

I Never Promised You a Rose Garden Study Guide

**I Never Promised You a Rose Garden by Joanne
Greenberg**

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Introduction

The autobiographical novel *I Never Promised You a Rose Garden*, published in 1964 by Joanne Greenberg using the pseudonym Hannah Green, recounts the experiences of a young girl who suffers from a mental illness. The novel draws from the author's own experiences in this story of Deborah Blau who struggles through childhood, fearful and sometimes even terrified by her circumstances. In an attempt to come to grips with a world she has trouble understanding, the protagonist creates an interior world of her own, one that includes various characters and an archaic language. As the young protagonist becomes more deeply entrapped in the world that she has created, the external reality begins to fade away.

The story opens as Deborah's parents are driving her to the mental hospital, where they hope their daughter will be quickly cured. Deborah's illness goes deeper than the family realizes, however, and Deborah ends up spending three years there. Readers observe the protagonist as she spends those three years fighting for her sanity. During that time, Deborah learns to trust her psychiatrist, through whom she re-establishes a healthy connection to the outer world. The title of this novel comes from the belief of the Deborah's psychiatrist that the journey from mental illness to health would not be an easy road to follow.

An immediate national bestseller, the novel was an unusual book for its time, revealing, as R. V. Cassill for the *New York Times* stated, "the internal warfare in a young psychotic." The book draws readers into the strangeness of Deborah's world and keeps them on edge as they root for the protagonist's success.



Author Biography

Nationality 1: American

Birthdate: 1932

Joanne Greenberg was born in Brooklyn, New York, in 1932. Her early childhood was marred by the terror a child might well feel when talk of world war looms around her; but World War II turned out to cause some of the lesser fears that she faced. In her attempt to find peace in her personal world, young Joanne created an interior world of her own, one she developed so craftily it became both her sanctuary and her prison. By the age of thirty-two, Greenberg had fought her way out of that self-imposed, interior world and had the courage to write and have published an account of her battle. Her 1964 fictionalized autobiography about schizophrenia became a national bestseller, a book entitled *I Never Promised You a Rose Garden*, which she published under the pseudonym Hannah Green.

By the time Greenberg published *Rose Garden*, she had graduated from American University, with majors in anthropology and English. She had also married Albert Greenberg, who encouraged her to write this book.

Greenberg went on to write a dozen novels, several collections of short stories, and many essays on a variety of topics. She was particularly interested in the subject of people who must cope with physical and mental deficits. For instance, while her husband was working with hearing-impaired clients, she became interested in the world of deaf people and the challenges they face. She learned sign language in order to communicate with deaf people. She also helped to set up a mental health clinic for the hearing-impaired. Later, Greenberg wrote a novel called *In This Sign* (1970), a story about the struggles a deaf couple face in raising a child who can hear.

One of Greenberg's subsequent novels, *Where the Road Goes* (1998), however, emphasizes another point of interest for the author. This novel tells the story of a grandmother who decides to reestablish her political activism of years gone by and to undertake a walk across the nation to raise awareness for environmental issues.

Besides her writing career, Greenberg taught at the Colorado School of Mines, an engineering school. She started there as an anthropology professor, wanting to teach her students, as they began their mining careers and traveled all over the world, that they would have to understand not only the basic elements of the earth but also the characteristics of people of different cultures. Later in her career, Greenberg became a creative writing teacher. She also traveled around the nation, helping writers hone their skills at conferences and workshops. She even traveled as far as Japan, teaching U.S. soldiers there how to improve their writing.

Greenberg is the mother of two sons, and as of 2005 she lives in Colorado with her husband.



Plot Summary

Chapters 1-5

Greenberg's *I Never Promised You a Rose Garden* opens with the protagonist, Deborah Blau in the backseat as her parents, Esther and Jacob Blau, drive along country roads. Although the setting at first appears idyllic, with Esther even suggesting that the family is on a pleasure trip, there is mention of mounting tensions. The parents are concerned, for example, about leaving their daughter on her own when they stop at a diner for coffee. They are also concerned at night, when they leave their daughter in her separate motel room. Their anxiety rises again as they discuss the real reason for the trip, which is to take their daughter to a mental hospital.

When the focus of the story turns to Deborah, readers are told about the Kingdom of Yr, the imaginary world into which Deborah retreats. In this place, Deborah feels no tension. It is a neutral place, where her parents and her future do not faze her.

The next day, the family arrives at the mental hospital, a slightly rundown Victorian complex set in woods. The parents are disturbed by the bars on the windows and the disheveled patients who peer out of them. They rethink their reasons for bringing their daughter there. Both parents are torn between doing what might be right for their daughter and their guilt for bringing her to this place and for anything they might have done during Deborah's childhood to have caused the problems she now faces.

At the beginning of chapter two, the focus turns back to Deborah, describing her new environment, how she is constantly watched by nurses and attendants, and how she is watched in her inside world by the guardians and rulers of the Kingdom of Yr. Meanwhile, Esther and Jacob decide to lie to their younger daughter, Suzy, about Deborah's sudden absence from the family. They also choose not to tell other members of the family.

Introduced next is Dr. Fried, a prominent psychologist who is world renowned for her effectiveness in communicating with mentally ill people. Fried reads Deborah's records and discovers that Deborah is very intelligent and suffers from schizophrenia.

In chapter three, readers observe the daily routine of hospital life. Deborah has met Carla, a fellow patient. Together they try to find out how long they will have to stay in the hospital. No one is able to answer their questions.

In her first session with Dr. Fried, Deborah discovers that she has opened up her true feelings, maybe for the first time in her life. Dr. Fried is honest with Deborah, supplying her with direct answers instead of attempting to soften things. She tells Deborah, for example, that yes, she does believe that Deborah belongs in the mental hospital because she is definitely sick. Dr. Fried also tells Deborah that she hopes one day to



help her to see the world as a more beautiful place than the one Deborah sees at the present.

Dr. Fried announces in chapter four that she has received a letter from Deborah's parents and that they want to make a visit. Deborah tells the doctor she wants only her mother to visit, not her father. Deborah senses that the hospital is going to be good for her. She is concerned that her love for her father and his for her will weaken her if she sees him.

Esther Blau makes the visit to the hospital. Esther wants to know if her daughter will ever get better. Dr. Fried tells her that it will take a lot of patience. Then the doctor asks Esther for a family history. Esther describes her relationship with her own father and his relationship with Deborah, whom he adored but also placed a lot of pressure on because of her good looks and intelligence. Pop, as Esther calls her grandfather, had a lot of money and often supported Esther and Jacob when Jacob could not meet the family expenses. The support Pop gave came at a price. Pop was also domineering.

Esther then describes some of the symptoms that she noticed that made her realize that Deborah may not be well. Deborah hardly slept, for one thing. She also developed a tumor and had to have a very painful operation that seemed to affect her personality. At age ten, a school psychologist told Esther that the results of a test indicated that Deborah might be disturbed. At the end of the conversation, Dr. Fried suggests that Esther be completely honest with Deborah from now on.

Chapters 6-14

Chapter six begins with Dr. Fried asking Deborah to give an account of her life. Deborah replies that her mother has already done that. Dr. Fried assures her that Esther gave only one side of the story. In the process of telling her version, Deborah begins to give Dr. Fried a glimpse into her private world of Yr.

Later, Carla reappears and tells Deborah that the reason she went crazy was that her mother shot her and her brother, then shot herself. Her mother and brother died from their wounds. Carla could not adjust to their deaths, especially when her father remarried. Then the girls discuss various aspects of the hospital. They are in Ward B, which allows certain privileges, such as walking around the grounds of the hospital unescorted. There is another section, Ward D, where patients are under constant supervision. Patients there were considered in the worst state of their illnesses.

In her next session with Dr. Fried, Deborah relates how she was often taunted with anti-Semitic slurs by children her age. Dr. Fried, who is German, can relate to Deborah's anger. Deborah is impressed by Dr. Fried's empathy. However, when Deborah returns to her ward, her inner world rises against her for trusting Dr. Fried. In response to all the shouts of anger inside her head, Deborah uses a piece of tin to rip the skin on her arms. When her self-inflicted injury is discovered, Deborah is moved to Ward D.



