NARRATIVE STRATEGIES AND GENDER DISCOURSES: 
THE EMPOWERMENT OF FEMALE CHARACTERS IN 
CARMEL BIRD’S THE WHITE GARDEN

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Recent Australian fiction has seen the rise of an important number of works by women which show a high degree of experimentation, both in form and in content, in their attempt to convey female experience and women’s disadvantaged position in society. Carmel Bird’s *The White Garden*, published in 1995, is one of such novels, as it combines a multiplicity of techniques and conventions in order to conform a complex, intriguing storyline based on real events which took place at an Australian psychiatric hospital in the 1960s. Bird draws on a woman’s investigation into her sister’s mysterious death in the grounds of the Mandala clinic to portray the experiences of its female patients in the hand of the ambitious, egotist Dr. Goddard, who neglects, abuses and even rapes them in a cruel exercise of patriarchal power.

But the traditional notions of female powerlessness and passivity inside patriarchal institutions and, more particularly, within the medical and psychiatric practice, are defied by Bird through her rendering of the patients’ voices and her use of different narrative strategies which help to convey women’s agency and active involvement in the plot. These strategies comprise the juxtaposition of multiple perspectives, conventions and literary techniques arranged in such a way that they reflect a progressive empowerment of the female characters, be they patients or simply women who, help the protagonist, Laura Field, in her research, against the patriarchal authority embodied in the doctor’s figure, a process which culminates in her final unveiling of the real circumstances of her sister’s death. In this paper we will survey how the female discourse or discourses manage, to some extent, to prevail over the male discourse and how this can be noticed throughout the novel, not only in the development of the plot, but also through the different techniques with which the story is narrated.

The great complexity of *The White Garden* can be rightly attributed to the writer’s use of a variety of literary genres and conventions that provide the novel with different levels of significance, thus allowing it to be classified, in words of Michael Sharkey, as an expose of a monomaniacal doctor’s deep-sleep clinic;

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1 The novel is based on Chelmsford hospital, Sydney, and its head doctor Harry Bailey, who was investigated in the 1990s, after 20 years of unpunished psychiatric practice, for the death, mistreatment and abuse of several patients; he committed suicide before the end of the enquiries (Walker 1998:91-92). Walker refers to a book published on the subject, entitled *Deep Sleep: Harry Bailey and The Scandal of Chelmsford* (Bromberger & Fife-Yeomans, Sydney, Simon & Schuster, 1991). I am grateful to Dr Shirley Walker for her inspiring course on contemporary Australian literature, which awakened my interest: in Carmel Bird's novel.
a critique of psychiatric institutions in the 1960s; a detective fiction; a study in religious mania; a lyrical celebration of the power of sibling affection; a historical romance; a black comedy. (1995: 8)

All these different subjects and genres are present in the novel and help to transform the original story of the murderous psychiatrist into a tale of a female quest for truth, as well as a powerful exploration of the world of madness and delusion. The shift in the power relations in The White Garden can be traced through the particular use of narrative techniques such as the presence of different voices which alternate with an omniscient narrator in the disclosing of the plot. These voices offer different and complementary perspectives on the events at the Mandala clinic and help the reader to identify more and more with the conflicts experienced by Goddard’s female patients and the sexual and mental abuse to which they are subjected.

It is significant that the novel opens with the doctor’s own statement of his power over the people around him, as becomes clear in the parallel he draws between the elephant and his inner self, the first clue we get as readers of his mental derangement: “[...] my elephant consciousness is always present so that I know I command great power and respect in the world in which I work” (1996: 2). His voice is the one that seems to control the narrative in the first stages of the novel since, even when the events are narrated from a distanced, objective position, he is the one who focuses the interest of the narrator, not only in his external behaviour, but also in his inner thoughts and feelings.

Goddard’s absolute power at Mandala is soon made explicit in his paternalistic attitude towards his visitors and in the impunity with which he experiments on his patients, often causing them serious damage and even death. His unlimited authority goes clearly beyond that of a doctor and likens him to a God figure, as his own surname, Goddard, suggests, a parallelism that he even encourages in his mad ambitions of power and that is soon foretold by Laura Field as she investigates into her sister’s death: “People, mostly women, died at Mandala as a result of treatment given by Dr Goddard. [...] their relatives would try to visit them, try to have the treatment stopped, but Goddard was God, and his word was law” (1996: 5).

