

# STAGING ILLNESS IN MODERN THEATRE: A STUDY OF EUGENE O'NEILL'S ALL GOD'S CHILLUN GOT WINGS AND HAROLD PINTER'S A KIND OF ALASKA IN RELATION TO BIBLIOTHERAPY

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#### THESIS APPROVAL PAGE

I certify that in my opinion the thesis submitted by Thikra Nayeef JAMEEL, titled "STAGING ILLNESS IN MODERN THEATRE: A STUDY OF EUGENE O'NEILL'S ALL GOD'S CHILLUN GOT WINGS AND HAROLD PINTER'S A KIND OF ALASKA IN RELATION TO BIBLIOTHERAPY" is fully adequate in scope and in quality as a thesis for the degree of Choose Degree.

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#### **DECLARATION**

I hereby declare that this thesis is the result of my own work and all information included has been obtained and expounded in accordance with the academic rules and ethical policy specified by the institute. Besides, I declare that all the statements, results, materials, not original to this thesis have been cited and referenced literally.

Without being bound by a particular time, I accept all moral and legal consequences of any detection contrary to the aforementioned statement.

**Name Surname:** 

Signature :

#### **FOREWORD**

I would like to thank God Almighty for the grace He bestowed upon me to complete the thesis through all the challenges. Every day, I have felt your guidance. I owe it to God Almighty to complete my project.

I would like to appreciate and express my sincere gratitude to my supervisor Associate Prof. Dr. Harith Ismael Turki who made this work see the light. His instructions and counsel helped me get through every stage of writing my thesis. Also I would like to express deepest gratitude to the members of my committee for making my defense a fun experience and their insightful comments and recommendations.

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#### **ABSTRACT**

It is suggested that one should move away from prevalent medical comprehension of psychotherapy which has a propensity to place an excessive amount of emphasis on proper methods for treating particular disorders and at least manage a good balance between it and the more effective relational pattern of remedy. Philosophers and critics throughout history have credited imaginative writers with having a keen intuition for human motivations and nature, as well as the ability to affect readers' hearts and change their behaviors. Consequently, psychologists and psychiatrists have increasingly recognized that dramatists frequently predicted scientific breakthroughs and explored the depths of human nature. The foundation of bibliotherapy which draws on the wisdom of authors and scientists is the idea of identity dynamics and also the trait of life experiences which are inextricably linked. Bibliotherapy is a procedure that involves the reader's character and imaginative books that may pique his sentiments and release them for awareness and useful utilization. This study focuses on bibliotherapy as a therapeutic strategy for people with emotional difficulties and psychological issues that are being researched as clinical phenomena. Chapter one concentrates on the purposes and benefits of using books as therapy for psychological issues and mental disorders with references to the history of bibliotherapy. Chapter two demonstrates how racism impacts the characters' psychological state and how the socio-psychological approach utilized to detect the effect of trauma and racism on these characters and the playwright's aim to confront and shock American society by indicating the issues of discrimination and its effect on individuals and cultural impress that may devastate relationships and families. Chapter three discusses the influence of Encephalitis lethargica as extraordinary epidemic disease and how this disease affects the character's memory and consciousness and the treatment used by the playwright to heal the psychological disorders of the character.

Keywords: Bibliotherapy; Disorders; Psychological; Disease; Nature; Issues

#### ÖZ (ABSTRACT IN TURKISH)

Belirli bozuklukları tedavi etmek için uygun yöntemlere aşırı miktarda vurgu yapma eğiliminde olan ve en azından onunla daha etkili ilişkisel çözüm yolu arasında iyi bir denge kurma eğiliminde olan yaygın tıbbi psikoterapi anlayışından uzaklaşılması önerilmektedir. Tarih boyunca filozoflar ve eleştirmenler, yaratıcı yazarların insan motivasyonları ve doğası hakkında keskin bir sezgiye sahip olduklarını ve ayrıca okuyucuların kalplerini etkileme ve davranışlarını değiştirme yeteneklerini takdir ettiler. Sonuç olarak, psikologlar ve psikiyatrlar, oyun yazarlarının sıklıkla bilimsel atılımları önceden tahmin ettiklerini ve insan doğasının derinliklerini keşfettiklerini giderek daha fazla fark ettiler. Yazarların ve bilim adamlarının bilgeliğinden yararlanan bibliyoterapinin temeli, kimlik dinamikleri fikri ve aynı zamanda ayrılmaz bir şekilde birbirine bağlı yaşam deneyimlerinin özelliğidir. Bibliyoterapi, okuyucunun karakterini ve duygularını harekete geçirebilecek ve onları farkındalık ve yararlı kullanım için serbest bırakabilecek yaratıcı kitapları içeren bir prosedürdür. Bu çalışma, klinik fenomen olarak araştırılan duygusal zorlukları ve psikolojik sorunları olan insanlar için bir terapötik strateji olarak bibliyoterapiye odaklanmaktadır. Birinci bölüm, bibliyoterapi tarihini referans alarak psikolojik sorunlar ve ruhsal bozukluklar için kitapların terapi olarak kullanılmasının amaçlarına ve faydalarına odaklanmaktadır. İkinci bölüm, ırkçılığın, karakterlerin psikolojik durumunu nasıl etkilediğini ve travma ve ırkçılığın bu karakterler üzerindeki etkisini tespit etmek için sosyo-psikolojik yaklaşımın nasıl kullanıldığını, oyun yazarının amacının, ayrımcılığa ve bunun bireyler üzerindeki etkisine ve ilişkileri ve aileleri mahvedebilecek kültürel etkilere işaret ederek Amerikan toplumuyla yüzleşmek ve onları şoke etmek olduğunu göstermektedir. Üçüncü bölüm, Encephalitis lethargica'nın olağanüstü salgın hastalık olarak etkisini ve bu hastalığın karakterin hafızasını ve bilincini nasıl etkilediğini ve oyun yazarının karakterin psikolojik bozukluklarını iyileştirmek için kullandığı tedaviyi tartışıyor.

Anahtar Kelimeler: Bibliyoterapi; Bozukluklar; Psikolojik; Hastalık; Doğa; Konular

#### ARCHIVE RECORD INFORMATION

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#### **SUBJECT OF THE THESIS**

To recognize the merits of using bibliotherapy to boost a person's self-esteem involves reducing emotional pressure and strain, analyzing human attitudes and reasons, debating a topic openly, and looking at potential solutions for behavioral disorders and their impact on individuals and what they endure from as a result of mental illness. This study was carried out to demonstrate that psychological issues are the major source of traumatic psychological influence that individuals experience.

#### PURPOSE AND IMPORTANCE OF THE RESEARCH

Because of the significance of the topic of bibliotherapy and the experiences and anguish of several individuals from behavioral disorders. This study was necessary to investigate psychological behaviors and the approaches in *All God's Chillun Got Wings* and *A Kind of Alaska*. Consequently, the study's goal is to explain and examine many approaches the authors employed to treat behavioral and psychiatric diseases and how bibliotherapy and mental illness are closely related.

The research aims to discuss different issues surrounding psychological disorders:

What impact does a person's attitude have on his psychological and emotional stability?

How does society view people with mental disorders and what is the role of bibliotherapy in healing them?

What are the factors and causes that lead to mental disorders?

Does society and family have a role in causing psychological disorders for individuals?

#### METHOD OF THE RESEARCH

This study employed a psychological therapeutic approach. The psychological stress and anguish endured by the protagonists of the behavioral and mental disease were examined by this approach and their implementation in these two plays. The

issues of racism, trauma, depression, memory, madness, and consciousness were highlighted. As a result, it helped to shed light on several aspects of the suffering experienced by protagonists who suffered from mental diseases related to trauma.

#### HYPOTHESIS OF THE RESEARCH/RESEARCH PROBLEM

Investigating how important psychological elements are in the two plays. The current study aims to provide solutions to various questions about how to read the plays' texts. Both plays depict psychiatric diseases in all their manifestations, which can cause psychological injury, insanity, depression, and trauma in those who are subjected to them. One of the problems affecting people that have been for a long time and have only become worse over time is mental illnesses.

#### SCOPE AND LIMITATIONS/ DIFFICULTIES OF THE STUDY

The present study examines two significant plays whose authors aimed to depict the misery caused by psychological elements. The study will take a significant attempt to figure out the psychological settings in the two plays as well as how they relate to society as a whole and the protagonists in particular. Moreover, readers have a crucial opportunity to reconsider their preconceived notions and ideas about the world, particularly in regards to psychological issues, memory, trauma, and madness, even while having a second opportunity to open their minds to fresh insights and viewpoints.

#### 1. THEORTICAL BACKGROUND

#### 1.1. Introduction

#### **Definition of Bibliotherapy**

Reading is an effective method, and it may treat mental illness. Bibliotherapy is a method for exegesis; the interaction between the patient and therapist depends on reciprocal participation in literature within accomplishing the patient therapeutic requirements. It is also a way of providing support for psychotherapy in which accurately chosen materials of reading are utilized. The concept of Bibliotherapy is the use of reading materials for help in solving personal problems or for psychiatric therapy (Webster, 2015).

This concept may be utilized in preventing drug disadvantages among adolescents and children. The merits of employing Bibliotherapy in prevention are improving the individual self-concept, recognizing the human attitude, and motive, removing sentimental pressure, debating a problem clearly, and inspecting different alternates to solve the problem. Literature has been deemed a vital tool that leads adolescents to think and meditate to form their attitudes and behaviors, support their personality, and be capable of recognizing themselves in a better way. On top of that, Bibliotherapy can assist shape the adolescent to be more intelligent about the menace and the outcomes of drug usage and realize to be more assertive and more convinced against the use of drugs. Bibliotherapy is a group of Biblio and therapy. Biblio is a Greek term that denotes "book" or "relating to the book," Whereas therapy indicates "healing, remedies, treatment, or cure." Bibliotherapy is a technique used to assist individuals in overcoming negative emotions related to a real-life problem by guided reading about the dilemmas of a third person, followed by individual or group discussion in a non-threatening environment (Aiex, 1996).

"Sometimes Bibliotherapy is referred to as Biblio guidance, Biblio counseling, literature therapy, book matching, or reading therapy. Bibliotherapy involves the use of books and other media to facilitate both normal development and clinically significant problems" (Rubin, 1978). "Clinical Bibliotherapy" heals the emotional behavior of an adolescent. It supports and extends transferences with essentially healthy individuals.

Bibliotherapy has a comprehensive framework, usually the perfect aspect of a therapeutic purpose.

Bibliotherapy may be depicted as the approach of reading to help individuals, both adults, and adolescents solve the specific problems they are perhaps facing within their society at a particular time. That includes reading certain books connected to specific difficulties in the life of someone. Bibliotherapy is probably depicted as utilizing books or other resources to assist individuals in solving personal problems that affect them sentimentally and psychologically at a specific time. Bibliotherapy may be defined as employing books to boost individuals who ignore their age, sentimental and social problems. If we consider this situation, a library user may not inform the librarian whole issues. He can ultimately ask for any book or select one that is connected to the point, for instance, self-respect, insult, marriage, and indulgence. It assists in promoting the well-being of individuals' beliefs and all life issues. It may not be a conspicuous and practical approach to understanding new methods of dealing with stress, depression, and life challenges.

There is another definition for Bibliotherapy, it is a therapeutic process that employs books and other resources of literature besides conventional treatment forms to boost a patient's mental health. However, books advised via therapists may comprise different subjects or genres from memoir, self-improvement, self-guided, and philosophy. Bibliotherapists, in a distinctive manner, benefit from fiction. Specifically through reading particular themes of literature and discussing them with a therapist. This approach is a critical way to enable individuals recognize the opinions of others and make sense of difficulties in the past, as well as disturbing experiences sense of prospect, consciousness, and sense self-confidence. Consequently, Bibliotherapy may be practiced for patients who experience depression, apprehension, and other mental illnesses. These individuals struggle with addiction or trauma, or maybe they suffer from issues of divorce and sadness or other problems connected to challenges. Bibliotherapy may be applied with sessions of individuals or groups. Sometimes, it is used without a therapist's guidance. It is seldom utilized as a critical or sole way of healing; to some extent, it is employed in combination with other methods like cognitive-behavioral therapy or psychodynamic therapy.

Bibliotherapy is cheap, easy to apply, and has few side effects. Consequently, it is perhaps helpful for those with restricted funds or individuals whose mental health concerns are reasonable to moderation. There are other definitions of Bibliotherapy depending on reconnoitering sent to therapists and librarians via the bibliotherapy committee," Bibliotherapy is a program of selected activity involving reading materials, planned conducted and controlled as treatment under the guidance of the physician for emotional and other problems. It must be administered by a skilled professionally trained librarian within the prescribed purpose and goals. The importance and dynamic factors are the relationships which are established the patient's reactions and responses and the reporting back to the physician for interpretation, evaluation, and directions for follow up" (Ruth M. Tews, 1975).

Another definition for Bibliotherapy demonstrates the medical parts and shows the inspection for the expansion of an accurate scientific approach whereas Webster's description puts Bibliotherapy in two parts, the first one indicates that reading is related to psychiatry and medical fields whereas the second points out the non-medical areas like reading instruction via teachers, professional librarians, advisors, someone who works in social work, and others who are qualified for this task. Many questions that dominate through employing literature as a therapy approach raised the question, "should Bibliotherapy be considered a "science "or an "art"?" If we consider bibliotherapy as a "science", it will involve prescribing chosen reading through the therapy for factual mental and bodily illness via a professional bibliotherapist. While the efforts to treat defects of personality or support individuals solving personal issues by reading offered via a librarian, instructions, or other people outside the profession of medicine will be treated as the "art."

The cooperative attempt on the part of bibliotherapists, librarians, and nurses is in the bibliotherapy "science." In contrast, the bibliotherapy "art" may be applied to nearly anybody who recognizes individuals as a spacious awareness of books and has sympathy for individual needs. Thus, both of these aspects of Bibliotherapy are being applied and inspected. Regrettably, a large part of the literature in Bibliotherapy is theoretical and describes an amusing incident. There had been so few experiments about the efficiency of Bibliotherapy that, without investigation and study, Bibliotherapy would not be an important consideration in the scientific society.

"Most of the literature on Bibliotherapy has been non-scientific because of the too-broad use of the term Bibliotherapy" (Armando, R. Favazza, 1968). Bibliotherapy employs literature to cause interaction between the patient and the bibliotherapist. The notion of utilizing literature as a therapeutic approach is to boost the patient recognize his case better through reading related materials. Thinking of other experiences of individuals or potential experiences through literature is considered better process to make that step. By depending on literature, the patient and the bibliotherapist can then debate the problem which is being concentrated on and discuss the alternatives to the issue.

The role of a bibliotherapist is to support the patient by extracting his feelings, exploring sensible decisions regarding his problems, and instructing him to address the case in the best way. Russell and Shrodes defined Bibliotherapy as a process of a dynamic interaction between the personality of the reader and literature -an interaction that may be used for personality assessment, adjustment, and growth. It means the use of literature as a therapeutic device. More specifically, reading promotes empathy and inspires a consciousness of patients, it probably changes our way of feeling, thinking, and behavior.

When one understands or sympathizes with a circumstance, or character. Bibliotherapy guides individuals to relate to narrative and obtain perspicacity that principles change. Literature therapy makes the selection of books an extremely distinctive process. The typical thing is when the characters in the novel face similar situations and problems that the client is suffering from. The more significant aspect of this situation is that the characters extract their sentiments to which the reader may relate. The interaction between the characters and reader leads to the typical result that the client comprehends their own emotions and feelings significantly. The process for selection of books perhaps is considerably troublesome, mainly when working with a group. In the reading group, readers will distinguish their feelings and the characters and promote their skillfulness by dealing with their emotions.

#### 1.2. The Goals and Benefits of Bibliotherapy

There is much evidence of the reading power, and most of them are individual and emotional expressions to its benefit. Reading and meditation are related to each other. It is probably spontaneously recognized and sympathized with this opinion. "Stories affect human emotions and books can serve as models for development, furthermore the effect of books on the emotions has been recorded throughout history" (Pehrsson &McMillen, 2007). "There are many testaments to the values of reading, such as those by Emily Dickinson. There is no frigate like a book, to take us lands away or Cs Lewis. You can never get a cup of tea large enough or a book long enough to suit me are considered cherished sentiments by people who enjoy reading" (Rubin, 1978). The book's power to enhance life is a prevalent factor in several cultures, so if we want to inquire about the reading influence, we only need to observe the traditional evidence for the power of written words. The benefits are instantaneous and may be applied when an individual begins reading books. Bibliotherapy may be reassuring to recognize that an individual is not alone in dealing with particular issues. It assists in knowing a problem that may give somebody the right words and trust to look for additional assistance, like discussing with family members, teachers, or partners.

In addition, bibliotherapy aids individuals in obtaining new insights into the difficult conditions they are confronting and how they could treat them. Besides bibliotherapy aids students in improving their academic achievement and efficiency. Many books are available and accessible for readers, and they can borrow them at any time on their freeway. It also assists individuals in personally remedying their sentimental issues without expert interference.

Within this approach, an individual may become his doctor by choosing a book that may solve the problem from the library's shelves. It may be also easy for individuals to access these resources via the internet in the corner of their room. This is useful for individuals to take care of their privacy. In this way, readers do not need to be worried about being observed by others. The books used by individuals contain practical and significant sufferings of others who have identical issues. Therefore, reading their storytelling assists in minimizing or stopping the problems from retrograding into a less complicated situation. Moreover, bibliotherapy boosts communication with a new estimate and changes the opinions raised through a crisis.

The bibliotherapy goals and benefits contain fewer negative feelings and disagree with their opinions, and replace them through more good behaviors and emotions. Bibliotherapy is efficient in solving problems, increasing sympathy,

improving self-confidence, and recognizing and boosting self-awareness. It enables efficient social behaviors, explains values, and establishes cultural, moral, and identity. Indeed, it is practicable for both individuals and groups. The benefits of the group comprise feedback from others related to behaviors, performance, and chances for developing and modeling communication. "Although benefits may be derived just from reading helpful literature, researchers found enhanced effects when counselors help select material" (Floyd et al, 2006).

"This appears to be the case, especially with materials that promote discussion and clarification of issues" (Newman et al, 2003). In our society, children listen and read to storytelling in a printed way. Books and storytelling supply a reliable psychological method through a sandbox or toys. It is exceptionally dynamic in environments with "play therapy" sessions like schools. Moreover, the benefits, goals, and results of Bibliotherapy, including solving problems, efficiency, dominance, and expression, are applied to bibliotherapy benefits.

Books may boost self-awareness, encourage clarity of values, help the procedure of self-development, promote empathic recognition, and promote self-efficiency, skills of communication, and sentimental growth. An individual's own ethical and cultural identity may be found out on a more profound level. Individuals may realize how others overcome painful and defying complex cases and promote their collaboration skills. Using the approach of Bibliotherapy, individuals become stimulated to conduct in modern and healthy ways. Reading makes individuals have confidence and emotional bond, which assists even the most reluctant individual sense at ease. Bibliotherapy also supplies interim riddance from temporary problems. Circuitously and guardedly, literature displays recommendations, and it is meant for "decision making" to aid individuals to communicate widely. Thus, "Books provide a distance, a kind of safety net for emotional intensity, a buffer that children often need" (Pehrsson & McMillen, 2005).

Adolescents and adults can obtain several resources to help in the selection of literature. These resources are obtainable to aid therapists in selecting literature. Libraries and the apt website have resources that supply current information. Librarians who are professional and well trained probably help adolescents and adults choose suitable subjects, and levels of reading, in addition to essential searches of

online supply resources some of these websites are connected to universities and libraries, whereby many books keep immortal and accessible for reading.

#### **1.2.1.** The History of Literature Therapy

"One of the main misconceptions about bibliotherapy is that it is a new phenomenon when its concepts and practices have a long history" (Tivnan & Curzan, 2008). Although Bibliotherapy is considered a comparatively modern approach, much research is being conducted to develop the concept. The concept of Bibliotherapy has indeed appeared for nearly hundreds of years as it occurs in current days. The ancient Greeks were the first who use books for therapy. "The library at Thebes, constructed in 1250BCE, had the words 'This is medicine for the soul' or 'Healing place for the soul' inscribed over the entrance and this presents the notion of a library as a kind of intellectual pharmacy stocked with remedies for every type of emotional disorder" (Weimerskirch, 1965).

The ancient people distinguished that Medicine and treatment impact which literature can affect the soul. Modern researchers have recognized the effects of healing in decreasing stress, enhancing empathy developing understanding, and obtaining a better capability to solve complicated issues and best sleeping. "It is understood that the Ancient Greeks used their tragedies to consciously produce catharsis in the audience and the Romans believed that orations could be read by patients to improve their mental health" (Rubin, 1978).

The Hospital of Al-Mansur in Cairo, established during 1272AD, boosted the Koran readings to be the medical remedy; this method is an Islamic culture feature that has a caring tradition for both the soul and the body. "The Al-Mansur hospital in Cairo which was founded in 1272 AD provided readings of the Koran as part of the medical treatment, this approach being a feature of Islamic culture which has a tradition of caring for the body as well as caring for the soul" ((Muslim Heritage).) The hospital of Al-Mansur has been classified according to various diseases besides reading; the remedy of music was utilized as a therapy for psychiatric clients.

"The hospital served 4,000 patients for free, daily, and on discharge, the patients was given food and money for compensation for being out of work during his

hospital stay" (Muslim Heritage). That was the beginning of a model that witnessed the starting of libraries with spiritual devotion overwhelmingly the promoting behind the provision of the Book in hospitals till the middle of the nineteenth century. During the late seventeen and eighteen centuries, many researchers such as Samuel Tuke, Philippe Pinel, and Vincenzo Chiarugi have explored developing the therapy of mental health care and discussed the human remedy of patients." Before this enlightened attitude, mental health conditions had been seen through the lens of superstition, and patients were treated harshly" (Brewster, 2008).

Bibliotherapy has not been recognized in the United States as a therapy method till the nineteenth century. "This progressive thinking spread to America with Benjamin Rush recommending reading for the mentally ill in 1810" (Weimerskirch, 1965). During this period Benjamin Rush and John Minson Galt 1promoted healing by reading in the hospitals as a part of the client's therapy. "The reason for providing reading materials to patients was that it kept them occupied and content and therefore more manageable." (Weimerskirch, 1965).

The library of patients in Virginia has the dating records since 1843 allowing the Books purchased, periodic, musical devices, and other amusement means for clients. The Bible was the most required at that period; therefore, Galt recommended copies for all clients." The mere act of reading is in itself beneficial, as a mode of occupation" (Weimerskirch, 1965). Bibliotherapy was encouraged to be a part of librarianship in 1904. In 1916 Samuel Crothers established the term bibliotherapy for literature therapy. "Bibliotherapy" received a significant boost during world war 1 when librarians and laypeople, notably the Red Cross and its volunteers, began establishing libraries in army hospitals, and it was during the war in 1916 that the term 'Bibliotherapy' first appeared in an article written by the Unitarian Minister Samuel Crothers in the American journal The Atlantic Monthly (Iaquinta & Hipsky, 2006).

This concept of increased comprehension of Self and others is fundamental for literature therapy nowadays. Indeed, when a man understands himself and the world around him, he has a better consciousness of his experiences. He is capable of overcoming a hardness that arises. "The concept and practice of Bibliotherapy begin to develop from the 1930s onwards, and there is an accompanying academic interest in

the subject and its development as a field of study, particularly in the disciplines of library science and psychology" (Rubin, 1978).

The power of healing via literature has been determined through history. During the period 1941, Bibliotherapy occupied a great position in the field of mental health care. In the subsequent years, there were a lot of theories and topics that surpassed practical application. During that period, psychiatrists were the first who use this approach in therapy for patients. In the 1960s, the capability of healing by reading creates an alteration in behaviors that becomes exceedingly familiar. Bibliotherapy was known within libraries, families with medical practice, punitive settings, educational systems, nursing, social works, psychology, and other systems and environments. Through these cases, Bibliotherapy was found to support patients to deal with complex issues which had emerged within their daily lives. Reading has been recognized to have therapeutic significance.

The influence of the written words on the emotions of a person and mental case has been identified since Ancient Egyptian times. For instance, there was an inscription in the entrance of the library of King Ramses 11, "The House of Healing for the Soul." Moreover, hospitals have used Bibliotherapy to recommend both clients and practitioners. Aristotle indicated the correlation between healthiness and books, pointing out that reading fiction can boost healing. The use of Bibliotherapy has become more familiar, expanding into education and general medical practice fields.

#### 1.2.2. Literature as a Therapeutic Tool

Several alternative therapy forms have been examined concerning their suitability and efficiency. The utilization of "art therapy" within the remedy of dreary disorder is a model considerably used in different countries. The Organization of World Health stated that 350 million individuals worldwide are suffering from depression. The frustration is that through 2020, the ailments is the second most predominant in the world. The therapy of depression is facing given the complication of the condition and having several variables methods it requires. This probably comprises psychotherapy, adequate having, and employment of psychotropic medications. Yet, one of the essential issues confronted is non-adherence to therapy in which major causes are side effects of treatments (dry mouth, weight gain, drowsiness,

vomiting, worsening depressive symptoms, nausea within the beginning of using medications, fear of drugs, poor psychological assistance, and the lack of communication with the therapist. Thus, the investigation of therapeutic approaches that assist this treatment and facilitate the cohesion and social reintegration of clients with mental disturbances is considered an essential defy for those who act within the area.

Many psychiatrists like Carl Gustar Tung, Max Simon, and others believed in art as a treatment for clients with a mental disorders during the 19<sup>th</sup> century. Music, theatre, and dance are tools considerably utilized as an alternate therapy for "psychiatric disorders." Clients become more flexible and may recognize their ailments better with these approaches to identify and increase their treatment process to change as they experience and confront ailments. We may understand art as a powerful tool for the advancement of clinical development and clients' well-being. Notwithstanding, a more detailed study about its particular consequence in specific pathologies like melancholy is still indispensable. Consequently, the current study intended to distinguish and debate, by a "Systematic Review of literature," that artistic approaches are most employed as a curative instrument within the depressive disorder. In one of the studies (Shrodes 1950), it was stated "Freud, on the occasion of his 70<sup>th</sup> birthday, acknowledged his intellectual debt to creative artists suggesting that they note, had first discovered the unconscious". However, "creative artists have become visible and valuable participants in the therapeutic milieu over the last century in the United States" (Junge, 1994). Within the curative approach, "storytellers are valuable allies, and their testimony is to be rated high, for they usually know many things between heaven and earth that are not yet dreamt of in our Philosophy" (Freud, 1956).

Information has also emphasized their position in the therapist's ranks (e.g., Story of Healing). Music and dance therapies are unlike art, and although they are actually in the overall employment, the treatment has not firmed itself as a legal concentration of remedy training or authorization. Our improvement of an instrument is to methodically estimate literature for curative use and the combination of our tool with teaching. In this regard, bibliotherapy is recognized to boost change by relying on the curative orientation of the patients. "In the field of art therapy, early divisions between those who viewed art as revealing versus those who viewed it as healing were quite passionate about what the focus of therapy, should be" (Junge, 1994).

