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ZELDA FITZGERALD IN LOVE AND MADNESS: HER LETTERS TO F. SCOTT

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Abstract: *The article examines Zelda Fitzgerald's mental health struggles during the 1930s through her letters to F. Scott Fitzgerald. It highlights her resistance to psychiatric treatment and marital and societal constraints, highlighting her creative letter writing and art as tools for agency and autonomy. Despite prolonged institutionalisation and personal challenges, Zelda's letters reveal her struggle for personal and professional identity, contrasting poetic self-expression with the clinical detachment and sterility of psychiatric discourse.*
Key words: *illness narrative, letter writing, schizophrenia, psychiatric discourse, Zelda Fitzgerald*

1. Introduction

"I do not know what is going to happen, but since I am in the hands of Doctor Forel and they are a great deal more powerful than yours or mine, it will probably be for the best"[i] (2002: 108) notes Zelda Fitzgerald in one of her letters sent to her husband, F. Scott Fitzgerald, in the summer of 1930, during her early confinement in Les Rives de Prangins, a clinic in Nyon, Switzerland, one of the most advanced sanitariums for the treatment of mental illnesses. Dr. Forel, a renowned psychiatrist, was trusted fully by Scott to aid Zelda's recovery, although Zelda had less faith in his approach. Zelda was diagnosed with schizophrenia before the standard six-month period then required to confirm a definite diagnosis, which increased the risk of giving an erroneous label. In Linda Wagner-Martin's biography of Zelda Fitzgerald, *An American Woman's Life* (2004), the author examines the possibility that Zelda might have been misdiagnosed, considering "the specificity of the diagnosis, and the speed with which it was given" (179)—questions that, unfortunately, remain unsolved. Although often questioned, the schizophrenia diagnosis would follow Zelda for the rest of her life through every institution where she was later confined. Schizophrenia, then also known as dementia praecox, was differentiated from other types of mental illnesses through a range of negative symptoms, such as hallucinations, delusions, thought disorder, disorganized behaviour and speech, and emotional withdrawal. Even though it was a common diagnosis for American women at that time, Zelda's mental health history seems to show symptoms closer to mania, suggesting that she may have been misdiagnosed—a topic of ongoing debate among the experts who treated her.

2. Analysis

The 1930s marked the onset of a series of breakdowns that would change the lives of Zelda and Scott Fitzgerald permanently. Once an iconic, glamorous couple performing on the social stage of the roaring twenties, they had been known for riding the streets of New York in speedy cabs and drinking their nights away in rivers of champagne at endless parties. However, Zelda had previously shown signs of peculiar behavior in her social interactions either with family members or close friends. Biographer Nancy Milford (2013) shares such an episode from the summer of 1929, one year before Zelda's hospitalisation at Prangins. It happened in Cannes where the couple were then living, when Zelda, exhibiting a colorless complexion, experiencing sudden outbursts of peculiar laughter, and looking listless and on edge, went to the cinema with a family friend to see a documentary about underwater life. The sight of an octopus moving across the screen frightened Zelda to death and made her throw herself onto

her friend's lap and started screaming: 'What is it? What is it?' (171). In the context of her later diagnosis, this peculiar incident can be associated with an episode of hallucination or distorted vision, symptoms that continued to reappear, plaguing her remaining existence. As Zelda became increasingly reclusive and taciturn, her behaviour estranged her from Scott and Scottie, their daughter, and many friends. This tension culminated in a nervous breakdown on April 23, 1930 when she was hospitalised in a clinic called Malmaison on the outskirts of Paris. One month later, on May 22, her morbid hallucinations worsened as Zelda attempted to commit suicide, which finally put her in another mental clinic, in Valmont, this time in Switzerland. It was then Les Rives des Prangins that was considered for intensive psychiatric treatment. Aside from brief periods of rehabilitation at home, Zelda was moved to the Phipps Clinic, part of Johns Hopkins in Baltimore. Her hospitalisations alternated with short intervals when she could spend mornings with Scott at La Paix, a house he rented in Towson, Maryland. Following Dr. Forel's suggestion, a desperate Scott decided to transfer her to Craig House, a mental institution in the rural countryside of New York, where she was placed under the care of Dr. Slocum. Although Zelda's schizophrenia was considered as the cause of her hallucinations, Dr. Slocum attributed her condition to extreme fatigue rather than schizoid behaviour, raising questions about her prior treatments. In May 1934, Zelda was transferred from Craig House to Sheppard-Pratt in Towson, Maryland, where she stayed for two years. In April 1936, she was moved again, this time to Highland Hospital in Asheville, North Carolina. After a lengthy hospitalisation there, she began showing signs of improvement, and doctors hoped for a potential discharge, but she chose to stay for several more months.