His ambitious nature, which is reflected in the object of his experiments: the attempt to discover and control the mechanisms of sleep and fantasy, goes hand in hand with a contemptuous attitude to women that he constantly reveals in his allusions to them and in the sexual abuse of his female patients. From his statements about women we gather that he considers them as inferior beings who need to be controlled, sexually and psychologically, by male authority, and his suggestion that the object of his patients’ cure is to make them ready to “open their minds and their legs”, (1996: 30), that is, to subject themselves to male domination and become good wives for their husbands (1996: 30), implies
a view of women as commodities and use-values which, according to Irigaray, has inaugurated the patriarchal social order (1990: 170-89).

Goddard, thus represents the embodiment of patriarchy at the Mandala clinic, and his discourse permeates the narrative to the extent that all the other characters feel powerless before him and, in some way, subjected to his God-like authority. This authority is exercised especially on the female characters, be they patients or visitors, and Laura Field is the only one whose discourse is not constrained by his and can be heard from the very beginning, when she asserts in the first of her monologues the doctor’s responsibility for her sister’s death: “The hand of Ambrose Goddard was not on my sister’s throat, but his lunatic mind was able to control the narrative that resulted in her death. Ambrose Goddard killed my sister” (1996: 5).

Apart from Laura’s, we find no other female voices in the novel till the seventh chapter, and it is interesting to note how in the first six chapters the narrative seems to be dominated by a male perspective, from the egotist doctor to a patient’s conventional husband and a young (intertextual) gardener in Vita Sackville-West’s mansion who describes the design of her white garden from his own viewpoint. Thus, at this stage the female patients at the clinic are silenced by the male discourse and, even when they are referred to, or portrayed by the narrator, Goddard’s thoughts often intrude in the narration imbuing it with his own views. This can be noticed in several references to, Therese Gillis, one of the patients, and particularly in a description of her where brackets are used to separate both discourses: Therese was pretty. She had large, green eyes and chestnut curls, peachy cheeks, slim body, long legs, no freckles, lovely smile. (I could fuck the arse off her, Ambrose thought as he left the cubicle. It was nice to stick needles into the veins of these depressed little beauties, for starters.) (1996: 45)

The patients’ silent condition represents their helplessness both inside the psychiatric institution and under the patriarchal constraint, and it is reflected in Therese’s inability to speak when she is told to talk to a tape-recorder as part of a treatment: [...] her mind was so filled with memories that it became impossible for her to say anything at all. The doctor had said: ‘Just say whatever comes into your head, and Sister will come and turn the tape over when it’s finished on this side.’ But so much came into her head there was nothing she could say. (1996: 44)

But Therese’s voice is finally heard as a result of the combination of drugs she is daily subjected to, thus inscribing a discourse whose powerful nature seems to transcend Goddard’s intention (Creswell 1995: 26). Her discourse begins as an incoherent exposition of her thoughts and emotions which intermingle with fragments of popular songs, rhymes, etc. (Creswell 1995: 26) and it gradually acquires more sense as she establishes a parallel between her
own life and that of the French saint Therese Martin, known as “The Little Flower”. The similarities between their lives affect her deranged mind to the extent that she assumes the saint's identity, a behaviour which plunges her deeper into her illness and, at the same time, seems to free her, although symbolically, from her former conflicts and constraints: “She was conscious only of a feeling of elation, of having got the right answer at last, of breaking through a terrible barrier into a new and sweeter world” (1996: 55).

At this point in the narrative we begin a new section where the discourses of both women, the saint and the patient, alternate, the former as extracts from her autobiography and the latter as a series of ramblings which Shirley Walker considers a clear example of what Hélène Cixous called “écriture féminine” (1998: 103). For Walker, Therese’s discourse “emerges from the pre-Oedipal consciousness, the libidinal economy of the feminine which precedes the entry into the confining grid of the Symbolic (1998: 104) and it links the saint’s experiences to her own, first as the spoiled child in a large family and later as the object of Goddard’s sexual exploitation. Female experience is thus finally inscribed in the narration, acquiring a central role in the description of the events at the clinic.