Furthermore, "divergent interventions have evolved in the practice of bibliotherapy, primarily spilled along the lines of cognitive behavioral versus more psychodynamic advocates" (Shrodes, 1950). Shrodes is considered the pioneer who wrote in the field of Bibliotherapy. She attempted to demonstrate how literature can help remedial works. Shrode's psychodynamic type concentrated on the approaches of universalization or identification, insight, and abreaction as a positive procedure for curative support to happen.

Several writers since then have depended on these types. This type is more regularly practiced when imaginary literature such as fiction is employed than when non-fiction, books of self-improvement are the instruments. "on- fiction, self-help literature are the genre of choice for most cognitive- behavioral therapists" (Shrodes, 1950).

Yet, didactic literature can participate in the reader's understanding of his (sic) stimulus and attitude. It is more appropriate to share individual's (sic) mental awareness while imaginary literature is more probable to give the reader emotional experiences without which efficient remedy is unattainable. "There are obvious parallels to the therapeutic process in general and most authors are quick to point out that using literature is an adjunct to, not a substitute for the therapeutic process" (Holman, 1996). "Individual reactions to a given work will never be identical, for no two persons can there be an absolute equivalence of symbols, for no two people have identical psychological fields" (Shrodes, 1950).

Many writers have commented on the effectiveness of the groups as curative, like obtaining feedback from other Individuals. It is an opportunity to recognize and apply substitution attitudes and have other Perspectives. This promotes another central and commonly famous question of Bibliotherapy. Suppose it is employed personally or in groups. In that case, extra work holds between the therapist and the patient or within the group, which increases the prospective assistance rather than only innuendo to the literature. "Suggestions for how to usefully process the story with various populations and age groups are abundant in the literature" (Afolayn, 1992). Bibliotherapy is considered an old application that started at the beginning of the twentieth century. Librarians and psychiatrists cooperated in an attempt to assist patients with psychological issues. In cooperation with librarians, psychiatrists would display

clients' books that are suitable for their unrivaled problems, supposing that these individuals would comprehend the approaches and practice them in their own lives. That is considered a part of the sole therapy or in a combination with medicine. It may be also a perfect self- improvement or followed via incidental meetings to debate the Book. Thus the significant concentration was on the book's significance offered and its connection to individual's issues or difficulties. The essential presumption about cognitive-behavioral treatment is that whole attitudes are understood, which may be relearned with appropriate instructions. These theories depend on knowledge as the definitive stimulation of change behaviors. Thus, cognitive Bibliotherapy is the learning approach from excellent quality written materials for curative advantages. An essential aspect of mental bibliotherapy application is within the depression remedy.

When treating depression, patients must learn to recognize and change their knowledge and attitude. A book usually employed with depressed patients is "Feeling Good." This Book indicates that the patient will be instructed through their learning. Most of the experiential work on "cognitive bibliotherapy" was reached with patients with depression, employing this particular Book. As with other therapeutic interventions utilizing the arts, demonstrating the effectiveness of Bibliotherapy Proves more challenging than reporting on its varied uses. Those who have attempted metaanalyses of the research literature in the use of art or literature in psychotherapy run into the same types of problems (Marrs, 1995, Reynolds, Nabors & Quinlan, 2000). (Marrs, 1995)discovered very few experimental studies that utilized imaginary literature. There is practically no standardization within the use of approaches and usually incomplete specificity in the research depicted to permit for duplication. Therefore, the books employed for the rapeutic aims has received particular and prevalent attention from researchers and therapists. Literature and health have been at the center of an individual's attention from the start of history. Although the invested attempt and development of learning and perception are in each field, it is fascinating that individuals frequently still discover them striving with health and art fundamentals and their significance within the society.

Humans make no effort to explain or anatomize these problems. "The current literature has elaborated several aspects of bibliotherapy. Four stages were identified in bibliotherapy process" (Oner, 2007). At first, the patients are anticipated to recognize themselves with a character in a story which is similar to their own lives." Then,

clients live through a catharsis, an emotional release after they realize that they are not alone in experiencing problems, the clients may orally state, write, draw, or even role-play to convey their feelings" (Sridhar& Vaughn, 2000).

The patients obtain insight after the catharsis by the study for the actions and decisions of the characters. "In this way, clients are assisted to create their problems solving mechanisms" (Gregory & Vessey, 2004). In their study, Campabell and Smith (2003) indicate the significant purposes of bibliotherapy, extending information, creating insight, promoting discussion, making knowledge of solutions to difficulties and challenges. Besides, Lenkowsky (1987) suggested that there are probably four practices of bibliotherapy. First, it may be employed as a "self-actualization/ problem solving" means to allow better self-recognition and issue solving. Second, Bibliotherapy perhaps intends for "social utilization" to boost personal social knowledge. Third, is the "psychotherapeutic utilization" that aims to improve psychological insights and development. Fourth, the books of self-help can be practiced for "educational and didactic utilization" to boost and learn how to employ Bibliotherapy.In addition, Campball and Smith (2003) indicate that "therapists should initially decide whether to use a self-help book as an adjunctive (homework) or integrative purpose in session".

The second important thing is that therapists should determine books of fiction or non-fiction. In this case, patients will recognize themselves with a figure within fiction books. Furthermore, books of non-fiction indicate the process of issues solving specific problems. Ultimately, the clinical utilization of the books is for self-help in situations as anxiety, depression, eating troubles, skills of communication, and other issues that consider a compelling combination. "Having a positive attitude towards reading in general, being more psychologically minded, having a stronger self—control and having greater life satisfaction were the factors predicting a favorable view towards self-help books" (Wilson & Cash, 2000).

In effect, self-help books were considered as fitting well to an individualistic culture in which persons can follow happiness freely for their own sake (Bergsma, 2008). Individuals may surpass with the assistance of their capacity, and they can be judged for their performances, whereby self-improvement is the significant motif of the "American Culture". Bibliotherapy has widely utilized for various types of

problems such as depression, anxiety, obsessive-compulsive disorder, stress, personal growth, child-rearing, sexuality, or communication with a partner. Among these, depression is the most common one which has drawn the most attention from the researchers (Cuijpers, 1997).

Many researchers such as Anderson et al. Richardson, Richards and Barkham, and Starker state four compelling reasons for the spacious employing self-help books. First, self-help books have efficiency; it is more inexpensive than contact with a professional therapist. Second, they are attainable whenever individuals need assistance. Third, privacy promotes individuals to find their complex issues on their own. Finally, books of self -help extend excitement for individuals, so they readily become one of a group of readers of self-help. Consequently, individuals have something that participates with others. In one of his studies, Bergsma (2008) "examines 57 best-selling self -help books in the Netherlands and pointed out that these books chiefly aimed to boost personal capabilities rather than lessening the psychological symptoms of the problems". This also indicates that individual relations collaborating with tension and recognition were the essential themes of these books. Moreover, researchers have promoted many schemes for the prescription of self-help books. "Although there are more than 20 diverse self-help book schemes, the first original scheme from which the others were adapted was the Cardiff model" (Freud, 1956). The "Cardiff Model" requires that the patients at first display their issues to the helpful professional.

The therapist determines an appropriate self-help book from a list including the significant health themes. After that, the patients take self-help books from a library in which these books are systematically and thematically kept. "An effective self-help books scheme will not only increase access to a feasible form of psychological treatment but it will also facilitate making self-help approaches available to a great number of individuals." (Farrand, 2005). Farrand (2005) suggests a type of "the Devon Supported Self-Help Book Prescription Scheme" which varies in terms of the support and specialist of mental health. Within this type, the therapist provides clarification about self—the help approach, and the patient is the individual who is determined to follow a book of self-help therapy. Patients obtain their materials from the libraries, and they get assistance from the therapist throughout the treatment methods.

### 1.3. Bibliotherapy as a Therapeutic Approach to Psychological Problems

Psychological issues have increased nowadays because individuals are suffering from loneliness because of the increasing communication and information of technology. The communication between people has decreased, and individuals began restraining their feelings that guide to psychological disorders. Researchers believe that there are three things that may reduce loneliness within individuals: friends, books, and family. Bibliotherapy denotes the curative value that came from books. The capability to console and entertain the patient may be well recognized from the writing within the experiential literature thereby demonstrating bibliotherapy utilization as a material for treating mental diseases and sentimental issues. Bibliotherapy is a type of psychotherapy that involves telling tales, writing, and reading specific materials to help people. Alteration in brain chemistry creates sentimental health issues. They are not a defect in your personality; they do not indicate that an individual is weak, terrible, or even insane. Cases like these may be run through families. Corporal stress like diseases or sentimental stress or sadness like the death of a person in the family may also excite them. They can happen due to a long-dated chronic condition such as cancer, diabetes, or chronic illness. However, they may begin for no apparent reason.

Several people are apprehensive just at a particular time of the day, whereas others are restless all the time. A concern of any type may make an individual feel miserable and constrained. Psychology and psychiatry have researched alternative remedies for dealing with teenage difficulties, whereby bibliotherapy is considered one of these alternatives. By recognizing that specific individuals may struggle to cope with too many challenges immediately and require assistance conquering the problematic issues, several psychiatric and psychological researchers have undertaken to uncover alternative treatments that are beneficial in dealing with individuals' difficulties.

Bibliotherapy is one of these options; it is, a kind of treatment that involves selecting books for reading to improve mental health. Reynolds (as cited in Nugent, 2008), "Bibliotherapy provides an opportunity for imaginative interaction between the reader and the reading Material which can be less threatening than confrontation". Bibliotherapy can help Individuals confront numerous psychological and

developmental adjustments of people as a means for personal issues resolution and social adaptability. Furthermore, the individual reader can be relieved to learn that they are not alone in their struggle. "They learn vicariously how to solve their problems by reflecting on how the characters in the book solve theirs" (Hebert & Kent, as cited in Abdullah, 2008). Correspondence, insight, unconscious incorporation of attitudes, catharsis, and planning are some of the processes that encourage a client reader's transformation within a clinical environment. Clinicians can use Bibliotherapy for client therapy, diagnosis of disease, prevention of conditions, and medical problems connected to psychological disturbance.

Further, it allows for increased and mutual understanding of client experience through time. Bibliotherapy could be effective in intellectual, personal, psychological, social cognitive, and emotional aspects. There are two kinds of internal processes which emerge in effective bibliotherapy therapy. The mechanics of development trigger beneficial effects for this method. Disorder or a bad result, on the other hand, is the consequence of this therapy approach arousing the client's resistance process. The development process through Bibliotherapy broadens the client's awareness, uncovers and gives insight into deep personal concerns, and provides solutions that have assisted others in dealing with similar feelings and cases, such as isolation or loss produced via human contact. The method of identification that happens when the client-reader has a sense of intimacy or self-awareness during reading makes Bibliotherapy viable.

However, bibliotherapy may not always result in a dramatic experience of personality. The level of familiarity experienced by the client reader is under their power. It is possible to gain particular insight into challenges at every time. Although Bibliotherapy has been proven to be effective in client family application. Settings and family practitioners might consider using it as a supplementary therapy for clients with more frequent ailments. Bibliotherapy is now used to assist parents, teachers, and trained librarians. Its flexibility and diversity make it a perfect complement for all types of self-improvement. This strategy that is suitable for teenagers, children, and adults, can be used with personal or group psychotherapy. Reading for counsel and assistance or development of personality, therapeutic goals, and learning of mental health challenges, in addition to curative advantages of fiction, could be recommended by mental health practitioners to people in treatment and those who are seeking counseling and psychotherapy.

Bibliotherapy is a versatile and cost-effective therapeutic option that is frequently evolved or utilized to support other kinds of treatment. It is a curative method that employs literature to boost positive mental health. The method's supporters argue that reading activities may effectively treat patients with indications of a variety of depressive disorders. "Aggressive behavior is identified as any intentional act used to injure another, whether physically or Psychologically, including a range of violent physical acts to verbal insults or name-calling" (Kari Newman, 2015)."

Aggression is expressed in three different forms: physical, verbal, and relational (Shechtman, 2009). Physical aggressiveness contains any physical behavior to immediate trauma towards another individual or matter. Verbal aggressiveness includes the utilization of words through the aggressor to harm others. Relational aggressiveness is the intended harm to relationships, impacting emotions of acceptance in the friendship. Kinds of hostility may be either reactive or preservative and are determined by the motive for the offensive behavior. "Pervasively aggressive youth often display both protective and reactive aggression" (Kari Newman, 2015).

Impacts of aggressiveness contain biological, unsteady mood, and genetic factors that emerge at the person's birth or in the first years of his life, such as understanding inabilities or another mental incapacity, social impacts in the environment of child and development stage. "Children seeking control or power are likely to engage in aggressive behaviors, particularly if they experience difficulty in verbalizing their own emotions, lack empathy for others, demonstrate deficits in social informational processing, or lack self-control" (Kari Newman, 2015).

Bibliotherapy may assist individuals in being more conscious of various topics, including personality, self-confidence, interpersonal, social communication, decision making, and emotional problems. It is considered a method proposing not only assisting people in learning and improving their social skillfulness but also experiencing effectiveness and shrewdness for their feelings, physical, and self-development issues. "Bibliotherapy as a projective indirect tool that employs literature for growth of children that can be used to teach children on life's challenges by encouraging them to connect with book characters, therapy letting readers evaluate their individual." (Rozalski, 2010). The purpose of Bibliotherapy is to develop and

books can instruct individuals on their psychological issues themselves or may utilize them to enhance their acceptance of a suggested therapy. It is inspirational, and instructional, and informative works are included within therapeutic resources. Short stories, articles, poetry, and other materials may be utilized in their complete or shortened shape, allowing for selecting sections from these sources. The therapist does not limit books to written texts, audiovisuals are an essential manifestation of an individual's ideas and emotions in today's world.

As a result, movies and video recordings have been utilized effectively as bibliotherapy resources. The power of the words may be enhanced by adding other dimensions such as music or visual representations. Most therapeutic resources we believe should include language and get some internal consistency. As a result, while images, drawings, and recordings are typically the result of textual content, they are not ideal in bibliotherapy treatments. Mckendree Smith, Floyd, and Scogin (as cited in, Shechtman, 2009) state "not every self-help book is considered bibliotherapy, only when a specific program or treatment exists it is considered bibliotherapy material." "There is no one particular manner of applying bibliotherapy in the treatment situation" (Sclabassi, as cited in Herink, 1980).

Bibliotherapy is considered an essential technique, in addition, to supplementing different other curative tools. These supplements of Bibliotherapy must be employed with the instruction of a therapist in all stages, containing a selection of materials for self–help, reading, recognizing these materials, and a combination of the materials with other items of the curative process. Hynes created an interactive approach that outlined particular planning, selection, implementing, facilitating, and following up. Relationship development and evaluation of patient's feelings and reading abilities are part of the preparation process. The evaluation informs the selection process, which entails matching materials with patients. Patients- Initiated counseling approaches range from organized to unstructured, prescriptive to non-prescriptive, and more- supported to less support. Follow-up includes evaluations of patient growth and item efficiency. Counselors use those fiction books and non-fiction books in their work. Patients and therapists are more likely to use fiction, whereas cognitive-behavioral psychotherapy is more likely to use non-fiction. Self-help books

typically provide significant recommendations and techniques for particular topics or situations, such as stress therapy, depression, and anxiety.

These books frequently present patients with valuable facts and uncomplicated exercises to understand and apply outside of psychotherapy. Despite their differences, "fiction and non-fiction" have benefits and can even be used in tandem. "Didactic literature (non-fiction) may contribute to the reader's understanding of his [sic] motivations and behavior and is more apt to contribute to man's intellectual awareness whereas imaginative literature (fiction) is more likely to afford the reader an emotional experience without which effective therapy is impossible." (Shrodes, 1950).

Although Bibliotherapy is frequently integrated into such a more extensive curative session, it is hard to assess its impact. Partick examined studies in psychotherapy, psychiatry, psychology, and medicine and determined that evidence to support the employing of non-fiction such as books of self-help is more extraordinary than facts supporting the use of fiction. However, (Marrs, 1995) discovered only a small number of researchers fitting his established criteria, and no approach to the study including the utilization of invention, employing the descriptive method of studies utilizing Bibliotherapy existed. Issues including different populations, miniature models' analysis techniques, and lack of established processes confused Marrs' results. Because of the vast variations in methodology, comparing studies was improper, and replicating was impossible due to specificity.

Nonetheless, whenever self-help books are employed for individuals with stress, depression, and alcoholism, indications of advantages are observed. Since Bibliotherapy is frequently interwoven into a more expansive therapy session, it is not easy to separate its significance. Riorden (1991) warns, "The use of bibliotherapy far outstrips the tight validating studies supporting its use". Despite the absence of objective research, fiction is employed as a fundamental aspect of treatment throughout disciplines, implying that therapists think it worthwhile.

#### 1.3.1. Bibliotherapy as Healing

People have found that reading literature can help them cope with the reality inside them. Reading books mainly if it is done effectively, creates and determines

psychological healing and self-growth opportunities. Bibliotherapy is the practice of exchanging stories or books to assist a person or a group in looking deeper into emotional issues. "Stories help offer potential insight into personal problems" (Forgan, 2002). Bibliotherapy has been and remains to be utilized to treat adolescents' development in various cases. Bibliotherapy, for instance, is beneficial, and interacting with young people's families and those experiencing grief, death, familial instability, divorce, or marriage separation are all possibilities. "Bibliotherapy has also been shown to support adopted children in adjusting to their new family and surroundings" (Nelson, 1993). Dealing with problems associated with family addiction is another situation in that Bibliotherapy has been helpful.

Moreover, Bibliotherapy has been demonstrated to help adolescents improve their self-concepts and reduce their anxiety and apprehension. "In addition to bolstering coping skills academically, bibliotherapy also assists children with improving reading skills" (Smith, 1991). Literature is used to interact with individuals who have been identified as having emotional impairments, whereby positive outcomes are documented.

Furthermore, studies demonstrate that when individuals are involved with activities and programs that include the appropriate use of Bibliotherapy, improvements in a school environment, interpersonal connections, accurate solutions, and the way to recognize issues and cases are observed. In spite of the excellent results described above, several types of research have not promoted the curative effectiveness of Bibliotherapy, primarily since it was employed as the principal treatment. Bibliotherapy, for instance, did not demonstrate practical benefits in enhancing social abilities or modifying an individual's perspectives toward the old awareness of unconscious discrimination, or emotions toward those with cognitive disabilities, according to some recent studies. In another research, "Bibliotherapy had little effect on decreasing stress and anxiety related to standardized testing" (Smith, 1991).

Furthermore, two other studies seeking to prove the greater self-esteem of individuals with weak reading skills yielded inconsistent results. Literature relevant to an individual's needs is essential for important Bibliotherapy. Thus, people who offer Bibliotherapy should be aware of these requirements. Professional training and

experiences are critical in ensuring that individuals feel positive. A solid understanding of developmental psychology for adolescents, particular developmental processes, disorders, and current pressures impacting adolescents is required as technical skills foundation. It is also essential to have a good understanding of the appropriate resources. The acceptability of Bibliotherapy among multiple areas of mental health is debatable, despite the professional skills required to practice it. It can be used to treat a variety of concerns ranging from typical developmental problems to severe clinical issues. The awareness, skills, experience, qualifications, and abilities of the individuals should be sufficient to hardness in order to treat kinds of the individual's challenges. However, other issues necessitate a more tailored approach, which may require clinical knowledge beyond what can be learned in everyday situations. Emotional abuse, anxiety, posttraumatic depression, thoughts of suicide, and aggressive, emotional disorder are examples of issues that require additional therapeutic skills. "When assisting children with more severe challenges, mental health professionals may intervene in a no-one counseling setting, utilizing specific and focused stories in conjunction with other therapeutic interventions" (Brown, Pearlman & Goodman, 2004).

As one of the definitive treatments, Bibliotherapy entails the systematic utilization of books to assist individuals in coping with psychological, physical, sentimental, cognitive, or social issues. Psychotherapy, dance treatment, and supportive psychotherapy are a few similar approaches. Throughout its numerous manifestations, Bibliotherapy promotes the notion of "art's healing" and consolation potential. Bibliotherapy is an effective method of incorporating reading into daily life. More specifically, literature has the power to transform the lives of a particular set of impoverished individuals who are facing fatal diseases.

Something which originated as a personal encounter with great works of masterpieces and evolved into a scientific investigation of the conceptual frameworks of Bibliotherapy ended up with such an actual application. After adolescents have experienced trauma, Bibliotherapy may help them heal and build appropriate self-discipline. Adolescents can get more knowledge and insights into issues and situations as they apply them within their daily lives by using literature and recognizing ways to do things more successfully via the situations and characters presented in a story or book. Discussion, healing the utilization of art exaggeration, puppetry and effective

writing are all approaches used to strengthen Bibliotherapy." Many psychoanalytic theories believe that a behavior is just a surface characteristic and for them to fully understand the behavior they must take at the symbolic meaning and the inner workings of a person's mind" (The international Child, March 2003). Therefore, Bibliotherapy is a technique used by mental health therapists to interact with the client's thinking. Scholars, psychiatrists, counselors, nurses, educators, parents, library staff, and therapists have evaluated the value of books, and literature as means of healing various situations. "There is in fact, confusion in determining the diving line between reading guidance and bibliotherapy" (Smith, 2003).

The enormous amount of literature on cognitive therapy reflects the viewpoint of the helpful practitioners who authored it and the discipline in which the person is an expert. "There are many problems that could be treated using a guided list of books such as eating disorders, anxiety and mood disorders, agoraphobia, alcohol, substance abuse, and stress-related physical disorders" (Encyclopedia of mental, 2009). The most relevant motivation for book recommendations was to promote self-improvement. There is also a link between having more counseling knowledge and using Bibliotherapy more frequently. Many psychiatrists advise their patients to read books, yet there is very little reasonable evidence that they are effective. Therapists must read the books supported and consult them with their clients. Feedback from the client must be sought, and efficacy must be measured. The purpose of reading is to help the patients understand the situation that has to be addressed. Also, Bibliotherapy that directly involves the patient's need for and trusts in healing is beneficial. The written items can be also utilized to either educate the patient about the illness or promote their approval of a therapeutic process.

Many patients think that reading their condition outside their psychiatrist's office encourages active engagement throughout their therapy and fosters a more profound feeling of personal achievement for healing. Furthermore, many people are glad to learn that they are not alone in having the same condition or issue and effectively coping with or recovering from it. "People who use self-help manuals without professional guidance run the risk of misapplying techniques or misdiagnosing their problems" (Encyclopedia of mental, 2009).

Bibliotherapy as a psychosocial intervention has been shown to improve the coping skills of children and youth (ages 3-18 years old) who have experienced trauma (Pola & Nelson, 2014). Trauma is characterized as "an intense event or series of intense events that threatens or causes harm to one's emotional or physical well-being" (Kanewischer, 2013). A stressful or traumatic incident must be included in the diagnosis of trauma. Adolescents who have been through a traumatic experience are more likely to create psychiatric disorders and challenging to articulate their thoughts, making it difficult for them to maintain the necessary conditions. In this regard, health practitioners offer a variety of helpful approaches, including helping adolescents improve coping techniques, teaching, relaxing exercise, and promoting personality. "Bibliotherapy is an effective strategy for facilitating healthy growth and overcoming problems" (Jack &Ronan, 2008).

Trauma is a natural aspect of life that spans many experiences. Natural catastrophes, terrorist acts, adultery conflicts, physical abuse, in addition to car crashes can all be stressful for adolescents. Individuals could be also exposed to other certain situations which have a comparable effect, such as stress arising from psychological abuse or apathy, which can have complex mental and physical consequences, particularly for children and adolescents. For instance, an adolescent who has suffered or experienced domestic assaults is generally subjected to various kinds of violence, including recurrent physical attacks, mental humiliating and degrading treatment, threatening and abuses with knives and guns, suicide threats, or destruction of private property. When individuals are traumatized, they frequently have no power, understanding, or influence over what has happened to them.

This might lead to sentiments of suspicion toward others, a sense of powerlessness, and hatred. Adolescents acquire effective coping strategies and other behaviors and reactions to defend themselves. Accordingly, these health risks are primarily dysfunctional or undesirable, yet they serve to safeguard their surroundings and circumstance of life. Adolescents who have undergone stress discover the contrary via Bibliotherapy; the world is significant. However, unexpected circumstances are actuality; others may be generally good but not always, while the Self is capable depending on numerous factors, emotions of powerlessness and a truth. A safe atmosphere can be created to promote affirming and supporting connections, educational and emotional assistance, and appropriate interaction patterns. Literature is

traditionally used to learn about tough subjects by enabling adolescents to form deep interactions with the characters in stories, helping the individuals analyze their feeling and behaviors via the events of the characters in the story.

Nevertheless, empirical studies on Bibliotherapy, especially with adolescents, are sparse. Bibliotherapy is mentioned in various texts or resources online for recreational counselors, but there are few scientific studies specifically about using Bibliotherapy via recreational counselors. Because Bibliotherapy is a strategy for arranging interaction between a therapist and client, adolescents must understand the therapy as it had been meant. "In 1950, Shrodes developed a psychodynamic model for bibliotherapy which included four progressive stages of identification, catharsis, insight, and universalism" (Farkas & Yorker, 1993; Gregory & Vessey, 2004).

Regarding Bibliotherapy to be helpful, the selection of literature should be appropriate to the child's experience. For therapy to be beneficial, it must be experienced by adolescents in the way it was meant. Furthermore, the therapist will require questions regarding the story's meaning at this stage. Catharsis occurs when an adolescent engages with a situation or a character and becomes emotionally invested in the story. Catharsis necessitates a release of emotions. When this happens, the adolescent forms meaningful bonds with the central character and the literature helps the adolescent. The adolescent could have insight into catharsis because the adolescent recognizes how his difficulties can be changed or resolved. The adolescent becomes conscious that issues could be managed predictably with those described in the story. He adopts coping techniques and strategies comparable to those observed in the novel. "Following insight, universalism occurs in which the child moves beyond the egocentric trap of only seeing their problems and their perception that no one else understands or shares their pain" (Heath et al., 2005).

Adolescents gain a deeper awareness of their difficulties and realize that everyone can have similar sentiments and experiences. To investigate the emotions of an adolescent, the therapist must ask particular critical questions. Discussions must focus on the characters in the story, ideas the adolescent may alter, and whether the Book might have influenced the adolescent's perception depending on the experience. There are numerous sorts of questions that may arise as the story progresses, "in the

story, whom do you want to be, and why? If the author knew me, what do you think he or she might have said?" (Berns, 2003-2004).

The adolescents develop a better understanding of their observations, emotions, and specific cases by asking for relevant information. Adolescents can realize that they are not alone, and they could be capable of putting their existing truth under stress or obtaining new perspectives on that situation. Following the assessment and intervention approach, the bibliotherapy approach incorporates various levels of therapy engagement, including assessment, making plans, choosing, application, and patient assessment to evaluate whether benefits were fulfilled.