Lee, a fellow patient who is introduced at the beginning of chapter seven, refers to herself as a psychotic and says that Deborah is a psychotic too. Deborah also meets the patient in the bed next to her, a woman who thinks she is the first wife of Edward VIII, king of England. Later, when Dr. Fried asks to see Deborah's wounds, she does not act shocked or condescending. Once again, Deborah is impressed with the doctor and tells her more about Yr. Because she has opened up once again, Deborah falls into a psychotic state once she is returned to her ward. She is wrapped into a cold, rubber sheet and strapped in for several hours until she is once again able to communicate.

It is next revealed that the patients know intuitively where the attendants' psychological weaknesses are and how they attack them. The attendant called Mr. Hobbs, for instance, always seems to be the target of these attacks, and patients believe that Mr. Hobbs is afraid of them because he himself is on the verge of going crazy.

Deborah is with Dr. Fried again at the beginning of chapter nine. She tells the doctor about some school experiences. She says that she could never understand why children, whom Deborah thought were friends, would come to her and suggest that Deborah had done mean things to them. Deborah claims that she has no recollection of ever doing anything wrong to them.

Dr. Fried notices Deborah's anger growing as she relates these stories. Dr. Fried believes this is a healthy sign. It is better for Deborah to be angry than to be apathetic. She anticipates, however, that the internal battle that Deborah will have to fight will be a major one.

Carla appears on Ward D. Deborah is surprised to see her there, wondering what Carla has done to have forced her to leave Ward B. Carla tells Deborah that she came up to Ward D so she could yell and scream and get all the anger out.

Later, Deborah overhears a conversation about Doris Rivera, a patient who was once in Ward D but was able to make her way out and is living outside the hospital. The thought of Doris gives everyone hope, although it also causes them to fear facing the outside world. When the fear becomes too great, all the patients start reacting strangely. Some get into physical fights, while others retreat so far into their own private worlds, they become unaware of the world around them. Deborah wakes up to find herself in the cold sheets again. Carla, too, is wrapped in the rubber sheets in the bed next to Deborah.

The story jumps back to Esther, who has become worried about her daughter because she has been transferred to Ward D. Esther asks for and receives an appointment with Dr. Fried, who tries to assure her that Deborah is in a natural process of her illness. But Dr. Fried cannot promise that Deborah will come out of this phase any better than she was. Esther leaves without being able to see her daughter.

Later in a session with Dr. Fried, Deborah tells the doctor that she has psychologically poisoned her sister Suzy. She talks about her jealousy and in the process exposes to



the doctor how much Deborah dislikes herself. She also relates how she tried to kill her sister.

Chapter eleven begins with the news that Hobbs has committed suicide. It was not unexpected as far as the patients were concerned. They had often picked on Hobbs, sensing his refusal to accept his own insanity. At this point McPherson, another attendant, appears. Unlike Hobbs, McPherson is able to kid with the patients as well as laugh at himself. The patients tease but do not taunt him. They like and respect him. The patients and McPherson do not like Hobbs's replacement, Ellis, a conscientious objector and in the ward by default. He chose this work over going to prison. He is an angry person and is often mean to the patients. The patients continue to ridicule Ellis until McPherson approaches Deborah and asks her to lay off Ellis. McPherson, without outright telling her, suggests that Ellis is a mentally ill person himself. Ellis is not as lucky as Deborah, McPherson tells her. Ellis cannot afford the treatment that someone like Deborah can.

In the next session with Dr. Fried, the doctor encourages Deborah to go back into her history and relive some of the memories in an attempt to correct the errors that Deborah has stored. When Deborah returns to her ward, in chapter thirteen, she must pay the consequences of having opened up to Dr. Fried. She becomes lost in Yr and must be wrapped, once again, in cold sheets. As Deborah is returning to consciousness, she notices that one of the patients, Helene, is in a cold pack too. Ellis enters the room to take Helene's pulse. When she fights him, Ellis slaps her in the face several times. The next day when Deborah reports the abuse to a ward nurse, little is done about it. At Deborah's next meeting with Dr. Fried, Deborah repeats the details of the incident. Dr. Fried promises to bring this situation to the attention of the authorities.

In chapter fourteen, Esther and Jacob both visit Dr. Fried, who denies them a visit with their daughter. Deborah's sense of reality is shaky, Dr. Fried tells them, and Deborah's appearance would upset them. Deborah has lost all desire to groom herself. Jacob, however, insists that it is his right to see his daughter; so Dr. Fried relents.

On the way home, Esther and Jacob talk about their visit. They were both shocked by Deborah's appearance, not because of Deborah's unkempt hair but for the vacancy they saw in her eyes, as if she no longer had a presence in her body.

In their next meeting, Dr. Fried, whom Deborah now refers to by the nickname of Furi, talks to Deborah and coaxes out memories of her father. In the discussion the possibility is hinted that Deborah felt her father's sexual attraction for her. Upon exposing this feeling, Deborah cries, for the first time, in front of Dr. Fried. It is a release. Dr. Fried tells her that they are on the right path. She will help Deborah to reach the path of health. Once there, Deborah can decide if she wants to enter the world of health or remain in Yr.

At the end of this chapter, the patient Miss Coral appears. She is beloved among the patients. Despite her small 90-pound body, Miss Coral has been known to pick up and



throw beds. She is an intelligent, well educated woman, who eventually tutors Deborah in Greek and Latin.

Chapters 15-23

During the next chapters, Deborah's education with Miss Coral continues. Carla's health is strengthened, and Carla returns to Ward B. As Carla leaves, Deborah realizes the depth of their friendship. Carla suggests that Deborah try to get permission to go down to Ward B, at least to visit her.

Esther, in the meantime, finally tells Suzy the truth about her sister. Suzy takes the news a lot easier than her parents had anticipated. She even mentions that she misses Deborah and wishes she would come home.

In her session with Dr. Fried, Deborah explains the Censor and talks about how it was developed to protect her from telling Yr's secrets. But then, the Censor became stronger, to the point that everything that Deborah said was controlled by the Censor. Dr. Fried tells Deborah that she is not a victim but rather a fighter. She can fight for her mental health.

Because Deborah has exposed yet another secret, she knows that she will be punished mentally. When she returns to the ward, she asks for the cold sheet. She suspects she will become wild as she fights her interior battles. Later, when she comes to, there are other patients in their own cold packs. They realize they have been in them longer than usual, maybe five or six hours instead of the normal three. Deborah's circulation is cut off, and she is in physical pain. Someone finally comes and lets her out.

Doris Rivera enters the scene in chapter seventeen. Doris was almost a mythical person to the patients. She was one of the few who made it out into the world. The patients used the thought of Doris as a symbol of hope. But she frightened them because the patients were fearful of getting well. But now, here she is, returned and defeated. Then a new fear breaks inside of the patients. If Doris could not make it, can any one?

During her next appointment, Deborah tells Dr. Fried about her experience in camp when she was a child. She had met Eugenia and had sensed that they had secrets in common, though they never came right out and talked about them. One day, Deborah found Eugenia standing naked in the bathhouse. Eugenia asked Deborah to beat her with a belt. She insisted that she needed the beating. Deborah could not do it and never had anything to do with Eugenia again.

Then Deborah finds that Carla has been returned to Ward D. When she first sees Carla, Deborah thinks Carla looks broken. Later, Carla tells Deborah that she has not given up. She just tried too much too fast. Then they both learn that Doris has made it again and has left the hospital.



Deborah learns that Dr. Fried is leaving to attend a symposium. She'll be gone for three months. Deborah decides that she will work harder, wanting to be healed before Dr. Fried leaves. She asks for and is granted permission to move to Ward B. At another session, Dr. Fried announces that Dr. Royson will take her place while she is gone. After Dr. Fried leaves, Deborah meets with Dr. Royson but does not like him. He invades Deborah's world of the Yr without asking permission, and Deborah withdraws in fright. She also feels abandoned by Dr. Fried.

In her fury and confusion, Deborah feels a volcano rising within her. She anticipates a great fire. In order to offset this internal fire, she thinks she needs to set an exterior one. She pilfers matches and old cigarette butts and burns herself repeatedly on the arms. Infection develops, but this does not stop her. She continues to inflict pain on her body.

