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Exploration of Physical and Mental Space: Unveiling Reality and Representation of Mental Disorder in A J Finn's *The Woman in the Window*

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Abstract:

This study focuses on how psychologically imbalanced people experience several problems in their lives. A.J. Finn's *The Woman in the Window* (2018) narrates the story of Anna Fox, who has agoraphobia. She is delusional and talks to her husband and daughter, who are dead in real life. Anna witnesses a murder scene in her neighbour's house and complains about it; she is proven to be delusional by the police. At the end of the novel, it is revealed that whatever she said about the murder is true. Drawing on Edward Soja's spatial theory, this article argues that different spaces play a significant role in shaping the life and experiences of the patient. It further examines the representation and reality of the patient's medical condition and explores how these spaces contribute to the patient's sense of confinement.

Keywords: Physical, Mental, Space, Reality, Representation, Delusion.

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Introduction

Mental illness narratives move beyond the portrayal of external aspects of human lives and shed more light on the internal struggles. Such literary representations not only depict the inner struggles of individuals but also offer insights into the complexities and realities of the human mind. When it comes to mental health issues, no one is spared. One such depiction is in *The Woman in the Window* by A. J. Finn. The debut novel, published in 2018, was a New York Times bestseller. A.J. Finn is the pen name of Daniel Mallory, who holds a Master's degree in English. His experience at a publishing house during the initial stages of his career helped him pen a well-structured novel in his first attempt. By focusing on the mental condition, this research article delves into the psychological issues of the protagonist and analyses how the representation of the mental disorder and the reality of the disorder co-exist in the text. Drawing on Soja's trialectics of spatiality, this study delves into the protagonist's confined domestic space and argues that space can significantly shape, transform, and influence the lives of individuals experiencing mental illness. Further, it examines how the investigation personnel are indifferent towards patients who are sufferers of mental disorders.

Disorder as Disorientation

A balanced state of mind plays a crucial role in enabling individuals to lead coherent and meaningful lives. If this state of coherence is disrupted, it can lead to psychological distress and disorder in an individual's life. In Anna's case, her wavering mind only thinks about the mysterious death of Jane Russell. She is captivated by her own thoughts. Anna says, "Sometimes I've got too many thoughts at once. It's like there's a four-way intersection in my brain where everyone's trying to go at the same time" (Finn 79). As a sufferer of agoraphobia, Anna also faces a lot of psychological imbalances. As Anna herself asserts, "Many of us – the most severely afflicted, the ones grappling with post-traumatic stress disorder – are

housebound, hidden from the messy, massy world outside" (Finn 27). The present trauma affects her in multiple ways, starting with the basis of her day-to-day thinking, which in turn ruins her mental peace and pushes her into depression. Anna thinks, "If we're trading confidences, then I suppose: "Trauma. Same as anyone." I fidget. "It got me depressed. Severely depressed. It isn't something I like to remember" (Finn 93). Although she appears to be grounded in the present, her dreams and reality intersect and conflict with one another. Anna says, "My mind is a swamp, deep and brackish, the true and the false mingling and mixing" (Finn 204). Her psychologist's mind helps her to understand the current situation. Anna ponders, "At the hospital, they told me I was in shock. Then shock became fear. Fear mutated, became panic. And by the time Dr. Fielding arrived on the scene, I was—well, he said it simplest, said it best: "A severe case of agoraphobia"" (Finn 320). Anna's consumption of alcohol is yet another reason why she feels as if she is in a dilemma all the time.

Anna's life is also shaped and constrained by the patriarchal system. Ethan and his father, Alistair, are portrayed as representatives of the patriarchal system in the novel. Initially, Alistair tries to silence her, since she is there as evidence against them. Alistair says, "You don't know *anyone!* You stay here in your house and you *watch* people" (Finn 303). By saying this, Alistair attempts to convince the detectives that he has done nothing wrong. Even the detectives are not ready to listen to Anna's statement. Their ideology also appears to align with that of the general public. Based on Anna's condition, they conclude that she is incapable of perceiving reality accurately. Anna is a threat to Alistair and Ethan's secret. Alistair says, "She's a menace" (Finn 303). One of the detectives says, "I think that you've had a hell of a time. I think that you really believe you met with this lady, just like you believe you're talking to Olivia and Ed." (Finn 314). At a certain point, Anna herself begins to question the validity of her perceptions, suggesting how the patriarchal society has influenced her confidence in her own judgment. Anna thinks, "I did things I can't remember. I didn't do things I can remember"

(Finn 353). She even overthinks and says, “I’m a machine. A thinking machine” (Finn 240). Anna here not only leads a disoriented life but is also confined to her space.

Condition as Confinement

According to Mayo Clinic, “Agoraphobia involves fearing and avoiding places or situations that might cause panic and feelings of being trapped, helpless or embarrassed.” Anna also has a fear of stepping out of her house. This disorder causes a serious mental condition. According to the World Health Organization, “A mental disorder is characterised by a clinically significant disturbance in an individual’s cognition, emotional regulation, or behaviour. It is usually associated with distress or impairment in important areas of functioning.” The traumatic experience of the car accident, where she witnessed her husband and daughter slowly die before her eyes, has an impact on her. In the freezing cold, without a mobile signal to contact anyone for help, she tries her level best to bring the lives of her husband and daughter back, but her efforts fail. Anna describes it as, “I howled, a wild thing. I turned onto my stomach, I flung my arms around Olivia and Ed, clutched them to myself as I whimpered into the snow” (Finn 283). Personal space is generally understood as a domain that provides individuals with a sense of freedom, privacy, and autonomy. Individuals often develop strong emotional attachments to the places in which they were raised and spent significant periods of their lives. In Anna’s case, the expansive winter landscape intensifies her emotional isolation and leaves an indelible psychological wound, demonstrating how space can profoundly influence an individual’s mental and emotional state. The wintry environment compels Anna to withdraw further into her personal space, intensifying her sense of isolation and confinement. Anna clarifies, “I need the familiar confines of my home—because I spent two nights in that alien wilderness, beneath those huge skies. I need an environment I can control—because I watched my family as they slowly died” (Finn 320-321). She does not want to enter anyone’s space in the outside world. This is the reason why she stays in her house throughout the day. Anna says,

"I could no longer keep up with the world beyond my window" (Finn 83). Bachelard examines how dwelling spaces shape and influence the human psyche. In *The Poetics of the Space*, Gaston Bachelard quotes the lines of Pierre Albert Birot as follows:

> At the door of the house who will come knocking?
>
> An open door we enter.
>
> A closed door, a den
>
> The world pulse beat beyond my door. (Bachelard 3)

The image of the closed door symbolises Anna's confined existence. Although she appears to feel comfortable in her own space, it ultimately becomes a space of entrapment rather than security. Her personal space gradually intensifies her apprehension and causes her to become increasingly preoccupied with her own thoughts. The comfortable space is her confinement. Her thoughts lead her to a series of thoughts, time and again. Anna's living space is the culmination of all these. This can be better understood in Gaston Bachelard's words as, "A house constitutes a body of images that give mankind proofs or illusions of stability" (Bachelard 17). No doubt that Anna lives in illusion, but that itself provides her strength and stability. The space Anna chooses to inhabit offers her a sense of hope, stability, and direction in her life. Here, space also serves as a survival mechanism for Anna.

Space as a Surviving Mechanism

Space always plays a vital role in the lives of struggling people. Spatial settings can provide a sense of solace and security; however, when these spaces become constrained, they can also generate psychological distress and disrupt an individual's sense of peace. Henri Lefebvre was the first to propose the concept of the spatial triad in his influential work *The Production of Space* (1974). Later, Edward Soja developed it. He argues that space is not

merely a physical entity but a social construct produced through the interplay of spatial practices, representations of space, and representational spaces. In Anna's case, her physical environment initially provides her with a sense of comfort and security, offering her a space in which she can retreat from the outside world. This sense of comfort may also explain Anna's reluctance to move beyond the confines of her familiar environment. In this context, Edward Soja's trialectics of spatiality provides a framework for examining Anna's relationship with and experiences of various spaces. Soja proposes the following three spaces: i) Spatial space (perceived space), ii) Representation of space (conceived space), iii) Spaces of Representation (lived space). According to Soja, the first space can be defined as, "Spatial practice, as the process of producing the material form of social spatiality, is thus presented as both medium and outcome of human activity, behavior, and experience." (Soja 66). Anna's house, as a physical and material structure, serves as a tangible embodiment of this conception of space. The emotional connection her house creates with the past has a significant impact on her present life. Moreover, Anna finds a sense of solitude in her own space. Bachelard puts it as, "We are hypnotised by solitude, hypnotised by the gaze of the solitary house;" (Bachelard 36). Anna is under the impression that she lives with her husband and daughter. In this context, she is hypnotised by the memories of her dead family.

Anna not only lives in the physical space, but she also lives in an imaginary space where she talks with her dead husband and daughter. It can be better understood through the following definition of the second space, "This *conceived* space is also tied to the relations of production and, especially, to the order or the design that they impose." (Soja 67). This imaginary space gives comfort to Anna. According to Edward W Soja (1996), "The "imaginary."… becomes (or better: becomes again) magical. It fills the empty spaces of thought, much like the "unconscious" and "culture." ..." (Soja 53). Like Soja's definition, the imaginary space fills the vacuum in Anna's life. Though it is a hallucination, her life is comfortable in the hallucinatory

space. At the same time, her house also functions as a coping mechanism, helping her navigate the challenges of her condition. Soja defines third space as, "Spaces of representation contain all other real and imagined spaces simultaneously." (Soja 69). Anna is also happy to be a part of Agora, an online platform where she counsels people. Whenever she interacts with people on Agora, she experiences a sense of satisfaction from knowing that, as a psychologist, she has been able to help someone. In this way, the virtual space of Agora provides her with a sense of hope and purpose. Thus, the various spaces she inhabits play a significant role in Anna's ability to cope with her condition and navigate her life.

Reality and Representation

The reality and the representational quality of the patient's disorder need to be analysed to understand the patient's mindset. This understanding would enable healthcare professionals to offer more effective care to patients. When it comes to patients who undergo traumatic episodes in their lives, the world of reality is an illusion for them. While they appear to be living ordinary lives, they are engaged in an ongoing internal struggle. At the same time, an examination of the representation and reality of the disorder brings to light several hidden aspects of the patients' experiences. Anna is agoraphobic, and at the same time, she is also a victim of Post-Traumatic Stress Disorder (PTSD). The memory of her husband and daughter continues to live with her.

Anna screams:

> How can I explain? To anyone—to Little or Norelli, or to Alistair or Ethan, or to David, or even to Jane? I *hear* them; their voices echo inside me, outside me. I hear them when I'm overwhelmed by the pain of their absence, their loss—I can say it: their deaths. I hear them when I need someone to talk to. I hear them when I least expect it. "Guess who," they'll say, and I beam, and my heart sings. (Finn 311)

Intuition holds a significant part in Anna's life. She predicts that something is happening to her. At the same time, she also feels that an unexpected incident is going to take place.

She describes it as:

> Something's happening to me, through me, something dangerous and new. It's taken root, a poison tree; it's grown, fanning out, vines winding round my gut, my lungs, my heart. "The pills", I say, my voice soft and low amid the roar, like I'm speaking underwater. (Finn 123)

As a child psychologist, she demonstrates professional commitment and a genuine desire to help Ethan. She thinks, "A child in distress. It's my duty to help him" (Finn 286). Anna also identifies with Ethan, whose apparent loneliness and isolation resonate with her own experiences of solitude. Anna muses, "He's almost as isolated as I am" (Finn 286). Anna is also empathetic in nature; she sees Ethan as her own child. Anna says, "*I invited a teenager whose family I stalked and harassed to hang out in my basement. You know, as a replacement for my dead child and my dead husband*. It wouldn't look good" (Finn 370). Sigmund Freud also put forth the idea of speech therapy. Through speech therapy, the patients can talk freely. In these sessions, psychiatrists encourage patients to speak freely and draw insights from their narratives to identify their concerns and determine appropriate ways to address them. According to Tarzian, "Free association is the fundamental technique of addressing the unconscious in psychoanalysis. The method allows patients to freely express their thoughts, feelings, and emotions without censoring themselves" (Tarzian, Martin et al.). Anna, who hides the bitter past for more than ten months, could not bear it anymore. She says, '"I feel like I've been keeping all these secrets from all these people. I can't do it anymore." Nothing in my experience has prepared me for this"' (Finn 390). In the novel, Anna also shares her problem

to many people. During her conversation with the detectives, she discloses the issues that have troubled her for a considerable period of time.

Anna confesses:

> "I lost my child and my husband." Swallow. Say it. "They died. They're dead." Breathe. Breathe. One, two, three, four.
>
> "And I started drinking. More than usual. And I self-medicated. Which is dangerous and wrong." He's watching me intently.
>
> …
>
> …
>
> "Exactly." I shift in my seat, lean forward. I know they were gone. Dead. But I liked hearing them. And feeling … It's very tough to explain." (Finn 344)

Anna, on the other hand, projects the other side of her disorder as well. She imagines her dead family to cope with her current situation. She says, "I squeeze my eyes tighter, straining for more dark. *They aren't—you know, hallucinations, I'd told him; I just like pretending they're here every now and then. As a coping mechanism. I know that too much contact isn't healthy*" (Finn 313). Anna becomes a prosecutor for herself to prove that whatever she has seen is true. Her tone becomes stern when she argues for the truth.

Anna says:

> "I'm not the one wasting time," I growl. "You are. *You are.* Someone was in my house, and I've given you proof, and you're standing there telling me that I made it up. Just like last time. I saw someone get *stabbed* and you didn't believe me. What do I have to do to get you—" (Finn 301)

When Anna is talking to Granny Lizzie, whom she has not seen in real life, she spills the real secret of her life. Granny Lizzie is later revealed to be Ethan, who conceals his identity and assumes a false name to gain information about Anna. Anna says, "thedoctorisin: I see a psychiatrist to help me deal with the guilt as well as the agoraphobia" (Finn 337). The climactic scene reveals the true identity of the patient, prompting a reconsideration of who can be regarded as the actual patient. Ethan's confession further establishes that he is responsible for the series of problems that unfold throughout the narrative.

Ethan confesses:

> I've been coming here a lot," he adds.
>
> …
>
> "I have to tell you, he says, "I've met a lot of psychologists, and you're the first who hasn't diagnosed me with a personality disorder." (Finn 398)

Ethan, who is portrayed as having a personality disorder, becomes a major source of the chaos in the narrative. Thus, the novel shifts the focus from Anna's psychological condition to Ethan's more complex and severe psychological disturbance. Personality Disorder can be defined as follows.

According to the *National Library of Medicine*:

> Personality disorders reflect an enduring pattern of inner experience and behavior that deviates markedly from the norms and expectations of the surrounding culture. Individuals with personality disorders may experience distorted perceptions of reality and abnormal affective responses. (Fariba et al.)

Ethan explains how he got attracted to Anna's disorder. He says, '"You interest me, though," he says. "You do. That's why I kept coming back to you, even when I knew I shouldn't. Older

women interest me." He frowns. "Sorry, is that insulting?"' (Finn 398). He further reveals how he closely observes her activities and devises a means of secretly entering her house. Ethan admits:

> Anyway. I've been coming over at night for a couple of weeks, just walking around, watching you. I like it here. It's quiet and dark." He sounds thoughtful. "And it's kind of interesting, the way you live. I feel like I'm doing research on you. Like a documentary. I even"—he smiles—"took your picture with your phone." A grimace. "Was that too much? I feel like that was too much. Oh—but ask me how I unlocked your phone. (Finn 404)

Ethan also confesses his dramatic nature to Anna. She is shocked to hear it. He says, "That's why I said I missed my friends. And I pretended I might be gay. And I cried all those fucking times. All so you'd feel sorry for me and think I was this …" Trailing off." (Finn 403). After listening to Ethan's real character, Anna concludes, "Psychopath. The superficial charm, the labile personality, the flat affect. The letter opener in his hand" (Finn 402). At the end, she is also relieved that whatever she believed was true. Anna sighs, "Because I was told that I imagined something happening in your house, and now I know that I didn't" (Finn 392). The detectives also denied what Anna said; they stood on the side of the majority. On the other hand, the doctor who diagnosed Ethan with the personality disorder did not pay much attention to his disorder. Here, the doctor is also portrayed as one of the factors contributing to the corruption of Ethan's character. Anna is provided with good medication and gets back to her normal self, whereas Ethan is left without any proper medication. This also underscores the negligence and lack of responsibility on the part of the medical personnel. Anna's life moves towards the path of clarity when she is determined to fight her disorder.

Delusion and Determination

Anna is perceived by those around her as a delusional woman. She is also led to believe that she is experiencing things that are not real. Anna contemplates, "*If I dream things when I'm awake, I'm going out of my mind*." (Finn 316). Though Anna is suffering a lot from her disorder, at the end of the novel, she is determined about what she says. She stands for what she saw and what she says to the people with her. Anna, with a deterministic tone says, '"You're the ones imagining things". I point a wobbly finger at them, wave it like a wand. "You're the ones making things up. I saw her covered in blood through that window"' (Finn 180). She also knows what is happening to her. After experiencing a lot of her disorder and alcoholism, she made up her mind not to drink. All she wants is to live like a normal human being. Anna thinks, "I don't want to drink. I want to stay clear; I want to think. I want to analyze" (Finn 203). At the same time, she is contemplating her own situation through the series of events that happened recently in her life. Anna thinks, "I fly into the hall, whirl down the stairs. If I don't think, I can do it. If I don't think. *Don't think*. Thinking hasn't gotten me anywhere so far. … So stop thinking and start acting." (Finn 251). Anna gradually becomes convinced that she has overcome her delusions. Anna says, *"Yes, I am. I am sure. I am not delusional"* (Finn 248). She also continues to affirm it as, "I'm not seeing things that aren't there" (Finn 309). As a psychologist, she is determined to rebuild her life with a more positive outlook. She thinks, '"One doesn't often get a second chance. *I want to stop being haunted*." "I want to stop being haunted," I say. I close my eyes, say it again"' (Finn 352).

Conclusion

Thus, the paper argues that even seemingly insignificant aspects of everyday life can have a profound impact on individuals suffering from mental disorders. In Anna's case, space plays a crucial role in shaping her daily experiences and psychological well-being. The

narrative also demonstrates that individuals experiencing severe mental disorders can possess the capacity to recover and regain a sense of normalcy in their lives. Even psychiatrists and psychologists believe in this notion of positive psychology. According to Saakvitne, "It is widely accepted that trauma is transformative and that in the aftermath of a traumatic event nothing is again the same." (Saakvitne et al. 281). In Anna's case, she comes out of her cocooned life. Shocking incidents play a crucial role in her life. Anna's problem started when she witnessed the slow death of her husband and daughter. Her problem comes to an end when she witnesses the death of Ethan. Here, death plays an important role. It acts as an estuary where things come together and become one. The solution for Anna's mental disorder is that she has to come out of her secluded life and needs to breathe the air of freedom. She does this slowly but surely at the end.

The novel ends with the following lines:

> I close my eyes.
>
> And I open them,
>
> And I step into the light. (Finn 427)

The life of Anna shows that if the patient is determined to fight against the mental disorder, they can come back to their normal life, and that is what she also does to enter the new phase of her life. When the representation and the reality of the disorder are focused, the stereotype about the patient with a mental disorder can be understood in a better way by fellow beings in society. Thus, this article explores the interplay between mental and physical spaces by examining Anna's experience of mental disorder, confinement, and everyday life. At the same time, it also gives a clear picture of the reality of the mental disorder.

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