Translating Mind Matters in Twenty-First-Century French Women's Writing

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By

Claire Ellender

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Introduction

> Literature is one of the independent parts of the surrounding ideological reality, occupying a special place in it […]. The literary structure, like every ideological structure, refracts the generating socioeconomic reality, and does so in its own way. But, at the same time, in its 'content', literature reflects and refracts the reflections and refractions of other ideological spheres (ethics, epistemology, political doctrines, religion, etc.). That is, in its 'content', literature reflects the whole of the ideological horizon of which it is itself a part.

Central to Pavel Medvedev's words, and the work from which they are taken (1928/1978, 16-17), is the conviction that literary systems always occur within the ideological milieu of a given era. Indeed, history offers ample evidence to confirm the axiom that literary texts are deeply imbued with the cultural values of the society in which they were produced. It was, for instance, no coincidence that works written in the fourteenth to sixteenth centuries were influenced by classical models, at a time when there was renewed interest in classical antiquity throughout Europe, nor that the literature of the Enlightenment emphasized reason and individualism rather than tradition, when these issues were dominating seventeenth- and eighteenth-century thought. It was not by chance that writers in the 1800s and 1900s were preoccupied with the notions of inspiration, subjectivity, and the primacy of the individual, nor that subsequent modernist writers favored more experimental literary techniques. Works produced during the postmodern period are a further case in point. In short, the postmodern movement represents a departure from modernity and rejects homogeneity or unity. In its written form, the typical postmodern text is a thoroughly unstable entity which flouts discursive norms and crosses generic boundaries, reflecting the diverse and fragmented character of postmodern society at large (Eagleton 1987 in Harvey 1989, 7-9).

From the Middle Ages to the twentieth century:
Representations of mental illness in literature

For thousands of years, societies throughout the world have understood that people can be affected not only by physical disease but also by mental illness. Attitudes towards, and strategies for treating, those who suffer from abnormal mental states have evolved considerably over the centuries and, as Medvedev (ibid.) rightly states of all ideological, and indeed sociological, phenomena, these are reflected in the various literary genres of all eras.[1] In turn, these works of literature have, over the years, lent themselves to a broad range of analyses and interpretations, from linguistic and stylistic, through literary and narratological, to cultural and sociological. The following pages provide an overview of these phenomena, from the Middle Ages to the twentieth century. Their intention is not to enter into great detail in their consideration of the past, but rather to pave the way for the present study which focuses, in the first instance, on the relationship between attitudes and approaches to mental health problems in twenty-first-century Europe and on the ways in which these are represented in the work of contemporary French women writers.

In European history, the Middle Ages spans the period from the fall of the Roman Empire in the West (fifth century) to the fall of Constantinople in 1453 (*OED* 1998, 1170). During this time, mental illness, or "madness", was believed to manifest itself in the physical body and was explained by theories of the four "cardinal humors". These four bodily fluids—blood, phlegm, yellow bile (choler) and black bile (melancholy)—were considered to determine a person's physical and mental qualities by the proportions in which they were present (ibid, 894). Medieval thought also linked madness to theories of evil spirits. In these times, mental illness was viewed as a moral issue, that is, as a test of character and faith (Harper 1997), or as a punishment for sin, particularly in the eyes of Christian Europeans (Merquior 1985). A range of bodily remedies, such as purges and whipping, were advocated to allow excess humors to escape (Kroll and Bachrach 1984) and Christians practiced exorcism of those people who were found to be possessed by the devil (Laffey 2003). Some of the

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[1] A significant text which explores such issues is Michel Foucault's 1961 *Folie et déraison: Histoire de la folie à l'âge classique.* Examining the period from the Middle Ages to the end of the eighteenth century, Foucault describes the evolving definition, and experience, of the mentally ill due to the manipulation of social attitudes by those in power and explores how these phenomena are reflected in literature.

greatest heroes of medieval literature were affected by madness. Significant examples of these are Arthurian knights, such as Lancelot and Tristan, who feature in the courtly romances of the twelfth-century poet, Chrétien de Troyes. In her detailed study, Sylvia Huot (2003) argues that medieval French texts depict a wide range of attitudes towards madness, including spiritual transcendence and sinful degradation, using characters which are both comic and tragic. Huot examines how different treatments of madness can be associated with different literary genres in the medieval period, how the identities of mentally ill characters are established through aspects of their bodies as well as their minds, and how madness interacts with other categories of difference, including class and gender, in the construction of individual characters' "abnormal" identity.

In the sixteenth century, mentally disturbed people, particularly females (Little 2015), were commonly believed to have evil magic powers and dealings with the devil, and were consequently victims of witch-hunts. The increase of this practice, which spread around Early-Modern Europe (Schoeneman 1977), has been theorized as an aspect of the Renaissance (1550–1660) and is believed to be a result of the disintegration of medieval society (Ackerknecht 1968).[2] If the mentally ill were frequently cared for by family in the Middle Ages (*BMJ 311 (7021)*, 1708-12), in the sixteenth century they began to be admitted to workhouses, poorhouses and jails, where they were physically restrained and forcibly confined. Bethlehem, or Bethlem, Hospital in London, known colloquially as "Bedlam", was first built in 1546, was Europe's first and oldest institution to specialize in mental illness and was renowned for the barbaric treatment of its residents. This phenomenon began to feature in literary texts of the time; it was, for instance, the focus of Michael Patterson's play, "Dyccon of Bedlam", which was first printed in 1562.