Dr. Fried finally returns and is surprised that Deborah has slipped back into her sickness. She helps Deborah understand what is happening inside of her. Deborah confides that she is worried about the volcano inside of her. Deborah hates herself for her situation. Dr. Fried tells her to try to comprehend that the degree of hate Deborah feels could be transformed into a like measure of love.

Finally, in Deborah's world, the volcano explodes. Deborah feels as if there has been a great collision. She tries to explain it to Dr. Fried, but her communication skills have all but left her. She finally is able to tell Dr. Fried that the power she feels inside of her is a mixture of fear and hatred, and she is worried about not being able to control them. As days pass, Deborah sinks deeper into her silent world. She hears others talking about her who are concerned that she is getting sicker. When Dr. Fried asks what Deborah thinks about that, Deborah states that she is tired of thinking. Dr. Fried is relentless until Deborah is finally able to say that she believes she is not sicker at all.

Slowly, Deborah regains her strength. She begins to distinguish colors and forms that appear new to her. She tells Dr. Fried that she thinks she will live. On Ward B, Deborah continues to get stronger. Carla is with her, and the two friends walk outside together, go to craft classes together, and talk to one another more than they ever have before.

Dr. Fried opens one of Deborah's deep secrets: Deborah's belief that she tried to kill her sister when Suzy was a baby. Dr. Fried proves to Deborah that she was too small to have picked the baby up and to have attempted to throw her out a window. She makes Deborah realize that this is an imagined memory that expresses Deborah's jealousy about the new baby's arrival. Deborah celebrates the lifting of the guilt she has felt all those years.

Chapters 24-29

Deborah makes great progress toward health. It does not happen quickly, but it is steady. She explores the community around her, going to a church and joining the choir. She often walks past the high school, yearning for her degree but unable to face going back to get it.



She returns home for short visits. During one, her sister, although happy to see her, is tired of all the attention that Deborah receives from their parents. Deborah learns that Suzy has passed up an opportunity to go out with her friends. She feels bad about having caused this imposition. Suzy lies about this not affecting her, which only makes matters worse. Deborah thinks about Yr and realizes that she is at the crossroads where she must choose one world or the other.

When Deborah returns to the hospital after this visit, a new patient, Carmen, is there. Deborah is attracted to Carmen and her honesty. Around this same time, Deborah and Carla decide to run outside the perimeter of the hospital grounds, which is against the rules. They are not gone long but the trip exhilarates them. Dr. Halle learns of their misconduct but decides not to punish them. Carmen's father comes a few days later and insists that his daughter is not sick and takes her home. Deborah reads in the newspaper a few days later that Carmen has committed suicide.

Deborah applies to live off the grounds and is granted permission. She rents a room from Mrs. King, who is new to the town and not afraid of the fact that Deborah is a mental patient. Deborah next wants to get a job, but she knows she must first have a high school diploma. She learns about the possibility of getting her G.E.D. and is finally enrolled in a tutoring program through which she can take specialized classes and pass exams without having to actually attend high school. She studies hard and eventually earns her degree with a high enough score that makes her eligible for college. But she still suffers. She fears she will never really fit into the world. This fear causes her to have another psychotic episode. She runs back to the hospital and suffers through it. When she comes out of it, she sees the looks on the faces of the patients. They do not like seeing that she has had to come back. The story ends, however, with Deborah asking for more books. She is still willing to fight.



Characters

Miss Coral Allen

Miss Coral is known among the patients and staff for her exceptional strength. She is an elderly woman who is small and rather frail. But when she has a fit of anger, she is capable of tossing beds. She knows a lot, and Deborah is attracted to her for that. Miss Coral teaches Deborah what she can remember of Greek and Latin.

Anterrabae

Anterrabae is the most powerful god who lives in Deborah's imaginary world, the Kingdom of Yr. He often directs her actions, thoughts, and communications.

Deborah Blau

Deborah Blau is the protagonist of this story, a fictional stand-in for the author herself. She is sixteen years old at the opening of the novel and is on her way to a mental hospital after having attempted suicide. She is never sure, as the novel progresses, how long she will have to stay in the hospital, as she watches patients come and go. But she has a feeling she belongs in the hospital. There, she can be honest about her feelings without fearing she will hurt anyone else's.

She is fortunate that a world famous psychiatrist works at this hospital, one who takes a great interest in her case. Dr. Fried respects Deborah's intelligence as well as her sickness, which she hopes to help Deborah to dismantle. Because of Dr. Fried's honesty, Deborah begins to allow the doctor into her interior world, one Deborah has created to protect herself from the outside world, which she fears.

With her keen intelligence, Deborah is able to explain what is going on inside her head as well as what is happening all around her. She understands the patients who are suffering through their own mental illnesses as well as the doctors, nurses, interns, and attendants who work in the wards. Because she is so intelligent she craves to learn, an activity that motivates her to get well.

Throughout the story, Deborah courageously attempts to open her interior world to the light and to examine it and all the reasons that she created it. She also fights to re-enter the world that at one time frightened her so much it sent her into her imaginary kingdom. As she disassembles her mysterious interior world, she recreates the other more rational exterior one, sometimes finding herself falling into the abyss that separates the two.



Esther Blau

Esther Blau, Deborah's mother, appears to be more in tune with Deborah's need for help than Deborah's father. However, Esther feels guilty, as she blames herself for Deborah's illness. Esther actively pursues answers to her questions, something that Jacob Blau, Deborah's father, does not do. Esther often writes to Dr. Fried, asking for explanations of Deborah's condition, but she is not much more honest with Deborah than Jacob is. Esther tries to dismiss Deborah's fears with easy fixes. She also attempts to solve Deborah's problems rather than teaching Deborah how to solve them herself. Because of Esther's attitude toward her daughter, Deborah seldom, if ever, confides in her mother.

Esther is deceitful when telling the rest of the family about Deborah's condition. She even lies to her husband and hides the doctor's reports, which concern Deborah's progress or lack of progress. Dr. Fried, at one point, tells Esther that if there is one thing she can do to help Deborah it is to be honest with her.

Esther's strength and her belief in her daughter give her the confidence to insist that Deborah stay in the hospital, despite common prejudices about mental hospitals and the early outward signs that Deborah's mental health was declining.

While Deborah is still in the hospital, Esther examines her own life as she looks for causes of Deborah's illness. Esther realizes that throughout most of her marriage, she has placed Jacob second in importance to her own father. She understands that doing so may have caused Jacob to feel insecure. By the end of the novel, however, Esther seems little changed. When Deborah comes home for a visit, Esther still is less than honest with her daughter.

Jacob Blau

Jacob Blau, Deborah's father, loves his daughter but feels guilty that his love may have somehow crippled Deborah, making her vulnerable to mental illness. He is sad that she does not want to see him during her stay in the hospital, and he does not understand that Deborah does not want to see him because of her weakness for his love. If Jacob was part of Deborah's problem, it was not his love that caused it but rather his inability to face the truth. He could not look at his daughter's problems and accept them for what they were. He refused to hear her cries for help and had trouble accepting the fact that she really needed to stay in the hospital.

One other topic touched on only slightly deals with the possibility that Jacob was sexually attracted to his daughter. This possibility is obliquely examined in a therapy session Deborah has with Dr. Fried.



Suzy Blau

Suzy Blau, Deborah's younger sister, appears to be affected by her sister's illness. Even when Deborah is in the hospital, Deborah's presence looms over Suzy's life. When Deborah comes home to visit, Suzy explodes in a fit of anger because she must cater to her sister, whom, at this point, she hardly knows. She feels cheated of a life of her own and of her parents' attention.

Another aspect of Suzy's story is told through Deborah. When Suzy was born, Deborah was angered by her sister's sudden presence and imagined that she attempted to kill Suzy by throwing her out a bedroom window. This memory turns out to be only a figment of Deborah's imagination, which Deborah's mind turned into an actual event. Dr. Fried is finally able to get to the bottom of it, realizing that Deborah would have been too small to have lifted Suzy out of her crib, to have opened the window, and to have attempted to throw the baby out.

