p. 156). This is the pain which Firdaus suffers and which eventually leads her down the path of self-destruction. “After circumcision”, a subject “suffers depression, psychosis, self-mutilation and spiritual death” (Sedehi and Talif, p. 63). Heon Dung Park (1988) explains that women suffer from psychological anxieties and fears about their sexuality and bodies. These psychological anxieties are instantly linked to memories of horror and pain, bloodshed and submission which the subject suffers while she is circumcised (WPZ, pp. 51-52). This anguish is manifested outwardly in Firdaus’s narrative – she talks incessantly about her ordeal, namely the aftermath of circumcision. She speaks ostensibly of hysterical symptoms when she narrates, “I stay awake at night weeping alone” (WPZ, p.17). The memory of her clitoridectomy terrorizes her whenever she recalls the moments she spent with her playmate. The memory of Mohammedian, the playmate, the smell of straw and “the touch of his fingers” (WPZ, p. 25) and how, “my whole body shuddered with a faraway yet familiar pleasure arising from me like the air, like an illusion.” This recollection induces fits of weeping and moaning in her “sleep as though it was something [she] was losing now, a loss [she] was experiencing for the first time” and not something she had lost long ago (WPZ, p.26).

El Saadawi focuses on the experience of clitoridectomy because she herself was a victim of this bizarre ritual, as well as molestation, just like her heroine, Firdaus. El Saadawi confirms through her personal experiences and research that “circumcision is the source of sexual and psychological shock in the life of the girl” (El Saadawi 2007, p. 59) and this shock corresponds with Freud’s hysteric theory which underscores it as a significant breeder of hysteria. Thus, El Saadawi focuses on the cultural practice of female genital mutilation as well as the repression of women’s desires as factors leading to hysteria (Faulkner 2005, p. 35).

Circumcision and sexual molestation often subvert hysterical symptoms. Firdaus experiences sexual molestation at the hands of her playmate. She narrates how, he “used to pinch me under water and follow me into the small shelter made of maze stalks. He would make me lie down on a pile of straw, and lift up my *galabeya*. We played at ‘bride and bridegroom’ ” (WPZ, p.12).³

Therefore, hysteria according to Freud, builds from a child's reaction to sexual seduction at a young age. The sexual pleasures derived at that age later transform into feelings of guilt. Therefore, the memory of sexual seduction is the triggering incident to mental trauma and suffering (Cixous & Clement 1986, p. 42). Herein lies a strong argument relevant to Firdaus's sexual experiences with her playmate, Mohammedian. The feeling of pleasure that Cixous describes, turns torturous because of the pain of circumcision that removes all sensation of sexual pleasure. This pain is heightened through the loss of a significant part of the girl's femininity. Firdaus expresses this loss in the following excerpt:

He [her uncle] was doing to me what mohammedian had done to me before ... but I no longer felt the strong sensation of pleasure that radiated from an unknown and yet familiar part of my body. I closed my eyes and tried to reach the pleasure I had known before but in vain. It was as if I could no longer recall the exact spot from which it used to arise, or as though a part of me, of my being, was gone and would never return. (WPZ, p.13)

These sexual overtones as genital stimulation, coitus-like acts are classified as traumas which lead to hysterical reaction to some events which happen later at adulthood (Freud and Gay 1989, p. 106). This idea is emphasized plainly in Firdaus' experiences with Mohammedian and later, her uncle, which seriously impact her psyche later in life.

FIRDAUS AND FRIGHT HYSTERIA

Molestation and harassment play a pivotal role in initiating hysterical experiences that could live as long as the subject is alive, as in the case of Firdaus. She narrates a harrowing account of molestation by her uncle which results in hysterical symptoms ranging from weeping to aphasia to trembling and other symptoms. This brings to attention the case of Dora (Ida Baur) whom Freud had treated in 1900. Dora's case was similar to Firdaus's, in that she suffered sexual molestation by her neighbor which eventually led to hysteria. Such molestation is classified under sexual experiences which according to Freud, were predisposed to hysteria.

Fright hysteria has also contributed to Firdaus's bouts of amnesia. According to Freud, this too is related to the sexual factor. Freud explicates in his *Studies on Hysteria* that "alongside sexual hysteria we must recall hysteria due to the fright- traumatic hysteria proper- which constitutes one of the best known and recognized forms of hysteria" (1957, p. 247). This element of fright as theorized by Freud, constituted major trauma that Firdaus endured throughout her life and which fear manifested as hysteria until her death. Since early childhood, there were many frightful incidences that had made her life a living hell. The circumcision was the first hysteria causing event that haunted Firdaus for most of her life.