Throughout the seventeenth century, an increasing number of asylums were built, including the Hôpital Bicêtre in Paris (completed in 1642) and madness was seen as a primarily organic, physical phenomenon, rather than a consequence of moral issues (Burton 1621). The work of some major playwrights in this century, such as Shakespeare (1564–1616) and Molière (1622–1673), depicted a range of mental health problems. Striking examples of these are the hysterical outbursts and madness which

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[2] According to Millon (2004, 45): "The last execution of a witch in Western Europe was performed in 1782, but the bewildering notion that the mentally ill were in league with the devil persisted in popular thought well into the nineteenth century".

characterize the main protagonists' behavior in tragedies such as *Hamlet* (1602) and *King Lear* (1606), as well as Jaques' melancholy in the comedy, *As You Like It* (1603) and Leontes' obsessiveness in *A Winter's Tale* (1623). In her fascinating study, Bernadette Hoffer (2009) concentrates on seventeenth-century French literature and discusses how the physical illness suffered by some of Molière's principal comic characters are caused, or aggravated, by mental factors such as internal conflicts and distress (ibid, 134-36). Examples cited include Alceste's melancholia in *Le Misanthrope* (1666) and Argan's obsessive hypochondria in *Le Malade Imaginaire* (1673). By identifying these psychosomatic disorders, Hoffer demonstrates how authors of the time were already aware of the close connection which exists between the human mind and body.[3]

If the proliferation of madhouses, and the savage treatment of their residents, continued throughout the eighteenth century, Philippe Pinel's (1745–1826) establishment of the Psychiatric profession after the 1789 Revolution resulted in the employment of more trained medics in institutions, the gradual medicalization of madness, and more humane treatment of the mentally ill.[4] Once again, societal trends in this century are reflected in the literature of the time. In the early 1700s, before the process of medicalization during which depression was classified as a condition in its own right, individuals were still described as suffering from various states of melancholy, a theme which featured prominently in English poetry, novels and autobiographies (Ingram et al. 2011). A very different perspective on madness and confinement is provided by Denis Diderot in his 1760 *La Religieuse*. In this work, which tells the story of a young girl, Suzanne, who is forced by her parents to enter a convent and take holy vows, Diderot gives his reader a scathing insight into the effects of living in the segregated, unnatural environment of the convent. Exposed to sadistic cruelty and bullying, as were the residents of madhouses, and to the homosexuality of her mother superior, who herself becomes insane when trying to suppress her lesbianism, Suzanne eventually escapes. However, she has become so damaged and disconnected from society that

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[3] Yogis have acknowledged the close union of, and interrelationship between, the mind and body for thousands of years and this concept continues to be a fundamental principle of Yoga practice (Fraser 2002, 10-11). The Indian spiritual guru, Osho, provides an in-depth discussion of this subject in his 2003 *Mind Body Balancing*.
[4] In spite of this, Michel Foucault maintains that the so-called "compassionate" treatment of the mad in institutions was equally cruel (1961/1972, 175).

she feels lost, helpless and tempted to return to the convent; her mental
health has been seriously affected by her enforced confinement.

In the wake of France's 1848 Revolution, a spirit of upheaval persisted
and madness was integral to many writers' anti-bourgeois, oppositional
strategies (Gill 2011, 488). Flaubert's 1856 *Madame Bovary* constitutes a
prime example of this. Bourgeois Emma, who is attractive, intelligent and
lively, becomes demoralized by the society in which she lives, gradually
sinks into depression and commits suicide by swallowing arsenic; the
novel ends with a vivid description of her death.[5] Many nineteenth-century
literary figures, who suffer from mental problems, including hysteria,
melancholia, trauma and psychosis, are indeed women.[6] Other classic
examples include Claire de Duras's 1824 *Ourika*, a forty-five-page novella
in which a Black woman is depressed and melancholic after having been
purchased as a child in Sénégal and given to a wealthy family in Paris, and
Emile Zola's 1868 *Thérèse Raquin*, in which unhappily married Thérèse,
who also suffers from melancholia, has an affair and subsequently murders
her husband. The subject of female madness does not only feature in the
nineteenth-century French novel, but also in the autobiographic genre.
Amongst such works are Madame Esquiron's *Mémoire* (1893), which
centers on a wealthy and intelligent woman who was incarcerated twice in
the latter half of the nineteenth century at the request of her father, and
Hersilie Rouy's *Mémoirs d'une aliénée* (1883), an autobiographical text in
which the author, who was held in asylums from 1854 to 1868, recounts
her experiences prior to and during her incarceration.[7] Over the years,
these texts, which contain graphic depictions of such issues as eating
disorders, racism and extreme mental distress, have lent themselves to
various feminist readings which repeatedly identify a culturally perceived
link between gender and mental weakness (Little 2015; Wilson 2010).[8]