Suzy is jealous of the attention that her sister gets, but she still cares for her sister. Suzy mentions, upon being told that Deborah is having mental problems, that she misses her big sister.

Carmen

Deborah meets Carmen on Ward B. She likes Carmen and learns that Carmen is there because she has had to lie to her father all her life in order to please him. The pressure finally built up too much, and she was placed in the hospital for help. Carmen's father shows up one day and takes her out of the hospital before she is cured. Deborah later learns that Carmen has committed suicide.

The Censor

The Censor is one of the imaginary gods in Deborah's interior world. The Censor controls everything that Deborah says so she does not reveal the secrets of the Kingdom of Yr to the outside world.

The Collect

The Collect consists of various voices that emanate from Deborah's Kingdom of Yr. From time to time, the Collect criticize Deborah, often unmercifully. The Collect represents Deborah's own unflattering opinions of herself.



Ellis

After Hobbs's suicide, Ellis comes to work on Ward D. He is a conscientious objector and has taken this job as a way out of serving a prison sentence. He is very obvious about his dislike and discomfort around the patients. Deborah sees him beat one of the patients.

Eugenia

Eugenia is the young girl with whom Deborah makes friends at the summer camp she attended when she was a child. Deborah senses that she and Eugenia have something in common, probably the existence of secret worlds. One day, Deborah finds Eugenia standing naked in the bathroom. She asks Deborah to beat her with a belt. Deborah refuses and then never talks to Eugenia again.

Dr. Clara Fried

The character of Dr. Fried is based on a real psychiatrist from the 1950s, who actually helped the author of this story to find her way back to mental health. Dr. Fried is highly intuitive and quickly understands what Deborah needs in order to fight her way back to reality. Dr. Fried is honest with Deborah, never flinching at whatever Deborah tells her or what Deborah does. Because of this honest treatment, Deborah begins to trust Dr. Fried more and more and opens up her interior world to the doctor, who in turn helps Deborah to understand why she created that world in the first place. Eventually, Deborah gives Dr. Fried the nickname of Furi, a reference to fire, because once when Dr. Fried touched her, Deborah felt heat. She also used the nickname regarding Dr. Fried's keen insights.

Dr. Fried is attracted to Deborah because of her intelligence and her youth. She sees great potential in this young patient and decides to forego other teaching engagements and conferences in order to study Deborah. Dr. Fried becomes Deborah's ticket back into the world of health.

Furi

See Dr. Clara Fried

Dr. Halle

Dr. Halle becomes the administrator of Ward D. Deborah likes and trusts him because he does not belittle her in any way. She turns to him when she needs things, unafraid of approaching him. Dr. Halle learns to turn his head the other way when Deborah and Carla sneak off the premises.



Mr. Hobbs

Mr. Hobbs, an attendant on Ward D, is often rough and sometimes mean with the patients; they in turn taunt him and get into physical fights with him. Hobbs has a weakness, and the patients are clearly aware of it. That is why they pick on him. They see that he too is suffering from a mental illness. They suspect that he is mean to them to irritate them and make them appear crazier than he feels. In the end, Hobbs commits suicide. The patients' reaction is one of jealousy, noting that through his death, Hobbs has released himself from his problems.

Idat

Idat is a beautiful goddess who lives in the Kingdom of Yr. She is mentioned only briefly.

Mrs. King

It is into Mrs. King's house that Deborah moves as she receives her last treatments as an outpatient. Mrs. King trusts Deborah, despite her background, helping to build Deborah's self confidence in the outside world.

Lactamaeon

Lactamaeon is the most sarcastic of the imaginary gods in the Kingdom of Yr. He is the second most powerful voice and often taunts and ridicules Deborah.

McPherson

McPherson is the nicest of the attendants. He is not afraid of the patients on Ward D; therefore, the patients do not bother him. To a large extent, given the circumstances, he treats the patients as if he and they were equals. McPherson comes to Deborah and asks for her assistance in getting the other patients to stop picking on Hobbs.

Pop

Pop, Deborah's maternal grandfather, is a recent immigrant and a self-made man who creates a comfortable amount of wealth, which he shares with his family but not without strings attached. He rules his family rigidly. Deborah's mother, realizing how dependent she and her family are on her father's generosity, submits to his every wish.

Pop applies pressure on Deborah, the first of his grandchildren. She is born with blonde hair, a sure sign to Pop that she is his Americanized dream. Deborah must exhibit beauty and intelligence to show the world that Pop and his family are self-made aristocrats in their adopted country. He treats Deborah, on one hand, as a doll, making



sure that she is dressed well. But, on the other hand, he constantly reminds her that she needs to excel. When Deborah shows signs of mental illness, Esther is most afraid to admit this to Pop, as if Esther has presented him with an imperfect granddaughter.

Doris Rivera

Doris Rivera became a model for the patients in the hospital because she was one of the few patients who made it to the outside world. Although she inspires hope, she also inspires fear. Deborah puts a lot of faith in the story of Doris but is shattered when Doris suddenly returns.

Dr. Royson

Dr. Royson replaces Dr. Fried when Dr. Fried must travel to attend a conference. He is nothing like Dr. Fried and his manner and treatment turn Deborah deeper into her sickness. He takes a more objective and distant stance and moves toward Deborah's illness too clinically. In response, Deborah injures herself. She feels abandoned by Dr. Fried and slips back into her world of mental illness, from which Dr. Royson is unable to release her.

Carla Stoneham

Carla Stoneham is one of the few patients with whom Deborah makes friends. They meet on the Ward B, but soon both of them end up in Ward D, for the mentally disturbed. Carla tells Deborah that she wanted to come to Ward D so she could scream her anger away. Carla also tells Deborah that she went crazy after her mother shot her. Her mother also shot Carla's brother and herself. Both the mother and brother died. The friendship with Carla is a sign that Deborah is getting better.

Themes

Fear

Fear is apparent in almost every scene of Greenberg's *I Never Promised You a Rose Garden*. There are less intense examples, such as with the protagonist's sister, Suzy, who fears the loss of love of her parents, and more intense instances, such as the massive and consuming fear that the protagonist must face in her battle against her illness.

Suzy's fears may cause her to feel at times somewhat insecure or maybe jealous of her sister, but these emotions affect her interpretation of her life and possibly create quirks in Suzy's personality. Deborah's fears, by contrast, are debilitating. They threaten her existence, leading her to hide in the shadows of her subconscious mind, which contorts reality to the point that Deborah has trouble functioning. Deborah's fears also drive her to drastic measures, to the point of causing herself physical harm. Her fears terrorize her and have the power to suggest to her that the best way to avoid them is for her to take her own life.

Fear also affects Deborah's parents. They fear they have made the wrong decision in sending Deborah to the mental hospital. They also worry that they have caused their daughter's illness. On a more superficial level, they fear what people will say when the news of Deborah's condition is made public.

The story illustrates both the destruction that fear can cause as well as the strength that is required to diminish and control it. The author may intend to encourage others to face their own fears. Clearly, Greenberg wanted to present a picture of mental illness from the inside looking out, so readers might better understand that behind the faces of people who suffer from mental illness are minds struggling to free themselves from irrational and debilitating fear.

Mental Illness

Mental illness is often perplexing to mentally well-adjusted people. The science of psychiatry in the 1950s was young in some ways, and patients suffering from mental illnesses were often shut away from the view of healthy people. In focusing on the process of mental illness as well as the journey from illness to mental health, Greenberg sheds light on an otherwise dark subject. She provides a picture of people who exist sometimes behind their illnesses and at other times are so enmeshed by the symptoms of their illness that they lose contact with the real world. But even in some of the most severe cases of mental illness, Greenberg shows the intelligence, empathy, and intuitive understanding that mentally ill patients can have. This picture provides readers with a chance to view mentally ill patients differently than in the wild, harried images that Jacob, Deborah's father, for example, has of them. Through Deborah's story, Greenberg

implies that mental illness is a coping strategy for some people, a way of managing their demons. She also makes clear that many patients engage actively in their own recovery and have a fighting chance to live normal lives.