The book provides a step-by-step approach to participatory developing Bibliotherapy. As part of the overall assessment, the adolescent's readiness to address the stress and the sort of traumatic incident the adolescent should be determined during treatment. The adolescent's readiness is influenced via the adolescent's connection with the counselor's comprehension of the issue, confidence, empathy, and the adolescent's and counselor's cooperation to focus on the subject. The information is critical for choosing books and topics and raising psychotherapists' awareness of possible triggering, psychological, and emotional impacts. The evaluation must also determine the adolescent's developmental process, cognitive capacities, and education, levels, reading skills, environment, and psychological factors, and also how the experience showed itself and anxiety effects. Identifying suitable tales, questions, and actions is critical during strategic planning. Story Selection entails therapists selecting a material that has personal significance for the adolescent and relates to his terrible ordeal. Books can help with the choice of books and educational tactics." The selected story must demonstrate a realistic plot, problems, and solutions while providing an effective model for problem-solving, coping, hope, and support" (Early, 1993, Heath et al., 2005, Pardeck & Pardec)k,1997).

To encourage contact between the patient and the storytelling, the stories must reflect the adolescent's language, culture, religious beliefs, personal situation, and family attitudes and beliefs. The importance of a compelling selection of books cannot be overstated. However, selecting the wrong story may have financial and ethical ramifications for the patient. Many people may get various clinical settings when they speak openly about experiences of their tragedy. Another issue to consider is the

possibility of extreme psychological reactions being triggered whenever a story involves unpleasant or sad memories. The retelling of stories that comprise pre-reading, and shared reading is part of the planning process. The adolescent is exposed to the content and Book through pre-reading activities, including discussing the cover of the Book and talking about what could occur during the novel. The adolescent discusses his connected experiences. Following that, through guided reading, the psychotherapist reads the Book and asks the adolescent questions to help them engage with the characters in the story. Next, a period of reflection is held to allow the adolescent comprehend the event.

Closure and reflection allow the therapist to monitor the child's reaction and help the child process emotions that may be difficult to cope with or express (( Heath et al., 2005). Bibliotherapy is an unconventional and innovative technique since it is nonthreatening and helps children see that others experience similar events but overcome them. An adult needs to assist children in understanding and exploring their feelings related to the literature and books discussed (Greenall, 1988, Pardeck, 1990). To assist the adolescent in comprehending the story, several techniques might be utilized, such as masterly writing, telling the story, trying to rewrite the first or last chapter of a story, making useful idiots, telling stories, drawing, and developing a timetable of activities.

More specifically, reading has been already demonstrated to assist young people in developing their emotions and beliefs while also enhancing their knowledge about the world around them. "Benefits from reading include increased self-esteem, providing comfort and coping with challenging experiences" (Early, 1993, Goddard, 2011, Stewart & Ames, 2014). While reading is combined with thinking or interaction, as in Bibliotherapy, behavioral and psychological, interpersonal, cognitive capacity, and emotional benefits have been demonstrated. Ideas of self-improvement ineffective coping strategies, personality, and self-expression, recognition of problem-solving, alteration, the ability to plan and sequence perception and decisions, and more precise self-reflection are some advantages. Development of good cognitive strategies, enhanced empathy, improvements in perceptions and self-esteem, expression and emotions, a decrease of self-blame, decreased anxiety and depression, managed to improve self-confidence, reduced frustration, feelings of safeness, stress reduction, confirmation of emotions and experiences, and promotion of self-concept and self-conce

esteem are all examples of sentimental results. "Bibliotherapy provided an opportunity to be active rather than a passive victim" (Allen et al., 2012).

Relevant interests are developed, individual and interpersonal adaptations are enhanced, helpful adults are identified and utilized, family and peer connections are enhanced, alienation is minimized, others have been respected and appreciated, and socially acceptable behaviors are increased. Enhanced reading comprehension skills, higher empathy, improved problem solving, violence prevention, increased awareness and knowledge changes in personality toward using aggression, and the understanding that while there is goodness in everyone are all cognitive effects. In this domain, Biblio therapy is both an art and a science; it can also address some persons with psychological or emotional problems. Therapists should give guided approaches that ensure excellent outcomes with those clients to improve a robust and efficient bibliotherapy approach. Because storytelling has such a tremendous effect on individuals, therapists should be also aware of the implications and advantages of their work.

COMPI can learn of their parent's psychiatric condition through Bibliotherapy, social settings, personal consultations by therapists, as well as through the members of the family, according to the previous literature. Simultaneously, whereas these many ways of learning emphasize the significance of telling young people about their parent's psychiatric disease, it is impossible to locate comprehensive information on what knowledge young people should understand, and perhaps the most effective method of delivery is "who and how". Moreover, the argument for educating young people about their parent's psychiatric diseases and why young people must be informed of the mental disorders of their parents remains a mystery.

### 1.4. Mental Illness and Bibliotherapy

Approximately 20% of youth ages 13 to 18 experience some sort of severe mental disorder each year (Duckworth, 2013). Mental illness may be an incapacitating illness and life-altering that mainly impacts people their community and family. Based on Mental Health American, "mental illnesses are serious medical conditions, just like cancer or diabetes that can have a dramatic impact on a person's life, family,

community, and society as a whole and they can be tremendously debilitating" (Aguilar-Gaxiola, 2013).

Mental illnesses are described as an individual's attitude or psychiatric condition and tendency which results in clinically substantial suffering such as agonizing feelings or incapacity, e.g., deficiency of one or even more critical matters of functioning should not be simply an expected reaction to stressful experiences and problems such as the death of a close person in the family or socially sanctioned response to a specific incident such as trance countries within religious ceremonial which mirrors an underlying mental health disorder, that is not merely a consequence of social antisocial behavior or an internal conflict with culture, and it has clinical authenticity. In countries of high- income, deinstitutionalization of psychological treatment has increased the number of individuals receiving health care. Caring is also an advantageous experience, but it is frequently coupled with emotional thoughts and absolute obligations such as actively contributing to illness and financial issues and replacing other regular activities. Others have identified harmful satisfaction levels offered and problems adapting as negative repercussions for caring of persons with schizophrenia.

Several interventions offered through social care services for persons with major mental illnesses are centered somewhat on the individual receiving the information. Even though individuals with severe psychosocial disabilities are provided with family treatments, the length of treatment that mainly includes caregivers varies or senior doctors generally cannot see. It is pretty well established that the cost of caring and the capacity of the caregiver to deal with it could affect the patient's recovery. Family treatments of individuals with severe schizophrenia can decrease depression symptoms and boost collaboration with pharmacotherapy, including psychological therapies that can reduce the strain of caring. Still, the precise impacts of treatments for caregivers are rarely recorded or considered secondary results.

Utilizing one or maybe more combinations of analytical validators with therapeutic efficacy, such as prospective importance, psychobiological, disturbance, and treatment response, for instance, helps in better diagnosis, evaluation, and therapeutic interventions. "It is important to understand that no definition perfectly encompasses all of the possible aspects of mental illness" (Stein, Philips, Bolton, Fulford, Sadler & Kendler, 2010). Professionals believe that the onset of mental illness is an unfortunate and complicated mix of biological and psychological factors (Friend, 2011). Both "nature and nurture". Have a dominant role in developing psychiatric problems; instead, both elements interact. Biological factors may include inherited genes and brain injuries (Kopp & Beauchaine, 2007). Psychological factors may include chronic stress, stressful life events, childhood maltreatment, and additional family factors. (Wagner, Kutash, Duchnowski, Epstein & Sumi, 2005). It is sometimes hard to determine the etiology of sickness because of the interwoven effects of "nature and nurture". A child qualified for accommodation via the education system should display specific features and attitudes, like with any impairment, demonstrating the exceptionality with a need to treat it. Specific mental illnesses categorized under this definition include, but are not limited to, depression, dissociative disorder, bipolar disorder, anxiety disorder, borderline personality disorder, panic disorder, obsessivecompulsive disorder, posttraumatic stress disorder, schizoaffective disorder, and schizophrenia (Friend, 2011).

Health anxiousness is widely seen as complex and complicated to address, despite the vital prevalence and consequences for health services. Organized self-help resources bibliotherapy have been already demonstrated to be therapeutically successful when used in conjunction with a treatment method. Mental Health concerns, including anxiety and depression, influence society's emotional, economic, and social well-being. As a cultural center, libraries play a significant part in cognitive behavior therapy via bibliotherapy services. Bibliotherapy is used as preventive and reactive therapy for promoting mental health awareness throughout the educational context. Bibliotherapy involves literature with characters who are in similar positions as the young people targeted so that young people can gain insight on the problem solving and coping skills of those characters and apply this learning to their own lives (Prater, Johnstun, (Johnstun, 2006, Tussing & Valentine, Dyches,& ) 2001).

Nevertheless, most Bibliotherapy researchers conflate fiction novels with Self – help books. In addition, many Bibliotherapy studies are descriptive, "how-to" writings, with individual case research serving as instances, making it impossible to assess the usefulness of such a technique.

Members of the family can also educate the youth about their parent's psychological illness. Beardslee's psychotherapy family-based strategy makes use of several mediums including informational lectures, clinical facilitated family sessions, narrative therapy, and videotapes, in which educational material about mood disorders, risk, and resilience is presented to family members (Beardslee et al., 1997 a) (1997b; Beardslee, Gladstone, Wright, & Cooper), (2003Focht & Beardslee, 1996; Riley et al., 2008). Parents can be also promoted to help their young people learn about their psychiatric condition, and they are offered advice about how to care when they are ill. Impact of a randomization way business over time both informative lectures and physiotherapist treatments had long-term impacts. However, the physiotherapist indicated much larger gains for parental kid attitudes and behaviors and kid comprehension of parental problems. Therapeutic interventions were only available to parents who had mental problems, and most of the participants were from families of "white, middle-class." Peer or group settings constitute another method of educating COMPI (Clarke )et al., 2002; Hargreaves, Bond, O'Brien, Forer & Davies, 2008; Orel, Groves, & Shannon, 2003; Pitman & Matthey, 2004).

PATS (Paying Attention to Self), for instance, is a program helping teenagers whose families have a psychiatric disorder and the resources accessible to them. Through estimation, one of the PATS participants stated, "I want to PATS, and they helped me to understand what mental illness is and how it affects people like my Dad" (Hargreaves et al., 2008). However, the same researchers were cautious of the approach's possible drawbacks, such as individuals acquiring possibly distressing information on psychiatric illness and establishing social connections with many other COMPI, mainly at the cost of external links home and school. Another type of education is having one-on-one communication with individuals when conversing with COMPI. Cooklin (2006) advises that workers allow enough time, use various mediums including art, speak in a straight- forward manner, listen carefully to what children say, and not make assumptions about what the young person may have experienced.

COMPI can learn of their parent's psychiatric condition through Bibliotherapy, social settings, personal consultatons with therapists, as well as through the members of the family about the mental disorders. Whereas these many ways of learning emphasize the significance of telling young people about the psychiatric disease of their parents, it is impossible to locate comprehensive information on what knowledge young people should understand, and perhaps the most effective method of delivery is: who and how". Moreover, the argument is for educating young people about the psychiatric disease of their parents as well as why young people must be informed about mental disorders.

#### 2. ALL GOD'S CHILLUN GOT WINGS

## 2.1. American Racial Segregation Towards Blacks in the United States

Racism is a sensitive issue in the era of globalization that up until now that frequently discussed in America (Asukile, 2008). Racial discrimination is increasing dramatically, it means treating one group better or worse at the expense of another unfairly. Racism is frequently described as prejudice, unawareness, or an illness that affects some people and makes them distinct from others based on their appearance (Bonilla-Silva, 2001). As a result of these discrepancies, people are mistreated. Discrimination is the lack of equality of people based on some characteristics generally explicit, which include differences in color, nationality, ethnicity, religious beliefs, gender, sexual tendency, and socioeconomic status. It is a critical behavior in which others mistreat a person or group. These behaviors are due to the historical and cultural roots of discrimination in the American community (Fadillah, 2013).

This results in prejudice, which is the way of treating an individual or a specific group in community unfairly than other people (Hornby, 2000). A form of discrimination is when somebody is unfairly treated or with unlucky manner because of his/her religious beliefs, gender, or maybe because of political tendency, physical state, and other traits. It is a societal phenomenon that has existed from the beginning of humanity until present due to individuals' natural needs to distinguish themselves from one another. Racism is an inadequate element of the traditional tapestries of several Americans and is a robust historical occurrence (Smith, 1995).

There are many examples of racism, whereby racial discrimination is incompatible with human rights since it causes great pain and misery to some ethnicities and nations. Discrimination against black people is not merely a problem that contradicts America's core beliefs of justice and opportunity equality. However, it has substantial health implications, explaining a significant chunk of the black-white disparities. In the context of medical care, research shows that segregation with racial minorities and inherent provider prejudice are predominant and this, combined with a negative attitude, hurts medical care. Clients who recognize segregation tend to avoid

medical care and forego necessary health care. Apart from preventing black people from accessing community resources and establishing a culture that subjects non-white people, segregation indeed included a distinct psychological tension that tries to promote sophisticated treatment of the body's functions which is identified as overstimulation and behaves in such a way symbolizing to having to endure multiple kinds of ethnic bias.

Different ways of racial prejudice may be incorporated, which heighten apprehension that boosts dangerous conduct in helpless patients, as well as poor communications, such as a lack of health advice which may boost blood pressure and obesity among stigmatized people. Anxiety and tension resulting from racial discrimination daily may indeed cause racial modification in the mental and psychological thinking of black people that causes differences and poor health results like nutritional illness such as overweight and also causes deficiency in the medical services provided by the health sector. Various studies have shown that the medical system deals with people unfairly, so racism significantly impacts human care and results. At the same time, many studies related to racial justice concentrate on differences in health availability and results. Limited studies look at prejudice and inequality in individuals' daily contact with the medical sector, as well as parallels and variations in their perspectives, tales, and experiences (Kressin, Raymond, and Monze, 2008).

Inequalities among people of different races continue to exist in the American society. Negroes act lower than white people, and the result is not promoted. These discrepancies serve as constant reminders of America's terrible racism history. They directly oppose American values of equality, opportunity, and economic mobility. The fact that the strategy of the American public was so misguided in the past made discussing these inequities extremely uncomfortable. The issue of slavery and the delayed deconstruction of discrimination throughout the South, and discriminating behaviors in other places kept Blacks from fully integrating into the American culture. While the moment of Civil Rights ultimately persuaded Americans to eliminate state-sanctioned segregation, the incorporation of African Americans through the economic system intensified. In the 1960s and 1970s, there had been a spike in the financial status of Blacks. In the traditionally Southern United States, development was rapid.

In spite of the apparent achievement of an exceptional fraction of the black population, a considerable part of African Americans has made excruciatingly sluggish socioeconomic development. Black people have been generally relegated to a position of subjugation by the more dominant groups of whites by racism as a form of social prejudice. The development of the historical process of racial dominance and submission was the most significant result of black people's compulsory immigration (Blackwell, 1991). Instead of a choice on the part of black people to dwell in black regions; variations in the extent of discrimination in 1940 were caused by the collective prejudice of whites (Cutler et al., 1999). The desire of white people not to live in communities with black people is regarded as a key factor in the suburbanization and urban growth that took place in the second half of the twentieth century and after 1960s civil rights laws (Boustan, 2010).

The official numbers exaggerate the growth of African guys. The movement of Civil Rights' achievement in overturning inequality and prejudice in the texts inspired hope and a successful vision that proactive government policy inside the business, education, and judiciary could result in complete equality and fairness in the country. Blacks in America seem to have a distinct background and are currently confronted with distinct difficulties. Nevertheless, William Julius Wilson's understanding that the first-order challenges Blacks face in the modern society are mirrored with several races has considerable value. Inadequacies in accomplishment within the twenty-first century are primarily due to a lack of abilities and skills rather than a lack of support for such skills. Learning and education, as well as intelligence and behavioral attributes, are all examples of these abilities. Inexperienced people of different colors and ethnicities face concerted and equal international financial challenges which are difficult to change.

The number of qualified workers has increased because of the pattern changes in commerce and technology, but the availability of abilities has not been preserved. The proportion of Americans graduating from college is at an all-time high. Simultaneously, the accurate number of dropping out of high school has doubled during the last 40 years. Abilities and skills are essentially defining benefits and disadvantages in American society, which is splitting both wealthy haves and destitute have not. The availability of abilities has been slow to adapt to changing market

conditions of Americans of any race and ethnicities. Regarding Blacks, the reaction is very sluggish.

Racial prejudice is a major human rights political problem in the U.S. which overlaps with other aspects discussed via Human Rights because of over-incarceration of African Americans motivated by overwhelmingly harsher punishments imposed out with all forms of offenses which include intense trespass, war against drugs with court proceedings and take the easy way regulations which compel individuals into pleading guilty to oversight of particular people including Muslims and several ethnic and religious activists who have spoken out against refugee policy which demonize emigrants as terrorists and lawbreakers and treat those who seek asylum differently depending on their ethnicity or religion. The documents and information on human rights crimes against humanity encompass racism, including offenses that lead to racial differences even when there is no deliberate attempt to segregate. Some organizations promote the United States to stop all types of racism. The issue of racism will still be central to the experience of Americans (Omni & Winant, 1994). Discrimination was and will always be a part of America's social system due to the primacy of ethnicity. Racism is a collective historical occurrence for several Americans and Blacks, and it has become a prominent and horrible issue in several American societal structures (Smith, 1995).

There are several factors to consider when trying to determine or explain discrimination.

It is the entire contract between blacks and whites. Because whites in America have colonial expansion and have historically created the notion in the United States that black people are in every manner subordinate, lower, and inadequate, the speech about racial discrimination through an interracial marriage between black and white people would be no less critical. There is a fundamental contradiction divided via tight orient and accidental barrier, implying that just white were allowed to marry white and the policy of blacks existed (Orientalism, 1977). This reflects the claim that interracial marriage must not occur. Hence, there was no role for interracial marriage at the beginning of the twentieth century in the society of the United States. The desire to have a marriage between two different races comes not just from the outside but even from the inside. The external factor is primarily international, whereas the example of

internal is also concerned with the victim's self. Recognizing the reasons and consequences for racial discrimination in mixed couples is essential because it allows individuals to become more aware and concerned with the world in which they live and strive for a better life. Even though it is impossible to specify a full description, discrimination is commonly considered racist attitudes, ignorance, carelessness, or an illness that distresses some people, causing them to reject others due to their appearance (Bonilla Silva, 2001).

Discrimination is sometimes paired with some other oppressive words, including tyranny and segregation, due to the emotional, personal, and situational aspects of the racist perspective. Viciousness, prejudice, and violence bind the language, damaging and disembodying into a jumble of pessimism, passivity, anguish, and misery. Segregation, bigotry, and injustice are all concepts that people classified as blacks in the U.S. are accustomed to suffering from segregation. Other repressive events have afflicted the African American society for centuries, from the beginning of American slavery in 1619 through systematic efforts to put African Americans together in lower socioeconomic standing, mainly during the time of Jim Crow (Albach & Lomotey, 2002; Alexander, 1970). The most predominant group, whites, has traditionally put African Americans in some positions of subjugation via bigotry and other forms of systemic injustice. The most important result of involuntary black emigration was establishing a historical process of race-based supremacy and subjugation (Blackwell, 1991).

As a result of their status as second-class citizens, Blacks are under Whites' control, forcing them to remain as impotent contributors to the American community and civilization. Blacks, formerly called Africans, were seized and employed as slave workers to generate good economic conditions for recently formed colonies and nations. Enslavement became a traditional practice around the U.S. and the world. It persisted for hundreds of years, killing many people and permanently altering the black race's survival throughout the country(Blackwell, 1991; Katz & Taylor, 1998).

However, after recognized enslavement ended in 1865, African Americans were exposed to personal and institutional behaviors which perpetuated racial inequality as frequent demonstrations of their inferior treatment as newcomers to the American community and culture. After enslavement, African Americans were

declined essential benefits and rights like elections, fundamental rights, and liberties, including using the public institution and accessibility to education. Previous to the end of the civil war conflict, rules and laws were preventing the training of African Americans to communicate and learn effectively, particularly in the southern states where the bulk of former slavery continued (Myers, 1989).

With the support of the Freedman's Bureau, numerous religious groups as well as a substantial majority of donors, blacks became capable of building an academic system after the civil war ended in 1865. Even though all these academic institutions primarily concentrated on basic survival abilities, they provided optimism about potential prospects for justice (Hardin, 1997). Nevertheless, institutional racism was legislated in 1896 with the Plessy V. Feryguson ruling, which codified opportunities for education for Blacks in the United States (Myers, 1989). Previous to Plessy V. Forguson, racial discrimination was more of a commutative process representing entrenched prejudice; nevertheless, with the enactment of such a proposed policy, Blacks and Whites have been excluded mainly in various aspects of life. Theoretically, Plessy V. Ferguson has been meant to offer African Americans inherently unequal opportunities and support.

However, this approach has been more frequently advocated than implemented. Blacks' schools and universities lacked the same education, infrastructure, instructional practices, rigorous standards, and coursework as Whites. Since these discrepancies have become more apparent to black leadership, groups such as the NAACP started questioning the racially segregated concept in the courts. Despite numerous triumphs against the racially segregated concept, it was not till 1954 that the Brown V. Board of Education ruling made segregated schools unconstitutional, enabling Blacks to apply to the whole educational institution of Whites (Anderson, 2002; Harden, 1997, Myers, 1989). Despite Brow V. Board of Education's apparent success, several states in the United States continued practicing discrimination and insularity. Organizations also were not penalized with unequal treatment throughout the admissions policy till 1964, when the legislation on human rights occurred. Institutions frequently provided federal funding to implement programs to boost the number of African Americans enrolled. Even after the 1964 legislation on human rights, it was not till the 1970s when particularly universities of whites started to experience a substantial boost in African Americans' admission rates.

Although previous legislations such as Brown V. Board and the legislation of human rights of 1964 allowed African Americans to live without government restrictions on racial inequality, they continued to face forms of hatred, unequal treatment, as well as bigotry which called into questioning real intentions and efficacy of legislation promoting fairness and equity. When blacks endeavored to join classes and incorporate with college life, they were frequently met with protests and enraged masses. Several governmental institutions, such as universities, tried to discourage blacks from enrolling by designing admittance procedures that were extremely difficult to traverse for African Americans (Goldstone, 2006; Pratt, 2002).

# 2.1.1. The Treatment of Trauma, Depression and Tragedy in All God's Chillun Got Wings

Psychological trauma seems to be a reaction to a severely stressful incident: a calamity or perhaps a tragedy in two instances. Trauma may manifest in a variety of both cognitive and psychosocial symptoms. Anyone who has been through a traumatic situation may have trauma. There seem to be numerous sorts of trauma as well. Some individuals experience problems that go away quickly, whereas some long-range experience sequences. Persons may confront the trauma's fundamental cause or develop a productive technique to handle their emotions through therapy. Stephen K. Levine (1999) emphasizes "trauma must be conceptualized uniquely through psychotherapy and Art while still being rescued as a tragedy". Dramatizing trauma is a similar to tragedy in that it helps us identify the person experiencing suffering, making it feels more personal to us. A traumatized person might experience various feelings, especially after the incident and over time. They will feel vulnerable and hopeless, horrified, depressed, and unable to digest their emotions. Health conditions can be sometimes caused by trauma. This may have lengthy consequences for an individual's health. If effects of trauma continue and therefore do not diminish with intensity, the trauma may have progressed into a psychiatric condition and depression known as a depressive illness.

Trauma effects vary from minor to severe. A person's qualities, the presence of those with mental illnesses, prior related to traumatic experiences, or the nature and sort of the incident or situation as well as the background or attitude to emotional processing are all elements that influence how such tragic experience impacts them. Denial, rage, despondency, worry, despair, depression, and difficulties concentrating are all common reactions to trauma. Trauma was previously used to describe a surgical wound, as conceptualized as skin or other preservative layers of the body rupturing, causing a calamitous, immediate result throughout the organism's body (Ruth Leys, 2000).

Post-traumatic stress impacts many people and is characterized by involuntary unpleasant memories, past events, frightening dreams, and a socially anxious attitude against stressful events. It affects sufferers of sexual and physical abuse, civilian conflict communities, and persons who have been discriminated against because of their race. Trauma is indescribable. Hence the sufferer is sometimes unable to be a trustworthy eyewitness to his or her trauma. William James (1993) states "a person can have an emotional recollection when one reflects on a former incident. It is not with the recollection of the initial emotion but the new emotions we are experiencing. A feeling cannot be felt in the past". Trauma harms people as a societal structure since it restricts the world and deprives their awareness. Individuals who suffer from psychiatric conditions have virtually always faced racism. Jobs, housing, marriage, friendships, social integrity, and good services are perhaps prohibited to them. Since it grows like a disease, their relatives and others who volunteer to support them can also face racial prejudice. It can be challenging to comprehend what someone means when he/she says racism or prejudice. This is one of those intellectual concepts that isolate the person from life experiences.

Associated with growing up under the regulation of the supremacy of whites in the United States, black people seem to be most susceptible to depression and trauma. People in the surrounding society might suffer from psychological consequences due to racial group prejudice. People subjected to repeated acts of discrimination may develop symptoms generally associated with those with a depressive illness. The best example of depressive illnesses such as stress, trauma, anxiety, and tragedy is in *Eugene O'Neill's All God's Chillun Got Wings*, whereby the characters experience challenges and physical ailments due to racism. They act hard to realize their aspirations, but the antagonistic society traumatizes and frustrates them, and their hopes are eventually suppressed.

The major traumatic incident is the culmination of the number of more minor traumas that occur over time. This incident occurs after Ella and Jim's marriage when they are essentially thrown out of the church into such an antagonistic mass that is divided racially. Ella's descent into depression is inevitable following this incident in an antagonistic society, so the conclusion reveals Jim's consent to the doctor-patient connection. However, he considers the tragic figure who relinquishes his goal for Ella's sickness. Louis Sheaffer (1990) claims that Ella feels incredibly alone as she follows her husband on numerous trips. She agrees to stay in the marriage where she has found sanctuary even though it has become a prison. Ella chooses to live in isolation by wedding a black man. Jim's race is the source of the discrepancies. Ella and Jim are married and of different races. The racial component is unimportant, and the play is an investigation of two people.

Discrimination or racism is the view that people's attributes are determined via their ethnicity, or that individuals of other ethnicities are inferior to various particular minorities, resulting in unequal and discriminatory practices of others from different ethnicities (Back and Solomos, 2001). Ella loves Jim. However, due to her upbringing and ingrained racism, she finds it difficult to love as a woman would a man. However, other factors can lead to prejudice outside the Negro topic, which should be kept in mind because it is not the only thing in the play. Our differences stem from prejudice and racial and religious discrimination. All of it can be traced back to economic factors (Gelb, 1962).Racism is indeed a result of both conduct and ideas. It is frequently an expression of dislike or contempt for people with specified physical qualities that vary somewhat from those of a particular race. However, it is a concept about race groups as an issue of ideas (Todorov, 2001).