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[5] The *ennui*, or *mélancholie*, from which Flaubert's Emma suffers, is also referred
to as *le mal du siècle*. The definition of this affliction was believed to have its roots
in English medical debates on humor and was treated as a serious medical
condition which could result in suicide (Gill 2011, 491).
[6] Of course, some significant representations of madness in nineteenth-century
literary texts also focus on men, such as asylum figures in Honoré de Balzac's
Louis Lambert (1832) and Eugène Sue's *Le Juif Errant* (1844-5). A further case in
point is Nerval's autobiographical account of madness in his *Aurélia* (1855).
[7] For a discussion of the confinement of the insane in the nineteenth century, see
Wright (1997).
[8] For an in-depth study of such autobiographical texts, see Susannah Wilson's
2010 *Voices from the Asylum: Four French Women Writers, 1850-1920.*

In the late nineteenth and early twentieth centuries, major changes began to occur in the treatment of mentally ill people. Funding for asylums was gradually reduced during periods of economic decline and an "anti-psychiatry" movement in the 1960s, linked to the general spirit of upheaval which then reigned in Europe, eventually resulted in a process of deinstitualization in the West. During this period, many psychiatric hospitals were closed and community mental health initiatives were instead favored. Those who were mentally unwell were consequently encouraged to live independently in the community, but with the support of dedicated services. In parallel, the medical profession began to coin terms for specific mental health conditions, such as "depression", "psychosis" and "schizophrenia", and a variety of new insights into mental health and its treatment began to develop. These ranged from the psychoanalytic work of Sigmund Freud (1856–1939) and Jacques Lacan (1901–1981),[9] through the more directive Cognitive Behavioral Therapy[10] developed by Albert Ellis (1913–2007) and Aaron Beck (1921-), to the humanistic approaches[11] inspired by Abraham Maslow (1903–1970) and Carl Rogers (1902-1987). Feminist interpretations of literary representations of mental ill-health continued throughout the century. In her 1986 *Portrait de Dora*, Hélène Cixous sees Dora as a powerful figure whose silence during her incarceration constituted a deliberate anti-patriarchal strategy. However, all mentally ill characters were not automatically incarcerated but functioned, albeit with difficulty, in society, as can be witnessed in Sylvia Plath's semi-autobiographical novel, *The Bell Jar* (1964) and Virginia Woolf's 1923 *Mrs Dalloway*. In the latter, the schizophrenia

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[9] According to Hough (2014, 78): "[The] term [psychoanalysis] refers to two aspects of Freud's work. First, it denotes his theory of human development and behavior, and secondly it describes the related therapy which he used to help patients gain access to mental conflicts. […] In the context of psychotherapy and counseling, the word 'psychodynamic' refers to an approach which originates in Freudian theory".

[10] CBT is a professional, psychological approach which examines how individuals' thoughts and beliefs (cognitions) influence both their feelings and their behavior. It encourages people to identify how they think in negative and unhelpful ways and to establish how this can adversely affect their feelings and behavior. By working out ways of challenging negative thoughts and replacing these with more accurate beliefs and clearer thought processes, CBT can help people to live healthier, happier lives.

[11] Humanistic psychology is "[…] a psychological approach which emphasizes subjective experience and the uniqueness of human beings. [It] is sometimes referred to as the 'Third Force' in psychology, after psychanalysis and behaviorism" (Hough 2014, 316).

suffered by the principal protagonist is clearly reflected in the schizoid nature of the novelistic text. According to Swain (1992), there is a close relationship between mental states, and indeed states of consciousness, and narrative strategy in nineteenth- and twentieth-century fiction, and the study of one can shed important light on the other.[12] Furthermore, suffers were, by no means, all female. Le Clézio's 1963 *Le Procès-Verbal* paints a detailed portrait of a young man's mental illness and the novels of Michel Houellebecq convey perceptively the depressive, psychotic states of his male protagonists (1994; 1998).

Approaches and attitudes towards mental health issues in the twenty-first century

This century, worldwide awareness of the prevalence of mental health disorders continues to increase[13] and classification of the latter has evolved.[14] Thanks to this, public attitudes towards seeking help from mental health professionals and to taking medication have improved

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[12] Indeed, it is broadly acknowledged that the Surrealist movement of the 1920s and 1930s was influenced by Freud's theories of the unconscious. Surrealist writers, notably André Breton and Philippe Soupault in their 1919 *Les Champs Magnétiques*, attempted "automatic writing", a method of composition which tries to dispense with conscious control or mental censorship, transcribing immediately the promptings of the unconscious mind (see Baldick 1990, 19). Furthermore, numerous theorists have discussed the significant role of "madness" in the development of the Surrealist movement (Flora 2017; Ladimer 1980) and the extent to which this movement was influenced by André Breton's medical training and interest in Psychiatry (Haan et al. 2012).

