

## **CHAPTER TWO**

### **LITERATURE REVIEW**

In order to support the findings and analysis of this study, the writer divides this chapter into two parts. They are previous studies, and theoretical studies. In this chapter, the writer also discusses about the previous studies has been chosen works and how theory used in this study. In chapter two, the writer will discuss about psychological disorders, especially agoraphobia experienced by the main character in the novel *where'd You Go Bernadette?* And how the theory used can affect the issues in the novel that have something to do with the lives of people around us who experience agoraphobia. With the theory from *American Psychiatric Association, 2013 in Barlow, David H, 2014* this study can be used as awareness for all of us about the existence of people with agoraphobia; so that we can care more and show a good response if someone suddenly experiences agoraphobia symptoms around us, and can also be used as knowledge for us about agoraphobia.

#### **2.1 Previous Studies**

In conducting the research, previous studies are needed to help the researcher doing the research. Thus, some previous studies with the same object and several topics are chosen as the guidance for the researcher. Here some previews that help the writer for doing the research:

The first previous study read by the writer is “*The Analysis of Agoraphobia on The Main Female Character in The Woman in the Window by AJ Finn*” written by Pamungkas (2019). This study presents an analysis of agoraphobia in the main character in the novel *The Woman in the Window* by A. j. Fin. This study also applies a conceptual framework based on the theory of The Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (2013) with the aim of proving that the main character in the novel has symptoms of agoraphobia by comparing them based on the theory. According to this theory, agoraphobia is divided into three types, namely the fear of being outside alone, the fear of being in open spaces, and excessive anxiety or panic attacks. This research uses a qualitative approach, by collecting data from various sources. I used this research as one of my previous research materials because this research still has a correlation with the theme of my research, which is discussing mental disorders or agoraphobia against one of the characters in a novel.

Next, the writer reads a previous study by Sihombing (2019) *entitled an Analysis of Agoraphobia through the Leading Character in A. J. Finn’s Novel the Women in the Window*. This study discusses the causes and effects of agoraphobia experienced by the leading character in the novel *The Woman in the Window*. Past traumatic disorder is the cause of Anna experiencing agoraphobia, and there are also several effects experienced by Anna such as physical, social and emotional effects. She uses the theory of Jacquelyn Ekern, MS, LPC and qualitative descriptive methods to analyze her study. Rusydina's thesis is different from this research, because this research only focuses on analyzing the symptoms of agoraphobia in the main

character in the novel. This study contributes to providing enlightenment and examples of agoraphobia as reinforcement and to help the writer analyze this research.

The writer also reads a previous study with the title *Agoraphobia Problem of Anna Fox in the Woman in the Window by A. J. Finn*. Written by Suarniti (2020). This study aims to discuss the agoraphobia problems experienced by Anna Fox as the main character in the novel *the woman in the window*. In conclusion, based on the results of the analysis in this study, it was found that Anna Fox's agoraphobia was caused by Post-Traumatic Stress Disorder. The disease affects her and the people and environment around her by damaging her body due to taking a lot of drugs, making her depressed, losing her job, having a bad temper, and making her feel insecure when she is outside and meeting many people. She used qualitative descriptive methods to analyze her studies. With these conclusions, this study can help the writer provide an overview to analyze agoraphobia in the main character using the same method.

## **2.2 Psychological Approach**

Psychology is a scientific study of human behavior and thought. Psychology also includes the study of human behavior, both externally and internally. External behavior such as running, walking, talking, shouting, and others, while internal behavior such as feeling, thinking, imagining, and others. These actions occur in each individual or group and are still related to their external world environment. Literature is a term to express ourselves or describe an imaginative work, both in

writing and orally. The work can be taken from the surrounding environment, personal experience, etc. The literary works can also be in the form of dramas, films, poetry, novels and others.

The novel here is a kind of literary work that is neither too long nor too short, and is related to real life or fiction written by the writer. In a novel, the novel that I will discuss in this study it is *where'd you Go, Bernadette* about the abnormal psychological conditions experienced by the main character in one of these types of literary works. Therefore, this study uses a psychological approach from Wellek and Warren (1956) in his book he explained that psychology can enter literature by studying and understanding from the psychology of the writer, the psychology of the characters in the novel, and can also be seen from the readers. Afif & Amelia (2021) also concludes that a psychological study of literature is a text analysis that considers the relevance and importance of psychological studies Psychology here can enter into a literary work because the writer expresses and writes her work using her understanding, emotions, imaginations, and feelings as happens in this novel.

### **2.2.1 Agoraphobia**

Agoraphobia is a type of anxiety disorder, which is usually characterized by extreme fear when the sufferer is in unfamiliar situations, crowded places, and alone, such as in cinemas, markets, recreational areas, airports, while traveling by bus, etc. People with agoraphobia will also avoid crowded places as much as possible and not be alone or ask their family to accompany them when they want to go somewhere to feel safer when in crowded places. "Agoraphobia usually refers to avoidance or

resistance with fear of situations where escape may be difficult or help is not available in the event of symptoms such as panic (including but not limited to panic attacks) or other disabling symptoms, such as loss of bowel control or vomiting, disorientation (especially in children) or feelings of falling (especially in older adults)” (American Psychiatric Association, 2013 in Barlow, David H, 2014).

Agoraphobia usually occurs due to a panic attack; a state of panic that suddenly appears for no apparent reason. Some of the symptoms experienced by agoraphobics include fast heart rate, feeling like dying, rapid breathing (hyperventilation), and neck choking, feeling hot and sweaty, and feeling sick. As for the negative effects that will occur in agoraphobics, are: being a closed person, work can be hampered and even stop, financially can be destroyed, etc. While the emotional effects that occur in agoraphobic are: depression, excessive anxiety, fear of panic attacks, fear of many people noticing when a panic attack occurs, lack of confidence, loss of control, fear of being left alone, fear of being in crowded places, fear of dying, fear of going crazy, etc. If these feelings have haunted the sufferers, it will also have an impact on the physical, such as: nausea, dizziness, shaking, stomach pain, sweating, fast heartbeat, etc. Most people who suffer from agoraphobia develop it after experiencing one or more panic attacks, causing them to worry about having another attack and avoid places where it might happen again to them.

### **2.2.2 The Causes of Agoraphobia**

People with agoraphobia usually cannot leave their house, being in open and crowded places because if they are outside they will not feel safe or threatened.

Staying indoors is a defense mechanism. Freud, (2008: 34-38), in Pamungkas, D.S (2019), explains that there are several main defense mechanisms: repression, regression, displacement, rejection, projection, fixation, introjection, and reaction formation. Fear of fear because agoraphobia sufferers have had previous traumatic experiences such as car accidents, murders, and riots.

For example, a hypothesis known as "fear of fear" by Goldstein and Chambless, (1978) suggested that agoraphobic avoidance was caused by a fear of imminent panic or other feared physical sensations. From this vantage point, seemingly harmless bodily sensations develop a classical conditioning to the unpleasant physiological arousal connected to panic attacks. People with agoraphobia avoid a variety of circumstances because they are afraid they won't be able to handle their panic if it happens there since these classically conditioned sensations can create an unwelcome panic episode in a variety of scenarios. This temperament risk factor is commonly referred to as "negative affectivity" (Watson & Clark, 1984), and it is very similar to constructs such as neuroticism (Eysenck, 1967) and behavioral inhibition (Kagan, 1997). Although genetic influences on negative affectivity are well established, genes only explain half of the picture (Craske, 2003).

Environmental factors can also make a person more vulnerable to experiencing negative emotional states in various situations. Early experiences with stressful situations, particularly those in which the individual perceived the event(s) to be unpredictable and difficult to control, also contribute to the negative affectivity temperament (Craske, 1999). Parental modeling of anxious behavior, overprotective

treatment, and parental encouragement of anxious behavior and avoidance are all developmental experiences that can predispose a person to anxiety disorders (Vasey & Dadds, 2001).

More specific physiological and psychological factors may predispose an individual to Panic Disorder and Agoraphobia symptoms. Although research results are mixed, there is evidence for an overactive hypothalamic-pituitary-adrenal (HPA) axis and autonomic hyperactivity in Panic Disorder (Craske, 1999). Psychological factors revolve around a specific aversion to unpleasant bodily sensations. Attributions and beliefs that certain innocuous sensations are dangerous are examples of cognitive components. Accelerated heart rate, for example, could be interpreted as a sign of a heart attack or stroke, shortness of breath as a sign of suffocation, and dizziness as evidence that the person will faint (Barlow, 2002). Other feared outcomes of unpleasant bodily sensations include losing control of one's body and going insane.

Barlow (2002) proposed a comprehensive etiological model of PDA that incorporates all of these factors. He proposed that a person may be predisposed to anxiety due to both biological and psychological generalized vulnerability factors. When a stressful event elicits an exaggerated physiological fear response, the individual becomes fearful of the associated interceptive cues due to a predisposition to interpret unexplained physical sensations as dangerous. This anxiety is caused by the anticipation of future unpleasant somatic sensations. Agoraphobia develops when the sufferer responds to feared somatic sensations and the anticipation of future interceptive cues with behavioral avoidance of specific situations. This avoidance

reinforces beliefs that such sensations are indeed harmful and must be avoided in certain situations, reinforcing the fear of unwanted sensations.

### **2.2.3 The Symptoms of Agoraphobia**

There are several symptoms of agoraphobia based on Diagnostic and Statistical Manual of Mental Disorders Fifth Edition (2013):

#### **1. Anxiety**

Anxiety manifests in three ways: cognitively, physically, and behaviorally. Anxiety is perceived as a fearful and recurring worry or thought of disaster in the cognitive realm. Other cognitive manifestations include difficulty concentrating, memory problems, difficulty rehearsing new information, the mind going blank, and the mind racing. Restlessness, inability to relax, and a sense of being 'locked in' are all somatic or physiological manifestations of anxiety. Anxiety can manifest as skin conditions like hives, gastrointestinal issues like diarrhea, excess stomach acid, or butterflies, muscle pain and tension, and headaches. Anxiety is known as a "great imitator," as it mimics a wide range of physical problems. Anxiety can appear in a variety of ways that are not necessarily associated with feeling nervous, such as ringing in the ears or blurred vision.

Symptoms of anxiety include pacing, restlessness, and tapping. Avoidance and escape are common defenses that sufferers have against anxiety. Anxiety will be reduced if the feared situation is avoided by physically separating oneself from the object or situation, which makes the sufferer feel threatened. People who have



agoraphobia will feel anxious when they want to leave their home alone. It causes excessive nervousness, fear, and worry, as well as an adrenaline rush. Snaith describes agoraphobia in his study "A Clinical Investigation of Phobias" (1968): "Patients frequently reveal that unpleasant somatic sensations may be far more distressing than the psychic experience of anxiety". According to Izard (1992) he also explained that panic attacks are associated with strong action tendencies, most commonly urges to flee and less frequently urges to fight. Rai (2020) quotes that in the novel *The Woman in the Window*:

Anna Fox said "I jolt the door open. Light and air blast me. I could swear I hear a crack, as of a felled tree. Then it bulges toward me, swelling, now rushing, a boulder flung from a catapult; slams me with such force, walloping my gut, that I fold. My mouth opens like a window. Wind whips into it. I'm groaning, sliding, avalanching, one hand scraped along the brick". (Finn, 2018: 53).

This quotation indicates that Anna attempted to leave her house in order to drive away the three children who threw eggs at her house. However, after she opened the door and was blasted with light and air, she fell silent, and her world seemed to come to a halt. She sensed a difference between the atmosphere inside her house and the atmosphere outside the world she was afraid of, and she eventually opened the door she sensed.

## **2. Anxiety of Being Outside of the House**

There are three specific criteria for agoraphobia based on the DSM-IV-TR (American Psychiatric Association 2000): Briefly, anxiety is typically associated with situations involving being alone outside the house (Criterion A). People who suffer from agoraphobia are afraid or anxious to leave their homes because they believe being alone outside is dangerous and can threaten them. Pamungkas (2019) also quotes in the novel *The Woman in the Window* by A.J.Finn:

"My throat shrinks. Tears well in my eyes, I feel surprised, then ashamed. Whap. Then angry, I can't fling wide the door and send them currying. I can't barrel outside and confront them. I rap on the window, sharply". (Finn, 2018: 51-52).

This scene clearly depicts Anna's apprehension about leaving the house. She was enraged but powerless to stop those three children. Anna couldn't even do the most basic thing to stop them. She simply stood behind the wall with her hands against it.

## **3. Anxiety of Being in Open Spaces**

In addition to feeling unsafe outside the house, people with agoraphobia also feel unsafe in open spaces such as markets, parking lots, airports, and gardens. Even though the open space is close to the house, people with agoraphobia feel unsafe, not as safe as they do inside. According to Westphal (1871) in Boyd & Crump (1991), "for several years patients have repeatedly come to me with the peculiar complaint

that it is impossible for them to go into open spaces and down certain streets, and their freedom of movement is disturbed because of this fear”.

According to Sihombing (2019), “in his research panic attacks occurred because of the sadness that Anna experienced after losing her family in the past which caused her trauma. Anna was afraid of having panic attacks in public places and was afraid to go out and chose to avoid the situation and preferred to stay at home. That's why she has agoraphobia”. Also quotes in his study:

“My foot misses the first step altogether, falling hard on the second, so that I wobble into the dark, the umbrella wobbling before me. The other foot trips after it, skitters down, the back of my calf scraping in the steps, until I spill onto the grass. I crush my eyes shut. My head brushes against the canopy of the umbrella. It’s encasing me like a tent”. (Finn, 2018: 150).

From This narration depicts Anna's behavior outside her house. The front step was not included. Because it is situated in open areas. She closed her eyes outside. Sacrificing herself and putting herself in danger rather than opening her eyes to see that. Her umbrella, her "secret weapon" in the form of a tent, covered her entire body. When detective Little drove Anna back to her house with his car after she passed out and was taken to the hospital, he provided additional evidence that Anna was afraid of open spaces.

Therefore, the theory from *the American Psychiatric Association, 2013* in Barlow, David H, 2014 is used as a reference for interpreting hypotheses, facts or responses in this study. According to the *American Museum of Natural History, in Darwin, 1999* a theory is a very well and clearly proven explanation of aspects of the natural world that can combine hypotheses, facts, and laws. For example, the theory of gravity explains why apples fall from trees, and astronauts can float. Likewise, the theory used as a reference in this study regarding the symptoms that occur in patients with agoraphobia. With some of the symptoms of agoraphobia described in the theory, such as panic attacks and the fear of being outdoors, it all has to do with what happens to the main character depicted in the novel *Where'd you Go, Bernadette*. This theory can help the writer to strengthen the statements, hypotheses or responses written in this study.