As observed in *All God's Chillun Got Wings* by O'Neill, racism has been a dominant trait because it can be witnessed not just throughout parents' or individuals' actions but primarily throughout their sons. Such a problem is indeed linked to interracial marriage, which is a result of imperialism. Marriage is regarded as the most critical milestone in someone's existence. It will be to unify two opposing polarities of woman and man and to unify both opposing polarities that frequently necessitate a great deal of suffering and pain. Because it is not a typical marriage, interracial marriage is a fascinating topic to discuss, namely when two ethnicities come together. "In the United States, black-white unions, however, were extremely uncommon at the

beginning of the twentieth century" (Fryer, 2007). The culture in which Ella and Jim live has the most challenging problems. The white and black communities push Ella and Jim's relationship more aggressively. Either black or white culture does not accept their marriage. Because of their emotional situation, which produces distrust and enmity within their relationship, their struggle is becoming more complex. Because of their distrust and enmity, they are subjected to racial bias, which leads to a false marriage.

Throughout his play *All God's Chillun Got Wings*, O'Neill adopts conventional racial stereotypes and moral standards about blacks throughout the opening scenes within the play and then rejects such stigma as of their impact later on. O'Neill's conflicted, ignoring his plays' impacts on visual Art and white expectations of the black society in general. His play is affected by his suffering, relationships, social feelings, and his awareness of multicultural prejudice. Although O'Neill would not have deemed himself an essential component throughout the beginning of the 20<sup>th</sup> century, the reimagining of blacks, nevertheless, he was a member of it. The event at the church where Jim and Ella are wed provides a glimpse into how society reacts to societal stereotypes. The dividing walls in the church demonstrate a strong sense of racial discrimination on the part of both races. However, in spite of this, people below believe that forbidding such unions will enhance the sense of prestige and pride of people in New York.

"The church sets back from the sidewalk in a yard enclosed by a rusty iron railing with a gate at the center. On each side of this yard are tenements. The buildings have a stern, forbidding look. All the shades on the windows are drawn down, giving an effect of staring, fierce eyes that pry callously at human beings without acknowledging them. Even the two tall, narrow church windows on either side of the arched door are blanked with dull green shades. It is a bright sunny morning. The district is unusually still as if it were waiting, holding its breath" (AGCGW, Act 1, P.16).

According to their races, both races are lined up to leave the church. They are classifying their position within the community. Jim's black suit and Ella's white dress symbolize their differences, and both are conscious that getting married to someone of a different race in a post-colonial community is not plain. The conventional perception

is that people's skin color matters, regardless of how wealthy and intellectual they are. O'Neill's inclusion of black characters within his works coincided with the developing cultural blacks' reemergence known as the renaissance. Following the civil war conflict in the United States, blacks developed the system of assimilating into the American community as residents and people. This procedure necessitated rethinking individual and cultural representational duties throughout the artwork, literature, and theatre. Enslavement was a blemish on black in America as nothing more than a race, as well as in the previous slave regions and the North States in the United States. Blacks and enslaved people within the antebellum period in the South occupied social statuses inferior to whites in the North of America.

The play is a revolt about the supremacy of whites and discrimination. As just a mirror of certain aspects of his life, O'Neill emphasizes his displeasure with white supremacy. As a result, M.H. Abram's powerful and interpretive technique from 1971 is used. Fanon (2008) claims that it is known that white people think they are better than black people. Another thing that blacks try to demonstrate to whites at all costs is the depth and worth of their intelligence. The traditional post-colonial community impacted by white supremacy dominance holds the canonical beliefs that intelligence and knowledge are white so that black people do not merit or are not qualified to become healthy knowledge because their position in the community is intended to be enslaved people, namely second class citizens.

Due to their fears, this reality also serves to protect white supremacy. Whites are privately terrified that blacks may gradually turn white, leaving them with nothing but their whiteness if this occurs. In spite of the hostility that Jim frequently encounters in his hometown, he never hesitates in his perseverance and determination to pursue a career as a lawyer. Unfortunately, Jim, who is naturally talented and diligent, is destined to fail continually. The inferiority that has grown through time and shaped by the society's culture led to this failure. Jim acknowledges that the examiners are very friendly with him. However, their warmth is akin to condescension shown to someone less important in a society that cannot help but harm a purposeful person.

Jim views the whites' tolerance of the black adolescents from the underprivileged outskirts as the height of abasement. He, after everything else, does not anticipate solace from anyone in the committee, which will cause him to

experience his deficiency and worthlessness. Jim is one of the citizens who have ideas about choice and worthiness and how they relate to the struggle for liberty and equality for blacks (Fagan, 2016). We should highlight Jim's ambition to succeed, which generates unhappiness on the part of African Americans and rivals from other races. Jim encounters Joe, his old buddy, with whom their parents used to collaborate. However, the two men's paths eventually diverged. Jim and Joe's priorities in life are hence the inevitable outcome of parenthood. Although Joe and Jim are of the same race, Joe speaks harshly to Jim because of his envy. The explicit comments undermine Jim's dignity, which raises questions about his character. This line eloquently displays O'Neill's capacity to draw attention to the agony brought by the character's fractured identity (Dubost, 2019).

O'Neill introduces a depressing perspective beginning throughout the play. Not only will whites detest blacks, but blacks will also despise whites in their position of power. The ideology is so firmly established that, indeed, black people need not believe that it is beneficial to study and learn since they are persuaded that education and knowledge are associated with white people and that pursuing them is futile. The character of Jim Harris is troubled about his perceived black skin. He is persuaded more by the philosophy that constantly mistrusts his talent and integrity, developing a feeling of inadequacy against whites. He sees all things as white, both the good and the evil. Because Jim was raised on the black part, he naturally sees himself as less than white people, and is difficult for him to understand Ella. Jim feels reassured with his lineage but is forcibly persuaded that he is inferior to Ella and that hoping with her is futile. So, he is told instinctively in the play, first with Joe, then with his wife Ella, and family with everybody, that he is a lower and an inferior race and much less deserving than white people.

Mickey's reaction demonstrates how being white does not automatically translate into being a good individual. Even though being white, Jim does not have a good character, so Mickey expresses his anxiety that if he fulfills his goal of becoming a lawyer, he will have nothing. He is also concerned with the idea that his position in the community will be replaced. This reaction is also displayed in Ella's perplexity when she tells Jim that he failed his bar exam, which shows that she is scared. Ella worries that if he passes the exam, Jim will turn white, and her position in the household as a white person will no longer be dominant and ascendant. Ella only has

the dignity of being white. Thus, she constantly works to undermine Jim and prevent him from studying before the exam goes awry again because of her anxiety, which is growing in her and causing racial discrimination to fester inside her.

As a result, racial discrimination exists not just among whites but also among blacks, as demonstrated by Hattie, Jim's sister. She worries that Jim will not fulfill his ambition to become a lawyer. Her fears affect her thinking and cause racial discrimination. She believes that Ella is responsible for Jim's failure to pass his exam. Hattie also worries that their race will never advance if Jim marries Ella. According to Fanon (2008) "to be intolerant is to refuse to accept ideas or actions which vary from one's own. The perception of racial discrimination toward each other is prompted by fear, which comes from blacks and whites". Both races engage in racial discrimination, the blacks are scared the whites will drag themselves to the position of a lower second place in the community, whereas the whites are scared that the blacks may crawl up and become white.

This play portrays one aspect of two opposing factions and how it seems to become a white lady rising in a community that values whites and race as a precious resource and personality. The play depicts how damaging beliefs can destroy a human's life. So, in everything, O'Neill illustrates the futility of value based on cultural ideology when someone cannot embrace the notion of the human being as a human being irrespective of ethnic disparities. Jim Harris has been subjugated via white supremacist beliefs from infancy to the point where he has come to loathe his black skin and mistrust his merit. Since the opening of this play, O'Neill has shown that Jim Harris is troubled with his physical nigritude. His perspective on blacks and whites is established. He fantasizes about being a white man and develops a relationship with Ella Downey.

Jim attempts to replicate white individuals' beliefs, care for education, and appearance. He then even goes above and beyond to swallow chalk, trying to render his skin whiter than of white individuals who consider him superior to him. Although he is mocked for coping with white people, it is ingrained in his mind that black people are inferior to white people. To have a good life, Jim must imitate everything white people practice. He believes swallowing chalk can turn his white skin, which is all there is. He nevertheless considers his black skin to be inferior and his whiteness to be

superior. Jim zealous opponent of societal oppression comes to terms with being a slave (Koreneva, 1990). Thinking that Jim willingly adopts the humiliating role of a subservient who worships Ella as a white divine being. Jim views Ella's adoration as a worthy continuance of his life. Even at the sacrifice of his happiness, he is willing to remain with her and help her in every way possible because he adores her. Since Jim is the only man to help Ella throughout her crisis, she sincerely appreciates Jim's assistance in helping her. However, one still believes that Ella merely expresses her thanks for his previous great deeds.

Ella only permits Jim to adore her instead of reciprocating these feelings. Furthermore, she finds it challenging to transcend stereotypes and recognize the man who is an unequal, deserving life partner because of the social inequality which creates barriers among the characters. Ella adopts societal ideals and is poisoned with prejudice. As a result, she seems unable to recognize Jim's emotions which unavoidably results in their tragedy (Koreneva, 1990). Ella is aware that interracial marriage is not widely accepted despite being legal. The way white people see her impacts how aware she becomes of herself. After her wedding, she notices how others are staring at her, and she quickly assumes that what she has already done is terrible. She grows increasingly disordered by the voices in her head and develops paranoid, believing everyone is disgusted with her because of her marriage to a black man. Ella even hopes that Jim fails his exam so she can maintain her superiority based on her skin color. She eventually attempts to kill Jim to prevent him from ever becoming a lawyer after becoming deranged and confused due to her racial discrimination and her influence on thankfulness for Jim.

With their marriage, Ella and Jim have never had it easy. The strain on their marriage is brought on by pressure from both themselves and society. There is no longer a rule that stops them from getting married to someone of a different race, but the unsaid law of community still prohibits it, even though their best efforts are to care less about what the rest of the world thinks. He eventually discovers Ella when she is rejected via Mickey and given work as a hooker. He persists on persuading himself that she should be his wife and that Ella is the most beautiful lady on the planet. Nevertheless, he wants to become recognized as a white person who motivates him to seek Ella. His need to become loved by the white lady he adores pushes him so far enough. It is to prove that he is not useless with his black skin. Throughout the

moment of his proposal to Ella to be his wife, Jim admits to her that it is not because of his lack of integrity and maturity which causes him to miss the exams. He has been incapable of responding to everything due to his established lousy attitude.

It comes closest to O'Neill's portrayal of black individuals' complexes of being in a twisted society that destroys their feelings of independence, identity, and self-image. They start to mistrust and doubt their value which, when left unchecked for far too prolonged, will stifle their potential to attain their objectives. Jim is already so deceived and ignorant by his idea that he considers Ella's every behavior correct and himself to become a wrong person, someone who shows any sign. It is demonstrated that he allows Ella to insult him further rather than protect him. He remains obedient to Ella's requests and devoted to her. He also attempts to push everybody who wants to assist him. His sister, Hattie, for instance, always encourages him to trust in himself. However, when Jim hears Ella's explanation, he subjects himself to Ella's insistence that he is still useless; ignoring that it is Jim who requires Ella rather than anyone around him.

O'Neill portrays Jim's marriage with such optimism that they make off for Paris, hoping for something like a fresh start. However, after spending two years in Paris, Jim returns with his wife Ella, suffering from madness that causes her to degrade Jim even further. He has no reservations about Ella's decision. Rather than disputing the claim, it feeds his inadequate mentality and belief that he is useless because he has black skin. Even though the charge is causing him anxiety and impeding his development and studies, he has remained silent. Rather than viewing himself from a better perspective, such as his sister, Jim eventually falls with his wife since he cannot move past his firmly entrenched idea that white people are all nice and that what Ella offers would be nothing more than fact. In this regard, Jim's position and personality are apparent.

O'Neill represents the harm a distorted community may do to people's psyche or individual identities. Jim misses his notion of independence and, consequently, his self-esteem like a person resulting from the established belief that someone with naturally colored skin may be less than white people. He admires white males and starts imitating anything they do. So, though Jim still fails to be a white guy, he begins to question his merit, believing that he is less deserving, inferior, and innately foolish.

He continues to be exceedingly obedient to his pretty wife, elevating her to the status of an angel, representing everything good and beautiful. The belief that certain humans are equal regardless of the skin color and race is destroyed by the thought that humans are different according to their color and ethnicity. The fact Jim is an inadequate person is heartbreaking. He may be unworthy as a result, he is unhappy and has fallen into an obsessed hallucination of a glories history.

Ella Downey, Jim Harris's wife, is a woman who has a white skin, whom Jim's acquaintances and friends refer to her as "painty face" because of her paler skin which is frequently marred via red blotches. She despises the moniker "painty face" since it separates her from her peers, and she is still impacted mainly by the belief that people who have a white skin are better than other ethnicities. Ella despises being described as "painty face," like in "what is a note in her skin" rather than "who she is. She despises the idea that her complexion is very white, and perhaps the color red could be seen very plainly. Indeed, it is clear that Ella probably does not care about befriending Jim, a black youngster sometimes described as "Jim crow, "that is an iconic character of the blacks in the United States. However, she does not care to share the same grounds with the black people. Ella agrees to become black rather than white to avoid becoming labeled as a "painty face". Although Jim yearns to become a white male and now has gone further to swallow chalks and water to achieve his goal, Ella still has to sample the philosophy which drives Jim's desire to transform his complexion.

This seems to be O'Neill's implying that prejudice and racial inequality are not genetically encoded. Society develops those youngsters who are unaware of the concepts of white and black, influencing their line of thought. That might be a reference to O'Neill's childhood. Ella attempts to adjust when she gets older, and through O'Neill's exaggeration, readers may see his rejection of such an idea of racial superiority. Ella's critical gaze at Jim at that point, although she does not state this out loudly, is a strong demonstration because she no longer holds Jim in the same regard that she does while they were children. She is favorably depicted by O'Neill in the first act as a smooth, sympathetic girl who admires her rescuer Jim. She is already looking at Jim with disapproval. Selfishness as higher ethnicity is communicated through actions instead of words. Ella goes further to dispute that she ever loved Jim like a youngster when Jim is unaware that he has black skin and is very captivated with her and that he swallows chalks to whiten his skin. On a lesser level, she considers Jim.

Ella would not interact with him since Jim has a black skin whereas she is a white girl. "You finally managed to graduate; has it gone to your head?" (O'Neill, 1924).

She indicates that she considers Jim's perspicacity and capacity to be lesser than her and lesser than all whites. As Mickey rejects Ella, her views of white and black become simpler to discern. When she reaches that point of hopelessness, she is aided by Jim, who, notwithstanding, absolutely yet wishes to marry her. It is worth noting that Ella alludes to Jim's benevolence like white, nearly as if it was satire conveyed via O'Neill. She pulls the line over anything and everything terrible about being black, which is what the superiority theory of white people implies.

Ella: Of course. (affectionately) Don't I know how fine you have been to me!

You have been the only one in the world I stand --- the only understanding person.

Person and all after the rotten way I used to treat you.

Jim: But before that--- way back so high---- you treated me good. (He smiles)

Ella: You have been white to me, Jim. (She takes his hands)

Jim: White---- to you!

Ella: Yes.

Jim: All love is white. I have always loved you. (This with the most profound humility) (O'Neill, 1924,p.18-19).

Both Jim and Ella's definitions of compassion and love have been warped. Ella alludes to Jim's generosity as white, implying that he is white towards her, whereas Jim describes his love for Ella as white, implying that even love is white. However, throughout this play, O'Neill explains that this theory, such a line of logic, would not finish well enough in the future.

Ella's preconception that almost all whites are better than blacks cause her to be terrified when she accepts to get married to Jim, cutting her ties with her parents. Ella's anxiety develops into sadness which progresses into madness. The terror that develops in her mind during their marriage increases in Paris throughout their trip. In a country where the skin color does not matter, she realized how different the scenario was from what she experienced in the United States. In France, Ella becomes

depressed. She starts feeling different and separate from others because of what unique Paris concerns discrimination, societal regulations, and norms. She feels isolated and alone as if nobody could understand her. This feeling of isolation can lead to sadness and, subsequently, mania. O'Neill, like Ella, has experienced depression and anxiety since she was young. His depiction may be a technique of teaching readers how depression may do to a person. His drama is tinged with pessimism, which derives from his despair, so All God's chillum Got Wings fits these things perfectly. This behavioral shift is shown soon when they return from Paris. Ella feels depressed and alone in France, according to Jim.

Jim: Oh, It is nothing serious. Nerves, she needs a rest.

Hattie: Was not living in France restful?

Jim: Yes, but too lonely--- especially for her.

Hattie: (resentfully) Why? Didn't the people there want to associate?

Jim: (quickly) Oh, they did not think anything of that. (After a pause).

But ---she did. For the first year, it will be all right. Ella liked everything a lot. She went out with French folks and got so she could talk it a little--- and I learned it --- a little. We were having a lovely right time. I never thought then we would ever want to come back here.

Hattie: (frowning) But --- what happened to change you?

Jim: (After a pause) Well--- you see--- the first year--- she and I were living around like friends --- like a brother and sister--- like you and I might. (O'Neill, 1924,p,25).

Ella has an initial onset of melancholy brought on via her dread, and it is apparent that she has never loved Jim. Because of his generosity, Ella decides to marry him because there was no other way for her. She could marry a black male who cares about her. Her illness worsens to the extent that she has the impression that her complexion is turning black. By seeing black people as wicked, Ella believes she has become lesser than a white lady. She comes to detest Jim and uses derogatory language to describe him and his family, despite claiming that Jim's lack of intelligence is what keeps her grounded. After Hattie, Jim's sister, informs Ella about

Jim's achievements, she takes solace in Jim's failing examinations to excuse her status that she is greater than Jim.

Jim sees this as Ella comforting him; she is all things. They are lovely in the world, and the fact that she comforts his useless black soul implies he should appreciate it. However, this could also suggest that Ella uses the statements to excuse herself, claiming that she is superior to Jim because her race has not yet failed her. Also, as a white woman, Ella continues to conquer and obtain a more significant position over black people. Moreover, Ella's madness grows as she hears voices, becomes scared of the ethnic mask inside the lounge room, and turns to attack, carrying a knife to kill her husband if he passes his bar examination. Ella admits to Jim how she will kill him into a deep melancholy.

Ella: (writhing out of her chair like some fierce animal, the knife held behind her with fear and hatred) You did not --- you did not ---- You did not pass, did you?

Nigger Jim Harris ----- between a full-fledged member of the Bar!

The mere notion of it being enough to kill you with laughing would be against all natural laws, human rights, and justice. It would be miraculous; there would be earth quacks and catastrophes, the seven plagues come again, locusts devour all the money in the banks, the second flood roared, and Noah'd fall overboard, the sun drops out of the sky like a ripe fig. The Devil performs miracles, and God's be tipped head first right out of the Judgment seat! (He laughs, maudlin uproarious).

Ella: (her face beginning to relax, to light up) Then you --- You did not pass?

Jim: (spent--- giggling and gasping idiotically) well, I should say not! I should certainly say not! (O'Neill, 1924, p.37-38).

This theatrical snippet, although a touch long, nicely depicts the tragedy and melancholy O'Neill wishes to express. It outlines his vision of what might happen if one-sided passion, a mistaken belief, or misery collided. Black looks and depression towards love conquering everything are vividly depicted since they could represent his parents and his relationship. Ella represents O'Neill's white people's depiction, with so much information about how harmful, meaningless, and false racial supremacy is. He emphasizes that on the other side of the world, outside of the U.S., it will not affect if one's complexion is white or black. The color of one's skin does not indicate intellect,

and the color of one's skin does not indicate that one is a good human. Ella's inability to let go of the innate superiority she gains because of being a white woman or through being the better person from that twisted world is really what ultimately destroys her. O'Neill portrays devastation not only on the part of a sufferer but on the part of a subordinate, causing self-destruction within the attacker.

The illusion of dominance has corrupted Ella's concept of identity; therefore, she cannot recognize Jim's affection as just being between a woman and an man, rather than as adoration of something like a lower ranking person through a higher ranking person. Ultimately, it is her whiteness that ruins each one of them. The play's latent topic of such destruction on individual selfhood because addressed here. In specific ways, Jim's marriage to Ella could be viewed as a clumsy attempt to grasp the apparent. Instead of the conventional concept of passion and marriage conquering everything, such union symbolic contrasts culminate with insanity and a return to infancy.

Jim undermines his intrinsic, good energy by seeking to identify himself via Ella's perceptions, which seem to be those of a dysfunctional world. Since of his perceived blackness, he considers himself unfit. Ella steps further into the position of something like the misdirected representative of Jim's awareness. This person drives them insane due to an unmet understanding of humanity's unity. Ella and Jim finally destroy each other when they work simultaneously. Based on the assumption that a delicate tie for passion appeared to stay unchanged in the end's play, distorted as this may be the notion that each of them disintegrated towards lunacy was too much of a triumph. The essential premise of O'Neill's argument and remedy is a reluctance to accept alien concepts, failure to comprehend that humans are all human irrespective of color, gender, or ethnicity, the influence of distorted community and culture in hurting oneself, and the idea of adaptation and transform. Ella and Jim may tolerate each other after earning because, ultimately, humans are merely humans.

Man is not born with a choice of his color, beauty, lineage, wealth, or poverty. Rather than a social concept of racial ranking of whites and blacks, they continue to see each other as humans and distinct beings and embrace each other as their personalities instead of perceiving their distinct looks and characteristics since they were youngsters. However, whether they can alter their minds and adjust to seeing

things the way the French did when they were in Paris, Jim and Ella may take satisfaction and pleasure without the dominance, prevalence, and inadequacy complex that comes with white superiority. They pass the first year of marriage together as though they are brothers and sisters. They seem to have no choice except to confront reality, as the temptation and tensions are tremendous.

Ella sincerely adores Jim, although she refers to recognizing him unless she may remake him throughout her sight. However, Jim remains to let Ella determines his life, although his motivations have become purer even though he is unselfish. "To hell with me! ---- I am all she is got in the world! I got to prove I can be all to her! I have got to prove worthy! I have got to prove she can be proud of me! I have got to prove I am the whitest of the white!" (O'Neill, 1924, pp. 124-125). Ella purposefully does anything she can to sabotage Jim's prospects of completing the exam to sustain her sense of supremacy. However, at her most logical times, she continues to urge Jim to pass. These conflicting motivations create internal tension and depression, which ultimately forces her to go insane.

Even as the play progresses, she cannot quit her inner twisted arrogance as white stakes her overthrow. Similarly, Jim's reluctance to see beyond his perverted passion for white people pushes him and Ella to be insane and depressed. O'Neill's viewpoint on the devastation of someone's sense of identity is evident throughout the play. He gives us two instances of each aspect for us to consider. Ella is a prideful and arrogant white lady who marries Jim, a black guy, and falls into lunacy due to her innate beliefs. Jim is a black guy who loves a white lady but he remains miserable because he refuses to recognize himself for who he is. It demonstrates how detrimental twisted societal beliefs may be in a person's existence through Ella's perspective. It molds her beliefs and perspectives, so she believes that she is superior to Jim even though Ella knows she loves him instead of the other way around.

Ella's shifts in attitudes are depicted in vivid details, beginning with her lack of understanding about what it means to be white through delusions, manic outbursts, and the development of her depression due to her marriage to Jim. Ella exemplifies O'Neill's vision about what it means to become a white lady in a community that perpetuates the supremacy of whites. It has to be a strategy for whites to persecute blacks and achieve more power, although it eventually leads to their demise. Through

Ella, O'Neill depicts the outcome of white superiority that seems to be a spectacular and terrible consequence of adhering to white superiority ideologies and views. On the other hand, Jim reveals that being with a black skin in a community that persecutes blacks merely since they are born blacks has severe consequences. Persecution and injustices affect not just a person's appearance but also a person's intellect and quality of life. It is a tragic portrayal of O'Neill's theme of two individuals tormented with race prejudice in various forms but still striving to make a future together.

The subjugation of their society's indoctrination beliefs leads to their demise. Aside from that, there can be no such idea as a meaning of marriage that may overcome anything. The issue originates from losing one's self-identity within the twisted group. It separates people into two groups. One group is higher, and the other is inferior; as the story progresses, each significant character becomes consumed with their aspirations and convictions. This issue drives them to destruction; regardless of how many opportunities to become pleased arise, the issue derives from within their mania, which must be discarded by themselves.

Although superfine and masterful, O'Neill highlights their error, their blunder, a lesson, and the notion that they must surrender confidence and arrogance to leave the distorted culture and suppress society's condemnation and criticism. Ella wants to perceive Jim as a man, a male who adores her, rather than a black human with everything involved. Similarly, Jim must let go of his perception of inadequacy, which defines his existence as a black guy who aspires to become a white guy to become a human who has attempted his hardest. Before Jim can even achieve the pleasure and satisfaction he seeks, he must let go of the concepts and approaches of whites and blacks and embrace himself as an ordinary man.

## 2.1.2. O'Neill's Treatment of Racism, Depression and Madness in All God's Chillun Got Wings

Various factors regulate the social structure of a specific location, and these factors severely influence the attitude and behaviors of people who live in the United States. These factors include spiritual affiliation, racial and sectarian association, and financial circumstances. Such cultural issues may significantly affect the growth of

good personality characteristics and behavioral abnormalities in human beings. The study focuses on what may be the troubling impact of these factors as ethnic acceptance and belonging for psychology and conduct are abundant in American literature. The study of racism and contributory factors in the United States and their influence on human behavior can be found in American literature, particularly theatre and fiction novels. Furthermore, literary works that address what they imply toward being inherently inferior in terms of appearance are among the most compelling works within the American literature. Social discrimination, absorption, and other significant cultural, economic, and religious challenges afflict the blacks, prompting a psychoanalytic study of the essential black people and their experiences in the United States.

The hardship of the black people could be envisioned in terms of the reality that no black authors could effectively communicate the experience of blacks to familiar readers until around 1940. This task is left to the white American authors who develop appropriate black literature and pictures for such audiences and ordinary people. As a result, O'Neill's steps attempt to reflect the black's sufferings in the modern society. However, it is a difficult task because those white intellectuals have to work and create without the individual perspective to black within the society of white racist plurality, and also have to deal with the well-established unfavorable stereotype of a Negro (Long, 1987).

However, *All God's Chillun Got wings* is praised for making significant efforts on this serious subject and allowing black people's central stage participation. This play reflects O'Neill's aim to confront and shock the American society by referring to the issues of racial discrimination and its impact on people and the underlying cultural stigma that may destroy relationships and families, driving otherwise rational people insane. He treats this issue by depicting interracial marriage between a black man and white woman within the play. By building a citadel of power, bravery, and dignity, O'Neill attempts to rebuild his people from the ashes and put the West to disgrace. Gagnon (2003) claims O'Neill's viewpoint gives black figures a more complex psychological structure. It depicts them as fate-driven rudimentary who are under the control of their pasts, usually as enslaved people imported by European colonizers to perform domestic tasks and produce money to support the war in Europe. His black protagonists keep results from a lengthy history of racial prejudice, which is inherent

not just in the idea of the superiority of the white race but also in the idea that blacks are a subordinate and of a low race and should therefore submit to the white supremacy. Black protagonists by O'Neill are frequently sorrowful but subjugated to white supremacy and see themselves as inferior to white people. O'Neill's desire to comprehend and consider the essence of a shared experience is reflected in black protagonists, and this perspective is eventually coordinated throughout the entire body of the play.