The previous account of Zelda's ongoing hospitalisation outlines the series of mental care facilities where she received the latest treatments for her fragile mental condition until her tragic death at Highland Hospital. When a fire accidentally broke out, Zelda, trapped behind barred windows and chained doors, could not escape and perished in the flames. It is believed that her body was only identifiable by a pair of red slippers, which she was known to wear– miraculously, they survived the fire. Her struggle with schizophrenia and prolonged hospitalisation is captured in the collection that includes more than 300 letters. Published under the title *Dear Scott, Dearest Zelda: The Love Letters of F. Scott and Zelda Fitzgerald*, edited by scholars Jackson R. Bryer and Cathy W. Barks, with an introduction by their granddaughter Eleanor Lanahan, this epistolary record reveals their love and the challenges they faced in time. The article's focus is the letters exchanged between Zelda and Scott from 1930 to 1938, with particular attention to the letters Zelda wrote to her husband. It examines her evolution as a writer during a decade marked by her worsening mental condition, as she struggled against and resisted being reduced to the role of a clinical subject. This reexamination of Zelda's letters aims to highlight how her narrative directly opposed psychiatric discourse, lending significant weight to the entire collection. Notably, it was during these bleak years of the 1930s, a time of economic hardship and national despair, that Scott and Zelda's relationship deteriorated. Scott's worsening alcoholism gave an additional serious blow to their already fragile marriage. Yet, in her letters from this troubled decade, Zelda reflects her relentless efforts to emerge from the chaos of her mental issues and find a professional identity, something vital to her as her personal identity was already shattered to pieces.

However, the many letters Zelda and Scott exchanged from the start of their romance are evidently more optimistic, capturing Zelda as the classic Southern belle and the magnetic flapper of the 1920s. These early images of the young and popular Zelda in love with Scott, then a lieutenant in 1918, and later the flapper setting trends in the 1920s reinforce our representations of Zelda as a cultural icon. During her later years of hospitalisation, nevertheless, she was often reduced to a hopeless victim of mental illness. One goal of the editors of *Dear Scott, Dearest Zelda* was to challenge this myth surrounding her public persona and instead present Zelda "as a wonderfully vivacious and articulate young woman, someone

with interesting and original things to say" (35). Even in the letters written during her long hospitalisations, Zelda's rich, articulated style focuses on subjects beyond her illness while the expected illness story is not always central to her writing. Her choice not to dwell on her condition in her letters to Scott also fuels her autobiographical novel, *Save Me the Walz*, published in 1932 during her stay at the Phipps Psychiatric Clinic in Baltimore. Psychiatrists of the early 20th century often urged patients to delve into the intimate depths of their mental illnesses and recovery and document them accurately, sometimes prefacing these autobiographical texts with introductions by psychiatrists to lend scientific weight to the patient's account. However, in her novel Zelda opposed this practice by substituting her real person with her fictional character, Alabama Beggs. In doing so, she challenged "the expectations for asylum autobiography" (Wood 1992: 248) and avoided "the conventional representations of the insane woman", thereby exposing how "those representations and the psychiatric discourse surrounding them [were] dependent upon an appropriation and objectification of female bodies" (247). In other words, Zelda refused to become a mere subject within the psychiatric discourse that required she publicly lay bare the complicated inner workings of her troubled mind. This discourse, as argued by Wood (1992) in her article on asylum autobiography, justifies its practices, especially regarding the confinement of female inmates, by appropriating and objectifying the bodies of 'insane' women. In a similar vein, focusing on Zelda's letters from the 1930s, this article aims to reveal an empowered Zelda, despite her frail mental condition, whose writing redefines the relationship between patient and mental illness within the context of the emerging psychiatry. Psychiatry, rising as "the new science" in the late 18th and early 19th centuries, shifted the understanding of mental illness from notions of demonic possession or supernatural forces. Instead, it "figured the body in mechanical terms which highlighted the solids (organs, nerves, and fibres rather than the fluids)" (124), focusing thus on disorders of the nervous system as the root of madness and as "the new focal point of enquiry and explanation" (126), as suggested by Roy Porter's *Madness. A brief History* (2002). Viewed in this manner, mental illness became a medical issue of the nervous system, requiring diagnosis, systematic observation, therapeutic care, and a precise clinical language of psychiatric theories and scientific concepts to describe symptoms, thoughts, behaviours, and hereditary and environmental factors. Early psychiatry therefore replaced previous punitive practices of the mentally ill with the belief that mental illness demanded medical care and understanding of the brain's role in diagnosing madness.