[13] According to a recent study by the World Health Organization ([n.a.] 2017), which focused on a number of EU countries, twenty-seven percent of the adult population (aged sixteen to sixty-five) had experienced at least one of a series of mental disorders in the past year. These disorders included problems arising from substance abuse, psychosis, depression, anxiety and eating disorders. An estimated eighty-three million people are therefore believed to be affected in Europe alone.

[14] Key examples of these taxonomies are DSM-5, *The Diagnostic and Statistical Manual of Mental Disorders* (www.psychiatry.org/psychiatrists/practice/dsm), and the excellent website of the mental health charity, MIND (www.mind.org.uk/information-support/types-of-mental-health-problems/), which will be referred to repeatedly throughout the present study. See also Berrios, German and Porter Roy (eds. 1995).

considerably over the past twenty-five years (Angermeyer 2017).[15]
Despite the development of psychiatric medicines, such as Selective
Serotonin Re-uptake Inhibitors, or SSRIs, in the 1990s (McKenzie 2017),
the preferred treatments for such conditions are psychoanalytic and
psychological therapies (Angermeyer ibid). Indeed, many European
countries have moved towards community based, socially inclusive care
for the mentally ill (Morant 1997, 28)[16] which gives those concerned the
freedom to live independently and have regular access to mental health
services and talking therapies. In the UK, the National Health Service has
recently invested large sums in the provision of CBT, which it considers
particularly effective in the treatment of anxiety and depression, whereas
mental health professionals in France tend to favor psychoanalytic theories
and practices (Morant ibid, 165). In the education sector, there has been
increased acknowledgement of the pressures faced by young people and
sizeable investment in awareness campaigns and talking therapies
following recent tragedies in UK universities (Karim 2017; Turner 2017).
Rather than waiting until mental disorders develop, European countries are
turning towards alternative, holistic practices such as meditation,
mindfulness[17] and Yoga, in order to empower individuals to take care of
themselves and to prevent their falling ill (Ellender 2017; 2018). This
century, citizens in France and the UK, for instance, are actively
encouraged to practice self-care by attending classes at Health and Well-
being and Yoga centers (www.equilibriumyoga.co.uk; www.vivance-
sophrologie.fr), reading books (André 2011; O'Hare 2012; Roux-Fouillet
2013), consulting websites (www.doctissimo.fr; www.passeportsante.net)
and using apps, which are sometimes free, on their mobile telephones.[18]

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[15] In the UK, the "Heads Together" awareness campaign led by the Royal Family
has made a significant contribution to the destigmatization of mental health issues
(www.royalfoundation.com/heads-together/).

[16] See the European Union's "Joint Action on Mental Health and Well-being"
(www.mentalhealthandwellbeing.eu/the-joint-action/).

[17] Mindfulness: "The practice of maintaining a non-judgemental state of
heightened or complete awareness of one's thoughts, emotions or experiences on a
moment-to-moment basis" www.merriam-webster.com/definitions/mindfulness
[accessed September 20 2018].

[18] 'Faire de la méditation est bénéfique pour le bien-être' www.tf1.fr/tf1/jt-20h/
videos/20-heures-4-janvier-2018.html [accessed January 7 2018].

Translating Mind Matters in Twenty-First-Century French Women's Writing: **Approach and rationale**

Against this background, the present study adopts an inherently interdisciplinary approach. In PART ONE, it focuses on the content of a body of literature, and considers how the given texts reflect attitudes and psychological approaches which exist in twenty-first-century European cultures and societies. The chosen body of works is composed principally of novels which are written by French women writers between 2000 and 2015 and which concentrate on one or more of the mental health problems as set out by MIND. However, occasional exceptions include use of the *récit* genre and novels written by French-Canadian and Franco-Moroccan authors. The texts have also been selected in order to reflect key debates in the fields of Psychology and Psychotherapy this century. First, although there is much recognition that mental health problems can be caused by biological, or genetic, factors (Kandel 1976; 1987), many of the pathologies experienced by characters in the chosen novels are presented as being determined by environmental, or social, and indeed psychological, factors. This stance is closely in line with the cutting edge research of clinical psychologists such as Peter Kinderman (2014).[19] Second, some of the characters in the chosen novels do not have access to talking therapies and their problems remain unresolved, others have therapy to limited effect, and yet others benefit considerably from such help. These latter cases support a growing trend towards offering psychological therapies either as an alternative, or in addition, to drug therapy/pharmaceutical solutions. As previously discussed, the value of Cognitive Behavioral Therapy has, for instance, recently been given increased recognition by the UK's National Health Service.[20] Third, the concluding chapter of PART ONE of this work centers on the stories of three young people who actively seek to improve their lives. Again, this work reflects an important and current trend in psychological research. While the fields of Psychology and Psychotherapy traditionally focus on resolving mental health pathologies, recent years have witnessed a considerable development of the field of Positive Psychology, whose essence is to assist people in living fulfilled,

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[19] In this vein, Chapters One to Four of this work focus on examples of mental health issues which have originated in the given characters' childhoods, and Chapters Five to Seven present issues which have appeared in the protagonists' adult lives.