All God's Chillun Got Wings is about overcoming self-loathing due to cultural constraints and the need to become independent, acceptable, and worthwhile. The struggle causes Ella to overlook the truth that she relies entirely on Jim. Therefore, she accepts marrying him because she wants him to look after her and defend her. Ella loves Jim, although she would not have a baby from him because she is afraid of having a black baby. Her retreat is swift and persistent, and towards the end of the play, Ella wants to perform the role of a little kid companion with Jim, whereas he wants to perform the role of a servant. Assuming she might preserve her status in the society, she hires a servant. Jim exhibits retreat, hesitation, and disintegration as well. He intends to become Ella's gentleman who can defend her. He also wants to succeed in his bar exam, proving that he is capable and effective like white people, even though he has no complaints about admitting his eventual defeat in the law test if it keeps him on a level with her.

Jim also expresses his desire to commit a suicide if that would delight Ella and help her find happiness, and he would not kill himself since she would have to spend all her time without his assistance in this situation. The recognition of O'Neill's consideration and endeavors to improve the lives of people and create a better country is critical for a reasonable and accurate assessment of the authors not much more than an individual continuously rebelling against destiny and community, but as an empathetic, equitable, and comprehension person who is involved with the destiny of American blacks. The handling of O'Neill's character reflects his unique psychological condition of anguish and worry, which he expresses through the play and within his imagination. The characters throughout O'Neill's play have different personalities, distinguishing them from several theatrical representations in modern literature. The study through this part concentrates on O'Neill's characters' eccentric actions throughout the play. Trauma, despair, and stress are central to O'Neill's themes and

dramaturgically inventive, particularly his situation, which is a source of genuine tragedy and depression that he has to deal with only through the setting of his family. O'Neill's approach to mental illness and depression primarily concerns with societal issues. As a result of this aspect, he is now on a level with contemporary dramatic viewpoints concerning cognitive capacity.

The play depicts trauma since it manifests through individual behavior, immediately and later, with varying degrees of instability and psychosis. The characters have a retrograde and unbalanced desire which prevents humans from personal harmonic assimilation with themselves and others. The early perception is that trauma is an altered condition that exhibits traumatic reactions such as recurrent and disrupts normal daily life flow, causing devastating depression and stress and throwing the individual into a state of craziness and genuine to be on the verge of a breakdown. Ella's insanity becomes clear as she talks to herself when she becomes alone. She is portrayed as shocked and panicked, simultaneously trying to get rid of her scrupulosity, and becomes a maniac. O'Neill illustrates a symbolic retraction in the size of Ella and Jim's room to signify Ella's deteriorating state. "The walls of the room appear shrunken in; the ceiling lowered, so that the furniture, the portrait, the mask look unnaturally large and domineering" (AGCGW, P. 121).

Ella has been transformed into a weary and patient inside this room which must be always kept inside. She rants, experiences hallucinations, and is on the verge of escalating into a violent manic episode—the terrible result of deeply ingrained racial stereotypes breaking people's aspirations for happiness. Personality problems, including dissociation from ethnic connections, a limited range of emotional recognition, sensations, and solitude, are expressed in O'Neill's characters. Their emotions and motivation levels are positioned to obstruct their broader social appeal, so this aspect emphasizes the limited nature of their emotions under certain circumstances.

It is also supposed to play a significant part in O'Neill's concept and dramaturgy throughout the play. However, O'Neill's remediation of the black within *AGCGW* is not without controversy or criticism. The general perception about his remediation for race inequality seems to be that he adheres to stereotypical portrayals of blacks and whites in the theater. Shaughnessy (1984) states "O'Neill is plagued by constant

institutional racism until the end". Bogard (1988) emphasizes the comparable situation with O'Neill's plays about the black topic. O'Neill portrays a stereotypical image of blacks through the play, *All God's Chillun Got Wings*. Its sad structure comes from the fact that it depicts the anguish of racial relationships and the human predicament in general. O'Neill succeeds in conveying the reality of the protagonists' emotional and physical suffering.

By depicting the shrinking of the person's mind within the symbolic shrinkage and misrepresentation of the surroundings of the protagonists, he skillfully depicts terrible trauma within the play, giving the audience an understanding of their physical and mental suffering. Orr (1981) concurs with the stereotypical portrayal of the black figure within O'Neill's plays, arguing that although O'Neill never explicitly questions such illusions in his plays, his depressing perspective consistently destroys them on a profound aesthetic dimension. Furthermore, Holton (1995) asserts that between 1918 and 1923, O'Neill's efforts to comprehend the lives of blacks have both been stereotypical projections of the dominant, arrogant, superior attitudes towards blacks generally and delicately sophisticated investigations that suggested a potential for higher cultural awareness. Using the stereotyped portrayal of the black in American social heritage, O'Neill exaggerates the black figure portrayal.

More specifically, this study focuses on the influences of ethnic acceptance and belonging upon retrograde conduct that contributes to psychological disease and insanity. *All God's Chillun Got Wings* is a middle-period play that is about interracial marriage and the resulting social and personal issues. According to O'Neill, "the play's purpose is to portray people's private lives and their bitter and melancholy fight for satisfaction. Any good application of All God's Chillun Got Wings that is not in a profound philosophical way means reading a message into my work that is not there" (Arthur et al., 1962). Bogard (1988) emphasizes "the play's clichéd presentation of ethnic concerns. Fundamentally, the main protagonists of the play are intimately linked to the theme and narrative progression of a psychological disorder that is remarkable through its severity and speed". Throughout the play, O'Neill's grasp of such deeply embedded racial aspects inside the society goes back through the origins such as starting with a skin color rather than a particular name. When the show begins, a group of white and black guys participates in everyday conversation. Immediately, throughout the play, expressive differences between black and white people are

produced with zeal. Within the play, O'Neill states in the opening scene that *All God's Chillun Got Wings* uses its dramatic effect.

"People pass, black and white, the Negroes frankly participant in the spirit of spring, the whites laughing constrainedly, awkward in natural emotion. Their words are lost. One hears the difference in the race" (All God's Chillun Got Wings, P.P: 301). The actual performance describes the behavior of the blacks and the church, reinforcing social discrimination over skin color lines. "As if it were a signal, peoplemen, women, children- pour from the two tenements, white from the tenement to the left, black from one to the right. They hurry to form into two racial lines on each side of the gate, rigid and unyielding, staring at each other with bitter, hostile eyes" (P.P: 302).

The different types of music reinforce the separation heard on these different streets. Jim and Ella's childhood world is known for "Jim Crow" and Ella with "Painty face" (P.P: 302). She is an ethnic paradise for them to show Ella's rose skin. However, especially with Ella, it is the marriage of Ella, the white woman, and Jim, the black man, which perpetuates socially conditioned psychological disorder and retreats towards extreme insanity. It starts romantically with Jim talking about swallowing chalk to be white, and Ella wishes to become black like Jim. Both are well aware of their skin hue. Ella, therefore, the girlfriend of Mickey, shows little attention to Jim during their adolescent years. In reaction to his offer to assist her, Ella states, "you are certainly forgetting your place" (AGCGW P.P: 310). Ella begins to see him again since Mickey renounces her. She begins calling Jim "the only white man in the world" (P.P: 314). Jim's generosity and devotion to Ella during this troubling time lead her to approve his marriage proposal.

They married and relocated to France in search of happiness and a better future. However, they are unable to conceal their dreadful ethnic background. Throughout their post- martial experience in Paris, they experienced an impeccable, beautiful but devastating effect of racial distinctions that are still impacting them. They appear to have migrated away from their own country's ethnic prejudice and bigotry culture, yet the mentality they learned there does not translate well in an unfamiliar setting. Their relationship appears to be having difficulty developing a typical martial relationship. Ella particularly has no desire for loving intercourse with her husband. As a result,

they act more like brothers and sisters instead of a married couple in their marriage. As long as they remain in Paris, such a way holds their extremism away. Indeed psychological retreat begins to deteriorate in Ella's situation because her depression begins to indicate a downward trajectory, and they are forced to confront whatever they have already hoped to avoid. The 'Congo Mask" is presented, however, in the play, that Hattie, Jim's sister, presents as a wedding present. To indicate the imaginary situation of segregation in the play, Hattie depicts the mask as "a mask which is used to be worn in religious ceremonies by my people in Africa.

However, aside from that, it is a beautifully made work of Art Arta real artist as real in his way as your Michael Angelo in the apartment where Jim and Ella join Hattie and Mrs. Harris; the Mask has what O'Neill calls "a diabolical quality that contrast imposes upon it" (AGCGW, P.P: 328). According to Bogard (1988), the Mask is inserted into the play haphazardly and never entirely merges emotionally. However, it still aids O'Neill further by defining the play's intellectual perspective against prejudice. After that, the tension rises to a climax in which Ella and Jim are driven into lunacy and depression. Jim's efforts are still. Concentrating on rising the ranks, passing the bar test, and becoming a lawyer. However, he suffers a lot from the torment of becoming black, so Jim attempts to exaggerate the casual racism he encounters within his white colleagues' reactions towards his unsure responses to Jim's queries.

Jim states, "They do not laugh, hardly ever. They are kind. They are good people. They are considerate, damn them! But I feel branded!" (All God's Chillun Got Wings, P.P: 329).

Ella's retreat and fragmentation at home persist. She sometimes pushes Jim. Further, she indicates that by saying,

"I want you to climb and climb" (P.P:329). During one of Ella's crazed outbursts, she shouts, "How dare you grin at me? I guess you forget what you are! (That is always the way. Be kind to you, treat you decent, and in a second you have got a swelled head, you think you are somebody, you are all over the place putting on airs"(P.P: 315).

Ella also admits, " I would not let you sleep. I could not let you. I kept thinking that if he slept well, he would be sure to study well, pass, and the Devil will win!

Moreover, Jim responds, "Honey, I will play right up to the gates of heaven with you!" (All God's Chillun Got Wings, P.P: 315).

Ella then attempts to attack Jim, annoyed by his black skin and determination to pass. Jim remains to provide support and is entirely aware of their psychiatric condition, refusing to put her in any psychiatric institution as Jim informs his sister that her segregation is "deep down in her people, not deep in her" (AGCGW, P.P: 328). Ella tries to stab the "Congo Mask" in a way reflecting her furious degradation after discovering that Jim failed in his bar exam. She is overjoyed, proclaiming that the Devil is no longer alive. Jim must abandon his aspirations to revert to his infantile condition. His inability to distinguish himself as a white man when he graduates from the university as an attorney might save Ella since it affirms the restricted world's consistency and assures her perception of innate satisfaction by becoming white. The central story framework reflects psychological pressures, including disintegration and progressive but obvious development toward depression and lunacy. The black human situation that Ella and Jim discover heavily influences the heinous social influences that block natural human relationship development and inflict desolation on human intellectual capacity and hardness.

White supremacy is a concept that has been passed down as a way to subjugate the other side and to defend behavior that would otherwise be considered racial prejudice (Nufiarni, 2015). Bernstein (2006) examined the retrograde behavioral characteristics of psychology and behavioral disintegration; Ella's conduct seems more fragmented than in previous years. She is torn between adoration for Jim and a ferocious contempt for him. Ella adores Jim but still despises him because of his blackness; therefore, her marriage to him shatters her feeling of superiority. She wants him to pass the legal exam, although she is afraid that Jim's success and achievement may cause him to abandon her and possibly create a feeling of pride and arrogance. Ella lusts after Jim throughout the play and ultimately attempts to kill him.

The play's dominating concept depicts a fundamental division in both protagonists' identities as the critical incident of squeeze they are confronting is beyond Jim and Ella's ability to handle correctly within their falsehoods. The disintegration in the play tries to break the last vestiges of rationality. Ella learns about Jim's defeat in the law exam in a frantic condition and descends into psychotic

insanity. Jim is on the verge of collapsing and becoming ill. Ella's conduct and Jim's exhausting endeavors to obtain a graduate degree make even more complex by his association. Jim's deterioration and breakdown are mirrored through his crazed eruption, which portrays him as insane. The racial aspect throughout the play causes Ella and Jim's psychological relapse, which not only causes tragedy and serious maladjustment in their private lives but also prevents them from forming positive societal ties. Jim's aggravation and subsequent identity about his chances of succeeding in the exam put him in a position where he can no longer become a good and productive citizen and contributes meaningfully towards his gradual progression. Racism has a significant regressive effect, mainly on the protagonists. They descend into a state of actual insanity.

### 3. A KIND OF ALASKA

# 3.1. Encephalitis Lethargica "Sleeping Sickness" is an Exceptional Epidemic Disease

Encephalitis Lethargica is a type of brain infection that is also known as "Sleeping Sickness" which is completely different from the sleeping sickness that transmits by tsetse flies in Africa. This disease is discovered by the neurologist Constantin Von Economo who was the first one who depicted the disease in detail in 1917 and then by the pathologist Jean Rene Cruchet. Encephalitis Lethargica infects the brain, leaving some patients in a state of immobility and speech. It is a virus that swept across several parts of Europe between 1915 and 1926. This epidemic which has afflicted at least 500 million individuals around the world remains a riddle disease. It confirms to be expanded over Europe infecting thousands of people. However, the true number of patients infected with this disease is unknown, but the final estimates indicate that the epidemic has infected more than one million people around the world and caused half a million deaths. Most of the patients who survive are not as active and energetic as they were before. According to estimates, the average output rate in 1918 was between 2 and 3 which mean that under normal conditions each infected individual should anticipate infecting from 2 to 3 more people (Mills, Robins, and Lipsitch, 2004).

The reason for the odd sickness is still unknown today. However, there seem to be intermittent cases of sufferers with what appeared to be identical symptoms and signs since the first infection although it is unclear if the sufferers have encephalitis Lethargica or other diseases. Since the 1920s, there is no more encephalitis Lethargica, however; occasional infections have persisted to be documented. Several studies has examined the roots of this epidemic within immune cases as well as connections to disease and infection, bacterial and viruses including influenza which has a definitive connection to encephalitis. Following an epidemic of encephalitis Lethargica after the 1918 flu pandemic, encephalitis Parkinsonism has become convincingly identified. The 1918-1919 influenza epidemics were short but devastating. The number of extra deaths caused by the epidemic is estimated to have been 100 million worldwide (Taubenberger, Kash, and Morens, 2019). Barry (2005) presents a thorough

explanation of the 1918 virus' pathophysiology. Similar to other flu strains, signs in 1918 comprise fever, headache, body pains, coughing, and tiredness in addition to the pharynx, throat soreness, and nasal membrane inflammation. In most cases, recovery takes 10 days.

However, because influenza spreads very quickly and effortlessly, there are probably 100 million conditions with acute symptoms complexities and those complexities are acute. In the end, the acute infection will pass away from bacterial congestion of the lungs. Situational factors epidemiological data for influenza viruses an etiology of Parkinson's symptoms exist such as discovering influenza antibodies in patients of encephalitis Lethargica whereas indication trying to argue against such a reason is of the critical variety, such as the absence of viral RNA in post-encephalitis Parkinsonian material of the central nervous system. The source of this disease has yet to be identified. In addition to causing physical signs of a central nervous illness, this encephalitis lethargica may lead to coma or death may occur.

Parkinsonism and strange behavioral disorders are often linked to people who survive this disease. Pseudops psychopathic symptoms are experienced by those survivors, particularly teens. Youngsters who have previously been normal are turned unconstrained, causing property destruction and assaulting people in the streets, according to a study of early research on the disease. In this situation, there are few neurological problems. However, encephalitis Lethargica or sleeping sickness remains present in sporadic incidences over the world. During the outbreak of the epidemic of encephalitis Lethargica, Von Economo, and other scientists believed that influenza is not the reason for this disease (Taubenbergers et al., 1997). Taubenbergers and his fellow workers' modern discovery and confirmation of the 1918 flu virus could check stored encephalitis Lethargica brains samples for 918 flu viruses RNA. These studies by the researchers are unable to identify influenza RNA within the brains of patients who have encephalitis Lethargica and they also discover that the virus of 1918 influenza is a physically defective virus that only reproduces throughout the respiratory system. The researchers conclude that encephalitis lethargica is improbable to be caused by the flu virus of 1918 immediately (McCall et al., 2001).

Yet, various clinical diagnoses of this disease are offered. In immediate and chronic encephalitic cases all alternative recognized etiology for encephalitis are ruled out as one that gains widespread acceptance. There is a link between the two illnesses that have been claimed since encephalitis lethargica was widespread in the same period as the 1918 epidemic of influenza (Ravenholt and Foege, 1982). Another modern clinical diagnosis states that encephalitis lethargica should be evaluated if indeed the symptoms of patients cannot be linked to other recognized neurological disorders. The symptoms of this epidemic are acute and long—term stages are traditionally distinguished, however, the two are sometimes confused. Extreme sleeping, ocular mobility abnormalities, high fever, and motion difficulties are common with the acute stages, but practically any neurologic symptoms can appear with days as well as hours fluctuations in symptomatology.

There are other symptoms such as headache, soreness in the patient's throat, tiredness, sluggish physically and mentally reaction in addition to sleep inverting. Patients may also suffer a coma condition or deep sleep of kinetic mutism in serious cases. Individuals usually show remaining changes especially behavioral impetuous in the lack of mental changes (Lishman WA., 1998). Patients may even have aberrant motion, Parkinson's disease, weakness in the upper body, muscle aches, tremors, rigidity in the neck, and behavioral problems involving schizophrenia and sometimes klazomania is prevalent. These chronic stages which may last months or many years are characterized by Parkinsonian as symptoms. Severe encephalitis lethargica may be characterized by the slow development of flu signs such as malaise, reduced fever, headache, dizziness, vomit, inflammation of the throat, and quivering patients who suffer from this disease become dizzy, confused, and incoherent, with slight meningeal agitation as a side effect. Patients seem to have an intense urge to sleep so they will sleep for unusually long periods, yet they are quickly aroused and are often conscious about what is going on around them when in the condition of pseudo-somnolence. Von Economo suggests the homeostatic akinetic type as the most prevalent type of chronic encephalitis lethargica.

Sufferers with those cases feel stiffness with a lack of mobility, but with no obvious impairment. Patients are also very hesitant to change their position so any adjustments they do make are minor. Flexible cereal, especially waxy flexibility is common in patients who stay stiff and motionless for a longer timeframe throughout this condition, however, the immobility may be broken with a small amount of additional effort. Those who have the homeostatic type are mentally sound, although

feelings and expressions upon disguised faces are barely visible. Recovery can from these symptoms take weeks or several months depending on the severity of the disease. The persistent period of encephalitis lethargica usually occurs for a long time following the acute episode and this may occur sooner or later. "45 years after the first infection of this disease one patient acquires a post-encephalitic condition" (Sacks, 1990).

Parkinsonism is the most common symptom mostly in the chronic stage, yet other symptoms include sleep difficulties, oculomotor irregularities, involuntary motions, speech and breathing disorders as well as psychological issues. "It is believed that up to 50% of Parkinsonism patients during the decades after the outbreak of the disease are post-encephalitic" (Krusz et al., 1987). Rigidity and slowness of movement are common symptoms of post-encephalitic Parkinsonism, which impact the upper and lower extremities of the body. People with post-encephalitic Parkinsonism, who are different from the ones with idiopathic Parkinson's illness, usually demonstrate kinesia paradoxical, a syndrome where the sufferer who lacks or loses movement is kinetic one minute and totally movement the next.

A ball being tossed is a common example of an exterior condition that causes mobility. Other mobility problems with acute encephalitis lethargica include chorea muscle spasms, trembling of a muscle as well as tics impacting jaws, palate, tongue, and lips. Oculogynic seizure is a prevalent symptom of acute encephalitis lethargica, appearing in 15-20% of sufferers during the epidemic's peak and 30% of post-encephalitic sufferers during the decades afterward (Sacks, 1990). Oculogynic seizure is a sudden upward perversion of the eyes which lasts from a few seconds to several hours. In this case, the sufferer's awareness remains intact, although he is also unable to raise his eyes spontaneously and freely, expect for significant effort but just for a brief period. The incidence of oculogyric seizures differs from one case to another and they may be triggered by feelings in some cases. In one of his studies, Blunt et al., (1997) depicts two cases, the first case has a severe cognitive impairment along with bradyphrenia and bradykinesia. The patient does not seem to have any mental or behavioral difficulties during the five and eighteen-month surveys.

The second case appears to have practical dysfunctions, motor perseverance, hesitating utterance, and apraxia. After six months, it appeared that these problems

may be resolved with a typical mini-mental condition checkup. However, Encephalitis Lethargica does not have a description. Many brain tumors impact the rear area of the brain (hypothalamus) and can cause extreme sleepiness. However, not all sufferers exhibit all of the signs, so not every sufferer's severity of illness will be similar. According to healthcare notes, nearly a third of people die as a result of a problem in respiratory induced via brain impairment (Dale RC, 2004). So, whereas thousands of sufferers perished, some others survive. Several patients who survive have Parkinsonian psychiatric symptoms that are still present. The survivors exhibit significant lethargy and remain in a sleep-like condition for a long time. Numerous of them in this category show rigidity in muscles and others react to levodopa, a modern Parkinson's illness treatment (Reid, A.H.; McCall, S.; Henry, J. M.; J.K., 2001).

The responsive reaction suggests that a condition, like Parkinson's disease (PD), can affect the significant nigra sometimes in certain ways. The sleeping sickness takes place in Europe and the USA during the period of the First World War, but it was not confirmed till 1930, even though a few people can occasionally demonstrate postencephalitic Parkinsonism (PEP) creating widespread disease outbreak of sleeping sickness shortly within the First World War, thereby resulting in the emergence of (PEP). This disease results mostly in the hypothalamus a region at the top of the brain. It frequently progresses through numerous phases (Sacks, 1990).

## 3.1.1. Sleeping Sickness, Consciousness, Memory, Trauma and Time in Pinter's "A Kind of Alaska"

One may wonder how those who recover from a coma feel. One can decide how to provide the greatest care for them by being aware of what they might go through when they are in a phase of coma. There are, various degrees of severity, but the acute case is the brain damage that causes the coma in the patients. Although not all patients with coma claim to feel or recall everything, several studies have indicated that there are steps family members may be the effective element to improve the patient's chances of waking up. In patients who recover from Encephalitis Lethargica, the emotion of life is neither expressed nor experienced. Several survivors relegate to a condition comparable to stone-like. Both the virus and the inflammatory processes have the potential to harm or even kill nerve endings, whereby a chronic brain trauma

describes this damage. Sacks (1973) states in his book "Awakenings" They would be awake but not completely conscious and would spend the entire day with their seats without moving or speaking with others, completely devoid of all vitality, motivation, initiative, affective desire, as well as appetite. They observe what happens around them without paying attention with a deep lack of interest. They are still as inactive as Zombies or as paltry ghosts.

Because the person is still breathing but he is not aware, a coma seems to be comparable to an imagination or dream experience. There is minimal brain function while someone is in the coma phase or "sleeping Sickness". The sufferer cannot react to contact, voices, speech, or other sensations. Through time, several people who have been in a coma phase recover consciousness. The source and extent of brain injury a person endures determine their potential to heal. Some people wake up from sleeping sickness and regain their consciousness with minimal to no long period probably repercussions, whereas others enter a vegetative condition after waking up.

Akin to being in a state of vegetative condition and passivity, the patient in this condition is awake but displays no symptoms of consciousness. The person may indeed slip into an impaired consciousness condition, with intermittent bouts of limited awareness (Hoffman, Leslie A.; Vilensky, Joel A., 2017). Those who recover from comas with full awareness sometimes experience distress, frustration, and disorientation. Even though the intensity of the consequences differs based on the type and origin of the coma, actually there are frequently long period ramifications. Patients with coma "sleeping sickness" have no concept of time passing. They believe as though their bodies are trapped because they have been inside the past. They frequently start to exhibit unusual, unpredictable behaviors. They feel they are frozen within their bodies. However, the best example of those who suffer is *Deborah*, the protagonist in Pinter's play "A Kind of Alaska".

This play is inspired by Sacks' book "Awakenings" (1973) which serves as the basis for Pinter's play a *Kind of Alaska* which consists of one act. After reading this medical book of an unusual disease that occurs during the period of 1920s, Pinter inspires to create his fictitious characters (Esslin, 1992). A full-length play by Pinter would indicate an evident return to the epistemological drama which normally illustrates the difficulty of obtaining real experience of knowledge (Gordon, 2013).

"Deborah was afflicted with encephalitis lethargica, sometimes Known as " sleeping Sickness" a rare pandemic condition that leaves the worst sufferers observant of their environment but speechless, immobile, and devoid of emotion or will" (Pinter, 1985). She wakes after a protracted period of sleeping sickness by injection of an unidentified medicine. Deborah does not recognize her doctor, Hornby who treats her, and tells her about the current situation after he comes to him.

Deborah: Well, how long have I been asleep?

Pause.

Hornby: You have been asleep for twenty-nine years.

Silence.

Deborah: You mean I'm dead?

Hornby: No. (A Kind of Alaska, P. 163).

Deborah: How did you wake me up?

Hornby: I make you with an injection.

Deborah: Lovely injection. Oh, I love it. And am I beautiful?

Hornby: Certainly.

Deborah: And you are my prince charming. Aren't you? (P. 168)

Deborah who takes into account herself to be a sixteen years old teenager begins to feel that her sister Pauline's long period memories and imagination are those that Deborah believes to have already happened, which indicates that her brain resumes working effectively in this phase while still images of therapy as though they are short-lived ones. Although the memories are connected to her childhood, Hornby strives to depict what happens. She also makes an effort to stifle the exposure of truth by creating fairy tales in which her family is all on vacation. The state of Deborah's psyche is unharmed. It only takes up interim residence in a kind of Alaska after being inoperative. Although Hornby tries to utilize this truth to reshape Deborah in the manner he chooses, Deborah does not wish to keep showing herself to other individuals as herself.

Deborah though has been listening figuratively for 29 years; she has been in the phase of coma but under the supervision of Hornby. She might have been allowed to awaken by herself without the need for an injection which would have put her under the supervision of Hornby and into various circumstances. Her mind traveled very far —off to different regions of the imagination. Deborah's progressive thawing out of the frozen condition that sleeping sickness left her. Deborah can reproduce the past phase after experiencing a quick picture of her separation from the world of reality for several years by controlling the understanding she receives from Hornby and Pauline's speech which includes a variety of genuine items and imaginary parts. According to Dominick Lacapra,( 2001) "trauma is an upsetting event which fractures the self and leaves gaps in reality". Deborah is caught among a horrific congealed unconsciousness and the current physical world living in a disconcerting obsolete condition that is an unfamiliar landscape among death and life. Caruth, (1996) debates "By rejecting what has occurred to them, the characters who were witness to such horrors, have eventually distanced and restricted themselves".

"You say I have been asleep. You say I am now awake. You say I have not awoken from the dead. You say I was not dreaming and am not dreaming now. You say I am a woman. She looks at Pauline, then back at Hornby. She is a widow. She doesn't go to her ballet classes anymore. Mummy and Daddy and Estelle are on a world cruise. They are stopped off in Bangkok. It' II be my birthday soon. I think I have the matter in proportion" (P. 190).