Zelda's illness narrative reflects her resistance to this psychiatric discourse. While psychiatry aimed to categorise and control her mind through its sterile language and imposed treatments, Zelda found agency and solace in her own expressive, metaphorical writing. Her lyrical charged language starkly contrasts with the clinical detachment of psychiatric terminology, challenging the medicalisation of her body and resisting the attempted colonisation of her mind by psychiatric authority. The article's goal is twofold: first, to analyse Zelda's illness narrative as a defiance of psychiatric discourse, and, second, to explore how her writing embodies the struggle of gaining control over her mental autonomy.

Zelda Fitzgerald: Confinement and Imagination

During her early institutionalisation at Les Rives de Prangins, Zelda conveyed the wonders and terrors of mental illness from the perspective of the patient, an experience of profound isolation and confinement that she never romanticised. She felt cut off from the lively and glamorous society that once fuelled her, isolated from the world, but, at first, even from visitors. Confined to her hospital room, she was left alone only with her thoughts, becoming increasingly confused by her lack of understanding of "a rather esoteric subject" (101), as she called the psychiatric treatments. Without access to doctors' reports, Zelda's letters to her husband allow us to glimpse into her mental turmoil, worsened by feelings of betrayal and

manipulation over her institutionalisation. She writes with desperation, begging Scott to release her: "I want you to let me leave here—You're wasting time and effort and money to take away the little we both have left. If you think you are preparing me for a return to Alabama you are mistaken, and also if you think that I am going to spend the rest of my life roaming about without happiness or rest or work from one sanatorium to another like Kit you are wrong" (102). Resisting the clinical language used to describe her panic attacks, auditory and visual hallucinations, delusions, and episodes of passivity, Zelda instead paints an imaginary, sensory-rich world of buildings and streets that transcends its physical boundaries, as if floating in the air. This landscape without constraints and separations merges with Zelda's heightened perceptions, where colours and sounds blend together and seem to flow through her body. In addition, the experience of sound transcends mere hearing while the nostalgic music of Schumann and Chopin adds another layer of melancholia to her introspection. Her hallucinations reveal an elevated internal life that, while disturbed, also reflects her artistic vision, as she describes:

> there was a new significance to everything: stations and streets and façades of buildings—colors were infinite, part of the air, and not restricted by the lines that encompassed them and lines were free of the masses they held. There was music that beat behind my forehead and other music that fell into my stomach from a high parabola and there was some of Schumann that was still and tender and the sadness of Chopin Mazurkas. (103)

In other places in her letters, Zelda becomes less metaphorical, attempting to give a more accurate account of her symptoms upon seeing "odd things" such as "people's arms too long or their faces as if they were stuffed and they look tiny and far away, or suddenly out of proportion" (115), revealing her struggle of locating in her proximity disproportioned objects and distorted places that look wavy and bend constantly.