Deceit

An important theme is delivered through Dr. Fried's treatment of Deborah: honesty builds trust in relationships and is essential in treating mental illness. Much of Deborah's confusion lies in the fact that she is intelligent enough to understand what is going on around her, but she often becomes disturbed when what she knows does not match what she is told. Doctors tell her, for instance, that her operation will not hurt, but Deborah experiences a lot of pain. Deborah's mother assures her that if Deborah is nice to her peers, the children will be nice to her. However, Deborah is rejected and taunted by her peers. Deborah's parents insist to Deborah and to other members of the family that everything is good when Deborah does not feel good at all. Quite the contrary, she feels miserable, lost, and bewildered.

Being honest, Greenberg implies, has a healing effect; it creates congruity. Most of the adults around Deborah are deceitful, in one way or the other. Deborah is not able to find a way out of her confusion until she meets Dr. Fried. The honesty and trust in Deborah's relationship with Dr. Fried allows Deborah to expose her real feelings. Through Dr. Fried's complete honesty Deborah learns to trust the doctor and find her way to health.

Style

Chronicled Narration

I Never Promised You a Rose Garden is based on the author's real experiences. She chose to tell her story as if it were unfolding before the readers' eyes in a chronological order. In the beginning of the story, Deborah is being driven to the mental hospital. The following chapters chronicle her experiences as she adjusts to her new life. Her sessions with Dr. Fried follow a definite pattern, showing how Deborah at first is afraid to open to the doctor and later how she relies on Dr. Fried for her very life. By the end of the story, readers understand that the journey they have witnessed belongs to someone who has and continues to battle with mental illness.

This chronicled narration offers readers a predictable sequence through which to follow the details of the story. This might have seemed necessary because the protagonist weaves in and out of the outer reality around her. There are, for instance, times when the narrator becomes so fearful of her outer reality that she closes down her physical senses and thus loses touch with the outer world. She believes that she can protect herself by withdrawing. When the protagonist does this, she partially takes her readers along with her into the Kingdom of Yr, so they can understand her difficulties in communicating with the outer world. When her psychotic episodes are over, the narration returns to the chronicling of outer events.

Fictionalized Autobiography

The story of Greenberg's teenage struggle with mental illness could have been written as an autobiography. However, the privacy of the author and others involved in the story might have been at risk. Choosing the novel as the form for telling this story distanced the author from its protagonist and its subject matter. Greenberg published the novel under a pseudonym, Hannah Green, in the hope of keeping her own identity and that of her family's a secret. She assumed that if her authorship of the novel were known perhaps people in her own community would react negatively to her or to her children. Apparently for some years after its publication, her children only knew that she had published a book under another name. In time though the nature of that book and her authorship became known to them, and Greenberg had to admit that during her teen years she was mentally ill. Additionally, the novel as a form allows a writer more choices in creating a story in order to make a statement through art about life as it is experienced. The novelist writes fiction, which is to say holds a mirror up to real life, in order to convey certain truths about a subject, free to abandon or change the life experience in order to make her point. In this way, paradoxically, sometimes fiction can tell more of the truth of a subject than autobiography can.

Internal Conflict

The conflict in this novel is mostly internal. Although physical conflicts between patients and staff are presented as well as conflict between Esther and Jacob Blau, most conflict occurs within the protagonist herself. Her internal conflict drives the story. Also, Deborah sheds light on the internal conflicts of those around her, including not only the other patients but the hospital staff and her own family. In other words, despite the fact that much of this novel pertains to the inner reality of the protagonist, readers are not confined to Deborah's mind or her thoughts. The internal conflict affects the outer world, as Deborah must learn to deal with the people around her. Thus, internal conflict is shown to cause external conflict, too.



Historical Context

Schizophrenia

The German doctor Emil Kraepelin (1856-26) classified mental disorders in 1887. What would later be called schizophrenia, Dr. Kraepelin lumped together with several other mental disorders under the term "dementia praecox," which can be translated as "early dementia." In 1911, Swiss psychiatrist Eugen Bleuler (1857-1939) further distinguished several forms of schizophrenia and asserted that some were treatable. The word *schizophrenia* comes from a Greek word and means a split or shattered mind.

In 1959, Kurt Schneider listed the symptoms of schizophrenia, which include psychotic episodes during which a patient has trouble differentiating between real and imagined experiences; delusions, which cause false judgments; and disorganized speech and behaviors. These symptoms, according to Schneider, would often cause social dysfunction, withdrawal, and a loss of motivation, concentration, and emotional reaction.

Debate persisted on the cause of schizophrenia, whether it had a biological or behavioral origin. But in the early 2000s common psychiatric understanding of the illness tends to suggest a combination of the two factors, with an emphasis on genetic and biochemical causes. In the early 2000s, schizophrenia is treated with a combination of anti-psychotic chemicals and therapy. Hospitalization, in the more serious cases, may still be required. Despite these efforts, there remains, according to a 2003 survey taken by the Center for Disease Control, a high suicide rate (10 percent) among people suffering with the illness. There is also concern that heavy use of drugs, especially hallucinogenic drugs, can trigger schizophrenia in people who are predisposed to the illness.

Mental Illness and Therapy in the United States

Mental illness is described as a disorder in the brain that causes a dysfunction in the way a person thinks, communicates, and experiences emotion. Although mental illness has been observed and recorded as far back as ancient times, there is still a lot of controversy about its causes and possible cures.

The first U.S. Surgeon General's report on mental illness (1997) found that mental illnesses account for more disabilities in the United States than other physical illnesses such as cancer and heart disease.

In 1904, in the United States, two people out of a thousand were in mental hospitals. Fifty years later, around the time of Greenberg's stay, that number had doubled to four in every thousand. Before the 1950s, although Sigmund Freud's work was becoming more accepted and his principles of psychoanalysis more practiced, most mentally ill people in the United States were treated with shock therapy or otherwise just kept locked in hospitals, away from the general public.



Beginning around the 1950s, however, psychiatry changed and became more influential. Around this time, behaviorists, such as B. F. Skinner (1904-90), for example, sought to prove that doctors could help their patients to improve their mental health by teaching them different, and more effective, behaviors.

Another breakthrough occurred in the 1950s when pharmaceuticals were introduced. The drug chlorpromazine was approved in 1954 and given to patients who were housed in state mental institutions. Chlorpromazine calmed mentally ill patients and helped them to live normal lives.

Chestnut Lodge Hospital

Chestnut Lodge Hospital, located in Rockville, Maryland, is the site of Greenberg's story. It was built in 1886 as a hotel but was later turned into a psychiatric facility. The hospital consisted of twenty buildings situated on more than twenty acres of land, which were dotted with 125 chestnut trees.

The hospital was run by the Bullard family, three generations of medical doctors, and was considered a pioneering facility in the treatment of long-term, mentally ill patients. In 1994, when Dexter Bullard retired, Chestnut Lodge was sold to a nonprofit organization. However, due to financial problems, the hospital was closed in 2001.

Frieda Fromm-Reichmann

Frieda Fromm-Reichmann was the actual psychiatrist upon whom Greenberg's Dr. Fried was based. Fromm-Reichmann's work, along with that of Harry Stack Sullivan, in the interpersonal school of psychiatry, was world renowned. Rather than using shock treatment, which was the more popular therapy of the time, Fromm-Reichmann believed that her patients could regain their mental health by talking through their experiences. She stated that she wanted to treat her patients as she herself would have wanted to be treated if she had suffered from mental disease.

Greenberg remained in therapy with Fromm-Reichmann from 1948 to 1955 and was supposedly going to collaborate with Fromm-Reichman in the writing of her story. Unfortunately, the psychiatrist died in 1957, with Greenberg's portion of the book written but not the part to be written by Fromm-Reichmann. Greenberg, then, apparently, decided to complete the book as a fictional autobiography.



Critical Overview

I Never Promised You a Rose Garden became a national bestseller when Greenberg published it in 1964 under the pseudonym Hannah Green. This narrative unlocked the doors to what was previously a mysterious interior—the inside of a psychiatric hospital and the inside of the mind of someone suffering from schizophrenia. The sixties were a decade of revolutionary ideas, and Greenberg's book fit right into the scene by throwing light on the then-obscure topic of mental illness and by providing a new perspective of psychological therapies.