Deborah apparently cannot acknowledge the reality of her current memories, about what she has been acquainted with as evidence, thus Hornby and Pauline struggle to have the illocutionary impact on her. She is older than she thinks which can make it difficult for her to comprehend the scenario. Plain acts of communication are not a small achievement for a woman whose current conscious memories date back thirty years old. According to Crauth (1996), traumatic experiences cannot be completely understood. At the time they happened, they simply create a sense if they are recounted to and understood by someone else. Deborah's life is essentially obliterated by her coma first before the play even starts. Hornby illustrates this scenario by making use of visual pictures. "She was 'nowhere', and her mind took up a temporary habitation in a kind of Alaska" (P. 184). It is axiomatic that Deborah removes from the ordinary reality that other protagonists have developed. She is alone

completely strange, and remote. She adopts that when she confirms "Nothing has happened to me. I've been nowhere" (P. 166).

The sufferer can completely forget what happened. Additionally, if indeed the traumas related with recollections do resurface they are frequently unreliable, and the sufferer might express them verbally (Pederson, 2014). Hornby makes efforts to tap into Deborah's terrible memories to create a dependable narrative. Her trauma is trapped among the void of her missing years when she was in a coma and the reality of her current situation.

Due to the tantalization represented using 'nothing' and 'nowhere', Deborah seems to be unable to remember what occurs throughout her vegetative case, thus making it an impossible or unrealistic endeavor to erase this time from her existence. However, her claim highlights the fact that she feels robbed of most of the fundamental aspects of her life. Although Deborah's coma probably has contributed to this elimination of a significant portion of her existence, critics also point to gendered depictions as a possible cause. Pinter uses Deborah's illness as a vehicle to investigate the status of women throughout patriarchal societies. Her story concludes with her being bedridden and mute, a somber illustration of the effects that social attitude can have on her (Ann C. Hall, 1993).

Deborah focuses more on the fact that something is happening right now. She places a lot of emphasis on the present which seems exotic or at least inaccurate. Deborah's limited understanding of her life makes this evident. Although it is very odd Deborah's cryptic beginning and her focus on the current especially her usage of the present tense can be seen as suitable. One of Deborah's most evident assertions is simply that "something is happening" instead of "happened". Consequently, such assertion would only be somewhat more informative than making another two past tense assertions that use the pronoun "nothing" in their place.

However, even though it is just as uninformative and basic, the idea that "something is happening" is significantly more compulsory and appropriate. "It denotes a capability for effective, second-order, awareness which makes it extremely suitable for awakening for a sufferer of a sleeping sickness because it involves the consciousness or "cogito" that something is happening" (Sacks, 1990). Yeal Zarhy – levo (2009) reveals "Pinter makes the risky move to *A kind of Alaska* to break free

from the constraints of the critics' construction of his artistic identity". Pinter famously challenged writers and viewers who believed they should have definite access to the past and psychology of his characters (Esslin, 2000).

Deborah's psychology was damaged since her perceptive abilities were just recovered. In addition, because she has a very hazy memory she is ill, and her past is practically unreachable. This appears true for her recently awakened consciousness. Furthermore, this is critical because this reality is not only alluded to but is it historically disclosed during a pivotal scene in the play. Instead, Deborah constantly disregards or gives discontinuous answers to Hornby's inquiries about her history and sense of identity within the course of the play. Hornby's questions come off as forceful or out of the sky, and undoubtedly the investigation of Deborah has a very understandable personal and medical foundation.

For 29 years despite her willingness, Deborah has been restrained and chained to a bed. Hence, Hornby does not need to look for his target because Deborah has been in his care for a long time and he has chosen to awaken her. Deborah's decision to go back to her bed rather than keep resisting, in this case, ensures that she will continue to live under a patriarchal rule. Deborah gives us a specific example of a lady who no matter what she does will never have a status that is superior compared to that of Hornby the male who oppressed her. She is unable to even fully embody herself as a person since she lacks a fulfilling physical presence and must rely on a mental identity that is already eroding. Deborah is unable to impose herself even in the slightest given the tangible truth of her physical inadequacy. Consequently, Hornby makes sure to wake her up himself. He does this to intervene in Deborah's physical and psychological condition and stop her from upsetting the patriarchal system. In another study, Roland Laing (1970), states "inside family our sense of one's value and self-esteem may quickly be destroyed. How the manners for which our reality and experience are confirmed or rejected within our connections affect our perception of the world". If Deborah's memories are inaccurate and juvenile, one needs to recognize whether he/ she can depend on memory to create his identity.

Deborah's memories raise numerous questions in providing the clarity we seek. As a male character, Hornby manipulates Deborah's perception of reality to confuse her, perturb her and erase her recollections. He does this through controlling reality and protecting himself from calling to mind his sentiments. In other words, he tries to make her identity disorganized, and he successfully does that. Hornby is also seeking to dissect Deborah's version of her prior life. She experiences the interrogation procedure by Hornby. He stands in for the force of patriarchy; he attempts to stop Deborah from joining the patriarchal structure because he cannot comprehend that idea. Irigaray (1985), states "there is no need to create an image of the mirror to redouble ourselves. We are two before any depiction. Allow the two who were invoked for you using my blood and formed for you with your blood to be together in life". By believing that Deborah ought to be beneath his authority, Hornby is preserving his identity. This perception of stirring might also refer to Deborah's rejection to reduplicate his image, to represent an image, of his wish, instead of selecting to exist in objection and adding with it through the way of additive physical opposition.

Deborah tries to stir here selecting the shape of awakening and making an attitude against the organization of the patriarchal society. Moonyoung C. Ham (1993), believes "Hornby must sustain his identity throughout keeping Deborah's body and schedule under his eyes. He can affirm and support his own identity of male via maintaining his focus on her". Hornby is unable to convince Deborah that he is a full guy. Deborah is unable to react physically; she is sequestered within her mind, so because of her bodily loss she depends on Hornby and accepts responsibility for her behaviors.

Her resistance to being in reality which disempowers her stems from her incapacity to live as a completely conscious ontological person. Deborah pushes back to establish her autonomous personality and rejects Hornby's advice. Hornby's inquiry at the start of the drama forces the audience to pay attention to his standing instead of Deborah's experience. "Do you know me? Do you recognize me?" (P. 153). In this case, Deborah is put in a situation in which she has no independent existence and has entire dependence on him as the main aspect of her personality. She rejects this, though, and then when Deborah informs him, she switches the positions. "You are no one"(P. 155). Deborah demonstrates her consciousness of Hornby's endeavor to diminish her to nothingness and vehemently opposes it with this blunt and angry reply. Therefore, the play's opening scenes depict Deborah gradually coming out of her coma and getting dominance of her personality while establishing her undeniable existence

on stage. Deborah's gradual regaining of control is similarly accomplished throughout a shift from silence to speech and communication. The coma theme enables Pinter to demonstrate the importance and depth that many voices may be speechless and ignored by the inattention of the vulnerable subject. Listening to the voices of silence may be the first phase to recognize their existence so the transition from imperceptibility to awareness involves significant aural aspects (Guillaume Le Blanc, 2007).

Deborah, who protests at the play's commencement, may be a good example. "No one hears what I say. No one is listening to me" (p. 154). Deborah modifies her memories and imagination and speaks with them. She chooses her sister Pauline's more careful speech about the voyage and employs it as a claim or reality. Since her sense of self after she wakes up is connected to the selective memories and shady past Deborah has just before falling into her coma, the issue of time, recollection, and identity are unavoidably complicated. Moongyoung C. Ham, (1993), states "Pinter arouses a woman who is pre-fixed inside a gender framework, yet he also depicts the attempt by a figure of father to enforce again the framework on the newborn woman". Deborah lacks the roles necessary to establish a new identity and to replace an existing one, common bits of data such as previous relationships past, and age which are customarily thought to be essential to one sense of self.

However, the play's investigation of Deborah's identity both by herself and with Hornby's help is adequate given how the sensation of the equally uninformed audience is recreated on stage. Deborah's worries are considerably more existential throughout Alaska. The play needs to be more fundamental than any issue about a protagonist's psychological support if it mirrors the sensation one currently has in connection to Deborah. Hornby who is both her caregiver and her brother-in-law is more likely to be familiar with Deborah's made-up history. However, as his quite simple questions make clear, Hornby is equally clueless about Deborah's identity. Consequently, his questions are metatheatrical since they subtly suggest Hornby's lack of acquaintance with Deborah's personality.

It is important to emphasize that Deborah's lack of knowledge of her background is comparable to the audience's limited exposure to her biography. Instead, Pinter sparingly employs devices to create a single character that is ignorant and doubtful of their past and identity to create the penetrating sensation of metatheatre

which permeates the entire play. "Do you know me?" Hornby's question highlights this issue because it conveys Deborah's lack of familiarity with Hornby's identity. To discover Deborah's new and different identity, she must embrace her current state, which necessitates accepting that she is no longer able to remember the events of the past of the previous 29 years, shattering the continuity of time. Yet as Pauline and Hornby's recollections are involved, they reveal in the riddle of such gaps of 29 years with the incomplete details that their identities are inextricably related to Deborah's sleeping. Pauline observes the development of the illness and the passing of age when she is asleep.

In the play, recollection also serves as a warning to make us aware of the world's justices including both past and current ones. The idea that one constructs his identity in connection to how he puts himself related to recollections of both his own experiences and also larger groups of cultural recollections is central to these realities. In the diverse structure and context, memory is used by manipulative characters as a tool to construct or struggle for a specified identity. The limits of Deborah's reality and Hornby's are established by Deborah's inquiry right at the start of the play. The process of giving Deborah an injection to rouse her up might make us focus on how invasive this technique is and how it affects how the person's identity is suppressed. Hornby's injection to awaken Deborah might be seen through the lens of gender politics. He prevents her body from choosing to awaken in response to other more typical auricular and some other non-intrusive sensational prompting or from spending the time required to accomplish so.

In doing so, Hornby denies her the freedom to speak, her mind and ultimately destroys her sense of self as a person and a woman second. In this way, he establishes his control over Deborah right away. He informs her that he takes better care of her which implies that he keeps an eye on her. To put it another way, his control over Deborah is initially made clear as a result of his gaze. Besides, Micher Foucault (1973) states "we work to get a thorough, objective understanding for every patient's condition and compile all the facts about them into a dossier for them to be capable to provide them a course of therapy that is precisely suited to their sickness and themselves. We watch him as we watch the stars or a science experiment". Based on this point, Hornby is the person who is in control of the scientific gaze and treats Deborah like a test subject. Because Hornby controls the gaze it follows that he also

determines the truth about Deborah's body, he proceeds to enact an intrusive interference through the uninvited permeation of his injection.

Deborah's description is lyrical, and accurate when Hornby introduces the novel notion that she is in a kind of Alaska. Pauline's and Hornby's memories have expositional functions. They elucidate Deborah's fate and the history of her family, forming a narrative context that gives meaning to the past and the present of both Deborah and the audience. Deborah's memories are lyrical in character. Her childhood memories serve to define herself and her identity subjectively. The memories connected with her illness conjure up the phantasmagoric." No man's land" Alaska, in which her consciousness has traveled in the meantime" (A Kind of Alaska P. 165). Deborah's final remarks demonstrate that although being prepared to live with the enormity of what has occurred to her, she is indeed not ready to comprehend the current reality, specifically, her father's blindness as well as her mother's passing. Her refusing to look in the mirror is a denial of her current identity. Pinter so skillfully captures the slow and arduous restoration of awareness, the reappearance of consciousness from a condition of deep transformation which spanned several years. Time passes within Pinter's play as well, but it is different from the fantasy reality of fairy tales, thereby leaving a devastating mark on Deborah who wakes with the body of an adult woman after having deep sleeping when she was young.

Deborah: How did you wake me up?

Pause. Or did you not wake me up? Did I just wake up myself? All by myself? Or did you wake me with a magic wand?

Hornby: I woke you with an injection.

Deborah: Lovely injection oh how I love it. And am I beautiful?

Hornby: Certainly.

Deborah: And you are my prince charming. Aren't you? (P. 168).

Deborah specifically alludes to the fairy tales of something like the "sleeping beauty" throughout the conversation with her doctor Hornby emphasizing the nearly supernatural quality of her recovery. She struggles to comprehend a present reality which is strange to her because, when she thinks back of her previous phase, she believes she seems to be the same girl of twenty-nine years previously. Hornby

accentuates the contrast between both the time lived as an individual experience and the actual, real-time that moves irreversible and suffering of humans, though an effort promotes Deborah to be conscious of the passing of time. Further, (Sacks, 1985) shows that Pinter influences Rose state to create Deborah's character. Sacks compare the woman to a "sleeping beauty" who is unable to manage her recovery and who will not be able to wake once more in his book "Awakenings". Deborah's initial appearance on stage in the bed highlights the issue of how the sick body is perceived.

Her body will unavoidably be uncovered, and is exposed to view. Her body also continues to deteriorate despite her wish to appear in control. Physical dispossession seems to be the difference in what the individual wants as well as what his body forces on him, something that the body's dramatic exposure serves to emphasize. Patients are conscious of their inactivity in connection with their bodies, so they discover of every form of this occurs with their inactivity to grasp what the perspective and reality of the old or even the ill reveal us something about ourselves (Sacks, 1985). Deborah is presented as the story's major character. She can become seen and heard. A Kind of Alaska transforms the sick person's typically unseen and motionless body into a theatrical figure. Moreover, Pelluchon (2009) states" the propensity in our society to still care for the disabled and elderly while they are maintained at a distance or hidden within remote areas". Consequently, the coma acts as a noise canceling mechanism, strengthened throughout the spatial form of Alaska. Deborah's comment yet has considerably more significance when it is spoken aloud on stage when the setting obscures its meaning and the audience is paying attention.

She permits herself to come out of stillness thanks to spectacular presentation and personification. As Deborah argues, the text acknowledges the journey from quiet to expression. "I spoke, but I don't think they heard what I said" (156). Indeed, the past tense of such a remark provides for a certain range and suggests that the conditions and circumstances differ making it seem less certain than the first one. Despite what seems to be their defeat, the sentence is nonetheless framed by the phrases "I spoke" and "I said". Deborah may not have been recognized because of her fragile situation, which prohibits her from being heard, although she is truly the focus of several eyes. She loses her capability to behave after she is observed and touched. According to Freud and Caruth (1996), "Trauma has a 'deferred action which results in ignorance, latency, rejection as well as the inability to express the agony for the victims". Deborah's agony

of being trapped among the void of the years she missed when was asleep and the reality of her current existence are portrayed in a hazy, unfathomable, and unreachable story. Deborah's squeeze scene, which serves as the play's climax reflects her difficulty controlling her own emotions.

She shows to be gradually retrieving control and recognizes her predicament to the point where it is distressing to witness her body retake dominance of herself after she discovers herself halted through a squeeze and is therefore incapable to continue her line of thinking. Throughout the play, we note the collapse of language which emphasizes Deborah's distress at feeling imprisoned inside her body. She also undergoes a physical transformation, becoming hunchbacked which gives a startling impression of a twisted, tormented figure. Deborah lacks power and freedom, she is subordinate to needs. Her existence as a human and her body the topic appears to be divided.

Deborah is a perfect example of how vulnerable we are to the limitations that our bodies can place on us all. Ageing and misery aren't simply memories and experiences which prevent self-integration or restoration. They represent this impossibility; our identity does not adhere to the norm (Pelluchon, 2009). The text shows Deborah's development from becoming another person's comments. "She's looking at me" (p.175). She highlights the importance of being treated as an agent. "You're looking at me" (P.175). Deborah's appeal for her sister, which comes to a head just a moment later, "Let me look into your eyes" (P. 178), attests to the fact that she may be conscious of her recently rediscovered capacity to regulate her gaze. She is given adequate vision and audibility on stage after being obliterated as a result of her unconsciousness. She succeeds to adapt to a far more effective function in which she is capable to take a glance at the others around her, even though at first increased vision can be perceived as a symptom of her exposure like a controllable thing.

### 3.1.2. Pinter's treatment of memory in "A Kind of Alaska"

Undoubtedly, memory is a topic that intersects with several academic disciplines, including psychology, psychiatry, cultural anthropology, literature as well as sociology. Human memory comparatively or ambiguously is skillfully described as its fundamental components that lead to major disagreement or distort interpersonal

communication. In other words, language's opacity which frequently represents what occurs and what is taking place through error is inextricably linked to memory's opacity. As a result, one can assert that this particular ideological use of language possesses the destructive capacity that alter and obliterate reality. One should be aware that while he can still recall and appreciate his past and feel positive about these memories, one must try to build a fulfilling present to develop further happy memories (Charning & Strouse, 1977).

It is important to remember that memory is a continuous process that allows each person to learn, remember, and recollect a specific incident through the encoding, preservation, and retrieval of information. Memories influence how the person speaks, guide his conversation in various ways, and manipulate time. In psychological instability, it is founded that the best thing is silence. So rather than speaking, we hear voices of convoluted thoughts. When an individual speaks on the past which is filled with omissions and unsolved questions, memory seems to be in various phases of reliving the past, and erasing the present becomes silence's ally. The certainty of autobiographical memory to identity, overwhelming feelings, individuality and other characteristics that identify a person is what gives it its essential signification (Morris& Maissto, 2002).

It is generally acknowledged that memories recreate the past and to appreciate biographical constancy, distinct memories are required. We could not connect our unique past to ourselves without personal memory. Therefore, contemporary British literature frequently explores the intimate connection between the past and memory, and numerous literary texts have addressed the importance of memory. The play "A Kind of Alaska" by Pinter embodies the state of narrative memory and Pinter's attempts to discover innovative ways to tell tales of horror and elicit sympathy from the audience. The play focuses on melancholy, the witness of narrative memory, as well as the effects of trauma. Deborah's memory story helps recreate a sense of loss, melancholy, and progress. Pinter is a memory playwright; the majority of this play gives the characters or actions in them a definite past. He views the past as a hazy realm, and his play clarifies this view. Pinter blurs the distinction between memories of the past and the present by showing how his characters see it today. Consequently, Pinter believes that characters' current circumstances are influenced by their prior

experiences. Characters are constantly caught in a painful condition of need and reality.

The conflict and gap which one believes that human beings are born in between both the impulse to find image completeness and the perverse struggle of the aims of need are what Pinter attempts to depict throughout his plays (Bowie, 1987). In "A Kind of Alaska" Pinter presents a gloomy interpretation of the interaction between the patient and the doctor. Deborah, the patient, is given power within Pinter's play, and her doctor Hornby's efforts to resolve the entire problems are scrutinized. The drama depicts Hornby's obsession with Deborah to the extent that he confesses to marrying Deborah's sister. In spite of continuing to be completely preoccupied with his patient Deborah. Pinter introduces the play as the kind of therapy session throughout the discussion between Deborah and Hornby that serves as the foundation for the entire play, which is almost interpretable as a dramatic representation of reality. According to Ann C. Hall (1993), the play's setting gives the playwright the ideal opportunity to explore his standard comprehensive themes including the fallibility of memory, the difficulty of connection as well as the ambiguity of human experience and identity.

The picture of a lady is in a pristine condition of completeness whereas the first sentences of the play indicate "something is happening" (A Kind of Alaska, P.155). When it starts the same line is repeated in the next sentences, emphasizing the speaker's astonishment and shock at finding herself in an entirely foreign world. Deborah is unable to definitively determine the reality. The disparity between what Deborah and Hornby stand for is entirely apparent in the two characters' conversations as soon as they start speaking.

Deborah: Do you recognize me? Silence.

Hornby: Do you Know me?

Silence. Can you hear me? She does not look at him. (PP.153-4)

Hornby's using the phrase "Do you know me?" indicates the identity which relates to the past, and "Are you hearing? indicates a current reality that one is supposed to be familiar with and accept it. Since they have continued to follow each other's speech as they have to develop their conversation. Deborah's sentence is to seek a unique language, whereby, Hornby's will adhere to the signaling social language.

Their expressions give away their personalities. The significance of a name is something the physician emphasizes." Do you know who am I?" (p.154). This is language serves as the topic for other signifiers (Bowie, 1987). Hornby's strategy is quite straightforward, but it goes awry in two ways. First, Hornby wants to know if Deborah can recognize him to comprehend her awakened cognitive process. Deborah replies "you are no one"(P.155) in answering his inquires. This is a setback for Hornby's strategy; her rationale is predicated on the notion that Deborah's capacity or incapacity to recognize him will convey information about her identity, specifically the degree of her recollection. Deborah, however, is unable to infer anything significant of her own identity within her remark and simultaneously rejects Hornby's identity.

Additionally, Hornby's plan is unsuccessful because he overlooks the significance of Deborah's illness-related incapacity to recollect any coherent memories. The two kinds of memories Deborah has within the play can now be distinguished in an indicative way. The first type describes as pre-illness recollections. Deborah remembers several events before the start of the sleeping sickness, despite the passage of time obscurity them. The second type is categorized as recollections about her sleeping sickness such as those which infer from at least some point during her disease. These memories are hazy and unreliable. Among the first signs that Deborah cannot recall this period is that she does not know Hornby. However, there are serious ramifications to this shortcoming most importantly; Hornby and Pauline have a sole authorial power over the details about what happened during Deborah's illness because of her poor memory of those years. Hornby and Pauline both make an effort to let Deborah know how much their suffering has been caused by her disease. These initiatives seem at worst trivial and at least fruitless.

Hornby makes an effort to place this collective consciousness of women within the patriarchal world of events, truths, names, ideas, and reasons all through the course of his speech. Indeed, the collective memory is more explicit. To preserve and defend the individual's identity memory seems to be threatened by their silences. One must bring up various aspects of the concepts of time and memory to highlight the discussion of memory as a conversation in the play because when one further analyzes memory and understands its various aspects, he concludes that it is closely dependent on time (Hale H., 1986). In his study, Butler (2006) reveals "our bodies leave us in danger to become the source and device of these things since our flesh and skin

disclose us with other people's eyes, touch and aggression". Her body is more apparent than the typical body of the patient because it is standing at an angle.

It may assist in objectification; however, Deborah gets conscious of her sight as the drama progresses. Her capacity to be authentic and maintain control of her sight is demonstrated by Pauline's horror upon realizing her sister staring at her. Any dependence on such an autonomous and cohesive self is rendered useless by the bodily needs of the body. Deborah's disease serves as a reminder of our inherent vulnerability, which makes us dependent on others to live. In their study, (Mackenzie, Rogers, and Dodds, 2014)state that being prone to injury and misery makes one weak, and susceptible, and it is an essential quality of our nature of existence. To illustrate more, Deborah is used as a stark illusion of that kind of human weakness. Further,Merleau-Ponty,(2012), indicates "I perceive that my body represents my perspective of the reality, to be one of its objects, so I'm unable to comprehend the role of the living body of other through engaging myself with it and within the framework of a body which raises toward this world". In light of what was said above, Deborah seems unable to exist when she was in a coma. She makes sincere efforts to maintain an ontological presence, as evidenced by the occasionally startling bodily motions of her legs.

Deborah, although trapped in a coma, makes an unconscious effort to connect to reality by her corporeality. Her dread of relinquishing her limbs, which is what links her with the outside world, is what caused her spasmodic motions. Her endeavors to move or perform dancing without Hornby's assistance are affirming her identity which in a way explains those efforts. Deborah's endeavors to execute a complete somatic presence are unsuccessful since her withdrawal from the external reality has resulted in a corporeal weakness that prevents her from being able to accomplish this. This means that Deborah's mobility throughout her coma was insufficient to qualify as a full endeavor to fit in rather, than, a sort of lingering sign of the inevitable existence of corporeality. Deborah's condition must have been deeply traumatic for her. Eventually, Hornby contributes to emphasizing this idea. "She has been coming to see you regularly for a long time. She has suffered for you. She has never forsaken you. Nor I" (p.183).

Deborah is unable to grasp the significance of this speech. She finds it difficult to understand fully what Hornby and Pauline are trying to explain but their efforts are comprehensible. It is possible to view Hornby's attempts as merely a continuation of the attention he has already given. There is no doubt a question that the significant medical benefit to attempt to gradually and accurately re-integrate Deborah's awakened consciousness into reality. Deborah also demonstrates the idea that she pays attention by summarizing the main points of Hornby's arguments. By manipulating the information she learns from Hornby and Pauline's speech, which contains both realistic and fantastical parts. Deborah can recreate the past phase after having a rapid visual of her withdrawal from reality for many years.

Deborah uses terms from her childhood to refer to her parents and also to abuse her sister inappropriately. Her vocabulary constitutes of the recollections she has been able to regain (Gordon, 2013). Deborah only takes certain incidents involving her parents as well as her birthday together with her current memories about what she has been informed as proof. Utilizing reported words to characterize her prior twenty-nine years is by no way recognition she removes herself from her present condition through trying to speak about herself. She also seems to have ignored Hornby's description of her father's state of blindness in addition to Estella's caregiving marriage and the news of her mother's departure. Deborah chooses Pauline's more cheerful speech about the voyage and employs it as a claim or reality. Since her sense of self after she wakes up is connected to the selective memories and shady past Deborah has just before falling into her coma, the issue of time, recollection, and identity are inextricably intertwined.

However, Deborah can step foot into Hornby's language as Deborah's sister Pauline stands next to her. Deborah is introduced to other crucial elements of the language realm through the sister's portrayal of sorrow, her depiction of their dedication to Deborah, and her description of the family which is both partially real and somewhat false. The idea of lying and ethical concept of trust brings the social realm's whole shape into focus. Additionally, it brings Deborah's arduous process of self- transplantation to a close. As Deborah state: "I must be quite old. I wonder what I look like. You say I have been asleep. You say I am a woman. Mummy and Daddy and Estella are on a world cruise. I think I have the matter in proportion" (PP.189-90). The reality which Deborah recognizes contains both fact and fiction. The fact is that she has been dormant for several years; whereas the fiction is that her family is not on a voyage but rather is in a hopeless situation with her mother's departure, her father's

blindness as well as Estella's miserable marriage. Deborah's impending birthday celebration does serve as a reminder of her recent birth.

She isn't the one who feels the difference and separation. She experiences disparity between the prior dream and the current reality (Hale, Steven H., 1986). Deborah switches back and forth between her realm in the past and Hornby's in the present within the play. She makes brief efforts to introduce memories that are connected to her childhood; Hornby strives to depict all that happens. He also creates fairy stories in which Pauline and her parents are all on vacation to prevent the disclosure to the reality (Mengel, E., 2001). Hornby attempts to get Deborah to understand the fundamental truths and ideas such as age, time, and the way people lived in the past that shaped the world. "I would like you to listen to me. Pause. You have been asleep for a very long time. You have now woken up. You are still young, but older" (P.155). However, he adopts a paternal attitude for most of their conversation to clear up her misunderstandings and place her within the proper sequence.

Deborah: Tell her (Deborah's sister) not to marry him. She'll listen to you. Pause. Daddy?

Hornby: She didn't marry him.

Deborah: Didn't?

Hornby: She didn't marry him.

Deborah: But you mean I've been dead?

Hornby: If you had been dead you wouldn't be alive now.

