

Literary criticism for *The Use of Force*

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1 The Summary of Story

This short story, written by *William Carlos Williams* (1883–1963), narrates the experience of practicing medicine from the first-person perspective of a doctor.

He was urgently summoned to a family to diagnose Matilda, a very sick girl. After the doctor discovered that the child had a high fever, he suspected that she might have diphtheria, even though the parents claimed that she did not have a sore throat. When attempting to examine the child's throat, the girl fiercely resisted out of fear. In the end, the doctor was only able to, through forceful way with the parents, determine that her tonsils were covered by a membrane, which confirmed the diagnosis.

2 Elements Analysis

2.1 Characters

There are two noteworthy characters in this story, "I" (i.e. doctor) and the girl (my patient), which are also a pair of conflicts.

In this context, the doctor seems to be a professional expertise who has the skills and experience in medical practice. When facing with the girl, he quickly surmised that the girl might have diphtheria and need to be investigated the condition. As it may endanger her life if without diagnosing and treating in a timely manner, the doctor understands his responsibility and insists on undergoing examinations when facing the girl's resistance. However, through the description in the latter words, we find that the doctor's almost irrational behavior diverted to the resistance and stubbornness against to the girl instead of practicing medicine for a patient. In this way, we cannot regard him as a perfect professional doctor due to his loss of care for patients. The so-called "justifiable violence" even hurt the girl in both physically and mentally. That is why I use "seem to be" in the beginning.

The original

.....Then I grasped the child's head with my left hand and tried to get the wooden tongue depressor between her teeth. She fought, with clenched teeth, desperately! But now I also had grown furious—at a child. I tried to hold myself down but I couldn't. I know how to expose a throat for inspection.....The child's mouth was already bleeding. Her tongue was cut and she was screaming in wild hysterical shrieks.....I could have torn the child apart in my own fury and enjoyed it. It was a pleasure to attack her. My face was burning with it.....

In terms of the girl, two words come into my mind to describe her, "intransigent" and "vulnerable".

There is a replete space to describe how the girl did not cooperate with the doctor's diagnosis. From being asked questions without answering, to knocking the doctor's glasses flying and finally screaming hysterically, all reflect her stubbornness and unwillingness. However, it makes me wonder why she would behave like this?

In my view, there are two reasons. Her stubbornness stems from the parents' doting love and the vulnerable reflects her deeply fear. Perhaps in her past family education, her parents often doted on her, causing her to often do things according to her own ideas, thus failing to form the correct

values about cooperation. She regarded throat examination as something she was unwilling to do, contrary to her intentions, and thus showed a strong resistance. As a child, she can't reason maturely on the necessity of the examination and the advantages of cooperating. I deeply empathize with the description in the story. In many families in China, children may also express like this, with an inexplicable stubbornness and uncooperative facing doctors, teachers and others, such as when a child falls ill in the hospital and needs injections, or when they make a mistake at school and are about to receive criticism from their teacher. Back to this story, I am of opinion that the girl's fear comes from two levels. First, the fear of treatment and the threat of a stranger forcing her mouth open lead her to react emotionally. She is afraid of the doctor and does not want him to touch her. Second, girl may fear a series of potential discrimination or anxiety caused by being diagnosed with diphtheria. As mentioned in the article, many students in the school have recently contracted diphtheria.

The original

..... As it happens we had been having a number of cases of diphtheria in the school to which this child went during that month and we were all, quite apparently, thinking of that, though no one had as yet spoken of the thing..... She had fought valiantly to keep me from knowing her secret. She had been hiding that sore throat for three days at least and lying to her parents in order to escape just such an outcome as this.....

Regarding the parents, the father oscillates between rationality and emotion when he assists the doctor. He holds Mathilda still, understanding that subjecting her to this temporary discomfort is necessary. However, when his emotions take over—his shame at her behavior and his fear of hurting her. The father controls his emotions. He continues to hold the girl after she bites through the wooden spoon and begins bleeding. He remains resolute as the doctor applies pressure with the metal spoon and successfully completes the examination.

The mother begins with rationality, agreeing to the examination. She desperately wants the girl to cooperate and ineffectively chides her throughout the visit. At the height of girl's shrieks, the mother appears willing to stop the checkup. However, the father refocuses on the necessity of the examination, ordering her away and reminding her of the dangers of diphtheria. After the father's rebuke, the mother no longer protests.

The original

*.....But as soon as he did the child let out a scream. Don't, you're hurting me. Let go of my hands. Let them go I tell you. Then she shrieked terrifyingly, hysterically. Stop it! Stop it! You're killing me!
Do you think she can stand it, doctor! said the mother.
You get out, said the husband to his wife. Do you want her to die of diphtheria?
Come on now, hold her, I said.....*

2.2 Environment

The setting of environment enhance the story's conflict. First, the small, cluttered room in a lower-middle-class home creates a sense of claustrophobia and tension. The room is described as having a "dingy yellow" wallpaper and a "shabby" appearance. The room is also filled with various objects, including a bed, a table, and a chair.

The original

*..... Is this the doctor? and let me in. In the back, she added. You must excuse us, doctor, we have her in the kitchen where it is warm. It is very damp here sometimes.....
As I moved my chair a little nearer suddenly with one catlike movement both her hands clawed instinctively for my eyes and she almost reached them too.*

Second, this cramped space forces the doctor and the girl into a close physical struggle. Ultimately, their physical struggle is intensified by the cramped space, making the setting crucial to the story's themes of power, control, and violence.

2.3 Contrast

There are strong contrasts in this story, which can be reflected in the descriptions of job roles and appearance.

The first contrast is by the fact that the doctor is a professional, someone who is supposed to be in control of his emotions and actions. However, in this story, he loses control and becomes violent towards the child. The doctor's actions are justified by his desire to help the child, but in reality, his actions only cause her more harm.

The second contrast came from the descriptions of girl.

The original

..... The child was fairly eating me up with her cold, steady eyes, and no expression to her face whatever. She did not move and seemed, inwardly, quiet; an unusually attractive little thing, and as strong as a heifer in appearance. But her face was flushed, she was breathing rapidly, and I realized that she had a high fever. She had magnificent blonde hair, in profusion. One of those picture children often reproduced in advertising leaflets and the photogravure sections of the Sunday papers.....

This is the doctor's first impression of the little girl. From the description, the girl should be an introverted and quiet child, and even like a poster model, she should be well behaved and understanding. However, the girl's lack of cooperation and resistance later on formed a huge contrast with this description.

Additionally, the irony also can be inferred from the contrasts. For example, the mother refers to the doctor as nice and kind, but the girl won't see him like that. In the story, the mother told to the girl that the doctor won't hurt her. But in the end the doctor did hurt the girl.

3 Comment

This article unfolds the story from a first-person perspective with inherent limitations. Consequently, some elements may be unreliable, such as the portrayal of characters, which is based on the subjective judgment of the doctors. The first-person narrator is likely unreliable—whether due to a challenge to authority or a sense of responsibility as a doctor to treat and save lives, they become angry and blinded, unable to calmly describe the patients and their families or empathize with their inner experiences. We only witness the girl's hysterical resistance and the parents' helplessness, without perceiving their fear and vulnerability in the face of illness.

Another unique aspect of the article that makes me feel is the use of the technique, known as free indirect discourse. The writing feature of this article is that the author does not use direct quotes when writing dialogues, but does not make grammatical changes according to the requirements for converting direct quotes into indirect quotes. Instead, the original text of direct quotes is basically retained, with quotation marks removed.