R. V. Cassill, writing for the *New York Times*, praised Greenberg for showing “courage that is sometimes breathtaking in its concessions.” Cassill continued: “the author makes a faultless series of discriminations between the justifications for living in an evil and complex reality and the justifications for retreating into the security of madness.” Cassill's only complaint about this novel was that “it falls a little short of being fictionally convincing.” Cassill explained that although the story was categorized as fiction, it does not quite fit the mold: “It is as if some wholly admirable, and yet specialized, nonfictional discipline has been dressed in the garments and mask of fiction.” However, Cassill concluded that “[t]he reader is certainly not cheated by this imposition.”

A critic for *The Times Literary Supplement* in the article entitled “Calling Mad Mad,” also praised Greenberg's efforts: “Miss Green [Greenberg's pseudonym] is excellent when conveying relief and delight at the freedom from the propriety, freedom from lies, and most of all the freedom to call mad mad, crazy crazy. She is excellent too on the inventiveness of the insane.” However, this critic also pointed out Greenberg's weaknesses, writing that some of her characters were not convincing, some of the plot predictable, and Dr. Fried, this critic found, is both “sometimes profound” and yet “sentimental.” This writer stated that Greenberg “is rather better at describing the terror and imaginativeness of the schizophrenic than she is at the return to normality: her normality is perilously close to dullness.”

Writing for the *Library Journal*, Miriam Ylvisaker found Greenberg's novel to be on the level of Ken Kesey's *One Flew over the Cuckoo's Nest* (1964). Ylvisaker then wrote that in *I Never Promised You a Rose Garden* “the hospital world and Deborah's fantasy world are strikingly portrayed, as is the girl's violent struggle between sickness and health, a struggle given added poignancy by youth, wit, and courage.”

Criticism

- Critical Essay #1



Critical Essay #1

Hart, a published writer on literary themes, examines the differences between the methods of Dr. Fried and Dr. Royson and their respective effects on the novel's protagonist, Deborah Blau.

Greenberg wrote *I Never Promised You a Rose Garden* as a fictionalized account of her three-year period in a mental hospital. She decided to fictionalize this story possibly to protect herself, her family, and the other patients with whom she shared the experience. This decision does not mean that the incidents that Greenberg relates are any less true, but it does raise curiosity concerning how Greenberg may have brought those elements together in order to tell her story.

For instance, what is Greenberg attempting to say when she juxtaposes the skills, intelligence, and therapy styles of Dr. Fried and Dr. Royson? These doctors are obviously opposed to one another in many ways. Deborah responds to Dr. Fried by trying hard to move toward health. But with Royson, Deborah fails miserably. Is it due to Deborah's feeling of abandonment because Dr. Fried has decided to travel away from the hospital? Or is Greenberg showing her readers how the difference in the doctors' approaches could make significant differences in a patient? Is Greenberg judging the two doctors, in other words, or is she merely describing them as they appeared to her in real life? Although the answers to these questions may never be fully understood, it might be interesting to lay out the ways Greenberg portrays these two people and to note the differences that Greenberg attributes to them.

Deborah meets Dr. Fried first, and her initial reactions to the doctor are mixed. The first is one of bemusement. She is surprised to find out that the □gray-haired, plump little woman□ who answers the door at Deborah's first appointment is not a housekeeper but rather the doctor herself. But the bemusement fades shortly afterward and turns to anger, which is spawned by fear.

During her first session with Dr. Fried, Deborah is put off by one of the doctor's questions. Put off may not be the correct way of describing her response. Deborah's reaction is more like a recoiling, as if she has been confronted by a poisonous snake. This happens when Dr. Fried asks: □Is there anything you want to tell me?□ This question seems to be direct and simple, but it throws Deborah off guard, so she becomes defensive. □All right,□ Deborah says, □you'll ask me questions and I'll answer them□you'll clear up my 'symptoms' and send me home ... *and what will I have then?* Upon seeing Deborah's reaction, Dr. Fried tries to assure the young patient. □If you did not really want to give them [the symptoms] up,□ Fried says to her, □you wouldn't tell me.□ Dr. Fried then adds, □You will not have to give up anything until you are ready, and then there will be something to take its place.□ Fried recognizes that her question has frightened Deborah, so Dr. Fried tries to calm the girl's fears, helping her to regain her equilibrium by reminding her that she is no victim in this doctor's office. Deborah, Dr. Fried reminds her, is the one in control.



This reassurance loosens Deborah up a bit. She exposes a little of herself to Dr. Fried, but unfortunately she does so by degrading herself, listing all the negative aspects of her personality or at least the depressing things others have told her about herself. But after offering this pessimistic description of herself, the narrator reveals that as Deborah sits there in Dr. Fried's office, she thinks □that she had perhaps spoken her true feelings for the first time.□ In other words, the narrator is telling the readers that Dr. Fried has made an impression on Deborah, one that has created trust between the patient and the doctor. This comment foreshadows, or hints, of what is to come. Without that trust, Deborah may have been lost forever in her mental nightmares.

Now the question is, how does Dr. Fried encourage this trust? Well, first she asks Deborah if she wants to share information about herself. Dr. Fried does not try to forcibly dislodge any of Deborah's secrets, which, as a therapist, Dr. Fried knows exist deep inside Deborah. Of course, Dr. Fried wants to expose Deborah's secrets, but she is a patient woman. She suggests to Deborah that she has an opportunity to talk about them if she wants. It is up to Deborah to decide if she wants to respond to the invitation. There is no pressure and no intrusion.

The other thing that Dr. Fried does to deserve Deborah's trust is to empower Deborah, something that no one else has ever done for her. This is not the false empowerment that she has received from her grandfather, who wanted to make Deborah the model example of their immigrant family. Neither is this the everything-is-fine attitude of Deborah's parents, who believe if they can convince Deborah to swallow their false assurances, she will be strong. Dr. Fried's offer is much more authentic and satisfying. She tells Deborah something that no one else has dared to. Deborah can remain sick, if that is what she chooses. Or she can get better. Either way, Dr. Fried will impose nothing on her that Deborah does not want.

There is another more significant ingredient that convinces Deborah to trust Dr. Fried. It is made known when Dr. Fried assures Deborah that she will not leave her stranded in a void should Deborah decide to give up her symptoms. In other words, Dr. Fried is committing herself to Deborah's cause, should Deborah choose the path to health. Deborah will not be stripped of everything she knows and left alone and vulnerable. Dr. Fried needs Deborah's trust so she can lead her to the place that is waiting for her should Deborah be willing to give up the patterns and thoughts that feed her illness.

Finally, there is Dr. Fried's honesty. When Deborah challenges Dr. Fried, saying that she is just like all the other doctors who have told her that she is faking her symptoms, Dr. Fried does not back down. On the contrary, Dr. Fried responds. □It seems to me that I said that you are very sick, indeed.□ Although no one wants to hear that they are mentally ill, it is obvious that Deborah is relaxed in hearing this, released from the need to pretend otherwise. Upon hearing these words from the doctor, the narrator responds that with these words came a light, which □shone back□ through time, illuminating parts of Deborah's past, contrasting with the lies she had been told in attempts to hide the obvious.



In contrast with her first visit with Dr. Fried, there is little or no bemusement when Deborah first encounters Dr. Royson. Deborah notes how he sits stiffly in his chair. She attempts to make conversation with Royson, trying to ease the tension, but Dr. Royson's personality is as stiff as his posture. He does not give in to Deborah's small talk, seemingly convinced that he must keep a professional distance. Contrary to Dr. Fried's style of inviting conversation, Deborah feels that each of Dr. Royson's questions are demands and that every time she offers an answer, Dr. Royson jumps on them as if they are prizes. She uses the word "pickax" to describe how she imagines his questions coming at her.

But more defeating than any other of Royson's misguided efforts is the mistake he makes when he reacts to an unfamiliar word that Deborah utters. "Oh, the Secret Language," Dr. Royson says. With this statement, especially in Deborah's mind, Royson has trespassed. He has attempted to move into Deborah's secret world without a hint of an invitation. All he offers in way of a defense for his transgression is: "Dr. Fried told me that you had a secret language." What Royson does not seem to realize is that not only is this not a valid ticket by which to invade Deborah's inner world, it is also a slap against Dr. Fried. Royson is implying that Dr. Fried is an accomplice in his invasion. So he alienates Deborah and turns her against Dr. Fried as well.

Deborah withdraws immediately. Although her health had progressed under Dr. Fried's care, Deborah decides she has nowhere to go except back into her illness. As she fades from reality again, she has one lingering thought for Dr. Royson. In all her sickness, she finds the strength to tell him: "[D]on't cut bangs with a hatchet." But Dr. Royson does not understand what she is saying. So Deborah rephrases it: "Don't do brain surgery with a pickax."

Clearly, Greenberg is suggesting that someone like Dr. Fried, through gentleness and honesty, is able to build a trusting relationship. This relationship ultimately leads Deborah (as it did Greenberg herself) to health. By contrast, stiff, oppositional Dr. Royson does nothing of the sort. His mistake is obvious. Dr. Royson tried to open a path into Deborah's mind, not with a precise and intricate tool but rather with a pickax, an instrument that is more suited to killing his patient than to opening her mind to the light of a beautiful new world.

Source: Joyce Hart, Critical Essay on *I Never Promised You a Rose Garden*, in *Novels for Students*, Thomson Gale, 2006.

Adaptations

I Never Promised You a Rose Garden was adapted as a film by Gavin Lambert and Lewis John Carlino in 1977 and starred Kathleen Quinlan as Deborah and Bibi Andersson as Dr. Fried. It was nominated for both an Oscar and a Golden Globe Award.



Topics for Further Study

The protagonist Deborah Blau, in *I Never Promised You a Rose Garden*, receives her G.E.D. certificate in lieu of a high school diploma. Call your local community college and find out where people go and what they must do to attain a G.E.D. Then compile some research to find out how many people receive a G.E.D. in a given year. Interview one of the people who teach G.E.D. classes or one of the counselors at the community college in order to create a profile of people who earn a G.E.D. Present your findings to your class.

Research the life of Frieda Fromm-Reichmann, the doctor who treated Joanne Greenberg and who is portrayed as Dr. Fried in Greenberg's novel. What was so special about her therapy? How did it differ from the more traditional therapies of her time?

Study the passages in *I Never Promised You a Rose Garden* in which Deborah describes the various gods (or voices) that populate her Kingdom of Yr. From her descriptions, create images, in your choice of artistic medium, of what you think Anterrabae, the Censor, the Collect, or Lactamaeon may have looked like to Deborah.

Deborah's relationship to her sister Suzy is less than ideal. As a child, Deborah desperately wanted Suzy to disappear. But despite Suzy's feelings of jealousy for all the attention that Deborah receives, she wishes that Deborah would come back home. Write a letter, pretending you are Suzy, in which you express your frustrations that are a result of Deborah's being sick. But let the undertone of the letter be that of a younger sister trying to get to know an older sister. So even though you express your disappointments and anger, also try to understand what Deborah is going through.



Compare and Contrast

Early Twentieth Century: Clifford Beers spearheads the founding of the National Committee of Mental Hygiene, which eventually evolves into the National Mental Health Association.

Mid-Twentieth Century: President Harry Truman signs the National Mental Health Act for research into mental illness. As a result, the National Institute of Mental Health is established.

Today: President George W. Bush establishes the New Freedom Commission to conduct a comprehensive mental health service delivery system, which recommends mental health screening for all school children.

Early Twentieth Century: Hospitals for the mentally ill become overcrowded. Added to the list of patients are soldiers returning home from World War I and, later, people suffering from the psychological effects of the Great Depression.

Mid-Twentieth Century: In the United States alone, there are 560,000 people in mental hospitals. This number will be the peak of mental hospital populations.

Today: Admittance to mental hospitals is low, but according to a 2005 statement from the National Mental Health Association, one-third of all homeless people suffer from a mental illness. Many of them are schizophrenics. Another report, this one from the Department of Justice (2001), claims that almost 300,000 people in prison are mentally ill.

Early Twentieth Century: Electrical shock that induces convulsions and lobotomy (a surgical procedure in which nerves connecting the frontal lobes to the thalamus are severed) are common practices in treating schizophrenia and other severe mental illnesses.

Mid-Twentieth Century: The drugs lithium and thorazine are used in the treatment of schizophrenia and manic depression.

Today: New lines of anti-psychotic and psychotropic drugs are used to control schizophrenia. Over 70 percent of patients using these drugs experience improvement.



What Do I Read Next?

Greenberg has spent a large portion of her life helping others with physical and mental challenges. In her book *In This Sign* (1984), Greenberg follows the lives of deaf parents and the challenges they must face in raising a daughter who can hear.

Where the Road Goes, Greenberg's 1998 publication, follows the journey of a grandmother who believes she must once again take a political stand by walking across the United States.

John Neufeld's *Lisa, Bright and Dark* (1969) tells the story of a sixteen-year-old who suffers from a mental breakdown. Lisa's parents do not understand what is happening to their daughter, so Lisa turns to her friends for support.

The novel *Go Ask Alice* (1971) by James Jennings, written in diary form, tell the story of a teenage girl who suffers from terrible mood swings that are exacerbated by drug use.

The novel *Cut* (2000) by Patrick McCormick is about a teenage girl, whose guilty feelings resulting from her belief that she is responsible for her brother's illness send her into withdrawal. She ends up in a hospital, where she at first resists treatment but then slowly pulls herself back to health.

The Bell Jar (1963) is an autobiographical novel that draws upon Sylvia Plath's own struggle with mental illness and her experience receiving shock treatment.

Girl, Interrupted (1993) is an autobiographical account of a teenager's stay in a mental hospital. Susanna Kaysen is quick in mind and often funny as she tells her readers about her sometimes terrifying journey to health.



Further Study

Amador, Xavier, *I Am Not Sick I Don't Need Help!*, Vida Press, 2000.

In a clear, concise manner, Amador addresses this book to the friends and family of people with mental illness. He helps them to understand the pressures, fears, and anxieties of someone who is suffering and how to help him or her.

Beam, Alex, *Gracefully Insane: The Rise and Fall of America's Premier Mental Hospital*, Public Affairs, 2001.

New England's McLean Hospital has been known as the country club of mental institutions, with its tennis courts, golf course, and riding stables. Beam interviewed patients as well as hospital staff in preparation for drawing this portrait of the hospital.

Green, Michael Foster, *Schizophrenia Revealed: From Neurons to Social Interactions*, Norton, 2003.

In this quite accessible book, Green offers his readers an up-to-date account of current definitions of schizophrenia, its symptoms, and contemporary attempts to understand and treat the illness.

Porter, Roy, *Madness: A Brief History*, Oxford University Press, 2003.

A readable history of mental illnesses from the Greeks who were known to drill holes in skulls to find a source of madness to present-day controversies concerning psychiatry. Porter discusses techniques to help cure and definitions that help explain madness.

Wagner, Pamela Spiro, and Carolyn Spiro, *Divided Minds: Twin Sisters and Their Journey through Schizophrenia*, St. Martin's Press, 2005.

Sisters, one a gifted poet, the other a psychiatrist, offer their stories of what it was like growing up as twins and watching themselves drift apart as schizophrenia affected the poet-sister. Each sister offers her version of the experience, along with her frustrations, fears, and insights.

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Introduction

Purpose of the Book

The purpose of Novels for Students (NfS) is to provide readers with a guide to understanding, enjoying, and studying novels by giving them easy access to information about the work. Part of Gale's "For Students" Literature line, NfS is specifically designed to meet the curricular needs of high school and undergraduate college students and their teachers, as well as the interests of general readers and researchers considering specific novels. While each volume contains entries on "classic" novels frequently



studied in classrooms, there are also entries containing hard-to-find information on contemporary novels, including works by multicultural, international, and women novelists.

The information covered in each entry includes an introduction to the novel and the novel's author; a plot summary, to help readers unravel and understand the events in a novel; descriptions of important characters, including explanation of a given character's role in the novel as well as discussion about that character's relationship to other characters in the novel; analysis of important themes in the novel; and an explanation of important literary techniques and movements as they are demonstrated in the novel.