Deborah: Are you sure?

Hornby: No one wakes from the dead. (PP. 159-64)

In this situation, he continually establishes a new mechanism of facts and reasons in Deborah's consciousness whereas she continues in thinking more in terms of her recollections. She clings passionately to Alaska's realm of white fullness in memories, resisting Hornby's efforts to reintegrate her into the regular reality of the paternal speech and groping helplessly for a reference point. Meraleau-Ponty (2012) states "the body serves as the main point of perception for our surrounding

environment. The body and its awareness function as one cohesive system for taking in the outside world". Deborah fights for a distinct presence and identity in the society by acting out her body. After failing in her past attempts to shield her thoughts and recollections, she now wants to maintain her body. She refuses to perceive Hornby's image to be her own identity. The refusal of Deborah to take part in several normative, frequently hidden patriarchal acts may be also explained in terms of phenomenology.

Hornby has lived within Deborah's body ever since she entered a coma. She must first occupy and behave with her body like an object to resist Hornby's dominance since a living thing must be involved in a specific environment. Deborah should realize that despite her best efforts, she is unable to embody her identity within her physical existence since everything she will ever encounter is a frail body that is nearly constantly confined to her miserable bed. Her vision, memories, and previous life have been efforts by her side to create an identity through recollections to liberate her from turning into the imprisonment of corporeality. In this case, Deborah's mind and body are not linked and are mutually dependent. As having a body is equivalent to owing a present (Merleau-ponty, 2012). Deborah does not own a present because she lacks control over her body inside the patriarchal society in which she lives. As a result, she withdraws into her previous life, recollections, and vision to assume a persona that competes with Hornby's various representations of her within a struggle for control over her existence. She loses this struggle once more because she lacks a bodily or memorial existence.

Deborah tries to maintain her corporeality via keeping to inhabiting Hornby's mind for the past 29 years which implies she has relinquished responsibility for experiencing and enacting her own somatically steadfast connection with reality. To state the matter differently, Deborah has succeeded in maintaining Hornby keep an eye on her body to keep it alive. Hornby has been capable of negotiating the domination of patriarchy for him as the cost of that withdrawal of somatic duty. In terms of phenomenology, a typical person's body seems to be a vehicle of existence. Judith Butler (1990) confirms "the core and identity which such behaviors gestures and pieces of legislation may attempt to reflect are fabrications produced and maintained by physical signs as well as other digressive techniques. As such, they seem to be performative throughout the notion that they are created". These narratives make it abundantly evident how important corporeality is not just for existence but also for the

fulfillment of sexual satisfaction, which Deborah has been denied because she has not lived up to her corporeality.

Deborah consistently resists Hornby's efforts to force numerous realities upon her awareness by finding safety in her previous reality. Therefore, when Hornby asks her, "Who am I?)Deborah replies "You are no one"(P.155). Memory and time are used interchangeably as thematic materials throughout this play to satisfy psychological demands. Even though these two themes are commonplace, this is seen as a very lyrical contemplation of memory and time. Deborah prefers to remain within her comfortable world which has a private language. If Hornby's social structure is characterized by father dominance and logical concepts, Deborah's realm of sleeping is characterized by maternal power and physiological instinct.

She attempts to combat the oppressive world of the present by using the power and authority of her mother. "If I have been asleep, why hasn't Mummy woken me up?" (P.157). Deborah makes it very evident that she inhabits a realm of the body rather than the one of ideas or morals. "It was my lust that made me cry. You are a devil. My lust was my own. I kept it by myself". (P.161) she also utilizes the law of the body to defend her actions. "What is wrong with that? Why do you blame me? I was simply obeying the law of the body" (P.163). In another study, (Holland, 1999) reveals "The shift from Hornby's realm of names, truths, and ideas into her universe of Mummy as well as the law of the body implies a transition that is comparable to Lancanian shift from mirror stage into the symbolical stage. Individuals lose connection with the physical world of bodily material or when they separate from their mothers' means embracing the domain of significance and the law of the meaning in their venue". Hornby wants to know if Deborah is aware that he is monitoring her by questioning her whether she identifies with him. By his gaze, he seeks to assert his dominance and position of authority.

Hornby desires to mold Deborah's personality as a result of his gaze. By addressing Deborah as a lady under his dominance, he is making a significant statement about himself in his speech. Hornby repeatedly counters Deborah's speech by doubting, scenting, and rejecting what she has to say. He believes that he is the only one with access to the facts. Deborah is an inadequate woman, she needs him whereas he is a man and he has logos. She does not have a vision of him, she cannot get her

body or her speech since doing so would undermine the dominance of men. According to Moonyoung (1993), Hornby makes certain to wake Deborah himself since he wants to be the person who can either ruin or save her because he previously controls her speech and her story. Hornby has taken this preventive measure to uphold the patriarchal structure. Deborah seems to have been a young girl, as revealed by her memories.

Hornby recognizes the impending threat and tries to squash it in the bud because Deborah may imitate a male and behave as a male entity. Besides, Irigaray (1985) states "men's concerns about a woman's perspective power are confirmed when she takes on a male role. Such a woman is already capable of making an affirmation out of a subordinate position". Hornby makes sure that Deborah is awakened by employing his oppressive weapons since he is terrified by her awakening and having feelings of resentment. Trying to deny that she has any brothers may also be a tactic, whereby Hornby does refute Deborah's memories using ones that differ from her own and support his power as a paternal figure. By Hornby's version of events, there are no brothers in Deborah's family which explains why he dominates the female member of Deborah's family.

Deborah finds it difficult to embody the action of controlling her existence and actively influencing rather than merely reaching her surroundings. She finally fails in her mission to complete this. Hornby's existence and personality are threatened by Deborah's identity and presence because if she refuses to give him the power to dominate her, he would forfeit both. He has been a father for 29 years. Deborah will up-end Hornby's entire identity if she can break the gaze via what he has created his personality. She does not glance at Hornby after she first gets out of bed because of this. Consequently, Deborah opposes the idea of change as well as the upheaval it causes. The key idea here is that she opposes Hornby's enforced world of facts while simultaneously attempting to acclimate to the current state because over time she begins to ask a question and connect them with her realm. The past is dramatic as it is investigated via contrasting recollections since the variety of potential action expands and due to the audience is kept in constant curiosity by the ambiguity of the result (Martineau, Stephen, 1970).

Deborah, however, feels confined in the present world since she is stuck in this gaping hole. As she states, "I've committed a criminal offense and am now in prison. I'm quite prepared to face up to the fact. But what offense? Such a terrible sentence". According to Helen Cixous (1983)," theatre is designed to attract men's attention. She asserts that it was constructed by male fantasies. Theatre has used females as props to satisfy men's fantasies and needs. They are now immobile, frozen, locked, and steady inside the confines of gender". Therefore, within her mental recollection, Deborah is set, immobile, and frozen. By acting as a subject of observation and giving him a sense of dominance and superiority, she has provided Hornby with a purpose of satisfaction. Deborah does not intend to gaze in the mirror because she does not want to see the image of anyone who is in charge of her, particularly patriarchy. She prefers to see her inner reflection in the mirror because that is what she is battling for.

More research into a psychoanalytic approach that views the stage of the mirror as a crucial one within forming the ego is prompted by this focus on the mirror and vision. Lacan (1953) indicates A drama whose central conflict results from a lack of expectation and that creates for the subject trapped in the seduction of spatial identification a series of fantasy that range from segmented body –image to a type of its integrity which we will consider orthopedic and finally to the presumption of the armor of isolating identity that will highlight the subject's a whole intellectual development with its static structure. Deborah seems to be the mirror throughout which Hornby is recreating his identity. He must have created his identity by his erroneous perception of Deborah's appearance based on the reality that he stands beside her throughout all these years. When Deborah senses that Hornby attempts to provide her with an identity chosen based on his own story, she responds with a special version drawn from her recollection. The mirror Hornby currently observes by Deborah is not the clear one that she was able to give him whereas she was unconscious and completely under his influence and power. She officially just existed like a possession, an object which Hornby always treated and controlled even though certain actions aided sometimes in a tiny way to maintain her existence.

Even though their efforts by Deborah to belong went awry, they can still be seen in the uncontrollable motions she makes when was unconscious. However, she is resisting Hornby's influence in such subliminal and lingering manners. Even though she thinks she has been abducted or scarified by Hornby, Deborah still recalls her

sister's exhortation which was purposefully stated as continuous in both the current and the past form. Moreover, Merleau-Ponty (2012) states speech seems to be the physical behavior that is most closely connected to community life or as we'll call it 'co-existence' out of all the physical behaviors, therefore, when a sentiment chooses to manifest itself through lack of speech this is why. Speech absence then represents the rejection of co-existence.

In addition to Deborah's abandoning her struggle with Hornby's patriarchal image her unwillingness to integrate into society via speech and physical existence makes her into a leech that can be simply swapped as long as she has not rebelled and started fighting back. In another study, Elizabeth Sakellaridou (1988) reveals the doctor uses brief, straightforward lines and a tone devoid of oratorical abrasiveness or the brashness that several of Pinter's protagonists attempt to use to mask their impairment and lack of experiences. His assertion is not a self-serving demand for acknowledgment of his sacrifices; rather, it is a modest confusion of natural love, simple compassion, and truthful devotion. By constantly evaluating and rejecting Deborah's psychological identity, Hornby discovers that it is simple to control it. He listens to her stories and then recreates them for her in a manner that makes her realize how factious her memories are. Without taking physical behavior, Deborah's psychological identity is found to be insufficient to free her from Hornby's control. Hornby is put in danger by Deborah's independence, both physically and mentally. He hence takes care to maintain control over the position. If we take into account how strong matriarchy is in rudimentary communities, Hornby's dread of Deborah's independence may be reasonable given that a woman influences the patriarch. Hornby, though, frequently states that he looks after Deborah. His presumption that she would need care and nourishment long after her family had abandoned her appears to be wholly selfless.

Deborah consequently has become a leech that has easily been moved from her family to Hornby as a result of ontological withdrawal and her rejection to participate throughout this society through acting with her body. Deborah recognizes the significance of the body's becoming independent and autonomous within her inactive years, although she is never successful in achieving that. The significance of the body lies within both its physical and intellectual functions Deborah's body is missing. It is a misshapen reflection now. Hornby decides to correct her course to mirror his

personality which is still a dominantly male one. Deborah is a disobedient woman who wants to be silenced to maintain the subordinate position woman is always granted. However, Deborah seems to be questioning Hornby's right to retain influence over her story, her existence, and her body through the way she worded her inquiries. To design her as his reflection in other terms, she is creating her identity via her memories that serve as the foundation for another person to understand her subjectivity. However, those memories are readily controlled, challenged, and altered by others' convenience. Deborah's memories act as the foundation from which her identity as well as her ideas, images, symbols, and language are created. Therefore, another can use these symbols and an image to reinterpret them in a manner that compels the subject to confess at least implicitly, that perhaps the idealized image he constructed of himself and used to perform his identity is false.

### **CONCLUSION**

Regarding what was mentioned above; being human requires having experience. It embraces and frequently invigorates us whether gently and quietly or fiercely even mercilessly. Our psychological fingerprints which serve as both a definition and an expression of which we are created as we respond to experience. Thus, when they are a form of behavior, numinous, exaggerated, or extraordinary, these responses to experience are all frequently pathologies, treated and branded rather than appreciated. Experience may be exciting fun and pleasurable or it may be difficult and isolating, however, an opportunity can be founded in any situation. In this regard, Bibliotherapy is an important strategy that may be applied to deal with the psychological and emotional problems that people experience, because psychological problems range in intensity. The therapeutic approach is founded on specific presumptions concerning behaviors. Each approach contains shared beliefs regarding how to characterize, practice, and demonstrate behaviors. Understanding our minds and how they affect our behaviors is the goal of psychology. Recognizing what motivates our choices, behavior, ideas, and emotions enables us to address and confront any obstacles and experiences we may be going to face. The therapeutic approach or bibliotherapy examines interaction, memory, consciousness, feelings, ideas, and emotional reaction.

It is a cognitive behavioral therapy used to address emotional issues such as strain, frustration, anxiety, depressed mood, low self-esteem, loss of confidence as well as many associated issues concerning racism. It also promotes mental health. The therapy may help people of different ages develop self-awareness, and boost identity by reducing psychological and emotional sickness, and assisting in the capacity to deal with developmental difficulties. Thus, this study demonstrated the value of bibliotherapy in the management of psychological issues.

Within the play *All God's Chillun Got Wings*, O'Neill highlights the psychological and emotional suffering that results from the social, economic, and governmental inequalities that African –Americans face in the United States. Compared to white people, blacks experience racial prejudice at much higher rates. In any case of their neighborhood's racial makeup, economic background, or gender. According to the analysis given, racism is drawing the line between a cultural factor of

particular behaviors and identity development. The element has a significant retrogressive effect on the protagonists within the play of AGCGW in which the protagonists degenerate into genuine madness. The psychic breakdown displays a black individual's personality problems against a background of racial and cultural concerns.

There are still various types of racial discrimination in America. Black people and white people cannot be friends or get married. Black and white couples would face a lot of social problems if they decide to marry. For instance, Jim experiences unfavorable behaviors from white folks throughout the play. Jim is perceived by white people as being unable to practice law due to his ignorance. Ella also receives bad behaviors from black people. Her marriage to Jim cannot be approved by the community. Therefore, whites and blacks cannot consolidate together. The play tells the account of Jim and Ella's unhappy marriage. At multiple levels, O'Neill presents Jim's life as dualistic. Jim's wife, Ella, longs for her husband to turn white even though that is physically impossible. They cling to the fantasy that Jim as a lawyer will gain the esteem of the white community. Jim tries to pass as white which is of a treasonous goal for someone of his race. His compliance with Ella's irrational demand for a secluded and brotherly life helped promote the discriminatory idea that African Americans should be subordinate to whites. Blacks suffered a setback as a result of Jim's capitulation in the play's racial setting.

O'Neill emphasizes that in the minds of black people, being white is equivalent to social superiority, economic dominance, exploitation, the rule of the supremacy of the law, and oppression. He chooses to minimize the importance of the racial components illustrating the unique lives of various people and their sad pursuit of happiness. O'Neill succeeds in avoiding stereotypical portrayals of black people, but more significantly, the play offers a new and accurate perspective of racial race issues in the American society and effectively captures the pain of consolidation and assimilation. That is, he equally and effectively portrays both races on the stage.

O'Neill conveys society's opposition to interracial marriage on the stage. Ella's affection to Jim and her ingrained prejudice against him are at odds with one another. As a result, Ella has conflicting feelings about asking her husband to succeed. Her apprehension of his prosperity stems from her apprehension of losing control of him.

O'Neill breaks the preconception of the black guy as a 'penis symbol' by choosing to depict an interracial relationship without children. Ella's marriage to Jim serves as the final straw that causes her to lose her mind. It represents her ultimate degeneration. Her fits of insanity are brought on by things that are close by and ominous, whether they are Jim or his family. O'Neill has a distinctive propensity for persistently dramatizing intense emotional and psychiatric conditions throughout his artistic endeavors. However, demonstrating the concept of worthiness concerning exceptionalism gives them a negative meaning. A feeling of supremacy and authority is frequently presented within exceptionalism ideology. In the play of AGCGW, O'Neill raises the issues of individual worthiness and chooses a conventional approach to address them. He refers to the deceptive character of the Puritan Myths of liberty and equivalence.

The playwright succeeds in demonstrating how the above-mentioned moral imperatives become diametrically opposites to the community he portrays. People tend to judge others' worthiness more frequently based on their ethnicity and race rather than on their good activities. However, the play's notion of worthiness has a complicated structure that is shaped by historical connections. Examples of dignity, respect, industry, persistence, conscientiousness, wealth, worth, slavery, coercion, and absence of equality and love. The fundamental way of the play is also determined by this significant American cultural constant which also makes a significant contribution to the implicit meaning of the play and a lesser extent to the coherence of the structure of its parts. The play's major and supporting characters' characterization as well as their conduct and the activity of their self-development are intimately related to worthiness. We emphasize that although rules and directions appear to be the pinnacle of ethics and virtue and are developed for the accurate purpose of controlling social relationships, they inevitably turn into their contradictories, thereby bringing hardship and misery to everybody who adheres to them. In several ways, this is how some puritanical beliefs evolved in the concept of discrimination.

O'Neill's perspective on the play's annihilation of the concept of self is evident. He offers two instances on both sides. Ella Downey as a result of her ingrained mind descends into insanity because of her marriage to a black man. Additionally, O'Neill writes about Jim Harries, a black guy who married a white woman but he remains miserable since he cannot be content with himself for who he is. From Ella's

perspective how damaging distorted society belief is to a person's life. It alters her perception and beliefs so she comes to believe that she is superior to Jim and he loves her. Her mental transformations are depicted in vivid details, starting with the early stages of her ignorance of what it means to be white and ending with her delusion, manic episodes, and the development of madness as a result of her marriage to a black man.

Ella serves as an example of O'Neill's understanding of what it means to be a white lady in a culture that perpetuates the thought of racial prejudice. In the end, it is what leads black people into devastation, even if it ought to serve as a tool for whites to subjugate blacks and earn more. O'Neill illustrates the outcome of racial prejudice in Ella that adhering to this viewpoint leads to a spectacular, depressing, and catastrophic outcome. For Jim Harris, the devastating abuse and difficulties of being a black guy in a community that subjugates black people is merely due to their being grown up with a black skin. The effects of persecution extend far beyond one's external look to include one's intellect and quality of life. The manner O'Neill depicts the two characters that are both experiencing racial oppression in separate ways while still attempting to build a future together is incredibly tragic. They are driven to destruction by the pressure of their society's programming beliefs.

However, the idea of love being able to overcome all obstacles does not exist. The loss of identity within the distorted group is the root of the issue. People are separated into two parts. One is superior whereas the other is inferior. The protagonists are ultimately devastated by their own goals and convictions as the play progressed. Regardless, of how many opportunities there are for people to be pleased, their beliefs have led them to destruction. As a result, they require giving up their beliefs. O'Neill subtly highlights their weakness, their error, and the notion that they must give up to leave the dysfunctional group and lose the pressure of social criticism. Instead of seeing Jim as a black man, Ella has to see him as a person who adores her so profoundly. Jim also needs to give up the feelings of unworthiness and inadequacy which have defined him as a black guy who passionately wants to be a white guy despite being a kind person who has done his best. Jim can find the bliss for which he can long, he must let go the notion of white and black and embraces himself as he is.

The play A Kind of Alaska demonstrates how memory is a deeply private issue that belongs to the psychological domain and how it is also a result of residing in different cultural contexts. Memory is formed via cultural interchange and crosses cultural, psychological, and transitory borders in addition to being socially transmitted by language and customs. The epistemological and interpretive significance of the study of trauma throughout Pinter's A Kind of Alaska stems from my desire to engage with and demonstrate the connections between these pressing, concurrent discussions with psychoanalysis, a gender study, and literature.

Pinter asserts that how humans presume about the past's society cannot be truly isolated from how humans behave in the current time. Identity has always been a complicated phenomenon, and it continues to be. It is constantly contested, contextualized, dependent, and alternately changed by different types of modulation and exclusion. In complicated cultures, sharing stories from the past might be a potent tool for creating a feeling of shared identity. To conclude, the play offers an important perspective on clinical discourse in which the boundaries between the private and the professional are severely obliterated. The patient's opposite image distilling tap-like unfrosting challenges the doctor's potent metaphor of "Alaska" as "frosting of conscious" and the play concludes with the patient's power of self-expressing of identity. Deborah is capable of metaphorically expressing her experiences of the epidemic within her concluding speech. We need to listen to see whether we could detect the sound of a distilling tap as we maintain our lives. Does the tap point us in the direction of a solution to the problem?

There are significant metatheatrical ramifications to Deborah's delusion at the end of the play which appears to acknowledge Hornby and Pauline's stories as consistent. Deborah might not be capable to see these discrepancies, but the audience most definitely can. Therefore, Pinter encourages the audience to judge not only Deborah's numerous responses in the play but also the nature and intent of Hornby's inquiries by presenting them with glaring discrepancies. In its purest, time is a relation to the person who views it as a phenomenon that becomes actual for him, if fanciful world contrarily unconscious time which the individual is incapable to perceive avoids the possibility of creating a memory, and cannot quit on the minds. Time does not occur within the unconscious. A kind of Alaska is a deep and potent study of the enigmatic and interesting connection between consciousness, recollection, and time,

symbolizing and depicting the return of consciousness from a condition of severe change brought on by encephalitis lethargica.

In the play, Deborah's existence is reaffirmed and her vision and audibility are strengthened which initially looks to be a strategy to oppose dispossession. Her prominent position on stage does not protect her from the illness that she suffers from and her figure draws attention to herself, the body that is revealed as well. Deborah's declaration that she has no option but to silently follow the law of the body represents another type of dispossession in which one loses command over one's own body.

Deborah's awakening was inspired by a real-life incident and Pinter compressed the three steps of the recovery process as they are described in Sacks' narrative. Her identity is defined by her loss of recollection from the previous 29 years, so nothing will change that. Her past is imprisoned within her present. Deborah's existence as a person vanishes by the age of sixteen years and reappears by the age of 45, so she must live with nearly two-thirds of her existence without recollections while still going through her body's typical physiological symptoms throughout adolescence into middle age. When it comes to memory, Pinter truly views the past as an odd home where activities and things are carried out strangely. Nevertheless, there is still the disconcerting sense that the previous events are never truly past when they come to identity. As depicted in the play, Deborah's character takes on a new identity, loses her old one, or finds it and recollection either controls or is influenced by time flow. Memory is frequently hidden in conversation but Pinter's theatre unearths his recollections by drawing on his life experience.

Finally, this exposure could view as a means of confronting others beyond the speech of knowledge and science that is shown to be inadequate and perhaps hiding the reality. We are responsible for other people who are weak and vulnerable in an unending cycle of mutual reliance because only when we let one be revealed can we have ethical contact with others.

## REFRENCES

- Afolayan, J.-A. (1992). Documentary perspective of bibliotherapy in education. ReadingHorizons, 33(2), 137-148.
- Aguilar-Gaxiola, S., & Mental Health America of Wisconsin. (2013). Mental health: Myth vs. reality.
- Aiex, N. (1996). Bibliotherapy. Learning Disabilities OnLine. ERIC Digest 82 Retrieved February 25, 2017 from February 25,2017 from <a href="http://www.ld.">http://www.ld.</a> online. Org/ld store/bibliotherapy/eric digest & 82.html.
- Albach, P.G., Lomotey, K. & Rivers, S. (2002). Race in higher education: The continuing crisis. In W.A. Smith, P.G. Albach and K. Lomotey (Eds.) The racial crisis in American higher education. (PP.23-43) Albany, NY: State University of New York Press.
- Albach & K. Lomotey. The racial crisis in American higher education. (pp. 3-23).
- Albany, NY: State University of New York Press.
- Alexander, W.T. (1970). History of the colored race in America. Westport, CT: Negro University Press.
- Allen Heath, MSheen, D, Leavy, D, Young, E & Money, K. 2005. Bibliotherapy
- A Resource to Facilitate Emotional Healing and Growth. School Psychology International Vol.26 (5): 563-580. DOI: 10.1177/0143034305060792
- Allen, J. R., Allen, S. F., Latrobe, K. H., Brand, M., Pfefferbaum, B., Elledge, B., Burton, T., Guffey, M. (2012). Children & Libraries: The Journal of the Association for Library Service to Children. 10(1).
- Almansi, Guido and Simon Henderson. Harold Pinter. London: Methuen, 1983.
- Almansi, Guido. "Harold Pinter's Idiom of Lies." Modern Critical Views: Harold Pinter. Ed. Harold Bloom. New York: Chelsea House Publishers, 1987.
- Anderson, J. D. (2002). Race in American higher education: The continuing crisis. In P.G.
- Arthur, Barbara and Gelb, 1962. O'Neill. 1st Edn., Jonathon Cape, London.
- Back, L & Solomos, J. 2000. Theories of Race and Racism: a Reader. USA and Canada: Routledge.
- Baranova, K. M. (2014). Obraz novogo Adama v amerikanskoj literature kolonial'nogo perioda (religioznyj grazhdanskij i lichnyj idealy) [The Image of New Adam in

- the American Literature of the Colonial Period (Religious, Civil and Personal Ideals]. MGPU.
- Barry, John M. 2005. The great influenza: the epic story of the deadliest plague in history.
- Beard, D.M.T., 2005. American Experimentalism, American Expressionism, and Early O'Neill" in a Companion to Twentieth Century American Drama. David Krasner, (Ed.), Blackwell, Oxford, pp. 58.
- Bergsma, A. (2008). Do self-help books help? Journal of Happiness Studies, 9, 341-360.
- Bernard F. Dukore, Where Laughter Stops: Pinter's Tragicomedy (Columbia: University of Missouri Press, 1976), p. II; also, Thomas F. Van Laan, 'The Dumb Waiter: Pinter's Play with the Audience', in Harold Pinter: Modem Critical Views, cd. and intro. by Harold Bloom (New York and Philadelphia: Chelsea House, 1987), pp. 117-25 (p. 125)
- Bernado, K. (2001). Characterization in Literature. Accessed on April 21, 2017.
- Berns CF (2003/2004) Bibliotherapy: Using books to help bereaved children. Omega-J Death Dying, 48:321–336.
- Bernstein, S.J. 2006. Making It, Madness, and Motherhood: The Deep Structure of All God's Chillun Got Wings in Eugene O'Neill Review, Zander B. (Ed.), Vol. 28.
- Blackburn, C., 1941. Continental Influences on Eugene O'Neill's Expressionistic Drama. Am. Lit., 13(2): 109-133.
- Blackwell, J.E (1991). The Black community: Diversity and unity (3rd ed). New York: Harper Collins Publishers.
- Blunt SB, Lane RJ, Turjanski N, et al. Clinical features and management of two cases of encephalitis lethargica. Movement Disorders 1997;12:354–359.
- Bogard, T .1988. Contour in Time: The Plays of Eugene O'Neill. New York: Oxford University Press.
- Bogard, Travis. "Contour in Time, The Amateur: The Moon of the Caribbees". 1988. 8
  June2011. Web.
  <a href="http://www.eoneill.com/library/contour/amateur/moon\_caribbees.htm">http://www.eoneill.com/library/contour/amateur/moon\_caribbees.htm</a>.
- Bonilla-Silva, E. (2001). White supremacy and racism in the post civil rights era. Boulder, CO: Lynne Rienner Publishers
- Boustan, L. P. (2010). Was postwar suburbanization "white flight"? evidence from the black migration. The Quarterly Journal of Economics 125(1), 417–443.
- Bowie, Malcom. (1987). Freud, Proust and Lacan. Cambridge: Cambridge University Press.