Therese’s choice of a Catholic saint as the person she will impersonate to escape reality runs parallel to another patient’s choice of Teresa of Avila, and both can be interpreted as an attempt to repel male domination by following the example of autonomy set by these female saints against the patriarchal order. Nevertheless, we must note that even this delusion is taken advantage of by Dr Goddard, who manages to impose his authority over the women by assuming God’s identity, thus legitimising his sexual abuse and reinforcing his deluded state, as is reflected in his statement, which Therese transcribes in her discourse: *I am God, and I am fucking a saint* (1996: 109).

But Goddard’s control of the situation will prove to be no more than a delusion when he is unable to foretell the death of his lover, Vickie Field, as a result of an experiment with the two saint-impersonators. His experiments to control the world of fantasy are then proved to be a failure and, as the novel develops, we witness more and more the extent of his derangement through the narrator’s focus on his confused stammering when forced to refer to his mother or to her death (1996: 124; 172). As readers, we also, witness his progressive loss of power, which is reflected in his helpless reaction to Vickie’s death and especially in the narrator’s depiction of his suicide, when he becomes painfully aware of his lack of control, not only over his patients, but also over his family and life (1996: 211). His loss of authority runs parallel to a progressive empowerment of his patients that can be noticed in the way Therese and the so-called “Shirley Temple” gradually assert their power over him and become aware of his “elephant” delusions, which they even include in their discourses (1996: 107; 175).

It is towards the end of the novel that Laura’s voice reappears in the narrative and from that moment her enquiries to solve the mystery of Vickie’s death, even though often portrayed from the narrator’s perspective, become the focus of
the narration in what can be interpreted as the ultimate assertion of female agency. The shift in the power relations between male and female discourses is very explicitly presented after Laura's reappearance in the fairy tale recreated in the chapter entitled “The Book of Knowledge”. Unlike other fairy stories evoked in *The White Garden*, centred on female helplessness, this one reflects a positive view of women's power in its depiction of a girl’s success in her search for the book her sister was carrying when poisoned by a cruel man, in a very close parallel to the novel’s quest (Walker 1998: 99), where the book that Laura herself tries to find, significantly a copy of Vita Sackville-West's *The Eagle and the Dove*, on the lives of Teresa of Ávila and Therese of Liseux, symbolises truth and the final understanding of the events. The female victory presented in this tale thus foretells Laura's success in her investigation, as well as the final inscription of women's role and discourse in the terrible events taking place at Mandala.

The progress of Laura's quest in the form of interviews to former patients or their relatives and the way in which one clue or witness leads to another, allows more voices to be heard and highlights the important role that female solidarity plays throughout the novel. The insertion of these new discourses alternates with episodes in the lives of the two deluded saint-impersonators and in the construction of the garden which gives the title to the novel, and finally leads to the finding of the book in the home of one of these patients, after her recovery. The significance of the book is finally made evident as the scene of Vickie's death is reconstructed in the chapter wisely entitled “Patience Obtains Everything”. The final episode of its destruction, symbolically conveying the end of the quest, is endowed with positive meaning when Laura discovers in handwriting, on its last pages, traces of the lesbian affair between Therese and her childhood friend, Violette, a finding that must be interpreted as an assertion of female bonding and solidarity. Thus, the different female voices in *The White Garden* gradually absorb the focus of the narration and manage to prevail over the doctors patriarchal discourse, which in the initial stages dominated the narrative in the attempt to keep other discourses subordinate. As we have tried to prove here, this victory, though it might be considered a “pyrrhic” one, as Creswell acknowledges (1995: 27), pervades most aspects of the novel and is particularly conveyed through the alternating perspectives from which the story is narrated, as well as through the active, autonomous role played by Laura Field in the disclosure of the events.

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3 These stories are “The Sleeping Beauty”, “The Little Mermaid” and “The Twelve Dancing Princesses”, all three subverted by Bird and inserted in Therese's discourse. The first one portrays a sleeping princess who is raped consecutively by several princes (1996: 104), in a close parallelism to Therese's situation, and the others reflect, in different ways, women's physical suffering in their search for love (1996: 106).
Works cited:


