Women's Bodily Redemption in Richard Yates' Revolutionary Road: An Analysis From the Perspectives of Body Narrative and Feminist Jurisprudence

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Abstract—This paper tries to analyze Revolutionary Road from the perspectives of body narrative and feminist jurisprudence. The second part, "The Pain of Childbirth", and the third part, "The Bewilderment Between the Soul and the Body", talk about female physical and mental health, respectively. The fourth part, "The Trespass of the Body", promotes Reproductive Health Rights and Birthing Rights, thus further exploring how the women, as the subject of desire, trespass their heavy human bodies, how they overcome the unbearable lightness of their bodies, how they control and subdue their bodies, and how they finally gain salvation and revolution.

Index Terms—Revolutionary Road, body narrative, feminist jurisprudence, human right

I. INTRODUCTION

In the first half of the 20th century, the pioneer of the birth control campaign, Margaret Sanger, persevered against all odds, spreading the seeds of family planning worldwide. Her concepts of "family planning" and "birth control" eventually led the U.S. Supreme Court in 1965 to rule under the 14th Amendment of the U.S. Constitution, effectively overturning laws prohibiting abortion. This decision established reproductive choices as matters of personal autonomy, not state affairs. It marked the beginning of American women taking control and emancipating their bodies. Richard Yates' *Revolutionary Road* depicts the absurdity of middle-class American family life and the plight of women before these revolutionary reforms (set in 1955). This paper attempts to analyze the novel from the perspective of **bodily narrative discourse theory** and **feminist jurisprudence**. It focuses on women's physical and psychological health through the aspects of "The Pain of Childbirth" and "The Bewilderment Between the Soul and the Body". Exploring the section of "The Trespass of the Body", it examines how women, as subjects of desire, transcend the burdensome physicality, overcome the weightlessness of the body, and control and conquer their bodies, ultimately achieving redemption and liberation.

II. THE PAIN OF CHILDBIRTH

In the denouement of the story, the female protagonist in the novel tragically meets her end due to a clandestine abortion.

She had been very careful about the blood....Two heavy towels, soaked crimson, lay lumped in the tub, close to the drain....On the floor of the linen closet he found the syringe in its pot of cold water; she had probably put it there to hide it from the ambulance crew. (Yates, 2008, pp. 245-246)

What leads to this outcome? Is it due to the sense of self-loss and powerlessness experienced by middle-class American suburban women? Is it a rebellion against the rigid and conservative lifestyle of the middle class? Is it a self-terminating act borne from despair towards life? Or is it an attempt to resist the patriarchal society through self-willed actions, stripping away the husband's masculinity, seeking freedom of choice, and, in this pursuit, discovering one's essence and ultimately reconstructing female subjectivity? Nevertheless, the young protagonist, April, after enduring the arduousness of "reproduction", treats her body as an object of exercising power, endeavoring to dismantle the ossified relationships entrenched within the patriarchal structure. However, she suffers greatly, cursed and punished whether she chooses to bear a child or not, thus paying the ultimate price in terms of health.

Before the 1960s, American women lacked control over their bodies concerning reproductive matters due to the illegality of abortion and the lack of accessible contraception. Excessive childbirth significantly compromised women's health and happiness. Feminist and human rights movements further advocated for a deepened focus on maternal health, nurturing environments for children's growth, and women's empowerment over their bodies. Prior to the 1960s, United States laws obstructed women from making decisions for reproductive health security and its associated services, prompting feminists to staunchly question and challenge these legal restrictions (Lance, 2010). Additionally, subjective

medical judgment and "conscientious objection" deprived women of equal rights in deciding on abortion, infringing upon their rights to reproductive health and access to related services (O'Rourke et al., 2012). The World Health Organization (WHO) recognizes that in nations with stringent abortion laws, there exists a higher rate of induced abortions, predominantly performed under unsafe conditions, thus causing women to face frequent threats to their health and lives. Restrictive related legal frameworks instead have compelled women to resort to perilous abortion services, thereby jeopardizing their lives (Natarajan & Sarayu, 2023).