In addition to this material, which helps the readers analyze the novel itself, students are also provided with important information on the literary and historical background informing each work. This includes a historical context essay, a box comparing the time or place the novel was written to modern Western culture, a critical overview essay, and excerpts from critical essays on the novel. A unique feature of NfS is a specially commissioned critical essay on each novel, targeted toward the student reader.

To further aid the student in studying and enjoying each novel, information on media adaptations is provided, as well as reading suggestions for works of fiction and nonfiction on similar themes and topics. Classroom aids include ideas for research papers and lists of critical sources that provide additional material on the novel.

Selection Criteria

The titles for each volume of NfS were selected by surveying numerous sources on teaching literature and analyzing course curricula for various school districts. Some of the sources surveyed included: literature anthologies; Reading Lists for College-Bound Students: The Books Most Recommended by America's Top Colleges; textbooks on teaching the novel; a College Board survey of novels commonly studied in high schools; a National Council of Teachers of English (NCTE) survey of novels commonly studied in high schools; the NCTE's Teaching Literature in High School: The Novel; and the Young Adult Library Services Association (YALSA) list of best books for young adults of the past twenty-five years. Input was also solicited from our advisory board, as well as educators from various areas. From these discussions, it was determined that each volume should have a mix of "classic" novels (those works commonly taught in literature classes) and contemporary novels for which information is often hard to find. Because of the interest in expanding the canon of literature, an emphasis was also placed on including works by international, multicultural, and women authors. Our advisory board members—educational professionals—helped pare down the list for each volume. If a work was not selected for the present volume, it was often noted as a possibility for a future volume. As always, the editor welcomes suggestions for titles to be included in future volumes.

How Each Entry Is Organized



Each entry, or chapter, in NfS focuses on one novel. Each entry heading lists the full name of the novel, the author's name, and the date of the novel's publication. The following elements are contained in each entry:

- **Introduction:** a brief overview of the novel which provides information about its first appearance, its literary standing, any controversies surrounding the work, and major conflicts or themes within the work.
- **Author Biography:** this section includes basic facts about the author's life, and focuses on events and times in the author's life that inspired the novel in question.
- **Plot Summary:** a factual description of the major events in the novel. Lengthy summaries are broken down with subheads.
- **Characters:** an alphabetical listing of major characters in the novel. Each character name is followed by a brief to an extensive description of the character's role in the novel, as well as discussion of the character's actions, relationships, and possible motivation. Characters are listed alphabetically by last name. If a character is unnamed—for instance, the narrator in *Invisible Man*—the character is listed as “The Narrator” and alphabetized as “Narrator.” If a character's first name is the only one given, the name will appear alphabetically by that name. • Variant names are also included for each character. Thus, the full name “Jean Louise Finch” would head the listing for the narrator of *To Kill a Mockingbird*, but listed in a separate cross-reference would be the nickname “Scout Finch.”
- **Themes:** a thorough overview of how the major topics, themes, and issues are addressed within the novel. Each theme discussed appears in a separate subhead, and is easily accessed through the boldface entries in the Subject/Theme Index.
- **Style:** this section addresses important style elements of the novel, such as setting, point of view, and narration; important literary devices used, such as imagery, foreshadowing, symbolism; and, if applicable, genres to which the work might have belonged, such as Gothicism or Romanticism. Literary terms are explained within the entry, but can also be found in the Glossary.
- **Historical Context:** This section outlines the social, political, and cultural climate in which the author lived and the novel was created. This section may include descriptions of related historical events, pertinent aspects of daily life in the culture, and the artistic and literary sensibilities of the time in which the work was written. If the novel is a historical work, information regarding the time in which the novel is set is also included. Each section is broken down with helpful subheads.
- **Critical Overview:** this section provides background on the critical reputation of the novel, including bannings or any other public controversies surrounding the work. For older works, this section includes a history of how the novel was first received and how perceptions of it may have changed over the years; for more recent novels, direct quotes from early reviews may also be included.
- **Criticism:** an essay commissioned by NfS which specifically deals with the novel and is written specifically for the student audience, as well as excerpts from previously published criticism on the work (if available).



- Sources: an alphabetical list of critical material quoted in the entry, with full bibliographical information.
- Further Reading: an alphabetical list of other critical sources which may prove useful for the student. Includes full bibliographical information and a brief annotation.

In addition, each entry contains the following highlighted sections, set apart from the main text as sidebars:

- Media Adaptations: a list of important film and television adaptations of the novel, including source information. The list also includes stage adaptations, audio recordings, musical adaptations, etc.
- Topics for Further Study: a list of potential study questions or research topics dealing with the novel. This section includes questions related to other disciplines the student may be studying, such as American history, world history, science, math, government, business, geography, economics, psychology, etc.
- Compare and Contrast Box: an “at-a-glance” comparison of the cultural and historical differences between the author’s time and culture and late twentieth century/early twenty-first century Western culture. This box includes pertinent parallels between the major scientific, political, and cultural movements of the time or place the novel was written, the time or place the novel was set (if a historical work), and modern Western culture. Works written after 1990 may not have this box.
- What Do I Read Next?: a list of works that might complement the featured novel or serve as a contrast to it. This includes works by the same author and others, works of fiction and nonfiction, and works from various genres, cultures, and eras.

Other Features

NfS includes “The Informed Dialogue: Interacting with Literature,” a foreword by Anne Devereaux Jordan, Senior Editor for Teaching and Learning Literature (TALL), and a founder of the Children’s Literature Association. This essay provides an enlightening look at how readers interact with literature and how Novels for Students can help teachers show students how to enrich their own reading experiences.

A Cumulative Author/Title Index lists the authors and titles covered in each volume of the NfS series.

A Cumulative Nationality/Ethnicity Index breaks down the authors and titles covered in each volume of the NfS series by nationality and ethnicity.

A Subject/Theme Index, specific to each volume, provides easy reference for users who may be studying a particular subject or theme rather than a single work. Significant subjects from events to broad themes are included, and the entries pointing to the specific theme discussions in each entry are indicated in boldface.



Each entry has several illustrations, including photos of the author, stills from film adaptations (if available), maps, and/or photos of key historical events.

Citing Novels for Students

When writing papers, students who quote directly from any volume of Novels for Students may use the following general forms. These examples are based on MLA style; teachers may request that students adhere to a different style, so the following examples may be adapted as needed. When citing text from NfS that is not attributed to a particular author (i.e., the Themes, Style, Historical Context sections, etc.), the following format should be used in the bibliography section:

“Night.” Novels for Students. Ed. Marie Rose Napierkowski. Vol. 4. Detroit: Gale, 1998. 234–35.

When quoting the specially commissioned essay from NfS (usually the first piece under the “Criticism” subhead), the following format should be used:

Miller, Tyrus. Critical Essay on “Winesburg, Ohio.” Novels for Students. Ed. Marie Rose Napierkowski. Vol. 4. Detroit: Gale, 1998. 335–39.

When quoting a journal or newspaper essay that is reprinted in a volume of NfS, the following form may be used:

Malak, Amin. “Margaret Atwood’s “The Handmaid’s Tale and the Dystopian Tradition,” Canadian Literature No. 112 (Spring, 1987), 9–16; excerpted and reprinted in Novels for Students, Vol. 4, ed. Marie Rose Napierkowski (Detroit: Gale, 1998), pp. 133–36.

When quoting material reprinted from a book that appears in a volume of NfS, the following form may be used:

Adams, Timothy Dow. “Richard Wright: “Wearing the Mask,” in *Telling Lies in Modern American Autobiography* (University of North Carolina Press, 1990), 69–83; excerpted and reprinted in Novels for Students, Vol. 1, ed. Diane Telgen (Detroit: Gale, 1997), pp. 59–61.

We Welcome Your Suggestions

The editor of Novels for Students welcomes your comments and ideas. Readers who wish to suggest novels to appear in future volumes, or who have other suggestions, are cordially invited to contact the editor. You may contact the editor via email at: ForStudentsEditors@gale.com. Or write to the editor at:

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