[20] Chapters One to Four and Five to Seven of this book are thus organized in order to illustrate the different amounts of talking therapies to which the characters have had access and the varying degrees of success in which this has resulted.

happy lives, being true to themselves and flourishing, as is exemplified by the work of Professors Stephen Joseph (2016) and Martin Seligman (2002; 2011).

The eighteenth-century English writer, Dr Samuel Johnson (1709-1784), once professed that "the only end of writing is to enable the readers better to enjoy life or better to endure it" (in Murphy 1846, 610). Endorsing the view that reading literature which deals with the subject of mental health can not only help people to understand, but also to cope with, deep emotional strain (Gallagher 2016; Johnson ibid), PART TWO of this book provides detailed textual analyses, and discusses the English-language versions, of the four works examined in PART ONE which already exist in translation. Suggesting how these may be of benefit to an Anglophone readership, it recommends that the four remaining works, which may be equally helpful, are suitable for translation into English.

PART ONE:

REPRESENTATIONS OF MENTAL HEALTH ISSUES IN TWENTY-FIRST-CENTURY FRENCH WOMEN'S WRITING

CHAPTER ONE

BULLYING AND SUICIDE IN NORA FRAISSE'S
MARION: 13 ANS POUR TOUJOURS

1) Context

i) Nora Fraisse[21]

Nora Fraisse was born in France and raised in a socially deprived area (Fraisse 2015, 157). Her parents, who were of African origin and arrived in France at the end of the Algerian war, had four children who they raised in a happy and loving home (ibid, 95). After leaving school, Nora studied Law at university and subsequently attended a management school. At the age of twenty-one, she met David Fraisse, whom she married some years later. Together, they had three children and built their family home in the village of Vaugrigneuse, in France's Essonne region. In 2013, however, tragedy struck. Nora and David's oldest child, Marion, who was then thirteen years old, committed suicide by hanging herself in her bedroom. When the couple learned that Marion's suicide was due to her being bullied at school and online, they became actively engaged in the fight against this social evil. Notably, Nora Fraisse has published two books– *Marion: 13 ans pour toujours* (2015), which was adapted and made into a *téléfilm* by Bourlem Guerdjan in 2016, and *Stop au Harcèlement ! Le guide pour combattre les violences à l'école et sur les réseaux sociaux* (2015). Nora and David Fraisse also founded the association, "Marion Fraisse–la main tendue" (2013), which assists those affected by bullying, and were influential in creating the national bullying campaign, *NAH–Non au Harcèlement* (November 2015), which is now held in all school establishments throughout France every year. If the Fraisses' ultimate objective is to prevent bullying, they also strive to destigmatize this

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[21] The factual content of this section of the present chapter is informed by two principal sources: Fraisse (2015); www.marionlamaintendue.com [accessed June 10 2018].

phenomenon so that, when bullying does still occur, those affected can reach out for, and receive, appropriate psychological help.

ii) *Marion: 13 ans pour toujours* (2015)

In her foreword to this book, Nora Fraisse explains her multidimensional rationale for writing it. Through this work, she intends to: pay homage to her late daughter; ensure that others learn from Marion's death and do not suffer a similar fate; encourage schools to listen to, and support, those affected by bullying; and see that the phenomenon of school bullying is taken seriously by all. Fraisse's narrative voice uses the second-person, singular, French pronoun, *tu*, addressing Marion, who has passed away. First describing how she felt when she found Marion hanging, Nora Fraise tells her daughter how she and her husband have tried relentlessly to understand what triggered their daughter's suicide and to find out who was responsible for this (2015, 85). She explains how her teachers and head teacher were unhelpful and unsympathetic, denying any bullying in the school, how she and Marion's father have written to politicians for support, filed legal complaints against the bullies and the school and, despite their initially finding the press intrusive, how they ultimately agreed to being interviewed in order to publicize Marion's case and further their cause. As Marion had hidden her distress, was unable to confide and therefore had no access to psychological help, Nora Fraisse's *Marion: 13 ans pour toujours* forms part of this author's fight not only for the prevention of school and cyber bullying, but also for the (psychological) treatment thereof.

2) Background: School bullying, cyber bullying and suicide

The concept of school bullying was first investigated systematically in the early 1970s by Norwegian psychologist, Dan Olweus, who carried out studies in a number of Scandinavian schools. Olweus (1978) established that bullying has three defining characteristics: it intends to harm the victim; it continues over a period of time; and the victim, who may be naturally anxious or shy, does not feel able to stand up for themselves. In addition to physical violence, victims of school bullying can also receive psychological abuse, being insulted, mocked and, ultimately, ostracized. In recent years, the rapid increase in the use of social media has undoubtedly exacerbated this phenomenon; while, in the past, victims may have had

some respite while outside the school environment, they can now be hounded, day and night, via a plethora of social networks.

A child who is being terrorized and who is struggling to cope may feel unable to confide in an adult. They may fear that others would not understand or would be upset by their confiding. If this is the case and their distress is suppressed, victims can display certain behaviors and symptoms in the medium to long term, including: anxiety, depression and related psychosomatic disorders such as digestive problems and headaches; changes in appetite, and subsequently, changes in weight; low self-esteem; and a tendency to avoid going to school. In the worst cases, severe distress can result in suicide.[22] In view of the above, it is clearly vital not only to strive to prevent the occurrence of bullying, but also to provide an atmosphere which encourages young people to confide in adults whom they can trust if they are affected.

Since Olweus' initial studies, school bullying and, subsequently, cyber bullying, have been investigated and acknowledged internationally.[23] In the UK, for instance, not only are there numerous prevention campaigns (www.actagainstbullying.org), but laws also exist to sanction anyone in a school environment who does not respect anti-bullying measures. Indeed, in October 2000, the Human Rights Act of 1998 became law in the UK. Schools can therefore now have charges brought against them if they allow the rights of children and young people who they work with to be breached by failing to take bullying seriously. In 2006, moreover, "The Education and Inspections Act" placed a number of statutory obligations on schools which establish clear measures to be adopted when responding to bullying. This Act even gives head teachers the ability to discipline behavior which occurs when pupils are not on school premises.[24] When bullying does occur, despite preventive measures and legal deterrents, many informal, practical resources are now available on line for victims themselves (www.bullying.co.uk), parents (www.kidpower.org) and schools (www.anti-bullyingalliance.org.uk). In the worst case scenario, the

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[22] The excellent and informative website, www.mind.org.uk, provides concise information about this phenomenon [accessed June 15 2018].

[23] Over the years, Olweus himself has pursued work in this field. His *The Olweus Bullying Prevention Programme* (2007) is, for instance, a scheme which draws on thirty-five years of research and is intended to prevent and reduce bullying throughout the school setting.

[24] See www.antibullyingworks.co.uk/resources/dutiesresponsibilities [accessed June 18 2018].

Samaritans offer advice and support to all those affected by suicide (www.samaritans.org.uk).

3) School bullying, cyber bullying and suicide in *Marion: 13 ans pour toujours*

Marion was a gentle, shy girl who did not stand up for herself (2015, 15). At school, she was a serious and successful pupil who differed from many of her classmates due to her studious attitude (77). Nora discovered that her daughter was sometimes threatened with physical violence ('On va te crever les yeux' (90); 'On va te niquer' (90); '[…] à l'arrêt de bus t'es morte' (103)) and, at times, assaulted ('Deux ou trois garçons t'avaient coincée dans la cour avant la photo [de classe], avaient soulevé ta jupe, t'avaient peloté les fesses' (69)). However, the majority of the abuse which Marion suffered was verbal in nature, referring to her appearance (105):

> Des filles se moquaient de toi, tu me l'as raconté. On te reprochait d'avoir 'des dents de lapin', d'être 'grosse', de t'habiller 'comme un garçon', de ne pas avoir de vêtements de marque. Toutes ces critiques ridicules et blessantes de cour de récré.

and to her intellectual ability (106):

> Tu étais en larmes : 'Je ne comprends pas, je ne suis pas une autiste, ni une mongole, ni une bouffonne, ni une balance.' On te qualifiait d'intello parce que tu travaillais bien. Aujourd'hui, à écouter certains gamins, si tu as de bonnes notes, tu as raté ta vie. Quelle bêtise !

In her suicide letter, Marion provides further examples of the threats and insults which she received: '[…] vous êtes allez beaucoup trop loin dans cette histoire'[25] 'Faux-cul', 'sans amie', 'on va te niquer à ton retour', 'bolosse', 'sale pute', 'connasse' […]' (28). Over time, these resulted in her feeling ostracized. Nora Fraisse rightly acknowledges that, given the constant online activity of young people, adolescents who are bullied have no respite from this harassment (164):

> Le phénomène du harcèlement est devenu grave et dangereux car il n'est plus circonscrit à l'école. Il n'est plus question, pour une petite victime, de se reposer à la maison, de respirer, de se libérer un peu. Au calme, on peut

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[25] The grammatical mistakes which featured in Marion's suicide letter are deliberately retained in this quotation.

éventuellement se confier à ses frères et sœurs, à ses parents. J'imagine que ce doit être très difficile de retourner en classe quand on n'a pas pu, à la maison, prendre du recul, relativiser, reprendre des forces. Car les SMS pleuvent, les messages sur Facebook mitraillent, la bagarre continue, toute la nuit, s'il le faut.

Despite her parents' forbidding her to have a Facebook account before the age of fourteen (33), Marion had opened an account secretly when she was thirteen (34). Through this social network, she began to receive further insults (34; 83). She also used her mobile telephone excessively ('Ton compte recensait 3 000 SMS rien que pour le mois de janvier ! J'en étais encore sidérée' (11)) and received offensive messages on this (11; 31), some of which were pornographic ('Envoie-moi une tof de toi pour que je puisse me branler' (31)).

Marion's suffering went undetected at school and at home ('Tout le monde s'est senti coupable de n'avoir rien décelé, sauf ceux qui t'ont harcelée' (122)) and she felt unable to confide in anyone, even at home (15). Fraisse suspects that this was due to her daughter's not wanting to upset her parents ('Dans ma tête embrumée de chagrin, j'égrenais tes raisons. Tu te sentais trop coupable pour te confronter à notre regard. Tu craignais de nous décevoir' (21)). This repressed anxiety in fact manifested in a number of ways. Marion's behavior deteriorated at school ('Retards, bavardages, devoirs non présentés' (19)), but her parents were not made aware of this. At home, she displayed psychosomatic health problems ('Tu t'étais sentie faible, cela ressemblait à la grippe' (9)) and sometimes returned home early from school due to her feeling unwell (91-92). Significantly, she also experienced changes in her appetite, eating habits and weight (87):

> Tu étais maigre, je t'avais emmenée quelques jours plus tôt chez le médecin qui attribuait ton manque d'appétit à ton appareil dentaire. J'ignorais que tu ne mangeais pas à la cantine […]. Quelqu'un t'a jeté que tu avais de grosses cuisses et tu l'as cru […].

Prolonged physical and verbal torment at school and on line, ostracization and an inability to confide, progressively took their toll on this young girl. Marion ultimately committed suicide on February 13, 2013. She hanged herself with a scarf in her bedroom and also very symbolically hanged her telephone, the medium through which she had received much of her abuse (23):

> Tu avais pendu ton téléphone à la mezzanine. De la musique en sortait, toujours la même, lancinante. […] Tu t'es donné la mort en musique mais,

avant, tu as fait taire ton téléphone à jamais. Ce téléphone par lequel tout est arrivé, les insultes, le harcèlement. L'arme du crime. Tu l'as tué symboliquement.

Following Marion's suicide, the Fraisse family received no comfort or support from the school staff ('[…] je ne me suis sentie réconfortée ni entourée par le collège' (42)) who clearly wanted to protect the school's reputation by denying that bullying was a problem within it ('[…] j'ai senti que l'administration scolaire se barricadait' (43); '[…] l'institution scolaire s'est placée sur la défensive […]' (45)). The family also experienced animosity within the local community as some residents resented the atmosphere caused by Marion's suicide ('J'ai cassé la quiétude du village. Voilà ce qu'on me reproche' (55)) and certain legal experts advised them that the action which they could take would be limited (108). In brief, Nora and David Fraisse were made to feel a nuisance and that many were disinterested in their loss (109):

> Tu comprends, ma Mayon,[26] ce genre d'affaires est généralement classé sans suite, rangé au rayon des accidents de l'existence. Il n'y a pas de raison pour que ça ne continue pas ! Cela ne les intéresse guère. Il s'agit d'un fait divers embarrassant. Des mineurs sont en cause. Des adultes qui n'ont pas envie de se sentir responsables. Tout cela est très ennuyeux. On ne touche pas à nos enfants, on ne touche pas aux institutions. Autant mettre un couvercle dessus !

4) Taking action against bullying and suicide in *Marion: 13 ans pour toujours* / Situating this in relation to anti-bullying measures implemented in the twenty-first century

Given the extent to which Nora and David Fraisse felt that Marion's bullying and suicide were dismissed, the couple have since striven to prevent bullying among school children and, when it does occur, to ensure that those affected do not feel stigmatized and can therefore seek help and be adequately supported. In addition to publishing two books—*Marion: 13 ans pour toujours* (2015) and *Stop au Harcèlement ! Le guide pour combattre les violences à l'école et sur les réseaux sociaux* (2015)—the Fraisses have been inspired by anti-bullying action in other countries (174). They have set up an association in memory of their daughter (178-79; 183) and have fought both for the introduction of prevention campaigns, in partnership with the *Education Nationale* (138) and for the

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[26] "Mayon" was Nora Fraisse's pet name for her daughter.

passing of a law to prevent bullying (176). Furthermore, Nora and David have proposed concrete, practical measures which they would like to see implemented in schools, such as giving head teachers financial bonuses for using anti-bullying strategies in their institutions (162), increasing security staff (164) and modifying the organization of school timetables in order to minimize break times and the likelihood of aggression occurring during these (167). On those occasions when preventive measures fail and bullying does occur, the Fraisses suggest that school staff be trained to detect early signs of this (165):

> Aujourd'hui, les enseignants, les surveillants, tous ceux qui encadrent les enfants à l'école ne sont pas outillés pour renifler le drame qui couve. On pourrait avoir des personnels spécialement instruits, qui tourneraient dans les écoles. Des infirmières scolaires, par exemple, qui sauraient susciter les confidences, percevoir le mal-être des enfants en détresse. On pourrait organiser des permanences dans les maisons des jeunes. Il faudrait former tous les éducateurs, quelle que soit leur spécialité, les sensibiliser au problème, les aider à repérer les conflits trop inégaux. Certains, comme les éducateurs sportifs, sont bien placés pour déceler les gamins fragilisés. Il y a des signaux. Il faut les connaître.

They also highlight the advantages of implementing pastoral and peer support systems within schools (168):

> On pourrait créer un système de tutorat à l'intérieur des établissements scolaires, afin que chacun bénéficie de l'aide d'un grand, ou d'un plus fort scolairement. Pourquoi pas un coaching interélèves ? […] Mais attention, l'adulte doit être présent, très présent, toujours présent dans la classe et dans la tête des élèves.

Nora and David emphasize that pupils should be made aware of how they can access support from school staff (153) and be offered help from a child psychologist if they are bullied (173):

> Et si toi, victime de harcèlement, tu vas expliquer ton problème dans un établissement scolaire qui joue le jeu, tu ne seras plus une balance, le principal sera derrière toi, des associations te soutiendront, des pédopsychiatres interviendront.

As the above examples demonstrate, the Fraisses' approach and recommendations, which relate specifically to the school system in France, are closely in line with the informal, formal and legal anti-bullying initiatives which exist in other European countries and internationally, as detailed in section 2 of the present chapter.

CHAPTER TWO

SEXUAL ADDICTION IN LEILA SLIMANI'S
DANS LE JARDIN DE L'OGRE

1) Context

i) Leila Slimani: her life and works[27]

Journalist and writer, Leila Slimani, was born in Rabat, Morocco, in 1981. Holding both Moroccan and French citizenship due to her Alsatian heritage – her maternal grandmother was French – Leila Slimani is the second of the three daughters of Béatrice-Najat Dhobb Slimani, an otolaryngologist, and Moroccan economist, Othman Slimani. After attending French schools in Morocco, Slimani went to Paris to study Political Science at Sciences Po and Media Studies at the Ecole Supérieure de Commerce de Paris (ESCP). She married a Parisian banker in 2008 and worked as a journalist for the magazine, *Jeune Afrique*, before deciding to become a freelancer and write novels when, in 2011, her son was born. Her second child, a daughter, arrived in 2017.

Leila Slimani's first novel, *Dans le jardin de l'ogre*, was published in 2014 and inspired by the sexual addiction of the French politician, and then head of the International Monetary Fund, Dominique Stauss-Kahn. This work received the Mamonnia literary prize in Morocco.[28] Her second novel, a psychological thriller, *Chanson Douce*, was released in 2016 and won both France's prestigious Prix Goncourt and Le Grand Prix des Lectrices Elle 2017. Gradually, Slimani enjoyed both national and international fame as this work has been translated into multiple languages. Subsequently, in 2017 she published *Sexe et Mensonges: La*

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[27] The content of the present chapter has been informed by two principal sources: www.africansuccess.org/visuFiche.php?id=1080&lang=fr [accessed April 15 2018] and www.babelio.com/auteur/Leila-Slimani/369310 [accessed April 16 2018].

[28] "Dark novel on female sex addiction wins prize in Morocco" France 24. September 2015.

Vie Sexuelle au Maroc, a compilation of the stories of many women who she interviewed throughout Morocco, an illustrated novel, *Paroles d'honneur*, and a biographical text entitled *Simone Veil, mon héroine*. In 2018, Leila Slimani was recruited by President François Macron to lead a campaign whose aim is to internationalize the French language, promoting it throughout Africa (Bremner 2018).

ii) *Dans le jardin de l'ogre* (2014)

The principal protagonist of this novel is thirty-five-year-old Adèle. Of Franco-Algerian origin, Adèle lives in Paris, is married to a successful gastroenterologist, Richard Robinson, has a two-year-old son, Lucien, and works as a journalist.[29] Dissatisfied with all aspects of her bourgeois life – a lack of affection and intimacy in her marriage of nine years, boredom and resentment in her role as a mother and no real interest in, or commitment to, her job – Adèle feels a strong sense of *mal-être*. She responds to this by having multiple, elicit, and sometimes dangerous, sexual encounters with a range of men, from her boss and acquaintances made on business trips, through her husband's colleagues and friends, to strangers for whose services she pays. The couple face a range of challenges: Richard has an accident on his scooter and is unable to work for weeks; he learns of Adèle's affair with his colleague, which nearly ends their marriage; and Adèle's father dies unexpectedly. They subsequently move to the country to begin a new life, in an environment to which Adèle struggles to adapt. The novel concludes as Adèle is due to return to her husband and son in the country after attending her father's funeral, but is late. Maintaining a positive attitude, Richard is hopeful that his wife will come home and he resolves to treat her with more kindness in future, but the reader is left to draw their own conclusions.

2) Compulsive sexual behavior/sexual addiction[30]

i) Background

Compulsive sexual behavior refers to a preoccupation with sex-related activities, including feelings or thoughts which interfere with a person's personal relationships, professional life and physical or mental health. The

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[29] Aspects of this novel have clearly been inspired by Slimani's own life.
[30] Sources: www.hypersexualdisorder.org.uk [accessed April 10 2018];
www.nhs.org.uk/sex-addiction [accessed April 11 2018].