In the novel, April seeks to narrate her body and soul by exercising control over her reproductive rights. However, her agency and autonomy are not acknowledged within the moral and legal frameworks of that era. Ultimately, she endures the hardship of abortion alone, devoid of any medical assistance or familial support. The Universal Declaration of Human Rights (UDHR) has made significant contributions to safeguarding women's reproductive rights, privacy, and marriage equality, among others. Article 25 stipulates, "We all have the right to enough food, clothing, housing, and healthcare for ourselves and our families....An expectant mother and her baby should both receive extra care and support...." (UDHR). The Reproductive Health Rights of American women witnessed substantial improvement following the enactment of the United Nations Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the International Covenant on Economic, Social, and Cultural Rights (ICESCR), and the redefinition of governmental obligations. However, globally, the plight of women in childbirth remains a persistent concern within feminist and human rights discourses. According to the World Health Organization, every two minutes, a woman dies during pregnancy or childbirth (WHO, 2023). Dr. Tedros Adhanom Ghebreyesus, the Director-General of the World Health Organization (WHO), remarked, "While pregnancy should be a time of immense hope and a positive experience for all women, it is tragically still a shockingly dangerous experience for millions around the world who lack access to high quality, respectful health care" (WHO, 2023). Lack of access to professional healthcare and services during childbirth is prevalent in developing countries. The auspicious event of childbirth is tragically juxtaposed with the grievous occurrence of maternal mortality for numerous families globally. Approximately 287,000 women lost their lives during and after pregnancy in 2020, and this figure is deemed unacceptably elevated (WHO, 2024). Furthermore, women's attempts to exercise control over their bodies through abortion often face scientific limitations due to various social and cultural constraints.

Although the novel is set in the 1960s and portrays the absurd world of post-war 1950s American middle-class women condemning the reality and calling for a revolution among women while seeking their true selves (Sun, 2013), April's plight in childbirth and her tragic sacrifice broadly opens a window for the whole world. Through this window, observers catch a glimpse of the harrowing experiences in the history of the feminist movement in developed countries. Simultaneously, it also provides a preview of the arduous human rights path for developing nations in improving women's reproductive conditions and advocating for **Reproductive Health Rights**. Embracing an inclusive right to women's reproductive care may also facilitate the development of feminist constitutional ethics not only in the US but also in the world (Kavinsky, 2023), regardless of women's race, gender, ethnicity, religion, age, disability, or any other characteristic that might lead to discrimination or marginalization.

III. THE BEWILDERMENT BETWEEN THE SOUL AND THE BODY

In the novel, a schism and opposition exist between April's spirit and her physical self. On the one hand, as a wife, she is immersed in household chores, barely maintaining a semblance of stability in family life; she endeavors to perform in a play, seeking recognition from others to experience the spiritual essence of physical existence. However, on the other hand, the monotonous daily routine constantly challenges and undermines the authority of her "self". The overly self-assured April finds herself "working alone". She had "lost her grip", "had begun to alternate between false theatrical gestures and a white-knuckled immobility", and "you could see the warmth of humiliation rising in her face and neck", making the fall of the stage curtain "an act of mercy" (Yates, 2008, pp. 9-10). Attempting to showcase her "talent" and assert her superior worth, April portrays similar theatrics in life, feigning superiority and uniqueness, craving recognition and admiration from others (Matek, 2011). However, unfortunately, as Vavotici Francesca says, April's existence mirrors the limitations often found in a theatrical production (Francesca, 2020). She yearns to maintain a perpetual sense of self-satisfaction and self-actualization in social interactions, with this "self" incessantly monitoring the gradually disappointing and disillusioning exterior "I", which means precisely her female body. She needs to control her body to maintain this sense. However, when her body is once again restrained by pregnancy and cannot achieve the lofty and uninhibited true self by fleeing to Europe or escaping reality, the body and the child within become the cause of distress, anxiety, and vexation for her spirit. The mind even exhibits symptoms of hysteria, while the body and the unborn child, like unwanted rubbish, are despised, reviled, rejected, and ultimately discarded by the soul seeking liberation (Liu, 2012). The division between spirit and body leaves the self in an awkward state, entangled between two distinct entities, enduring torment and anguish. The external "I" (the body) in the macroscopic material world and the internal "I" (the soul) of housewives, undiscovered or unfulfilled, fail to listen to each other, fail to work in tandem, but instead dissolve each other, thus burdening women with the weighty bewilderment between the soul and body, the spirit and the flesh.

The unrestrained practice of "conscientious objection" not only deprives women of their most fundamental right to access legitimate medical care but also confines women's thoughts from social and cultural perspectives, such as

religious beliefs, drowning out their feeble voices in the pursuit of **birthing rights**. The choice of abortion is, in many cases, the morally responsible decision that the imposition of another's conscience should not override (O'Rourke et al., 2012). The abuse of others' "conscience" places pregnant women in a dilemma of incessantly giving birth to the next generation or being compelled to resort to clandestine, life-threatening abortions. Emergency abortions undoubtedly carry the risk of self-harm, expanding beyond surgical emergencies into the realm of **mental health** for pregnant women. In the novel, years ago, when April unintentionally conceives for the first time, she attempts abortion to return to her envisioned marital trajectory. However, her husband's choice and her sense of responsibility lead them to keep the child, firmly anchoring them in a tedious and repugnant marital life. The arrival of their second child is merely to validate their initial choice of the first child and mundane family life. Choice and responsibility cause endless **anxiety** for them (Sun, 2013). Deprived of reproductive autonomy, April is thrust into a state of emptiness and restlessness, striving through theatrical performance to rediscover her ideals, beliefs, self-esteem, and worth. Ironically, the play suffered a "miscarriage" due to April's inability to control her surrounding world amidst anxiety and anguish. The pursuit of true self or identity by her mind and soul ultimately "miscarries" in the uncontrollable and uncertain realities of the world. However, the origin of this unfortunate situation lies in April's initial deprivation, as well as that of numerous women, of the right to reproductive choice.

Frank's male mindset that follows the cultural tradition makes him unable to open his mind to accept that every individual has Personal Autonomy in determining the choice, with personal autonomy including a series of ideas, such as "right myself", "do it" my way, "defend" what I believe in, "think" of myself, and in egalitarian-gender reformulation, become "a person", which in April's case is a process from having "challenge", "self-efficacy", "self-acceptance", "self-assurance", to having "locus of control-life", and ultimately to "locus of control-Self" (Safitri, 2020, pp. 45-51). Women's autonomy to choose whether or not to bear children directly determines the size of a family and impacts the overall quality of family life, particularly for women themselves. Women aspire to have control over their bodies, and unrestricted childbirth does not always align with their true desires. The regret of mothers and the economic and emotional burden posed by numerous children become significant contributors to family tragedies. When April chooses not to have children, she asserts herself as the authority in defining her own life, prioritizing her judgment over conforming to the stereotype. Friedan often criticizes the child-like stereotyped image of the suburban housewife who believes that her husband knows what is best for her (Friedan, 1963).

For women, especially in developing or underprivileged countries, emancipation from traditional family roles becomes a crucial question. Evidently, empowering women to control reproduction through **birth control** and **family planning** is an essential avenue. Women should firmly grasp knowledge and authority over contraception to challenge the long-standing displacement of women (Kalsem, 2012). Women's reproductive rights fall within the purview of **Feminist Jurisprudence**. This field contends that to enhance women's awareness of their rights and ultimately dismantle the unequal treatment women face in family life and reproduction, widespread dissemination of women's childbirth experiences is necessary. Engaging in robust discussions on related topics is imperative to afford women the most basic rights to life and freedom (Murphy, 2010).

IV. THE TRESPASS OF THE BODY

Modern narratives have given rise to a certain symbolization of the body, paralleled by the corporealization of stories, marking the body and turning it into a subject of literary narration (Brooks, 1993). The "body" not only threads through the novel, encapsulating the individual privacy and emotions of Frank and April, but also shoulders the weighty responsibility of macro-narratives involving historical reflection and the construction of contemporary female subjectivity. The "body" assumes a significant role, extending from the exploration of the personal domain to a keen attention to urgent situations on a national and global scale. In the novel, through the choice of theatrical performance, April's body initially becomes an object "gazed upon" within the male visual domain, subject to merciless evaluations by heartless observers. The failure of the performance shatters both body and self, dismantling the self as a desiring subject and the body as an object of desire. However, how could one easily relinquish their desires? Even when coerced into satisfaction, a woman, unsatisfied with the particular revelatory moment, the gaps between extrication and the tent (Brooks, 1993), will trace her desires to the painful end. Consequently, April, ahead of her time, exercises the future legal bestowment of privacy rights (Brooks, 1993), opting for abortion. Through her body, an intricate and articulate vessel, she forcibly asserts control over her own body, expressing to the world that women have the ability to consciously and intentionally assume their identity in relation to male desire, skillfully managing this desire to achieve the destiny of their own bodies (Brooks, 1993).

However, how should the **law** assist women in transforming their bodies from passive objects of scrutiny into active scriptwriters of their own bodies? "The common law, even with its equality premise, cannot on its own guarantee women's negative liberty without an explicit embrace of women as intended beneficiaries (Inniss, 2020, p. 100)." Then, what are the intended benefits? The answers are women's **Reproductive Health Rights** and **Reproductive Rights**. In order to realize these rights, governments, especially those in developing and underdeveloped countries, should actively respond to the calls of the United Nations International Covenant on Economic, Social and Cultural Rights (ICESCR) and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). They should acknowledge the various forms of affirmative obligations outlined in international human rights treaties, particularly

those pertaining to the government's responsibility to ensure women's reproductive health rights. Governments are encouraged to support the formulation of domestic laws and regulations that align with the principles of international conventions. Concerns about potential limitations on national sovereignty imposed by international laws and regulations should not lead governments to covertly reject international oversight of their actions and the positive impact of international conventions on their legislative endeavors. Acknowledging international conventions can significantly contribute to the realization of women's **right to equality** and **right to be protected**. **Reproductive health rights** and **reproductive rights** are no longer confined to the private and national domains but **extend into the public and international arenas**, assertively safeguarding the interests and advocating for justice for the laboring masses, including pregnant women, children, and caregivers.

The law should take a standpoint that prioritizes women's interests, focusing on the rights of "vulnerable groups", embracing diverse voices, fostering social inclusivity, and overseeing the availability, accessibility, and acceptability of high-quality healthcare services for a broad spectrum of women. Governments and legal frameworks must respect and safeguard women's reproductive health rights, assisting women in realizing these rights within the confines of national resource capabilities. To ensure the protection of reproductive health rights, the government must legislate to guarantee an ample supply of reproductive healthcare resources, such as qualified healthcare equipment, medical instruments, medications, and well-trained professionals. Barriers preventing women from accessing relevant medical equipment, medications, or services must be eliminated by governments and legal frameworks. The medical equipment, medications, and services provided by the government should align with the cultural and moral customs of the users. Simultaneously, governments and legal systems must eradicate any traditional cultural practices that infringe upon women's reproductive health rights. Governments and legal frameworks should ensure women have access to contraceptive measures, provide safe remedial measures (such as legal abortion), and assist women in preventing and treating any diseases affecting their reproductive health. Women have the right to education about contraception and reproductive health, which governments and legal frameworks must safeguard. Under legal supervision, governments should establish multi-tiered human rights protection mechanisms and systems, enabling women to assert their legitimate rights to reproductive health and reproductive rights through various channels and at different levels (Lance, 2010).

The right to reproductive choice should be considered a necessary condition for the legal endowment of women's substantive rights, extending beyond just the right to vote or access education. It is a fundamental autonomy granted by law—a right for women to determine their own destinies and establish intimate interpersonal relationships (Baer, 2012). Concerning the protection of reproductive (choice) rights, the law should define and recognize intentional interference with a woman's legitimate "family planning" activities as an infringement on her privacy and reproductive rights, thus categorizing it as a form of domestic violence (Trawick, 2012, p. 100). The law should stipulate that women have the power to make decisions regarding reproduction or abstention from reproduction (a particularly concerning issue in developing and underdeveloped countries). Reproductive choice rights are the foundational human rights preceding women's access to reproductive health rights and constitute the minimum guarantee for women's pursuit of equal rights, discourse rights, and autonomy. The law should prohibit employers from dismissing female employees due to pregnancy or maternity leave, ensuring paid maternity leave and other social benefits. Governments and legal systems should facilitate better coordination of family obligations, work tasks, and social responsibilities by promoting social service systems that assist parents in alleviating the burden of caring for infants and toddlers. The law should mandate government protection to ensure women promptly receive medical health information and services related to family planning, pregnancy, childbirth, postpartum care, and breastfeeding. Throughout the entire reproductive choice process, the law should safeguard women from any gender discrimination and require men to bear an equal share of marital and familial responsibilities (Baer, 2012). The case of Whole Women's Health v. Hellerstedt in 2016, heard by the United States Supreme Court, as the most important abortion case in the US, has marked three female justices' judicial performance as a feminist victory, which announced "The Women Take Over" (Lithwick, 2016) and declared that the three female justices had "upend[ed] the Supreme Court's balance of power" (Gibson, 2019, p. 319). Justice Ginsburg in the court pointed out the logical flaw of the Solicitor General's "women in El Paso could simply cross the border and find a (abortion) clinic in New Mexico" that the clinics in New Mexico do not meet the requirements that HB2 (Public Facilities Privacy & Security Act) demands, thus disclosing "the pretense of protection", namely "the woman-protective justification for HB2 as an empty fiction (Gibson, 2019, pp. 328-329)". The common law has achieved a stage victory in feminist jurisprudence at this time. However, in the long run, on a global scale and within the domestic laws of various other countries, how far will this path extend?

Freedom and equality are rights belonging to all humanity, and the freedom to choose whether to reproduce or not should be considered a fundamental right for women. Without the fundamental right to reproductive choice, there is no access to crucial reproductive health rights. How can women bear the burden of involuntary motherhood without the basic right to choose whether to conceive? While women as a collective possess certain shared experiences, individual men and women are irreducible entities, rational beings with inherent differences (Yue, 2014). Feminist jurisprudence respects and protects these differences by advocating for the legal endowment of reproductive choice to women. However, if the subject of freedom is deprived of the opportunity for health, the obligation of women as mothers becomes equally challenging to fulfill. Therefore, feminist jurisprudence, from a broader perspective of human care,

advocates for granting women the right to reproductive health. The freedom of women's reproduction helps reconstruct basic women's rights, while the right to reproductive health further safeguards a more liberated and dignified life status for women as individuals or as mothers. Just as in April's struggling mind, the ultimate restoration and perfection of her physical body can reflect the completeness of her female self-salvation spiritually and physically in terms of human existence. The intricate vessel of women's bodies, through the narration and control of the self, opens the door to seeking legal equality. Feminist jurisprudence aims to use women's legal equality as a starting point to achieve equality for all humanity.

V. CONCLUSION

This study into Richard Yates' *Revolutionary Road* from perspectives of body narrative and feminist jurisprudence demonstrates the disruptive potential of women's lack of **reproductive health rights** not only in the US but also globally as a feminist legal strategy and points to the significance of feminist jurisprudential criticism of literature as a platform for feminist intervention into legal construction. This study allows readers to see how the women of the United States advanced a feminist intervention through their tragical bodily performance of self-actualization and self-autonomy—serving the constructive **literary role** to radically remake the boundaries of abortion jurisprudence and encourage a diverse international readership to unite in promoting the protection of fundamental rights for women frequently overlooked, marginalized, and adversely affected by legal practices.

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