Another theme that runs deeply through her letters: a profound regret for the artistic path she might have pursued had she not been locked away in the torture chamber of the hospital. Reflecting on her unfulfilled passionate ballet career, she laments:

> I would have liked to dance in New York this fall, but where am I going to find again these months that dribble into the beets of the clinic garden? Is it worth it? And once a proper horror for the accidents of life has been instilled into me, I have no intention of join[in]g the group about a corpse. (101-102)

Even though Zelda started dancing lessons at the age of 27, she threw herself into long and exhausting hours of practice to catch up, finding in her dancing instructor Madame Lubov Egorova a substitute for Scott, who was often absent as his alcoholism worsened. Zelda's letters, like many narratives or autobiographical novels and poems from women in psychiatric institutions in the early 20th century, show the tendency to label women's mental health as inherently fragile or 'schizophrenic'. In the study on "female malady", Elaine Showalter (1987) argues that "schizophrenia became the bitter metaphor through which English women defined their cultural situation" (210). While mental healthcare evolved in the postwar period, shifting attention from hysteria to the new clinical form of schizophrenia, women were considered more prone to develop psychotic behavior, despite lack of evidence that schizophrenia was an exclusive female mental disorder. Showalter further argues that women's literature interpreted this cultural and medical association between femininity and schizophrenia as symbolised punishment for "intellectual ambition, domestic defiance, and sexual autonomy" (210). Zelda's letters, often filled with resentment and accusations, echo this resistance, offering not only insights into her breakdown but also her unrealised ambition as a ballet dancer. It is true that Scott discouraged her from pursuing this career, viewing it as unattainable and costly, given their worsening financial situation, burdened by Zelda's expensive hospitalisation costs.

With her professional aspirations destroyed, psychiatric authorities further disempowered and infantilised her, and her letters reflect her frustration: "I should think you could find the generosity to help me amongst your many others—not as you would a child but as an equal" (102) or "I never realized before how hideously dependent on you I was" (104). She resented the passivity and forced confinement imposed on her by her husband and doctors, as she believes the asylum life reduced her from a vibrant personality to a "childish, vacillating shell'' (104), under constant supervision. Fearing that a "horror-struck" Scott might see "there is nothing left but disorder and vacuum" in her life, she sought through her letter writing to understand the causes of her nervous breakdowns: "I suppose it's because of draining myself so thoroughly, straining so completely every fibre in that futile attempt to achieve with every factor against me" (104). In doing so, she resists being a mere object for clinical scrutiny and control, reclaiming a sense of agency over her mental and creative life. She often reflects on the exhausting dedication and fervent passion she poured into dancing and writing despite societal expectations, realizing that her husband, anxious to protect his material, often restricted her writing ambitions. This tension is most evident in Scott's *Tender is the Night* and Zelda's *Save Me the Waltz*, both drawing heavily from their stormy marriage, with Scott even using his wife's letters without her consent.

She continues to resist institutional confinement, despite enduring harsh conditions and strict restrictions. Zelda feels parts of her inner self dying every day, leaving her fearful of losing even the small control she still had over her body and mind:

> Every day more of me dies with this bitter and incessant beating I'm taking. You can choose the conditions of our life and anything you want if I don't have to stay here miserable and sick at the mercy of people who have never even tried what its like. Neither would I have if I had understood. I can't live any more under these conditions, and anyway I'll always know that the 'door is tacticly locked'—if it ever is. (112)