Firdaus's sexual exploitation by her playmate and later her uncle, left her deeply scarred and in constant turmoil. Her uncle remained a constant threat to her existence and being, her fear of him so deeply etched into her psyche that she was prone to fits of hysteria. She reveals the way she acts when he is close, "I did not sit beside him on the bed as I often used to do before, but hid myself under eiderdown on my little sofa" (WPZ, p.21). She hides in fear of his sexual advances which she recounts:

I would glimpse my uncle's hand moving slowly from behind the book he was reading to touch my leg. The next moment I could feel it travelling up my thigh with a cautious, stealthy, trembling movement[...] his hand would continue to press against my thigh with a grasping, almost brutal insistence. (WPZ, p.13)

This experience with her uncle did not stop at this point. This fear keeps haunting her and she avoids even sitting next to him lest he molests her again. Her fears are once more awakened as the ghost of her uncle haunts her when she narrates:

I was trembling all over, seized with a feeling I could not explain, that my uncle's long fingers would draw close to me after a little while, and cautiously lift the eiderdown under which I lay. Then his lips would touch my face and press down on my mouth, and his trembling fingers would feel their way slowly upward over my thighs. (WPZ, p.21)

Firdaus's relationship with her uncle is confusing because it oscillates between arousal and fear. She reveals her fear of her uncle who is considered a threat to both her body and mind. She tells her interviewer;

A strange thing was happening to me ... Somewhere, in some distant spot within my body was awakening an old pleasure lost a long ago ... for it seemed to arise outside my body, or in a part of my being severed from it many years ago. (WPZ, pp. 21-21)

Here she is referring at once to the sensations of pleasure lost and the pain of clitorodectomy; she is unable to articulate her feeling because of her state of confusion.

Firdaus's predicament is deleterious because the source of her fear is her uncle with whom she shares a sexual relationship. This echoes Freud's claims that the source of female hysteria is more often than not, a father, uncle or brother according to the many case histories he had treated and documented. Firdaus's hysterical situation is attributable to her uncle who was a seducer and molester. These sexual experiences had so discoloured her perception of men that she had developed an almost psychotic need to destroy them all. She narrates an instance of the horrific atmosphere she lived through in close proximity with her uncle: "I held my breath and pretended to be asleep, waiting for his fingers to reach out at me. An eternity seems to pass without anything happening" (WPZ, p.22). From her standpoint as a victim of sexual abuse, it is obvious that Firdaus's state of hysteria manifested through fits of crying whenever her traumatic experiences are awakened by a triggering event.

Furthermore, her trauma also brings on other hysterical symptoms which leave her mute, unable to speak or express herself, a symptom indicative of aphasia. This trait of mutism and silence, confirms Wan Roselezam's view that this is not a passive feminine trait, but one of considerable power that carries with it underlying complexity (2003). Freud had termed aphasia as a hysterical figuring symptom. Firdaus's asphasia is the cumulative effect of continuous sexual molestation since her childhood. Her feelings towards her uncle are ambivalent. She says, "I wanted to tell him that I loved him, but the words would not come. I wanted to cry but the tears would not flow" (WPZ, p.21). This can thus be considered as the first sign of body language employed by Firdaus to express her inner self. Maleki and Lalbakhsh contend that women's suppressed voices, can be an effectively important factor in bringing liberation and equality to women's lives (p. 65) because this suppressed voice will find vent one day, and vocalize all that had been suppressed and stored away for years, as happens in the case of Firdaus.

FIRDAUS AND CONVERSION HYSTERIA

Firdaus also manifested signs of conversion hysteria in which physical symptoms can occur without any apparent physical cause. Conversion hysteria according to Freud, is the transformation of physical excitement into chronic physical symptoms, which is an aspect of hysteria (Breuer and Freud 1957, p. 86). Thus, conversion is no more than a technique unconsciously employed by which the symptoms of hysteria are reflected on the body due to the repression stored in the unconscious. Those symptoms, avers Freud, are substitutes for a number of emotionally cathected mental processes, wishes and desires which "through psychic repression were prevented from being discharged in psychical activity." This discharge cannot be obtained in hysteria unless by means of conversion (Freud and Strachy 1975, p. 30).

Whatever pain and suffering Firdaus has gone through in life due to her father, uncle or husband, she has repressed these memories from consciousness, especially the erotic ones related to her uncle, and transformed its effects, as Freud theorized, into physical sensations of pains (Breuer and Freud 1957, p. 164). The novel begins with Firdaus narrating how she was raped by her husband and later, by a character named Bayoumi. Firdaus is trapped in a marriage to Sheikh Mahmoud, her 60 year- old husband. She was only 19 years old when she was married off to this old man who also had a swelling under his lower lip which would sometimes “turn into a rusty old tap exuding drops red in color like blood” (WPZ, p.45). This description hints at his deformity and reflects - the distorted image of males as seen through the eyes of females in this society. This man represents the phallogocentric culture of a society dominated by males who seek sexual gratification at the expense of their women. Firdaus highlights her relationship with her husband through his deformity to characterize her intense hatred for him.