- Bower, M.G., 2003. Color Struck" Under the Gaze: Ethnicity and Pathology of Being in the Plays of Johnson, Hurston, Childress, Hansbury and Kennedy. Westport, Conn.: Praeger.
- Brewster, L. Medicine for the Soul: Bibliotherapy. Australasian Public Libraries and Information Services, Vol. 21, No. 3, Sept 2008: 115-119.
- Burkman, Katherine H. The Dramatic World of Harold Pinter: Its Basis in Ritual. Columbus Ohio State University Press, 1971.
- Butler, Judith, Precarious Life: The Powers of Mourning and Violence, London: Verso, 2006.
- Campbell, L.F.; Smith, T.P. Integrating self-help books into psychotherapy. J. Clin. Psychol. Sess. 2003, 59, 177–186. [CrossRef] [PubMed]
- Caruth, Cathy. Unclaimed Experience, Trauma, Narrative, and History. Baltimore, Johns Hopkins University Press 1996.
- Chaman Ahuja, Tragedy, Modern Temper and O'Neill (Atlantic Highlands, NJ:
- Humanities Press, 1984), 52, 54, 55.
- Cohen, Gillian. Memory in the Real World. 2nd ed. East Sussex: Psychology Press, 1996.
- COHEN, R. 2001. "The Economy of Betrayal". In L. Gordon, Pinter at 70. New York and London: Routledge.
- Cook, K, Earles-Vollrath, T & Ganz, J. 2006. Bibliotherapy. Intervention in School and Clinic42, 91-100 doi: 10.1177/10534512060420020801.
- Corral-Corral I, Quereda Rodriguez-Navarro C. Sindromes postencefaliticos en la literatura medica espanola. Rev Neurol 2007; 44:499–506.
- Corral-Corral I, Quereda Rodriguez-Navarro C. Sindromes postencefaliticos en la literatura medica espanola. Rev Neurol 2007; 44:499–506.
- Cuijpers, P. (1997). Bibliotherapy in unipolar depression: A meta-analysis. Journal of Behavior Therapy & Experiential Psychiatry, 28,139-147.
- Cutler, D. M., E. L. Glaeser, and J. L. Vigdor (1999). The rise and decline of the american ghetto. Journal of Political Economy 107(3), pp. 455–506.
- Dale RC, Church AJ, Cardoso F, Goddard E, Cox TC, Chong WK, et al. Poststreptococcal acute disseminated encephalomyelitis with basal ganglia involvement and auto-reactive antibasal ganglia antibodies. Ann Neurol 2001; 50: 588±95.
- Dale, Russell C.; Church, Andrew J.; Surtees, Robert A.H.; Lees, Andrew J.; Adcock, Jane E.; Harding, Brian; Neville, Brian G. R.; Giovannoni, Gavin (2004). "Encephalitis Lethargica Syndrome: 20 New Cases and Evidence of

- <u>Basal Ganglia Autoimmunity"</u>. Brain. 127 (1): 21–33. doi:10.1093/brain/awh008. PMID 14570817.
- Doleac, J. L. and L. C. Stein (2012). The "visible hand": race and online market outcomes.
- Dubost, T. (2019). Eugene O'Neill and the Reinvention of Theatre Aesthetics. North Carolina: MacFarland.
- Duckworth, K. (2013). Mental illness: Facts and numbers. Retrieved from http://www.nami.org/factsheets/mentalillness\_factsheet.pdf.
- Dukore, Bernard F. Where Laughter Stops: Pinter's Tragicomedy. Columbia: Univ. of Missouri Press, 1976.
- Early, B. P. (1993). The healing magic of myth: Allegorical tales and the treatment of children of divorce. Child & Adolescent Social Work Journal, 10(2), 97-106.
- Elizabeth Sakellaridou, Pinter's Female Portrait: A Study of Female Characters in the Plays of Harold Pinter (London: Macmillan Press, 1988), p.207.
- Esslin, Martin, Pinter: The Playwright, 5th ed., London: Methuen, 1992.
- Esslin, Pinter the Playwright (London: Methuen Publishin g Ltd., . 2000, ) p.28.
- Fagan, B. (2016). The Black Newspaper and the Chosen Nation. University of Georgia Press.
- Fanon, F. 2008. Black Skin, White Masks. London: Pluto Press
- Farrand, P. (2005). Development of a supported self-help book prescription scheme in primary care. Primary Care Mental Health, 3, 61-66.
- Ferrie, J. P. (1997b). Immigrants and natives: comparative economic performance in the united states, 1850- 1860 and 1965- 1980. Research in Labor Economics 16, 319–341.
- Ferrie, J. P. (2003a). Internal migration. In S. B. Carter, S. S. Gartner, M. R. Haines, A. L.
- Olmstead, R. Sutch, and G. Wright (Eds.), Historical Statistics of the U.S., Millennial Edition. Cambridge University Press.
- Ferrie, J. P. (2003b). The rich and the dead: Socioeconomic status and mortality in the U.S., 1850–1860. In D. L. Costa (Ed.), Health and Labor Force Participation over the
- Life Cycle: Evidence from the Past (National Bureau of Economic Research Conference
- Report). University Of Chicago Press.
- Floyd, M., Rohen, N. A., Shackelford, J. A. M., Hubbard, K. L., Parnell, M. B., Scogin, F., et al. (2006). Two-year follow-up of bibliotherapy and individual

- cognitive therapy for depressed older adults. Behavior Modification, 30(3), 281-294.
- Floyd, V., 1985. The Plays Of Eugene O'Neill: A new Assessment. Fredrick Unger, New York
- Foner, E. (2013). The Contested History of American Freedom. Preserving American Freedom. http://digitalhistory.hsp.org/pafrm/essay/contested-history-american-freedom
- Forgan, J. W. 2002. Using bibliotherapy to teach problem solving. Intervention in School and Clinic, 38, 75–82.
- Frazier, T.R. (1970). Afro-American history: Primary sources. New York: Harcourt, Brace & World.
- Freud, Sigmund. "Mourning and Melancholia." The Freud Reader. Edited by Peter Gay, W. W. Norton, 1989, pp. 584–88.
- Friend, M. (2011). Special education: Contemporary perspectives for school professionals (3rd ed.). Upper Saddle River, NJ: Pearson.
- Fryer, R. G. J., L. Kahn, S. D. Levitt, and J. L. Spenkuch (2012). The plight of mixed-race adolescents. Review of Economics and Statistics 94(3), 621–634.
- Gagnon, D. P. (2003). Pipe Dreams and Primitivism: Eugene O'Neill and the Rhetoric of Ethnicity. (Unpublished doctoral dissertation). University of South Florida, Tampa, Florida.
- Gale, Steven H., Butter's Going Up: A Critical AnalYsis of Harold Pinter's work (Durham: Duke University Press, 1977).
- Gauthier, J. G. (2002). Measuring America: the decennial censuses from 1790 to 2000.
- US Deptartment of Commerce, Economics and Statistics Administration, US Census Bureau.
- Gelb, Arthur and Barara Gelb. O'Neill. New York: Harper, 1962. Print
- Goldsmith, A. H., D. Hamilton, and W. Darity Jr. (2007). From dark to light: Skin color and wages among African-Americans. Journal of Human Resources 42(4), 701.
- Goldstone, D. (2006). Integrating the 40 acres: The 50-year struggle for racial equality at the University of Texas. Athens, GA: The University of Georgia Press.
- Gordon, Lois, Ed. Introduction. Harold Pinter: A Casebook. New York: Garland Publishing, 1990.
- Gordon, Robert, 'Pinter's Mise-en-Scene: Party Time as Television Drama', The Pinter Rel'ie11' Nobel Prize/ European Theatre Prize Volume: 2005-2008, ed. by Francis Gillen, with Steven H. Gale (Tampa: University of Tampa Press, 2004), 168-79.

- Gordon, Robert. Harold Pinter: The Theatre of Power. Ann Arbor: U of Michigan, 2013. Print.
- Greenfield, J. G., and Bosanquet, F. D. (1953). The brainstem lesions in Parkinsonism. Journal of Neurology, ANeurosurgery, and Psychiatry, 16, 213-226.
- Gregory,, K. E. & Vassey, J. A (2004). Bibliotherapy: A Strategy to Help Students with Bullying. The Journal of School Nursing, 20(3), 127-133 Armando, R. Zavazza.(1968) Bibliotherapy: A Critique of the Literature. Bulletin of the Medical Library Association.
- Gregory, R., Canning, S., Lee, T. W., & Wise, J. (2004). Cognitive bibliotherapy for depression: A meta-analysis. Professional Psychology: Research and Practice, 35(3), 275-280. doi:10.1037/0735-7028.35.3.275.
- Hall, Ann C, 'A Kind of Alaska': Women in the Plays of O'Neill, Pinter, and Shepard, Carbondale: Southern Illinois UP, 1993.
- Hale, Steven H. (1986). Harold Pinter, Critical Approaches. London: Associated University Presses.
- Ham, Moonyoung C., 'Portrait of Deborah: A Kind of Alaska', Pinter at Sixty, Eds. Katherine H. Burkman and John L. Kundert-Gibbs, Bloomington: Indiana UP, 1993, 185–192.
- Harden, J.A. (1997). Fifty years of segregation: Black higher education in Kentucky. Lexington, KY: The University Press of Kentucky.
- Hélène Cixous, 'Portrait of Dora', trans. by Sarah Burd, Diacritics (Spring 1983), 2-32. Quoted in Burkman's Pinter at Sixty, p.186.
- Holland, Eugene W. (1999) Deleuze and Guattari's Anti-Oedipus. London: Routledge.
- Holman, W. D. (1996). The power of poetry: Validating ethnic identity through a bibliotherapeutic intervention with a Puerto Rican adolescent. Child & Adolescent Social Work Journal, 13(5), 371-383.
- Holton, D.W., 1995. Black Women in the Review. Revealing Blindness, Revealing Vision: Interpreting O'Neill's Black Female Characters in Moon of the Caribbees. In: Frederick, W. (Ed.), The and All God's Chillun Got Wings, 19(1-2).
- Howard RS, Lees AJ. Encephalitis lethargica. A report of four recent cases. Brain 1987; 110: 19±33.
- Hurston, Zora Neale. "What White Publishers Won't Print." The Norton Anthology of Theory and Criticism (2001): 1159-1162. Print.
- Iaquinta, & Hipsky, S. 2006. Bibliotherapy for the Inclusive Classroom.
- $\frac{http://education.jhu.edu/PD/newhorizons/Exceptional\%\,20Learners/Inclusion/Teaching\,\%\,20 and\%\,20Learning/hipsky\_iaquinta.htm.}{}$

- Jack, S. J., & Ronan, K. R. (2008). Bibliotherapy: Practice and Research. School Psychology International, 29(2), 161-182. Retrieved February 28, 2016, from http://spi.sagepub.com.ezproxy.humboldt.edu/content/29/2/161.full.pdf html.
- Jacques Lacan, Écrits: A Selection, trans. by Alan Sheridan (New York: Norton, 1977), p.4.
- Jones, James M. (2003). "Constructing race and deconstructing racism: a cultural psychology approach." handbook of racial and ethnic minority psychology. Eds. Guilemo Bernal, Joseph E. Trimble, A. Kathleen Burlew & Frederick T.L. Leong. London: Sage Publications, Inc.
- John Patrick Diggins, Eugene O'Neill's America: Desire under Democracy, (Chicago: University of Chicago Press, 2007), 155.
- Judith Butler, Gender Trouble: Feminism and the Subversion of Identity (London: Routledge, 1990), p.136.
- Junge, M. B. (1994). A history of art therapy in the United States. Mundelein, IL: American Art Therapy Association.
- Kanewischer, E. W. (2013). Do you ever feel that way? A story and activities about families and feelings. J Creat Ment Health, 8:70–80.
- Katz, P.A. & Taylor, D.A. (1998). Eliminating racism: profiles in controversy. New York: Plenum Press.
- Keith, V. M. and C. Herring (1991). Skin tone and stratification in the black community. American Journal of Sociology, 760–778.
- Kennedy, D. M. (2004). Over Here: The First World War and American Society. Oxford University Press, USA.
- Knowles, Ronald, 'A Kind of Alaska: Pinter and Pygmalion', Classical and Modern Literature: A Quarterly 16.3 (1996): 231–240.
- Kopp, L., & Beauchaine, T. (2007). Patterns of psychopathology in the families of children with conduct problems, depression, and both psychiatric conditions. Journal of Abnormal Child Psychology, 35, 301-215.
- Koreneva, M. M. (1990). Tvorchestvo Yudzhina O'Nila i puti amerikanskoj dramy [Eugene O'Neill's Work and the Paths of American Drama]. Nauka.
- Kressin, Nancy R., Kristal L. Raymond, and Meredith Manze. 2008. "Perceptions of Race/Ethnicity-Based Discrimination: A Review of Measures and Evaluation of Their Usefulness for the Health Care Setting." Journal of Health Care for the Poor and Underserved 19 (3): 697. https://dx.doi.org/10.1353%2Fhpu.0.0041.
- La Capra, Dominick. Writing History, Writing Trauma. Baltimore, Johns Hopkins University Press, 2001.
- Le Blanc, Guillaume, Vies ordinaires, vies précaires, Paris: Seuil, 2007.

- Lenkowsky, R.S. 1987. Bibliotherapy: a review and analysis of the literature. The journal of special education, Vol.21, pp. 123-132.
- Lishman WA. Organic psychiatry: The psychological consequences of cerebral disorder. Oxford: Blackwell Science; 1998.
- Long, R., 1987. A. The Outer Reaches: The White Writer and Blacks in the Twenties. In: Victor A.K. (Ed.), The Harlem Renaissance Re-examined, AMS, New York, pp: 43-50.
- Luce Irigaray, This Sex Which Is Not One, trans. by Catherine Porter (Ithaca: Cornwell UP, 1985), pp.85-86.
- Ludwig Lewisohn, "All God's Chillun Got Wings" Nation (June 4, 1924).
- Mackenzie, Catriona, Wendy Stainton Rogers, and Susan Dodds, 'Introduction: What Is Vulnerability and Why Does It Matter for Moral Theory?', Vulnerability: New Essays in Ethics and Feminist Philosophy, Eds. Catriona Mackenzie, Wendy Stainton Rogers, and Susan Dodds, Oxford: Oxford UP, 2014, 1–29.
- Marrs, R. W. (1995). A meta-analysis of bibliotherapy studies. American Journal of Community Psychology, 23 (6), 843-870.
- Martin, L.W., 2001. Review: Race and Class in Faulkner, Reviewed work: Natural Aristocracy: History, Ideology, and the Production of William Faulkner by Kevin Railey.
- Martineau, Stephen. "Pinter's Old Times: The Memory Game." Contemporary British Drama, 1970-90. Eds. Hersh Zeifman and Cynthia Zimmerman. London: Macmillan, 1993.
- Maurice Merleau-Ponty, The Phenomenology of Perception, trans. by Donald A. Landes (Routledge, 2012), p. 78.
- McCall, Sherman, Joel A Vilensky, Sid Gilman, and Jeffery K Taubenberger. 2008. "The relationship between encephalitis lethargica and influenza: a critical analysis." Journal of neurovirology, 14(3): 177–185.
- McCall S, Henry JM, Reid AH, Taubenberger JK. In uenza RNA not detected in archival brain tissues from acute encephalitis lethargica cases or in postencephalitic Parkinson cases. J Clin Neuropathol Exp Neurol 2001; 60: 696±704.
- Mccall S, Vilensky J, Gilman S, Taubenberger JK. The relationship between encephalitis lethargica and influenza: a critical analysis. J Neurovirol 2008;14:177–1
- McKendree-Smith, N. L., Floyd, M., & Scogin, F. R. (2003). Self-administered therapies for depression: A review. Journal of Clinical Psychology, 59, 275–288.

- Merriam-Webster Dictionary. (2015). Retrieved May 01, 2016, from http://www.merriam -webster.com/dictionary/bibliotherapy.
- Michel Foucault, The Birth of the Clinic: An Archaeology of Medical Perception (London, Routledge, 1973), p.xii. 77 Ibid.
- Mills, Christina E, James M Robins, and Marc Lipsitch. 2004. "Transmissibility of 1918 pandemic influenza." Nature, 432(7019): 904–906.
- Moonyoung C. Ham, 'Portrait of Deborah: A Kind of Alaska' in Pinter at Sixty ed. by Katherine H. Burkman and John L. Kundert-Gibb (Bloomington & Indianapolis: Indiana University Press, 1993), p.188.
- Morris, Charles A. and Maisto, Alberto A. Psychology: An Introduction. 12th ed. New Jersey: Prentice Hall, 2002.
- Muslim Heritage <a href="http://www.muslimheritage.com/article/beginning-islamic-hospital">http://www.muslimheritage.com/article/beginning-islamic-hospital</a>
  Myers, S.L.(1989). Desegregation of higher education. Lanham, MD: University Press of America.
- Nelson M (1993) Exploration of the bibliotherapeutic approach with the adopted child (Master's thesis). Fresno, California State University, Fresno.
- Newman, M. G., Erickson, T., Przeworski, A., & Dzus, E. (2003). Self-help and minimal-contact therapies for anxiety disorders: Is human contact necessary for therapeutic efficacy? Journal of Clinical Psychology 59(3), 251.
- Nufiarni, R. (2015). Rasisme dalam All God's Chillun Got Wings karya Eugene O'Neill dalam Perspektif Strukturasi Giddens. (Unpublished master thesis). Universitas Gadjah Mada, Yogyakarta, Indonesia.
- Omi, M. & Winant, H. (1994). Racial formation in the United States (2nd ed). New York: Routledge.
- O'neill, Eugene. 1971. All God's Chillun Got Wings. Victorian: Penguin Books Australian Ltd.
- O'Neill, E., 1982. All God Chillum Got Wings in Eugene O'Neill: The Plays. Vol. 2, Modern Library Edition.
- O'Neill, Eugene. (1924). All God's Chillun got Wings (1924) in Eugene O'Neill: Complete
- Plays 1932-1943 (Vol. III). Rpt., New York: Plays 1932-1943 (Vol. III). Rpt., New York.
- Öner, U. (2007). Bibliyoterapi. Çankaya Üniversitesi, Fen-Edebiyat Fakültesi Dergisi, 7, 133-149.
- Orr, J., 1981. Tragic Drama and Modern Society: Studies in the Social and Literary Theory of Drama From 1870 to the Present. Macmillan, London.

- Pardeck, John. T. 1990. Bibliotherapy: with abused children. Families in society, Vol.71, pp. 229-235.
- Pardeck, John T. 1990. Using bibliotherapy in clinical practice with children. Psychological reports, Vol.67, pp.1043-1049.
- Pardeck, J. T., & Pardeck, J. A. (1997). Recommended books for helping young children deal with social and development problems. Early Child Development & Care, 136, 57-63.
- Prater, M. A., Johnstun, M. L., Dyches, T. T., & Johnstun, M. R. (2006). Using children's books as bibliotherapy for at-risk students: A guide for teachers.
- Pederson, Joshua. "Speak, Trauma: Toward a Revised Understanding of Literary Trauma". Narrative, Vol.22, no. 3,2014, pp. 333-353.
- Pelluchon, Corine, L'autonomie brisée, Paris: PUF, 2009. DOI: 10.3917/puf.pellu.2009.01:
- Pehrsson, D. E., & McMillen, P. (2005). A Bibliotherapy Evaluation Tool: Grounding counselors.
- Pehrsson, D. E., & McMillen, P. (2007). Bibliotherapy: Overview and implications for counselors (ACAPCD-02). Alexandria, VA: American Counseling Association.
   McIntyre, T. Bibliotheraphy. Retrieved February 28, 2017 from http://www.behavioradvisor.com/Biblio.html
- Pinter, Harold. Harold Pinter: Plays Four. Second ed. London: Faber and Faber, 2005. Print. Pinter, Harold. Harold Pinter: Complete Works. Grove Press, 1976.
- Pinter, Harold. Various Voices: Prose, Poetry, Politics: 1948-1998. Faber and Faber, 1999. Pinter, Harold. "Harold Pinter with Benedict Nightingale." Writers Talk Series, by Benedict Nightingale, The Roland Collection, 1985.
- Pinter, Harold, 'A Kind of Alaska' (1982), Plays Four, London: Faber and Faber, 1996, 149–190.
- Pola A, Nelson R. The Impact of Bibliotherapy on Positive Coping in Children Who Have Experienced Disaster. Therapeutic Recreation Journal [Internet]. 2014 [acceso 10 de marzo de 2017]; 48 (4): 341-44.
- Pratt, R.A. (2002). We shall not be moved: The desegregation of the University of Georgia. Athens, GA: The University of Georgia Press.
- Ravenholt, R. T.; Foege, William H (1982-10-16). "1918 Influenza, Encephalitis Lethargica, Parkinsonism". The Lancet. Originally published as Volume 2, Issue 8303. 320 (8303): 860–864. doi:10.1016/S0140-6736(82)90820-0. ISSN 0140-6736. PMID 6126720. S2CID 45138249
- R.D. Laing and Aaron Esterson, Sanity, Madness and the Family: Families of Schizophrenics (Harmondsworth: Penguin, 1970) quoted in Victor J. Seidler,

- Unreasonable Men: Masculinity and Social Theory (London:Routledge, 1994), p.216.
- Redman Crosby E. 1964. A Second Book of Plays. New York: The Macmilan Company.
- Reid AH, Mccall S, Henry JM, Taubenberger JK. Experimenting on the past: the enigma of von Economo's encephalitis lethargica. J Neuropathol Exp Neurol 2001;60:663–670
- Riordan, R. J. (1991). Bibliotherapy revisited. Psychological Reports, 68(1), 306.
- Rozalski, M., Stewart, A., & Miller, J. (2010). Bibliotherapy: Helping children cope with life's changes. Kappa Delta Pi Record, 47(1), 33-37.
- Rubin, R. J. (1978). Using Bibliotherapy: A guide to theory and practice. Phoenix, AZ: Oryx Press.
- Russell DH, Shrodes C. Contributions of research in bibliotherapy to the language arts program. Sch Rev. 1950;50:335.
- Russell, D. H., & Shrodes, C. (1950a). Contributions of research in bibliotherapy to the language-arts program part i. The School Review, 58(6), 335-342.
- Ruth Leys, Trauma: A Genealogy (Chicago: University of Chicago Press, 2000) 19.
- Sacks, Oliver, Awakenings (1973), London: Picador, 2012.
- Sacks, Oliver W. Awakenings; A Leg to Stand on; The Man Who Mistook His Wife for a Hat and Other Clinical Tales; Seeing Voices. New York, NY: Quality Paperback Book Club, 1990. Print
- Sakellaridou, Elizabeth, Pinter's Female Portraits: A Study of Female Characters in the Plays of Harold Pinter, Basingstoke: Macmillan, 1988.
- Sclabassi, S. H. (1973). Literature as a therapeutic tool: A review of the literature on bibliotherapy. American Journal of Psychotherapy, 27(1), 70–77. <u>Google Scholar | Crossref | Medline</u>
- Shaughnessy, E.L., 1984. Eugene O'Neill: The development of Negro Portraiture. MELUS, 11(3): development of Negro Portraiture. stable/467136.
- Shavers, Vickie L., Pebbles Fagan, Dionne Jones, William M. P. Klein, Josephine Boyington, Carmen Moten, and Edward Rorie. 2012. "The State of Research on Racial/Ethnic Discrimination in the Receipt of Health Care." American Journal of Public Health 102 (5): 953–66. https://doi.org/10.2105/AJPH.2012.300773.
- Shechtman, Z. (2009). Treating Child and Adolescent Aggression Through Bibliotheraph. The Springer Series on Human Exceptionality Springer ScienceşBusiness Media, LLC. https://doi.org/10.1007/978-0-387-09745-9.

- Sheaffer, Louis. O'Neill Son and Artist. New York: Paragon House, 1990. Print O'Neill, Son and Playwright. Boston: Little, Brown, 1968. Print.
- Shrodes, C. 1950. Bibliotherapy: A theoretical and clinicale xperimental study. Unpublished doctoral dissertation. University of California at Berkeley.
- Smith, Ronald E. et al. 1986. Psychology: The Frontiers of Behavior. New York: Harper & Row Publishers. Inc.
- Smith, E. B. 1991. An investigation of bibliotherapy as a strategy to reduce transescent stress related to standardized testing (test anxiety). Doctoral dissertation. Arizona State University. Dissertation Abstracts International, 52/12).
- Smith, R.C. (1995). Racism in the post-civil rights era: Now you see it, now you don't. Albany, NY: State University of New York Press.
- Smith NM, Floyd MR, Scogin F, Jamison CS (1997) Three-year follow-up of bibliotherapy for depression. J Consult Clin Psychol, 65:324-327.
- Smith D (2003). Developing the self as a therapeutic tool. Australian Nursing Journal, 10:33.
- Smith, R. O. (2019). State(s) of Exception: The United States, the State of Israel, and the Legacy of Chosenness. In Rubén Rosario Rodriguéz (Ed.), T&T Clark Book of Political Theology. T&T Clark.
- Sridhar, D., & Vaughn, S. (2000). Bibliotherapy for all. Teaching Exceptional Children, 33(2), 74-82.
- Stein, D., Phillips, K., Bolton, D., Fulford, K., Sadler, J., & Kendler, K. (2010). What is a mental/psychiatric disorder? From DSM-IV to DSM-V. Psychological Medicine, 40(11), 1759-1765. doi: 10.1017/S0033291709992261.
- Stephen, A. Black, Eugene O'Neill: Beyond Mourning and Tragedy (New Haven, CT: Yale University Press, 1999), 469.
- Taubenberger, Jeffery K, John C Kash, and David M Morens. 2019. "The 1918 influenza pandemic: 100 years of questions answered and unanswered." Science translational medicine, 11(502): eaau5485.
- Tews, R.M. (1975) 'The role of the librarian on the interdisciplinary team', in Rubin, R.J. (ed.) Bibliotherapy sourcebook. Phoenix, AZ: Oryx Press, pp.313-322.
- Tivnan, T & Curzan, J. 2008. Prose not Prozac. The Bookseller, No.5340, p.30.
- Wagner, M., Kutash, K., Duchonowski, A., Epstein, M., & Sumi, W. (2005). The children and youth we serve: A national picture of the characteristics of students with emotional disturbances receiving special education. Journal of Emotional and Behavioral Disorders, 13, 79-96.

- Weimerskirch, P. 1965. Benjamin Rush and John Minson Galt, II: Pioneers of Bibliotherapy in America. Accessed through Bulletin of the Medical Libraries Association. 1965 Oct; 53(4): 510–526.
- Williamson, J. (1980). New people: Miscegenation and Mulattoes in the United States.

  The Free Press
- Wilson, D. M., & Cash, T. F. (2000). Who reads self-help books? Development and validation of the Self-help reading attitudes survey. Personality and Individual Differences, 29, 199-129.
- Vilensky JA, Gilman S, McCall S. Does the historical literature on encephalitis lethargica support a simple (direct) relationship with postencephalitic parkinsonism? Move Disord.
- Zarhy-Levo, Yael, 'Critical Modes and the "Rebellious" Playwright: Pinter's Alaska, Stoppard's Arcadia », Journal of Dramatic Theory and Criticism 16.1 (2001): 81–98
- Zarhy-Levo, Yael. "Pinter and the Critics." The Cambridge Companion to Harold Pinter. Ed. Peter Raby. Cambridge: Cambridge UP, 2009. 249-65. Print. Cambridge Companions to Literature.

## **CURRICULUM VITAE**

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