Zelda's constant complaints about being confined to her room and forbidden from stepping outside reveal a life she feels no longer worth living, pushing her towards thoughts of suicide. Like an invalid, she is only limited to remembering the painful reality of confinement during sleepless nights. She bitterly laments: "I can't read or sleep. Without hope or youth or money I sit constantly wishing I were dead" (117). In a subsequent letter from November 1930, Zelda further expresses her desire for death, intensified by the strict hospital practices that kept her trapped: "for a month and two weeks I have been three times outside my room and for five months I have lived with my sole desire that of death" (118). She doubts that the Prangins Clinic, which she considers a prison rather than a place of healing, will cure her illness. Zelda writes: "If you are coming here under the illusion that I am well, or even better, you will have to wait another year or so since I can see no possibility of escape from here" (117). In an increasingly angrier letter, she resists Scott's insistence on her continued internment and the constant surveillance of doctors. She writes furiously: "I want to leave here. I have spent as much time as I intend to unable to step into a corridor alone. I am thirty years old and quite willing to take full responsibility for myself. Neither you nor Dr. Forel has any legal right to keep me interned any longer" (118). Her words convey a clear message: she longs to reclaim control over her life, her illness, and her treatments, something she was continuously denied since her husband took full possession of her illness and assumed authority over her mental health narrative. As Wagner-Martin (2002) insightfully observes: "He [Scott] wanted to manage both the illnesses and the descriptions of them. It was as if he could not allow Zelda to have anything—even sickness—that did not in some way belong primarily to him" (129-130). In truth, Zelda's letters reflect her struggle against a double imprisonment: not only is she confined physically, but she is also trapped within the story her husband tells about her. This imposed narrative robs Zelda of agency and reinforces her despair, highlighting her desire to assert her independence against both institutional and marital constraints.

Rejecting what she calls the "disgraceful mess" (111) of the asylum life, Zelda finds solace in imaginary projections of a happy, quite family life. She envisions a cosy home where she and Scott would have time and space to pursue their passions of painting and writing, enjoying a sought-after normal life with friends, where each day would be meaningful. In this imagined world, she would be able to perceive the passage of time with a clear mind: "there will be Sundays and Mondays again which are different from each other and there will be Christmas and winter fires and pleasant things to think of when you're going to sleep" (111). In a similar way, Zelda often revisits old memories of the days before her illness, hoping to mentally recapture that "warm" space and remember the "nice" times when they had each other. She poignantly asks herself: "Can't we get it back someway—even by imagining?" (113), highlighting how imagination and creativity become her tools of resistance.

It must be noted that Zelda's suffering was not only psychological; her body was in pain too. A severe form of recurrent painful eczema covered her face, neck, and shoulders, making the strain even harder to cope with. In a letter from the Prangins Clinic, she expresses her loathing for this "foul eczema", alternating descriptions of physical discomfort with unexpected short passages shifting attention to her enduring love for her husband. She asks Scott with tender words: "Do you still smell of pencils and sometimes of tweed?" (112), suggesting that even in her suffering, her love for him was a comforting memory. Unable to decipher "this infinite psychological mess" (114) on her own, and without Scott's help, Zelda was forever caught in a web of confusion, heightened by the watchful nurses and the clinical notes registered by Dr. Forel in medical records. Instead, she escapes mentally, creating vibrant worlds in her letters to Scott, imbued with infinite hope and energy for a healthy life, beyond confinement. For instance, she recalls a bright morning where "the sun was lying like a birth-day parcel" on her table, and upon opening it, "so many happy things went fluttering into the air: love to Doo-do and the remembered feel of our skins cool against each other in other mornings like a school-mistress" (115). These representations of happy times serve as substitutes for the bleak monotony of hospital life. Similarly, Zelda's Christmas memories are full of imaginative whirlwinds upon seeing Scott. She captures this emotional state with an arresting comparison, describing herself as feeling like "a cake with too many raisins". To her, Scott is like a precious gift, like a beautiful dress she fears wearing lest it may be ruined:

> I will be surprised at your mondanity and very amazed that you are concice and powerful and I will be very happy that you are so handsome and when I see how handsome you are my stomach will fall with many unpleasant emotions like a cake with too many raisins and I will want to shut you up in a closet like a dress too beautiful to wear. (153)

As her condition worsened in the 1930s, she experienced frequent memory loss, possibly due to the shock treatments she received as medication. Letter writing became a way for her to safely record memories, though over time, her letters became increasingly fragmentary and occasionally incoherent. By 1937, Zelda had been transferred to the Highland Hospital, a modern mental healthcare facility in Asheville, North Carolina, where she began experiencing prolonged periods of depression. This depression was intensified by episodes of religious mania that further distorted her perceptions of time and space. In one letter from the summer of 1937, Zelda depicts her complex relationship with time, as though she were caught in rotating circles that added a striking depth and unexpected clarity to the world around her. This perception even transformed her perception of the natural world: "Time continues to rotate round and round these wooded lanes. It rained and the world is deep and clear and of a new and greener concision. Daisies begin in the woods discs of mid-summer and augurs of a summer noon" (256). However, her creative bouts and unconventional perceptions were often labelled "suspect" by hospital staff, resulting in "a week without liberty" (275). In fact, this highlights the stark contrast between her "spontaneous reaction" to her surroundings and "the moralistic

tone and repressive atmosphere of that hospital" (275), which she openly despised for its rigid psychiatric expectations. Clearly, she both loathes the restrictive atmosphere of the hospital and the public persona the asylum forced upon her: "It's the only place I've ever been in my life that I impersonally hated. And I tell you again that they cannot be trusted" (275).

Even though much of Zelda's letter writing conveys frustration and desperation over her confinement, emphasising her sense of entrapment and lack of agency, drawing and painting seem to have rekindled her belief in her own creative powers. In many clinics where she was interned, Zelda found encouragement beyond the institutional regime to pursue activities such as walking, hiking, tennis playing, and painting. Without Scott's full support of her writing, however, Zelda turned instead to painting, which she pursued with fervour, often with his approval. It is true that painting and drawing were two of Zelda's constant preoccupations since the couple lived in Europe where her interest in art must have shaped her painterly eye. These two artistic endevours likely refined what Wagner-Martin (2004) describes as "the eye of Zelda's painterly imagination", which lies not only at the heart of her painting, but it also shapes her entire creative vision: "she seems to have become a painter who not only paints but who thinks like one who paints" (194). In a letter from December 1938, written from Ashville, Zelda describes her determination to pursue her own pleasures despite the cold, restrictive regime of the asylum, which she says deadened her soul and cut her off from communication with the external world. She notes:

> It's cold here, and my soul grows less expansive hourly. There ought to be some procedure that could be instigated against the different weathers: its not cold anyway No matter what happens I paint, and read philosophy, and pose as a model patient but there doesnt seem to be much premium on such this year. Wont you send the book on architecture? (280)

Despite the cold and sterile atmosphere of the hospital, Zelda continues painting and reading, posing as "a model patient", an attitude not fully appreciated by hospital staff. In their analysis of Zelda's performing art, Seidel, Wang and Wang (2006) argue that her visual works produced during the early 1940s serve as "stunning evidence of her growth as an artist and as a person" (135). They support this view by illustrating Zelda's engagement with artistic movements, such as cubism and surrealism, her focus on modern hedonism, and ultimately her quest for insight and authenticity. In truth, rather than viewing her visual art as mere therapy, even though it was produced at the height of her mental deterioration, it should be recognised as genuine art that illustrates Zelda's evolution as an established visual artist. Her work from the 1930s is certainly linked to her earlier performances, such as dancing or her role as a flapper, contributing to her development of visual memory. Her paintings created in the mental and physical confinement of the asylum convey introspective messages dwelling on "remembered places, ruminations, and searches for meaning" (138), while revealing the contents of her lost life and her search for an artistic identity. Her unconventional paintings often seem attempts to escape from suffocating social conventions, a topic she explores in her literature and letter writing as well. While Zelda-the-painter searched for a particular understanding of colours, her tormented, grotesque figures performing on the pictorial canvas displayed an inward gaze, reflecting on their individual subjectivity. In conclusion, painting and drawing offered Zelda a means of reflection on her tormented existence during long hospitalisations, fostering a heightened creative vision she applied to remembering and representing interesting places in her writing. In the end, her visual art enabled her to evoke natural places vividly, as in these examples:

> The sky closed over the lake like a gray oyster shell and pink pearls of clouds lay in the crease where the water met the Juras. (128) *and* The sky lay over the city like a map showing the strata of things and the big full-moon toppled over in a furrow like the abandoned wheel of a gun carriage on a sun-set field of battle and the shadows walked like cats and I looked into the white and ghostly interior of things and thought of you and I looked on their structu[r]al outsides and thought of you and was lonesome. (147-148)

In the above landscapes, the sky dangerously closes in over the lake or hangs heavily over the city, resembling either a precious oyster shell or a detailed map. Pearly clouds hover over the water, while a big full-moon tumbles towards the earth like a broken wheel of a long-abandoned gun carriage on a battlefield. Her descriptions of space are fantastical and dreamlike, reminiscent of surrealist painting, with natural or man-made objects evoking a melancholic introspection as Zelda frantically probes "the white and ghostly interior of things" and studies "their structural outsides", ultimately capturing the emptiness and loneliness she feels without Scott at her side. Often her artistic images convey rich sensory details, and her synesthetic approach guides her into the discoveries of new places. In a letter to Scott from Montgomery, where she briefly stayed with her family, she describes the quite atmosphere of her hometown, occasionally disturbed by isolated causes, such the wailing alarms of fire engines violently disturbing the nights with their deafening clangs and shrieks, like "an angry seamstress splitting silk" (156), and the hurried footsteps of theater goers along the pavement, adding to a symphony of "little sounds" that punctuated her feelings of nostalgia and separation.

Paradoxically, Zelda's breakdowns simultaneously incapacitated and empowered her. Two primary reasons underscore why I believe Zelda's 'madness' led to dual empowerment. The first reason is linked with the therapeutic role of the writing she could exercise more intensely during her frequent stays in mental clinics, allowing her to deal more constructively with periods of despair and episodes of depression. Secondly, her prolonged intervals of hospitalisation allowed her to develop her own identity, as a promising painter and as a writer with her own style and voice. While her veiled autobiographical novel and the short stories she crafted during her confinement showcase her abundant creativity, Zelda's intimate letters, the focus of this article, draw strength from her literature and provide her with an outlet for her repressed desire for an active professional life and a creative life. In other words, the letters served as vehicles for the formation of her identity she feared constantly of losing amid societal and medical constraints. She expresses a profound sense of inexistence as she compares herself with "human bodies without identities" (231), due to the pressures of conforming to the social and domestic roles expected of her. Her strategy of simultaneously disrupting the doctor's story and undermining patriarchal authority was her way of exposing their destructive impact on female identity. Therefore, many of her letters are punctuated by her relentless attempts to struggle free from marital and medical oppression, though not always successful. She also struggled to convey the message that female madness was mostly rooted in women being deprived of outlets for action and public life. A return to domesticity and enforced rest, Zelda suggests, are other forms of madness. Therefore, the empowering role of Zelda's writing and her resistance to psychiatric discourse are indirect criticism of women's lack of intellectual and professional opportunities, which in fact impairs their physical and mental health.

However, a note of caution must be made here—Zelda Fitzgerald was not a truly feminist voice compared to other more openly feminist writers and advocates for women's rights, such as Dorothy Parker, Edith Wharton, Getrude Stein, Nella Larsen, Charlotte Perkins Gilman, or Virginia Woolf, to name just a few. Wagner-Martin's claim that Zelda "failed at becoming an adult" (2004: 125) can be attributed to her Southern origins and her typical upbringing there according to the social standards of the Southern belle[ii], trained to seek the attention of men and suppress any other personal values, such as intelligence, self-confidence, and assertiveness. In truth, as a young woman, Zelda was highly dependent on her father, an austere judge, and on her suitors that all played the role of her gallant protectors. In that social setting, Zelda at least unconsciously desired to lose her identity and merge with the identities of her male protectors, in whose possession she acted as a helpless, weak victim. In her frequent declarations that she was nothing without Scott, Zelda obviously echoes her past education, which, in her more mature years, clashes with her longing for achieving something more

meaningful in her life. In the following passage she captures her dependency on her husband and the emotional effect of his absence on her:

> Have you ever been so lonely that you felt eternally guilty—as if you'd left off part of your clothes—I love you so, and being without you is like having gone off and left the gas-heater burning, or locked the baby in the clothes-bin. But I'm going to see you soon, and the rain pumps outside my window and squeezes the dripping trees and strains the gravel in the walk and I hope the earth will shrink with all this wetting so you will be closer. (126)

The images of forgetting "part of your clothes" or "leaving the gas-heater burning" create an instinctual sense of guilt and incompleteness. These arresting similes suggest that without Scott, Zelda feels exposed and anxious, seeking male validation. However, part of her not being able to come out of the depth of her dependency on Scott lies in the lack of practical resources for fulfilling activities and discovering her talents. Instead, her creative imagination works as a substitute for unfulfilled actions in her real life, outside hospital confinement. She writes with bitter notes of desperation:

> I'd like to be eating the lunch we had at Chateau Neuf du Pap, where the air was not vibrant and full of the whole spectrum—looking over a deep valley full of grapevines and heat and far away the palace of the Popes like a mirage—" (124) *and* I wish we could spend July by the sea, browning ourselves and feeling waterweighted hair flow behind us from a dive. I wish our gravest troubles were the summer gnats. I wish we were hungry for hot-dogs and dopes and it would be nice to smell the starch of summer linens and the faint odor of talc in blistering bath-houses. Or we could go to the Japanese Gardens with Kay Laurel and waste a hundred dollars staging conceptions of gaiety. We could lie in long citroneuse beams of the five o'clock sun on the plage at Juan-les-Pins and hear the sound of the drum and piano being scooped out to sea by the waves. Dust and alfalfa in Alabama, pines and salt at Antibes, the lethal smells of city streets in summer, buttered pop-corn and axel grease at Coney Island and Virginia beach—and the sick-sweet smells of old gardens at night, verbena or phlox or night-blooming stock—we could see if all those are still there. (220)

The first quoted passage conveys Zelda's nostalgia for serene moments in her life. The stillness of the air and the idyllic setting of the vineyard, steeped in summer heat, evoke dreamlike images of a distant past. In the second quote, she imagines herself engaging in simple, ordinary activities, such as having lunch, sunbathing, and taking long walks, while surrounded by a symphony of sounds and smells. Although these are mundane experiences, what Zelda mostly values is the liberty to take initiative, choose her own pleasures, and discover the world at her own pace, free from restrictions. However, these visions are products of her imagination, reflecting a clear dissatisfaction with her present reality. Confined to a sterile existence, rooted in her prolonged hospital stays, she relies on her rich imagination and acute sensory awareness to capture her longing for a life of tranquility that remains inaccessible. Taken together, these passages present Zelda as someone who is deeply in touch with her sensory environment, drawing her energy from idealised memories and fantasies belonging to a world of beauty that although it feels out of reach it can still counterbalance the dissatisfactions in her present life.

3. Conclusions

This article has provided an insight into Zelda Fitzgerald's mental health during the tumultuous 1930s and into her struggle to resist the stifling psychiatric treatments of the time. This tension is poignantly reflected in Zelda's own bitter conclusion: "Every day it gets harder to think or live and I do not understand the object of wasting the dregs of me here, alone in a devas[ta]ting bitterness" (102). The analysis has highlighted how Zelda's her creative and perceptive outlook on life opposes the mainstream psychiatric discourse by contrasting its cold, clinical language with her poetic self-expression, making her personal experience central to the

discussion. Ultimately, the article underscores the paradoxical duality of Zelda's mental health struggles, which both inhibited and empowered her.

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[i] All references to Zelda's and Scott's Fitgerald's love letters henceforth are taken from the volume edited by Jackson R. Bryer and Cathy W. Banks in 2002, with an introduction by Eleanor Lanahan.

[ii] The traditional portrayal of the Southern belle is as follows: "A young girl had few tasks other than to be obedient, to ride, to sew, and perhaps to learn reading and writing. Unlike her brothers, who attended preparatory schools and college, a girl was to stay home until such time as a suitable—that is, lucrative—marriage was arranged for her. If she was pretty and charming and thus could participate in the process of husbandgetting, so much the better. However, the career of a belle was not longlived. After marriage, a girl was expected to become a hardworking matron who was supervisor of the plantation, nurse, and mother." (Seidel Lee 1985: 6)