Her husband forces painful sex on her; Firdaus is obliged to submit herself to this old man whose brutality repulses her:

At night he would wind his legs and arms around me, and let his old gnarled hand travel all over my body, like the claws of a starving man who has been deprived of real food for many years ... when his arms and legs let go of me, I would gently slip my body from under him, and go on tiptoe to the bathroom. There I would carefully wash my face and lips, my arms and thighs, and every part of my body. (WPZ, pp. 45-46)

Firdaus represses some of these memories from consciousness and later *converts* them into physical sensations of pain. Such repressed memories would surface much later in her life, culminating in intense hatred which makes her feel like, “destroying all the men I had ever known, one after the other in a row: my uncle, my husband, my father ... ” (WPZ, p.107), because each male represents a repugnant experience that propels Firdaus into a hysterical vortex.

Definitely, any painful experience that the subject undergoes would evoke negative symptoms which either present immediately or at a later time, when unlocked from the unconscious by certain triggers. Sometimes, these emotions or feelings can induce trauma that manifests hysterical symptoms. Firdaus experiences much pain and suffering with her oppressive husband. When she leaves him and returns to her uncle’s house, both her uncle and his wife delude her about marital norms and abusive husbands. She is made to return to her husband who soon thereafter, disallows her from eating to remind her of her duties and obligations to him. He then becomes violent towards her:

He later leapt on me like a mad dog. The hole on his swelling was oozing drops of foul-smelling pus. I did not turn my face or my nose away this time. I surrendered my face to his face and my body to his body, passively, without any resistance, without a movement, as though life had been drained out of it. (WPZ, p.47)

Henceforth, Sheikh Mahmoud frequently and deliberately beats her. She confirms this abuse:

On one occasion he hit all over me with his shoe. My face and body became swollen and bruised... One day, he hit me with a heavy stick until the blood ran from my nose and ears. So I left, but this time I did not go to my uncle’s house, I walked through the streets with swollen eyes and a bruised face. (WPZ, pp. 46-47).

This marriage to Sheikh Mahmoud, says Eustace Palmer, lays the foundation for many traumatic encounters. Palmer confirms that:

Marriage to the repressive Mahmoud means that Firdaus goes back into prison [after the prisons of her father and later her uncle's] where she is abused, beaten, and tamed. Mahmoud is really just another variation of the repulsive and repressive father figure, representative of all the various male and societal forces that use Firdaus. (2008, p.162)

Firdaus's character has thus far, been studied in the light of Freudian ideology of hysteria, to determine how she presents hysterical symptoms after a long history of sexual abuse and exploitation. Sexuality, as has been explained, was a major determinant of Firdaus's hysterical symptoms.

CONCLUSION

Freud and Breuer had devised the talking cure, as suggested by their patient Anna O, as a form of therapy by which the subject absolves and cures self from hysterical symptoms. Through the talking cure, or what is termed today as psychotherapy, the subject finds catharsis. Freud later used this technique to successfully treat all his patients. Firdaus is portrayed in session with the psychiatrist in an isolated section of prison where she is incarcerated. Firdaus, I would suggest, is a stereotype of Dora and Anna O. while the psychiatrist is typecast as Freud treating his patient. Firdaus narrates her life story to the psychiatrist, uninterrupted, as per her request. In so doing, she is able to exorcise herself of buried experiences and absolve herself of repressed trauma. Firdaus wanted her life story to be told to women across the world in order to raise awareness on how her society treats women. She, until the very end, refuses to sign an appeal against her murder conviction, opting instead to be executed. She dies a free woman, after having absolved a burden she carried for long years. Firdaus's life story has been documented by the psychiatrist to educate and empower women in their dealings with men in male-centered societies. Firdaus's story deserves merit because she has become, albeit posthumously, a beacon of hope for abused and oppressed women. In the end, she found her true self and daring of a courageous woman in a male-centric society; she did not die in vain.

ENDNOTES

¹ All subsequent references belong to El Saadawi, N., & Hitatah, S. (1983). *Woman at point zero*. London: Zed Books.

² El Saadawi has undergone the same act of circumcision. Refer to El Saadawi (2007, p. 14).

³ Galabeya is a long dress worn by females especially in rural regions. While "bride and bridegroom" is a game children play which involves touching sexual organs.

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